Tajikistan

Demographic and Health Survey

2023

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2023

Agency on Statistics under the
President of the Republic of Tajikistan

Ministry of Health and Social Protection of the Population
of the Republic of Tajikistan

Dushanbe, Republic of Tajikistan

The DHS Program
ICF
Rockville, Maryland, USA

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USAID
FROM THE AMERICAN PEOPLE

TAJSTAT

unicef
for every child

UNFPA

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Additional information about the 2023 TjDHS may be obtained from the Agency on Statistics under the President of the Republic of Tajikistan, 17 Bohktar Street, Dushanbe, Tajikistan; telephone: +992-37-241-14-45; email: stat@tojikiston.com; internet: https://www.stat.tj.

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This report was prepared as a joint effort of staff from the Agency on Statistics under the President of the Republic of Tajikistan and The DHS Program/ICF. The report presents important data and conclusions that will help in the development of effective strategies and programs in the field of health and demography, contributing to the improvement of the quality of life of the country's population. We are confident that the results of the survey will serve as a reliable basis for informed decision making and further development of the Republic of Tajikistan.

Mr. Jamshed Nurmahmadzoda
Director, Agency on Statistics under the President of the Republic of Tajikistan
National Coordinator, 2023 TjDHS

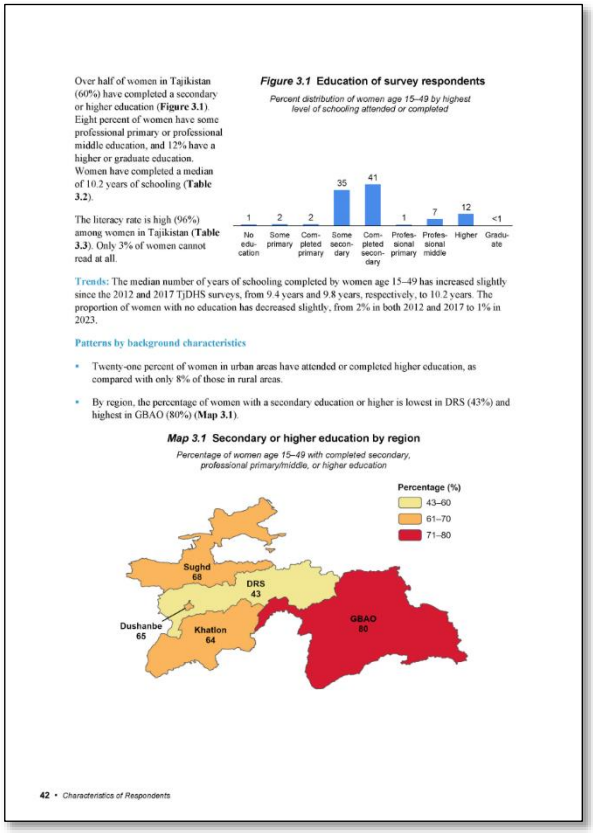
ACRONYMS AND ABBREVIATIONS

AIDS	acquired immunodeficiency syndrome
ANC	antenatal care
ARI	acute respiratory infection
ART	antiretroviral therapy
ARVs	antiretroviral medicines
BCG	bacille Calmette-Guérin
BMI	body mass index
CAPI	computer-assisted personal interviewing
CBR	crude birth rate
COVID	coronavirus disease
C-section	cesarean section
CSPro	Census and Survey Processing System
DHS	Demographic and Health Survey
DPT	diphtheria-pertussis-tetanus
DRS	Districts of Republican Subordination
EA	enumeration area
FAO	Food and Agriculture Organization of the United Nations
FTF	Feed the Future
g/dl	grams per deciliter
GAR	general induced abortion rate
GAR	gross attendance ratio
GBAO	Gorno-Badakhshan Autonomous Oblast
GFR	general fertility rate
GPI	gender parity index
HepB	hepatitis B
Hib	*Haemophilus influenzae* type b
HIV	human immunodeficiency virus
HPV	human papillomavirus
ICD	*International Classification of Diseases*
IPV	inactivated polio vaccine
IT	information technology
IUD	intrauterine device
IYCF	infant and young child feeding
JMP	Joint Monitoring Programme for Water Supply, Sanitation and Hygiene
LAM	lactational amenorrhea method
LPG	liquid petroleum gas
MMR	measles, mumps, and rubella
MoHSPP	Ministry of Health and Social Protection of the Population
MR	measles and rubella
MTCT	mother-to-child transmission
MUAC	mid-upper-arm circumference

NAR	net attendance ratio
NN	neonatal mortality
OPV	oral polio vaccine
ORS	oral rehydration salts
ORT	oral rehydration therapy
PCV	pneumococcal conjugate vaccine
PNC	postnatal care
PNN	postneonatal mortality
PrEP	preexposure prophylaxis
PSU	primary sampling unit
RHF	recommended homemade fluids
RV	rotavirus vaccine
SD	standard deviation
SDG	Sustainable Development Goal
STI	sexually transmitted infection
Tajstat	Agency on Statistics under the President of the Republic of Tajikistan
TAR	total abortion rate
TFR	total fertility rate
TjDHS	Tajikistan Demographic and Health Survey
TPHC	Tajikistan Population and Housing Census
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
VIA	visual inspection with acetic acid
VIP	ventilated improved pit (latrine)
WHO	World Health Organization

READING AND UNDERSTANDING TABLES FROM THE 2023 TAJIKISTAN DEMOGRAPHIC AND HEALTH SURVEY (TjDHS)

The 2023 Tajikistan DHS final report is based on approximately 200 tables of data. For quick reference, they are located at the end of each chapter and can be accessed through links in the pertinent text (electronic version). Additionally, this more reader-friendly version features about 90 figures that clearly highlight trends, subnational patterns, and background characteristics. Large, colorful maps display breakdowns for five administrative regions in Tajikistan. The text has been simplified to highlight key points in bullets and to clearly identify indicator definitions in boxes.



Over half of women in Tajikistan (60%) have completed a secondary or higher education (**Figure 3.1**). Eight percent of women have some professional primary or professional middle education, and 12% have a higher or graduate education. Women have completed a median of 10.2 years of schooling (**Table 3.2**).

The literacy rate is high (96%) among women in Tajikistan (**Table 3.3**). Only 3% of women cannot read at all.

Figure 3.1 **Education of survey respondents**

Percent distribution of women age 15–49 by highest level of schooling attended or completed

Trends: The median number of years of schooling completed by women age 15–49 has increased slightly since the 2012 and 2017 TjDHS surveys, from 9.4 years and 9.8 years, respectively, to 10.2 years. The proportion of women with no education has decreased slightly, from 2% in both 2012 and 2017 to 1% in 2023.

Patterns by background characteristics

- Twenty-one percent of women in urban areas have attended or completed higher education, as compared with only 8% of those in rural areas.
- By region, the percentage of women with a secondary education or higher is lowest in DRS (43%) and highest in GBAO (80%) (**Map 3.1**).

Map 3.1 **Secondary or higher education by region**

Percentage of women age 15–49 with completed secondary, professional primary/middle, or higher education

42 • *Characteristics of Respondents*

While the text and figures featured in each chapter highlight some of the most important findings from the tables, not every finding can be discussed or displayed graphically. For this reason, TjDHS data users should be comfortable reading and interpreting tables.

The following pages provide an introduction to the organization of TjDHS tables and the presentation of background characteristics, along with a brief summary of sampling and understanding denominators. In addition, this section provides some exercises for users as they practice their new skills in interpreting TjDHS tables.

Example 1: Exposure to mass media

A Question Asked of All Survey Respondents

Table 3.4 Exposure to mass media 1

Percentage of women age 15–49 who are exposed to specific media on a weekly basis, according to background characteristics, Tajikistan DHS 2023

Background characteristic 3	Reads a newspaper at least once a week	Watches television at least once a week	Listens to the radio at least once a week	Accesses all three media at least once a week	Accesses none of the three media at least once a week	Number of women 2
Age						
15–19	33.9	72.3	11.1	7.9	24.2	1,710
20–24	18.4	66.6	9.7	6.1	30.5	1,616
25–29	14.3	65.4	8.1	5.0	32.5	1,559
30–34	13.5	63.7	8.1	4.9	33.7	1,545
35–39	14.3	62.8	7.3	4.0	34.6	1,435
40–44	18.0	64.3	8.7	4.6	32.7	1,096
45–49	18.2	68.3	9.6	4.7	29.5	917
Residence						
Urban	26.1	71.3	12.0	8.2	24.4	2,705
Rural	16.3	64.4	7.9	4.4	33.4	7,174
Region						
Dushanbe	35.3	74.2	13.6	9.6	18.8	1,077
GBAO	36.5	88.3	6.7	4.9	8.8	157
Sughd	23.8	71.6	12.7	8.5	26.1	2,780
DRS	19.2	63.7	9.1	3.5	32.8	2,356
Khatlon	9.3	60.3	4.6	3.0	38.3	3,509
FTF districts	9.5	56.1	4.2	3.3	42.9	1,937
Education						
None/primary	7.8	45.3	5.4	3.8	53.8	443
General basic	16.4	64.0	7.2	3.2	33.7	3,271
General secondary	14.1	65.7	7.0	4.2	32.2	4,230
Professional primary/ middle	25.9	72.2	12.9	9.3	24.4	778
Higher	44.1	79.1	20.2 5	14.4	14.7	1,157
Wealth quintile						
Lowest	10.0	54.5	3.2	1.6	43.4	1,842
Second	13.7	63.5	4.7	3.0	34.3	1,967
Middle	17.7	65.2	9.2	5.5	32.5	1,966
Fourth	21.9	70.6	13.1	7.3	27.0	1,964
Highest	30.2	75.9	13.9	9.3	19.5	2,140
Total	19.0 4	66.3	9.0	5.4	31.0	9,879

Step 1: Read the title and subtitle, highlighted in orange in the table above. They tell you the topic and the specific population group being described. In this case, the table is about women age 15–49 and their exposure to different types of media. All eligible female respondents age 15–49 were asked these questions.

Step 2: Scan the column headings—highlighted in green in Example 1. They describe how the information is categorized. In this table, the first three columns of data show different types of media that women access at least once a week. The fourth column shows women who access all three types of media, while the fifth column shows women who do not access any of the three types of media on a weekly basis. The last column lists the number of women age 15–49 interviewed in the survey.

Step 3: Scan the row headings—the first vertical column highlighted in blue in Example 1. These show the different ways the data are divided into categories based on population characteristics. In this case, the table presents women's exposure to media by age, urban-rural residence, region, level of education, and wealth quintile. Most of the tables in the TjDHS report will be divided into these same categories.

Step 4: Look at the row at the bottom of the table highlighted in pink. These percentages represent the totals of all women age 15–49 and their weekly access to different types of media. In this case, 19.0% of women age 15–49 read a newspaper at least once a week, 66.3% watch television at least weekly, and 9.0% listen to the radio on a weekly basis.*

Step 5: Draw two imaginary lines, as shown on the table, to find out what percentage of women with a higher education listen to the radio at least once a week. This shows that 20.2% of women age 15–49 with a higher education listen to the radio at least once a week.

By looking at patterns by background characteristics, we can see how exposure to mass media varies across Tajikistan. Mass media are often used to communicate health messages. Knowing how mass media exposure varies among different groups can help program planners and policymakers determine how to most effectively reach their target populations.

*For the purpose of this document data are presented exactly as they appear in the table, including decimal places. However, the text in the remainder of this report rounds data to the nearest whole percentage point.

Practice: Use the table in Example 1 to answer the following questions:

a) What percentage of women in Tajikistan do not access any of the three media at least once a week?
b) Which age group of women is most likely to watch television at least once a week?
c) Compare women in urban areas with women in rural areas—which group is more likely to listen to the radio on a weekly basis?
d) Compare women within the regions—which region has the highest percentage of women who access all three media at least once a week?
e) What are the lowest and the highest percentages (range) of women who read a newspaper at least once a week by region?
f) Is there a clear pattern in watching television at least once a week by wealth quintile?

Answers:

a) 31.0%.
b) Women age 15–19: 72.3% of women in this age group watch television at least once a week.
c) Women in urban areas: 12.0% of women in urban areas listen to the radio at least once a week, as compared with 7.9% of women in rural areas.
d) Dushanbe: 9.6% of women in Dushanbe access all three media at least once a week.
e) By region, the percentage of women who read a newspaper at least once a week ranges from a low of 9.3% in Khatlon to a high of 36.5% in GBAO.
f) Yes. Weekly exposure to television increases as household wealth increases: 54.5% of women in the lowest wealth quintile watch television at least once a week, compared with 65.2% of women in the middle quintile and 75.9% of women in the highest quintile.

Example 2: Children with diarrhea and care seeking for diarrhea

A Question Asked of a Subgroup of Survey Respondents

Table 10.10 Children with diarrhea and care seeking for diarrhea 1

Percentage of children under age 5 who had diarrhea in the 2 weeks preceding the survey, and among children with diarrhea in the 2 weeks preceding the survey, percentage for whom advice or treatment was sought, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage with diarrhea	Number of children	Among children under age 5 with diarrhea: Percentage for whom advice or treatment was sought[1]	Among children under age 5 with diarrhea: Number of children with diarrhea
Age in months				
<6	14.3	623	57.5	89
6–11	23.7	547	69.4	129
12–23	23.0	1,006	69.5	232
24–35	16.6	958	60.6	159
36–47	12.8	998	65.4	128
48–59	10.3	1,000	53.2	103
Sex				
Male	16.8	2,686	66.8	452
Female	15.9	2,445	60.5	388
Source of drinking water[2]				
Improved	16.4	4,764	64.5	782
Unimproved	30.7	71	*	22
Surface	12.2	296	(46.9)	36
Type of toilet facility[3]				
Improved sanitation facility	16.4	5,047	64.0	827
Unimproved facility	14.9	85	*	13
Residence				
Urban	19.5	1,286	68.7	251
Rural	15.3	3,846	61.9	588
Region				
Dushanbe	24.3	520	77.8	126
GBAO	9.5	71	(31.2)	7
Sughd	19.5	1,381	60.7	269
DRS	13.6	1,215	57.8	166
Khatlon	14.0	1,946	65.2	272
FTF districts	11.5	1,206	74.0	139
Mother's education				
None/primary	12.2	280	(56.9)	34
General basic	16.7	1,532	61.9	257
General secondary	15.4	2,319	65.0	356
Professional primary/middle	19.7	415	65.2	82
Higher	18.9	585	66.4	111
Wealth quintile				
Lowest	13.0	1,031	55.9	134
Second	15.9	1,041	59.1	166
Middle	16.6	1,024	65.4	170
Fourth	15.5	1,048	64.8	163
Highest	21.0	987	71.1	207
Total	16.4	5,132	63.9	839

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.

2

3

4

Step 1: Read the title and subtitle. In this case, the table is about two separate groups of children: all children under age 5 (a) and children under age 5 with diarrhea in the 2 weeks preceding the survey (b).

Step 2: Identify the two panels. First, identify the columns that refer to all children under age 5 (a), and then isolate the columns that refer only to children under age 5 with diarrhea in the 2 weeks preceding the survey (b).

Step 3: Look at the first panel. What percentage of children under age 5 had diarrhea in the 2 weeks preceding the survey? It is 16.4%. Now look at the second panel. How many children under age 5 had diarrhea in the 2 weeks before the survey? It's 839, or 16.4% of the 5,132 children (with rounding). The second panel is a subset of the first panel.

Step 4: Only 16.4% of children under age 5 had diarrhea in the 2 weeks before the survey. Once these children are further divided into the background characteristic categories, there may be too few cases for the percentages to be reliable.

- What percentage of children with diarrhea in Gorno-Badakhshan Autonomous Oblast (GBAO) were taken for advice or treatment? It's 31.2%. This percentage is in parentheses because there are between 25 and 49 children (unweighted) in this category. Readers should use this number with caution—it may not be reliable. (For more information on weighted and unweighted numbers, see Example 3.)

- What percentage of children with diarrhea living in households with an unimproved source of drinking water were taken for advice or treatment? There is no number in this cell—only an asterisk. This is because fewer than 25 children (unweighted) living in households with an unimproved source of drinking water had advice or treatment sought. Results for this group are not reported. The subgroup is too small, and therefore the data are not reliable.

Note: When parentheses or asterisks are used in a table, the explanation will be noted under the table. If there are no parentheses or asterisks in a table, you can proceed with confidence that enough cases were included in all categories that the data are reliable.

Example 3: Understanding Sampling Weights in TjDHS Tables

A sample is a group of people who have been selected for a survey. In the TjDHS, the sample is designed to represent the national population age 15–49. In addition to national data, most countries want to collect and report data on smaller geographical or administrative areas. However, doing so requires a large enough sample size in each area. For the 2023 TjDHS, the survey sample is representative at the national and regional levels and for urban and rural areas.

Table 3.1 Background characteristics of respondents

Percent distribution of women age 15–49 by selected background characteristics, Tajikistan DHS 2023

Background characteristic	3 Weighted percent	2 Weighted number	1 Unweighted number
Region			
Dushanbe	10.9	1,077	2,006
GBAO	1.6	157	815
Sughd	28.1	2,780	2,117
DRS	23.9	2,356	2,277
Khatlon	35.5	3,509	2,664
Total	100.0	9,879	9,879

To generate statistics that are representative of the country as a whole and the five regions, the number of women surveyed in each region should contribute to the size of the total (national) sample in proportion to size of the region. However, if some regions have small populations, then a sample allocated in proportion to each region's population may not include sufficient women from each region for analysis. To solve this problem, regions with small populations are oversampled. For example, let's say that you have enough money to interview 9,879 women and want to produce results that are representative of Tajikistan as a whole and its regions (as in Table 3.1). However, the total population of Tajikistan is not evenly distributed among the regions: some regions, such as Khatlon, are heavily populated while others, such as GBAO, are not. Thus, GBAO must be oversampled.

A sampling statistician determines how many women should be interviewed in each region in order to get reliable statistics. The **blue column (1)** in the table above shows the actual number of women interviewed in each region. Within the regions, the number of women interviewed ranges from 815 in GBAO to 2,664 in Khatlon. The number of interviews is sufficient to get reliable results in each region.

With this distribution of interviews, some regions are overrepresented and some regions are underrepresented. For example, the population in Khatlon is 35.5% of the population in Tajikistan, while GBAO's population contributes only 1.6% of the country's population. But as the blue column shows, the number of women interviewed in Khatlon accounts for only about 27% of the total sample of women interviewed (2,664/9,879) and the number of women interviewed in GBAO accounts for 8% of women interviewed (815/9,879). This unweighted distribution of women does not accurately represent the population.

In order to get statistics that are representative of Tajikistan, the distribution of the women in the sample needs to be weighted (or mathematically adjusted) such that it resembles the true distribution in the country. Women from a small region, like GBAO, should contribute only a small amount to the national total. Women from a large region, like Khatlon, should contribute much more. Therefore, DHS statisticians mathematically calculate a "weight" that is used to adjust the number of women from each region so that each region's contribution to the total is proportional to the actual population of the region. The numbers in the **purple column (2)** represent the "weighted" values. The weighted values can be smaller or larger than the unweighted values at the regional level. The total national sample size of 9,879 women has not changed after weighting, but the distribution of the women in the regions has been changed to represent their contribution to the total population size.

How do statisticians weight each category? They take into account the probability that a woman was selected in the sample. If you were to compare the **green column (3)** to the actual population distribution of Tajikistan, you would see that women in each region are contributing to the total sample with the same weight that they contribute to the population of the country. The weighted number of women in the survey

now accurately represents the proportion of women who live in Khatlon and the proportion of women who live in GBAO.

With sampling and weighting, it is possible to interview enough women to provide reliable statistics at national and regional levels. In general, only the weighted numbers are shown in each of the TjDHS tables, so don’t be surprised if these numbers seem low: they may actually represent a larger number of women interviewed.

SUSTAINABLE DEVELOPMENT GOAL INDICATORS

Sustainable Development Goal Indicators—Tajikistan DHS 2023

Indicator	Residence		Total	DHS table number
	Urban	Rural		
1. No poverty				
1.4.1 Proportion of population living in households with access to basic services				
a) Access to basic drinking water services	98.7	90.9	92.9	15.2
b) Access to basic sanitation services	96.1	97.6	97.2	15.7
c) Access to basic hygiene services	90.6	74.9	79.0	15.11
d) Access to electricity[1]	99.4	98.1	98.5	2.3
e) Access to clean fuels and technologies[2]	62.6	4.4	19.5	2.4
	Sex			
	Male	Female	Total	
2. Zero hunger				
2.2.1 Prevalence of stunting among children under 5 years of age	15.1	12.0	13.7	11.1
2.2.2 Prevalence of malnutrition among children under 5 years of age	10.9	11.0	10.9	11.1
a) Prevalence of wasting among children under 5 years of age	6.9	5.8	6.4	11.1
b) Prevalence of overweight among children under 5 years of age	3.9	5.2	4.6	11.1
2.2.3 Prevalence of anemia in women age 15 to 49 years, by pregnancy status				
a) Prevalence of anemia in non-pregnant women age 15 to 49 years	na	36.1	na	11.17
b) Prevalence of anemia in pregnant women age 15 to 49 years	na	29.8	na	11.17
3. Good health and well-being				
3.1.2 Proportion of births attended by skilled health personnel	na	na	97.6	9.10
3.2.1 Under-5 mortality rate[3]	23.0	25.0	24.0	8.2
3.2.2 Neonatal mortality rate[3]	8.0	11.0	10.0	8.2
3.7.1 Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods	na	54.0	na	7.13.2
3.7.2 Adolescent birth rates per 1,000 women				
a) Girls aged 10–14 years[4]	na	0.0	na	5.1
b) Women aged 15–19 years[5]	na	47.0	na	5.1
3.a.1 Age-standardized prevalence of current tobacco use among persons aged 15 years and older[6]	na	2.2	na	3.11
3.b.1 Proportion of the target population covered by all vaccines included in their national program				
a) Coverage of DPT containing vaccine (3rd dose)[7]	80.1	81.9	81.0	10.4
b) Coverage of measles containing vaccine (2nd dose)[8]	84.1	75.1	80.0	10.4
c) Coverage of pneumococcal conjugate vaccine (last dose in schedule)[9]	27.0	26.0	26.6	10.4
4. Quality education				
4.2.2 Participation rate in organized learning (one year before the official primary entry age)	23.8	21.1	22.5	2.14
5. Gender equality				
5.2.1 Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months[10,11]	na	13.9	na	13.9
a) Physical violence	na	10.9	na	13.9
b) Sexual violence	na	1.3	na	13.9
c) Psychological violence	na	6.0	na	13.9
5.2.2 Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months[12]	na	0.0	na	13.6
5.3.1 Proportion of women aged 20–24 years who were married or in a union before age 15 and before age 18				
a) Before age 15	na	0.4	na	4.4
b) Before age 18	na	8.8	na	4.4
5.6.1 Proportion of women aged 15-49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care[13]	na	32.5	na	14.11
5.b.1 Proportion of individuals who own a mobile telephone[14]	na	64.9	na	14.5
	Residence			
	Urban	Rural	Total	
6. Clean water and sanitation				
6.1.1 Proportion of population using safely managed drinking water services				
a) Proportion with basic drinking water services	98.7	90.9	92.9	15.2
b) Proportion with water available when needed	51.5	51.6	51.6	15.4
6.2.1 Proportion of population using (a) safely managed sanitation services and (b) hand-washing facility with soap and water				
a) Proportion using basic sanitation service	96.1	97.6	97.2	15.7
b) Proportion in which excreta are safely disposed of in situ or treated off site	99.1	96.9	97.5	15.9
c) Proportion using a hand-washing facility with soap and water	90.6	74.9	79.0	15.11
d) Proportion using open defecation	0.0	0.0	0.0	15.6
7. Affordable clean energy				
7.1.1 Proportion of population with access to electricity[1]	99.4	98.1	98.5	2.3
7.1.2 Proportion of population with primary reliance on clean fuels and technology[2]	62.6	4.4	19.5	2.4

	Sex			
	Male	Female	Total	
8. Decent work and economic growth				
8.10.2 Proportion of adults (15 years and older) with an account at a bank or other financial institution or with a mobile-money-service provider[14]	na	15.1	na	14.5
16. Peace, justice, and strong institutions				
16.2.1 Percentage of children aged 1–17 years who experienced any physical punishment and/or psychological aggression by caregivers in the past month[15]	58.4	54.0	56.3	2.15
16.2.3 Proportion of young women and men aged 18–29 years who experienced sexual violence by age 18[16]	na	0.1	na	DV7
16.9.1 Proportion of children under 5 years of age whose births have been registered with a civil authority	96.4	97.2	96.8	2.10
17. Partnerships for the goals				
17.8.1 Proportion of individuals using the internet[17]	na	44.4	na	3.5

na = not applicable
[1] Persons living in households that report the primary source of lighting is electricity
[2] Persons living in households that report no cooking, no space heating, or no lighting are not excluded from the numerator.
[3] Expressed in terms of deaths per 1,000 live births for the 5-year period preceding the survey
[4] Equivalent to the age-specific fertility rate for girls age 10–14 for the 3-year period preceding the survey, expressed in terms of births per 1,000 girls age 10–14
[5] Equivalent to the age-specific fertility rate for women age 15–19 for the 3-year period preceding the survey, expressed in terms of births per 1,000 women age 15–19
[6] Data are not age-standardized and are available for women age 15–49 only.
[7] The percentage of children age 12–23 months who received three doses of DPT-HepB-Hib vaccine
[8] The percentage of children age 24–35 months who received one dose of MR or MMR-1
[9] The percentage of children age 24–35 months who received three doses of pneumococcal conjugate vaccine
[10] Data are available for women age 15–49 who have ever been in union only.
[11] In the DHS, psychological violence is termed emotional violence.
[12] Data are available for women age 15–49 only.
[13] Data are available for currently married women only.
[14] Data are available for women age 15–49 only.
[15] Data are available for children age 1–14 only.
[16] Data are available for women only.
[17] Data are available for women age 15–49 who have used the internet in the last 12 months.

TAJIKISTAN


KAZAKHSTAN
UZBEKISTAN
KYRGYZSTAN
CHINA
Sughd
DRS
Dushanbe
Khatlon
GBAO
AFGHANISTAN
PAKISTAN
N
0
75
150
300
Kilometers

INTRODUCTION AND SURVEY METHODOLOGY 1

The 2023 Tajikistan Demographic and Health Survey (TjDHS) is the third Demographic and Health Survey conducted in Tajikistan. The 2023 TjDHS was implemented by the Agency on Statistics under the President of the Republic of Tajikistan (Tajstat) in coordination with the Ministry of Health and Social Protection of Population (MoHSPP). Data collection took place from August 10 to November 28, 2023. ICF provided technical assistance through The Demographic and Health Surveys Program (DHS), which is funded by the United States Agency for International Development (USAID) and offers financial support and technical assistance for population and health surveys in countries worldwide. Other agencies and organizations that facilitated the successful implementation of the survey through technical or financial support were the United Nations Children's Fund (UNICEF) and the United Nations Population Fund (UNFPA).

1.1 SURVEY OBJECTIVES

The primary objective of the 2023 TjDHS is to provide up-to-date estimates of basic demographic and health indicators. Specifically, the survey collected information on fertility and contraceptive use, maternal and child health and nutrition, childhood mortality, domestic violence against women, child discipline, awareness and behavior regarding HIV/AIDS and other sexually transmitted infections (STIs), and other health-related issues such as smoking.

The information collected through the 2023 TjDHS is intended to assist policymakers and program managers in designing and evaluating programs and strategies for improving the health of the country's population. The survey also provides indicators relevant to the Sustainable Development Goals (SDGs) for Tajikistan.

1.2 SAMPLE DESIGN

The sampling frame used for the 2023 TjDHS is the 2020 Tajikistan Population and Housing Census (TPHC), conducted by Tajstat. Administratively, Tajikistan is divided into five administrative regions: Dushanbe City, Districts of Republican Subordination (DRS), Sughd, Khatlon, and Gorno-Badakhshan Autonomous Oblast (GBAO). Each region is subdivided into urban and rural areas. The country is divided into 68 cities and rayons (districts) distributed over the country's regions. Each city or rayon (district) is further divided into census divisions, which are subdivided into instruction areas. Each instruction area is divided into enumeration areas (EAs).

The sampling frame for the 2023 TjDHS is a list of EAs covering all urban and rural areas of the country, with the primary sampling units (PSUs) being EAs in urban and rural areas. An EA is a geographical area, usually a city block, consisting of an adequate number of households for efficient counting; each EA serves as a counting unit for the population census. The 2020 TPHC did not use EA maps. Urban EAs can be identified through a list of structures/households in the EA together with a description file. In rural areas, an EA is a natural village if small or part of a large village. Rural EAs can be identified with help from the village administration.

The sample was designed to yield representative results for the country as a whole, urban and rural areas separately, and each of the five administrative regions. In addition, as in the previous TjDHS survey, the sample was designed to allow certain indicators to be presented for the 12 districts in the Khatlon region covered under the Feed the Future program (FTF); these 12 districts were combined as a single FTF domain. The sampling frame excluded institutional populations such as persons in hotels, barracks, and prisons.

The 2023 TjDHS followed a stratified two-stage sample design. The first stage involved selecting sample points (clusters) consisting of EAs. EAs were drawn with a probability proportional to their size within each sampling stratum. A total of 370 clusters were selected, 166 in urban areas and 204 in rural areas.

The second stage involved systematic sampling of households. A household listing operation was undertaken in all of the selected clusters, and a fixed number of 22 households per cluster were selected through an equal probability systematic selection process, for a total sample size of approximately 8,140 households.

All women age 15–49 who were either permanent residents of the selected households or visitors who stayed in the households the night before the survey were eligible to be interviewed. Hemoglobin testing was performed in each household among eligible women age 15–49 who consented to being tested. With the parent's or guardian's consent, children age 6–59 months were also tested for anemia in each household. Height and weight information was collected from eligible women age 15–49 and children age 0–59 months in all households. Also, one eligible woman in each household was randomly selected to be asked additional questions about domestic violence.

1.3 QUESTIONNAIRES

Three questionnaires were used in the 2023 TjDHS: the Household Questionnaire, the Woman's Questionnaire, and the Biomarker Questionnaire. The questionnaires, based on The DHS Program's model questionnaires, were adapted to reflect the population and health issues relevant to Tajikistan. Suggestions were solicited from various stakeholders representing government ministries and agencies, nongovernmental organizations, and international donors. After all questionnaires were finalized in English, they were translated into Russian and Tajik.

The Household Questionnaire was used to list all members of and visitors to selected households. Basic demographic information was collected on each person listed, including age, sex, marital status, education, and relationship to the head of the household. For children under age 18, parents' survival status was determined. The data on age and sex were used to identify women who were eligible for individual interviews. The Household Questionnaire also collected information on child discipline for one randomly selected child age 1–14 per household as well as information on the characteristics of the household's dwelling unit, such as source of water; type of toilet facilities; materials used for flooring, external walls, and roofing; labor migration, household remittances and ownership of various durable goods.

The Woman's Questionnaire was used to collect information from all eligible women age 15–49. These women were asked questions on the following topics:

- Background characteristics: age, date of birth, duration of residency, previous residency, literacy, education, access to media, mobile and smart mobile phone ownership, and internet use
- Reproduction: number of children ever born, pregnancy history, reasons for abortion, child mortality, current pregnancy, and age at first menstrual period
- Contraception: knowledge and use of contraception, sources of contraceptive methods, and family planning
- Pregnancy and postnatal care, child immunization, and health and nutrition: prenatal, delivery, and postnatal care; breastfeeding and complementary feeding practices; vaccination coverage; prevalence of and care seeking for diarrhea, acute respiratory infection (ARI), and fever; use of oral rehydration therapy; infant and young child feeding (IYCF) practices; and dietary diversity
- Marriage and sexual activity: marital status, age at first marriage, age at first sexual intercourse, recent sexual activity, number and types of sexual partners, co-wives, and use of condoms

- Fertility preferences: desire for more children, ideal number of children, gender preferences, intention to use family planning and who is making this decision, pressure to become pregnant, and exposure to media messages about family planning
- Husbands' background characteristics and women's work: husband's age, level of education, and occupation and respondent's occupation, sources of earnings, participation in decision making, house ownership, and attitude towards wife beating
- HIV/AIDS: knowledge of AIDS, knowledge of routes of HIV transmission, behavior to avoid STIs and AIDS, stigma, and history of HIV testing
- Other health issues: alcohol consumption and smoking, breast exams, cervical cancer tests, problems in accessing health care, and noncommunicable diseases
- Domestic violence: information on the prevalence and incidence of physical, sexual, and emotional violence
- Calendar: a 5-year calendar of reproductive events (births, pregnancies, pregnancy terminations, pregnancy duration, and contraceptive use)

Because home-based vaccination records are rare in Tajikistan, the TjDHS also collected child vaccination data from health facilities following a protocol identical to that used in the 2012 and 2017 TjDHS surveys. Specifically, vaccination data were collected from mothers, either by viewing the home-based record or through mothers' recall, and from facility-based health vaccination cards. For the latter, consenting mothers provided the address of the facility and the name of the provider; the team supervisor then visited the health facility and copied the records of each eligible child.

The Biomarker Questionnaire was used to record the results of anthropometry measurements and hemoglobin testing.

In addition, a self-administered Fieldworker Questionnaire collected information about the survey's fieldworkers: team supervisors, interviewers, and health investigators.

The 2023 TjDHS survey methodology and instruments were approved by the ICF Institutional Review Board. By law, Tajstat is mandated to conduct population-based surveys in Tajikistan, and local institutional review board approval is not required for the TjDHS. The Government of Tajikistan assigned Tajstat to implement the 2023 TjDHS in collaboration with the Ministry of Health and Social Protection of Population; the government also issued the edict for the creation of the 2023 TjDHS Interagency Steering Committee, which oversaw the approved survey implementation plan and protocols.

1.4 Anthropometry and Anemia Testing

In addition to the data collected through interviews, the 2023 TjDHS incorporated two biomarkers: anthropometry and anemia testing. Data related to coverage of the anthropometric measures and the results of the anemia testing were recorded in the Biomarker Questionnaire. The protocol for anemia testing was reviewed and approved by the MoHSPP and the ICF Institutional Review Board.

Anthropometry. Weight measurements were taken using SECA scales with a digital display (model number SECA 874). Height and length were measured with a ShorrBoard® measuring board. Children younger than age 24 months were measured lying down (recumbent length), while older children and adults were measured standing (height).

To assess the precision of measurements, 10% of children per cluster were randomly selected to be measured a second time. The DHS Program defines a difference of less than 1 centimeter between the two height measurements as an acceptable level of precision. In addition to remeasurement of randomly

selected children, remeasurement of flagged cases was performed to ensure accurate reporting of height. Children with a *z* score of less than −3 or more than 3 for height-for-age, weight-for-height, or weight-for-age were flagged and measured a second time. Once the height measurement was confirmed, parents or guardians of children with a *z* score of −3 or less for weight-for-height were provided with a referral for severe acute malnutrition and instructed to take the child to a health facility for follow-up care.

Anemia. Blood specimens for anemia testing were collected from women age 15–49 who consented to be tested. Blood specimens were also collected from children age 6–59 months whose parents or guardians had given consent to the testing. Capillary blood was drawn from a finger prick (or a heel prick in the case of children age 6–11 months) performed using a high-flow lancet (BD 366594). The third drop of capillary blood was collected in a HemoCue® 201+ microcuvette. Hemoglobin analysis was carried out on-site using a battery-operated portable HemoCue 201+ device. Results were provided verbally and in writing to those being tested. Parents or guardians of children with a hemoglobin level below 8 g/dl were provided with a referral and instructed to take the child to a health facility for follow-up care. Likewise, adults were referred for follow-up care if their hemoglobin levels were below 8 g/dl.

1.5 Pretest and CAPI Training of Trainers

Eleven women participated in training to pretest the TjDHS survey questionnaires over a 4-week period from May 10 through June 3, 2023. Classroom training, which took place from May 10 through May 21, focused on questionnaire content. Also, trainees visited a local health facility to practice recording vaccination dates from children's health cards and other vaccination forms kept at the facility. From May 22 through May 29, participants were instructed on using the computer-assisted personal interviewing (CAPI) system, an electronic data capture system programmed on tablet computers that the participants used to implement the survey. Staff from The DHS Program and an ICF consultant based in Dushanbe led the training in Russian and Tajik with support from Tajstat personnel. In addition, senior subject specialists from the MoHSPP attended the sessions to provide technical background on topics such as family planning and reproductive health, childhood immunization, and child health and nutrition. Abduvali Nabizoda from Tajstat delivered a lecture in Tajik on gender-based violence in Tajikistan.

The biomarker classroom portion of the training commenced on May 19 and continued through May 29, 2023. The biomarker training was attended by six participants, all of whom were medically trained specialists. The training, led by staff from The DHS Program in English with consecutive translation to Russian or Tajik, included classroom instruction focusing on anthropometry measurements, anemia testing, and recording of results in the paper Biomarker Questionnaire. The training was divided into three parts: classroom training on anthropometry and anemia, in-class standardization of tests and practice sessions, and fieldwork with interviewers. Classroom training of health investigators (a mixture of women and men) was conducted at the same venue as the training of interviewers, which allowed for close interactions between health investigators and interviewers.

The pretest fieldwork was conducted from May 30 through June 2, 2023. Interviewers and health investigators were divided into three teams and worked in the Districts of Republican Subordination, Rudaki district, and Chorgulteppa (in both urban and rural areas). A total of 72 women's interviews and 48 household interviews were conducted, and 36 Biomarker Questionnaires were completed. Most interviews were conducted in Tajik. Forty-four women were measured and tested for anemia; among children, 30 were measured and 25 were tested for anemia. At the end of each day, both during and after the pretest fieldwork, debriefing sessions were held and questionnaires were modified based on lessons drawn from the exercise.

The CAPI training of trainers started on June 5 and lasted for 5 days. Six information technology (IT) experts from Tajstat were assigned to attend the training of trainers, most of whom had previously taken part in the pretest training. The goals of the training were to provide CAPI system technical content and

training materials and strengthen participants' training facilitation skills so that they could play a leadership role in the main training.

1.6 Training of Field Staff

Eighty-three people (all women) participated in the 4-week main training course on interviewing, which consisted of lectures, demonstrations, and practice interviews. The training for TjDHS health investigators was attended by 35 trainees (24 women and 11 men), all of whom had some form of clinical training or medical research background.

The training of trainers for interviewers was conducted on July 3–5, 2023, prior to the main training. The purpose of the training of trainers was to prepare master trainers for the main training course. Seven trainers (all women) were selected, based on performance, from the 11 participants in the pretest. The trainers were recruited through the Tajstat regional offices; they later served as team supervisors, quality control field monitors, or regional coordinators during the 2023 TjDHS data collection.

The main fieldwork training, conducted from July 6 through August 4, 2023, was led by the seven master trainers and backstopped by staff from The DHS Program. The interviewer training was conducted in Tajik, and sessions included discussions of concepts, procedures, and survey methodology. Participants were guided through the questionnaires. In addition, senior subject specialists from the MoHSPP attended the sessions to provide background on topics including family planning, reproductive health, childhood immunization, and child health and nutrition. As with the pretest training, Abduvali Nabizoda from Tajstat delivered a lecture on gender-based violence in Tajikistan. The training included presentations, lectures, hands-on exercises, mock interviews, role plays, group work, tutorial videos, and quizzes. In-class exercises included probing for age, checking age consistency, copying information from the vaccination cards, completing the reproductive calendar, and practicing interviews. Also, participants received training on how to test household salt for iodine.

Once training on use of paper questionnaires concluded, Tajstat staff and an ICF consultant based in Dushanbe conducted a weeklong training course on computer-assisted personal interviewing in Tajik with backstopping by data processing staff from The DHS Program. The training, which took place from July 19 through July 28, 2023, was facilitated by five IT specialists who had attended the CAPI training of trainers. Participants learned about features of the data collection system, different scenarios and technical issues typically encountered during fieldwork, and ways to resolve issues.

The biomarker classroom portion of the training commenced on July 19 and continued through July 28, 2023. This training was led by staff from The DHS Program with assistance from the two biomarker master trainers. The biomarker training was also supported by three additional trainers who attended the pretest and demonstrated proficiency in all of the biomarker procedures. Training materials were presented in Russian with additional explanation in Tajik when necessary to aid the trainees in comprehension.

The biomarker training was divided into four parts: (1) classroom training on the 2023 TjDHS process, eligibility criteria, informed consent, and proper recording of results in the paper Biomarker Questionnaire; (2) classroom and practical training in the DHS techniques for anthropometry, including standardization exercises; (3) classroom and practical training in capillary blood collection and anemia testing; and (4) fieldwork practice with interviewers. Classroom training of the health investigators was conducted at the same venue as the interviewer training, allowing for close interactions between the health investigators and interviewers.

To give the biomarker training participants hands-on experience prior to field practice, the health investigators practiced skills with each other and with Tajstat staff, staff from The DHS Program, and interviewers. Six mothers with children visited at the start of anthropometry training to allow live demonstrations of the measurement protocols with adults and children. Following these demonstrations and further classroom training in anthropometry techniques, anthropometry standardization exercises were

conducted at the training venue. Tajstat arranged for a total of approximately 110 children to be present at the training over the 5 days of practice and standardization.

During anthropometry sessions, health investigators were trained to measure the height and weight of children and adults. Inter-observer and intra-observer variations of the same measurements as well as the concepts of accuracy and precision were explained to the participants. Anthropometry training concluded with standardization exercises in which trainees were required to demonstrate proficiency in child height or length measurement. Restandardization exercises were offered for health investigators who did not meet the standardization criteria on the first attempt. Only those health investigators whose standardization scores demonstrated proficiency in child anthropometry were permitted to measure children during field data collection.

In addition, a special session on anthropometry was held with all team supervisors. On the final day of the classroom training sessions, staff from The DHS Program met with team supervisors to explain the use of checklists provided to aid them in overseeing the health investigators' work. Supervisors were also provided a summary of the remeasurement procedures in which the supervisor and the health investigators revisited approximately two to three children per cluster together for quality control checks of anthropometry measurements.

To improve team coordination, a joint classroom session involving the health investigators was also organized with the interviewers at Tajstat before the beginning of field practice. All training participants and Tajstat staff were given an overview of biomarker collection in the 2023 TjDHS. This overview described eligibility for biomarker collection, use of the Household and Biomarker Questionnaires to record data, appropriate procedures for obtaining informed consent, and supply packing and transportation logistics. Collecting data of high quality was emphasized. Also, participants received a brief tutorial on how to assist in taking anthropometric measurements.

Throughout the training, participants were evaluated via in-class exercises, quizzes, and observations made during field practice. At the end of the training, teams were formed by selecting supervisors, interviewers, and health investigators. The supervisors received additional training in data quality control procedures, fieldwork coordination, and management. They also received training on copying immunization records from MoHSPP form 63 and children's health cards directly to tablet computers.

Supervisors, interviewers, and health investigators were divided into 18 teams for field practice, with each team consisting of one supervisor, four interviewers, and two health investigators. Field practice took place in the Tesgar village of the DRS region in 18 clusters with prelisted residential households in nonsampled areas, giving the teams an opportunity to implement the survey in a real-world situation. Field practice took place over 3 days (July 29–31, 2023), and each interviewer visited a minimum of two households per day. During the field practice, a total of 269 women's interviews and 169 household interviews were completed. To allow for practice of biomarker collection, approximately 238 women were measured and 201 were tested for anemia. Among children, 174 were measured and 113 were tested for anemia.

1.7 FIELDWORK

Data collection was carried out by 15 field teams, each consisting of one female team supervisor, four female interviewers, and two health investigators (at least one of whom was female and at least one of whom was standardized for anthropometry). Fieldwork started in most regions on August 10, 2023, and ended on November 28, 2023.

Fieldwork monitoring was an integral part of the 2023 TjDHS. Senior TjDHS technical staff from Tajstat, along with three DHS quality control field monitors, three biomarker quality control field monitors, five field coordinators, and four CAPI coordinators, visited teams regularly to review work and monitor data quality. Also, representatives from The DHS Program visited teams to monitor data collection and to observe anemia testing and height and weight measurements of women and children under age 5. During

field visits, staff provided teams (supervisor, interviewers, and health investigators) with critical feedback to improve their performance. In addition, they used TjDHS field-check tables based on data from completed clusters to illustrate problems specific to each team visited. Field-check tables based on the completed questionnaires entered during fieldwork were generated in real time as fieldwork progressed and were available online via the SyncCloud platform. The tables were reviewed and discussed with the Tajstat staff on an ongoing basis to alert field teams to data quality issues found during the survey fieldwork and to ensure that quality data collection was maintained throughout the fieldwork.

1.8 DATA PROCESSING

The 2023 TjDHS used a Windows-based system. All electronic data files were transferred via a secure SyncCloud server to the Tajstat central office in Dushanbe, where they were stored on a password-protected computer. The data processing operation included secondary editing, which required resolution of computer-identified inconsistencies and coding of open-ended questions. The data were processed by five IT specialists/secondary editors who took part in the main fieldwork training, the training of trainers, and a refresher secondary editing training session; they were supervised remotely by staff from The DHS Program. Data editing was accomplished using CSPro software. Secondary editing and data processing were initiated in December 2023 and completed in February 2024.

1.9 RESPONSE RATES

Table 1.1 presents the response rates for the 2023 TjDHS. A total of 8,140 households were selected for the TjDHS sample, of which 8,070 were found to be occupied. Of the occupied households, 8,035 were successfully interviewed, yielding a response rate of over 99%. In the interviewed households, 9,930 women age 15–49 were identified as eligible for individual interviews. Interviews were completed with 9,879 women, yielding a response rate of over 99%.

Table 1.1 Results of the household and individual interviews

Number of households, number of interviews, and response rates, according to residence (unweighted), Tajikistan DHS 2023

	Residence		
Result	Urban	Rural	Total
Household interviews			
Households selected	3,652	4,488	8,140
Households occupied	3,620	4,450	8,070
Households interviewed	3,597	4,438	8,035
Household response rate[1]	99.4	99.7	99.6
Interviews with women age 15–49			
Number of eligible women	4,245	5,685	9,930
Number of eligible women interviewed	4,218	5,661	9,879
Eligible women response rate[2]	99.4	99.6	99.5

[1] Households interviewed/households occupied
[2] Respondents interviewed/eligible respondents

HOUSING CHARACTERISTICS AND HOUSEHOLD POPULATION

2

Key Findings

- ***Electricity:*** Nearly all households (more than 99%) have access to electricity.
- ***Clean fuels and technology:*** 20% of the population has access to clean fuels for cooking, heating, and lighting.
- ***Indoor smoke:*** 12% of households use solid materials for cooking, and 6% are exposed to smoking inside the home on a daily basis.
- ***Household population and composition:*** 39% of the population is under age 15. The average household size is 5.6 persons. Twenty percent of households are headed by women.
- ***Birth registration:*** 97% of children under age 5 have had their births registered with the civil authorities.
- ***Educational attainment:*** 67% of women and 56% of men have attained some secondary or completed secondary education. Sixteen percent of men and 8% of women have a higher or graduate education.
- ***Child discipline:*** 56% of children age 1–14 experienced at least one form of violent discipline in the month before the survey.

Information on the socioeconomic characteristics of the household population in the 2023 TjDHS provides a context for interpreting demographic and health indicators and furnishes an approximate indication of the representativeness of the survey. The information also sheds light on the living conditions of the population.

This chapter presents information on housing characteristics and household possessions, use of clean fuels and technologies (related to cooking, heating, and lighting), wealth, household population and composition, labor migration, household remittances, children's living arrangements and orphanhood, birth registration, child discipline, educational attainment, and school attendance.

2.1 HOUSING CHARACTERISTICS

The 2023 TjDHS collected information on access to electricity, flooring materials, and the number of rooms used for sleeping (**Table 2.1**). Nearly all households (more than 99%) in both urban and rural areas have access to electricity. Half of household flooring materials are constructed from wood planks (28%) and parquet or polished wood (22%), with this proportion nearly twice as high in urban areas (69%) as in rural areas (42%). More rural than urban households use cement flooring (26% versus 9%). The vast majority of households use two or more rooms for sleeping (89%), with 48% of urban households using two rooms for sleeping and 49% of rural households using three or more rooms for sleeping. Eight percent of urban households and 5% of rural households are exposed to smoking inside the home on a daily basis; 87% of households are not exposed to smoking inside the home.

2.1.1 Use of Clean Fuels and Technologies

Primary reliance on clean fuels and technologies

The percentage of the population using clean fuels and technologies for cooking, heating, and lighting, where each component is defined as follows:

- **Clean cooking fuels and technologies**

  Includes stoves/cookers using electricity and liquefied petroleum gas (LPG)/natural gas/biogas
- **Clean heating fuels and technologies**

  Includes central heating, thermo-electro-central, electricity, and LPG/natural gas/biogas
- **Clean lighting fuels and technologies**

  Includes electricity, solar lanterns, and battery-powered or rechargeable flashlights/torches/lanterns

Sample: Households and de jure population

2.1.2 Cooking

In three quarters of households (75%), cooking takes place outside the home; however, this proportion is nearly twice as high in rural households (88%) as in urban households (45%) (**Table 2.2**). In comparison, 54% of urban households and only 8% of rural households cook inside the home.

Overall, 88% of households use clean fuels and technologies for cooking (98% of urban households and 84% of rural households). Eighty-six percent of the de jure population lives in households that use clean fuels and technologies for cooking, including 97% of the urban de jure population and 82% of the rural population. The main technologies used are electric stoves (50% of households) and LPG/natural gas stoves (34%). Twelve percent of households use solid fuels for cooking, with this proportion being much high in rural households (16%) than in urban households (2%). The most commonly used solid fuel is wood (8%), followed by animal dung (3%) (**Table 2.2**).

2.1.3 Heating and Lighting

The majority of de jure residents (76%) use a traditional cookstove for heating, while 12% use a manufactured space heater and 5% use central heating (**Table 2.3**). However, there is a great deal of variation between the urban and rural populations. Ninety-one percent of the de jure rural population uses a traditional cookstove for heating, as compared with only 33% of the urban population; conversely, 38% of the de jure urban population uses a manufactured space heater for heating, compared with only 3% of the rural population.

Overall, only 20% of the de jure population uses clean fuels and technologies for heating (63% of the urban population and 5% of the rural population), with the most commonly used clean fuel being electricity (14%). Forty-three percent of de jure residents use coal/lignite for heating fuel, while 25% use wood. Higher proportions of rural than urban residents use these fuels. The vast majority of the population uses clean fuels for lighting (more than 99%), with 99% using electricity (**Table 2.3**).

2.1.4 Primary Reliance on Clean Fuels and Technologies

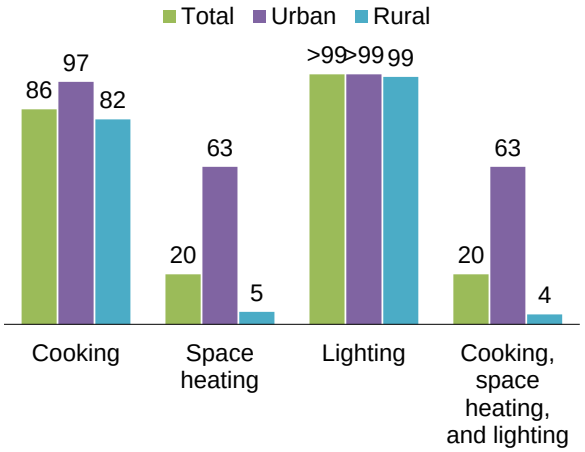
Overall, 20% of the de jure population relies primarily on clean fuels and technologies for cooking, space heating, and lighting. Eighty-six percent of the population relies on clean fuels for cooking, 20% for heating, and more than 99% for lighting (**Table 2.4**).

Patterns by background characteristics

- Primary reliance on clean fuels and technologies for cooking, space heating, and lighting is much more common in urban areas (63%) than in rural areas (4%) (**Figure 2.1**).
- The percentage of the de jure population that relies on clean fuels and technologies for cooking, space heating, and lighting is over five times higher in Dushanbe (88%) than in Sughd, the region with the next highest percentage (17%).
- Primary reliance on clean fuels and technologies for cooking, space heating, and lighting is highest among the population in the highest wealth quintile (85%) and lowest among the population in the lowest wealth quintile (1%).

Figure 2.1 **Primary reliance on clean fuels and technologies by residence**

Percentage of de jure population relying on clean fuels and technologies for:



2.2 HOUSEHOLD WEALTH

2.2.1 Household Durable Goods

The survey also collected information on household effects, means of transportation, and ownership of agricultural land and farm animals (**Table 2.5**). Televisions and mobile phones are the most common information and communication devices in Tajikistan. Almost all households have mobile phones (96%) and a television (98%). Almost one in five (17%) households own a computer (30% of urban households and 11% of rural households).

Bicycles (44%) and cars/trucks (41%) are the most common means of transportation owned by households, with bicycles being the most prevalent form of transportation in rural households (50%) and cars/trucks being the most prevalent form in urban households (36%). However, rural households are more likely than urban households to own both a bicycle (50% versus 31%) and a car or truck (43% versus 36%). Seventeen percent of households own an animal-drawn cart, and 5% own a motorcycle or scooter.

Use of agricultural land and ownership of farm animals vary greatly between urban and rural areas: 54% of rural households and 10% of urban households use agricultural land, and 61% of rural households and 12% of urban households own farm animals (**Table 2.5**).

2.2.2 Wealth Index

Wealth index

Households are given scores based on the number and kinds of consumer goods they own, ranging from a television to a bicycle or car, and housing characteristics such as source of drinking water, toilet facilities, and flooring materials. These scores are derived using principal component analysis. National wealth quintiles are compiled by assigning the household score to each usual (de jure) household member, ranking each person in the household population by her or his score, and then dividing the distribution into five equal categories, each comprising 20% of the population.

Sample: Households

Table 2.6 shows the distribution of the de jure household population by wealth quintile according to residence and region. Wealth is clearly concentrated in urban areas. Sixty-five percent of the urban population falls in the highest wealth quintile. By contrast, 50% of the rural population falls in the two lowest wealth quintiles (**Figure 2.2**). Wealth varies widely by region. Ninety-one percent of the population in Dushanbe falls in the highest wealth quintile, as compared with only 7% of the population in Khatlon. Conversely, 36% of the population in Gorno-Badakhshan Autonomous Oblast (GBAO) falls in the lowest wealth quintile, compared with less than 1% of the population in Dushanbe.

Figure 2.2 **Household wealth by residence**

Percent distribution of de jure population by wealth quintiles

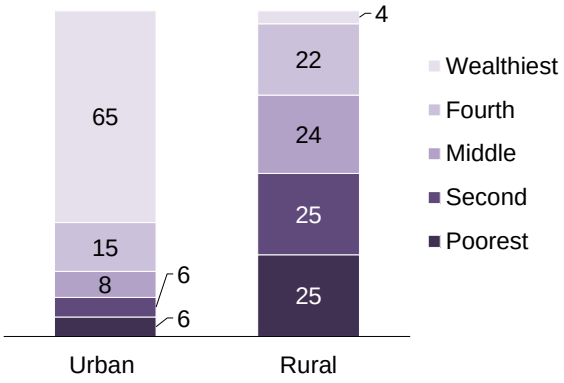


Table 2.6 also includes the Gini coefficient, a measure of the level of concentration of wealth. The Gini coefficient ranges from 0–1, with 0 being an equal wealth distribution and 1 being a totally unequal distribution. The Gini coefficient is 0.32 at the national level, which suggests that wealth is somewhat unevenly distributed across the population. Wealth is distributed more evenly in the rural population than in the urban population (0.19 versus 0.25).

2.3 HOUSEHOLD POPULATION AND COMPOSITION

Household

A person or group of related or unrelated persons who live together in the same dwelling unit(s), who acknowledge one adult male or female as the head of the household, who share the same housekeeping arrangements, and who are considered a single unit.

De facto population

All persons who stayed in the selected households the night before the interview (whether usual residents or visitors).

De jure population

All persons who are usual residents of the selected households, whether or not they stayed in the household the night before the interview.

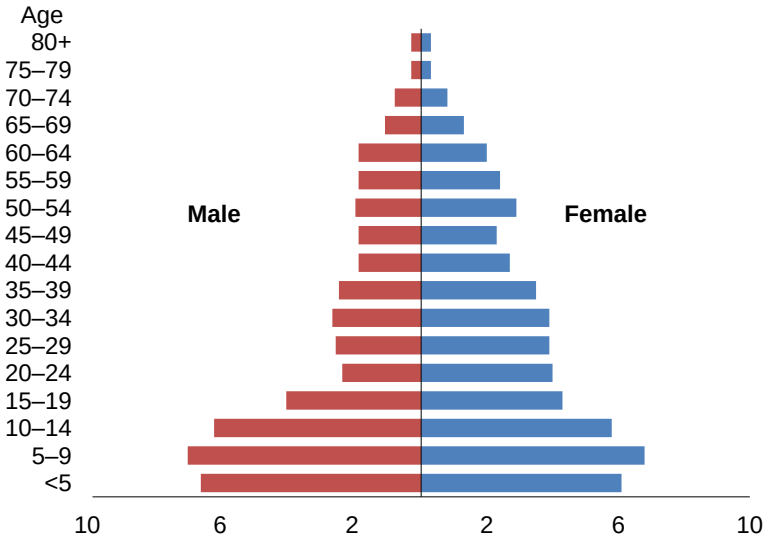
How data are calculated

All tables are based on the de facto population unless otherwise specified.

The de facto survey population (those who stayed overnight in the surveyed households) is 42,221; 53% of these individuals are female and 47% are male. Nearly half (47%) of the population is under age 20, over one-third is under age 15 (39%), and only 5% is age 65 and older. Children under age 5 and adolescents age 10–19 account for 13% and 21% of the population, respectively (**Table 2.7** and **Figure 2.3**).

Figure 2.3 **Population pyramid**

Percent distribution of the household population



The population pyramid in **Figure 2.3** shows the population distribution by 5-year age groups, separately for males and females. The broad base of the pyramid is typical of populations that have experienced high fertility in the recent past.

The average household size is 5.6 people (**Table 2.8**). Rural households are larger (5.9 people per household) than urban households (4.9 people per household). Men head the majority of households, with only 20% headed by women.

Five percent of households have foster and/or orphan children, with this percentage higher in urban areas than in rural areas (7% and 5%, respectively).

Trends: The age-sex structure of the Tajikistan population has shown little change over the past decade. The percentage of children under age 15 is 39% in 2023 (**Table 2.7**), nearly the same as in 2012 and 2017 (38% each). The proportion of youth between age 15 and age 24 has decreased over time, from 20% in 2012 to 17% in 2017 and 15% in 2023. The population age 65 or older has changed little over the past decade (4% in 2012 and 5% in 2023). The average household size declined from 6.3 persons in 2012 and 6.0 persons in 2017 to 5.6 persons in 2023.

The percentage of households that have foster and/or orphan children has decreased over time, from 8% of households in 2012 to 5% in 2023 (**Table 2.8**).

2.4 Children's Living Arrangements and Parental Survival

Orphan
A child with one or both parents who are dead.
Sample: Children under age 18

Eighty-nine percent of de jure children under age 18 live with both of their parents; 2% are not living with their biological parents. Two percent of children under age 18 are orphans (one or both parents are dead), with most having lost their father (2%). Orphanhood increases with the child's age, from 1% among children age 0–4 to 5% among children age 15–17 (**Table 2.9**). By region, orphanhood is higher in Dushanbe and GBAO (3% each) than in the other regions (2%).

Trends: The proportion of children who are orphaned has fallen slightly over time, from 3% in 2012 to 2% in 2023.

2.5 BIRTH REGISTRATION

Registered birth

Child has a birth certificate or child does not have a birth certificate, but the birth is registered with the civil authorities.

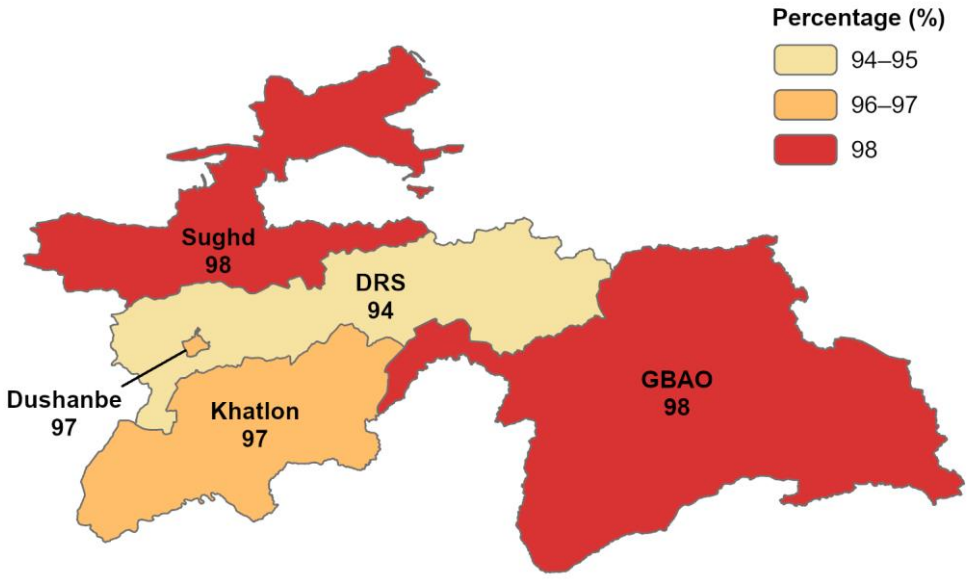
Sample: De jure children under age 5

The global concern regarding the need to have all births registered by 2030 is evident in SDG Targets 16.9.1 and 17.19.2. Birth registration is important because a child who is not registered is in danger of being denied the right to an official identity, a recognized name, and a nationality.

Respondents were asked whether they had birth certificates for the children in the household who were under age 5. If a child did not have a birth certificate, respondents were asked whether the birth had been registered with the civil authorities. **Table 2.10** presents information on the percentage of children under age 5 who have a birth certificate and the percentage who do not have a birth certificate but whose birth has been registered with the civil authorities. Overall, 97% of children under age 5 had their births registered with the civil authorities; this includes 94% with a birth certificate and 3% whose birth was registered but who do not have a birth certificate. The percentage of births that have been registered increases from 92% among children younger than age 1 to 98% among children age 1–4. By region, birth registration ranges from 94% in Districts of Republican Subordination (DRS) to 98% in Sughd and GBAO (**Map 2.1**).

Map 2.1 **Birth registration by region**

Percentage of de jure children under age 5 whose births are registered with the civil authorities



Trends: The percentage of children whose births are registered has increased over time, from 82% in 2012 to 96% in 2017 and 97% in 2023. Similarly, the percentage of children with a birth certificate increased from 82% in 2012 to 91% in 2017 and 94% in 2023.

2.6 EDUCATION

2.6.1 Educational Attainment

Median educational attainment

Half of the population has completed less than the median number of years of schooling, and half of the population has completed more than the median number of years of schooling.

Sample: De facto household population age 6 and older

Table 2.11.1 and **Table 2.11.2** present data on the educational attainment of the female population and male population age 6 and older, respectively.

Sixty-seven percent of the female population and 56% of the male population age 6 and older have attained some secondary or completed secondary education. Males are more likely than females to have a postsecondary education (22% versus 14%). Only 6% of males and females age 6 and older never attended school. Sixteen percent of males have a higher education (the equivalent of a university degree), as compared with 8% of females. Median years of schooling are 9.0 among females and 9.4 among males.

Trends: The percentage of respondents who have completed secondary education has increased slightly since 2012, from 33% to 36% among females and from 30% to 33% among males. The percentage of respondents with a postsecondary education (professional primary, professional middle, higher, and postgraduate levels combined) has increased slightly over time among females, from 10% in 2012 to 13% in 2017 and 14% in 2023, and has changed only minimally among males (23% in 2012, 25% in 2017, and 22% in 2023). The percentage of respondents with a higher education increased from 5% in 2012 to 8% in 2023 among females and from 15% in 2012 to 16% in 2023 among males.

The median number of years of schooling among females has increased slightly over the past decade, from 8.6 in 2012 to 9.0 years in 2023. During the same period, the median among males has changed only minimally (9.3 in 2012, 9.5 in 2017, and 9.4 in 2023).

Patterns by background characteristics

- The median number of years of schooling is higher in urban areas than in rural areas among both females (9.3 versus 9.0) and males (9.8 versus 9.3).
- On average, educational attainment is highest in GBAO and lowest in DRS. The difference in median years of schooling between GBAO and DRS is 1.5 among females and 1.1 among males.
- Dushanbe lags behind GBAO in median years of schooling among both males and females; however, the percentage of respondents attaining a higher education is higher in Dushanbe than in any of the other regions, especially among males. Overall, 35% of men and 20% of women from Dushanbe attained a higher education, as compared with 13% of men and 6% of women in Khatlon, indicating clear educational advantages for people living in Dushanbe over people from the other regions.
- Wealth has a strong positive relationship with education. Median years of schooling vary from 8.5 in the lowest wealth quintile to 9.6 in the highest quintile among females and from 8.9 in the lowest wealth quintile to 10.1 in the highest quintile among males, indicating more than a 1-year difference in the median number of years of schooling between the populations from these opposite quintiles.

2.6.2 Primary and Secondary School Attendance

Net attendance ratio (NAR)

Percentage of the school-age population that attends primary or secondary school.

Sample: Children age 7–10 for primary school NAR and children age 11–17 for secondary school NAR

Gross attendance ratio (GAR)

The total number of children attending primary school divided by the official primary school-age population and the total number of children attending secondary school divided by the official secondary school-age population.

Sample: Children age 7–10 for primary school GAR and children age 11–17 for secondary school GAR

The results in **Table 2.12** show that school attendance is high but not universal among the school-age population in Tajikistan. The primary school NAR indicates that 88% of children age 7–10 who should be attending the primary level are doing so. Similarly, the secondary school NAR shows that 88% of children age 11–17 who should be attending the secondary level are doing so. The NAR for primary school is the same for girls and boys (88%), while the secondary school NAR is slightly higher among boys (90%) than girls (86%).

The primary school gross attendance ratio (GAR) for children age 7–10 is 97% (96% for girls and 97% for boys). The secondary school GAR for children age 11–17 is 98%, and the ratio is higher for boys (more than 99%) than for girls (96%).

Gender parity index (GPI)

The ratio of female to male students attending primary school and the ratio of female to male students attending secondary school. The index reflects the magnitude of the gender gap.

Sample: Primary school students and secondary school students

Out-of-school rate

Percentage of the school-age population that is not attending any level of education.

Sample: Children age 7–10 for primary school out-of-school rate and children age 11–17 for secondary school out-of-school rate

In addition, **Table 2.12** shows the percentage of children of primary and secondary school age who are out of school. The out-of-school rate for primary school is the percentage of the primary school-age (7–10 years) population that is not attending any level of education. The out-of-school rate for secondary school is the percentage of the secondary school-age (11–17 years) population that is not attending any level of education. The out-of-school rate is 7% for primary school and 6% for secondary school.

Table 2.12 also presents information on the gender parity index (GPI). A GPI of 1 is evidence of equality in the net attendance ratio (NAR) for girls to boys. The primary school GPI is 0.99, indicating that boys have only a very slight advantage over girls in primary school attendance. The secondary level GPI is 0.97, showing that boys have a greater but still comparatively small advantage over girls in secondary school attendance.

School completion rate

Percentage of the school-age population that is not attending any level of education.

Sample: Children age 13–15 for primary school, young people age 18–20 for lower secondary school, and young people age 20–22 for upper secondary school

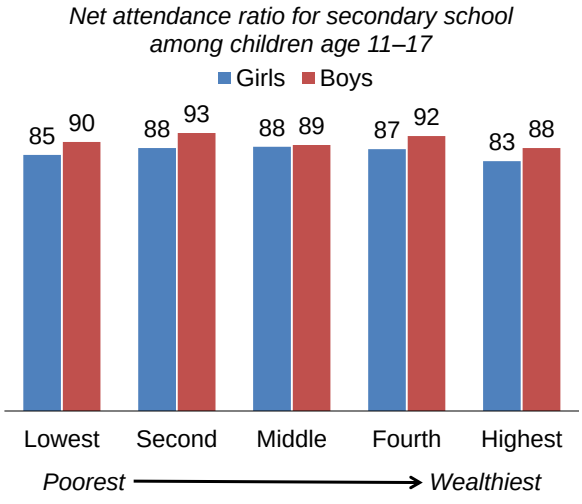
In Tajikistan, an 11-year system of general education is currently in place, and children enter primary school at age 7. Primary education encompasses 4 years (grades 1–4, age 7–10), lower secondary (also known as general basic) encompasses 5 years (grades 5–9, age 11–15), and upper secondary encompasses 2 years (grades 10–11, age 16–17). The school year typically runs from September of one year to May or June of the following year. Secondary education is compulsory until the ninth grade.

The primary education completion rate shown in **Table 2.13** represents the percentage of completion among a cohort of children 3 to 5 years older than the official age of the last grade of primary education (that is, the percentage of children who are age 13 to age 15) who completed primary education in Tajikistan. Completion rates are also presented for lower secondary and upper secondary education. Overall, 26% of children in Tajikistan completed the last grade of primary school, 28% completed the last grade of lower secondary school, and 39% completed the last grade of upper secondary school.

Patterns by background characteristics

- The NAR for primary school is the same in urban and rural areas (88%). The secondary school NAR is higher in rural areas (87% among females and 91% among males) than in urban areas (84% among females and 89% among males).
- The primary school NAR is highest among girls in Dushanbe (90%). The secondary school NAR is lowest in Dushanbe (84% overall and 80% among girls). GBAO and Khatlon have the highest NARs for secondary school (90% each).
- The secondary school NAR is highest among male children from households in the second wealth quintile (93%) and female children from households in the third quintile (88%). Among both males and females, the NAR for secondary school is lowest in the highest wealth quintile (88% for males and 83% for females) (**Figure 2.4**).
- Out-of-school rates are slightly higher among females than among males; the difference is more pronounced for secondary school (8% among females and 5% among males). The percentage of secondary school-age children who do not attend any level of education is highest in DRS (9%) and is twice as high among the DRS female population (12%) as among the male population (6%).

Figure 2.4 **Secondary school attendance by household wealth**



- Completion rates for primary education show little variation by background characteristics. The completion rate for lower secondary school is highest among female students (30%), students in Dushanbe (31%), and those in the highest wealth quintile (32%) and lowest in GBAO (18%). The

completion rate for upper secondary school is notably higher in GBAO and Khatlon (41% each) than in Dushanbe (36%).

2.6.3 Participation Rate in Organized Learning among Children Age 6

Participation rate in organized learning: adjusted net attendance ratio (NAR)

Percentage of children 1 year younger than the official primary school entry age (at the beginning of the school year) who are attending an early childhood education program or primary school. The ratio is termed adjusted since it includes children in primary school.

Sample: Children age 6 at the beginning of the school year

Table 2.14 presents data on participation in organized learning. Overall, only 4% of children 1 year younger than the official lower basic school entry age at the beginning of the school year have attended an early childhood education program, and 18% have attended primary school. The majority of children (78%) have attended neither an early childhood education program nor primary school. The adjusted NAR for organized learning among children age 6 at the beginning of the school year is 23%.

Patterns by background characteristics

- Early childhood education attendance is more common in urban areas (8%) than in rural areas (3%). Similarly, primary school attendance is more common in urban areas (22% versus 17%).
- Forty percent of children in GBAO attend an early childhood education program, as compared with less than 1% of children in Khatlon.
- The percentage of children who attend an early childhood education program increases with increasing household wealth, from 1% in the lowest wealth quintile to 10% in the highest wealth quintile.
- The adjusted NAR for organized learning is highest in GBAO (72%) and Dushanbe (41%) and lowest in Feed the Future (FTF) districts and Khatlon (18% each).

2.7 Child Discipline

Nonviolent disciplinary approaches

Includes one or more of the following:

- Taking away privileges, forbidding something the child liked, or not allowing the child to leave the house
- Explaining that the child's behavior was wrong
- Giving the child something else to do

Sample: De jure children age 1–14

Psychological aggression

Includes one or both of the following:

- Shouting, yelling, or screaming at the child
- Calling the child dumb, lazy, or a similar term

Sample: De jure children age 1–14

Physical punishment

Includes one or more of the following:

- Shaking the child
- Spanking, hitting, or slapping the child on the bottom with a bare hand
- Hitting the child on the bottom or other part of the body with a belt, hairbrush, stick, or other similar hard object
- Hitting or slapping the child on the face, head, or ears
- Hitting the child on the hand, arm, or leg
- Beating the child up, that is, hitting the child over and over as hard as one can

Sample: De jure children age 1–14

Severe physical punishment

Includes one or both of the following:

- Hitting or slapping the child on the face, head, or ears
- Beating the child up, that is, hitting the child over and over as hard as one can

Sample: De jure children age 1–14

The way parents and caretakers discipline children can have long-term consequences for their physical and psychological development and well-being. To identify the types of child disciplinary methods used in Tajikistan, questions on child discipline were asked about one randomly selected child age 1–14 in each household.[1] In the 2023 TjDHS, the respondent to the Household Questionnaire (the household head or other knowledgeable adult household member) was asked a series of separate questions about practices used to discipline the child during the month before the survey.

Overall, 56% of children age 1–14 experienced any type of violent discipline in the month before the survey (**Table 2.15**). Over half of children (54%) experienced psychological aggression, and a little over one-third (38%) experienced only nonviolent discipline. Thirty-four percent of children experienced at least one form of physical punishment, and 6% experienced severe physical punishment. Overall, only 4% of respondents administered questions about child discipline believe that a child needs physical punishment to be raised or educated properly (**Table 2.16**).

Trends: The percentage of children age 1–14 who experienced any form of physical violence in the past month decreased from 69% in 2017 to 56% in 2023. Over the same period, the percentage of respondents who believe that physical punishment is needed to raise or educate a child properly decreased from 15% to 4%.

Patterns by background characteristics

- Boys are more likely than girls to have experienced at least one form of violent discipline (58% versus 54%) and to have experienced severe physical punishment (7% versus 5%).

- Over half of children age 3–14 experienced violent discipline in the past month. Children in the 5–9 age group experienced the highest frequencies of any form of violent discipline (59%), psychological aggression (57%), and severe physical punishment (7%).

[1] If several children age 1–14 were listed in the household schedule, only one child per household was randomly selected for administration of the questions on child discipline. If one child age 1–14 was listed in the household schedule, the questions on child discipline were administered about this child. If none of the children listed in the household schedule were age 1–14, the questions on child discipline were not administered.

- The percentage of children experiencing violent discipline was highest in DRS (63%) and Khatlon (61%) and lowest in Sughd (43%). The reported frequency of violent discipline in the past month was the same in rural and urban areas (56%).

- Children from the poorest households (65%) and those born to mothers with a general basic education (63%) experienced higher levels of exposure to violent discipline, mostly in the form of psychological aggression, than children from wealthier households and those born to mothers in other education categories.

- The percentage of respondents who believe that physical punishment is needed to raise or educate a child properly is lowest in GBAO (less than 1%) and highest in DRS (8%).

2.8 Labor Migration and Household Remittances

According to the International Organization for Migration (IOM), "for the past two decades, Tajikistan has been experiencing a large-scale outflow of labor migration, with the majority traveling to the Russian Federation seeking employment" (IOM 2024). Personal remittances received by households from labor migrants contributed to over 38% of the country's gross domestic product (GDP) in 2023 (World Bank 2024). The outflow of labor migration from Tajikistan to Russia (the largest country of destination) is mostly seasonal and slowing down due to stricter regulations and sanctions that bring uncertainty about the sustainability of strong dependence on personal remittances in the future (IOM 2024; Lemon 2019).

The 2023 TjDHS collected information on labor migration and receipt of money from abroad. Thirty-eight percent of households reported having a labor migrant who had worked abroad for 3 or more months in the past 12 months, and 38% of households also reported receiving money or parcels from abroad. Among these households, the vast majority (97%) reported that labor migrants were working in Russia and the same percentage reported receiving money or parcels from Russia. These data corroborate data from other surveys on labor migration (Lemon 2019). Women and men are equally likely to have worked abroad in the past 12 months; the median number of men and women who worked abroad in the past 12 months is 1.7 per household (**Table 2.17** and **Table 2.18**).

Among the 3,040 households that received money or parcels from abroad, 52% reported that their financial situation improved slightly as a result, while 43% reported substantial financial improvement and 3% reported no change (**Table 2.19**).

Patterns by background characteristics

- Forty-three percent of rural households reported having a labor migrant who worked abroad for at least 3 months in the past year, as compared with 27% of urban households.

- The percentage of households that reported having a labor migrant who worked abroad for at least 3 months in the past year is highest in GBAO (53%) and lowest in Dushanbe (22%).

- Fifty percent of households in DRS that received money or parcels from abroad reported a substantial impact on their financial situation, compared with only 26% in Dushanbe. Seventy-one percent of households in GBAO reported a slight improvement in their financial situation as a result of receiving money from abroad.

LIST OF TABLES

For more information on household population and housing characteristics, see the following tables:

- **Table 2.1 Household characteristics: Housing**
- **Table 2.2 Household characteristics: Cooking**
- **Table 2.3 Household characteristics: Heating and lighting**
- **Table 2.4 Primary reliance on clean fuels and technologies**
- **Table 2.5 Household possessions**
- **Table 2.6 Wealth quintiles**
- **Table 2.7 Household population by age, sex, and residence**
- **Table 2.8 Household composition**
- **Table 2.9 Children's living arrangements and orphanhood**
- **Table 2.10 Birth registration of children under age 5**
- **Table 2.11.1 Educational attainment of the female household population**
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- **Table 2.12 School attendance ratios**
- **Table 2.13 School completion rates**
- **Table 2.14 Participation rate in organized learning**
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- **Table 2.16 Attitudes toward physical punishment**
- **Table 2.17 Labor migration**
- **Table 2.18 Money or parcels from abroad**
- **Table 2.19 Remittances received from abroad**

Table 2.1 Household characteristics: Housing

Percent distribution of households and de jure population by housing characteristics and percent distribution by frequency of smoking in the home, according to residence, Tajikistan DHS 2023

	Households			Population		
Characteristic	Urban	Rural	Total	Urban	Rural	Total
Electricity						
Yes	99.9	99.9	99.9	99.9	99.9	99.9
No	0.1	0.1	0.1	0.1	0.1	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0
Flooring material						
Earth/sand	2.6	13.5	10.2	2.7	13.4	10.6
Wood planks	37.3	23.7	27.7	36.0	22.1	25.7
Parquet or polished wood	31.3	18.0	22.0	31.8	18.1	21.7
Vinyl or linoleum	14.2	11.7	12.5	13.9	11.3	12.0
Ceramic tiles	0.1	0.2	0.2	0.1	0.2	0.2
Cement	9.2	25.5	20.6	9.7	26.9	22.4
Carpet	5.3	7.4	6.8	5.8	8.0	7.4
Total	100.0	100.0	100.0	100.0	100.0	100.0
Rooms used for sleeping						
One	16.7	8.8	11.2	9.7	5.6	6.6
Two	48.3	41.9	43.8	44.2	36.2	38.3
Three or more	34.9	49.3	45.0	46.1	58.3	55.1
Total	100.0	100.0	100.0	100.0	100.0	100.0
Frequency of smoking in the home						
Daily	8.1	4.8	5.8	8.1	4.8	5.7
Weekly	4.8	4.1	4.3	4.4	4.2	4.2
Monthly	1.2	2.0	1.8	1.1	2.1	1.8
Less than once a month	0.8	0.9	0.8	0.7	0.8	0.8
Never	85.1	88.1	87.2	85.6	88.2	87.5
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of households/ population	2,393	5,642	8,035	11,813	33,480	45,294

Table 2.2 Household characteristics: Cooking

Percent distribution of households and de jure population by place for cooking, cooking technology, and cooking fuel, according to residence, Tajikistan DHS 2023

	Households			Population		
Characteristic	Urban	Rural	Total	Urban	Rural	Total
Place for cooking						
In the house	54.0	7.9	21.6	48.7	6.6	17.6
Separate room/kitchen	48.9	6.8	19.3	44.7	5.8	16.0
No separate room/kitchen	5.1	1.1	2.3	4.0	0.8	1.6
In a separate building	44.6	88.3	75.3	49.8	89.4	79.1
Outdoors	1.3	3.7	3.0	1.5	3.9	3.2
Other	0.0	0.1	0.1	0.0	0.1	0.1
No food cooked in household	0.1	0.0	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
Main cooking technology						
Clean fuels and technologies	97.7	83.8	87.9	97.0	81.8	85.8
Electric stove	71.9	41.0	50.2	69.0	39.2	47.0
LPG/natural gas stove	23.2	38.6	34.1	25.2	38.7	35.2
Piped natural gas stove	0.4	1.4	1.1	0.4	1.5	1.2
Biogas stove	2.2	2.7	2.6	2.3	2.4	2.4
Other fuels and technologies	2.3	16.2	12.0	3.0	18.2	14.2
Manufactured solid fuel stove[1]	0.0	0.1	0.1	0.0	0.1	0.1
Traditional solid fuel stove	1.0	7.1	5.2	1.3	7.5	5.9
With a chimney	0.7	6.1	4.5	1.0	6.6	5.1
Without a chimney	0.3	0.9	0.7	0.3	1.0	0.8
Three-stone stove/open fire	1.3	7.5	5.6	1.6	8.5	6.7
Other	0.0	1.6	1.1	0.1	2.0	1.5
No food cooked in household	0.1	0.0	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
Cooking fuel						
Clean fuels and technologies[2]	97.7	83.8	87.9	97.0	81.8	85.8
Solid fuels for cooking	2.3	16.1	12.0	3.0	18.1	14.2
Wood	1.7	10.8	8.1	2.4	12.1	9.6
Agricultural crop	0.0	0.6	0.4	0.1	0.6	0.5
Animal dung/waste	0.4	4.4	3.2	0.5	4.9	3.8
Other solid fuels[3]	0.1	0.4	0.3	0.1	0.4	0.3
Other fuels	0.0	0.1	0.0	0.0	0.1	0.1
Other	0.0	0.1	0.0	0.0	0.1	0.1
No food cooked in household	0.1	0.0	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of households/population	2,393	5,642	8,035	11,813	33,480	45,294

LPG = Liquefied petroleum gas
[1] Includes manufactured solid fuel stoves with and without a chimney
[2] Includes stoves/cookers using electricity and LPG/natural gas/biogas
[3] Includes coal/lignite, charcoal, straw/shrubs/grass, and garbage/plastic

Table 2.3 Household characteristics: Heating and lighting

Percent distribution of households and de jure population by heating technology, heating fuel, and main lighting fuel or technology, according to residence, Tajikistan DHS 2023

	Households			Population		
Characteristic	Urban	Rural	Total	Urban	Rural	Total
Heating technology						
Central heating	19.3	0.2	5.9	18.0	0.2	4.8
Air conditioner winter-summer	4.1	0.3	1.4	4.1	0.3	1.3
Manufactured space heater	40.1	3.7	14.5	37.6	3.3	12.2
With a chimney	4.9	0.6	1.9	4.2	0.5	1.5
Without a chimney	35.2	3.0	12.6	33.4	2.7	10.7
Traditional space heater	4.0	0.7	1.7	3.6	0.7	1.5
With a chimney	0.8	0.4	0.6	0.9	0.5	0.6
Without a chimney	3.1	0.3	1.1	2.7	0.2	0.9
Manufactured cookstove	2.0	3.8	3.3	2.2	3.9	3.4
With a chimney	1.7	3.8	3.2	1.9	3.9	3.4
Without a chimney	0.3	0.0	0.1	0.3	0.0	0.1
Traditional cookstove	29.4	90.4	72.3	33.2	90.7	75.7
With a chimney	29.0	89.7	71.6	32.7	89.9	75.0
Without a chimney	0.4	0.7	0.7	0.5	0.8	0.7
Three-stone stove/open fire	0.5	0.5	0.5	0.6	0.6	0.6
Other	0.5	0.4	0.4	0.5	0.4	0.5
No heating in household	0.1	0.0	0.0	0.1	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
Heating fuel						
Clean fuels and technologies[1]	66.7	5.6	23.8	62.8	5.0	20.0
Central heating	1.8	0.2	0.6	1.5	0.2	0.5
Air conditioner winter-summer	4.1	0.3	1.4	4.1	0.3	1.3
Electricity	43.2	5.0	16.4	40.4	4.5	13.8
Thermo-electro-central	17.5	0.0	5.2	16.5	0.0	4.3
Other clean fuels and technologies[2]	0.2	0.1	0.1	0.2	0.1	0.1
Kerosene/paraffin	1.4	0.1	0.5	1.0	0.1	0.3
Coal/lignite	19.3	51.0	41.6	21.9	51.0	43.4
Charcoal	1.2	4.3	3.4	1.4	4.0	3.3
Wood	9.4	30.1	23.9	10.6	30.0	24.9
Animal dung/waste	1.7	8.7	6.6	2.0	9.5	7.6
Other fuel[3]	0.1	0.4	0.3	0.1	0.4	0.4
No heating in household	0.1	0.0	0.0	0.1	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
Main lighting fuel or technology						
Clean fuels and technologies	99.7	99.4	99.5	99.8	99.4	99.5
Electricity	99.4	98.2	98.6	99.4	98.1	98.5
Solar lantern	0.0	0.1	0.1	0.0	0.1	0.1
Rechargeable flashlight/torch/ lantern	0.1	0.2	0.2	0.1	0.2	0.2
Battery-powered flashlight/torch/ lantern	0.2	0.9	0.7	0.3	1.0	0.8
Wood	0.2	0.3	0.3	0.1	0.4	0.3
Other fuel[4]	0.1	0.3	0.2	0.1	0.2	0.2
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of households/population	2,393	5,642	8,035	11,813	33,480	45,294

[1] Includes central heating, thermo-electro-central, air conditioner winter-summer, electricity, piped natural gas, liquefied petroleum gas (LPG)/cooking gas, and biogas
[2] Includes piped natural gas, LPG/cooking gas, and biogas
[3] Includes straw/shrubs/grass, agricultural crop, sawdust, and any other fuels mentioned by the respondent
[4] Includes kerosene lamps, charcoal, agricultural crop, animal dung/waste, and other lighting fuels or technologies mentioned by the respondent

Table 2.4 Primary reliance on clean fuels and technologies

Percentage of de jure population relying on clean fuels and technologies for cooking, percentage relying on solid fuels for cooking, percentage relying on clean fuels and technologies for space heating, percentage relying on clean fuels and technologies for lighting, and percentage relying on clean fuels and technologies for cooking, space heating, and lighting, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Primary reliance on clean fuels and technologies for cooking[1]	Primary reliance on solid fuels for cooking[2]	Number of persons in households that reported cooking	Primary reliance on clean fuels and technologies for space heating[3]	Number of persons in households that reported use of space heating	Primary reliance on clean fuels and technologies for lighting[4]	Number of persons in households that reported use of lighting	Primary reliance on clean fuels and technologies for cooking, space heating, and lighting[5]	Number of persons
Residence									
Urban	97.0	3.0	11,812	62.9	11,800	99.8	11,813	62.6	11,813
Rural	81.8	18.1	33,478	5.0	33,480	99.4	33,480	4.4	33,480
Region									
Dushanbe	99.9	0.1	4,506	88.1	4,506	99.9	4,506	88.0	4,506
GBAO	85.4	14.6	810	15.6	810	99.6	810	15.6	810
Sughd	76.9	22.9	12,702	18.7	12,699	99.5	12,706	17.2	12,706
DRS	90.4	9.6	10,677	10.7	10,670	99.8	10,677	10.5	10,677
Khatlon	85.8	14.2	16,596	8.9	16,596	99.2	16,596	8.7	16,596
FTF districts	76.4	23.6	9,209	3.8	9,209	99.3	9,209	3.8	9,209
Wealth quintile									
Lowest	63.6	36.4	9,054	1.4	9,054	99.1	9,054	0.6	9,054
Second	80.4	19.4	9,066	1.6	9,067	99.4	9,067	1.4	9,067
Middle	89.3	10.7	9,054	2.8	9,057	99.5	9,057	2.1	9,057
Fourth	95.9	4.1	9,058	9.7	9,052	99.6	9,058	9.1	9,058
Highest	99.7	0.3	9,056	84.9	9,050	99.9	9,056	84.6	9,056
Total	85.8	14.2	45,290	20.0	45,281	99.5	45,294	19.5	45,294

[1] Includes stoves/cookers using electricity and liquefied petroleum gas (LPG)/natural gas/biogas
[2] Includes coal/lignite, charcoal, wood, straw/shrubs/grass, agricultural crops, animal dung/waste, garbage/plastic, and other solid fuels mentioned by the respondent
[3] Includes central heating, thermo-electro-central, air conditioner winter-summer, electricity, and LPG/natural gas/biogas
[4] Includes electricity, solar lantern, rechargeable flashlight/torch/lantern, and battery-powered flashlight/torch/lantern
[5] In order to calculate SDG indicator 7.1.2, persons living in households that report no cooking, no space heating, or no lighting are included in the numerator.

Table 2.5 Household possessions

Percentage of households possessing various household effects, means of transportation, agricultural land, and livestock/farm animals, according to residence, Tajikistan DHS 2023

Possession	Residence		Total
	Urban	Rural	
Household effects			
Radio	12.3	7.7	9.1
Television	98.4	97.8	98.0
Mobile phone	97.4	95.5	96.0
Non-mobile telephone	4.9	0.9	2.1
Computer	30.3	11.1	16.8
Refrigerator	94.5	82.7	86.3
Washing machine	78.5	52.4	60.2
Vacuum cleaner	70.5	37.8	47.5
Microwave	40.5	12.4	20.7
Video camera	4.6	1.4	2.3
Table or hon-tohta	76.3	67.1	69.8
Chair	53.1	30.5	37.3
Sofa	69.7	50.4	56.1
Bed	58.2	44.0	48.2
Wall unit, buffet, or curio cabinet	89.0	84.2	85.6
Air conditioner	58.6	28.7	37.6
DVD player	24.7	22.7	23.3
Satellite antenna or cable television	76.9	71.1	72.8
Freezer	3.7	2.9	3.1
Electric fan	38.3	54.4	49.6
Sewing machine	49.8	65.6	60.9
Indoor heater	51.2	44.7	46.7
Mini-generator	2.1	4.2	3.6
Fuel or wood stock	42.2	94.1	78.7
Carpet	99.0	97.7	98.1
Connection to the internet	41.7	35.2	37.1
Dishwashing machine	1.5	0.8	1.0
Clothes dryer machine	2.2	1.0	1.4
Electric water heater	76.7	34.0	46.8
Means of transportation			
Bicycle	31.3	49.7	44.2
Animal-drawn cart	7.2	21.7	17.4
Motorcycle/scooter	2.6	5.4	4.5
Car/truck	35.5	43.2	40.9
Boat with a motor	0.1	0.2	0.2
Tractor	0.3	1.8	1.3
Combine-harvester	0.1	0.2	0.2
Agricultural equipment (plow, trailer, mower, or similar)	1.4	2.4	2.1
Use of agricultural land	10.3	53.6	40.7
Ownership of farm animals[1]	11.6	60.5	45.9
Number of households	2,393	5,642	8,035

[1] Cows, bulls, other cattle, horses, donkeys, mules, goats, sheep, chickens or other poultry, rabbits, fur animals, or beehives

Table 2.6 Wealth quintiles

Percent distribution of the de jure population by wealth quintiles, and the Gini coefficient, according to residence and region, Tajikistan DHS 2023

Residence/region	Wealth quintile					Total	Number of persons	Gini coefficient[1]
	Lowest	Second	Middle	Fourth	Highest			
Residence								
Urban	5.6	6.0	8.3	14.7	65.4	100.0	11,813	0.25
Rural	25.1	25.0	24.1	21.9	4.0	100.0	33,480	0.19
Region								
Dushanbe	0.3	0.1	1.0	7.1	91.4	100.0	4,506	0.17
GBAO	36.3	23.7	16.1	9.8	14.0	100.0	810	0.37
Sughd	12.0	20.1	21.2	26.9	19.8	100.0	12,706	0.31
DRS	19.7	18.0	24.3	27.9	10.1	100.0	10,677	0.25
Khatlon	30.8	26.5	21.7	13.6	7.4	100.0	16,596	0.28
FTF districts	29.8	27.8	24.6	14.2	3.7	100.0	9,209	0.21
Total	20.0	20.0	20.0	20.0	20.0	100.0	45,294	0.32

[1] The Gini coefficient indicates the level of concentration of wealth, with 0 representing an equal wealth distribution and 1 representing a totally unequal distribution.

Table 2.7 Household population by age, sex, and residence

Percent distributions of the de facto household population by various age groups and percentage of the de facto household population age 10–19, according to sex and residence, Tajikistan DHS 2023

	Urban			Rural					
Age	Male	Female	Total	Male	Female	Total	Male	Female	Total
<5	13.3	10.8	12.0	14.6	11.7	13.1	14.3	11.5	12.8
5–9	13.8	11.8	12.7	15.7	13.1	14.3	15.2	12.7	13.9
10–14	13.2	10.8	11.9	13.6	10.9	12.2	13.5	10.9	12.1
15–19	8.8	8.3	8.6	8.8	8.0	8.4	8.8	8.1	8.4
20–24	5.7	7.5	6.6	5.0	7.7	6.4	5.2	7.6	6.5
25–29	6.2	7.1	6.7	5.4	7.3	6.4	5.6	7.3	6.5
30–34	6.6	7.1	6.9	5.6	7.4	6.5	5.9	7.3	6.6
35–39	5.8	7.3	6.6	5.3	6.4	5.9	5.4	6.7	6.1
40–44	4.9	5.3	5.1	3.9	5.1	4.5	4.1	5.1	4.7
45–49	4.2	4.3	4.2	4.1	4.2	4.2	4.1	4.2	4.2
50–54	4.5	5.7	5.1	4.3	5.2	4.8	4.4	5.4	4.9
55–59	4.0	4.8	4.4	4.1	4.3	4.2	4.1	4.5	4.3
60–64	4.1	4.2	4.1	4.0	3.6	3.8	4.0	3.8	3.9
65–69	2.3	2.3	2.3	2.5	2.5	2.5	2.4	2.4	2.4
70–74	1.5	1.4	1.4	1.8	1.4	1.6	1.7	1.4	1.6
75–79	0.5	0.7	0.6	0.6	0.5	0.5	0.6	0.5	0.5
80+	0.6	0.6	0.6	0.7	0.6	0.7	0.7	0.6	0.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Dependency age groups									
0–14	40.3	33.5	36.7	44.0	35.7	39.6	43.0	35.1	38.8
15–64	54.8	61.6	58.5	50.4	59.3	55.1	51.6	59.9	56.0
65+	4.8	4.9	4.9	5.6	5.0	5.3	5.4	5.0	5.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Child and adult populations									
0–17	46.6	38.4	42.2	50.5	40.8	45.4	49.4	40.2	44.5
18+	53.4	61.6	57.8	49.5	59.2	54.6	50.6	59.8	55.5
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Adolescents 10–19	22.0	19.2	20.5	22.4	18.9	20.5	22.3	19.0	20.5
Number of persons	5,237	6,057	11,294	14,534	16,393	30,927	19,771	22,449	42,221

Table 2.8 Household composition

Percent distribution of households by sex of head of household and by household size, mean size of households, and percentage of households with orphans and children under age 18 not living with a biological parent, according to residence, Tajikistan DHS 2023

Characteristic	Residence		Total
	Urban	Rural	
Household headship			
Male	70.8	84.2	80.2
Female	29.2	15.8	19.8
Total	100.0	100.0	100.0
Number of usual members			
0	0.2	0.0	0.1
1	4.9	1.3	2.4
2	10.2	4.8	6.4
3	11.9	7.7	8.9
4	16.8	12.6	13.9
5	19.0	20.9	20.3
6	16.1	19.3	18.4
7	9.8	14.2	12.9
8	4.7	7.6	6.7
9+	6.4	11.5	10.0
Total	100.0	100.0	100.0
Mean size of households	4.9	5.9	5.6
Percentage of households with children under age 18 who are orphans or not living with a biological parent			
Double orphans	0.1	0.2	0.2
Single orphans[1]	3.9	2.5	2.9
Children not living with a biological parent[2]	3.1	2.4	2.6
Orphans and/or children not living with a biological parent	6.5	4.6	5.2
Number of households	2,393	5,642	8,035

Note: Table is based on de jure household members, i.e., usual residents.
[1] Includes children with one dead parent and an unknown survival status of the other parent
[2] Children not living with a biological parent are those under age 18 living in households with neither their mother nor their father present.

Table 2.9 Children's living arrangements and orphanhood

Percent distribution of de jure children under age 18 by living arrangements and survival status of parents, percentage of children not living with a biological parent, and percentage of children with one or both parents dead, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Living with both parents	Living with mother but not with father		Living with father but not with mother		Not living with either parent					Total	Percentage not living with a biological parent	Percentage with one or both parents dead[1]	Number of children
		Father alive	Father dead	Mother alive	Mother dead	Both alive	Only mother alive	Only father alive	Both dead	Missing information on father/ mother				
Age														
0–4	91.4	6.6	0.7	0.4	0.1	0.6	0.1	0.0	0.1	0.0	100.0	0.8	1.0	5,364
<2	91.1	7.3	0.6	0.4	0.1	0.5	0.0	0.0	0.0	0.0	100.0	0.5	0.6	2,221
2–4	91.6	6.1	0.8	0.4	0.1	0.7	0.1	0.0	0.1	0.0	100.0	1.0	1.2	3,143
5–9	89.3	7.1	1.2	0.8	0.2	1.1	0.1	0.0	0.0	0.1	100.0	1.3	1.6	5,841
10–14	86.9	7.3	2.1	1.1	0.5	1.8	0.1	0.1	0.1	0.1	100.0	2.1	2.9	5,109
15–17	84.3	6.4	3.7	1.7	0.6	2.4	0.5	0.2	0.2	0.1	100.0	3.2	5.1	2,477
Sex														
Male	88.8	6.7	1.6	1.0	0.4	1.2	0.2	0.0	0.1	0.1	100.0	1.5	2.3	9,803
Female	88.4	7.1	1.7	0.8	0.2	1.5	0.1	0.1	0.1	0.1	100.0	1.8	2.2	8,988
Residence														
Urban	83.3	10.3	2.5	1.1	0.4	1.9	0.1	0.1	0.1	0.1	100.0	2.2	3.2	4,755
Rural	90.4	5.7	1.3	0.8	0.3	1.1	0.2	0.1	0.1	0.0	100.0	1.4	1.9	14,036
Region														
Dushanbe	81.9	12.3	2.4	0.9	0.4	1.6	0.2	0.1	0.0	0.2	100.0	2.0	3.1	1,855
GBAO	76.0	10.8	1.9	3.5	0.5	6.5	0.2	0.3	0.1	0.2	100.0	7.1	3.1	294
Sughd	90.0	5.7	1.5	1.0	0.3	1.3	0.1	0.1	0.0	0.0	100.0	1.5	2.0	4,891
DRS	86.5	9.5	1.6	0.8	0.1	1.1	0.2	0.2	0.0	0.1	100.0	1.5	2.1	4,642
Khatlon	91.2	4.5	1.5	0.8	0.5	1.2	0.2	0.0	0.1	0.0	100.0	1.5	2.3	7,109
FTF districts	92.1	4.5	1.0	0.8	0.4	0.9	0.2	0.0	0.0	0.0	100.0	1.1	1.7	4,053
Wealth quintile														
Lowest	89.6	5.7	1.8	0.9	0.5	1.0	0.3	0.1	0.2	0.0	100.0	1.6	2.9	4,071
Second	89.0	6.2	1.7	1.1	0.3	1.3	0.1	0.1	0.0	0.0	100.0	1.6	2.3	3,824
Middle	90.4	6.0	0.8	0.8	0.2	1.6	0.1	0.1	0.1	0.0	100.0	1.8	1.2	3,648
Fourth	90.6	6.1	1.1	0.8	0.2	0.9	0.1	0.0	0.0	0.1	100.0	1.1	1.4	3,634
Highest	83.2	10.6	2.7	1.0	0.3	1.8	0.1	0.1	0.1	0.1	100.0	2.1	3.3	3,614
Total <15	89.3	7.0	1.3	0.8	0.3	1.2	0.1	0.1	0.1	0.0	100.0	1.4	1.8	16,314
Total <18	88.6	6.9	1.6	0.9	0.3	1.3	0.2	0.1	0.1	0.1	100.0	1.6	2.2	18,791

Note: Table is based on de jure members, i.e., usual residents.
[1] Includes children with father dead, mother dead, both dead, and one parent dead but missing information on survival status of the other parent

Table 2.10 Birth registration of children under age 5

Percentage of de jure children under age 5 whose births are registered with the civil authorities, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage of children whose births are registered and who:		Total percentage of children whose births are registered	Number of children
	Had a birth certificate	Did not have a birth certificate		
Age				
<1	84.3	7.2	91.5	1,186
1–4	96.2	2.1	98.3	4,178
Sex				
Male	93.1	3.3	96.4	2,811
Female	94.0	3.1	97.2	2,553
Residence				
Urban	91.5	5.1	96.6	1,335
Rural	94.2	2.6	96.9	4,029
Region				
Dushanbe	89.4	7.4	96.8	541
GBAO	97.0	1.3	98.3	78
Sughd	97.0	1.4	98.4	1,455
DRS	89.1	4.8	94.0	1,269
Khatlon	94.8	2.6	97.4	2,022
FTF districts	96.2	1.7	97.9	1,268
Wealth quintile				
Lowest	92.9	3.1	96.0	1,084
Second	92.6	2.5	95.1	1,090
Middle	94.3	3.1	97.5	1,085
Fourth	96.3	2.4	98.7	1,091
Highest	91.5	5.2	96.7	1,014
Total	93.6	3.2	96.8	5,364

Table 2.11.1 Educational attainment of the female household population

Percent distribution of the de facto female household population age 6 and over by highest level of schooling attended or completed and median years completed, according to background characteristics, Tajikistan DHS 2023

Background characteristic	No education	Some primary	Completed primary[1]	Some secondary[2]	Completed secondary[3]	Professional primary	Professional middle	Higher	Graduate	Don't know	Total	Number	Median years completed
Age													
6–9	39.5	59.6	0.5	0.3	0.1	0.0	0.1	0.0	0.0	0.0	100.0	2,335	0.4
10–14	0.7	13.3	18.7	67.3	0.0	0.0	0.0	0.0	0.0	0.0	100.0	2,447	4.9
15–19	0.4	0.7	0.3	55.6	29.8	1.6	5.9	5.8	0.0	0.0	100.0	1,810	9.1
20–24	1.3	0.9	1.2	18.6	47.3	1.6	11.6	17.5	0.2	0.0	100.0	1,709	10.6
25–29	1.5	1.1	1.3	29.6	44.4	0.9	7.9	13.4	0.0	0.0	100.0	1,631	10.4
30–34	1.9	1.7	2.6	35.9	39.6	1.5	5.5	11.0	0.3	0.0	100.0	1,639	10.2
35–39	1.6	3.6	3.5	38.3	36.6	0.8	4.7	10.8	0.1	0.0	100.0	1,499	10.0
40–44	0.9	2.1	1.3	36.4	41.7	1.3	5.0	11.1	0.0	0.0	100.0	1,152	10.1
45–49	0.3	1.4	0.3	23.2	57.1	1.8	5.4	10.3	0.2	0.0	100.0	953	10.1
50–54	0.9	1.4	0.3	13.4	68.8	2.0	5.4	8.0	0.0	0.0	100.0	1,204	9.6
55–59	0.5	0.9	0.3	13.6	70.6	1.4	4.7	7.8	0.1	0.0	100.0	1,000	9.5
60–64	1.7	1.1	0.5	17.6	65.8	1.9	4.5	7.0	0.0	0.0	100.0	850	9.5
65+	2.7	3.0	3.1	29.0	49.7	1.3	3.1	7.8	0.0	0.1	100.0	1,114	9.3
Residence													
Urban	5.1	9.6	3.3	29.3	29.1	1.5	6.8	15.1	0.2	0.0	100.0	5,258	9.3
Rural	6.1	10.3	3.6	31.9	38.4	0.9	3.8	5.1	0.0	0.0	100.0	14,086	9.0
Region													
Dushanbe	4.3	9.9	3.6	28.6	25.7	1.0	6.4	20.4	0.2	0.0	100.0	2,000	9.4
GBAO	4.3	7.5	2.2	19.8	35.4	4.1	7.7	19.0	0.1	0.0	100.0	356	9.9
Sughd	5.7	9.1	2.8	25.4	42.1	2.0	4.8	8.0	0.1	0.0	100.0	5,500	9.4
DRS	7.3	11.3	3.8	41.6	26.4	0.6	4.3	4.7	0.0	0.0	100.0	4,586	8.4
Khatlon	5.3	10.3	4.0	30.2	40.2	0.5	4.0	5.5	0.0	0.0	100.0	6,902	9.1
FTF districts	5.5	10.6	4.4	29.3	44.1	0.5	2.6	3.0	0.0	0.0	100.0	3,753	9.1
Wealth quintile													
Lowest	7.2	11.9	4.3	36.5	35.7	0.4	1.8	2.1	0.0	0.0	100.0	3,763	8.5
Second	6.2	10.5	3.6	32.2	39.4	0.9	3.6	3.5	0.0	0.0	100.0	3,885	8.9
Middle	6.0	9.5	3.3	31.2	39.5	0.9	4.0	5.5	0.0	0.0	100.0	3,802	9.1
Fourth	5.2	9.4	3.3	29.4	36.9	1.6	5.7	8.5	0.0	0.0	100.0	3,834	9.2
Highest	4.5	9.2	3.0	26.9	28.4	1.5	7.6	18.7	0.2	0.0	100.0	4,060	9.6
Total[4]	5.8	10.1	3.5	31.2	35.9	1.1	4.6	7.8	0.1	0.0	100.0	19,344	9.0

[1] Completed grade 4 at the primary level
[2] Attended or completed the general basic level (grades 5–9) and attended but did not complete the general secondary level (grades 10–11)
[3] Completed grade 11 at the secondary level or completed grade 10 at the secondary level and has a general education school diploma
[4] Total includes 2 women with missing or unknown age.

Table 2.11.2 Educational attainment of the male household population

Percent distribution of the de facto male household population age 6 and over by highest level of schooling attended or completed and median years completed, according to background characteristics, Tajikistan DHS 2023

Background characteristic	No education	Some primary	Completed primary[1]	Some secondary[2]	Completed secondary[3]	Professional primary	Professional middle	Higher	Graduate	Don't know	Total	Number	Median years completed
Age													
6–9	39.8	59.1	0.7	0.4	0.0	0.0	0.0	0.0	0.0	0.0	100.0	2,420	0.4
10–14	0.7	15.7	19.4	64.1	0.2	0.0	0.0	0.0	0.0	0.0	100.0	2,674	4.7
15–19	0.4	0.8	0.0	57.4	32.6	1.2	1.8	5.8	0.0	0.0	100.0	1,740	9.2
20–24	1.1	1.1	0.4	6.3	46.2	2.5	6.3	35.6	0.6	0.0	100.0	1,025	10.9
25–29	0.4	0.7	0.7	9.0	46.9	2.6	5.6	33.6	0.4	0.1	100.0	1,116	10.8
30–34	0.6	0.5	0.1	17.9	43.9	2.3	5.4	28.6	0.6	0.0	100.0	1,158	10.7
35–39	0.8	1.2	1.3	15.3	47.9	2.1	2.9	27.9	0.5	0.2	100.0	1,068	10.6
40–44	0.8	1.6	1.3	12.4	50.9	2.3	2.9	27.8	0.1	0.0	100.0	819	10.6
45–49	0.7	1.0	0.0	9.7	54.3	3.6	5.4	25.1	0.2	0.0	100.0	811	10.6
50–54	0.1	1.1	0.0	7.8	57.3	4.4	7.7	21.3	0.2	0.1	100.0	861	9.9
55–59	0.0	0.6	0.0	5.0	58.1	7.4	9.7	19.2	0.0	0.0	100.0	810	9.8
60–64	0.4	1.2	0.4	7.4	56.3	7.5	8.9	17.9	0.1	0.0	100.0	793	9.8
65+	0.5	1.7	0.8	14.5	46.7	6.1	6.5	22.5	0.6	0.1	100.0	1,070	9.7
Residence													
Urban	5.5	11.3	3.4	21.6	26.0	2.5	3.6	25.7	0.4	0.0	100.0	4,408	9.8
Rural	6.7	12.3	3.6	23.5	35.2	2.4	3.7	12.5	0.1	0.0	100.0	11,957	9.3
Region													
Dushanbe	5.4	11.6	3.2	20.3	19.6	1.7	3.1	34.6	0.4	0.0	100.0	1,744	10.1
GBAO	5.4	8.9	3.3	16.9	27.9	7.9	7.7	21.9	0.0	0.0	100.0	315	10.3
Sughd	5.3	12.0	3.4	23.9	33.0	4.2	3.7	14.2	0.2	0.0	100.0	4,337	9.4
DRS	7.4	11.8	3.5	25.3	30.9	1.8	4.5	14.6	0.2	0.1	100.0	4,017	9.2
Khatlon	6.7	12.4	3.9	21.9	37.9	1.4	3.1	12.6	0.2	0.0	100.0	5,953	9.4
FTF districts	7.6	12.9	3.6	21.0	42.6	1.2	2.7	8.3	0.1	0.0	100.0	3,200	9.4
Wealth quintile													
Lowest	8.0	13.3	4.1	27.6	35.5	1.8	3.0	6.8	0.0	0.1	100.0	3,266	8.9
Second	6.2	12.7	4.4	24.8	35.0	2.8	3.9	10.1	0.0	0.1	100.0	3,108	9.2
Middle	5.9	12.2	3.5	22.1	37.1	2.5	4.0	12.4	0.2	0.0	100.0	3,187	9.5
Fourth	6.5	10.6	2.6	21.3	34.2	2.8	3.7	18.0	0.3	0.0	100.0	3,371	9.6
Highest	5.2	11.2	3.4	19.4	22.4	2.2	4.0	31.6	0.5	0.0	100.0	3,433	10.1
Total	6.4	12.0	3.6	23.0	32.7	2.4	3.7	16.0	0.2	0.0	100.0	16,366	9.4

[1] Completed grade 4 at the primary level
[2] Attended or completed the general basic level (grades 5–9) and attended but did not complete the general secondary level (grades 10–11)
[3] Completed grade 11 at the secondary level or completed grade 10 at the secondary level and has a general education school diploma

Table 2.12 School attendance ratios

Net attendance ratios (NAR), gross attendance ratios (GAR), and out-of-school rates for the de facto household population by sex and level of schooling, and the gender parity index (GPI), according to background characteristics, Tajikistan DHS 2023

Background characteristic	Net attendance ratio[1]				Out-of-school rate[2]			Gross attendance ratio[3]			
	Male	Female	Total	Gender parity index[4]	Male	Female	Total	Male	Female	Total	Gender parity index[4]
					PRIMARY SCHOOL						
Residence											
Urban	88.6	87.0	87.8	0.98	4.9	6.5	5.7	99.2	97.6	98.4	0.98
Rural	87.9	87.9	87.9	1.00	6.3	7.2	6.7	96.8	95.5	96.1	0.99
Region											
Dushanbe	86.0	90.3	88.0	1.05	6.2	5.0	5.6	98.9	103.0	100.8	1.04
GBAO	88.7	88.2	88.5	0.99	6.9	9.4	8.1	102.3	101.9	102.1	1.00
Sughd	89.4	87.9	88.7	0.98	4.8	5.5	5.1	98.7	95.3	97.0	0.97
DRS	86.6	86.4	86.5	1.00	6.8	7.9	7.3	96.1	94.3	95.2	0.98
Khatlon	88.6	87.7	88.2	0.99	6.2	7.8	6.9	96.8	95.8	96.3	0.99
FTF districts	89.9	87.5	88.8	0.97	6.4	7.2	6.8	96.8	95.3	96.1	0.98
Wealth quintile											
Lowest	85.9	87.6	86.7	1.02	8.6	8.8	8.7	95.0	98.0	96.4	1.03
Second	89.6	89.9	89.8	1.00	4.4	5.7	5.0	96.9	95.9	96.4	0.99
Middle	89.4	84.8	87.2	0.95	4.6	7.1	5.8	97.5	91.1	94.5	0.93
Fourth	86.6	88.1	87.4	1.02	7.5	6.6	7.1	97.5	95.7	96.6	0.98
Highest	88.9	87.7	88.3	0.99	4.5	6.5	5.5	100.5	98.8	99.7	0.98
Total	88.1	87.7	87.9	1.00	6.0	7.0	6.5	97.4	96.0	96.7	0.99
					SECONDARY SCHOOL						
Residence											
Urban	89.0	84.1	86.6	0.95	5.1	7.3	6.1	97.1	93.2	95.2	0.96
Rural	90.5	87.1	88.9	0.96	4.7	8.0	6.3	100.3	97.5	98.9	0.97
Region											
Dushanbe	86.9	79.8	83.5	0.92	5.8	7.3	6.5	93.7	86.3	90.2	0.92
GBAO	92.4	88.6	90.4	0.96	3.2	5.8	4.6	97.7	93.5	95.5	0.96
Sughd	90.3	88.7	89.5	0.98	3.9	6.2	5.1	98.8	100.2	99.5	1.01
DRS	90.0	81.5	86.0	0.91	5.5	12.4	8.8	98.5	95.1	96.9	0.97
Khatlon	90.8	89.5	90.2	0.99	4.7	6.1	5.3	102.2	97.4	99.9	0.95
FTF districts	92.9	89.7	91.3	0.97	4.4	7.1	5.7	100.6	97.7	99.2	0.97
Wealth quintile											
Lowest	89.7	85.4	87.7	0.95	5.1	9.1	7.0	100.4	91.7	96.2	0.91
Second	92.7	87.7	90.2	0.95	2.6	7.8	5.2	102.6	95.6	99.1	0.93
Middle	88.7	88.1	88.4	0.99	7.1	7.9	7.5	98.6	100.7	99.6	1.02
Fourth	91.7	87.3	89.7	0.95	3.9	6.9	5.3	99.7	100.3	100.0	1.01
Highest	87.7	83.3	85.5	0.95	5.3	7.1	6.2	95.9	94.4	95.2	0.98
Total	90.1	86.3	88.3	0.96	4.8	7.8	6.2	99.5	96.3	97.9	0.97

[1] The NAR for primary school is the percentage of the primary school-age (7–10 years) population that is attending primary school. The NAR for secondary school is the percentage of the secondary school-age (11–17 years) population that is attending secondary school. By definition, the NAR cannot exceed 100.0.

[2] The out-of-school rate for primary school is the percentage of the primary school-age (7–10 years) population that is not attending any level of education. The out-of-school rate for secondary school is the percentage of the secondary school-age (11–17 years) population that is not attending any level of education.

[3] The GAR for primary school is the total number of primary school students, expressed as a percentage of the official primary school-age population. The GAR for secondary school is the total number of secondary school students, expressed as a percentage of the official secondary school-age population. If there are significant numbers of overage and underage students at a given level of schooling, the GAR can exceed 100.0.

[4] The gender parity index for primary school is the ratio of the primary school NAR (GAR) for females to the NAR (GAR) for males. The gender parity index for secondary school is the ratio of the secondary school NAR (GAR) for females to the NAR (GAR) for males.

Table 2.13 School completion rates

Completion rates for the de facto household population by level of schooling, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Primary school completion rate[1]	Number of children age 13–15 at the beginning of the school year[2]	Lower secondary school completion rate[1]	Number of young people age 18–20 at the beginning of the school year[2]	Upper secondary school completion rate[1]	Number of young people age 20–22 at the beginning of the school year[2]
Sex						
Male	26.3	1,475	25.9	737	38.6	681
Female	25.0	1,241	30.0	800	40.2	696
Residence						
Urban	25.5	726	29.6	452	37.1	379
Rural	25.8	1,990	27.2	1,085	40.3	998
Region						
Dushanbe	23.1	265	31.0	196	36.4	163
GBAO	29.7	43	18.1	11	40.9	14
Sughd	26.2	689	28.8	390	38.8	355
DRS	26.6	684	24.5	326	39.2	278
Khatlon	25.4	1,035	28.8	613	40.7	567
FTF districts	25.7	559	29.8	338	43.1	321
Wealth quintile						
Lowest	27.3	592	25.7	259	37.3	208
Second	27.2	566	27.1	285	41.2	271
Middle	26.3	534	27.3	298	39.0	274
Fourth	24.5	504	26.4	293	42.7	303
Highest	23.3	521	32.1	401	36.9	320
Total	25.7	2,716	27.9	1,537	39.4	1,377

[1] The primary school completion rate is the percentage of children 3–5 years older than the intended age for the last grade of primary school who completed the last grade. The lower secondary school completion rate is the percentage of adolescents 3–5 years older than the intended age for the last grade of lower secondary school who completed the last grade. The upper secondary school completion rate is the percentage of youth 3–5 years older than the intended age for the last grade of upper secondary school who completed the last grade.
[2] The total number of children, adolescents, and youth 3–5 years older than the intended age for the last grade for primary, lower, and upper secondary school, respectively

Table 2.14 Participation rate in organized learning

Percent distribution of children 1 year younger than the official primary school entry age at the beginning of the school year by attendance at an early childhood education program or primary school, and the adjusted net attendance ratio (NAR), according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percent distribution of children attending				Adjusted NAR[1]	Number of children age 6 at the beginning of the school year
	An early childhood education program	Primary school	Neither an early childhood education program nor primary school	Total		
Sex						
Male	5.1	18.7	76.2	100.0	23.8	575
Female	3.3	17.9	78.9	100.0	21.1	531
Residence						
Urban	8.3	22.4	69.4	100.0	30.6	281
Rural	2.8	16.9	80.2	100.0	19.8	826
Region						
Dushanbe	12.7	28.0	59.4	100.0	40.6	103
GBAO	40.4	32.0	27.7	100.0	72.3	18
Sughd	3.5	18.1	78.3	100.0	21.7	287
DRS	4.9	14.7	80.3	100.0	19.7	316
Khatlon	0.2	18.2	81.6	100.0	18.4	382
FTF districts	0.0	18.0	82.0	100.0	18.0	216
Wealth quintile						
Lowest	1.2	19.2	79.6	100.0	20.4	219
Second	2.2	12.2	85.7	100.0	14.3	245
Middle	2.4	14.0	83.6	100.0	16.4	210
Fourth	6.2	22.1	71.8	100.0	28.2	219
Highest	9.5	25.0	65.6	100.0	34.4	213
Total	4.2	18.3	77.5	100.0	22.5	1,107

[1] The adjusted net attendance ratio (NAR) to organized learning is the percentage of children 1 year younger than the official primary school entry age (at the beginning of the school year) who are attending early childhood education or primary school.

Table 2.15 Child discipline

Percentage of children age 1–14 by child disciplining methods experienced during the past month, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage of children age 1–14 who experienced: Only nonviolent discipline	Psychological aggression	Any physical punishment	Severe physical punishment[1]	Any violent discipline method	Number of children age 1–14
Age						
1–2	39.1	45.5	26.9	3.3	47.5	822
3–4	37.1	54.6	38.7	4.9	57.5	784
5–9	35.5	56.9	37.0	7.2	59.2	2,207
10–14	39.4	53.7	32.8	6.4	56.2	1,985
Sex						
Male	35.6	56.0	37.6	7.2	58.4	3,010
Female	39.7	51.6	30.9	4.9	54.0	2,788
Residence						
Urban	38.8	54.1	33.3	5.3	56.2	1,479
Rural	37.2	53.8	34.7	6.4	56.3	4,319
Region						
Dushanbe	40.1	53.8	30.6	3.5	55.6	577
GBAO	29.4	51.7	36.7	4.9	53.7	94
Sughd	54.1	41.3	23.9	4.1	43.4	1,502
DRS	30.9	60.4	37.5	6.3	62.9	1,433
Khatlon	30.3	58.4	40.4	8.0	61.1	2,192
FTF districts	30.8	54.6	31.2	3.4	56.4	1,233
Mother's education						
None/primary	35.1	55.4	31.3	7.4	56.9	349
General basic	31.5	60.7	38.7	7.1	62.9	1,945
General secondary	40.0	51.1	33.7	5.6	53.9	2,473
Professional primary/middle	46.1	47.0	27.0	3.5	48.1	353
Higher	43.8	48.3	30.2	5.5	50.6	543
Missing	40.5	45.1	28.5	5.4	47.0	134
Wealth quintile						
Lowest	28.3	62.6	44.0	9.5	65.3	1,274
Second	35.4	56.8	39.3	6.7	58.8	1,188
Middle	38.6	52.9	30.1	4.2	55.0	1,115
Fourth	47.5	42.6	23.5	4.6	45.5	1,107
Highest	39.6	53.2	33.2	5.0	55.3	1,114
Total	37.6	53.9	34.4	6.1	56.3	5,798

[1] Includes (1) hit or slapped the child on the face, head, or ears and (2) beat up, that is, hit over and over as hard as one could

Table 2.16 Attitudes toward physical punishment

Percentage of respondents to the child discipline module who believe that physical punishment is needed to bring up, raise, or educate a child properly, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage of respondents who believe that a child needs to be physically punished	Number of respondents to child discipline module[1]
Age		
<25	4.5	267
25–34	2.9	1,907
35–49	4.1	2,104
50+	3.9	1,521
Sex		
Male	4.4	440
Female	3.6	5,358
Residence		
Urban	2.4	1,479
Rural	4.1	4,319
Region		
Dushanbe	1.0	577
GBAO	0.3	94
Sughd	4.6	1,502
DRS	7.6	1,433
Khatlon	1.2	2,192
FTF districts	0.9	1,233
Education		
None/primary	4.3	284
General basic	5.4	1,748
General secondary	2.5	2,809
Professional primary/middle	2.9	389
Higher	4.0	567
Missing	*	1
Wealth quintile		
Lowest	3.2	1,274
Second	3.5	1,188
Middle	3.8	1,115
Fourth	5.8	1,107
Highest	2.0	1,114
Total	3.7	5,798

Note: An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

[1] The denominator is respondents to the Household Questionnaire living in households where a child age 1–14 was randomly selected for the child discipline module.

Table 2.17 Labor migration

Percentage of households with members working abroad in the past 12 months for 3 or more months; among households with members working abroad, percent distribution by the most recent country of work; and median numbers of women and men who worked abroad, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage of households with labor migrants working abroad for 3 or more months in the past 12 months	Number of households	Among households with labor migrants in the past 12 months, percentage who worked in specific country: Russia	Kazakhstan	Other former USSR	Middle East/ Dubai	Europe	Other	Don't know	Total	Median number of women who worked abroad in the past 12 months	Median number of men who worked abroad in the past 12 months	Number of households in which members worked abroad for 3 or more months in the past 12 months
Residence													
Urban	27.4	2,393	93.4	0.8	0.0	0.8	3.7	1.2	0.1	100.0	1.7	1.6	655
Rural	42.9	5,642	97.7	1.4	0.1	0.0	0.4	0.4	0.0	100.0	1.6	1.7	2,423
Region													
Dushanbe	21.6	911	89.3	0.8	0.0	1.1	6.7	1.7	0.2	100.0	1.7	1.6	197
GBAO	52.5	180	94.3	0.5	0.3	0.2	1.9	2.8	0.0	100.0	1.8	1.8	94
Sughd	47.0	2,322	97.8	0.5	0.0	0.2	0.8	0.6	0.0	100.0	1.6	1.7	1,092
DRS	37.4	1,849	97.2	1.1	0.0	0.1	1.1	0.5	0.0	100.0	1.6	1.7	691
Khatlon	36.2	2,773	97.0	2.4	0.2	0.1	0.4	0.1	0.0	100.0	1.7	1.7	1,004
FTF districts	41.9	1,510	96.4	3.1	0.3	0.0	0.2	0.0	0.0	100.0	1.7	1.7	633
Wealth quintile													
Lowest	39.9	1,521	98.8	1.0	0.0	0.0	0.0	0.2	0.0	100.0	1.7	1.7	607
Second	44.8	1,525	96.8	2.5	0.0	0.0	0.1	0.5	0.0	100.0	1.6	1.7	683
Middle	45.7	1,540	98.0	1.2	0.0	0.1	0.3	0.4	0.0	100.0	1.6	1.7	704
Fourth	38.9	1,572	96.4	0.7	0.3	0.0	2.1	0.5	0.0	100.0	1.7	1.8	612
Highest	25.1	1,876	92.7	0.6	0.0	1.2	4.0	1.3	0.1	100.0	1.7	1.6	472
Total	38.3	8,035	96.8	1.3	0.1	0.2	1.1	0.6	0.0	100.0	1.7	1.7	3,078

Table 2.18 Money or parcels from abroad

Percentage of households that received money or parcels from abroad in the past 12 months, and among households that received money or parcels, percent distribution by the most recent country from where they received money or parcels, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage of house-holds that received money or parcels from abroad in the past 12 months	Number of households	Among households that received money or parcels from abroad in the past 12 months, percent distribution that received money or parcels the most recent time from specific countries:							Number of households that received money or parcels from abroad in the past 12 months
			Russia	Kazakhstan	Other former USSR	Middle East/Dubai	Europe	Other	Total	
Residence										
Urban	27.1	2,393	93.4	0.8	0.0	0.8	3.4	1.5	100.0	649
Rural	42.4	5,642	97.8	1.4	0.1	0.1	0.5	0.1	100.0	2,391
Region										
Dushanbe	20.9	911	90.5	1.1	0.0	1.0	5.5	1.8	100.0	191
GBAO	48.6	180	94.7	0.4	0.3	0.2	1.6	2.8	100.0	87
Sughd	44.3	2,322	98.0	0.5	0.0	0.2	0.8	0.4	100.0	1,029
DRS	37.6	1,849	97.1	1.0	0.0	0.3	1.5	0.2	100.0	694
Khatlon	37.4	2,773	97.0	2.4	0.2	0.1	0.3	0.1	100.0	1,038
FTF districts	42.1	1,510	96.7	2.8	0.3	0.0	0.1	0.1	100.0	635
Wealth quintile										
Lowest	39.9	1,521	98.6	1.0	0.0	0.0	0.2	0.1	100.0	608
Second	44.8	1,525	97.7	2.1	0.0	0.0	0.2	0.0	100.0	683
Middle	45.2	1,540	97.5	1.6	0.0	0.3	0.2	0.4	100.0	696
Fourth	37.4	1,572	96.3	0.8	0.3	0.0	2.2	0.5	100.0	588
Highest	24.8	1,876	93.2	0.7	0.0	1.1	3.7	1.3	100.0	465
Total	37.8	8,035	96.9	1.3	0.1	0.2	1.1	0.4	100.0	3,040

Table 2.19 Remittances received from abroad

Among households that received money or parcels from abroad in the past 12 months, percent distribution reporting that, as a result of the remittances received, their financial situation improved substantially, improved slightly, or did not change, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percent distribution of households by effect of received remittances on their financial situation:					Number of households that received money or parcels from abroad in the past 12 months
	Financial situation improved substantially	Financial situation improved slightly	Financial situation did not change	Don't know	Total	
Residence						
Urban	39.3	56.6	3.5	0.5	100.0	649
Rural	43.8	51.2	3.4	1.5	100.0	2,391
Region						
Dushanbe	25.5	68.7	5.4	0.4	100.0	191
GBAO	28.3	70.7	0.7	0.4	100.0	87
Sughd	44.1	53.8	2.1	0.0	100.0	1,029
DRS	50.1	37.6	6.7	5.6	100.0	694
Khatlon	41.2	56.3	2.4	0.0	100.0	1,038
FTF districts	42.4	54.7	2.8	0.0	100.0	635
Wealth quintile						
Lowest	35.0	60.9	3.9	0.2	100.0	608
Second	39.1	56.1	3.4	1.4	100.0	683
Middle	44.7	50.7	2.8	1.9	100.0	696
Fourth	52.2	42.0	3.8	2.1	100.0	588
Highest	44.3	51.5	3.6	0.7	100.0	465
Total	42.9	52.4	3.4	1.3	100.0	3,040

CHARACTERISTICS OF RESPONDENTS 3

Key Findings

- ***Education and literacy:*** 20% of women have completed higher than a secondary education, and 96% are literate.
- ***Exposure to mass media:*** 44% of women have used the internet in the past month. Television is the most commonly accessed form of weekly media (66%).
- ***Employment:*** 22% of women are currently employed, a decrease from 2017.
- ***Occupation:*** Nearly one in four employed women work in agriculture, and one in five work in professional/technical/managerial roles.
- ***Place of birth:*** 85% of women in Tajikistan have always lived in their current place of residence.
- ***Diabetes and hypertension:*** 13% of women have been told by a health care provider that they have high blood pressure or hypertension and 2% that they have high blood sugar or diabetes.

This chapter presents information on the demographic and socioeconomic characteristics of the survey respondents such as age, education, literacy, marital status, employment, occupation, wealth, residence at birth, current place of residence, and recent migration. The chapter also presents information on respondents' use of tobacco and alcohol and whether they have had their blood pressure and blood sugar measured and whether they have been diagnosed with hypertension and diabetes. Together, this information is useful for understanding the factors that affect use of reproductive health services, contraceptive use, and other health behaviors.

3.1 BASIC CHARACTERISTICS OF SURVEY RESPONDENTS

The 2023 TjDHS interviewed 9,879 women age 15–49 (**Table 3.1**). Three quarters of women (75%) are currently married or living together with a man as though married, while 20% of women have never been married. Five percent of women are divorced, separated, or widowed. Nearly three quarters of respondents (73%) live in rural areas. Approximately two-thirds live in either Khatlon (36%) or Sughd (28%), and 24% live in Districts of Republican Subordination (DRS). Dushanbe is home to 11% of the TjDHS respondents, and 2% live in Gorno-Badakhshan Autonomous Oblast (GBAO).

3.2 EDUCATION AND LITERACY

Literacy

Respondents who had attended higher than secondary school were assumed to be literate. All other respondents were considered literate if they could read aloud all or part of a sentence shown to them.

Sample: Women age 15–49

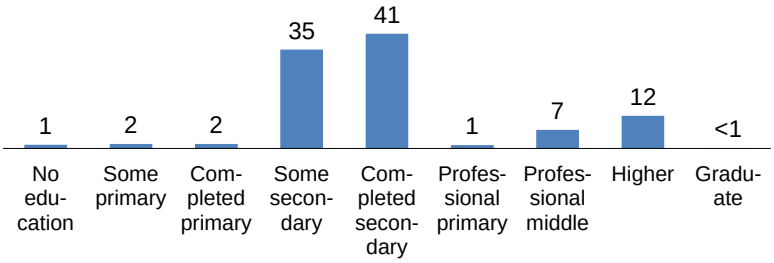
Educational attainment is high in Tajikistan. The majority of women age 15–49 (96%) have some secondary-level education or higher. Only 1% of respondents have no education at all, and 3% have attended only primary school (**Table 3.2**).

Over half of women in Tajikistan (60%) have completed a secondary or higher education (**Figure 3.1**). Eight percent of women have some professional primary or professional middle education, and 12% have a higher or graduate education. Women have completed a median of 10.2 years of schooling (**Table 3.2**).

The literacy rate is high (96%) among women in Tajikistan (**Table 3.3**). Only 3% of women cannot read at all.

Figure 3.1 Education of survey respondents

Percent distribution of women age 15–49 by highest level of schooling attended or completed



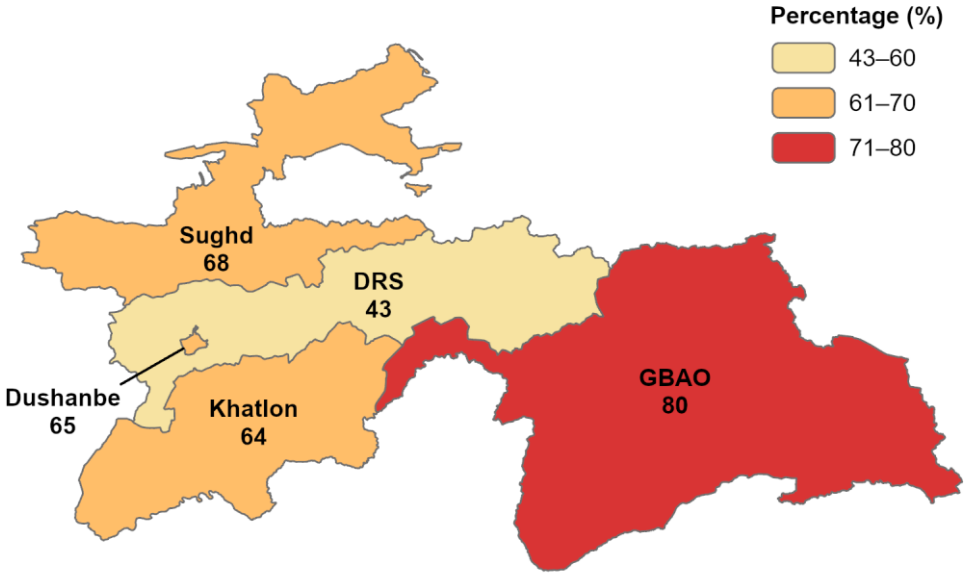
Trends: The median number of years of schooling completed by women age 15–49 has increased slightly since the 2012 and 2017 TjDHS surveys, from 9.4 years and 9.8 years, respectively, to 10.2 years. The proportion of women with no education has decreased slightly, from 2% in both 2012 and 2017 to 1% in 2023.

Patterns by background characteristics

- Twenty-one percent of women in urban areas have attended or completed higher education, as compared with only 8% of those in rural areas.
- By region, the percentage of women with a secondary education or higher is lowest in DRS (43%) and highest in GBAO (80%) (**Map 3.1**).

Map 3.1 Secondary or higher education by region

Percentage of women age 15–49 with completed secondary, professional primary/middle, or higher education



- Women living in GBAO and Dushanbe are more likely to obtain a higher education (31% and 27%, respectively) than women living in the other regions (7–12%).
- Median number of years of schooling is lowest among women in DRS (8.8 years) and highest among women in GBAO (10.8 years).
- Women from the wealthiest households have completed a median of 10.5 years of schooling, while women from the poorest households have completed a median of 9.4 years.
- Women in Khatlon are four times as likely to be illiterate as women living in GBAO (4% and 1%, respectively).
- The percentage of women who are literate increases with increasing wealth, from 92% among those in the lowest wealth quintile to 99% among those in the highest quintile.

3.3 Mass Media Exposure and Internet Usage

Exposure to mass media

Respondents were asked how often they read a newspaper, listened to the radio, or watched television. Those who responded *at least once a week* are considered regularly exposed to that form of media.

Sample: Women age 15–49

Use of the internet

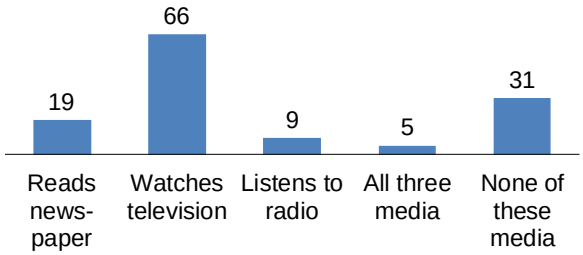
Respondents were asked if they have ever used the internet from any device, if they used the internet in the past 12 months, and, if so, how often they used it during the past month.

Sample: Women age 15–49

Data on women's exposure to media are useful for understanding which women are likely to be reached by media campaigns disseminating family planning, health, and other information. Television is the form of media most commonly accessed at least weekly (66%) among women age 15–49 in Tajikistan (**Table 3.4**). Women have considerably less regular exposure to the other two forms of media: 19% read a newspaper at least once a week, while 9% listen to the radio at least once a week (**Table 3.4** and **Figure 3.2**). Nearly a third of women (31%) do not access any of the three forms of media at least once a week.

Figure 3.2 **Exposure to mass media**

Percentage of women age 15–49 who are exposed to media on a weekly basis



Less than half of women report having used the internet in the past 12 months (44%) (**Table 3.5**). Among women who have used the internet in the past 12 months, the majority used it almost every day (71%), while 22% used it at least once a week.

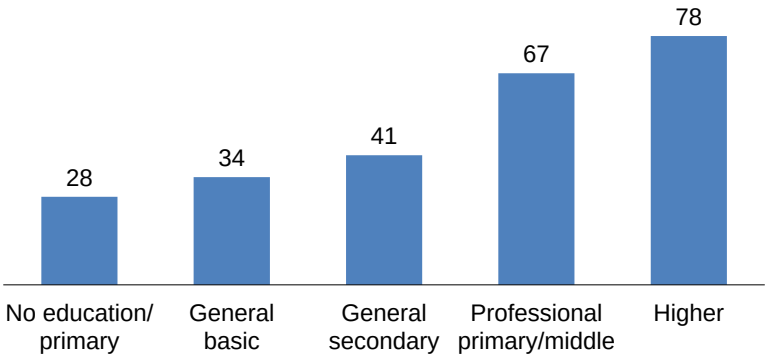
Trends: Weekly television exposure among women has decreased over the past 5 years, from 87% in 2017 to 66% in 2023. Radio exposure has remained low over the past decade but has also decreased slightly, from 14% in 2017 to 9% in 2023. Newspaper exposure, however, remained the same in 2023 as in 2017 (19%). The proportion of women with no access to any of these three forms of media in a given week nearly tripled during this period, from 12% to 31%, while the proportion with weekly access to all three forms of media fell from 8% to 5%. However, the proportion of women who reported using the internet in the past 12 months has almost quadrupled, from 12% to 44%.

Patterns by background characteristics

- Women age 15–19 are more likely to read a newspaper once a week (34%) than women in the other age groups (14–18%).
- Urban women are twice as likely as rural women to access all three forms of media once a week (8% and 4%, respectively).
- One-third of rural women (33%) access none of the three forms of media in a given week, as compared with about one quarter (24%) of urban women.
- Exposure to the radio, television, and newspapers increases greatly with increasing education and household wealth.
- Urban women are more likely than rural women to have used the internet in the past 12 months (58% and 39%, respectively).
- Women in GBAO are nearly twice as likely as those in Khatlon to have used the internet in the past 12 months (66% and 34%, respectively).
- Internet use increases greatly with increasing household wealth and education and generally increases with age (**Figure 3.3**).

Figure 3.3 **Internet usage by education**

Percentage of women age 15–49 who used the internet in the past 12 months



3.4 EMPLOYMENT

Currently employed
Respondents who were employed in the 7 days before the survey.
Sample: Women age 15–49

One in five women (22%) age 15–49 in Tajikistan are currently employed (**Table 3.6**). Only 2% of women who were employed in the 12 months preceding the survey are not currently employed. However, over three quarters (77%) of women were not employed in the 12 months preceding the survey.

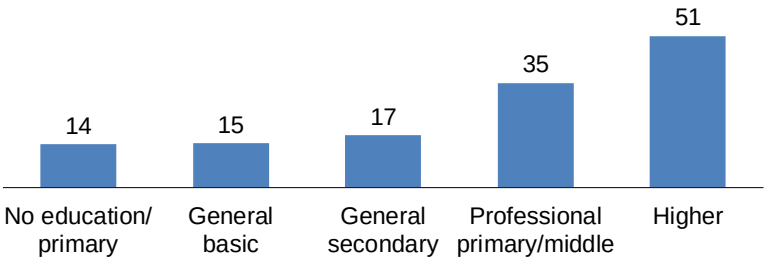
Trends: The percentage of women who are currently employed has decreased over the past decade, from 27% in 2012 and 25% in 2017 to 22% in 2023. The percentage of women who have not worked in the past 12 months has increased during the same period, from 68% in 2012 to 75% in 2017 and 77% in 2023.

Patterns by background characteristics

- Twenty-nine percent of women living in urban areas are currently employed, as compared with only 19% of those living in rural areas.
- The proportion of women who are currently employed is highest in GBAO (37%) and lowest in DRS (13%).
- The proportion of currently employed women increases steadily with increasing education, from 14% among those with no education or a primary education to 51% among those with a higher education (**Figure 3.4**).

Figure 3.4 Employment status by education

Percentage of women age 15–49 who are currently employed



- Similarly, the proportion of currently employed women increases from 16% among those in the lowest wealth quintile to 31% among those in the highest quintile.

3.5 OCCUPATION

Occupation

Categorized as professional/technical/managerial, clerical, sales and services, skilled manual, unskilled manual, domestic service, agriculture, and other.

Sample: Women age 15–49 who were currently employed or had worked in the 12 months before the survey

Women who were employed in the 12 months preceding the survey were most likely to work in agriculture (24%); 22% were employed in professional, technical, or managerial positions, while 10% were employed in unskilled labor (**Table 3.7** and **Figure 3.5**). Among women who were employed in the 12 months preceding the survey, 81% are paid in cash only, and 5% are paid in cash and in-kind. Around 1 in 7 women are not paid (12%), and 2% receive only in-kind payments. Forty-five percent of women are employed by a nonrelative, 39% work for a family member, and 16% are self-employed (**Table 3.8**).

Figure 3.5 Occupation

Percentage of women age 15–49 employed in the 12 months before the survey by occupation

Patterns by background characteristics

- Women age 15–19 are more likely to have worked in agriculture (50%) than women in older age groups (15–25%) and less likely to have worked in professional/technical/ managerial occupations (5% versus 19–30%).

- Urban women (28%), women from GBAO (48%), women with a higher education (67%), and women in the highest wealth quintile (30%) are most likely to be employed in professional, technical, or managerial occupations.
- Agricultural employment is far more common among women in Sughd (38%) and Khatlon (26%) than among women in the other regions (6% or less).
- In general, the proportion of women working in professional/technical/managerial occupations increases with increasing education and household wealth.
- The proportion of women working in agriculture decreases with increasing household wealth.
- As expected, women who work in nonagricultural jobs are far more likely to be paid in cash for the work they do (93%) than women working in agricultural jobs (45%). Over one-third of women employed in agriculture are not paid at all for their work (37%).
- Women who work in agriculture are more likely to be employed by family members (53%) than to be employed by non-family members (37%) or to be self-employed (9%).

3.6 Tobacco Use

The 2023 TjDHS included questions designed to assess the prevalence of tobacco use among women age 15–49. Tobacco use is rare among women in Tajikistan; only 2% reported that they regularly use tobacco (**Tables 3.9**, **3.10**, and **3.11**).

Trends: Tobacco use has been low among women in Tajikistan over the past decade (less than 1% in 2012 and 1% in 2017) but increased slightly to 2% in 2023.

3.7 Alcohol Consumption

The 2023 TjDHS included questions designed to assess the prevalence of alcohol consumption among women age 15–49. Alcohol consumption is very rare among women in Tajikistan; less than 1% reported consuming any alcohol in the past month (data not shown).

3.8 Place of Birth and Recent Migration

Recent migration

Percentage of respondents who were born outside of their current place of residence and moved to their current place of residence in the 5 years preceding the survey.

Sample: Women age 15–49 who were born outside of their current place of residence

The vast majority of women in Tajikistan (85%) have always lived in their current place of residence; only 14% were born in Tajikistan but outside of their current place of residence, and less than 1% were born outside of Tajikistan (**Table 3.12**). Among women who were born outside of their current place of residence, 25% moved to their current place of residence in the past 5 years.

Patterns by background characteristics

- Ninety-eight percent of women in GBAO have always lived in their current place of residence, as compared with 70% of women in Dushanbe.

- The proportion of women who have always lived in the same location decreases with increasing wealth. Conversely, the proportion of women who were born in Tajikistan but outside of their current residence increases with increasing wealth.

- The majority of women younger than age 25 (60% or more) who were born outside of their current place of residence moved there within the past 5 years.

3.8.1 Type of Migration

Table 3.13 shows the type of migration among women who migrated to their current place of residence in the past 5 years. Thirty-one percent of migration is rural to rural, 27% is urban to urban, 26% is urban to rural, and 16% is rural to urban.

3.8.2 Reason for Migration

Women most commonly migrate because of marriage formation (70%), followed by family-related reasons (13%) (**Table 3.14**). Almost 1 in 10 women move due to forced displacement (8%). Employment (6%) and education or training (3%) are less common reasons for migration.

Patterns by background characteristics

- The proportion of women who migrate because of education is highest among those age 15–19 (22%).

- The vast majority of migration to rural areas is due to marriage formation: 90% of urban to rural migration and 78% of rural to rural migration are due to marriage formation.

- Migration due to employment is higher in the highest wealth quintile (16%) than in the other wealth quintiles (2% or less).

- The proportion of women who migrate because of marriage formation decreases with increasing wealth, from 88% among those in the lowest wealth quintile to 50% among those in the highest wealth quintile.

3.9 History of Hypertension and Diabetes

3.9.1 History of Hypertension

High blood pressure, known as hypertension, is a chronic medical condition in which the force of the blood against the artery walls is high enough that it damages the artery walls, leading to health problems. Hypertension is a major risk factor for kidney disease and cardiovascular diseases such as stroke and ischemic heart disease.

In Tajikistan, 68% of women have ever had their blood pressure measured by a doctor or other health care worker. Thirteen percent reported that they have ever been told by a doctor or health care worker that they have high blood pressure or hypertension. Among women who have been told that they have high blood pressure or hypertension, 68% received that information in the past 3 years (**Table 3.15**).

Patterns by background characteristics

- The percentage of women whose blood pressure has ever been measured increases from 31% among those age 15–19 to over 70% among those in the older age groups. Similarly, the percentage of women who were told by a doctor or other health care worker that they have high blood pressure or hypertension increases from 2% among those age 15–19 to 23% among those age 45 and older.

- A higher percentage of women in urban areas (74%) than rural areas (66%) have had their blood pressure measured.

- The percentage of women whose blood pressure has ever been measured increases with increasing household wealth, from 56% in the lowest wealth quintile to 79% in the highest wealth quintile. Similarly, 10% of women in the lowest wealth quintile were told by a doctor or other health care worker that they have high blood pressure, as compared with 16% of women in the highest quintile.

- Testing of blood pressure is highest in Sughd (84%), and self-reported prevalence of high blood pressure is highest in Dushanbe (19%).

3.9.2 History of Diabetes

Diabetes mellitus is a metabolic disorder characterized by chronic hyperglycemia (raised blood sugar levels) that occurs because of defects in insulin secretion, insulin action, or both (Expert Committee on the Diagnosis and Classification of Diabetes Mellitus 1997).

In Tajikistan, 26% of women have ever had their blood sugar measured by a doctor or other health care worker. Overall, the percentage of women who reported that they have ever been told by a doctor or other health care worker that they have high blood sugar or diabetes is low (2%). Among women who have been told that they have high blood sugar or diabetes, 63% received that information in the past 3 years (**Table 3.16**).

Patterns by background characteristics

- The percentage of women whose blood sugar has ever been measured increases with increasing age, from 10% among those age 15–19 to 39% among those age 45 and older. Similarly, the percentage of women who were told by a doctor or other health care worker that they have high blood sugar or diabetes increases from 1% or less among those age 15–34 to 5% among those age 45 and older.

- A much higher percentage of women in urban areas (35%) than rural areas (23%) have had their blood sugar measured. The self-reported prevalence of diabetes is the same in urban and rural areas (2%).

- The percentage of women whose blood sugar has ever been measured increases with increasing household wealth (from 16% in the lowest wealth quintile to 40% in the highest wealth quintile), while the percentage of women who were told by a doctor or other health care worker that they have high blood sugar or diabetes is relatively consistent across wealth quintiles (1–2%).

- Testing of blood sugar and self-reported prevalence of high blood sugar/diabetes are higher in Dushanbe (51% and 3%, respectively) than in the other regions.

LIST OF TABLES

For more information on the characteristics of survey respondents, see the following tables:

- **Table 3.1 Background characteristics of respondents**
- **Table 3.2 Educational attainment**
- **Table 3.3 Literacy**
- **Table 3.4 Exposure to mass media**
- **Table 3.5 Internet usage**
- **Table 3.6 Employment status**
- **Table 3.7 Occupation**
- **Table 3.8 Type of employment**
- **Table 3.9 Tobacco smoking**
- **Table 3.10 Smokeless tobacco use and any tobacco use**
- **Table 3.11 Any tobacco use according to background characteristics**
- **Table 3.12 Place of birth and recent migration**
- **Table 3.13 Type of migration**
- **Table 3.14 Reason for migration**
- **Table 3.15 History of hypertension**
- **Table 3.16 History of diabetes**

Table 3.1 Background characteristics of respondents

Percent distribution of women age 15–49 by selected background characteristics, Tajikistan DHS 2023

Background characteristic	Weighted percent	Weighted number	Unweighted number
Age			
15–19	17.3	1,710	1,714
20–24	16.4	1,616	1,566
25–29	15.8	1,559	1,508
30–34	15.6	1,545	1,518
35–39	14.5	1,435	1,464
40–44	11.1	1,096	1,154
45–49	9.3	917	955
Self-reported health status			
Very good	20.8	2,059	1,946
Good	62.7	6,193	6,009
Moderate	14.6	1,442	1,732
Bad	1.8	173	181
Very bad	0.1	12	11
Marital status			
Never married	19.9	1,964	2,107
Married	74.4	7,349	7,151
Living together	0.4	43	52
Divorced/separated	3.9	385	412
Widowed	1.4	137	157
Residence			
Urban	27.4	2,705	4,218
Rural	72.6	7,174	5,661
Region			
Dushanbe	10.9	1,077	2,006
GBAO	1.6	157	815
Sughd	28.1	2,780	2,117
DRS	23.9	2,356	2,277
Khatlon	35.5	3,509	2,664
FTF districts	19.6	1,937	1,354
Education			
No education	1.4	133	118
Primary	3.1	310	279
General basic	33.1	3,271	3,153
General secondary	42.8	4,230	3,882
Professional primary	1.2	121	145
Professional middle	6.6	656	757
Higher	11.7	1,157	1,545
Wealth quintile			
Lowest	18.6	1,842	1,636
Second	19.9	1,967	1,594
Middle	19.9	1,966	1,603
Fourth	19.9	1,964	1,756
Highest	21.7	2,140	3,290
Total	100.0	9,879	9,879

Note: Education categories refer to the highest level of education attended, whether or not that level was completed.

Table 3.2 Educational attainment

Percent distribution of women age 15–49 by highest level of schooling attended or completed, and median years completed, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Highest level of schooling									Total	Median years completed	Number of women
	No education	Some primary	Completed primary[1]	Some secondary[2]	Completed secondary[3]	Professional primary	Professional middle	Higher	Graduate			
Age												
15–24	1.1	0.8	0.7	38.4	37.2	1.5	8.4	11.7	0.1	100.0	10.2	3,327
15–19	1.0	0.5	0.4	56.9	27.9	1.6	5.8	5.9	0.0	100.0	9.0	1,710
20–24	1.2	1.1	1.1	18.8	47.1	1.4	11.2	17.9	0.2	100.0	10.6	1,616
25–29	1.6	1.0	1.6	29.1	44.5	0.9	7.8	13.4	0.0	100.0	10.4	1,559
30–34	1.8	1.8	2.9	36.1	39.1	1.4	5.3	11.2	0.3	100.0	10.2	1,545
35–39	1.6	3.5	3.2	38.9	36.7	0.6	4.8	10.7	0.1	100.0	10.0	1,435
40–44	1.5	1.9	1.4	37.0	40.7	1.0	5.0	11.4	0.0	100.0	10.1	1,096
45–49	0.4	1.1	0.3	23.9	56.7	1.6	5.4	10.4	0.2	100.0	10.1	917
Residence												
Urban	1.4	1.3	1.3	31.7	31.8	1.7	9.5	21.0	0.3	100.0	10.4	2,705
Rural	1.3	1.6	1.7	36.4	44.2	1.1	5.6	8.1	0.0	100.0	10.1	7,174
Region												
Dushanbe	0.5	2.0	1.3	30.8	27.4	1.2	9.5	27.0	0.3	100.0	10.5	1,077
GBAO	0.1	0.2	0.3	19.3	35.8	3.5	9.8	30.7	0.2	100.0	10.8	157
Sughd	1.2	1.2	0.7	28.6	47.1	2.3	6.5	12.3	0.2	100.0	10.3	2,780
DRS	1.8	2.0	1.9	51.7	28.9	0.8	6.1	6.7	0.0	100.0	8.8	2,356
Khatlon	1.4	1.4	2.3	31.3	48.1	0.6	6.1	8.8	0.0	100.0	10.2	3,509
FTF districts	1.8	1.3	2.8	30.3	54.9	0.4	4.0	4.4	0.0	100.0	10.2	1,937
Wealth quintile												
Lowest	3.0	2.6	1.9	42.3	43.7	0.3	2.6	3.5	0.0	100.0	9.4	1,842
Second	1.3	1.9	2.1	36.8	45.3	1.1	5.7	5.8	0.0	100.0	10.1	1,967
Middle	1.1	1.5	1.9	35.3	44.6	1.2	5.8	8.6	0.0	100.0	10.1	1,966
Fourth	0.8	0.8	1.1	32.9	41.1	1.9	8.3	13.0	0.1	100.0	10.3	1,964
Highest	0.7	1.1	0.9	29.4	30.3	1.5	10.2	25.4	0.4	100.0	10.5	2,140
Total	1.4	1.5	1.6	35.2	40.8	1.2	6.6	11.6	0.1	100.0	10.2	9,879

[1] Completed Grade 4 at the primary level
[2] Attended or completed the general basic level (Grades 5–9) and attended but did not complete the general secondary level (Grades 10–11)
[3] Completed Grade 11 at the secondary level or completed Grade 10 at the secondary level and has a general education school diploma (“attestat” as in older Soviet educational system terminology)

Table 3.3 Literacy

Percent distribution of women age 15–49 by level of schooling attended and level of literacy, and percentage literate, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Higher than secondary schooling	No schooling, primary or secondary school: Can read a whole sentence	Can read part of a sentence	Cannot read at all	No card with required language	Blind/ visually impaired	Total	Percent-age literate[1]	Number of women
Age									
15–24	21.7	69.5	7.0	1.6	0.0	0.1	100.0	98.3	3,327
15–19	13.2	81.1	4.8	0.9	0.0	0.0	100.0	99.1	1,710
20–24	30.7	57.3	9.3	2.4	0.0	0.3	100.0	97.4	1,616
25–29	22.2	59.0	15.2	3.6	0.1	0.0	100.0	96.3	1,559
30–34	18.2	58.3	17.5	5.4	0.4	0.2	100.0	94.1	1,545
35–39	16.2	60.1	17.0	6.3	0.2	0.2	100.0	93.3	1,435
40–44	17.4	65.4	14.3	2.7	0.1	0.0	100.0	97.1	1,096
45–49	17.6	65.4	14.4	2.1	0.4	0.1	100.0	97.4	917
Residence									
Urban	32.5	53.5	11.3	2.4	0.3	0.1	100.0	97.2	2,705
Rural	14.7	67.8	13.5	3.8	0.1	0.1	100.0	96.0	7,174
Region									
Dushanbe	38.1	46.3	13.7	1.8	0.0	0.1	100.0	98.1	1,077
GBAO	44.2	48.3	6.5	1.1	0.0	0.0	100.0	98.9	157
Sughd	21.3	64.2	10.9	2.8	0.5	0.3	100.0	96.3	2,780
DRS	13.6	72.3	10.3	3.8	0.0	0.0	100.0	96.1	2,356
Khatlon	15.5	64.2	16.2	4.1	0.0	0.0	100.0	95.9	3,509
FTF districts	8.8	68.8	17.3	5.1	0.0	0.0	100.0	94.9	1,937
Wealth quintile									
Lowest	6.5	61.9	23.4	7.9	0.2	0.2	100.0	91.7	1,842
Second	12.6	68.7	14.4	4.0	0.2	0.1	100.0	95.7	1,967
Middle	15.6	70.9	10.6	2.5	0.3	0.1	100.0	97.1	1,966
Fourth	23.2	67.0	8.1	1.6	0.0	0.1	100.0	98.4	1,964
Highest	37.6	51.9	8.9	1.3	0.1	0.1	100.0	98.5	2,140
Total	19.6	63.9	12.9	3.4	0.2	0.1	100.0	96.4	9,879

[1] Refers to women who attended schooling higher than the secondary level and women with less schooling who can read a whole sentence or part of a sentence

Table 3.4 Exposure to mass media

Percentage of women age 15–49 who are exposed to specific media on a weekly basis, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Reads a newspaper at least once a week	Watches television at least once a week	Listens to the radio at least once a week	Accesses all three media at least once a week	Accesses none of the three media at least once a week	Number of women
Age						
15–19	33.9	72.3	11.1	7.9	24.2	1,710
20–24	18.4	66.6	9.7	6.1	30.5	1,616
25–29	14.3	65.4	8.1	5.0	32.5	1,559
30–34	13.5	63.7	8.1	4.9	33.7	1,545
35–39	14.3	62.8	7.3	4.0	34.6	1,435
40–44	18.0	64.3	8.7	4.6	32.7	1,096
45–49	18.2	68.3	9.6	4.7	29.5	917
Residence						
Urban	26.1	71.3	12.0	8.2	24.4	2,705
Rural	16.3	64.4	7.9	4.4	33.4	7,174
Region						
Dushanbe	35.3	74.2	13.6	9.6	18.8	1,077
GBAO	36.5	88.3	6.7	4.9	8.8	157
Sughd	23.8	71.6	12.7	8.5	26.1	2,780
DRS	19.2	63.7	9.1	3.5	32.8	2,356
Khatlon	9.3	60.3	4.6	3.0	38.3	3,509
FTF districts	9.5	56.1	4.2	3.3	42.9	1,937
Education						
None/primary	7.8	45.3	5.4	3.8	53.8	443
General basic	16.4	64.0	7.2	3.2	33.7	3,271
General secondary	14.1	65.7	7.0	4.2	32.2	4,230
Professional primary/ middle	25.9	72.2	12.9	9.3	24.4	778
Higher	44.1	79.1	20.2	14.4	14.7	1,157
Wealth quintile						
Lowest	10.0	54.5	3.2	1.6	43.4	1,842
Second	13.7	63.5	4.7	3.0	34.3	1,967
Middle	17.7	65.2	9.2	5.5	32.5	1,966
Fourth	21.9	70.6	13.1	7.3	27.0	1,964
Highest	30.2	75.9	13.9	9.3	19.5	2,140
Total	19.0	66.3	9.0	5.4	31.0	9,879

Table 3.5 Internet usage

Percentage of women age 15–49 who have ever used the internet and percentage who have used the internet in the past 12 months, and among women who have used the internet in the past 12 months, percent distribution by frequency of internet use in the past month, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Ever used the internet	Used the internet in the past 12 months	Number of women	Among women who have used the internet in the past 12 months, percentage who, in the last month, used the internet: Almost every day	At least once a week	Less than once a week	Not at all	Total	Number of women
Age									
15–19	29.3	28.5	1,710	66.7	22.6	10.7	0.1	100.0	487
20–24	44.0	43.0	1,616	72.9	18.7	8.0	0.3	100.0	696
25–29	45.1	43.6	1,559	74.4	19.9	5.8	0.0	100.0	680
30–34	51.2	49.8	1,545	72.9	19.9	6.8	0.5	100.0	770
35–39	51.9	50.4	1,435	69.7	25.1	4.8	0.4	100.0	722
40–44	52.6	51.7	1,096	72.9	22.3	4.6	0.2	100.0	567
45–49	51.9	50.2	917	67.6	24.4	7.6	0.4	100.0	461
Residence									
Urban	59.6	57.7	2,705	75.6	19.6	4.4	0.4	100.0	1,562
Rural	40.3	39.3	7,174	69.0	22.8	8.0	0.2	100.0	2,821
Region									
Dushanbe	67.6	63.8	1,077	78.4	17.9	3.5	0.2	100.0	688
GBAO	66.2	66.2	157	80.2	14.9	4.9	0.0	100.0	104
Sughd	55.7	54.3	2,780	62.1	26.6	10.9	0.4	100.0	1,508
DRS	38.3	37.8	2,356	78.5	14.4	7.0	0.0	100.0	890
Khatlon	34.7	34.0	3,509	72.8	23.5	3.3	0.4	100.0	1,192
FTF districts	35.3	34.5	1,937	72.6	23.8	3.1	0.4	100.0	669
Education									
None/primary	28.4	27.7	443	70.7	22.7	6.6	0.0	100.0	123
General basic	35.0	33.9	3,271	69.4	21.0	9.1	0.6	100.0	1,109
General secondary	42.1	40.8	4,230	67.3	25.6	7.0	0.2	100.0	1,727
Professional primary/ middle	67.9	66.6	778	75.8	18.7	5.5	0.0	100.0	518
Higher	79.8	78.3	1,157	79.1	16.5	4.1	0.3	100.0	906
Wealth quintile									
Lowest	22.4	21.5	1,842	69.3	22.6	7.7	0.4	100.0	396
Second	36.6	35.8	1,967	65.1	25.0	9.5	0.4	100.0	705
Middle	43.1	42.1	1,966	72.3	21.2	6.2	0.3	100.0	828
Fourth	53.6	52.4	1,964	69.2	23.1	7.8	0.0	100.0	1,029
Highest	68.6	66.6	2,140	76.1	18.9	4.7	0.3	100.0	1,425
Total	45.6	44.4	9,879	71.4	21.6	6.7	0.3	100.0	4,382

Table 3.6 Employment status

Percent distribution of women age 15–49 by employment status, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Employed in the 12 months preceding the survey		Not employed in the 12 months preceding the survey	Total	Number of women
	Currently employed[1]	Not currently employed			
Age					
15–19	9.5	0.7	89.9	100.0	1,710
20–24	14.0	1.3	84.7	100.0	1,616
25–29	18.8	1.9	79.3	100.0	1,559
30–34	25.2	2.6	72.2	100.0	1,545
35–39	30.8	1.3	67.9	100.0	1,435
40–44	31.0	1.6	67.4	100.0	1,096
45–49	31.2	1.5	67.3	100.0	917
Marital status					
Never married	16.3	0.8	82.9	100.0	1,964
Married or living together	21.0	1.7	77.3	100.0	7,392
Divorced/separated/ widowed	51.5	1.7	46.8	100.0	522
Number of living children					
0	15.9	1.2	82.9	100.0	2,732
1–2	23.4	1.8	74.8	100.0	2,874
3–4	25.0	1.7	73.3	100.0	3,678
5+	18.7	0.8	80.5	100.0	595
Residence					
Urban	28.6	1.7	69.8	100.0	2,705
Rural	19.0	1.5	79.5	100.0	7,174
Region					
Dushanbe	30.3	2.0	67.6	100.0	1,077
GBAO	36.5	2.8	60.7	100.0	157
Sughd	30.9	2.2	66.9	100.0	2,780
DRS	12.7	1.3	86.0	100.0	2,356
Khatlon	17.0	1.0	82.1	100.0	3,509
FTF districts	13.0	0.5	86.5	100.0	1,937
Education					
None/primary	14.3	0.9	84.8	100.0	443
General basic	14.8	1.2	83.9	100.0	3,271
General secondary	17.4	1.3	81.4	100.0	4,230
Professional primary/ middle	34.8	3.2	62.0	100.0	778
Higher	50.5	2.5	46.9	100.0	1,157
Wealth quintile					
Lowest	15.9	1.8	82.3	100.0	1,842
Second	19.7	1.3	79.0	100.0	1,967
Middle	17.6	1.2	81.2	100.0	1,966
Fourth	22.8	1.4	75.8	100.0	1,964
Highest	31.0	2.0	67.0	100.0	2,140
Total	21.6	1.5	76.8	100.0	9,879

[1] "Currently employed" is defined as having done work in the past 7 days. Includes persons who did not work in the past 7 days but who are regularly employed and were absent from work for leave, illness, vacation, or any other such reason.

Table 3.7 Occupation

Percent distribution of women age 15–49 employed in the 12 months preceding the survey by occupation, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Profes-sional/ technical/ managerial	Clerical	Sales and services	Skilled manual	Unskilled manual	Domestic service	Agriculture	Missing	Total	Number of women
Age										
15–19	5.0	4.4	9.6	27.0	2.3	0.0	49.5	2.1	100.0	173
20–24	29.8	23.2	9.4	16.2	3.4	0.0	15.4	2.6	100.0	247
25–29	28.2	19.3	8.9	15.1	4.7	0.2	22.8	0.8	100.0	322
30–34	21.4	12.5	17.7	15.6	8.9	0.2	21.8	1.8	100.0	429
35–39	19.1	11.3	13.6	16.3	13.7	0.3	24.9	0.8	100.0	461
40–44	22.4	10.1	20.3	13.6	14.7	0.3	18.4	0.3	100.0	357
45–49	22.7	11.5	16.7	10.7	15.3	0.5	22.1	0.6	100.0	300
Marital status										
Never married	17.2	12.3	11.7	19.0	4.2	0.0	33.8	1.9	100.0	336
Married or living together	23.0	13.4	13.1	15.7	9.3	0.3	24.1	1.2	100.0	1,676
Divorced/separated/ widowed	20.9	13.6	25.2	11.3	21.2	0.2	7.3	0.2	100.0	278
Number of living children										
0	19.6	14.6	12.9	19.4	4.4	0.1	27.4	1.4	100.0	467
1–2	29.0	17.5	14.9	12.2	9.8	0.2	15.3	1.1	100.0	725
3–4	18.3	10.7	14.7	16.3	12.2	0.4	26.1	1.2	100.0	982
5+	16.5	2.5	13.9	16.1	14.3	0.0	36.6	0.0	100.0	116
Residence										
Urban	28.0	17.9	19.8	16.1	12.7	0.6	3.5	1.6	100.0	818
Rural	18.5	10.7	11.4	15.4	8.4	0.1	34.6	0.9	100.0	1,472
Region										
Dushanbe	27.6	20.0	19.7	15.4	12.7	1.3	0.5	2.9	100.0	349
GBAO	47.7	20.1	12.2	5.7	14.2	0.0	0.0	0.0	100.0	62
Sughd	19.9	8.9	12.9	12.2	6.7	0.0	38.4	0.9	100.0	920
DRS	18.5	13.7	18.2	28.5	15.2	0.3	5.5	0.0	100.0	330
Khatlon	20.8	14.9	11.8	15.0	10.0	0.0	26.1	1.3	100.0	629
FTF districts	20.1	8.3	9.1	7.8	9.3	0.0	44.0	1.3	100.0	262
Education										
None/primary	8.6	3.7	14.8	20.9	20.3	0.0	29.8	1.8	100.0	67
General basic	0.8	2.5	19.5	24.4	16.8	0.7	34.0	1.3	100.0	525
General secondary	1.9	3.7	18.5	19.3	14.0	0.2	40.9	1.5	100.0	788
Professional primary/ middle	21.5	53.8	8.1	10.0	3.2	0.0	3.1	0.3	100.0	295
Higher	67.2	16.3	7.8	5.6	1.0	0.0	1.2	1.0	100.0	614
Wealth quintile										
Lowest	10.4	4.0	6.0	9.8	14.7	0.0	53.6	1.5	100.0	327
Second	15.1	9.8	9.1	15.0	9.8	0.0	41.2	0.0	100.0	412
Middle	23.1	11.2	10.8	16.1	7.4	0.2	29.5	1.6	100.0	369
Fourth	23.2	16.1	17.6	20.5	8.2	0.0	13.7	0.7	100.0	476
Highest	29.6	18.7	21.1	15.2	10.4	0.7	2.6	1.8	100.0	706
Total	21.9	13.3	14.4	15.6	10.0	0.2	23.5	1.2	100.0	2,290

Table 3.8 Type of employment

Percent distribution of women age 15–49 employed in the 12 months preceding the survey by type of earnings, type of employer, and continuity of employment, according to type of employment (agricultural or nonagricultural), Tajikistan DHS 2023

Employment characteristic	Agricultural work	Nonagricultural work	Total
Type of earnings			
Cash only	45.2	93.3	81.3
Cash and in-kind	9.8	3.5	5.0
In-kind only	7.8	0.3	2.1
Not paid	37.2	2.8	11.7
Total	100.0	100.0	100.0
Type of employer			
Employed by family member	53.4	34.6	39.1
Employed by non-family member	37.3	47.4	44.5
Self-employed	9.3	18.0	16.4
Total	100.0	100.0	100.0
Continuity of employment			
All year	6.3	88.0	68.3
Seasonal	91.8	4.5	25.0
Occasional	1.9	7.5	6.6
Total	100.0	100.0	100.0
Number of women employed during the past 12 months	538	1,726	2,290

Note: Total includes 27 women with missing information on type of employment who are not shown separately.

Table 3.9 Tobacco smoking

Percentage of women age 15–49 who smoke various tobacco products, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who smoke[1]			Number of women
	Cigarettes	Other type of tobacco[2]	Any type of tobacco	
Age				
15–19	2.2	0.0	2.2	1,710
20–24	1.7	0.3	1.7	1,616
25–29	1.8	0.2	1.9	1,559
30–34	2.5	0.3	2.5	1,545
35–39	2.4	0.5	2.4	1,435
40–44	2.8	0.3	2.8	1,096
45–49	1.8	0.4	1.9	917
Residence				
Urban	2.4	0.7	2.6	2,705
Rural	2.0	0.1	2.0	7,174
Region				
Dushanbe	2.6	1.6	2.9	1,077
GBAO	0.4	0.1	0.4	157
Sughd	1.2	0.1	1.2	2,780
DRS	3.0	0.2	3.0	2,356
Khatlon	2.3	0.1	2.3	3,509
FTF districts	1.7	0.0	1.7	1,937
Education				
None/primary	0.9	0.1	0.9	443
General basic	2.6	0.2	2.7	3,271
General secondary	2.1	0.2	2.1	4,230
Professional primary/middle	1.3	0.5	1.4	778
Higher	2.0	0.6	2.1	1,157
Wealth quintile				
Lowest	1.9	0.1	1.9	1,842
Second	2.0	0.1	2.0	1,967
Middle	2.9	0.1	2.9	1,966
Fourth	2.0	0.2	2.0	1,964
Highest	1.9	0.8	2.0	2,140
Total	2.1	0.3	2.2	9,879

[1] Includes daily and occasional (less than daily) use
[2] Includes pipes full of tobacco, cigars, cheroots, cigarillos, and water pipes

Table 3.10 Smokeless tobacco use and any tobacco use

Percentage of women age 15–49 who currently use smokeless tobacco, according to type of tobacco product, and percentage who use any type of tobacco, Tajikistan DHS 2023

Tobacco product	Percentage
Snuff, by mouth	0.0
Snuff, by nose	0.0
Chewing tobacco	0.0
Other type of smokeless tobacco	0.0
Any type of smokeless tobacco[1]	0.1
Any type of tobacco[2]	2.2
Number	9,879

Note: Table includes women who use smokeless tobacco daily or occasionally (less than daily).
[1] Includes snuff by mouth, snuff by nose, and chewing tobacco
[2] Includes all types of smokeless tobacco shown in this table along with cigarettes, pipes, cigars, cheroots, cigarillos, and water pipes

Table 3.11 Any tobacco use according to background characteristics

Percentage of women age 15–49 who are currently using any type of tobacco, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage using any type of tobacco	Number of women
Age		
15–19	2.2	1,710
20–24	1.7	1,616
25–29	1.9	1,559
30–34	2.5	1,545
35–39	2.4	1,435
40–44	2.8	1,096
45–49	1.9	917
Residence		
Urban	2.6	2,705
Rural	2.0	7,174
Region		
Dushanbe	2.9	1,077
GBAO	0.4	157
Sughd	1.2	2,780
DRS	3.0	2,356
Khatlon	2.3	3,509
FTF districts	1.7	1,937
Education		
None/primary	0.9	443
General basic	2.7	3,271
General secondary	2.1	4,230
Professional primary/middle	1.4	778
Higher	2.1	1,157
Wealth quintile		
Lowest	1.9	1,842
Second	2.0	1,967
Middle	2.9	1,966
Fourth	2.0	1,964
Highest	2.0	2,140
Total	2.2	9,879

Table 3.12 Place of birth and recent migration

Percent distribution of women age 15–49 who have always lived in their current place of residence, who were born in Tajikistan but outside of their current place of residence, and who were born in another country, and among women who were born outside of their current place of residence, percentage who moved to their current place of residence in the past 5 years, according to background characteristics, Tajikistan DHS 2023

	Percent distribution by residence and place of birth					Among women who were born outside of their current place of residence	
Background characteristic	Always lived in current place of residence[1]	Born in Tajikistan but outside of current place of residence	Born outside of Tajikistan	Total	Number of women	Percentage who moved to current place of residence in the past 5 years	Number of women[2]
Age							
15–19	94.0	5.9	0.2	100.0	1,704	59.7	103
20–24	83.8	16.1	0.1	100.0	1,599	67.2	260
25–29	83.6	16.2	0.2	100.0	1,547	13.7	254
30–34	82.6	17.1	0.3	100.0	1,539	15.9	268
35–39	82.3	17.3	0.4	100.0	1,430	11.8	253
40–44	82.7	16.6	0.7	100.0	1,093	8.4	190
45–49	87.3	12.1	0.6	100.0	916	6.3	116
Residence							
Urban	80.5	18.9	0.6	100.0	2,689	30.2	523
Rural	87.1	12.7	0.2	100.0	7,139	22.6	919
Region							
Dushanbe	70.0	29.6	0.4	100.0	1,069	31.6	321
GBAO	97.8	2.0	0.2	100.0	156	*	3
Sughd	93.6	6.1	0.3	100.0	2,778	28.2	178
DRS	73.2	26.1	0.7	100.0	2,342	22.8	628
Khatlon	91.0	9.0	0.0	100.0	3,482	22.6	312
FTF districts	87.5	12.5	0.0	100.0	1,930	21.9	241
Wealth quintile							
Lowest	88.9	10.8	0.3	100.0	1,835	19.8	203
Second	87.8	12.0	0.2	100.0	1,953	17.6	239
Middle	87.0	12.6	0.4	100.0	1,956	28.7	255
Fourth	85.4	14.3	0.2	100.0	1,957	21.3	285
Highest	78.4	21.2	0.5	100.0	2,127	32.6	460
Total	85.3	14.4	0.3	100.0	9,828	25.4	1,443

Note: Respondents who are visitors in the household are excluded from this table. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.
[1] May include respondents who were born elsewhere in Tajikistan but moved to their current place of residence when very young
[2] Includes respondents who reported that they were born outside of Tajikistan but also declared that they always lived in their current place of residence. Such respondents are assumed not to have moved in the past 5 years.

Table 3.13 Type of migration

Percent distribution of women age 15–49 who moved to their current place of residence in the past 5 years by type of migration, according to age, Tajikistan DHS 2023

	Type of migration					Number of respondents
Age	Urban to urban	Urban to rural	Rural to urban	Rural to rural	Total	
15–19	42.9	28.8	8.5	19.9	100.0	61
20–24	19.0	29.3	13.8	37.9	100.0	175
25–29	(27.5)	(28.4)	(22.3)	(21.8)	100.0	35
30–34	(20.0)	(17.1)	(24.3)	(38.6)	100.0	43
35–39	(40.0)	(13.7)	(21.5)	(24.8)	100.0	30
40–44	*	*	*	*	100.0	16
45–49	*	*	*	*	100.0	7
Total	27.3	25.7	15.9	31.1	100.0	366

Note: Type of migration is based on categorizing the previous place of residence and the current place of residence as urban or rural. The previous place of residence is the place the person moved from just before moving to the current place of residence. 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 3.14 Reason for migration

Percent distribution of women age 15–49 who moved to their current place of residence by reason for migration, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Employment	Education/ training	Marriage formation	Family reunification/ other family-related reason	Forced displacement	Other	Total	Number of women
Age								
15–19	1.2	21.6	37.6	22.1	16.1	1.4	100.0	102
20–24	3.0	3.2	80.3	9.9	3.4	0.2	100.0	260
25–29	4.7	1.3	83.9	6.2	3.9	0.0	100.0	254
30–34	7.1	0.8	76.0	11.6	4.3	0.2	100.0	268
35–39	7.2	1.2	63.7	15.9	11.8	0.3	100.0	253
40–44	6.8	1.3	60.6	19.1	12.2	0.0	100.0	190
45–49	7.5	0.0	65.6	18.1	7.3	1.5	100.0	116
Timing of move to current place of residence								
0–4 years	8.9	6.9	62.5	13.2	8.3	0.3	100.0	366
5–9 years	5.3	1.8	70.4	11.2	11.1	0.3	100.0	362
10 years or more	3.9	1.4	74.5	14.5	5.3	0.4	100.0	714
Type of migration[1]								
Urban to urban	13.6	22.1	32.3	12.3	19.5	0.2	100.0	100
Urban to rural	0.8	0.0	90.1	5.7	2.2	1.1	100.0	94
Rural to urban	31.0	5.4	39.1	16.4	8.2	0.0	100.0	58
Rural to rural	0.0	0.0	78.0	18.5	3.5	0.0	100.0	114
Residence								
Urban	14.4	7.9	51.4	15.8	10.1	0.5	100.0	523
Rural	0.5	0.0	81.3	11.9	6.0	0.3	100.0	919
Region								
Dushanbe	18.8	12.5	42.0	15.6	10.4	0.7	100.0	321
GBAO	*	*	*	*	*	*	100.0	3
Sughd	6.7	0.4	77.5	11.2	4.2	0.0	100.0	178
DRS	0.6	0.0	71.3	17.8	10.2	0.2	100.0	628
Khatlon	1.1	0.2	93.8	3.4	1.0	0.5	100.0	312
FTF districts	0.9	0.3	96.4	1.2	0.7	0.7	100.0	241
Wealth quintile								
Lowest	1.8	0.0	87.5	9.8	1.0	0.0	100.0	203
Second	0.2	0.0	80.6	12.4	6.8	0.0	100.0	239
Middle	0.5	0.3	79.2	8.9	10.2	1.0	100.0	255
Fourth	1.1	0.0	75.4	16.6	6.8	0.2	100.0	285
Highest	15.5	8.8	49.7	15.9	9.6	0.4	100.0	460
Total	5.5	2.9	70.4	13.3	7.5	0.4	100.0	1,442

Note: Respondents who are visitors in the household are excluded from this table. Respondents who stated that they were born outside of Tajikistan and that they have always lived in their current place of residence were not asked about the reason for migration and are excluded from this table. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

[1] Restricted to respondents who migrated within the past 5 years

Table 3.15 History of hypertension

Percentage of women age 15–49 who have ever had their blood pressure measured and percentage who have been told by a health care provider that they have high blood pressure or hypertension, and among women who have been told they have high blood pressure or hypertension, percentage told in the past 3 years they have high blood pressure or hypertension, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage of women who ever had their blood pressure measured by a doctor or other health care worker	Percentage of women who were ever told by a doctor or other health care worker that they have high blood pressure or hypertension	Number of women	Among women who have been told by a doctor or other health care worker that they have high blood pressure or hypertension: Percentage who were told in the past 3 years that they have high blood pressure or hypertension	Among women who have been told by a doctor or other health care worker that they have high blood pressure or hypertension: Number of women
Age					
15–19	30.7	1.9	1,710	(59.9)	32
20–24	71.5	9.6	1,616	56.6	156
25–29	78.8	12.5	1,559	58.5	194
30–34	78.7	13.9	1,545	58.6	215
35–39	77.4	15.8	1,435	72.0	227
40–44	74.9	20.2	1,096	77.3	221
45–49	76.9	23.4	917	81.7	214
Residence					
Urban	74.0	14.9	2,704	69.1	403
Rural	66.3	11.9	7,175	67.5	857
Region					
Dushanbe	81.9	19.0	1,077	75.2	205
GBAO	75.7	16.7	157	61.9	26
Sughd	84.1	10.4	2,780	67.8	288
DRS	55.3	14.2	2,356	85.1	335
Khatlon	60.4	11.6	3,509	50.9	406
FTF districts	57.0	9.5	1,937	56.7	185
Education					
None/primary	71.0	15.4	443	69.1	68
General basic	62.5	13.0	3,271	73.2	425
General secondary	68.2	11.8	4,230	65.6	499
Professional primary/ middle	76.8	11.1	778	68.7	86
Higher	79.6	15.7	1,157	61.7	181
Wealth quintile					
Lowest	55.7	10.0	1,842	62.6	185
Second	64.9	11.8	1,967	69.8	232
Middle	68.5	11.3	1,966	67.7	222
Fourth	73.0	14.4	1,964	68.4	282
Highest	78.5	15.8	2,140	69.7	338
Total	68.4	12.8	9,879	68.0	1,260

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

Table 3.16 History of diabetes

Percentage of women age 15–49 who have ever had their blood sugar measured and percentage who have been told by a health care provider that they have high blood sugar or diabetes, and among women who have been told they have high blood sugar or diabetes, percentage who were told in the past 3 years they have high blood pressure or diabetes, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage of women who ever had their blood sugar measured by a doctor or other health care worker	Percentage of women who were ever told by a doctor or other health care worker that they have high blood sugar or diabetes	Number of women	Among women who have been told by a doctor or other health care worker that they have high blood sugar or diabetes:	
				Percentage who were told in the past 3 years that they have high blood sugar or diabetes	Number of women
Age					
15–19	10.2	0.4	1,710	*	7
20–24	23.7	0.7	1,616	*	11
25–29	25.6	1.1	1,559	*	17
30–34	29.5	1.1	1,545	*	17
35–39	31.1	2.8	1,435	(65.2)	40
40–44	34.3	4.0	1,096	(67.1)	44
45–49	38.7	5.0	917	(79.6)	46
Residence					
Urban	35.3	2.2	2,704	61.9	59
Rural	22.8	1.7	7,175	62.8	124
Region					
Dushanbe	51.0	3.1	1,077	60.6	33
GBAO	44.4	0.9	157	*	1
Sughd	33.2	2.0	2,780	(57.2)	55
DRS	20.0	2.0	2,356	(69.3)	48
Khatlon	16.4	1.3	3,509	(63.2)	46
FTF districts	20.4	1.7	1,937	*	32
Education					
None/primary	25.2	2.4	443	*	11
General basic	22.0	1.9	3,271	64.9	62
General secondary	26.2	1.7	4,230	57.8	72
Professional primary/ middle	30.6	1.7	778	*	13
Higher	35.6	2.2	1,157	(67.4)	26
Wealth quintile					
Lowest	15.5	1.3	1,842	*	24
Second	20.8	1.9	1,967	(68.3)	37
Middle	24.3	1.6	1,966	*	31
Fourth	28.6	2.0	1,964	(53.9)	40
Highest	40.0	2.4	2,140	61.1	51
Total	26.2	1.8	9,879	62.5	183

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.

MARRIAGE AND SEXUAL ACTIVITY 4

Key Findings

- ***Marital status:*** 75% of women age 15–49 are currently in union; 5% are divorced, widowed, or separated; and 20% have never been married.
- ***Marriage registration:*** 96% of women age 15–49 who are in union have registered their current marriage, and 95% have a marriage certificate.
- ***Age at first marriage:*** The median age at first marriage among women age 25–49 has stayed nearly the same during the past decade (20.2 years in 2012 and 2017 and 20.1 years in 2023).
- ***Age at first sexual intercourse:*** The median age at first sexual intercourse among women age 25–49 is 19.8 years, nearly the same as the median age at first marriage.

Marriage and sexual activity help determine the extent to which women are exposed to the risk of pregnancy. Thus, they are important determinants of fertility levels. The timing and circumstances of marriage and sexual activity, however, also have profound consequences for women's lives.

4.1 MARITAL STATUS

Currently in union

Women who report being married or living together with a partner as though married at the time of the survey. In this report, the terms currently in union and currently married are used interchangeably except where noted.

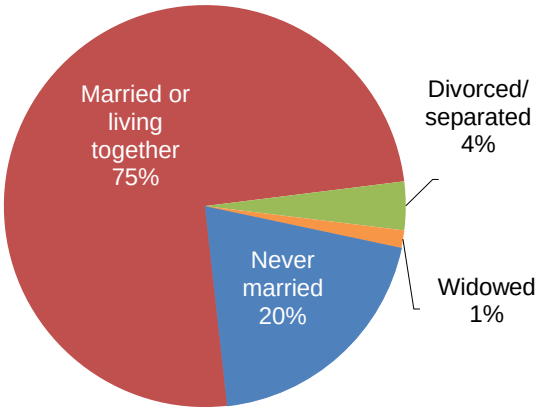
Sample: Women age 15–49

In Tajikistan, 75% of women age 15–49 are currently in union. Reflecting the traditional character of Tajik society, virtually all of these women are in formal unions; less than 1% report that they are living together as if married with a partner. One in five women (20%) have never been married, 4% are divorced or separated, and 1% are widowed (**Table 4.1** and **Figure 4.1**).

Most Tajik women marry at least once during their lifetime. The percentage of women who have never been married decreases rapidly from 87% among women age 15–19 to 18% among women age 20–24. Only 2% of women age 40–44 have never been married. Women age 45–49 are most likely to be divorced or separated (6%) and to be widowed (5%).

Figure 4.1 **Marital status**

Percent distribution of women age 15–49



Trends: The percentage of women age 15–49 who have never been married has fallen over time, from 27% in 2012 to 22% in 2017 and 20% in 2023. Thus, as expected, the percentage of women who are currently married has increased over time, from 67% in 2012 to 72% in 2017 and 75% in 2023. Much of that change has been due to increases in the percentage of women age 20–24 who are currently in union (68% in 2012, 77% in 2017, and 79% in 2023).

4.2 Marriage Registration

Registered marriage
A woman whose marriage is registered with the civil authorities regardless of whether or not she has a marriage certificate.
Sample: Women age 15–49 who are currently in union

Ninety-six percent of women age 15–49 who are in union have registered their union, and 95% of in-union women have a marriage certificate for their current marriage (**Table 4.2**).

Patterns by background characteristics

- The percentage of in-union women whose current marriage or union is registered is lowest among those age 15–19 (91%) and highest among those age 25–29 (97%).
- Marriage registration is highest in Gorno-Badakhshan Autonomous Oblast (GBAO) (99%) and lowest in Districts of Republican Subordination (DRS) (93%).

4.3 Polygyny

Polygyny
Women who report that their husband or partner has other wives are considered to be in a polygynous marriage.
Sample: Currently married women age 15–49

Polygynous unions are not common in Tajikistan. Overall, only 2% of women report that their husband (or partner) has other wives (**Table 4.3**). Almost all women in polygynous unions report that their husband has only one other wife.

Trends: The percentage of women age 15–49 with no other co-wives has increased over time, from 95% in 2017 to 97% in 2023.

Patterns by background characteristics

- The percentage of women in polygynous unions increases with age, from less than 1% among those less than age 30 to 4% among those age 45–49.
- Women in Dushanbe (3%) are more likely than women in other regions to report that they have co-wives. Less than 1% of women in GBAO have co-wives, the lowest percentage of all regions.

4.4 Age at First Marriage

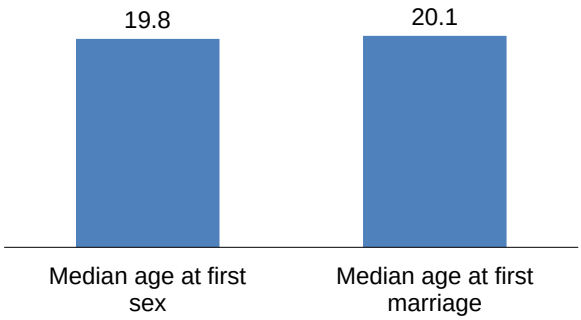
Median age at first marriage
Age by which half of respondents have been married.
Sample: Women age 25–49

Table 4.4 shows that 1% of women age 25–49 in Tajikistan were married by age 15, and 14% were married by age 18. The percentage of women who are married increases rapidly after age 18, with 49% of women married by age 20, 71% married by age 22, and 86% married by age 25 (**Figure 4.3**). Only 3% of women age 25–49 have never been married. The median age of marriage among women age 25–49 is 20.1 years (**Table 4.5** and **Figure 4.2**).

Trends: The median age at first marriage among women age 25–49 has stayed essentially the same over the past decade (20.2 years in 2012 and 2017 and 20.1 years in 2023).

Figure 4.2 **Median age at first sex and first marriage**

Median age in years

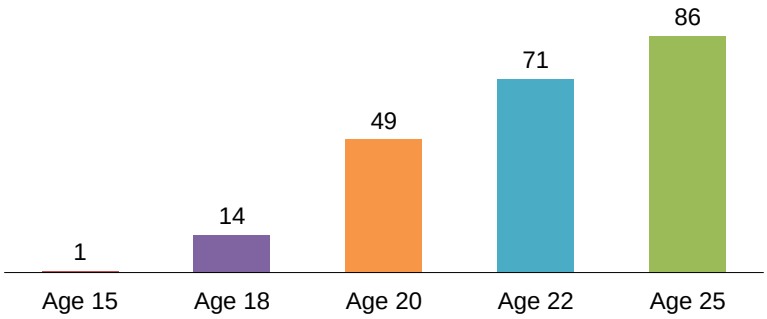


Patterns by background characteristics

- The median age at first marriage is highest in GBAO (23.4 years) and lowest in Sughd (19.8 years).
- The median age at first marriage is approximately 2 years higher among women with a higher education (21.7 years) than among those with a general basic education (19.8 years) and a general secondary education (19.9 years).

Figure 4.3 **Percentage of women married by exact age**

Percentage of women age 25-49 who were first married by specific exact ages



Note: Percentages are cumulative. For example, women married by age 15 are included in each subsequent age category.

- The median age at first marriage varies by less than 1 year across all wealth quintiles, ranging from 19.8 years in the fourth quintile to 20.4 years in the highest quintile.

4.5 Age at First Sexual Intercourse

Median age at first sexual intercourse
Age by which half of respondents have had sexual intercourse.
Sample: Women age 20–49 and 25–49

The median age at first sexual intercourse among women age 25–49 is 19.8 years (**Figure 4.2**). This is very close to the median age at first marriage among women age 25–49 (20.1 years). Less than 1% of women age 25–49 have had sexual intercourse by age 15 (**Table 4.6**), while 11% have had intercourse by age 18. These percentages are nearly identical among women age 20–49.

Trends: The percentage of women age 20–49 who first had sexual intercourse by age 20 has increased over time, from 45% in 2012 to 49% in 2017 and 54% in 2023.

4.6 Recent Sexual Activity

Table 4.7 shows that 81% of women age 15–49 have ever had sexual intercourse, and 51% had sex during the 4 weeks before the survey.

Marital status is closely related to sexual activity. Most currently married women (93%) had sex within the year before the survey, and 51% had sex within the 4 weeks before the survey. The opposite pattern is observed among women who were divorced, separated, or widowed, 87% of whom had not had sex during the year before the survey. Only 3% of never-married women had ever had sex, and most of those women reported that they most recently had sex 1 or more years before the survey.

Patterns by background characteristics

- The percentage of women who reported having sexual intercourse within the 4 weeks before the survey is slightly higher in urban areas (52%) than in rural areas (50%).
- The percentage of women who had sexual intercourse within the past 4 weeks is highest in DRS (53%) and lowest in Sughd (49%).
- Twenty-five percent of women with a general basic education have never had sexual intercourse, as compared with 12% of those with no education or a primary education.

List of Tables

For more information on marriage and sexual activity, see the following tables:

- **Table 4.1 Current marital status**
- **Table 4.2 Marriage registration**
- **Table 4.3 Number of women's co-wives**
- **Table 4.4 Age at first marriage**
- **Table 4.5 Median age at first marriage according to background characteristics**
- **Table 4.6 Age at first sexual intercourse**
- **Table 4.7 Recent sexual activity**

Table 4.1 Current marital status

Percent distribution of women age 15–49 by current marital status, according to age, Tajikistan DHS 2023

Age	Marital status						Total	Percentage of women currently in union	Number of women
	Never married	Married	Living together	Divorced	Separated	Widowed			
15–19	87.0	12.8	0.0	0.2	0.0	0.0	100.0	12.9	1,710
20–24	18.1	78.9	0.3	2.2	0.0	0.4	100.0	79.3	1,616
25–29	4.3	91.4	0.8	3.2	0.1	0.2	100.0	92.2	1,559
30–34	1.8	90.7	0.4	6.2	0.1	0.9	100.0	91.1	1,545
35–39	2.6	89.5	0.5	5.7	0.1	1.6	100.0	90.0	1,435
40–44	1.9	88.6	0.3	5.4	0.1	3.7	100.0	88.9	1,096
45–49	3.5	84.2	0.9	5.9	0.1	5.4	100.0	85.2	917
Total	19.9	74.4	0.4	3.8	0.1	1.4	100.0	74.8	9,879

Table 4.2 Marriage registration

Percentage of in-union women age 15–49 whose current marriage or union is registered, percentage whose current marriage or union is registered and who have any documentation recognizing the marriage/union, and percentage whose current marriage or union is registered and who have a marriage certificate, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage whose current marriage or union is registered[1]	Percentage whose current marriage or union is registered and who have any documentation recognizing the marriage/union	Percentage whose current marriage is registered and who have a marriage certificate	Number of women in union[1]
Age				
15–19	91.2	89.3	88.4	220
20–24	96.0	95.1	94.7	1,281
25–29	97.3	97.0	96.4	1,437
30–34	96.8	96.4	95.7	1,407
35–39	96.0	95.6	95.3	1,291
40–44	95.8	95.1	94.7	974
45–49	96.7	95.6	95.5	781
Residence				
Urban	96.6	96.0	95.6	1,870
Rural	96.2	95.6	95.1	5,522
Marital status				
Currently married	96.6	96.0	95.5	7,349
Living together	51.0	46.3	45.0	43
Region				
Dushanbe	97.7	96.9	96.7	708
GBAO	98.5	97.6	97.6	109
Sughd	97.9	97.4	97.0	2,160
DRS	93.3	92.7	92.2	1,782
Khatlon	96.6	95.9	95.3	2,634
FTF districts	96.8	96.1	95.4	1,482
Wealth quintile				
Lowest	94.1	92.9	92.3	1,390
Second	95.6	95.4	95.1	1,451
Middle	96.9	96.3	95.5	1,512
Fourth	97.9	97.7	97.5	1,566
Highest	96.8	95.8	95.3	1,474
Total	96.3	95.7	95.2	7,392

[1] Includes women who report that they are currently married or living with a man as if married

Table 4.3 Number of women's co-wives

Percent distribution of currently married women age 15–49 by number of co-wives, and percentage of currently married women with one or more co-wives, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Number of co-wives				Total	Percentage with one or more co-wives[1]	Number of women
	0	1	2+	Don't know			
Age							
15–19	99.5	0.0	0.0	0.5	100.0	0.0	220
20–24	98.8	0.4	0.0	0.8	100.0	0.4	1,281
25–29	98.1	0.5	0.1	1.3	100.0	0.6	1,437
30–34	96.6	2.0	0.0	1.4	100.0	2.0	1,407
35–39	96.4	2.1	0.0	1.4	100.0	2.1	1,291
40–44	94.5	2.8	0.5	2.1	100.0	3.4	974
45–49	93.8	3.7	0.2	2.3	100.0	3.9	781
Residence							
Urban	94.5	2.4	0.1	3.0	100.0	2.5	1,870
Rural	97.5	1.5	0.1	0.9	100.0	1.6	5,522
Region							
Dushanbe	91.8	2.9	0.2	5.1	100.0	3.1	708
GBAO	96.9	0.6	0.1	2.4	100.0	0.8	109
Sughd	98.3	0.9	0.0	0.8	100.0	0.9	2,160
DRS	96.5	2.2	0.0	1.3	100.0	2.2	1,782
Khatlon	97.1	1.7	0.3	1.0	100.0	2.0	2,634
FTF districts	97.8	0.8	0.4	1.0	100.0	1.2	1,482
Education							
None/primary	96.2	1.6	0.2	2.1	100.0	1.7	364
General basic	96.0	2.4	0.1	1.5	100.0	2.5	2,276
General secondary	97.6	1.0	0.1	1.3	100.0	1.1	3,391
Professional primary/middle	97.6	1.4	0.0	1.0	100.0	1.5	551
Higher	95.3	2.7	0.1	1.9	100.0	2.8	811
Wealth quintile							
Lowest	96.5	2.0	0.2	1.2	100.0	2.3	1,390
Second	97.9	0.9	0.2	1.0	100.0	1.1	1,451
Middle	98.1	1.3	0.0	0.6	100.0	1.3	1,512
Fourth	97.4	1.7	0.1	0.8	100.0	1.8	1,566
Highest	93.9	2.6	0.0	3.5	100.0	2.6	1,474
Total	96.8	1.7	0.1	1.4	100.0	1.8	7,392

[1] Excludes women who responded don't know when asked if their husbands have other wives

Table 4.4 Age at first marriage

Percentage of women age 15–49 who were first married by specific exact ages and median age at first marriage, according to current age, Tajikistan DHS 2023

Current age	Percentage first married by exact age:					Percentage never married	Number of women	Median age at first marriage
	15	18	20	22	25			
15–19	0.0	na	na	na	na	87.0	1,710	a
20–24	0.4	8.8	53.5	na	na	18.1	1,616	19.8
25–29	0.2	10.7	57.5	80.4	92.5	4.3	1,559	19.6
30–34	0.3	13.9	49.7	73.5	90.1	1.8	1,545	20.0
35–39	0.4	9.4	36.6	63.0	82.8	2.6	1,435	21.0
40–44	0.9	16.3	44.8	62.5	79.3	1.9	1,096	20.5
45–49	0.6	21.7	54.0	69.6	82.0	3.5	917	19.7
25–49	0.5	13.6	48.5	70.5	86.1	2.8	6,552	20.1

Note: The age at first marriage is defined as the age at which the respondent began living with her first spouse/partner.
na = not applicable due to censoring
a = omitted because less than 50% of the women began living with their spouse or partner for the first time before reaching the beginning of the age group

Table 4.5 Median age at first marriage according to background characteristics

Median age at first marriage among women age 25–49, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Women age 25–49
Residence	
Urban	20.6
Rural	20.0
Region	
Dushanbe	20.7
GBAO	23.4
Sughd	19.8
DRS	20.0
Khatlon	20.3
FTF districts	19.9
Education	
None/primary	20.8
General basic	19.8
General secondary	19.9
Professional primary/ middle	21.1
Higher	21.7
Wealth quintile	
Lowest	20.3
Second	20.2
Middle	20.0
Fourth	19.8
Highest	20.4
Total	20.1

Note: The age at first marriage is defined as the age at which the respondent began living with her first spouse/partner.

Table 4.6 Age at first sexual intercourse

Percentage of women age 15–49 who had first sexual intercourse by specific exact ages, percentage who never had sexual intercourse, and median age at first sexual intercourse, according to current age, Tajikistan DHS 2023

	Percentage who had first sexual intercourse by exact age:					Percentage who never had		Median age at first sexual
Current age	15	18	20	22	25	intercourse	Number	intercourse
15–19	0.1	na	na	na	na	86.9	1,710	a
20–24	0.3	5.9	54.7	na	na	17.8	1,616	19.8
25–29	0.4	8.1	62.0	82.1	92.6	3.4	1,559	19.4
30–34	0.1	10.9	54.5	76.5	91.0	1.6	1,545	19.8
35–39	0.2	8.1	44.0	66.6	85.5	2.2	1,435	20.5
40–44	0.7	13.5	47.6	67.4	83.0	1.5	1,096	20.2
45–49	0.5	15.3	60.3	76.0	85.9	1.6	917	19.4
20–49	0.3	9.7	53.9	na	na	5.2	8,169	19.8
25–49	0.4	10.7	53.7	74.1	88.1	2.1	6,552	19.8
15–24	0.2	na	na	na	na	53.3	3,327	a

na = not applicable due to censoring
a = omitted because less than 50% of the respondents had sexual intercourse for the first time before reaching the beginning of the age group

Table 4.7 Recent sexual activity

Percent distribution of women age 15–49 by timing of most recent sexual intercourse, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Timing of most recent sexual intercourse			Never had sexual intercourse	Total	Number of women
	Within the past 4 weeks	Within 1 year[1]	One or more years			
Age						
15–19	8.6	4.2	0.3	86.9	100.0	1,710
20–24	50.5	26.0	5.8	17.8	100.0	1,616
25–29	59.4	26.8	10.4	3.4	100.0	1,559
30–34	61.2	24.7	12.5	1.6	100.0	1,545
35–39	63.2	21.2	13.4	2.2	100.0	1,435
40–44	62.8	18.0	17.7	1.5	100.0	1,096
45–49	64.4	17.0	16.9	1.6	100.0	917
Marital status						
Never married	0.3	0.2	2.1	97.4	100.0	1,964
Married or living together	67.7	25.5	6.8	0.0	100.0	7,392
Divorced/separated/widowed	1.6	11.6	86.6	0.2	100.0	522
Duration of current union[2]						
<1 year	65.9	33.5	0.5	0.0	100.0	380
1–4 years	63.9	29.5	6.6	0.0	100.0	1,290
5–9 years	64.9	27.5	7.6	0.0	100.0	1,540
10–14 years	67.9	25.7	6.4	0.0	100.0	1,536
15–19 years	69.1	24.2	6.8	0.0	100.0	1,205
20–24 years	71.8	18.5	9.8	0.0	100.0	711
25+ years	74.8	18.7	6.5	0.0	100.0	730
Residence						
Urban	52.3	13.6	11.5	22.6	100.0	2,705
Rural	50.2	22.1	9.5	18.2	100.0	7,174
Region						
Dushanbe	50.5	11.8	11.5	26.2	100.0	1,077
GBAO	50.6	14.3	9.4	25.7	100.0	157
Sughd	49.1	23.7	9.3	17.8	100.0	2,780
DRS	52.8	18.1	10.7	18.4	100.0	2,356
Khatlon	50.9	20.3	9.9	18.9	100.0	3,509
FTF districts	49.3	23.1	9.2	18.4	100.0	1,937
Education						
None/primary	54.1	21.3	12.9	11.7	100.0	443
General basic	46.7	18.7	9.8	24.9	100.0	3,271
General secondary	53.9	21.2	9.9	15.0	100.0	4,230
Professional primary/middle	48.3	21.0	8.2	22.5	100.0	778
Higher	51.4	16.0	11.6	20.9	100.0	1,157
Wealth quintile						
Lowest	47.0	23.5	11.8	17.7	100.0	1,842
Second	44.2	24.5	10.3	21.0	100.0	1,967
Middle	51.1	20.6	9.9	18.4	100.0	1,966
Fourth	57.0	18.5	8.3	16.1	100.0	1,964
Highest	54.2	12.4	10.2	23.2	100.0	2,140
Total	50.8	19.7	10.1	19.4	100.0	9,879

[1] Excludes women who had sexual intercourse within the past 4 weeks
[2] Excludes women who are not currently married

FERTILITY 5

Key Findings

- ***Total fertility rate (TFR):*** The TFR in Tajikistan is 3.5 children per woman.
- ***Birth intervals:*** In Tajikistan, the median interval between births is 32.6 months.
- ***Teenage pregnancy:*** Among women age 15–19, 7% have ever been pregnant, 3% have ever had a live birth, and less than 1% reported experiencing a pregnancy loss (stillbirth, miscarriage, or abortion).
- ***Pregnancy outcomes:*** 83% of pregnancies ending in the 3 years preceding the survey resulted in live births, 12% were miscarriages, 1% were stillbirths, and 4% were induced abortions.
- ***Induced abortions:*** 5% of women age 15–49 in Tajikistan reported having at least one induced abortion in their lifetime.

The number of children that a woman bears depends on many factors, including the age she begins childbearing, how long she waits between births, and her fecundity. Postponing first births and extending the interval between births have played a role in reducing fertility levels in many countries. These factors also have positive health consequences. In contrast, short birth intervals (of less than 24 months) can lead to harmful outcomes for both newborns and their mothers, such as preterm birth, low birth weight, and death. Childbearing at a very young age is associated with an increased risk of complications during pregnancy and childbirth and higher rates of neonatal mortality.

This chapter describes the current level of fertility in Tajikistan and some of its proximate determinants. It presents information on the total fertility rate, birth intervals, insusceptibility to pregnancy (because of postpartum amenorrhea, postpartum abstinence, or menopause), age at first birth, teenage pregnancy, and induced abortion rates.

5.1 CURRENT FERTILITY

Total fertility rate

The average number of children a woman would have by the end of her childbearing years if she bore children at the current age-specific fertility rates. Age-specific fertility rates are calculated for the 3 years before the survey, based on detailed pregnancy histories provided by women.

Sample: Women age 15–49

The total fertility rate (TFR) in Tajikistan is 3.5 children per woman (**Table 5.1**). The rate of childbearing peaks at 280 live births per 1,000 women in the 20–24 age group and then declines thereafter. The fertility rate is generally higher among women in rural areas than among those in urban areas, although this difference becomes less pronounced after age 24 (**Table 5.1** and **Table 5.2**). Fertility rates have been highest among women age 20–24 across the last 3 surveys and generally decline with age (**Table 5.3.1** and **Figure 5.1**).

Trends: The TFR has remained essentially unchanged since 2012 (**Figure 5.2**).

Patterns by background characteristics

- The TFR varies slightly by region, with the lowest rate in Dushanbe (3.2) and the highest in Khatlon (3.6) (**Table 5.2** and **Map 5.1**).
- The TFR is lowest among women with a higher education (3.1). TFRs are similar among women with no education or a primary education, a general basic education, and a general secondary education have (3.5–3.6). The TFR is highest among women in the lowest wealth quintile (3.7) and lowest among women in the highest quintile (3.2).

Figure 5.1 Trends in age-specific fertility

Births per 1,000 women

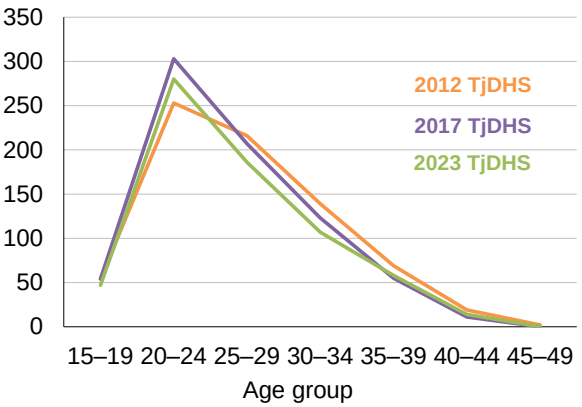
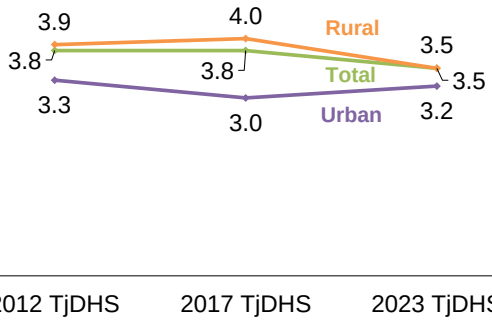


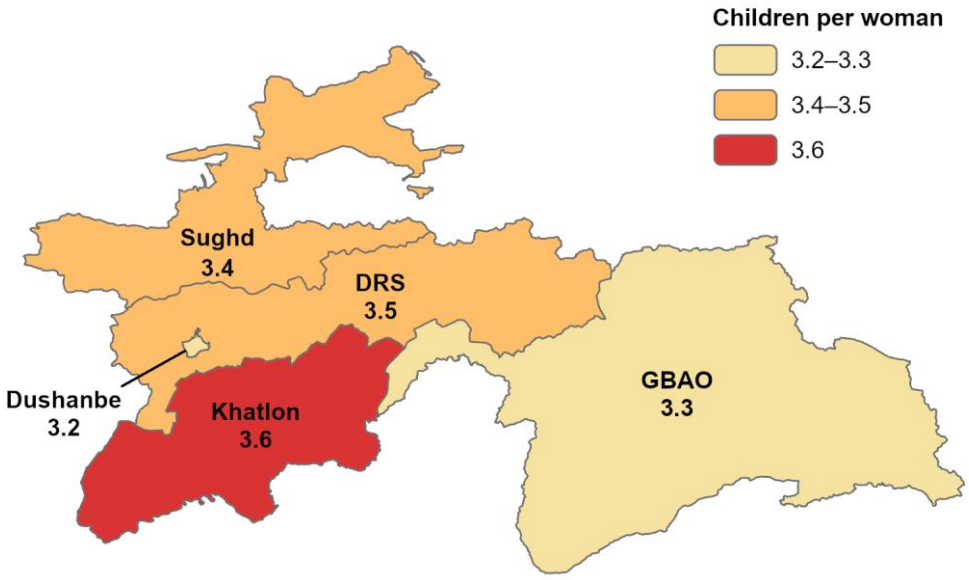
Figure 5.2 Trends in fertility by residence

TFR for the 3 years before each survey



Map 5.1 Fertility by region

TFR for the 3 years before the survey



5.2 Children Ever Born and Living

Overall, women age 15–49 have an average of 2.1 children (**Table 5.4**). Currently married women have an average of 2.7 children, nearly all of whom are still alive (2.6). Among women overall, the average number of children ever born generally increases with age.

5.3 Birth Intervals

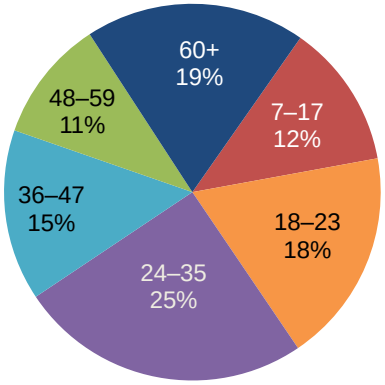
Median birth interval
Number of months since the preceding birth by which half of children are born.
Sample: Non-first births in the 5 years before the survey

The World Health Organization (WHO) and other international organizations advise individuals and couples to wait at least 24–36 months between births to lower the likelihood of adverse maternal and child health outcomes (WHO 2006a). In Tajikistan, the median interval between live births is 32.6 months (**Table 5.5**). Thirty-one percent of non-first births occur within 23 months of a previous birth; 25% of births take place between 24 and 35 months after the previous birth, and 44% occur after an interval of 36 months or longer (**Figure 5.3**).

Trends: The median birth interval decreased from 30.8 months in 2012 to 28.8 months in 2017 before increasing to 32.6 months in 2023.

Figure 5.3 **Birth intervals**

Percent distribution of non-first births by number of months since the preceding birth



Patterns by background characteristics

- Older mothers (age 30–49) tend to have longer birth intervals than younger mothers (age 15–29).
- The median birth interval is slightly shorter in rural areas than in urban areas (31.8 months versus 35.2 months).

5.4 INSUSCEPTIBILITY TO PREGNANCY

Postpartum amenorrhea

The period of time after the end of a pregnancy and before the resumption of menstruation.

Postpartum abstinence

The period of time after the end of a pregnancy and before the resumption of sexual intercourse.

Postpartum insusceptibility

The period of time during which a woman is considered not at risk of pregnancy because she is postpartum amenorrheic and/or abstaining from sexual intercourse postpartum.

Median duration of postpartum amenorrhea

Number of months after the end of a pregnancy by which time half of women have begun menstruating.

Sample: Women who had a live birth or stillbirth in the 3 years before the survey

Median duration of postpartum insusceptibility

Number of months after the end of a pregnancy by which time half of women are no longer protected against pregnancy by either postpartum amenorrhea or abstinence from sexual intercourse.

Sample: Women who had a live birth or stillbirth in the 3 years before the survey

Overall, 23% of women who gave birth in the 3 years preceding the survey are insusceptible to pregnancy because they are amenorrheic (15%) and/or because they are abstaining from sexual intercourse (15%). Women are amenorrheic for a median of 2.7 months and abstain from sexual intercourse for a median of 2.4 months; the median period of insusceptibility is 4.2 months (**Table 5.6**).

Trends: The median duration of postpartum amenorrhea increased from 3.2 months to 4.6 months between 2012 and 2017 before decreasing to 2.7 months in 2023. Over the same period, the median duration of postpartum abstinence increased from 2.0 months to 2.9 months and then fell to 2.4 months. The median duration of postpartum insusceptibility rose from 4.1 months in 2012 to 6.8 months in 2017 before declining to 4.2 months in 2023.

Patterns by background characteristics

- The median duration of postpartum insusceptibility is shorter among women age 15–29 (4.0 months) than among women age 30–49 (4.8 months) (**Table 5.7**).
- The duration of insusceptibility is shorter among urban mothers than rural mothers (3.3 months versus 4.5 months).
- There is no clear relationship between wealth and postpartum insusceptibility.

5.5 AGE AT FIRST MENSTRUATION

The mean age at menarche (first menstruation) across all women age 15–49 in Tajikistan is 14.4 years (**Table 5.8**).

5.6 Arrival of Menopause

Menopause

Women are considered to have reached menopause if they are neither pregnant nor postpartum amenorrheic and have not had a menstrual period in the 6 months before the survey, if they report being menopausal or having had a hysterectomy, or if they have never menstruated.

Sample: Women age 30–49

Nine percent of all women age 30–49 in Tajikistan are menopausal. The percentage of women who are menopausal increases with age, reaching 37% among women age 48–49 (**Table 5.9**).

5.7 Age at First Birth

Median age at first birth

Age by which half of women have had their first child.

Sample: Women age 20–49 and 25–49

The median age at first live birth among women age 25–49 is 21.8 years. Very few women age 25–49 had a live birth by age 15 (less than 1%) or age 18 (2%). Seventy-seven percent of women had a live birth by age 25 (**Table 5.10**).

Patterns by background characteristics

- Urban women have their first live birth slightly later (median age of 22.3 years) than rural women (median age of 21.7 years) (**Table 5.11**).
- The median age at first birth is highest among women with a higher education (23.4 years) and lowest among those with a general basic education (21.5 years).
- There is substantial variation by region, with women in Gorno-Badakhshan Autonomous Oblast (GBAO) having the highest median age at first birth (24.8 years) and women in Sughd having the lowest (21.4 years).

5.8 Teenage Pregnancy

Teenage pregnancy

Percentage of women age 15–19 who have ever been pregnant.

Sample: Women age 15–19

In Tajikistan, 7% of young women age 15–19 have ever been pregnant, 3% have ever had a live birth, and less than 1% reported experiencing a pregnancy loss (stillbirth, miscarriage, or abortion). Five percent of women age 15–19 are currently pregnant (**Table 5.12**). Less than 1% of young women reported initiating sexual intercourse before age 15 (see **Table 4.6**).

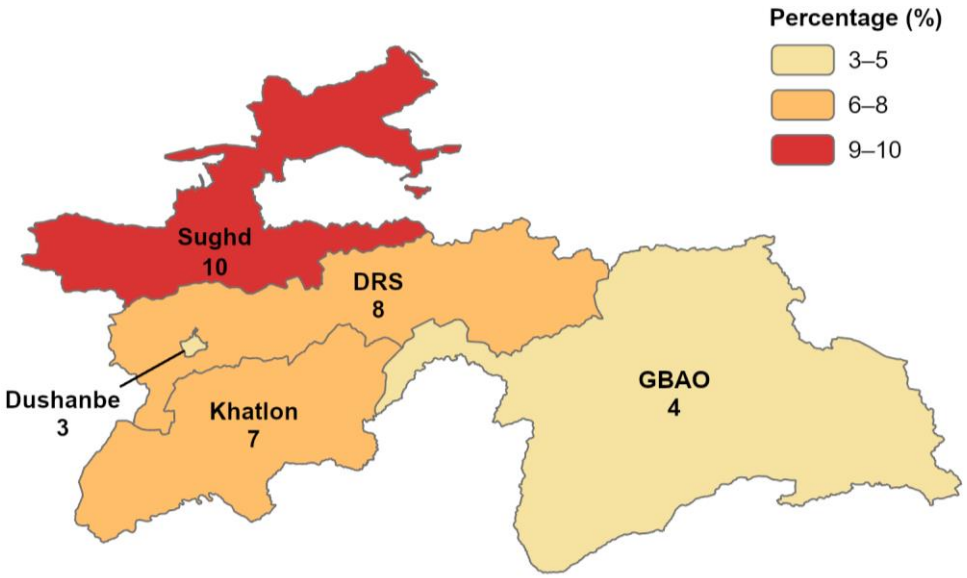
Trends: In the 2012 and 2017 surveys, miscarriages, stillbirths, and abortions were not included in the calculation of the teenage pregnancy indicator. Therefore, to estimate trends in teen pregnancy across surveys, the percentage of women age 15–19 who had begun childbearing (that is, who had ever had a live birth or who were pregnant at the time of the interview) was examined. This has remained stable at 7% since 2012.

Patterns by background characteristics

- The teenage pregnancy rate is lower in urban areas than in rural areas (5% versus 8%).
- Teenage pregnancy varies by region. Three percent of young women living in Dushanbe have ever been pregnant, as compared with 10% of women living in Sughd (**Map 5.2**).

Map 5.2 **Teenage pregnancy by region**

Percentage of women age 15–19 who have ever been pregnant



5.9 PREGNANCY OUTCOMES

Pregnancy outcomes

Live birth: a child who was born alive, even if for a very short time

Stillbirth: a child who was born dead (no signs of life) following a pregnancy that lasted 7 months (28 weeks) or longer

Miscarriage: a pregnancy that ended involuntarily before completing 7 months (28 weeks)

Induced abortion: a pregnancy that was voluntarily ended

Sample: Pregnancies among women age 15–49 ending in the 3 years preceding the survey

Eighty-three percent of pregnancies ending in the 3 years preceding the survey resulted in live births, 12% were miscarriages, 1% were stillbirths, and 4% were induced abortions (**Table 5.13**).

Patterns by background characteristics

- The percentage of women with live births is highest among those less than age 20 (93%) and lowest among those age 35–44 (70%). Miscarriages (19%) and induced abortions (10%) are higher among women age 35–44 than among their counterparts.
- The percentage of live births is highest among first pregnancies (94%). Conversely, higher-order pregnancies (fifth or higher) are least likely to result in live births (62%) and most likely to result in miscarriages (26%) and induced abortions (12%).
- The percentage of live births is slightly higher in rural areas than in urban areas (85% versus 79%), while the percentage of miscarriages is higher in urban areas (16% versus 10%).

5.10 INDUCED ABORTION

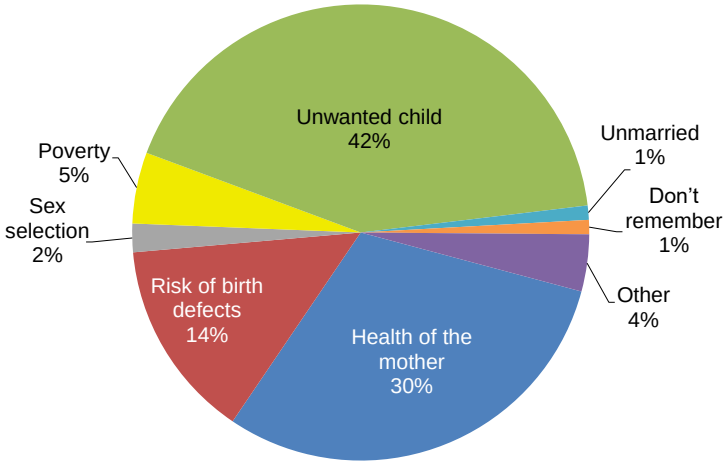
The total abortion rate (TAR) in 2023 is 0.2 abortions per woman and is similar in urban and rural areas (**Table 5.14**). The rate at which women have abortions increases with age, from 1 abortion per 1,000 women in the 15–19 age group to a peak of 11 abortions per 1,000 women in the 25–29 age group. The TAR in 2023 is lower than the rate reported in 2012 and 2017 (0.5 abortions per woman).

Five percent of women age 15–49 in Tajikistan report having at least one induced abortion in their lifetime. Among women who have had an induced abortion, 79% had one abortion, 19% had two to three abortions, and 1% had four or more abortions. The mean number of abortions per woman is 1.3 (**Table 5.15**).

Among women who reported an induced abortion in the 3 years prior to the survey, 42% cited not wanting a child at that time as the main reason, 30% mentioned maternal health concerns, and 14% were worried about the risk of birth defects (**Figure 5.4**).

Figure 5.4 **Reason for induced abortion**

Percent distribution of pregnancies ending in the 3 years before the survey



Note: Sum may be less than 100% due to rounding.

Patterns by background characteristics

- The prevalence of induced abortion increases with age, reaching 8% among women age 35 and above (**Table 5.15**).
- A higher percentage of currently married women reported having an induced abortion in their lifetime (6%) than formerly married women (4%) and never-married women (less than 1%).
- The percentage of women reporting induced abortions increases with number of living children. Less than 1% of women with no children reported having an induced abortion, as compared with 10% of women with four or more children.

LIST OF TABLES

For more information on fertility levels and some of the determinants of fertility, see the following tables:

- **Table 5.1 Current fertility**
- **Table 5.2 Fertility by background characteristics**
- **Table 5.3.1 Trends in age-specific fertility rates**
- **Table 5.3.2 Trends in age-specific and total fertility rates**
- **Table 5.4 Children ever born and living**
- **Table 5.5 Birth intervals**
- **Table 5.6 Postpartum amenorrhea, abstinence, and insusceptibility**
- **Table 5.7 Median duration of amenorrhea, postpartum abstinence, and postpartum insusceptibility**
- **Table 5.8 Age at first menstruation**
- **Table 5.9 Menopause**
- **Table 5.10 Age at first birth**
- **Table 5.11 Median age at first birth**
- **Table 5.12 Teenage pregnancy**
- **Table 5.13 Pregnancy outcome by background characteristics**
- **Table 5.14 Induced abortion rates**
- **Table 5.15 Lifetime experience with induced abortion**

Table 5.1 Current fertility

Age-specific and total fertility rates, the general fertility rate, and the crude birth rate for the 3 years preceding the survey, according to residence, Tajikistan DHS 2023

	Residence		
Age group	Urban	Rural	Total
10–14	[0]	[0]	[0]
15–19	36	51	47
20–24	245	292	280
25–29	192	184	186
30–34	107	107	107
35–39	56	58	58
40–44	12	15	14
45–49	[2]	[2]	[2]
TFR (15–49)	3.2	3.5	3.5
GFR	112	128	124
CBR	25.4	27.8	27.1

Note: Age-specific fertility rates are per 1,000 women. Estimates in brackets are truncated. Rates are for the period 1–36 months preceding the interview. Rates for the 10–14 age group are based on retrospective data from women age 15–17.
TFR: total fertility rate, expressed per woman
GFR: general fertility rate, expressed per 1,000 women age 15–44
CBR: crude birth rate, expressed per 1,000 population

Table 5.2 Fertility by background characteristics

Total fertility rate for the 3 years preceding the survey, percentage of women age 15–49 currently pregnant, and mean number of children ever born to women age 40–49, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Total fertility rate	Percentage of women age 15–49 currently pregnant	Mean number of children ever born to women age 40–49
Residence			
Urban	3.2	6.6	3.0
Rural	3.5	8.0	3.4
Region			
Dushanbe	3.2	6.2	3.2
GBAO	3.3	5.8	2.8
Sughd	3.4	7.2	3.1
DRS	3.5	6.9	3.5
Khatlon	3.6	8.9	3.4
FTF districts	3.8	8.3	3.5
Education			
None/primary	3.6	7.6	3.5
General basic	3.5	6.8	3.5
General secondary	3.6	8.0	3.4
Professional primary/ middle	3.6	9.1	2.9
Higher	3.1	7.4	2.6
Wealth quintile			
Lowest	3.7	7.8	3.6
Second	3.5	8.0	3.3
Middle	3.5	8.9	3.2
Fourth	3.5	6.9	3.3
Highest	3.2	6.6	3.1
Total	3.5	7.6	3.3

Note: Total fertility rates are for the period 1–36 months preceding the interview.

Table 5.3.1 Trends in age-specific fertility rates

Age-specific fertility rates for 5-year periods preceding the survey, according to age group, Tajikistan DHS 2023

	Number of years preceding survey			
Age group	0–4	5–9	10–14	15–19
10–14	[0]	0	0	0
15–19	49	59	56	39
20–24	274	300	254	218
25–29	187	211	230	184
30–34	109	130	122	[133]
35–39	53	55	[69]	
40–44	15	[14]		
45–49	[2]			

Note: Age-specific fertility rates are per 1,000 women. Estimates in brackets are truncated. Rates exclude the month of the interview. For the 0–4 year period, rates for the 10–14 age group are based on retrospective data from women age 15–19.

Table 5.3.2 Trends in age-specific and total fertility rates

Age-specific and total fertility rates (TFR) for the 3-year period preceding several surveys, according to mother's age at the time of the birth, Tajikistan DHS 2023

Mother's age at birth	2012 TjDHS	2017 TjDHS	2023 TjDHS
15–19	54	54	47
20–24	253	303	280
25–29	216	207	186
30–34	139	123	107
35–39	69	55	58
40–44	19	11	14
45–49	[2]	[0]	[2]
TFR (15–49)	3.8	3.8	3.5

Note: Age-specific fertility rates are per 1,000 women. Rates for the 45–49 age group may be slightly biased due to truncation and are therefore displayed in brackets.

Table 5.4 Children ever born and living

Percent distribution of all women and currently married women age 15–49 by number of children ever born, mean number of children ever born, and mean number of living children, according to age group, Tajikistan DHS 2023

Age group	Number of children ever born											Total	Number of women	Mean number of children ever born	Mean number of living children
	0	1	2	3	4	5	6	7	8	9	10+				
ALL WOMEN															
15–19	97.4	2.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	1,710	0.0	0.0
20–24	40.0	28.9	25.5	5.3	0.2	0.0	0.0	0.0	0.0	0.0	0.0	100.0	1,616	1.0	0.9
25–29	9.2	13.4	33.3	32.3	10.4	1.3	0.2	0.0	0.0	0.0	0.0	100.0	1,559	2.3	2.2
30–34	5.7	8.1	17.1	35.8	25.8	6.1	1.4	0.1	0.0	0.0	0.0	100.0	1,545	2.9	2.9
35–39	4.3	7.3	14.2	29.2	29.0	12.6	2.9	0.6	0.0	0.0	0.0	100.0	1,435	3.2	3.1
40–44	5.3	5.7	14.5	27.6	29.4	11.0	4.2	1.5	0.4	0.1	0.1	100.0	1,096	3.3	3.2
45–49	4.9	8.8	15.3	29.8	22.1	12.6	3.2	1.8	0.7	0.5	0.2	100.0	917	3.2	3.1
Total	27.4	11.1	17.2	21.6	15.2	5.4	1.4	0.4	0.1	0.1	0.0	100.0	9,879	2.1	2.1
CURRENTLY MARRIED WOMEN															
15–19	80.3	19.4	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	220	0.2	0.2
20–24	26.1	35.3	31.7	6.7	0.1	0.0	0.0	0.0	0.0	0.0	0.0	100.0	1,281	1.2	1.2
25–29	4.8	12.3	35.4	34.6	11.3	1.4	0.2	0.0	0.0	0.0	0.0	100.0	1,437	2.4	2.4
30–34	2.7	5.8	17.0	38.2	28.1	6.6	1.5	0.1	0.0	0.0	0.0	100.0	1,407	3.1	3.0
35–39	1.6	5.2	13.5	30.5	31.5	14.0	3.2	0.6	0.0	0.0	0.0	100.0	1,291	3.4	3.3
40–44	2.3	4.6	13.8	28.7	31.7	11.9	4.6	1.7	0.5	0.2	0.1	100.0	974	3.5	3.4
45–49	1.6	7.0	14.1	32.2	24.3	13.9	3.7	1.9	0.7	0.6	0.0	100.0	781	3.4	3.3
Total	9.1	12.5	21.3	27.7	19.8	7.0	1.9	0.6	0.1	0.1	0.0	100.0	7,392	2.7	2.6

Table 5.5 Birth intervals

Percent distribution of non-first live births in the 5 years preceding the survey by number of months since preceding live birth, and median number of months since preceding live birth, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Months since preceding live birth						Total	Number of non-first live births	Median number of months since preceding live birth
	7–17	18–23	24–35	36–47	48–59	60+			
Mother's age									
15–19	nc	nc	nc	nc	nc	nc	nc	nc	nc
20–29	18.2	24.8	31.3	13.9	6.6	5.2	100.0	2,010	26.0
30–39	6.0	11.2	18.9	16.2	15.0	32.7	100.0	1,568	46.4
40–49	2.7	10.3	10.0	9.6	14.2	53.1	100.0	175	64.2
Sex of preceding birth									
Male	13.5	17.6	23.7	14.8	10.9	19.4	100.0	1,827	33.2
Female	11.4	19.2	26.4	14.5	10.0	18.5	100.0	1,926	32.3
Survival of preceding birth									
Living	11.9	18.5	25.2	14.7	10.5	19.2	100.0	3,649	32.8
Dead	30.0	16.1	23.7	12.2	7.7	10.3	100.0	104	25.4
Birth order									
2–3	14.6	20.9	26.5	14.6	8.3	15.0	100.0	2,659	29.8
4–6	6.8	12.4	21.9	14.6	15.8	28.6	100.0	1,077	43.1
7+	*	*	*	*	*	*	*	*	*
Residence									
Urban	12.5	16.1	22.5	14.4	10.6	23.9	100.0	922	35.2
Rural	12.4	19.2	26.0	14.8	10.4	17.3	100.0	2,831	31.8
Region									
Dushanbe	15.4	16.2	20.7	12.4	10.7	24.6	100.0	366	34.3
GBAO	13.6	15.2	19.9	15.8	12.9	22.7	100.0	55	37.8
Sughd	10.2	15.0	28.4	14.8	10.7	20.9	100.0	1,010	34.4
DRS	15.2	17.9	22.4	15.6	9.9	19.0	100.0	893	32.5
Khatlon	11.4	21.9	25.8	14.5	10.5	15.9	100.0	1,430	30.9
FTF districts	12.6	20.9	26.7	14.4	10.7	14.7	100.0	890	30.6
Mother's education									
None/primary	10.1	17.0	24.5	16.7	14.2	17.6	100.0	224	35.3
General basic	11.1	18.1	24.0	16.1	10.8	19.9	100.0	1,255	33.9
General secondary	13.8	18.7	25.8	14.4	9.3	17.9	100.0	1,655	31.2
Professional primary/ middle	12.3	19.1	24.0	12.3	10.9	21.3	100.0	241	32.1
Higher	11.8	18.5	26.9	11.1	11.8	19.9	100.0	378	32.3
Wealth quintile									
Lowest	10.6	19.5	27.0	15.8	10.4	16.7	100.0	789	32.2
Second	10.3	18.7	27.0	15.5	11.3	17.2	100.0	776	33.0
Middle	14.8	19.4	22.9	16.1	10.0	16.9	100.0	733	31.6
Fourth	12.6	18.9	26.3	12.7	9.6	19.9	100.0	751	31.8
Highest	14.0	15.3	21.9	13.2	11.0	24.6	100.0	704	35.2
Total	12.4	18.4	25.1	14.7	10.5	18.9	100.0	3,753	32.6

Note: First-order live births are excluded. The interval for multiple births is the number of months since the preceding pregnancy that ended in a live birth. An asterisk indicates that a figure is based on fewer than 25 unweighted births and has been suppressed.
nc = no cases

Table 5.6 Postpartum amenorrhea, abstinence, and insusceptibility

Percentage of live births and stillbirths in the 3 years preceding the survey for which mothers are postpartum amenorrheic, abstaining, and insusceptible, by number of months since birth, and median and mean durations, Tajikistan DHS 2023

Months since birth	Percentage of births for which the mother is:			Number of births[2]
	Amenorrheic	Abstaining	Insusceptible[1]	
<2	72.9	73.2	87.8	201
2–3	42.8	27.6	54.0	195
4–5	23.9	22.4	38.0	218
6–7	29.9	15.9	40.2	157
8–9	13.1	9.2	19.6	187
10–11	13.0	11.8	24.0	209
12–13	7.2	8.6	15.5	190
14–15	8.6	13.8	18.2	162
16–17	4.3	9.1	11.5	162
18–19	4.3	9.0	12.6	150
20–21	7.3	8.2	11.9	173
22–23	7.2	7.9	14.2	182
24–25	1.7	7.9	8.6	157
26–27	0.7	4.2	4.9	160
28–29	3.0	8.6	10.1	151
30–31	2.1	2.5	4.6	157
32–33	2.1	5.5	6.2	164
34–35	1.4	5.6	7.0	192
Total	14.7	14.8	22.9	3,167
Median	2.7	2.4	4.2	na
Mean	5.9	6.0	8.8	na

Note: Estimates are based on status at the time of the survey.
na = not applicable
[1] Includes live births and stillbirths for which mothers are either still amenorrheic or still abstaining (or both) following birth
[2] Includes live births and stillbirths

Table 5.7 Median duration of amenorrhea, postpartum abstinence, and postpartum insusceptibility

Median number of months of postpartum amenorrhea, postpartum abstinence, and postpartum insusceptibility following live births and stillbirths in the 3 years preceding the survey, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Postpartum amenorrhea	Postpartum abstinence	Postpartum insusceptibility[1]
Mother's age			
15–29	2.6	2.4	4.0
30–49	3.1	(2.4)	4.8
Residence			
Urban	2.4	2.0	3.3
Rural	2.8	2.6	4.5
Region			
Dushanbe	(2.4)	(2.2)	(2.9)
GBAO	(3.7)	*	(4.8)
Sughd	3.6	(2.4)	5.2
DRS	(1.3)	(2.2)	4.1
Khatlon	2.7	2.6	4.1
FTF districts	(2.8)	(2.6)	5.2
Mother's education			
None/primary	*	*	*
General basic	(1.8)	(1.9)	3.7
General secondary	3.0	2.7	4.6
Professional primary/ middle	*	*	3.9
Higher	3.4	(2.8)	4.7
Wealth quintile			
Lowest	(2.8)	(2.5)	4.4
Second	3.8	3.0	5.1
Middle	(2.2)	(2.6)	4.8
Fourth	(2.5)	(2.2)	3.2
Highest	2.6	1.8	3.8
Total	2.7	2.4	4.2

Note: Medians are based on status at the time of the survey (current status). Figures in parentheses are based on 25–49 unweighted births. An asterisk indicates that a figure is based on fewer than 25 unweighted births and has been suppressed.
[1] Includes live births and stillbirths for which mothers are either still amenorrheic or still abstaining (or both) following birth

Table 5.8 Age at first menstruation

Percent distribution of women age 15–49 by age at menarche, and mean age at menarche, according to current age, Tajikistan DHS 2023

Current age	Age at menarche								Percentage who have never menstruated	Total	Number of women	Mean age at menarche	Number of women who have ever menstruated[1]
	≤10	11	12	13	14	15	≥16	Don't know					
15–19	0.3	1.9	6.4	17.6	34.9	27.5	8.5	0.0	3.0	100.0	1,710	14.1	1,660
20–24	0.5	0.5	5.3	15.4	33.6	27.1	17.3	0.2	0.2	100.0	1,616	14.3	1,611
25–29	0.1	1.0	7.0	12.4	29.6	30.3	19.6	0.0	0.0	100.0	1,559	14.5	1,558
30–34	0.3	0.4	5.3	12.7	30.5	30.9	19.3	0.6	0.0	100.0	1,545	14.5	1,536
35–39	0.1	1.2	4.1	13.0	29.5	29.4	21.9	0.7	0.0	100.0	1,435	14.6	1,424
40–44	0.8	1.2	5.0	13.0	29.3	28.2	21.9	0.2	0.4	100.0	1,096	14.5	1,090
45–49	0.5	1.3	4.9	10.1	32.3	29.0	20.4	1.4	0.2	100.0	917	14.5	903
Total	0.3	1.1	5.5	13.8	31.5	28.9	17.9	0.4	0.6	100.0	9,879	14.4	9,781

[1] Number of women who gave a numeric response

Table 5.9 Menopause

Percentage of women age 30–49 who are menopausal, according to age, Tajikistan DHS 2023

Age	Percentage menopausal[1]	Number of women
30–34	1.3	1,545
35–39	3.7	1,435
40–41	6.8	422
42–43	10.6	460
44–45	13.9	432
46–47	25.6	322
48–49	37.1	377
Total	8.7	4,994

[1] Percentage of women (1) who are not pregnant, (2) who have had a birth in the past 5 years and are not postpartum amenorrheic, and (3) for whom one of the following additional conditions applies: (a) their last menstrual period occurred 6 or more months preceding the survey, (b) they declared that they are in menopause or have had a hysterectomy, or (c) they have never menstruated

Table 5.10 Age at first birth

Percentage of women age 15–49 who had a live birth by specific exact ages, percentage who have never had a live birth, and median age at first live birth, according to current age, Tajikistan DHS 2023

Current age	Percentage who had a live birth by exact age					Percentage who have never had a live birth	Number of women	Median age at first live birth
	15	18	20	22	25			
15–19	0.0	na	na	na	na	97.4	1,710	a
20–24	0.1	1.2	24.3	na	na	40.0	1,616	a
25–29	0.1	1.1	28.5	64.4	85.8	9.2	1,559	21.0
30–34	0.1	2.3	24.9	54.5	80.6	5.7	1,545	21.7
35–39	0.1	2.4	16.5	41.4	73.4	4.3	1,435	22.6
40–44	0.2	3.8	21.4	46.4	68.1	5.3	1,096	22.4
45–49	0.1	3.4	27.6	51.6	72.0	4.9	917	21.9
20–49	0.1	2.2	23.8	na	na	12.8	8,169	a
25–49	0.1	2.4	23.7	52.2	77.0	6.1	6,552	21.8

na = not applicable due to censoring
a = omitted because less than 50% of women had a birth before reaching the beginning of the age group

Table 5.11 Median age at first birth

Median age at first live birth among women age 25–49, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Women age 25–49
Residence	
Urban	22.3
Rural	21.7
Region	
Dushanbe	22.5
GBAO	24.8
Sughd	21.4
DRS	21.7
Khatlon	22.0
FTF districts	21.6
Education	
None/primary	22.5
General basic	21.5
General secondary	21.6
Professional primary/ middle	22.8
Higher	23.4
Wealth quintile	
Lowest	22.2
Second	21.9
Middle	21.7
Fourth	21.3
Highest	22.1
Total	21.8

Table 5.12 Teenage pregnancy

Percentage of women age 15–19 who have ever had a live birth, percentage who have ever had a pregnancy loss, percentage who are currently pregnant, and percentage who have ever been pregnant, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage of women age 15–19 who:					Number of women
	Have ever had a live birth	Have ever had a pregnancy loss[1]	Are currently pregnant	Have ever been pregnant	Have begun childbearing[2]	
Age						
15	0.0	0.0	0.0	0.0	0.0	405
16	0.0	0.0	0.0	0.0	0.0	340
17	0.0	0.0	0.4	0.4	0.4	326
18	2.6	0.2	7.5	10.0	10.0	310
19	11.0	0.3	18.3	28.3	28.0	329
Residence						
Urban	2.2	0.1	2.9	5.0	5.0	481
Rural	2.7	0.1	5.8	8.3	8.2	1,230
Region						
Dushanbe	1.4	0.0	1.3	2.6	2.6	203
GBAO	1.6	0.0	2.2	3.9	3.9	26
Sughd	3.1	0.0	6.4	9.5	9.5	473
DRS	3.2	0.3	5.5	8.3	8.0	416
Khatlon	2.2	0.1	4.8	6.7	6.7	592
FTF districts	1.9	0.2	5.4	7.3	7.3	336
Education						
None/primary	(5.0)	(0.0)	(12.4)	(17.4)	(17.4)	33
General basic	1.4	0.1	2.6	3.8	3.6	817
General secondary	4.3	0.1	7.6	11.5	11.5	634
Professional primary/ middle	0.9	0.0	6.1	7.0	7.0	126
Higher	2.9	0.0	4.2	7.1	7.1	100
Wealth quintile						
Lowest	1.5	0.0	4.7	5.3	5.3	297
Second	2.0	0.2	2.8	4.8	4.8	358
Middle	2.5	0.3	6.3	8.8	8.5	339
Fourth	4.4	0.0	8.2	12.3	12.3	315
Highest	2.7	0.0	3.4	6.0	6.0	402
Total	2.6	0.1	5.0	7.3	7.3	1,710

Note: Figures in parentheses are based on 25–49 unweighted cases.
[1] Stillbirth, miscarriage, or abortion
[2] Women who have had a live birth or who are currently pregnant; excludes women who have had only a pregnancy that resulted in stillbirth, miscarriage, or abortion. This indicator should be used when making comparisons with TjDHS surveys implemented prior to 2023.

Table 5.13 Pregnancy outcome by background characteristics

Percent distribution of pregnancies ending in the 3 years preceding the survey by type of outcome, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Pregnancy outcome				Total	Number of pregnancies
	Live birth	Stillbirth[1]	Miscarriage[2]	Induced abortion		
Age at pregnancy outcome						
<20	93.2	0.5	5.2	1.1	100.0	242
20–24	89.3	0.3	7.9	2.5	100.0	1,493
25–34	80.0	0.5	14.6	4.8	100.0	1,697
35–44	70.3	1.2	18.5	10.0	100.0	384
45–49	*	*	*	*	*	*
Pregnancy order						
First	94.1	0.3	5.0	0.7	100.0	900
Second	92.5	0.3	6.2	1.1	100.0	881
Third	82.5	0.9	12.6	4.0	100.0	832
Fourth	75.5	0.9	16.2	7.4	100.0	662
Fifth or higher	61.7	0.1	26.4	11.8	100.0	558
Residence						
Urban	79.1	0.7	16.3	3.9	100.0	1,015
Rural	84.8	0.4	10.4	4.4	100.0	2,817
Region						
Dushanbe	72.3	1.1	22.4	4.2	100.0	449
GBAO	86.7	0.4	9.1	3.8	100.0	47
Sughd	86.8	0.6	8.8	3.8	100.0	1,003
DRS	80.6	0.2	14.5	4.7	100.0	926
Khatlon	85.9	0.4	9.2	4.5	100.0	1,408
FTF districts	88.2	0.0	8.3	3.5	100.0	823
Education						
None/primary	87.4	0.6	10.0	2.0	100.0	176
General basic	78.6	0.3	15.1	6.0	100.0	1,128
General secondary	85.7	0.4	10.2	3.8	100.0	1,701
Professional primary/ middle	85.5	1.0	10.7	2.9	100.0	359
Higher	82.6	0.9	12.4	4.1	100.0	468
Wealth quintile						
Lowest	85.7	0.1	9.1	5.1	100.0	727
Second	84.5	0.4	11.4	3.7	100.0	739
Middle	83.5	0.4	11.0	5.1	100.0	793
Fourth	83.6	0.7	11.8	3.8	100.0	798
Highest	79.3	0.7	16.2	3.9	100.0	775
Total	83.3	0.5	11.9	4.3	100.0	3,832

Note: An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.
[1] Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal death in pregnancies lasting 7 or more months.
[2] Miscarriages are fetal deaths in pregnancies lasting less than 28 weeks. When pregnancy duration is reported in months, miscarriages are fetal deaths in pregnancies lasting less than 7 months.

Table 5.14 Induced abortion rates

Age-specific and total induced abortion rates, and general abortion rates, for the 3 years preceding the survey, according to residence, Tajikistan DHS 2023

	Residence		
Age group	Urban	Rural	Total
10–14	[0]	[0]	[0]
15–19	[0]	[1]	[1]
20–24	6	8	8
25–29	11	11	11
30–34	8	5	6
35–39	6	9	8
40–44	1	2	2
45–49	[0]	[4]	[3]
TAR (15–49)	0.2	0.2	0.2
GAR	6	7	6

Note: Age-specific induced abortion rates are per 1,000 women. Estimates in brackets are truncated. Rates are for the period 1–36 months preceding the interview. Rates for the 10–14 age group are based on retrospective data from women age 15–17.
TAR: total induced abortion rate, expressed per woman
GAR: general induced abortion rate, expressed per 1,000 women age 15–44

Table 5.15 Lifetime experience with induced abortion

Percentage of women who have had at least one induced abortion, and among these women, percent distribution by number of abortions, and the mean number of abortions according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage of women with an induced abortion	Number of women	Among women who had an abortion, percent distribution by number of abortions				Total	Mean number of abortions	Number of women with abortions
			1	2–3	4–5	6+			
Age									
<20	0.1	1,710	*	*	*	*	*	*	1
20–24	2.1	1,616	(87.0)	(13.0)	(0.0)	(0.0)	(100.0)	(1.1)	34
25–34	5.5	3,104	80.7	18.3	0.9	0.0	100.0	1.2	171
35+	8.3	3,448	77.5	20.9	1.6	0.0	100.0	1.3	285
Number of living children									
0	0.3	2,732	*	*	*	*	*	*	7
1	1.8	1,123	*	*	*	*	*	*	20
2–3	6.6	3,981	81.6	18.4	0.0	0.0	100.0	1.2	263
4+	9.8	2,043	76.6	20.3	3.1	0.0	100.0	1.3	201
Marital status									
Never married	0.1	1,964	*	*	*	*	*	*	3
Currently married	6.3	7,392	79.0	19.7	1.3	0.0	100.0	1.3	466
Formerly married	4.3	522	(82.7)	(17.3)	(0.0)	(0.0)	(100.0)	(1.2)	23
Residence									
Urban	5.2	2,705	77.5	21.3	1.2	0.0	100.0	1.3	142
Rural	4.9	7,174	80.1	18.7	1.3	0.0	100.0	1.3	350
Region									
Dushanbe	6.5	1,077	80.7	17.8	1.5	0.0	100.0	1.3	70
GBAO	4.2	157	(77.3)	(22.7)	(0.0)	(0.0)	(100.0)	(1.2)	7
Sughd	4.3	2,780	82.4	16.6	1.0	0.0	100.0	1.2	119
DRS	5.7	2,356	76.1	23.9	0.0	0.0	100.0	1.3	135
Khatlon	4.6	3,509	79.2	18.4	2.4	0.0	100.0	1.3	160
FTF districts	3.8	1,937	77.3	19.6	3.1	0.0	100.0	1.3	74
Education									
None/primary	4.2	443	*	*	*	*	*	*	18
General basic	6.2	3,271	76.6	21.8	1.6	0.0	100.0	1.3	204
General secondary	4.2	4,230	79.8	18.5	1.6	0.0	100.0	1.2	176
Professional primary/ middle	4.5	778	(92.1)	(7.9)	(0.0)	(0.0)	(100.0)	(1.1)	35
Higher	5.1	1,157	78.4	21.6	0.0	0.0	100.0	1.2	59
Wealth quintile									
Lowest	4.4	1,842	78.4	21.6	0.0	0.0	100.0	1.2	81
Second	4.4	1,967	81.7	17.5	0.8	0.0	100.0	1.2	86
Middle	5.4	1,966	76.5	20.9	2.7	0.0	100.0	1.3	106
Fourth	4.9	1,964	83.4	15.0	1.7	0.0	100.0	1.3	96
Highest	5.7	2,140	77.6	21.6	0.8	0.0	100.0	1.3	123
Total	5.0	9,879	79.3	19.4	1.3	0.0	100.0	1.3	491

Note: Currently married includes respondents in consensual union (living together). Formerly married includes divorced, separated, and widowed respondents. 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.

FERTILITY PREFERENCES 6

Key Findings

- ***Desire for another child:*** 30% of currently married women age 15–49 want to have another child in the future.
- ***Ideal family size:*** The mean ideal family size is 3.4 children among women overall and 3.7 children among currently married women.
- ***Fertility planning status:*** 89% of all pregnancies that occurred in the 3 years before the survey were wanted at the time of conception, 5% were wanted later, and 6% were not wanted.
- ***Wanted fertility:*** The wanted fertility rate is 3.2 children per woman, while the total fertility rate is 3.5 children per woman.

Information on fertility preferences can help family planning program planners assess the desire for children, the extent of mistimed and unwanted pregnancies, and the demand for contraception to space or limit births. This information suggests the direction that fertility patterns could take in the future.

This chapter presents information on whether and when married women want more children, their ideal family size, whether the most recent birth was wanted, and the theoretical fertility rate if all unwanted births were prevented.

6.1 DESIRE FOR ANOTHER CHILD

Desire for another child

Women were asked whether they wanted more children and, if so, how long they would prefer to wait before the birth of the next child. Women who are sterilized are assumed not to want any more children.

Sample: Currently married women age 15–49

Overall, 19% of currently married women want to have another child soon (within the next 2 years), 5% want to have another child later (in 2 or more years), and 6% want to have another child but have not decided when (**Table 6.1**). Thirty-seven percent of currently married women declared that they want no more children or that they are sterilized. Twenty-five percent are undecided about whether they want more children.

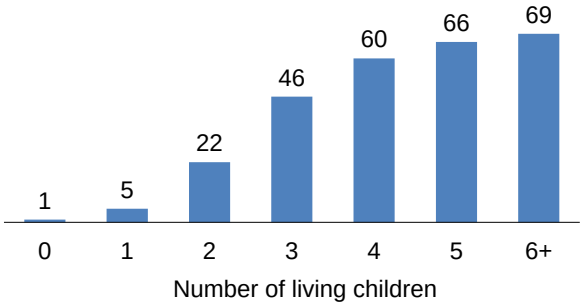
Trends: The percentage of currently married women age 15–49 who want no more children or are sterilized decreased from 44% in the 2012 and 2017 TjDHS surveys to 37% in the 2023 TjDHS.

Patterns by background characteristics

- The percentage of married women who want no more children is higher in Sughd (49%) than in the other regions (31%–34%) (**Table 6.2**).
- The percentage of currently married women who want no more children increases significantly with increasing number of living children, from 1% among those with no children to 69% among those with six or more children (**Figure 6.1**).

Figure 6.1 **Desire to limit childbearing by number of living children**

Percentage of currently married women age 15–49 who want no more children



6.2 IDEAL FAMILY SIZE

Ideal family size

Respondents with no children were asked "If you could choose exactly the number of children to have in your whole life, how many would that be?" Respondents who had children were asked "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?"

Sample: Women age 15–49

The mean ideal family size among all women age 15–49 in Tajikistan is 3.4 children (**Table 6.3**). The mean ideal family size is slightly higher among currently married women (3.7 children).

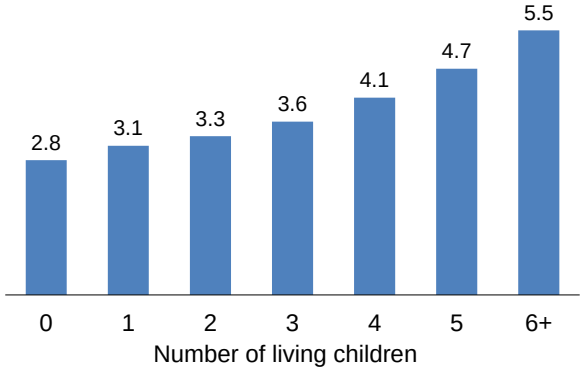
Trends: The mean ideal family size decreased slightly from the 2012 TjDHS to the 2017 TjDHS (from 3.6 to 3.4 children among all women and from 3.8 to 3.7 children among currently married women) and has since remained unchanged.

Patterns by background characteristics

- The mean ideal number of children among all women increases from 2.7 children among those age 15–19 to 3.8 children among those age 40–44 before decreasing slightly to 3.7 among those age 45–49 (**Table 6.4**).
- Urban women, on average, have a slightly smaller ideal family size (3.3) than rural women (3.5).
- Mean ideal family size decreases slightly with increasing household wealth, from 3.6 children in the lowest wealth quintile to 3.3 children in the highest quintile.
- Mean ideal family size increases with increasing number of living children, from 2.8 children among women with no children to 5.5 children among those with six or more children (**Figure 6.2**).

Figure 6.2 **Ideal family size by number of living children**

Mean ideal number of children



6.3 Fertility Planning Status

Planning status of births/pregnancies

Women reported whether their births/pregnancies were wanted at the time (planned birth), at a later time (mistimed birth), or not at all (unwanted birth).

Sample: Current pregnancies and live births in the 3 years before the survey among women age 15–49 and all pregnancy outcomes in the 3 years before the survey among women age 15–49

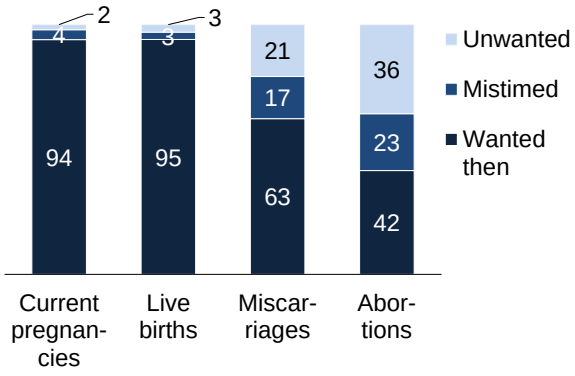
Eighty-nine percent of all pregnancies in the 3 years preceding the survey were wanted at the time of conception, 5% were wanted later, and 6% were not wanted (**Table 6.5**).

With respect to all pregnancy outcomes during the 3-year period before the survey, the vast majority of current pregnancies (94%) and live births (95%) were wanted, while slightly less than two-thirds of miscarriages (63%) were wanted. Among pregnancies that resulted in abortions, more than half (59%) were either mistimed (23%) or unwanted (36%) (**Figure 6.3**).

Trends: The percentage of live births in the 3 years preceding the survey that were wanted at the time of conception has remained relatively stable over the past decade (93% in 2012 and 94% in 2023). The percentage of live births that were unwanted has also remained stable (3%).

Figure 6.3 **Fertility planning status**

Percent distribution of pregnancy outcomes among women age 15–49 in the 3 years before the survey by planning status of pregnancy



Note: Sum may be greater than 100% due to rounding.

Patterns by background characteristics

- The percentage of live births that were wanted at the time of conception decreases with increasing birth order, from 98% among first births to 88% among fourth- and higher-order births (**Table 6.5**).
- The percentage of unwanted births increases with mother's age at birth, from less than 1% among women under age 20 at the time of birth to 14% among women age 40–44.

6.4 Wanted Fertility Rates

Unwanted birth

Any birth in excess of the number of children a woman reported as her ideal number.

Wanted birth

Any birth less than or equal to the number of children a woman reported as her ideal number.

Wanted fertility rate

The average number of children a woman would have by the end of her childbearing years if she bore children at the current age-specific fertility rates, excluding unwanted births.

Sample: Women age 15–49

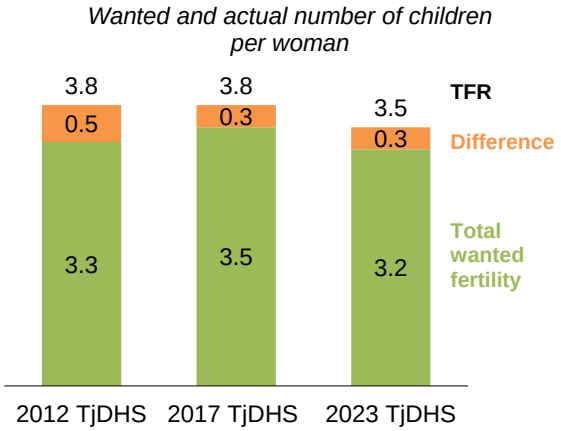
The wanted fertility rate is a measure of the potential demographic impact of fertility that would have prevailed in the 3 years preceding the survey if all unwanted births had been avoided. The total wanted fertility rate and the total fertility rate are calculated in the same manner. A birth is considered wanted if

the number of living children at the time of conception is lower than the ideal number of children reported by the woman. **Table 6.6** shows total wanted fertility rates and total fertility rates for the 3 years preceding the survey according to background characteristics.

The total wanted fertility rate is 3.2 children, while the actual fertility rate is 3.5 children; thus, on average, women are having 0.3 more children than they want (**Table 6.6**).

Trends: The total wanted fertility rate in Tajikistan increased from 3.3 in 2012 to 3.5 in 2017 before declining to 3.2 in 2023. The difference between the wanted and the actual fertility rate declined slightly from 0.5 in 2012 to 0.3 in 2017 and remained at 0.3 in 2023 (**Figure 6.4**).

Figure 6.4 **Trends in wanted and actual fertility**



Patterns by background characteristics

- The gap between wanted and actual fertility is minimal in both rural areas (0.2 children) and urban areas (0.1 children).
- The gap between wanted and actual fertility is larger in Khatlon (0.4 children) and Districts of Republican Subordination (DRS) (0.3 children) than in the other regions (0.1 children).

List of Tables

For more information on fertility preferences, see the following tables:

- **Table 6.1 Fertility preferences according to number of living children**
- **Table 6.2 Desire to limit childbearing**
- **Table 6.3 Ideal number of children according to number of living children**
- **Table 6.4 Mean ideal number of children according to background characteristics**
- **Table 6.5 Fertility planning status**
- **Table 6.6 Wanted fertility rates**

Table 6.1 Fertility preferences according to number of living children

Percent distribution of currently married women age 15–49 by desire for children, according to number of living children, Tajikistan DHS 2023

	Number of living children[1]							
Desire for children	0	1	2	3	4	5	6+	Total 15–49
Have another soon[2]	50.5	36.2	24.7	12.4	6.8	4.3	4.3	18.9
Have another later[3]	0.1	11.4	7.8	4.3	1.3	0.9	0.8	4.9
Have another, undecided when	3.1	10.3	9.2	5.8	2.7	1.8	3.3	6.1
Undecided	15.0	25.1	28.3	26.8	23.6	22.5	18.5	25.1
Want no more	1.2	4.8	21.1	43.1	56.7	60.9	66.7	34.8
Sterilized[4]	0.0	0.6	1.3	2.5	3.4	5.1	1.9	2.2
Declared infecund	30.2	11.7	7.6	5.3	5.5	4.3	4.6	8.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	449	1,009	1,629	2,196	1,494	478	137	7,392

[1] The number of living children includes the current pregnancy.
[2] Wants next birth within 2 years
[3] Wants to delay next birth for 2 or more years
[4] Includes both female and male sterilization

Table 6.2 Desire to limit childbearing

Percentage of currently married women age 15–49 who want no more children by number of living children, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Number of living children[1]							Total
	0	1	2	3	4	5	6+	
Residence								
Urban	0.0	5.7	21.2	45.4	65.3	75.2	(81.8)	36.8
Rural	1.6	5.2	22.9	45.6	58.4	63.8	66.8	37.0
Region								
Dushanbe	0.0	4.9	13.8	37.3	60.1	72.0	*	32.3
GBAO	(0.0)	1.0	18.0	44.7	65.8	*	*	33.9
Sughd	1.3	5.2	33.2	64.7	80.3	(89.7)	*	48.8
DRS	1.0	3.1	17.7	31.5	53.7	63.2	59.5	31.0
Khatlon	1.5	7.0	18.1	37.1	51.4	60.3	(67.3)	32.7
FTF districts	0.0	3.4	13.1	33.6	47.0	57.0	*	29.2
Education								
None/primary	*	(6.4)	18.1	48.0	59.0	(60.4)	*	41.3
General basic	0.9	5.6	26.2	44.2	61.8	71.2	83.1	43.0
General secondary	0.8	6.1	22.5	45.5	58.7	61.8	54.6	35.5
Professional primary/ middle	(0.0)	4.6	11.4	48.6	58.2	*	*	27.3
Higher	4.2	2.6	23.8	47.0	61.9	*	*	30.9
Wealth quintile								
Lowest	1.3	3.7	20.4	39.2	53.3	60.4	(58.1)	36.1
Second	0.0	3.9	25.1	46.8	57.6	69.2	*	37.5
Middle	0.0	5.5	20.6	47.2	60.5	64.8	*	36.2
Fourth	4.2	7.1	22.6	46.2	63.1	67.7	*	37.2
Highest	0.0	5.7	23.0	46.8	67.5	74.0	(73.3)	37.8
Total	1.2	5.3	22.4	45.5	60.1	66.1	68.6	37.0

Note: Women who have been sterilized or whose husband has been sterilized are considered to want no more children. 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.
[1] The number of living children includes the current pregnancy.

Table 6.3 Ideal number of children according to number of living children

Percent distribution of women age 15–49 by ideal number of children, and mean ideal number of children for all respondents and for currently married respondents, according to number of living children, Tajikistan DHS 2023

	Number of living children[1]							
Ideal number of children	0	1	2	3	4	5	6+	Total
0	6.0	0.8	0.4	1.0	0.4	0.5	0.5	2.0
1	1.5	5.0	0.3	0.5	0.2	0.4	0.0	1.2
2	41.6	33.0	30.5	8.6	4.3	3.1	0.8	22.7
3	12.3	13.8	14.8	27.8	2.2	4.3	0.7	14.4
4	27.4	40.0	48.6	53.9	78.4	40.6	34.3	47.5
5	2.4	3.9	3.0	5.4	6.5	28.7	5.2	5.3
6+	2.7	2.8	1.8	2.4	7.7	21.4	57.0	4.9
Non-numeric responses	6.1	0.7	0.5	0.5	0.3	1.1	1.5	1.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	2,492	1,182	1,761	2,282	1,537	487	139	9,879
Mean ideal number of children for:[2]								
All women	2.8	3.1	3.3	3.6	4.1	4.7	5.5	3.4
Number of women	2,339	1,174	1,752	2,271	1,532	481	137	9,686
Currently married women	3.3	3.3	3.3	3.6	4.1	4.7	5.5	3.7
Number of currently married women	445	1,002	1,620	2,186	1,490	473	135	7,350

[1] The number of living children includes the current pregnancy.
[2] Means are calculated excluding respondents who gave non-numeric responses.

Table 6.4 Mean ideal number of children according to background characteristics

Mean ideal number of children for all women age 15–49, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Mean	Number of women[1]
Age		
15–19	2.7	1,588
20–24	3.3	1,584
25–29	3.5	1,549
30–34	3.6	1,541
35–39	3.7	1,424
40–44	3.8	1,091
45–49	3.7	910
Residence		
Urban	3.3	2,658
Rural	3.5	7,028
Region		
Dushanbe	3.3	1,073
GBAO	3.4	154
Sughd	3.4	2,733
DRS	3.5	2,307
Khatlon	3.5	3,420
FTF districts	3.3	1,889
Education		
None/primary	3.6	439
General basic	3.4	3,190
General secondary	3.5	4,149
Professional primary/middle	3.3	765
Higher	3.2	1,143
Wealth quintile		
Lowest	3.6	1,784
Second	3.5	1,918
Middle	3.5	1,933
Fourth	3.4	1,940
Highest	3.3	2,111
Total	3.4	9,686

[1] Number of women who gave a numeric response

Table 6.5 Fertility planning status

Percent distribution of live births and current pregnancies among women age 15–49 in the 3 years preceding the survey by planning status of the pregnancy, according to birth order and mother's age at birth, and percent distribution of all pregnancy outcomes among women age 15–49 in the 3 years preceding the survey by planning status of the pregnancy, according to type of pregnancy outcome, Tajikistan DHS 2023

Characteristic	Planning status of pregnancy outcome			Total	Number of pregnancy outcomes[1]
	Wanted then	Wanted later	Wanted no more		
LIVE BIRTHS AND CURRENT PREGNANCIES					
Birth order					
1	97.5	1.7	0.8	100.0	1,141
2	95.8	3.9	0.3	100.0	1,043
3	94.3	4.2	1.5	100.0	925
4+	88.2	2.9	8.9	100.0	833
Mother's age at birth[2]					
<20	96.9	2.9	0.2	100.0	297
20–24	95.9	3.3	0.8	100.0	1,617
25–29	94.4	3.1	2.6	100.0	1,088
30–34	93.3	3.0	3.7	100.0	588
35–39	89.2	1.6	9.2	100.0	286
40–44	79.8	5.9	14.3	100.0	62
45–49	*	*	*	100.0	5
Total	94.3	3.1	2.5	100.0	3,943
ALL PREGNANCY OUTCOMES					
Pregnancy outcome type					
Current pregnancies	93.6	4.3	2.2	100.0	752
Live births	94.5	2.8	2.6	100.0	3,191
Stillbirths	*	*	*	100.0	19
Miscarriages	62.5	16.9	20.6	100.0	458
Abortions	41.9	22.5	35.6	100.0	165
Total	89.2	5.2	5.6	100.0	4,584

Note: Pregnancy outcome refers to a miscarriage, abortion, live birth, or stillbirth. Some pregnancies produce multiple outcomes, for example in the case of twins. In this table, each pregnancy outcome is counted individually. Therefore, a pregnancy is counted more than once if it produces multiple births (live births or stillbirths). Current pregnancies, miscarriages, and abortions are always counted as one pregnancy outcome. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

[1] For pregnancies that resulted in multiple outcomes (for example, twins), each outcome is counted individually.

[2] For current pregnancies, the maternal age at birth is estimated as the mother's expected age at the time of the birth.

Table 6.6 Wanted fertility rates

Total wanted fertility rates and total fertility rates for the 3 years preceding the survey, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Total wanted fertility rate	Total fertility rate
Residence		
Urban	3.1	3.2
Rural	3.3	3.5
Region		
Dushanbe	3.1	3.2
GBAO	3.2	3.3
Sughd	3.3	3.4
DRS	3.2	3.5
Khatlon	3.2	3.6
FTF districts	3.4	3.8
Education		
None/primary	3.4	3.6
General basic	3.2	3.5
General secondary	3.3	3.6
Professional primary/middle	3.3	3.6
Higher	2.9	3.1
Wealth quintile		
Lowest	3.4	3.7
Second	3.2	3.5
Middle	3.3	3.5
Fourth	3.1	3.5
Highest	3.1	3.2
Total	3.2	3.5

Note: Rates are calculated based on births to women age 15–49 in the period 1–36 months preceding the survey. The total fertility rates are the same as those presented in Table 5.2.

FAMILY PLANNING 7

Key Findings

- ***Contraceptive use:*** Overall, 32% of currently married women use a method of family planning, with 28% using a modern method and 3% using a traditional method. The intrauterine device (IUD) is the most commonly used method (18%), followed by the male condom (4%).
- ***Sources of contraceptive methods:*** The majority of users of modern contraceptive methods (82%) obtain their methods from the public sector, with health centers (urban/rayon/rural) being the most common source (61%).
- ***Contraceptive discontinuation:*** Among contraceptive episodes experienced by women age 15–49 in the 5 years preceding the survey, 36% were discontinued within 12 months for any reason. Across all methods of contraception, the most common reason for discontinuation was the desire to become pregnant (35%).
- ***Unmet need for family planning:*** 21% of currently married women age 15–49 in Tajikistan have an unmet need for family planning (13% for spacing and 8% for limiting).
- ***Demand for family planning:*** The total demand for family planning that is satisfied is 61%; over half (54%) of the total demand is satisfied by modern methods.

Couples can use contraceptive methods to limit or space the number of children they have. This chapter presents information on use and sources of contraceptive methods, informed choice of methods, and rates and reasons for discontinuing contraceptives. It also examines the potential demand for family planning and how much contact nonusers have with family planning providers.

7.1 CONTRACEPTIVE KNOWLEDGE AND USE

High percentages of all women (91%), currently married women (98%), and sexually active unmarried women (87%) know of at least one contraceptive method (**Table 7.1**). The intrauterine device (IUD) is the most commonly known method among currently married women (96%), followed by the pill (91%) and the male condom (88%).

Contraceptive prevalence

Percentage of women who use any contraceptive method.

Sample: All women age 15–49, currently married women age 15–49, and sexually active unmarried women age 15–49

Modern methods

Include male and female sterilization, intrauterine devices (IUDs), injectables, implants, contraceptive pills, male and female condoms, emergency contraception, and the lactational amenorrhea method.

The contraceptive prevalence among all women is 24%, with 21% using modern methods. Contraceptive prevalence is higher among currently married women (32%), with 28% using modern methods. The IUD (18%) is by far the most widely used method among married women. Four percent report use of the male condom, 2% are using the pill, and 2% have been sterilized. Three percent of women report use of a traditional method, mostly withdrawal (**Table 7.3** and **Figure 7.1**).

The percentage of currently married women using any contraceptive method increases from 4% among those age 15–19 to a peak of 44% among those age 35–39 before declining to 29% among those age 45–49. The IUD is the most widely used method in all but the 15–19 age group, where the most commonly used methods are the lactational amenorrhea method and the male condom.

Trends: The use of modern contraceptive methods among currently married women has increased gradually over time, rising from 26% in 2012 to 28% in 2023. The use of traditional contraceptive methods among currently married women has remained stable during the past decade (2% in 2012 and 2017 and 3% in 2023) (**Table 7.4.1** and **Figure 7.2**).

Patterns by background characteristics

- Use of modern contraceptives is substantially higher among currently married women with three or four children (38%) and five or more children (40%) than among women with no children (1%) (**Table 7.4.2**).

Figure 7.1 **Contraceptive use**

Percentage of women age 15–49 currently using a contraceptive method

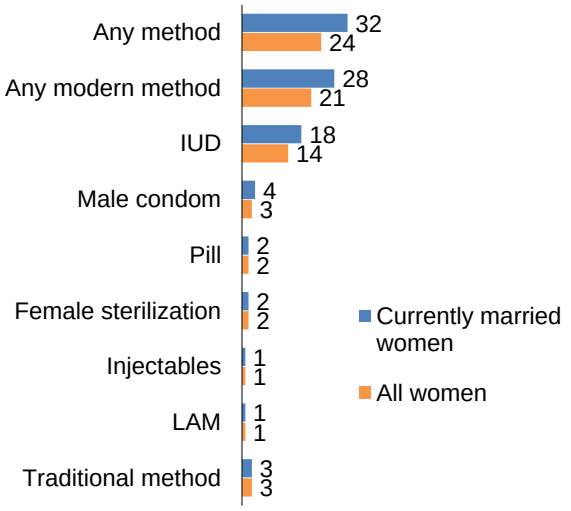
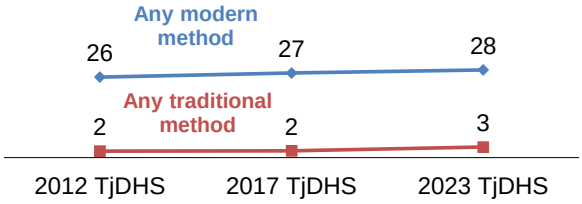


Figure 7.2 **Trends in contraceptive use**

Percentage of currently married women currently using a contraceptive method

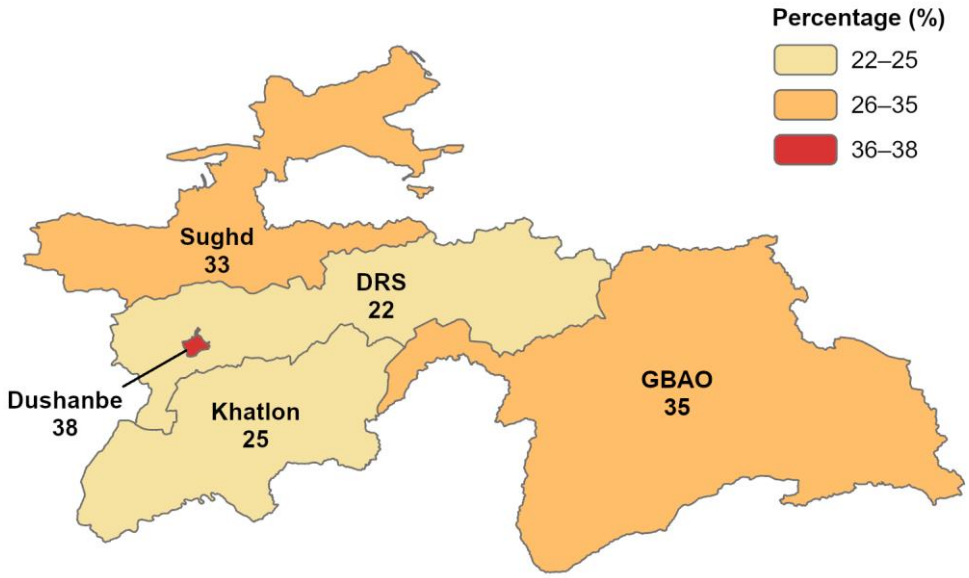


- There is a notable difference in use of modern contraceptive methods between urban and rural areas. Use of modern contraception is higher among currently married women living in urban areas (33%) than among those living in rural areas (27%).

- By region, the percentage of currently married women using modern contraceptive methods ranges from 22% in Districts of Republican Subordination (DRS) to 38% in Dushanbe (**Map 7.1**).

Map 7.1 Modern contraceptive use by region

Percentage of currently married women age 15–49 using a modern contraceptive method



- Use of modern contraceptive methods generally increases with increasing household wealth; 37% of currently married women in the highest wealth quintile use modern contraception, as compared with 23% of those in the lowest quintile.

Use of contraception at the time of conception is low (**Table 7.5**). A modern method was used at the time of conception in only 3% of pregnancies in the 3 years preceding the survey that resulted in an induced abortion or a miscarriage. In 2% of pregnancies resulting in an induced abortion or a miscarriage, a traditional method was used, primarily withdrawal.

Use of sterilization is not common in Tajikistan (2% among all women). The median age at sterilization is 32.7 years. Among women who have been sterilized, 35% undergo the procedure between age 30 and age 34 (**Table 7.6**).

7.1.1 Use of Emergency Contraception

Overall, 2% of women age 15–49 in Tajikistan have used emergency contraception in the past 12 months. Use of emergency contraception is higher among women age 30–34 (4%) than among women in both younger (age 15–19) (less than 1%) and older (age 45–49) (1%) age groups. Use of emergency contraception in the past 12 months is highest in Dushanbe (3%) (**Table 7.7**).

7.1.2 Knowledge of the Fertile Period

Only 25% of women age 15–49 have correct knowledge of the fertile period during the ovulatory cycle, indicating a general lack of awareness about fertility among women. Knowledge of the fertile period increases with age, from 8% among women age 15–19 to 30% among women age 35–49 (**Table 7.8**).

7.2 SOURCE OF MODERN CONTRACEPTIVE METHODS

Source of modern contraceptives

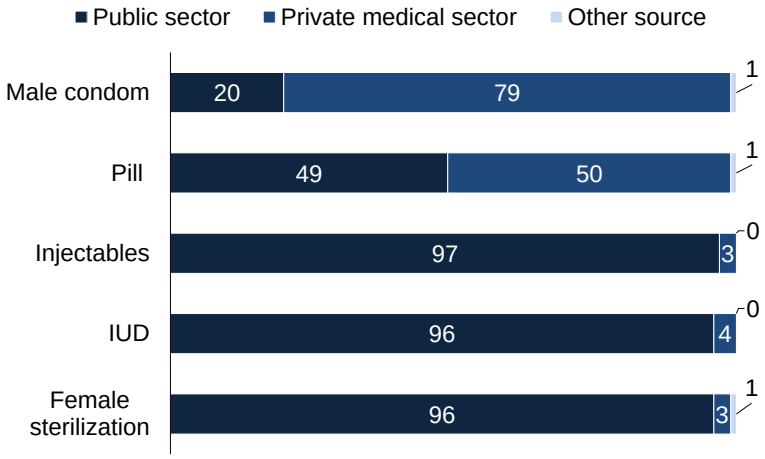
The place where the modern method currently being used was obtained the last time it was acquired.

Sample: Women age 15–49 currently using a modern contraceptive method

The majority of users of modern contraceptive methods (82%) obtain their methods from the public sector, with health centers (urban/rayon/rural) being the most common source (61%). A substantial percentage of pill users (50%) and male condom users (79%) acquire their methods from the private medical sector, particularly from pharmacies. Public maternity homes and health centers are the predominant sources of female sterilization and IUDs (**Table 7.9** and **Figure 7.3**).

Figure 7.3 **Source of modern contraceptive methods**

Percent distribution of current users of modern methods age 15–49 by most recent source of method



7.3 INFORMED CHOICE

Informed choice

Informed choice indicates that women were informed about their method's side effects, about what to do if they experience side effects, and about other methods they could use.

Sample: Women age 15–49 who are currently using selected modern contraceptive methods and who started the last episode of use within the 5 years before the survey

A substantial percentage of women currently using modern contraceptives were informed about possible side effects or problems associated with the method they used (90%), and 92% were advised on what to do if they experienced side effects. Eighty-nine percent of women were informed about other methods that they could use. Overall, 85% of women currently using modern contraceptive methods were provided with all three types of information at the time they started their last episode of use (**Table 7.10**). Women who obtained their contraceptives from the private medical sector were less informed across all categories than those who obtained their contraceptives from the public medical sector.

7.4 DISCONTINUATION OF CONTRACEPTIVES

Contraceptive discontinuation rate

Percentage of contraceptive use episodes discontinued within 12 months.

Sample: Episodes of contraceptive use in the 5 years before the survey experienced by women who are currently age 15–49 (one woman may contribute more than one episode)

Among contraceptive episodes experienced by women age 15–49 in the 5 years preceding the survey, 36% were discontinued within 12 months for any reason (**Table 7.11**). The discontinuation rate was lowest among contraceptive episodes in which women used IUDs (22%).

Across all methods of contraception, the most common reason for discontinuation was the desire to become pregnant (35%). Among women using modern contraceptive methods, 42% of IUD users, 20% of users of injectables, 28% of pill users, and 40% of male condom users reported the desire to become pregnant as their reason for discontinuation. Women most commonly reported that they discontinued use of the withdrawal method because they wanted to become pregnant (27%) or because their husband disapproved (26%) (**Table 7.12**).

7.5 DEMAND FOR FAMILY PLANNING

Unmet need for family planning

Percentage of women who:

(1) are not pregnant and not postpartum amenorrheic and are considered fecund and want to postpone their next birth for 2 or more years or stop childbearing altogether but are not using a contraceptive method, or

(2) have a mistimed or unwanted current pregnancy, or

(3) are postpartum amenorrheic and their most recent birth in the past 2 years was mistimed or unwanted.

Met need for family planning

Current contraceptive use (any method).

Sample: All women age 15–49, currently married women age 15–49, and sexually active unmarried women age 15–49

Demand for family planning:

Unmet need for family planning
+ met need (current contraceptive use [any method])

Proportion of demand satisfied:

$$\frac{\text{Current contraceptive use (any method)}}{\text{Unmet need + current contraceptive use (any method)}}$$

Proportion of demand satisfied by modern methods:

$$\frac{\text{Current contraceptive use (any modern method)}}{\text{Unmet need + current contraceptive use (any method)}}$$

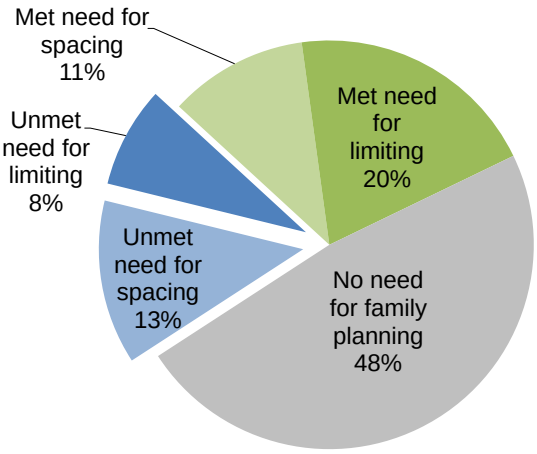
Table 7.13.1 presents data on unmet need, met need, and total demand for family planning among currently married women. These indicators help evaluate the extent to which family planning programs in Tajikistan are meeting the demand for services.

Twenty-one percent of currently married women age 15–49 in Tajikistan have an unmet need for family planning (13% for spacing and 8% for limiting). Thirty-two percent of married women have a met need for family planning; that is, they are currently using contraception (**Figure 7.4**). The total demand for family planning is 52%, indicating that if all married women who said they want to space or limit their children were to use family planning methods, contraceptive prevalence would increase from 32% to 52%. The total demand for family planning that is satisfied is 61%; 54% of the total demand is satisfied by modern methods (**Table 7.13.1**).

Unmet need is somewhat lower among all women than among married women. Sixteen percent of all women have an unmet need for family planning (10% for spacing and 6% for limiting) (**Table 7.13.2**).

Figure 7.4 Demand for family planning

Percent distribution of currently married women age 15–49 by need for family planning



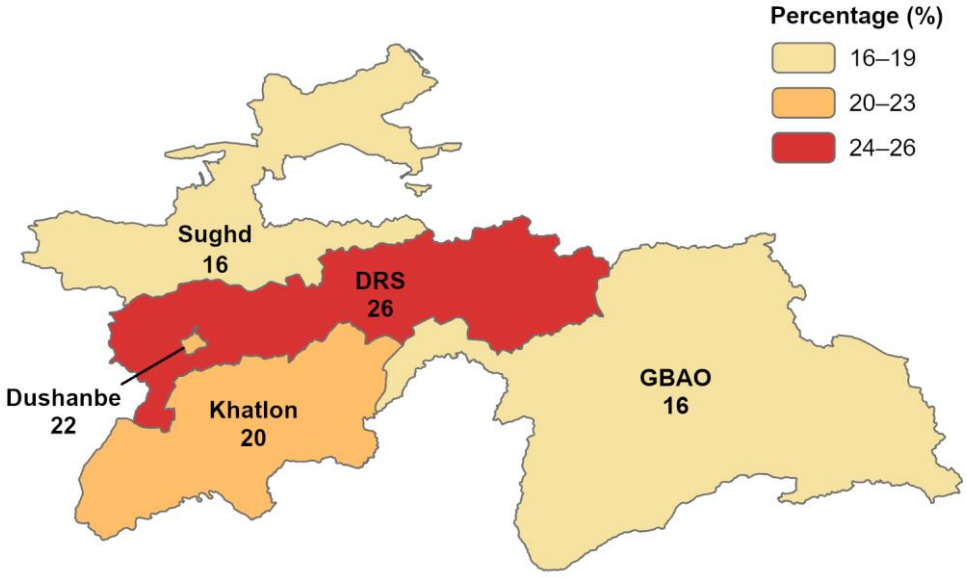
Trends: Total demand for family planning among currently married women age 15–49 has remained stable over the past decade, increasing only slightly from 51% in 2012 to 52% in 2017 and 2023. Unmet need for family planning increased from 26% to 27% between 2012 and 2017 and then decreased to 21% in 2023.

Patterns by background characteristics

- Currently married women age 25–29 have the highest total unmet need for family planning (26%). After age 29, unmet need decreases with age, to a low of 7% among women age 45–49 (**Table 7.13.1**).
- Unmet need among currently married women is lowest in Gorno-Badakhshan Autonomous Oblast (GBAO) and Sughd (16%) and highest in DRS (26%) (**Table 7.13.1** and **Map 7.2**).

Map 7.2 Unmet need for family planning by region

Percentage of currently married women age 15–49 with unmet need for family planning



- Percentage of demand satisfied is slightly higher among urban women (64%) than among rural women (59%) (**Table 7.13.1**).

7.6 Decision Making about Family Planning and Opinion about Using Family Planning

Forty percent of currently married women reported that they made the decision to use or not use family planning methods jointly with their husband/partner, with 30% saying that their opinion and the opinion of their husband or partner were equally important. Twenty-seven percent said that they made their own decision, and 31% reported that their husband/partner mainly made the decision (**Table 7.14**). Overall, 67% of currently married women participate (either alone or jointly) in decision making about family planning (**Table 7.15**). Participation in decision making about family planning generally increases with age, number of living children, and household wealth. For example, 54% of women in the lowest wealth quintile and 77% in the highest quintile participate in decision making about family planning (**Table 7.15**).

7.7 Pressure to Become Pregnant and Future Use of Contraception

Overall, 3% of currently married women report that they were ever pressured by their husband/partner or any other family member to become pregnant when they did not want to. There is variation by region; only 1% of women in GBAO reported ever being pressured by their husband/partner or another family member, as compared with 3% of women in Dushanbe, DRS, and Khatlon (**Table 7.16**).

Twenty-two percent of currently married women age 15–49 who are not using a contraceptive method intend to use contraception in the future, while 47% do not intend to use contraception in the future and 31% are unsure (**Table 7.17**). The percentage of currently married women who intend to use contraception rises with number of living children, from 14% among those with no children to 24% among those with four or more children.

7.8 Exposure to Family Planning Messages

Table 7.18 presents information on women's exposure to family planning messages through various sources in the 12 months before the survey. Television is the most common source of family planning messages (38%), followed by newspapers and magazines (21%); posters, leaflets, or brochures (15%); and social media (15%). However, 52% of currently married women reported that they had no exposure to family planning messages through any of the eight specified sources.

7.9 Contact of Nonusers with Family Planning Providers

Contact of nonusers with family planning providers

Respondent discussed family planning in the 12 months before the survey with a medical worker or during a visit to a health facility.

Sample: Women age 15–49 who are not currently using any contraceptive methods

A substantial percentage of women who are not using contraception did not discuss family planning either with a medical worker or at a health facility in the past 12 months. Specifically, 54% of these women had no such discussions (**Table 7.19**).

Patterns by background characteristics

- Among women who are not using contraception, a higher percentage of those in rural areas (57%) than urban areas (47%) did not discuss family planning either with a medical worker or at a health facility in the past 12 months (**Table 7.19**).

- The percentage of women not using contraception who did not discuss family planning either with a medical worker or at a health facility in the past 12 months is higher among those age 15–19 (81%) than among those in the other age groups (38%–58%).

List of Tables

For more information on family planning, see the following tables:

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- **Table 7.2 Knowledge of contraceptive methods according to background characteristics**
- **Table 7.3 Current use of contraception according to age**
- **Table 7.4.1 Trends in current use of contraception**
- **Table 7.4.2 Current use of contraception according to background characteristics**
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Table 7.1 Knowledge of contraceptive methods

Percentage of all women, currently married women, and sexually active unmarried women age 15–49 who have heard of any contraceptive method, according to specific method, Tajikistan DHS 2023

Method	All women	Currently married women	Sexually active unmarried women[1]
Any method	91.3	98.1	87.3
Any modern method	91.2	98.0	87.3
Female sterilization	67.7	75.7	64.0
Male sterilization	27.2	30.8	16.9
IUD	88.7	96.1	87.3
Injectables	76.5	84.9	82.4
Implants	60.5	68.6	65.4
Pill	81.8	90.7	87.3
Male condom	79.5	87.9	69.6
Female condom	27.8	31.2	45.4
Emergency contraception	46.2	53.5	38.7
Lactational amenorrhea method (LAM)	63.5	74.2	57.7
Other modern method	0.3	0.3	0.0
Any traditional method	68.5	80.6	55.0
Rhythm	47.2	54.8	37.4
Withdrawal	64.9	76.7	48.5
Other traditional method	0.1	0.2	0.0
Mean number of methods known by women 15–49	7.3	8.3	7.0
Number of women	9,879	7,392	14

[1] Had last sexual intercourse within 30 days preceding the survey

Table 7.2 Knowledge of contraceptive methods according to background characteristics

Percentage of currently married women age 15–49 who have heard of at least one contraceptive method and who have heard of at least one modern method, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Heard of any method	Heard of any modern method[1]	Number of women
Age			
15–19	96.2	96.2	220
20–24	96.5	96.4	1,281
25–29	98.3	98.2	1,437
30–34	98.2	98.0	1,407
35–39	99.1	99.1	1,291
40–44	98.7	98.7	974
45–49	98.0	97.9	781
Residence			
Urban	99.0	98.9	1,870
Rural	97.7	97.6	5,522
Region			
Dushanbe	99.7	99.7	708
GBAO	98.5	98.1	109
Sughd	99.3	99.1	2,160
DRS	99.1	99.0	1,782
Khatlon	95.9	95.9	2,634
FTF districts	96.8	96.8	1,482
Education			
None/primary	96.5	96.5	364
General basic	98.1	98.0	2,276
General secondary	97.6	97.5	3,391
Professional primary/ middle	99.6	99.6	551
Higher	99.3	99.3	811
Wealth quintile			
Lowest	96.7	96.6	1,390
Second	97.7	97.7	1,451
Middle	97.6	97.4	1,512
Fourth	98.7	98.5	1,566
Highest	99.5	99.5	1,474
Total	98.1	98.0	7,392

[1] Female sterilization, male sterilization, IUD, injectables, implants, pill, male condom, female condom, emergency contraception, lactational amenorrhea method (LAM), and other modern methods

Table 7.3 Current use of contraception according to age

Percent distribution of all women and currently married women age 15–49 by contraceptive method currently used, according to age, Tajikistan DHS 2023

			Modern method							Traditional method						
Age	Any method	Any modern method	Female sterili-zation	IUD	Inject-ables	Pill	Male condom	LAM	Other[1]	Any tradi-tional method	Rhythm	With-drawal	Other	Not cur-rently using	Total	Numbe r of women
ALL WOMEN																
15–19	0.5	0.5	0.0	0.0	0.0	0.0	0.1	0.4	0.0	0.0	0.0	0.0	0.0	99.5	100.0	1,710
20–24	10.5	9.3	0.0	5.3	0.2	0.6	1.3	1.8	0.0	1.2	0.0	1.2	0.0	89.5	100.0	1,616
25–29	26.8	24.6	0.8	17.4	0.6	1.5	3.2	1.1	0.1	2.2	0.0	2.2	0.0	73.2	100.0	1,559
30–34	34.6	31.1	1.3	19.9	1.4	2.4	4.6	1.2	0.1	3.6	0.0	3.6	0.0	65.4	100.0	1,545
35–39	39.8	35.1	3.5	21.9	1.5	2.8	4.9	0.2	0.4	4.7	0.0	4.7	0.0	60.2	100.0	1,435
40–44	38.0	34.2	3.4	22.7	1.5	2.3	4.0	0.2	0.0	3.9	0.2	3.7	0.0	62.0	100.0	1,096
45–49	24.7	21.2	5.0	12.4	0.2	1.5	2.0	0.0	0.1	3.6	0.0	3.6	0.0	75.3	100.0	917
Total	23.7	21.2	1.7	13.6	0.8	1.5	2.8	0.8	0.1	2.5	0.0	2.5	0.0	76.3	100.0	9,879
CURRENTLY MARRIED WOMEN																
15–19	3.6	3.6	0.0	0.0	0.0	0.0	0.8	2.8	0.0	0.0	0.0	0.0	0.0	96.4	100.0	220
20–24	13.2	11.7	0.0	6.7	0.3	0.8	1.6	2.3	0.0	1.5	0.0	1.5	0.0	86.8	100.0	1,281
25–29	29.0	26.6	0.9	18.8	0.7	1.6	3.4	1.1	0.1	2.4	0.0	2.3	0.0	71.0	100.0	1,437
30–34	37.9	33.9	1.4	21.9	1.5	2.6	5.1	1.2	0.2	3.9	0.0	3.9	0.0	62.1	100.0	1,407
35–39	43.8	38.6	3.7	24.0	1.7	3.2	5.4	0.2	0.4	5.2	0.0	5.2	0.0	56.2	100.0	1,291
40–44	42.3	37.9	3.7	25.4	1.7	2.6	4.4	0.2	0.0	4.4	0.2	4.2	0.0	57.7	100.0	974
45–49	28.5	24.4	5.6	14.5	0.2	1.7	2.2	0.0	0.1	4.2	0.0	4.2	0.0	71.5	100.0	781
Total	31.5	28.1	2.1	18.1	1.0	2.0	3.7	1.0	0.1	3.4	0.0	3.4	0.0	68.5	100.0	7,392

Note: If more than one method is used, only the most effective method is considered in this tabulation.
LAM = lactational amenorrhea method
[1] Other modern methods include male sterilization, female condom, implants, and other modern methods mentioned by the respondent.

Table 7.4.1 Trends in current use of contraception

Percent distribution of currently married women age 15–49 by contraceptive method currently used, according to several surveys

Method	2012 TjDHS	2017 TjDHS	2023 TjDHS
Any method	27.9	29.3	31.5
Any modern method	25.8	27.1	28.1
Female sterilization	0.6	0.8	2.1
IUD	18.5	18.3	18.1
Injectables	2.0	1.3	1.0
Implants	0.0	0.1	0.1
Pill	2.3	1.9	2.0
Male condom	2.2	3.8	3.7
Other modern	0.1	0.9	1.0
Any traditional method	2.1	2.2	3.4
Withdrawal	1.9	2.1	3.4
Other traditional	0.2	0.1	0.0
Not currently using	72.1	70.7	68.5
Total	100.0	100.0	100.0
Number of women	6,504	7,747	7,392

Table 7.4.2 Current use of contraception according to background characteristics

Percent distribution of currently married women age 15–49 by contraceptive method currently used, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Any method	Any modern method	Modern method: Female sterilization	Modern method: IUD	Modern method: Injectables	Modern method: Pill	Modern method: Male condom	Modern method: LAM	Modern method: Other[1]	Traditional method: Any traditional method	Traditional method: Rhythm	Traditional method: Withdrawal	Traditional method: Other	Not currently using	Total	Number of women
Number of living children																
0	0.7	0.7	0.0	0.4	0.0	0.1	0.3	0.0	0.0	0.0	0.0	0.0	0.0	99.3	100.0	687
1–2	21.7	19.0	1.1	11.9	0.6	1.1	2.8	1.5	0.1	2.7	0.0	2.7	0.0	78.3	100.0	2,572
3–4	42.5	38.0	3.0	24.6	1.4	2.9	5.0	0.9	0.2	4.6	0.1	4.5	0.0	57.5	100.0	3,550
5+	43.4	40.2	4.5	26.7	1.9	2.8	3.5	0.5	0.4	3.2	0.0	3.2	0.0	56.6	100.0	584
Residence																
Urban	36.7	32.5	2.9	19.4	0.4	2.2	6.2	1.5	0.1	4.2	0.1	4.0	0.0	63.3	100.0	1,870
Rural	29.7	26.6	1.9	17.6	1.2	2.0	2.8	0.8	0.2	3.1	0.0	3.1	0.0	70.3	100.0	5,522
Region																
Dushanbe	42.5	37.7	3.3	22.1	0.2	2.4	8.1	1.5	0.1	4.8	0.0	4.7	0.1	57.5	100.0	708
GBAO	36.4	35.4	0.6	26.1	1.5	2.6	4.5	0.0	0.0	1.1	0.0	1.1	0.0	63.6	100.0	109
Sughd	40.3	33.2	2.6	19.3	1.2	2.4	5.0	2.6	0.0	7.0	0.1	6.9	0.0	59.7	100.0	2,160
DRS	23.3	21.9	2.2	13.9	0.9	2.0	2.3	0.3	0.3	1.5	0.0	1.5	0.0	76.7	100.0	1,782
Khatlon	26.6	25.2	1.5	18.4	1.1	1.6	2.3	0.1	0.2	1.5	0.0	1.5	0.0	73.4	100.0	2,634
FTF districts	26.0	24.2	1.3	17.8	1.1	2.4	1.3	0.0	0.2	1.8	0.0	1.8	0.0	74.0	100.0	1,482
Education																
None/primary	30.1	26.7	2.7	19.1	0.9	0.8	3.1	0.1	0.0	3.3	0.0	3.3	0.0	69.9	100.0	364
General basic	34.2	30.6	2.3	19.3	1.5	2.5	4.1	0.5	0.4	3.6	0.0	3.6	0.0	65.8	100.0	2,276
General secondary	29.7	26.6	2.1	17.7	0.9	2.0	2.8	1.0	0.0	3.1	0.0	3.1	0.0	70.3	100.0	3,391
Professional primary/ middle	27.9	23.8	1.7	14.2	0.2	1.2	3.8	2.3	0.3	4.2	0.0	4.2	0.0	72.1	100.0	551
Higher	34.3	30.6	1.8	18.3	0.6	1.6	6.5	1.7	0.1	3.7	0.3	3.4	0.1	65.7	100.0	811
Wealth quintile																
Lowest	25.9	23.4	1.8	16.2	1.9	1.5	1.4	0.4	0.2	2.5	0.0	2.5	0.0	74.1	100.0	1,390
Second	28.6	26.4	1.6	18.2	0.9	1.7	3.2	0.9	0.0	2.2	0.0	2.2	0.0	71.4	100.0	1,451
Middle	28.8	25.6	1.6	17.1	1.1	2.1	3.2	0.4	0.1	3.2	0.0	3.2	0.0	71.2	100.0	1,512
Fourth	31.7	27.9	2.8	16.6	1.0	2.6	3.3	1.3	0.3	3.8	0.0	3.8	0.0	68.3	100.0	1,566
Highest	42.0	36.8	2.9	22.3	0.3	2.1	7.2	2.0	0.0	5.2	0.1	5.1	0.0	58.0	100.0	1,474
Total	31.5	28.1	2.1	18.1	1.0	2.0	3.7	1.0	0.1	3.4	0.0	3.4	0.0	68.5	100.0	7,392

Note: If more than one method is used, only the most effective method is considered in this tabulation.
LAM = lactational amenorrhea method
[1] Other modern methods include male sterilization, female condom, implants, and other modern methods mentioned by the respondent.

Table 7.5 Use of contraception before pregnancy

Percent distribution of pregnancy outcomes in the 3 years preceding the survey by contraceptive method used at the time of conception, Tajikistan DHS 2023

	Result of pregnancy				
	Live birth	Induced abortion	Miscarriage	Stillbirth	Total
No method used	97.5	94.6	95.2	*	97.1
Any method	2.5	5.4	4.8	*	2.9
Any modern method	2.2	3.2	3.2	*	2.3
Pill	0.2	0.9	0.4	*	0.2
IUD	1.1	0.7	1.6	*	1.1
Injectables	0.1	0.7	0.0	*	0.1
Male condom	0.7	0.1	1.0	*	0.7
Female condom	0.0	0.8	0.0	*	0.0
Lactational amenorrhea (LAM)	0.1	0.0	0.0	*	0.1
Other	0.0	0.0	0.2	*	0.0
Any traditional method	0.3	2.2	1.6	*	0.6
Withdrawal	0.3	2.2	1.6	*	0.6
Total	100.0	100.0	100.0	*	100.0
All pregnancies	3,191	165	458	19	3,832

Note: An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

Table 7.6 Timing of sterilization

Percent distribution of sterilized women age 15–49 by age at the time of sterilization and median age at sterilization, according to number of years since the operation, Tajikistan DHS 2023

Years since operation	Age at time of sterilization						Total	Number of women	Median age[1]
	<25	25–29	30–34	35–39	40–44	45–49			
<2	(3.8)	(21.0)	(29.0)	(22.8)	(18.7)	(4.8)	100.0	41	(33.4)
2–3	(1.0)	(13.7)	(39.9)	(22.1)	(17.1)	(6.1)	100.0	35	(33.8)
4–5	(7.3)	(17.0)	(34.3)	(34.6)	(6.7)	(0.0)	100.0	24	(32.8)
6–7	*	*	*	*	*	*	100.0	17	*
8–9	*	*	*	*	*	*	100.0	13	*
10+	(16.3)	(26.2)	(41.6)	(15.9)	(0.0)	(0.0)	100.0	37	a
Total	6.6	20.2	34.7	26.0	10.1	2.4	100.0	167	32.7

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.
[1] Median age at sterilization is calculated only for women sterilized before age 40 to avoid problems of censoring.
a = not calculated due to censoring

Table 7.7 Use of emergency contraception

Percentage of women age 15–49 who used emergency contraception in the past 12 months, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who used emergency contraception	Number of women
Age		
15–19	0.2	1,710
20–24	1.3	1,616
25–29	3.5	1,559
30–34	4.2	1,545
35–39	3.4	1,435
40–44	1.9	1,096
45–49	1.1	917
Residence		
Urban	2.7	2,705
Rural	2.1	7,174
Region		
Dushanbe	3.4	1,077
GBAO	1.8	157
Sughd	2.2	2,780
DRS	2.6	2,356
Khatlon	1.8	3,509
FTF districts	1.1	1,937
Education		
None/primary	1.6	443
General basic	2.5	3,271
General secondary	2.1	4,230
Professional primary/middle	2.1	778
Higher	2.9	1,157
Wealth quintile		
Lowest	2.0	1,842
Second	2.2	1,967
Middle	1.8	1,966
Fourth	2.8	1,964
Highest	2.6	2,140
Total	2.3	9,879

Table 7.8 Knowledge of fertile period by age

Percentage of women age 15–49 with correct knowledge of the fertile period during the ovulatory cycle, according to age, Tajikistan DHS 2023

Age	Percentage with correct knowledge of the fertile period	Number of women
15–19	8.1	1,710
20–24	26.6	1,616
25–29	27.8	1,559
30–34	29.6	1,545
35–39	30.1	1,435
40–44	29.9	1,096
45–49	30.3	917
Total	25.3	9,879

Note: Correct knowledge of the fertile period is defined as "halfway between two menstrual periods."

Table 7.9 Source of modern contraception methods

Percent distribution of users of modern contraceptive methods age 15–49 by most recent source of method, according to method, Tajikistan DHS 2023

Source	Female sterili-zation	IUD	Inject-ables	Pill	Male condom	Total
Public sector	96.2	95.6	97.0	49.0	19.9	81.8
Government hospital	11.1	4.3	6.9	0.0	0.0	4.1
Maternity home	49.2	9.8	2.7	0.7	0.2	10.8
Health center (urban/rayon/rural)	34.3	72.6	84.9	47.3	18.2	60.6
Reproductive health center	0.7	8.7	2.6	1.0	1.4	6.2
Health house	0.0	0.0	0.0	0.0	0.1	0.0
AIDS center	0.0	0.0	0.0	0.0	0.1	0.0
Family medicine center	0.0	0.1	0.0	0.0	0.0	0.1
Other public sector	1.0	0.0	0.0	0.0	0.0	0.1
Private medical sector	3.4	4.4	3.0	50.4	79.1	17.9
Private hospital	1.5	0.1	0.0	0.0	0.0	0.2
Private clinic	1.8	0.5	0.0	0.0	0.0	0.5
Private doctor	0.0	0.0	0.0	0.0	0.0	0.0
Pharmacy	0.0	3.7	3.0	50.4	79.1	17.2
Other source	0.5	0.0	0.0	0.7	1.0	0.2
Friend/relative	0.0	0.0	0.0	0.7	0.0	0.0
Other	0.5	0.0	0.0	0.0	1.0	0.2
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	167	1,341	75	149	275	2,018

Note: Total includes users of implants, male sterilization, female condoms, and other modern methods but excludes lactational amenorrhea method (LAM).

Table 7.10 Informed choice

Among current users of selected modern methods age 15–49 who started the last episode of use within the 5 years preceding the survey, percentage who were informed about possible side effects or problems of that method, percentage who were informed about what to do if they experienced side effects, percentage who were informed about other methods they could use, percentage who received all three types of information, and percentage who were informed that they could switch to another method if they wanted to or needed to, according to method and initial source, Tajikistan DHS 2023

	Among women who started last episode of modern contraceptive method within the 5 years preceding the survey:					
Method/source	Percentage who were informed about side effects or problems of method used	Percentage who were informed about what to do if they experienced side effects	Percentage who were informed of other methods that could be used	Percentage who received all three types of information (method information index)[1]	Percentage who were informed that they could switch to another method if they wanted to or needed to	Number of women
Method						
Female sterilization	75.4	86.9	75.2	64.1	na	85
IUD	92.1	93.7	91.4	87.7	90.9	789
Injectables	(94.1)	(94.0)	(93.5)	(91.5)	(94.1)	56
Implants	*	*	*	*	*	4
Pill	84.1	81.8	78.8	75.5	83.6	95
Initial source of method[2]						
Public sector	91.4	93.6	90.8	86.6	84.2	958
Government hospital	(88.4)	(91.2)	(88.3)	(82.9)	(70.1)	57
Maternity home	91.2	94.4	86.4	83.4	63.2	119
Health center (urban/rayon/rural)	91.5	93.4	91.5	86.9	88.6	710
Reproductive health center	94.3	96.4	92.5	92.5	92.2	68
Other public sector[3]	*	*	*	*	*	4
Private medical sector	72.2	71.4	65.7	61.7	66.1	70
Private hospital	*	*	*	*	*	2
Private clinic	*	*	*	*	*	5
Pharmacy	70.1	69.2	64.6	60.1	68.0	62
Patronage medical worker	*	*	*	*	*	1
Other source	*	*	*	*	*	2
Friend/relative	*	*	*	*	*	1
Other	*	*	*	*	*	1
Total	90.1	92.1	89.1	84.9	82.9	1,030

Note: Table includes users of only the methods listed individually. 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.
na = not applicable
[1] The method information index is the percentage of women who were informed about (1) side effects or problems of method used, (2) what to do if they experienced side effects, and (3) other methods that could be used.
[2] Source at start of current episode of use
[3] Includes family medicine center and other public sector

Table 7.11 Twelve-month contraceptive discontinuation rates

Among episodes of contraceptive use experienced within the 5 years preceding the survey, percentage of episodes discontinued within 12 months, according to reason for discontinuation and specific method, Tajikistan DHS 2023

Method	Method failure	Desire to become pregnant	Other fertility-related reasons[1]	Changes in menstrual bleeding	Other side effects/ health concerns	Wanted more effective method	Other method-related reasons[2]	Husband/ partner disapproved	Other reasons[3]	Any reason[4]	Switched to another method[5]	Number of episodes of use[6]
IUD	0.0	8.5	1.2	3.6	3.9	0.5	1.8	0.9	1.0	21.5	1.9	1,179
Pill	(1.6)	(16.8)	(13.7)	(3.6)	(10.8)	(3.6)	(1.6)	(1.9)	(2.5)	(56.0)	(6.2)	224
Male condom	1.7	17.0	1.6	0.5	0.4	4.1	5.1	14.8	4.0	49.3	8.3	434
Withdrawal	1.6	12.2	4.6	0.2	0.4	4.1	2.0	13.3	5.8	44.1	8.5	322
Other[7]	2.0	6.6	4.1	0.8	3.8	21.0	0.9	1.8	5.2	46.4	23.2	394
All methods	0.9	10.9	3.2	2.2	3.4	4.7	2.3	5.1	2.9	35.8	7.2	2,553

Note: Figures are based on life table calculations using information on episodes of use that occurred 3–62 months preceding the survey. Figures in parentheses are based on 25–49 unweighted cases.
[1] Includes infrequent sex/husband away, difficult to get pregnant/menopausal, and marital dissolution/separation
[2] Includes lack of access/too far, costs too much, and inconvenient to use
[3] Includes up to God/fatalistic and other reasons
[4] Reasons for discontinuation are mutually exclusive and add to the total given in this column.
[5] A woman is considered to have switched to another method if she used a different method in the month following discontinuation or if she gave "wanted a more effective method" as the reason for discontinuation and started another method within 2 months of discontinuation.
[6] All episodes of use that occurred within the 5 years preceding the survey are included. Episodes of use include both episodes that were discontinued during the period of observation and episodes that were not discontinued during the period of observation.
[7] Includes lactational amenorrhea method (LAM), injectables, implants, female condom, emergency contraception, rhythm, other modern methods, and other traditional methods.

Table 7.12 Reasons for discontinuation

Percent distribution of discontinuations of contraceptive methods in the 5 years preceding the survey by main reason stated for discontinuation, according to specific method, Tajikistan DHS 2023

Reason	IUD	Injectables	Pill	Male condom	Withdrawal	Other[1]	All methods
Became pregnant while using	0.4	5.1	2.5	2.7	6.6	3.6	2.6
Wanted to become pregnant	41.9	19.9	27.5	40.1	27.0	19.6	34.6
Husband/partner disapproved	3.2	7.6	2.5	25.5	25.5	2.4	11.2
Wanted a more effective method	1.8	9.3	7.5	6.7	8.4	49.8	9.4
Changes in menstrual bleeding	16.3	7.9	6.3	0.9	1.1	0.0	7.8
Other side effects/health concerns	19.8	17.1	23.5	1.7	0.5	4.4	11.9
Lack of access/too far	1.3	0.0	2.5	0.7	2.8	0.0	1.3
Cost too much	0.4	0.0	0.7	2.4	0.0	0.0	0.7
Inconvenient to use	2.1	3.8	2.3	7.0	1.3	2.1	3.1
Up to God/fatalistic	0.2	0.0	0.0	0.0	0.0	0.8	0.2
Difficult to get pregnant/menopausal	0.8	0.0	0.1	0.4	0.0	0.0	0.4
Infrequent sex/husband away	7.6	18.8	20.1	5.1	13.5	5.1	9.6
Marital dissolution/separation	0.5	0.0	0.0	0.5	0.7	0.0	0.4
Other	1.4	6.8	2.5	1.6	3.1	4.2	2.3
Don't know	1.0	2.2	0.0	0.6	0.7	1.7	0.9
Missing	1.2	1.6	2.1	4.2	8.7	6.4	3.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of discontinuations	542	60	151	291	207	133	1,383

[1] Includes lactational amenorrhea method (LAM), implants, female condoms, emergency contraception, rhythm, and other methods mentioned by the respondent

Table 7.13.1 Need and demand for family planning among currently married women

Percentage of currently married women age 15–49 with unmet need for family planning, percentage with met need for family planning, total demand for family planning, percentage of the demand for family planning that is satisfied, and percentage of the demand for family planning that is satisfied by modern methods, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Unmet need for family planning			Met need for family planning (currently using)			Total demand for family planning[1]			Number of women	Percentage of demand satisfied[2]	Percentage of demand satisfied by modern methods[3]
	For spacing	For limiting	Total	For spacing	For limiting	Total	For spacing	For limiting	Total			
Age												
15–19	17.2	0.8	18.0	3.6	0.0	3.6	20.8	0.8	21.6	220	16.6	16.6
20–24	23.5	1.7	25.2	11.7	1.5	13.2	35.2	3.2	38.4	1,281	34.4	30.4
25–29	19.7	6.5	26.2	18.1	10.9	29.0	37.8	17.4	55.2	1,437	52.5	48.2
30–34	13.5	11.1	24.6	13.8	24.1	37.9	27.3	35.2	62.4	1,407	60.6	54.4
35–39	8.5	12.0	20.5	10.1	33.7	43.8	18.6	45.7	64.3	1,291	68.1	60.0
40–44	3.1	8.5	11.6	7.0	35.3	42.3	10.1	43.8	53.9	974	78.6	70.4
45–49	1.2	6.2	7.4	2.0	26.5	28.5	3.3	32.7	36.0	781	79.3	67.7
Residence												
Urban	13.8	6.5	20.3	14.6	22.1	36.7	28.4	28.6	57.0	1,870	64.4	57.1
Rural	12.7	7.9	20.7	10.0	19.7	29.7	22.7	27.6	50.4	5,522	59.0	52.7
Region												
Dushanbe	16.6	4.9	21.5	20.6	21.8	42.5	37.2	26.8	64.0	708	66.4	59.0
GBAO	10.0	6.1	16.1	16.7	19.8	36.4	26.6	25.9	52.5	109	69.4	67.4
Sughd	8.6	7.8	16.4	10.5	29.8	40.3	19.1	37.5	56.7	2,160	71.1	58.7
DRS	18.0	7.8	25.8	8.7	14.6	23.3	26.7	22.4	49.1	1,782	47.5	44.5
Khatlon	12.4	8.0	20.4	10.6	16.0	26.6	23.0	24.0	47.0	2,634	56.6	53.5
FTF districts	13.4	7.9	21.3	11.8	14.2	26.0	25.2	22.1	47.3	1,482	55.0	51.2
Education												
None/primary	14.3	9.8	24.1	7.6	22.4	30.1	21.9	32.3	54.2	364	55.5	49.4
General basic	12.5	10.4	22.9	10.9	23.3	34.2	23.4	33.7	57.1	2,276	59.9	53.6
General secondary	12.5	6.4	18.9	10.6	19.2	29.7	23.0	25.6	48.6	3,391	61.1	54.8
Professional primary/middle	15.3	5.1	20.4	12.6	15.3	27.9	28.0	20.4	48.3	551	57.8	49.2
Higher	14.5	5.1	19.6	15.1	19.2	34.3	29.6	24.2	53.9	811	63.6	56.8
Wealth quintile												
Lowest	13.3	8.4	21.7	8.2	17.8	25.9	21.5	26.1	47.6	1,390	54.4	49.1
Second	13.4	9.5	22.9	10.0	18.6	28.6	23.4	28.1	51.5	1,451	55.5	51.3
Middle	13.6	7.2	20.8	9.4	19.4	28.8	23.0	26.6	49.6	1,512	58.1	51.7
Fourth	12.4	7.0	19.4	10.9	20.8	31.7	23.3	27.8	51.1	1,566	62.0	54.6
Highest	12.4	5.8	18.2	17.2	24.8	42.0	29.6	30.6	60.2	1,474	69.8	61.1
Total	13.0	7.6	20.6	11.2	20.3	31.5	24.2	27.9	52.0	7,392	60.5	53.9

Note: Numbers in this table correspond to the revised definition of unmet need described in Bradley et al. 2012.
[1] Total demand is the sum of unmet need and met need.
[2] Percentage of demand satisfied is met need divided by total demand.
[3] Modern methods include female sterilization, male sterilization, IUD, injectables, implants, pill, male condom, female condom, emergency contraception, lactational amenorrhea method (LAM), and other modern methods.

Table 7.13.2 Need and demand for family planning among all women

Percentage of all women age 15–49 with unmet need for family planning, percentage with met need for family planning, total demand for family planning, percentage of the demand for family planning that is satisfied, and percentage of the demand for family planning that is satisfied by modern methods, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Unmet need for family planning			Met need for family planning (currently using)			Total demand for family planning[1]			Number of women	Percentage of demand satisfied[2]	Percentage of demand satisfied by modern methods[3]
	For spacing	For limiting	Total	For spacing	For limiting	Total	For spacing	For limiting	Total			
Age												
15–19	2.3	0.1	2.4	0.5	0.0	0.5	2.8	0.1	2.9	1,710	17.6	17.6
20–24	18.7	1.3	20.1	9.3	1.2	10.5	28.0	2.6	30.6	1,616	34.3	30.3
25–29	18.2	6.0	24.3	16.7	10.0	26.8	35.0	16.1	51.0	1,559	52.4	48.2
30–34	12.4	10.1	22.5	12.5	22.1	34.6	24.9	32.2	57.1	1,545	60.6	54.4
35–39	7.7	10.8	18.5	9.3	30.5	39.8	17.0	41.4	58.3	1,435	68.3	60.2
40–44	2.9	7.6	10.4	6.3	31.8	38.0	9.2	39.3	48.5	1,096	78.5	70.5
45–49	1.2	5.4	6.6	1.7	23.0	24.7	3.0	28.4	31.3	917	78.9	67.6
Residence												
Urban	9.6	4.5	14.2	10.2	15.6	25.8	19.8	20.1	39.9	2,705	64.5	57.3
Rural	9.9	6.1	16.0	7.7	15.2	23.0	17.6	21.3	39.0	7,174	59.0	52.8
Region												
Dushanbe	10.9	3.2	14.1	13.6	14.8	28.4	24.5	18.0	42.5	1,077	66.8	59.5
GBAO	7.0	4.2	11.3	11.9	13.9	25.8	19.0	18.1	37.1	157	69.7	67.7
Sughd	6.7	6.0	12.8	8.2	23.3	31.5	14.9	29.4	44.3	2,780	71.2	58.9
DRS	13.6	5.9	19.5	6.6	11.2	17.8	20.2	17.1	37.3	2,356	47.7	44.7
Khatlon	9.5	6.0	15.6	8.0	12.0	20.0	17.6	18.1	35.6	3,509	56.3	53.2
FTF districts	10.3	6.0	16.4	9.1	10.9	20.0	19.4	16.9	36.3	1,937	55.0	51.2
Education												
None/primary	11.7	8.1	19.8	6.6	18.9	25.6	18.4	27.0	45.4	443	56.4	50.3
General basic	8.8	7.3	16.0	7.6	16.3	24.0	16.4	23.6	40.0	3,271	59.9	53.7
General secondary	10.1	5.2	15.2	8.5	15.4	23.9	18.5	20.6	39.1	4,230	61.1	54.8
Professional primary/middle	11.1	3.6	14.7	9.0	11.1	20.1	20.1	14.7	34.8	778	57.8	49.3
Higher	10.3	3.6	13.9	10.6	13.7	24.3	20.9	17.3	38.2	1,157	63.6	56.9
Wealth quintile												
Lowest	10.1	6.3	16.4	6.2	13.5	19.7	16.2	19.8	36.0	1,842	54.6	49.2
Second	10.0	7.0	17.1	7.4	13.8	21.2	17.4	20.8	38.3	1,967	55.4	51.2
Middle	10.6	5.6	16.2	7.3	15.0	22.3	17.9	20.5	38.4	1,966	57.9	51.5
Fourth	9.9	5.6	15.5	8.7	16.7	25.5	18.6	22.3	41.0	1,964	62.2	54.9
Highest	8.6	4.1	12.7	12.0	17.4	29.3	20.6	21.5	42.0	2,140	69.8	61.2
Total	9.8	5.7	15.5	8.4	15.3	23.7	18.2	21.0	39.2	9,879	60.5	54.0

Note: Numbers in this table correspond to the revised definition of unmet need described in Bradley et al. 2012.
[1] Total demand is the sum of unmet need and met need.
[2] Percentage of demand satisfied is met need divided by total demand.
[3] Modern methods include female sterilization, male sterilization, IUD, injectables, implants, pill, male condom, female condom, emergency contraception, lactational amenorrhea method (LAM), and other modern methods.

Table 7.14 Decision making about family planning

Percent distribution of currently married women by person who usually makes the decision to use or not use family planning, Tajikistan DHS 2023

Decision maker	Percentage
Mainly wife	27.0
Wife and husband/partner jointly	39.5
Wife's opinion more important	6.7
Wife's and husband's/partner's opinion equally important	30.4
Wife's opinion less important than husband's/partner's	2.4
Mainly husband	30.6
Someone else/other	2.9
Total	100.0
Number of currently married women	7,392

Table 7.15 Decision making about family planning by background characteristics

Percent distribution of currently married women age 15–49 by person who usually makes the decision to use or not use family planning and percentage who participate in the decision to use or not use family planning, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Mainly wife	Wife and husband/ partner jointly	Mainly husband/ partner	Someone else/other	Total	Percentage who participate in decision making about family planning	Number of women
Age							
15–19	14.9	37.6	34.8	12.8	100.0	52.5	220
20–24	21.2	39.1	34.0	5.7	100.0	60.3	1,281
25–29	25.4	37.2	33.8	3.6	100.0	62.6	1,437
30–34	28.2	42.1	27.5	2.1	100.0	70.3	1,407
35–39	29.1	40.1	29.6	1.2	100.0	69.2	1,291
40–44	31.0	39.3	29.0	0.7	100.0	70.3	974
45–49	31.8	39.4	27.7	1.1	100.0	71.2	781
Family planning use							
Currently using	28.6	44.1	25.7	1.7	100.0	72.7	2,327
Not currently using[1]	26.2	37.4	32.9	3.5	100.0	63.6	5,065
Number of living children							
0	19.3	35.0	38.2	7.6	100.0	54.2	687
1–2	25.4	40.6	30.2	3.7	100.0	66.1	2,572
3–4	28.6	40.1	29.6	1.7	100.0	68.7	3,550
5+	32.7	36.2	30.4	0.7	100.0	68.9	584
Residence							
Urban	30.1	41.8	26.2	1.9	100.0	71.9	1,870
Rural	25.9	38.7	32.1	3.2	100.0	64.6	5,522
Region							
Dushanbe	33.6	51.8	13.6	1.0	100.0	85.4	708
GBAO	36.3	46.2	16.8	0.7	100.0	82.5	109
Sughd	26.0	44.2	23.8	6.0	100.0	70.2	2,160
DRS	20.0	56.4	22.4	1.2	100.0	76.4	1,782
Khatlon	30.4	20.6	46.9	2.1	100.0	50.9	2,634
FTF districts	38.2	14.9	45.4	1.5	100.0	53.1	1,482
Education							
None/primary	35.3	29.6	33.4	1.7	100.0	64.9	364
General basic	26.8	39.3	31.6	2.3	100.0	66.1	2,276
General secondary	26.0	37.9	32.7	3.3	100.0	64.0	3,391
Professional primary/middle	26.0	45.0	24.7	4.2	100.0	71.1	551
Higher	28.4	47.2	22.1	2.3	100.0	75.6	811
Wealth quintile							
Lowest	25.2	28.6	42.9	3.4	100.0	53.7	1,390
Second	27.2	34.8	34.6	3.4	100.0	62.0	1,451
Middle	27.3	40.2	30.0	2.6	100.0	67.5	1,512
Fourth	25.3	46.0	25.6	3.1	100.0	71.3	1,566
Highest	30.0	46.8	21.2	2.1	100.0	76.7	1,474
Total	27.0	39.5	30.6	2.9	100.0	66.5	7,392

[1] Nonusers include pregnant women.

Table 7.16 Pressure to become pregnant

Percentage of currently married women who were ever pressured by their husband/partner or any other family member to become pregnant when they did not want to, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage of women pressured to become pregnant by their husband/ partner or other family member	Number of women
Age		
15–19	2.0	220
20–24	3.0	1,281
25–29	2.4	1,437
30–34	3.0	1,407
35–39	3.3	1,291
40–44	2.6	974
45–49	2.8	781
Number of living children		
0	3.5	687
1–2	2.7	2,572
3–4	2.7	3,550
5+	3.2	584
Family planning use		
Currently using	2.7	2,327
Not currently using[1]	2.9	5,065
Residence		
Urban	2.7	1,870
Rural	2.9	5,522
Region		
Dushanbe	2.7	708
GBAO	1.1	109
Sughd	2.4	2,160
DRS	3.1	1,782
Khatlon	3.1	2,634
FTF districts	3.4	1,482
Education		
None/primary	2.5	364
General basic	3.1	2,276
General secondary	2.6	3,391
Professional primary/middle	3.4	551
Higher	2.7	811
Wealth quintile		
Lowest	3.2	1,390
Second	2.8	1,451
Middle	3.0	1,512
Fourth	2.9	1,566
Highest	2.2	1,474
Total	2.8	7,392

[1] Nonusers include pregnant women.

Table 7.17 Future use of contraception

Percent distribution of currently married women age 15–49 who are not using a contraceptive method by intention to use in the future, according to number of living children, Tajikistan DHS 2023

Intention to use in the future	Number of living children[1]					Total
	0	1	2	3	4+	
Intends to use	14.4	20.3	22.3	23.5	23.8	21.9
Unsure	32.3	35.3	35.6	30.0	25.1	31.3
Does not intend to use	53.3	44.4	42.1	46.5	51.1	46.8
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	444	915	1,165	1,316	1,225	5,065

[1] Includes current pregnancy

Table 7.18 Exposure to family planning messages

Percentage of women age 15–49 who heard or saw specific family planning messages in the past 12 months, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Radio	Television	News-paper/ magazine	Mobile phone	Social media[1]	Poster/ leaflet/ brochure	Outdoor sign or billboard	Com-munity meeting or event	None of these eight sources	Number of women
Age										
15–19	6.8	29.4	18.7	7.9	11.0	10.7	9.0	9.7	63.8	1,710
20–24	11.8	39.6	21.5	11.3	15.5	15.6	14.1	12.7	50.8	1,616
25–29	12.7	39.8	20.4	12.0	15.7	15.2	14.4	12.7	50.8	1,559
30–34	11.9	40.6	21.1	10.9	16.7	17.0	13.8	14.1	49.0	1,545
35–39	12.6	41.0	21.1	11.8	17.4	17.5	13.9	14.0	48.4	1,435
40–44	12.0	39.0	20.8	10.9	15.5	15.2	13.0	13.2	53.0	1,096
45–49	12.4	41.9	22.6	10.9	15.2	16.8	14.5	15.2	47.4	917
Residence										
Urban	15.3	51.7	34.1	18.9	25.0	24.8	22.2	20.5	38.0	2,705
Rural	9.8	33.4	15.7	7.7	11.5	11.6	9.7	10.0	57.7	7,174
Region										
Dushanbe	18.0	62.6	44.0	26.3	34.4	33.7	30.3	28.2	27.0	1,077
GBAO	6.1	66.5	45.3	19.0	30.1	41.3	18.9	20.5	17.8	157
Sughd	16.9	49.1	24.9	12.7	17.3	20.8	17.3	17.8	36.9	2,780
DRS	3.4	26.0	12.6	4.1	11.5	5.6	3.2	2.5	68.7	2,356
Khatlon	10.3	29.5	14.7	8.6	9.4	10.5	11.0	10.9	62.9	3,509
FTF districts	6.4	18.5	10.4	8.4	8.6	10.0	10.6	11.9	72.7	1,937
Education										
None/primary	5.8	24.7	12.0	6.2	9.1	9.5	8.9	9.0	64.7	443
General basic	8.7	34.8	15.1	7.2	9.8	11.4	9.4	8.3	58.4	3,271
General secondary	10.6	35.5	16.9	9.2	12.6	13.2	12.4	12.9	54.8	4,230
Professional primary/middle	15.8	45.2	33.7	16.7	24.3	24.6	18.2	16.9	42.6	778
Higher	20.1	59.9	45.5	24.5	36.1	29.7	24.5	24.3	28.1	1,157
Wealth quintile										
Lowest	5.8	21.4	8.5	3.0	3.5	7.0	5.7	7.7	68.5	1,842
Second	7.1	29.9	12.4	7.0	7.9	10.7	9.4	8.1	60.8	1,967
Middle	11.3	36.0	18.1	9.1	13.0	12.8	9.5	10.0	55.8	1,966
Fourth	12.4	43.8	23.5	10.7	19.0	15.9	13.9	12.9	48.1	1,964
Highest	18.8	58.0	39.0	22.5	30.5	28.2	25.4	24.2	31.3	2,140
Total	11.3	38.4	20.8	10.8	15.2	15.3	13.1	12.9	52.3	9,879

[1] Social media includes platforms such as Facebook, Twitter, and Instagram.

Table 7.19 Contact of nonusers with family planning providers

Among women age 15–49 who are not using contraception, percentage who during the past 12 months were visited by a medical worker who discussed family planning, percentage who visited a health facility and discussed family planning, percentage who visited a health facility but did not discuss family planning, and percentage who did not discuss family planning either with a medical worker or at a health facility, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage of women who were visited by a medical worker who discussed family planning	Percentage of women who visited a health facility in the past 12 months and who:		Percentage of women who did not discuss family planning either with a medical worker or at a health facility	Number of women
		Discussed family planning	Did not discuss family planning		
Age					
15–19	13.4	16.2	24.2	80.9	1,702
20–24	42.8	50.8	23.5	44.2	1,447
25–29	48.6	57.3	22.4	37.9	1,142
30–34	43.6	51.1	25.9	44.4	1,010
35–39	39.6	49.3	25.7	47.1	863
40–44	35.1	39.3	29.0	56.0	679
45–49	34.7	35.2	27.5	58.0	690
Residence					
Urban	44.2	48.1	22.4	47.1	2,008
Rural	32.1	38.9	25.9	56.8	5,526
Region					
Dushanbe	58.8	57.8	19.5	35.8	771
GBAO	42.5	45.6	31.3	47.2	116
Sughd	20.9	32.5	37.5	63.4	1,904
DRS	38.0	39.1	30.8	56.0	1,937
Khatlon	36.5	44.2	13.6	52.2	2,805
FTF districts	30.8	38.3	9.9	58.4	1,550
Education					
None/primary	31.8	39.1	29.9	56.0	330
General basic	32.1	37.1	27.1	59.3	2,488
General secondary	34.5	41.3	22.8	54.1	3,219
Professional primary/middle	42.3	48.1	25.5	45.5	621
Higher	44.0	49.8	24.4	45.8	876
Wealth quintile					
Lowest	31.2	37.1	21.8	59.3	1,480
Second	33.7	39.5	23.1	55.6	1,550
Middle	33.4	42.3	26.9	53.9	1,528
Fourth	33.1	38.9	30.0	56.9	1,463
Highest	45.1	49.0	23.0	45.6	1,512
Total	35.3	41.4	24.9	54.2	7,534

INFANT AND CHILD MORTALITY 8

Key Findings

- ***Childhood mortality rates:*** During the 5 years immediately preceding the survey, the neonatal mortality rate was 10 deaths per 1,000 live births, the infant mortality rate was 20 deaths per 1,000 live births, and the under-5 mortality rate was 24 deaths per 1,000 live births.
- ***Trends in infant and child mortality:*** Neonatal mortality decreased from 19 deaths per 1,000 live births in the 5 years preceding the 2012 survey to 10 deaths per 1,000 live births in the 5 years preceding the 2023 survey. The infant mortality rate also showed a substantial decline, falling from 34 deaths per 1,000 live births in the 5 years preceding the 2012 survey to 20 deaths per 1,000 live births in the 5 years preceding the 2023 survey. Similarly, under-5 mortality dropped from 43 deaths per 1,000 live births in the 5 years preceding the 2012 survey to 24 deaths per 1,000 live births in the 5 years preceding the 2023 survey.
- ***Perinatal mortality:*** The perinatal mortality rate was 13 deaths per 1,000 pregnancies of 28 or more weeks' duration in the 5 years preceding the survey.
- ***High-risk fertility behavior:*** 74% of currently married women age 15–49 would have been in an avoidable high-risk category if they had conceived at the time of the survey; 34% would have been in a single high-risk category, and 40% would have been in a multiple high-risk category.

Information on infant and child mortality is relevant to a demographic assessment of a country's population and is an important indicator of the country's socioeconomic development and people's quality of life. It can also help identify children who may be at higher risk of death and lead to strategies to reduce this risk, such as promoting birth spacing.

This chapter presents information on levels, trends, and differentials in perinatal, neonatal, infant, and under-5 mortality rates. It also examines biodemographic factors and fertility behaviors that increase mortality risks for infants and children. The information was collected as part of a retrospective pregnancy history in which female respondents listed all of the children to whom they have given birth, along with each child's date of birth, survivorship status, and current age or age at death.

The quality of mortality estimates calculated from pregnancy histories depends on the mother's ability to recall all of the children she has given birth to, as well as their birth dates and ages at death. Potential data quality problems include:

- The selective omission from pregnancy histories of those births that did not survive, which can result in underestimation of childhood mortality.
- The displacement of birth dates, which could distort mortality trends. This can occur if an interviewer records a birth as occurring in a different year than the one in which it occurred. This could happen if

an interviewer is trying to cut down on his or her overall workload, because live births occurring during the 3 years before the interview are the subject of a lengthy set of additional questions.

- The quality of reporting of age at death. Misreporting the child's age at death may distort the age pattern of mortality, especially if the net effect of the age misreporting is to transfer deaths from one age bracket to another.

- Any method of measuring childhood mortality that relies on mothers' reports (for example, birth histories) assumes that female adult mortality is not high or, if it is high, that there is little or no correlation between the mortality risks of mothers and those of their children.

Selected indicators of the quality of the mortality data on which the estimates of mortality in this chapter are based are presented in Appendix C, **Tables C.5** and **C.6**.

Some underreporting of child deaths relative to the 2012 survey was identified during a review of the data quality tables.

Appendix C, **Figure C.2** shows neonatal, infant, and under-5 mortality estimates for the 0–4, 5–9, and 10–14 years prior to the 2023, 2017, and 2012 TjDHS surveys. It is expected that the 5–9 year estimate for 2023 would generally overlap with the 0–4 year estimate for 2017 and that the 10–14 year estimate for 2023 would generally overlap with the 5–9 year estimate for 2017 and the 0–4 year estimate for 2012. However, **Figure C.2** does not depict this overlap, suggesting that mortality may be underestimated in the 2023 TjDHS, slightly overestimated in the 2017 TjDHS, or some combination of both.

8.1 Infant and Child Mortality

Neonatal mortality: The probability of dying within the first month of life.

Postneonatal mortality: The probability of dying between the first month of life and the first birthday (computed as the difference between infant and neonatal mortality).

Infant mortality: The probability of dying between birth and the first birthday.

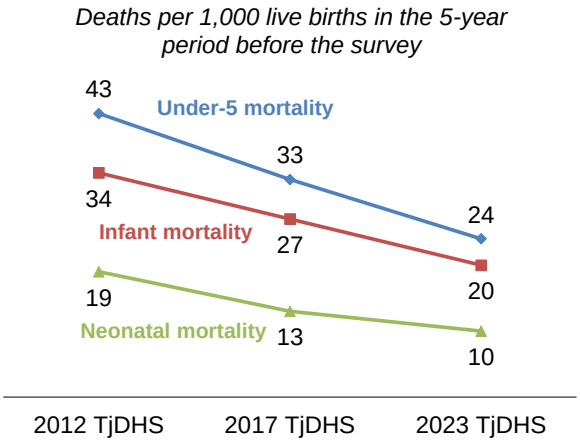
Child mortality: The probability of dying between the first and the fifth birthday.

Under-5 mortality: The probability of dying between birth and the fifth birthday.

During the 5 years immediately preceding the survey, the neonatal mortality rate was 10 deaths per 1,000 live births, the infant mortality rate was 20 deaths per 1,000 live births, and the under-5 mortality rate was 24 deaths per 1,000 live births (**Table 8.1**). Neonatal deaths account for almost half of all infant deaths.

Trends: Neonatal mortality decreased from 19 deaths per 1,000 live births in the 5 years preceding the 2012 survey to 10 deaths per 1,000 live births in the 5 years preceding the 2023 survey. The infant mortality rate also showed a substantial decline, falling from 34 deaths per 1,000 live births in the 5 years preceding the 2012 survey to 20 deaths per 1,000 live births in the 5 years preceding the 2023 survey. Similarly, under-5 mortality dropped from 43 deaths per 1,000 live births in the 5 years preceding the 2012 survey to 24 deaths per 1,000 live births in the 5 years preceding the 2023 survey (**Figure 8.1**).

Figure 8.1 **Trends in early childhood mortality rates**



Patterns by background characteristics

- The neonatal mortality rate is slightly higher among female children (11 deaths per 1,000 live births) than among male children (8 deaths per 1,000 live births). Neonatal mortality is the same in urban and rural areas (10 deaths per 1,000 live births) (**Table 8.2**).

- Infant mortality rates are nearly identical for male children (21 deaths per 1,000 live births) and female children (20 deaths per 1,000 live births). Infant mortality is slightly higher in rural areas (21 deaths per 1,000 live births) than in urban areas (18 deaths per 1,000 live births).

- There is a small difference in under-5 mortality rates between male and female children (23 and 25 deaths per 1,000 live births, respectively). Under-5 mortality is higher in rural areas (25 deaths per 1,000 live births) than in urban areas (21 deaths per 1,000 live births).

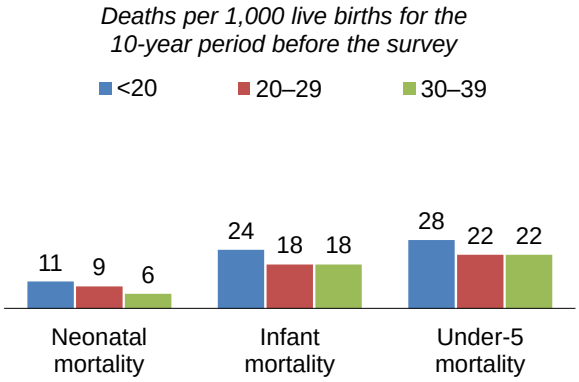
Table 8.3 presents data on the relationship between additional background characteristics and child mortality for the 10-year period preceding the survey. A 10-year period was used to increase the reliability of the estimates calculated.

Patterns by additional background characteristics

- The neonatal mortality rate for the 10-year period preceding the survey varies substantially by region, ranging from 4 deaths per 1,000 live births in Khatlon to 13 deaths per 1,000 live births in Dushanbe. Infant and under-5 mortality rates were also lowest in Khatlon (15 and 19 deaths per 1,000 live births, respectively), while Districts of Republican Subordination (DRS) had the highest rates (24 and 29 deaths per 1,000 live births, respectively) (**Table 8.3**). However, these estimates should be interpreted with caution as mortality rates are relatively low, the numbers of reported deaths are small, and the estimates have relatively large confidence intervals, indicating little statistical difference between estimates. There is possible underreporting of deaths in certain regions and in poorer and lesser educated populations. Please review the confidence intervals for mortality rates in Appendix B to better assess the estimates.

- Children of young mothers (age 20 or below) had the highest rates of neonatal mortality (11 deaths per 1,000 live births), infant mortality (24 deaths per 1,000 live births), and under-5 mortality (28 deaths per 1,000 live births) (**Figure 8.2**).

Figure 8.2 **Early childhood mortality by mother's age at birth**



8.2 PERINATAL MORTALITY

Perinatal mortality rate

Perinatal deaths comprise stillbirths (pregnancy losses occurring after 28 weeks of gestation) and early neonatal deaths (deaths of live births within the first 7 days of life). The perinatal mortality rate is calculated as the number of perinatal deaths per 1,000 pregnancies of 28 or more weeks' duration.[1]

Sample: Number of pregnancies of 28 or more weeks' duration among women age 15–49 in the 5 years before the survey

The causes of stillbirths and early neonatal deaths are closely linked, and examining only early neonatal deaths can understate the true level of mortality around delivery. The perinatal mortality rate encompasses both stillbirths and early neonatal deaths and, thus, provides a better measure of mortality at the time of delivery.

In 2014 the Every Newborn Action Plan, a global multipartner movement to end preventable maternal and newborn deaths and stillbirths, set a target for national stillbirth rates of 12 or fewer stillbirths per 1,000 births in all countries by 2030 (WHO and UNICEF 2014).

Table 8.4 presents the number of stillbirths, the number of early neonatal deaths, and related mortality rates for the 5-year period preceding the survey, by demographic and socioeconomic characteristics. Notably, there were 30 stillbirths and 39 early neonatal deaths reported. It is important to consider that these figures are likely underestimated due to underreporting, and the small number of events means that perinatal mortality rates for various subgroups are based on very few cases, potentially impacting the reliability of these rates.

[1] The *International Classification of Diseases, Eleventh Revision* (*ICD-11*) criteria for international reporting of stillbirths and/or neonatal deaths are set at 28 completed weeks of gestation or more, while countries are encouraged to provide, where possible, data from 22 completed weeks or more as well (WHO 2022). The *ICD-11* defines perinatal mortality as the number of fetal deaths of at least 28 weeks of gestation and/or 1,000 g in weight and newborn deaths (up to and including the first 7 days after birth) per 1,000 total births (that is, including stillbirths and live births) (WHO 2021; WHO 2022). DHS surveys report the rate based on all pregnancies of 7 or more months (or 28 weeks of gestation or more) that terminated in a fetal death along with pregnancies that ended with a live birth, which is the equivalent of total births.

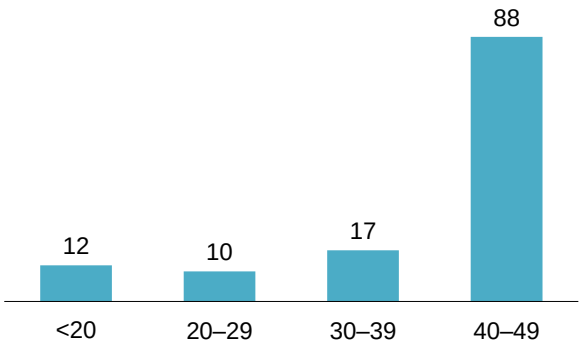
In the 2023 Tajikistan DHS, the 30 recorded stillbirths equate to a rate of 6 stillbirths per 1,000 pregnancies of 28 or more weeks' duration. The 39 early neonatal deaths reported during the same period equate to a rate of 7 early neonatal deaths per 1,000 live births. This results in a perinatal mortality rate of 13 deaths per 1,000 pregnancies of 28 or more weeks' duration,[2] which is slightly higher than the target set by the Every Newborn Action Plan. However, these results should be interpreted with caution as perinatal mortality is likely underestimated.

Patterns by background characteristics

- Perinatal mortality is substantially higher among mothers age 40–49 (88 deaths per 1,000 pregnancies) than among younger mothers (**Figure 8.3**). The substantial difference is likely due, in part, to the very low number of pregnancies of 28 or more weeks' duration (only 82) recorded in the 40–49 age group relative to the other age groups.
- The perinatal mortality rate is higher in urban areas (16 deaths per 1,000 pregnancies) than in rural areas (12 deaths per 1,000 pregnancies).
- Perinatal mortality is lowest in the lowest wealth quintile (9 deaths per 1,000 pregnancies) and highest in the fourth and highest wealth quintiles (17 deaths per 1,000 pregnancies).

Figure 8.3 Perinatal mortality by mother's age at birth

Deaths per 1,000 pregnancies of 28 or more weeks' duration in the 5-year period before the survey



8.3 HIGH-RISK FERTILITY BEHAVIOR

The survival of infants and children depends in part on the demographic and biological characteristics of their mothers. Typically, the probability of dying in infancy is much greater among children born to mothers who are too young (under age 18) or too old (over age 34), children born after a short birth interval (less than 24 months after the preceding birth), and children born to mothers of high parity (more than three children). **Table 8.5** gives the percent distribution of children born in the 5 years preceding the survey by category of elevated risk of mortality (along with risk ratios) and the percent distribution of currently married women by their category of risk if they were to conceive a child at the time of the survey.

Thirty-one percent of births in the 5 years preceding the survey were not in any high-risk category. Twenty-eight percent of births were in an unavoidable risk category, that is, first-order births to women between age 18 and age 34. Forty-two percent of births were in an avoidable high-risk category; 33% were in a single high-risk category (mother's age less than 18 years, mother's age more than 34 years, birth interval less than 24 months, and birth order greater than three), and 9% were in multiple high-risk categories.

The risk ratio denotes the relationship between risk factors and mortality. For example, the risk of dying for a child who falls into any of the avoidable high-risk categories is 1.44 times that for a child not in any high-risk category.

[2] The TjDHS classification of perinatal deaths differs somewhat from that used by the Tajik Republic Ministry of Health and Social Protection of Population (MoHSPP). In calculating perinatal mortality, the current Tajik MoHSPP approach includes early neonatal deaths and stillbirths occurring after 24 weeks of pregnancy in the numerator of the rate and total births (stillbirths and live births) in the denominator. When the 2023 TjDHS perinatal mortality rate is recalculated using this cutoff, the estimate of the perinatal mortality rate is 15 per 1,000 (data not shown).

Among births in a single high-risk category, the risk ratio is highest for births to mothers over age 34; children born to mothers older than age 34 are 1.66 times more likely to die than those not in any risk category.

Among births in multiple high-risk categories, the risk of dying is highest for births to mothers above age 34 and with a birth order greater than three. Children born to mothers in these risk categories are 3.13 times more likely to die than those born to mothers who are not in any high-risk category.

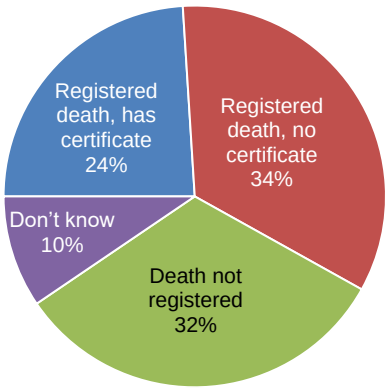
Seventy-four percent of currently married women age 15–49 would have been in an avoidable high-risk category if they had conceived at the time of the survey; 34% would have been in a single high-risk category, and 40% would have been in a multiple high-risk category (**Table 8.5**).

8.4 Registration of Child Deaths

Vital registration systems are a key instrument for tracking mortality trends. The 2023 TjDHS included several questions relating to registration of deaths with the State Office for Registration of Civil Status (ZAGS) in Tajikistan. A death certificate was available for 24% of children who died in the 5 years before the survey; in the case of 34% of children who died, a death certificate was not available but the mother reported that the death was registered with the civil authorities (**Figure 8.4**). Thirty-two percent of children who died did not have their deaths registered.

Figure 8.4 **Death registration**

Percent distribution of deaths of children born in the 5 years preceding the survey, by death registration status



List of Tables

For more information on infant and child mortality, see the following tables:

- **Table 8.1 Early childhood mortality rates**
- **Table 8.2 Five-year early childhood mortality rates according to background characteristics**
- **Table 8.3 Ten-year early childhood mortality rates according to additional characteristics**
- **Table 8.4 Perinatal mortality**
- **Table 8.5 High-risk fertility behavior**

Table 8.1 Early childhood mortality rates

Neonatal, postneonatal, infant, child, and under-5 mortality rates for 5-year periods preceding the survey, Tajikistan DHS 2023

Years preceding the survey	Neonatal mortality (NN)	Postneonatal mortality (PNN)[1]	Infant mortality ($_1q_0$)	Child mortality ($_4q_1$)	Under-5 mortality ($_5q_0$)
0–4	10 (CI: 6, 13)	11 (CI: 7, 14)	20 (CI: 15, 25)	4 (CI: 2, 6)	24 (CI: 19, 30)
5–9	8 (CI: 5, 11)	9 (CI: 6, 12)	17 (CI: 13, 21)	5 (CI: 3, 7)	22 (CI: 17, 26)
10–14	12 (CI: 8, 16)	9 (CI: 5, 12)	21 (CI: 16, 26)	4 (CI: 2, 7)	25 (CI: 19, 31)

[1] Computed as the difference between the infant and neonatal mortality rates

Table 8.2 Five-year early childhood mortality rates according to background characteristics

Neonatal, postneonatal, infant, child, and under-5 mortality rates for the 5-year period preceding the survey, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Neonatal mortality (NN)	Post-neonatal mortality (PNN)[1]	Infant mortality ($_1q_0$)	Child mortality ($_4q_1$)	Under-5 mortality ($_5q_0$)
Child's sex					
Male	8	12	21	2	23
Female	11	9	20	5	25
Residence					
Urban	10	8	18	3	21
Rural	10	12	21	4	25
Total	10	11	20	4	24

[1] Computed as the difference between the infant and neonatal mortality rates

Table 8.3 Ten-year early childhood mortality rates according to additional characteristics

Neonatal, postneonatal, infant, child, and under-5 mortality rates for the 10-year period preceding the survey, according to additional characteristics, Tajikistan DHS 2023

Characteristic	Neonatal mortality (NN)	Post-neonatal mortality (PNN)[1]	Infant mortality ($_1q_0$)	Child mortality ($_4q_1$)	Under-5 mortality ($_5q_0$)
Mother's age at birth					
<20	11	13	24	4	28
20–29	9	9	18	4	22
30–39	6	12	18	4	22
40–49	*	*	*	*	*
Birth order					
1	9	12	22	6	27
2–3	8	8	16	3	19
4–6	9	12	21	6	27
7+	*	*	*	*	*
Previous birth interval[2]					
<2 years	9	14	23	2	25
2 years	6	9	15	4	19
3 years	11	4	14	9	24
4+ years	10	5	15	2	17
Region					
Dushanbe	13	5	18	2	21
GBAO	12	5	17	3	20
Sughd	12	9	20	3	23
DRS	11	13	24	6	29
Khatlon	4	10	15	5	19
FTF districts	3	11	14	4	18
Mother's education					
None/primary	5	10	15	3	19
General basic	13	11	23	6	29
General secondary	7	9	15	3	19
Professional primary/middle	8	14	22	5	27
Higher	7	11	18	1	19
Wealth quintile					
Lowest	6	9	14	6	20
Second	9	11	20	7	27
Middle	11	13	24	2	27
Fourth	7	10	18	3	21
Highest	12	6	18	2	20

Note: An asterisk indicates that a figure is based on fewer than 250 unweighted children and has been suppressed.
[1] Computed as the difference between the infant and neonatal mortality rates
[2] Excludes first-order births

Table 8.4 Perinatal mortality

Number of stillbirths, number of early neonatal deaths, stillbirth rate, early neonatal death rate, perinatal mortality rate, and the ratio of stillbirths to early neonatal deaths for the 5-year period preceding the survey, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Number of stillbirths[1]	Number of early neonatal deaths[2]	Stillbirth rate[3]	Early neonatal death rate[4]	Perinatal mortality rate[5]	Number of pregnancies of 28+ weeks' duration[6]	Ratio of stillbirths to early neonatal deaths
Mother's age at birth							
<20	2	3	6	6	12	396	0.9
20–29	16	22	4	6	10	3,647	0.7
30–39	10	9	9	8	17	1,152	1.0
40–49	3	5	31	58	88	82	0.6
Previous pregnancy interval in months[7]							
First pregnancy	7	7	5	5	10	1,400	0.9
<15	7	11	5	8	13	1,372	0.6
15–26	9	5	9	6	15	987	1.7
27–38	1	3	2	6	8	540	0.3
39+	6	11	7	11	18	978	0.6
Residence							
Urban	9	11	7	9	16	1,319	0.8
Rural	21	27	5	7	12	3,957	0.8
Region							
Dushanbe	5	6	9	11	20	532	0.8
GBAO	1	1	7	12	19	73	0.6
Sughd	8	18	5	13	18	1,427	0.4
DRS	6	8	4	7	11	1,249	0.7
Khatlon	12	5	6	3	9	1,995	2.2
FTF districts	2	1	1	1	2	1,226	1.1
Mother's education							
None/primary	1	1	4	5	9	284	0.8
General basic	7	19	4	12	16	1,582	0.4
General secondary	13	12	6	5	11	2,378	1.1
Professional primary/middle	4	2	10	4	14	427	2.7
Higher	4	4	7	7	14	605	1.0
Wealth quintile							
Lowest	3	7	3	7	9	1,051	0.4
Second	8	6	7	6	13	1,077	1.3
Middle	5	6	4	6	10	1,053	0.8
Fourth	9	9	8	8	17	1,083	1.0
Highest	6	11	6	11	17	1,012	0.6
Total	30	39	6	7	13	5,276	0.8

Note: Respondents may choose to report the duration of their pregnancy in either weeks or months.
[1] Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal deaths in pregnancies lasting 7 or more months.
[2] Early neonatal deaths are deaths at age 0–6 days among live-born children.
[3] The number of stillbirths divided by the number of pregnancies lasting 28 or more weeks, expressed per 1,000
[4] The number of early neonatal deaths divided by the number of live births, expressed per 1,000
[5] The sum of the number of stillbirths and early neonatal deaths divided by the number of pregnancies lasting 28 or more weeks, expressed per 1,000
[6] Includes pregnancies lasting 7 or more months when duration of pregnancy is reported in months
[7] Pregnancy interval categories correspond to birth interval categories of <24 months, 24–35 months, 36–47 months, and 48+ months assuming a pregnancy duration of 9 months.

Table 8.5 High-risk fertility behavior

Percent distribution of children born in the 5 years preceding the survey by category of elevated risk of mortality and the risk ratio, and percent distribution of currently married women by category of risk if they were to conceive a child at the time of the survey, Tajikistan DHS 2023

Risk category	Births in the 5 years preceding the survey		Percentage of currently married women[1]
	Percentage of births	Risk ratio	
Not in any high-risk category	30.6	1.00	17.5[a]
Unavoidable risk category			
First-order births between age 18 and age 34	27.9	1.09	8.3
In any avoidable high-risk category	41.5	1.44	74.2
Single high-risk category			
Mother's age <18 only	0.1	*	0.0
Mother's age >34 only	2.6	1.66	8.7
Birth interval <24 months only	17.7	1.19	9.9
Birth order >3 only	12.3	0.70	15.6
Subtotal	32.7	1.12	34.1
Multiple high-risk category			
Age <18 and birth interval <24 months[2]	nc	nc	nc
Age >34 and birth interval <24 months	0.3	*	0.3
Age >34 and birth order >3	4.5	3.13	31.0
Age >34 and birth interval <24 months and birth order >3	0.5	(2.22)	2.1
Birth interval <24 months and birth order >3	3.6	1.90	6.7
Subtotal	8.8	2.61	40.0
Total	100.0	na	100.0
Subtotals by individual avoidable high-risk category			
Mother's age <18	0.1	*	0.0
Mother's age >34	7.8	2.63	42.1
Birth interval <24 months	22.0	1.36	18.9
Birth order >3	20.8	1.47	55.3
Number of births/women	5,246	na	7,392

Note: Risk ratio is the ratio of the proportion dead among births in a specific high-risk category to the proportion dead among births not in any high-risk category. Ratios in parentheses are based on 25–49 unweighted cases. An asterisk indicates that a ratio is based on fewer than 25 unweighted cases and has been suppressed.
na = not applicable
nc = no cases
[1] Women are assigned to risk categories according to the status they would have at the birth of a child if they were to conceive at the time of the survey: current age less than 17 years and 3 months or older than 34 years and 2 months, latest birth less than 15 months ago, or latest birth being of order 3 or higher.
[2] Includes the category age <18 and birth order >3
[a] Includes sterilized women

MATERNAL AND NEWBORN HEALTH CARE 9

Key Findings

- ***Antenatal care:*** 81% of women age 15–49 received antenatal care (ANC) from a skilled provider for their most recent live birth in the 2 years preceding the survey.
- ***Delivery:*** Institutional deliveries increased substantially from 78% in 2012 to 95% in 2023. Over the same period, home deliveries declined from 22% to 5%.
- ***Postnatal checks:*** 89% of women received a postnatal check during the first 2 days after the delivery of their most recent live birth, with 75% receiving a postnatal check within 4 hours of delivery.
- ***Cancer examinations:*** 6% of women age 15–49 have ever been examined by a doctor or health care worker for breast cancer, and 9% have ever been tested for cervical cancer.
- ***Problems accessing health care:*** The percentage of women reporting at least one problem accessing health care decreased from 55% in 2012 to 17% in 2023.

Health care services during pregnancy and childbirth and after delivery are important for the survival and well-being of both the mother and the infant. Antenatal care (ANC) can reduce health risks for mothers and infants through monitoring of pregnancies and screening for complications. Delivery at a health facility, with skilled medical attention and hygienic conditions, reduces the risk of complications and infections during labor and delivery. Timely postnatal care provides an opportunity to treat complications arising from delivery and teach the mother how to care for herself and her newborn.

The first part of this chapter presents information on ANC providers, number and timing of ANC visits, and various components of care. The second focuses on childbirth and provides information on place of delivery, assistance during delivery, and cesarean deliveries. The third section focuses on postnatal care and presents information on postnatal health checks for mothers and newborns. The final section covers issues that affect women's health regardless of their maternal status: whether or not women have been examined for breast or cervical cancer, problems they experience accessing health care, and the distance from their home to the nearest health facility.

9.1 ANTENATAL CARE COVERAGE AND CONTENT

9.1.1 Skilled Providers

Antenatal care (ANC) from a skilled provider

Pregnancy care received from skilled providers, such as doctors (including family doctors, obstetricians, and gynecologists) and nurses/male nurses/ midwives.

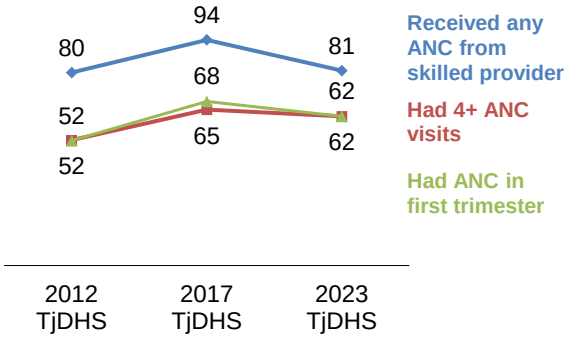
Sample: Women age 15–49 who had a live birth or stillbirth in the 2 years before the survey

Overall, 81% of women age 15–49 received ANC from a skilled provider for their most recent live birth in the 2 years preceding the survey. Obstetricians and gynecologists were the most common service providers (46%), followed by family doctors (26%), other doctors (6%), and nurses, male nurses, or midwives (4%). Nineteen percent of women did not receive any ANC (**Table 9.1**).

Trends: The percentage of women with a live birth in the 2 years preceding the survey who received antenatal care from a skilled provider increased from 80% in 2012 to 94% in 2017 before decreasing to 81% in 2023 (**Figure 9.1**).

Figure 9.1 **Trends in antenatal care coverage**

Percentage of women age 15–49 who had a live birth in the 2 years before the survey (for the most recent birth)



Patterns by background characteristics

- The percentage of women who received ANC from skilled providers varies substantially by region, from 71% in Khatlon to 91% in Dushanbe and 93% in Gorno-Badakhshan Autonomous Oblast (GBAO).
- The percentage of women receiving care from a skilled provider increases with increasing household wealth, from 66% among those in the lowest wealth quintile to 88% among those in the highest wealth quintile. Conversely, the percentage of women who did not receive any ANC declines from 34% in the lowest wealth quintile to 12% in the highest quintile.
- A higher percentage of women under age 20 (86%) than women age 20–34 (81%) and 35–49 (79%) received ANC from a skilled provider. The percentage of women not receiving ANC increases with age, from 14% among those under age 20 to 21% among those age 35–49.

9.1.2 Timing and Number of Antenatal Care Visits

Sixty-two percent of women had four or more ANC visits during their most recent pregnancy resulting in a live birth in the 2 years preceding the survey. Sixty-two percent of women had their first ANC visit during the first trimester of pregnancy and 17% during the second trimester. Only 2% of women waited until the third trimester to have their first ANC visit (**Table 9.2**).

Trends: The percentage of women who had four or more ANC visits increased from 52% in 2012 to 65% in 2017 before decreasing to 62% in 2023 (**Figure 9.1**). Similarly, the percentage of women who received ANC in the first trimester of pregnancy increased from 52% in 2012 to 68% in 2017 and then declined to 62% in 2023.

9.2 COMPONENTS OF ANTENATAL CARE

Components of antenatal care

Specific antenatal care services performed by a health care provider include measuring blood pressure, taking a urine sample, taking a blood sample, listening for the baby's heartbeat, counseling about the mother's diet, counseling about breastfeeding, and asking about vaginal bleeding.

Sample—quality of care indicator: Women age 15–49 who had a live birth or stillbirth in the 2 years before the survey and had at least one ANC visit

Sample—population-based indicator: All women age 15–49 who had a live birth or stillbirth in the 2 years before the survey

The ability for ANC to act as an effective intervention for identifying issues occurring during pregnancy that could adversely affect pregnancy outcomes is dictated in large part by the components of ANC services offered by the health care provider.

As a part of ANC, certain interventions and tests are recommended at each ANC contact. These include the following:

- Measuring blood pressure. Taking a woman's blood pressure at each antenatal care visit is essential to monitor for gestational hypertension or preeclampsia.
- Conducting urine and blood tests. These tests assess signs of infection or other diseases and conditions that could negatively affect a woman or her baby during or after pregnancy.
- Listening to the baby's heartbeat. This can confirm that the fetus is alive as well as reassure the mother.
- Counseling on maternal nutrition, specifically on healthy eating during pregnancy and breastfeeding. These counseling messages promote healthy weight gain during pregnancy and can help the pregnant woman breastfeed her newborn early.
- Asking about vaginal bleeding. Light bleeding or spotting is common, especially during the first few months of a pregnancy. Heavy bleeding may be a sign of something more serious; a pregnant woman experiencing heavy bleeding should visit a health care provider.

In the 2023 TjDHS, data collected on components of ANC were tabulated in two ways. **Table 9.3.1** shows the percentage of women with a live birth or stillbirth in the 2 years before the survey who reported that they had at least one ANC visit and received specified ANC services. This tabulation is a measure of the quality of the ANC services these women received. **Table 9.3.2** shows the percentage of all women with a live birth or stillbirth in the past 2 years who received specified ANC services, regardless of whether they reported an ANC visit. This tabulation is a measure of coverage of these key ANC interventions among the population of women in need of them.

Among women age 15–49 who received antenatal care (ANC) for their most recent live birth in the 2 years preceding the survey, nearly all had a urine sample taken (99%), had their blood pressure measured (more than 99%), had a blood sample taken (99%), and had the baby's heartbeat checked (more than 99%). Most women were counseled about their diet (95%) and about breastfeeding (89%). Eighty-nine percent of women were asked about vaginal bleeding. Only 6% reported becoming ill with COVID-19 (**Table 9.3.1**).

Among all women age 15–49 with a live birth in the 2 years preceding the survey, 81% had their blood pressure measured, had a urine sample taken, had a blood sample taken, and had the baby's heartbeat checked. Seventy-seven percent were counseled about their diet, 72% were counseled about breastfeeding,

and another 72% were asked about vaginal bleeding. Six percent of women reported becoming ill with COVID-19 (**Table 9.3.2**).

Trends: Among women who had a live birth or stillbirth in the 2 years preceding the survey and received ANC, the percentage who had a urine sample taken during ANC increased from 90% in 2012 to 99% in 2023. During the same period, the percentage of women who had a blood sample taken during ANC increased from 92% to 99% and the percentage who had their blood pressure measured increased from 94% to almost 100%.

9.2.1 Food or Cash Assistance and Iron-containing Supplementation during Pregnancy

Food and cash assistance programs provide assistance to pregnant and lactating women to support healthy diets and address malnutrition.

During pregnancy, women have higher micronutrients needs and are at risk of micronutrient deficiencies, including iron deficiency, which is a primary cause of anemia. Severe anemia can place the mother and the baby in danger through increased risk of blood loss during labor and increased risk of preterm delivery, low birth weight, and perinatal mortality (Haider et al. 2013). To help address maternal anemia, interventions provide iron tablets or syrup to pregnant women (WHO 2016c).

Women with a live birth or stillbirth in the 2 years preceding the survey, regardless of whether they attended ANC, were asked if they received cash assistance through the Adresnaya Socialnaya Pomosh program and if they took iron supplementation during their most recent pregnancy. Overall, 75% of women age 15–49 who had a live birth in the past 2 years took some form of iron supplementation, and 4% received food or cash assistance.

Among women who took iron supplements, 55% took them for less than 60 days, 7% for 60–89 days, and 11% for 90–179 days. Less than 1% of women took supplements for more than 180 days (**Table 9.4**).

9.2.2 Source of Iron-containing Supplements

Information on sources of iron-containing supplements can increase understanding of the distribution patterns of supplements.

Among women age 15–49 who took some form of iron supplementation during the pregnancy of their most recent live birth, 67% obtained supplements from a private medical sector source and 37% from the public sector. Pharmacies (67%) were the most common private source of iron-containing supplements, while health centers (urban/rayon/rural) (32%) were the most common public sector source (**Table 9.5**).

9.2.3 Folic Acid Supplementation

Women with a live birth or stillbirth in the 2 years preceding the survey, regardless of whether they attended ANC, were also asked if they took folic acid tablets during the first 3 months of pregnancy. Overall, 74% of women age 15–49 who had a live birth in the past 2 years took folic acid during the first 3 months of pregnancy (**Table 9.4**).

Women with a live birth or stillbirth in the 2 years preceding the survey were also asked if they took folic acid supplementation before the pregnancy of their most recent live birth or stillbirth. Overall, 68% of women age 15–49 who had a live birth reported that they took folic acid before their pregnancy (**Table 9.6**).

9.3 COVID-19 DURING PREGNANCY

Pregnant women with COVID-19 are at increased risk of becoming seriously ill, which can lead to pregnancy problems such as preterm births (Gholami et al. 2023; Wei et al. 2021).

In the 2023 TjDHS, information on COVID-19 was collected from all women who had a pregnancy in the 35 months preceding the survey. **Table 9.7** shows the percentage of women age 15–49 with a pregnancy in the 2 years preceding the survey who reported that they became ill with COVID-19 during their most recent pregnancy.

Among women with a pregnancy in the 2 years preceding the survey, 6% reported that they became ill with COVID-19 during their most recent pregnancy resulting in a live birth, and 7% reported that they became ill during their most recent pregnancy resulting in a miscarriage or abortion (**Table 9.7**).

Patterns by background characteristics

- A higher percentage of women in urban areas (8%) than rural areas (5%) reported that they became ill with COVID-19 during the pregnancy for their most recent live birth.
- The percentage of women reporting COVID-19 during pregnancy is highest in Dushanbe (13%) and lowest in GBAO (3%).
- A higher percentage of women in the highest wealth quintile (10%) than in the other wealth quintiles (4%–6%) reported COVID-19 during pregnancy.

9.4 DELIVERY SERVICES

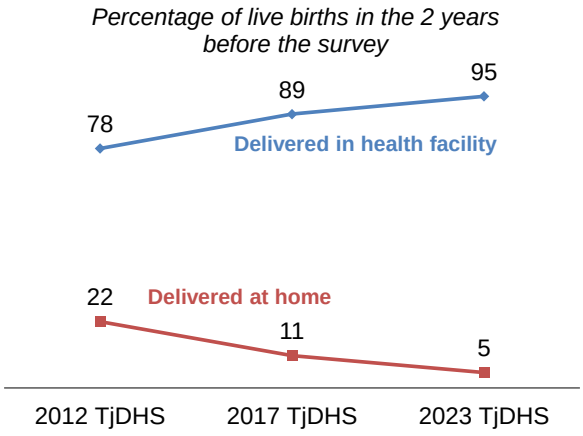
9.4.1 Institutional Deliveries

Institutional deliveries
Deliveries that occur in a health facility.
Sample: All live births and/or stillbirths in the 2 years before the survey

Ninety-five percent of live births in the 2 years preceding the survey were delivered in a health facility, of which nearly all (95%) were delivered in a public facility. Less than 1% of births were delivered in a private facility, and 5% were delivered at home (**Table 9.8**).

Trends: Institutional deliveries increased substantially from 78% in 2012 to 95% in 2023. Over the same period, home deliveries declined from 22% to 5% (**Figure 9.2**).

Figure 9.2 **Trends in place of birth**



Patterns by background characteristics

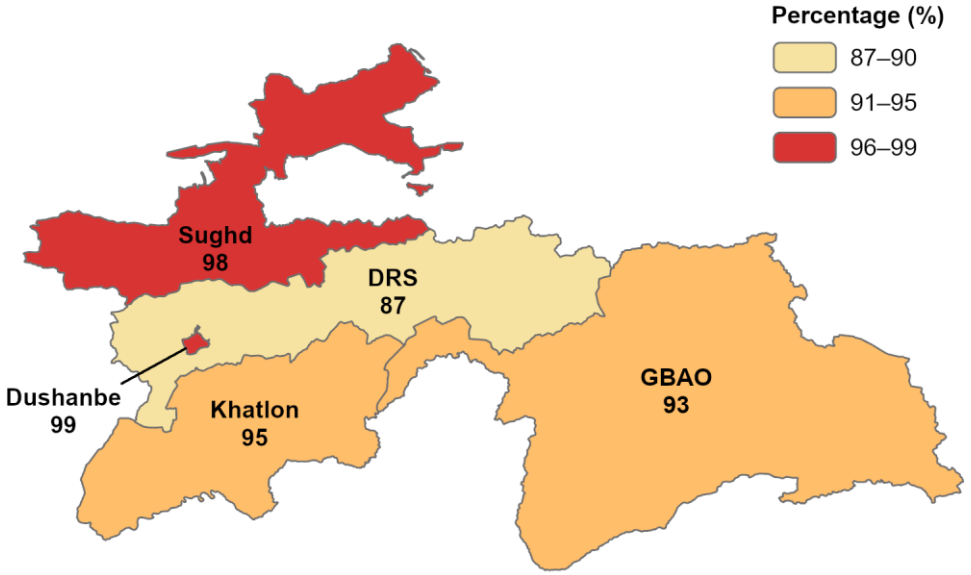
- A higher percentage of births to mothers with at least four ANC visits were delivered in health facilities (96%) than births to mothers with no ANC visits (90%) (**Table 9.8**).
- The percentage of births occurring in a health facility increases with increasing mother's education and household wealth. Eighty-six percent of births to mothers with no education or a primary education

and mothers in the lowest wealth quintile were delivered in health facilities, as compared with 99% of births to mothers with a higher education and mothers in the highest wealth quintile.

- By region, the percentage of live births delivered at a health facility ranges from 87% in Districts of Republican Subordination (DRS) to 99% in Dushanbe (**Map 9.1**).

Map 9.1 Births delivered in a health facility by region

Percentage of live births in the 2 years before the survey that were delivered in a health facility



9.4.2 Delivery by Cesarean

Ten percent of live births in the 2 years preceding the survey were delivered via cesarean section (C-section) (**Table 9.9**).

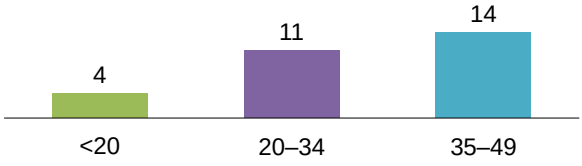
Trends: The percentage of live births delivered via C-section increased from 5% in 2012 to 10% in 2023.

Patterns by background characteristics

- The percentage of C-section deliveries increases with increasing mother's age, from 4% among women under age 20 to 14% among women age 35–49 (**Figure 9.3**).
- C-section deliveries vary slightly with birth order, ranging from 9% for first-order births to 12% for fourth- and fifth-order births (**Table 9.9**).
- The percentage of C-sections is higher in urban areas (13%) than in rural areas (10%).

Figure 9.3 Cesarean section by mother's age at birth

Percentage of live births in the 2 years before the survey that were delivered by cesarean section



9.4.3 Skilled Assistance during Delivery

Skilled assistance during delivery

Births delivered with the assistance of doctors (including family doctors, obstetricians, and gynecologists) and nurses/male nurses/midwives.

Sample: All live births and/or stillbirths in the 2 years before the survey

Obstetric care from a health professional during delivery is recognized as a critical element in managing complications that may arise during childbirth and reducing maternal and neonatal mortality.

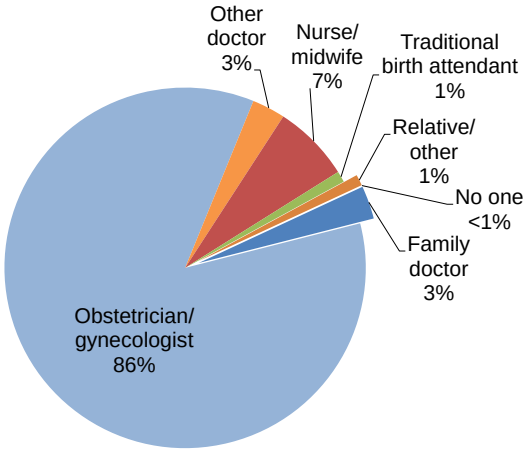
The aim of the Tajikistan National Development Strategy is for 96% of births to be attended by a skilled provider by 2025. Overall, 98% of live births in the 2 years preceding the survey were delivered by a skilled provider. Of those births, 86% were delivered by obstetricians or gynecologists, 7% by nurses or midwives, and 3% by family doctors (**Table 9.10** and **Figure 9.4**).

Sixty-eight percent of infants had skin-to-skin contact with their mother immediately after birth, as recommended.

Trends: The percentage of live births delivered by a skilled provider increased from 88% in 2012 to 98% in 2023.

Figure 9.4 **Assistance at delivery**

Percent distribution of births in the 2 years before the survey



Duration of Stay at Health Facility

Twenty-nine percent of women with vaginal births in the 2 years preceding the survey stayed in the health facility for 1–2 days after their delivery, and 68% stayed for 3 or more days. Seventeen percent of women who delivered via C-section stayed for 1–2 days after their delivery, while 80% stayed for 3 or more days (**Table 9.11**).

9.5 Postnatal Care

9.5.1 Postnatal Health Check for Mothers

Overall, 89% of women received a postnatal care (PNC) check during the first 2 days after the delivery of their most recent live birth, with 75% receiving a postnatal check within 4 hours of delivery (**Table 9.12**). Six percent of women did not receive any postnatal check during the first 2 days after the delivery of their most recent live birth in the 2 years preceding the survey.

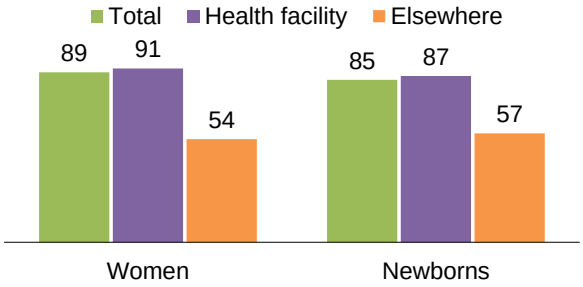
Trends: The percentage of women who received their first postnatal check in the first 2 days after birth increased from 80% in 2012 to 92% in 2017 before decreasing to 89% in 2023.

Patterns by background characteristics

- Ninety-one percent of women who delivered in a health facility received a postnatal check during the first 2 days after birth, as compared with 54% of women who delivered elsewhere (**Figure 9.5**).
- The percentage of women who had a postnatal check during the first 2 days following birth varies by region, from 82% in Dushanbe to 94% in Sughd.
- The percentage of women with a postnatal check during the first 2 days after birth decreases from 96% among those less than age 20 to 89% among those age 20–49.

Figure 9.5 Postnatal care by place of delivery

Percentage of most recent live births in the 2 years before the survey for which women and newborns received a postnatal check during the first 2 days after birth



Type of Provider

Most women who gave birth in the 2 years before the survey (89%) received a postnatal check in the first 2 days after their most recent live birth from doctors, nurses, or midwives (**Table 9.13**). The check was most often conducted by a doctor (56% by an obstetrician/gynecologist, 2% by a family doctor, and 13% by another doctor). Eighteen percent of women received a check from a nurse or midwife. Nurses and midwives are particularly active in Sughd (20%) and Khatlon (26%). Less than 1% of women received a postnatal check from a traditional birth attendant, and 11% did not receive a postnatal check during the first 2 days after birth (**Table 9.13**).

Content of Care

Ninety-three percent of women with a live birth in the 2 years preceding the survey had their blood pressure checked, 90% were asked about vaginal bleeding, and 80% were counseled about family planning during the first 2 days after birth by a health care provider. Overall, 79% of women had all three checks performed by a health care provider in the first 2 days after birth (**Table 9.14**).

9.5.2 Postnatal Health Check for Newborns

Eighty-five percent of newborns had a postnatal check during the first 2 days after birth. Most postnatal checks (61%) took place 1–3 hours after birth, and 10% took place less than 1 hour after delivery. Nine percent of newborns had no postnatal check (**Table 9.15**).

Patterns by background characteristics

- Eighty-seven percent of newborns who were delivered in a health facility received a postnatal check during the first 2 days after birth, as compared with 57% of newborns who were delivered elsewhere (**Figure 9.5**).
- The percentage of newborns who had a postnatal check during the first 2 days following birth varies by region, from 74% in Dushanbe to 89% in GBAO.

Type of Provider

Most newborns (85%) received a postnatal check within the first 2 days from a doctor, nurse, or midwife. The check was most often conducted by a doctor (9% by an obstetrician/gynecologist, 2% by a family

doctor, and 57% by another doctor). Sixteen percent of newborns received a check from a nurse or midwife, and less than 1% received a check from a traditional birth attendant (**Table 9.16**).

Content of Care

The five recommended signal functions to be performed as part of postnatal care are (1) examining the umbilical cord, (2) measuring temperature, (3) observing and/or counseling on breastfeeding, (4) telling the mother about danger signs and how to recognize if the baby needs immediate attention, and (5) weighing the newborn. Overall, 77% of newborns had all five signal functions performed during the first 2 days after birth (**Table 9.17**). Of the selected signal functions performed during the first 2 days after birth, weighing the newborn was the most common (96%), while informing the mother about danger signs and how to recognize if the baby needs immediate attention was the least common (81%).

Postnatal breastfeeding counseling supports exclusive breastfeeding. Face-to-face breastfeeding counseling facilitates observation of positioning and the latch of the infant and allows for tailored breastfeeding counseling and support (WHO 2018). Ninety percent of mothers with a live birth in the 2 years preceding the survey reported that they were counseled on breastfeeding during the first 2 days after birth, and 85% reported that they were observed breastfeeding.

9.5.3 Postnatal Health Checks for Mothers and Newborns

Eighty-nine percent of mothers and 85% of newborns received a postnatal check during the first 2 days after birth. In 82% of live births in the 2 years preceding the survey, both the mother and the newborn received a check.

The percentages of mothers and newborns receiving a postnatal check during the first 2 days after birth are higher when the birth took place in a health facility (91% and 87%, respectively) than when the birth took place elsewhere (54% and 57%, respectively) (**Figure 9.5** and **Table 9.18**).

9.6 Breast and Cervical Cancer Examinations

Breast cancer examination

Women were asked if a doctor or other health care provider examined their breasts to check for cancer. The examination could include either a clinical breast exam, in which health care providers use their hands to feel for lumps or other changes, or use of medical equipment to make an image of the breast tissue, such as a mammogram.

Cervical cancer examination

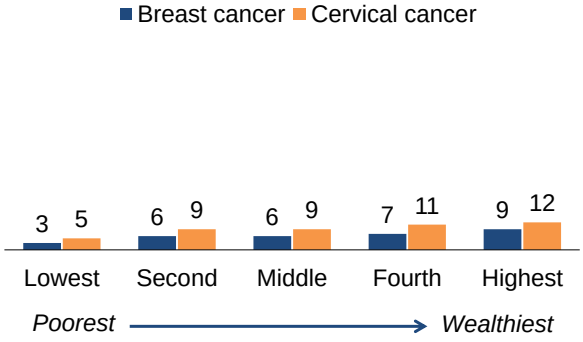
To be checked for cervical cancer, a woman is asked to lie on her back with her legs apart. Then the health care worker uses a brush or swab to collect a sample from inside the woman's cervix. The sample is sent to a laboratory for testing. This test is called a Pap smear or human papillomavirus (HPV) test. Another method is visual inspection with acetic acid (VIA). In this test, the health care worker puts vinegar on the cervix to see if there is a reaction. Women were asked if a doctor or other health care provider ever tested them for cervical cancer. Information on the type of screening test was not collected.

Sample: Women age 15–49

Six percent of women age 15–49 have ever been examined by a doctor or health care worker for breast cancer, and 9% have ever been tested for cervical cancer. Across regions, the percentage of women ever examined for breast cancer ranges from 4% in DRS to 12% each in Dushanbe and GBAO. The percentage of women ever tested for cervical cancer ranges from 8% in Sughd to 16% in GBAO (**Table 9.19**). The percentage of women who were ever examined for breast cancer and cervical cancer increases with increasing household wealth (**Figure 9.6**).

Figure 9.6 **Breast and cervical cancer exams by household wealth**

Percentage of women age 15–49 who were ever examined by a health care worker for:



9.7 Problems in Accessing Health Care

Problems in accessing health care

Women were asked whether each of the following factors is a big problem in seeking medical advice or treatment for themselves when they are sick:

- Getting permission to go to the doctor
- Getting money for advice or treatment
- Distance to a health facility
- Not wanting to go alone

Sample: Women age 15–49

Among women age 15–49, only 17% reported that they had at least one problem accessing health care for themselves when they were sick. The most common problem was getting money for treatment (12%), followed by not wanting to go alone (7%). The percentage of women with at least one problem accessing health care varies by region, from 13% in Khatlon to 30% in Dushanbe (**Table 9.20**).

Trends: The percentage of women reporting at least one problem accessing health care decreased from 55% in 2012 to 17% in 2023.

9.8 Distance and Means of Transport to the Nearest Health Facility

Seventy-four percent of women age 15–49 reported that the travel time from their home to the nearest health facility is less than 30 minutes. Only 4% indicated that their travel time is 1 hour or more. Twenty-six percent of women use motorized transportation to travel to the nearest health facility, while 74% use nonmotorized transport (**Table 9.21**).

List of Tables

For more information on maternal and newborn health care, see the following tables:

Table 9.1 Antenatal care

Percent distribution of women age 15–49 who had a live birth and/or stillbirth in the 2 years preceding the survey by antenatal care (ANC) provider during the pregnancy for the most recent live birth or stillbirth and percentage receiving antenatal care from a skilled provider for the most recent live birth or stillbirth, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Antenatal care provider				No ANC	Total	Percentage receiving antenatal care from a skilled provider[1]	Number of women
	Family doctor	Obstetrician/ gynecologist	Other doctor	Nurse/male nurse/ midwife				
				LIVE BIRTHS				
Age at birth								
<20	28.4	48.2	6.4	3.0	13.9	100.0	86.1	127
20–34	25.5	45.6	5.9	4.1	18.9	100.0	81.1	1,759
35–49	27.9	47.0	1.6	2.7	20.7	100.0	79.3	181
Birth order[2]								
1	27.2	45.0	5.9	4.6	17.3	100.0	82.7	536
2–3	26.1	46.9	5.4	3.2	18.4	100.0	81.6	1,086
4–5	23.1	44.9	5.9	4.6	21.4	100.0	78.6	411
6+	(31.7)	(41.8)	(0.0)	(6.9)	(19.6)	100.0	(80.4)	32
Residence								
Urban	34.8	41.9	4.2	3.4	15.7	100.0	84.3	536
Rural	22.7	47.3	6.1	4.1	19.8	100.0	80.2	1,530
Region								
Dushanbe	53.9	34.7	0.4	2.1	9.0	100.0	91.0	208
GBAO	9.1	67.7	11.4	4.6	7.3	100.0	92.7	25
Sughd	28.1	47.6	10.3	4.3	9.7	100.0	90.3	576
DRS	30.0	39.3	4.0	8.7	18.1	100.0	81.9	472
Khatlon	14.9	51.0	4.3	1.2	28.7	100.0	71.3	785
FTF districts	21.1	52.4	4.6	1.5	20.3	100.0	79.7	471
Education								
None/primary	22.1	42.2	6.3	6.5	22.9	100.0	77.1	103
General basic	31.1	42.3	5.0	3.8	17.8	100.0	82.2	545
General secondary	22.9	46.7	6.4	4.1	19.9	100.0	80.1	934
Professional primary/ middle	25.2	55.1	2.9	1.8	14.9	100.0	85.1	217
Higher	27.5	44.5	5.7	4.1	18.1	100.0	81.9	266
Wealth quintile								
Lowest	10.1	49.1	2.5	4.2	34.2	100.0	65.8	389
Second	20.6	44.7	8.9	6.5	19.3	100.0	80.7	410
Middle	29.1	45.8	4.4	3.9	16.9	100.0	83.1	419
Fourth	31.0	44.8	9.8	1.9	12.4	100.0	87.6	434
Highest	37.2	45.4	2.0	3.2	12.2	100.0	87.8	414
Total	25.9	45.9	5.6	3.9	18.7	100.0	81.3	2,066
				STILLBIRTHS				
Total	*	*	*	*	*	100.0	*	11
				LIVE BIRTHS AND STILLBIRTHS[3]				
Total	25.8	46.1	5.5	3.9	18.7	100.0	81.3	2,073

Note: If more than one source of ANC was mentioned, only the provider with the highest qualifications is considered in this tabulation. Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal deaths in pregnancies lasting 7 or more months. 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.

[1] Skilled provider includes family doctor, obstetrician/gynecologist, other doctor, nurse, male nurse, and midwife.

[2] Birth order refers to the order of the birth among the respondent's live births.

[3] For women who had both a live birth and a stillbirth in the 2 years preceding the survey, data are tabulated for the most recent birth only.

Table 9.2 Number of antenatal care visits and timing of first visit

Percent distribution of women age 15–49 who had a live birth and/or a stillbirth in the 2 years preceding the survey by number of antenatal care (ANC) visits during the pregnancy for the most recent live birth or stillbirth and by the timing of the first visit, and among women with ANC, median months pregnant at first visit, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Number of ANC visits									Number of months pregnant at time of first ANC visit								
	None	1	2	3	4–7	8+	Don't know	Total	4+ ANC visits	No ante-natal care	<4	4–6	7+	Don't know	Total	Number of women	Median months pregnant at first visit (for those with ANC)	Number of women with ANC
LIVE BIRTHS																		
Age at birth																		
<20	13.9	1.8	7.3	12.3	44.7	20.0	0.0	100.0	64.7	13.9	70.7	14.3	1.1	0.0	100.0	127	3.2	109
20–34	18.9	2.2	4.5	11.8	49.7	12.9	0.1	100.0	62.6	18.9	61.8	17.2	1.9	0.2	100.0	1,759	3.3	1,426
35–49	20.7	3.1	5.2	14.9	42.0	13.7	0.4	100.0	55.7	20.7	60.5	17.0	1.4	0.4	100.0	181	3.3	143
Birth order[1]																		
1	17.3	2.7	3.9	10.9	50.5	14.4	0.2	100.0	64.9	17.3	66.5	13.7	2.0	0.4	100.0	536	3.3	443
2–3	18.4	1.9	5.1	12.8	48.9	12.9	0.0	100.0	61.8	18.4	61.2	18.7	1.5	0.1	100.0	1,086	3.3	886
4–5	21.4	2.5	5.1	12.1	45.2	13.7	0.0	100.0	58.9	21.4	59.3	16.8	2.4	0.0	100.0	411	3.4	323
6+	(19.6)	(5.4)	(0.0)	(7.2)	(56.6)	(9.0)	(2.3)	100.0	(65.6)	(19.6)	(64.2)	(13.9)	(0.0)	(2.3)	100.0	32	*	26
Residence																		
Urban	15.7	2.4	2.9	7.8	51.1	20.3	0.0	100.0	71.3	15.7	67.6	15.5	1.0	0.2	100.0	536	3.2	452
Rural	19.8	2.3	5.3	13.6	47.9	11.0	0.1	100.0	58.8	19.8	60.4	17.5	2.1	0.2	100.0	1,530	3.3	1,227
Region																		
Dushanbe	9.0	2.4	2.0	8.0	60.5	18.1	0.0	100.0	78.6	9.0	71.0	18.9	0.6	0.5	100.0	208	3.3	189
GBAO	7.3	3.5	4.7	6.9	68.1	9.4	0.0	100.0	77.6	7.3	70.6	21.3	0.8	0.0	100.0	25	3.3	23
Sughd	9.7	0.9	2.0	3.1	53.6	30.6	0.1	100.0	84.2	9.7	77.5	10.2	2.4	0.1	100.0	576	2.9	520
DRS	18.1	3.2	6.6	12.3	52.9	6.6	0.3	100.0	59.4	18.1	59.7	19.0	2.8	0.5	100.0	472	3.4	387
Khatlon	28.7	2.7	6.3	19.7	38.9	3.7	0.0	100.0	42.6	28.7	50.1	20.0	1.2	0.0	100.0	785	3.5	560
FTF districts	20.3	3.5	7.4	21.9	41.8	5.1	0.0	100.0	46.9	20.3	53.0	26.2	0.4	0.0	100.0	471	3.5	375
Education																		
None/primary	22.9	4.7	17.1	12.6	35.6	7.0	0.0	100.0	42.6	22.9	43.8	30.1	3.2	0.0	100.0	103	3.8	80
General basic	17.8	1.7	5.4	15.7	49.6	9.8	0.0	100.0	59.4	17.8	59.2	20.5	2.6	0.0	100.0	545	3.5	449
General secondary	19.9	2.5	4.4	12.3	47.7	13.1	0.1	100.0	60.7	19.9	62.5	16.2	1.2	0.2	100.0	934	3.3	748
Professional primary/middle	14.9	1.1	2.3	8.4	54.0	18.7	0.6	100.0	72.7	14.9	69.0	12.4	2.7	1.1	100.0	217	3.0	185
Higher	18.1	2.6	1.3	6.6	51.3	19.9	0.0	100.0	71.3	18.1	69.6	11.1	1.2	0.0	100.0	266	3.1	218
Wealth quintile																		
Lowest	34.2	3.5	8.1	15.8	35.7	2.7	0.0	100.0	38.4	34.2	43.4	19.2	3.2	0.0	100.0	389	3.5	256
Second	19.3	2.3	6.0	18.3	45.5	8.6	0.0	100.0	54.1	19.3	57.7	21.9	1.1	0.0	100.0	410	3.4	331
Middle	16.9	1.3	4.6	11.3	54.2	11.7	0.0	100.0	65.9	16.9	65.0	15.6	2.5	0.0	100.0	419	3.3	348
Fourth	12.4	2.8	2.8	8.0	55.1	18.3	0.5	100.0	73.5	12.4	70.4	15.1	1.4	0.7	100.0	434	3.2	380
Highest	12.2	1.6	2.3	7.5	51.7	24.6	0.0	100.0	76.4	12.2	73.1	13.4	1.0	0.3	100.0	414	3.1	363
Total	18.7	2.3	4.7	12.1	48.7	13.4	0.1	100.0	62.1	18.7	62.3	17.0	1.8	0.2	100.0	2,066	3.3	1,679
STILLBIRTHS																		
Total	*	*	*	*	*	*	*	100.0	*	*	*	*	*	*	100.0	11	*	11
LIVE BIRTHS AND STILLBIRTHS[2]																		
Total	18.7	2.3	4.7	12.2	48.6	13.4	0.1	100.0	62.0	18.7	62.3	16.9	1.9	0.2	100.0	2,073	3.3	1,686

Note: Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal deaths in pregnancies lasting 7 or more months. 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.

[1] Birth order refers to the order of the birth among the respondent's live births.

[2] For women who had both a live birth and a stillbirth in the 2 years preceding the survey, data are tabulated for the most recent birth only.

Table 9.3.1 Components of antenatal care among women receiving ANC

Among women age 15–49 receiving antenatal care (ANC) for the most recent live birth and/or stillbirth in the 2 years preceding the survey, percentage receiving specific antenatal services from a health care provider and percentage who became ill with COVID-19, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Among women who received antenatal care for their most recent live birth or stillbirth in the past 2 years, percentage who received specific services during ANC from a health care provider and percentage who reported that they became ill with COVID-19:								Number of women with ANC for their most recent live birth and/or stillbirth in the past 2 years
	Blood pressure measured	Urine sample taken	Blood sample taken	Baby's heartbeat checked	Counseled about maternal diet	Counseled about breastfeeding	Asked about vaginal bleeding	Became ill with COVID-19	
LIVE BIRTHS									
Age at birth									
<20	100.0	100.0	100.0	100.0	97.1	92.4	87.6	7.0	109
20–34	99.6	99.3	99.4	99.5	95.3	88.7	89.0	6.2	1,426
35–49	98.5	98.5	98.5	98.5	93.3	85.2	88.0	7.5	143
Birth order[1]									
1	100.0	99.7	99.6	99.2	95.8	89.2	88.3	6.8	443
2–3	99.4	99.1	99.4	99.5	95.7	88.7	88.8	5.9	886
4–5	99.1	99.2	99.2	100.0	93.2	87.1	89.3	6.9	323
6+	(97.1)	(97.1)	(97.1)	(97.1)	(97.1)	(93.1)	(93.1)	(6.7)	26
Residence									
Urban	99.7	98.9	99.7	99.4	96.1	90.3	91.2	9.2	452
Rural	99.4	99.4	99.3	99.5	95.0	88.0	87.9	5.3	1,227
Region									
Dushanbe	99.7	99.6	100.0	99.7	97.9	92.5	95.9	14.0	189
GBAO	100.0	100.0	100.0	100.0	97.5	57.9	92.3	2.6	23
Sughd	99.6	99.1	99.3	98.7	93.6	89.1	87.8	3.3	520
DRS	99.1	99.4	99.4	99.5	93.5	84.1	81.6	7.4	387
Khatlon	99.6	99.2	99.1	100.0	97.0	91.2	92.1	6.1	560
FTF districts	100.0	100.0	99.6	100.0	97.6	91.9	91.1	5.9	375
Education									
None/primary	100.0	94.7	96.6	100.0	87.1	83.9	80.8	8.2	80
General basic	98.7	98.9	99.1	99.4	94.5	86.0	83.7	5.6	449
General secondary	99.7	99.9	99.9	99.5	96.0	89.0	91.0	6.2	748
Professional primary/ middle	100.0	100.0	99.1	100.0	94.9	91.2	93.2	7.9	185
Higher	99.7	98.8	99.4	98.8	97.6	92.2	91.0	6.7	218
Wealth quintile									
Lowest	99.4	98.9	98.9	99.4	94.8	82.6	85.3	8.0	256
Second	99.0	98.0	98.2	98.5	95.9	89.3	86.1	3.6	331
Middle	99.7	99.7	99.7	99.7	94.6	87.8	89.6	3.9	348
Fourth	99.5	99.6	99.8	99.8	94.1	88.6	88.9	5.8	380
Highest	99.8	99.8	100.0	99.8	96.8	93.1	92.9	10.7	363
Total	99.5	99.3	99.4	99.5	95.3	88.6	88.8	6.4	1,679
STILLBIRTHS									
Total	*	*	*	*	*	*	*	*	11
LIVE BIRTHS AND STILLBIRTHS[2]									
Total	99.5	99.3	99.4	99.5	95.2	88.7	88.9	6.3	1,686

Note: The denominator for this table includes all women with a birth in the 2 years preceding the survey who received ANC for that birth. Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal deaths in pregnancies lasting 7 or more months. 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.

[1] Birth order refers to the order of the birth among the respondent's live births.

[2] For women who had both a live birth and a stillbirth in the 2 years preceding the survey, data are tabulated for the most recent birth only.

Table 9.3.2 Components of antenatal care among all women

Among all women age 15–49 with a live birth and/or stillbirth in the 2 years preceding the survey, percentage receiving specific antenatal services from a health care provider for their most recent live birth and/or stillbirth and percentage who reported becoming ill with COVID-19 during the pregnancy for their most recent live birth and/or stillbirth, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who received specific services during ANC from a health care provider for their most recent live or stillbirth:							Percentage who became ill with COVID-19 during the pregnancy for their most recent live birth or stillbirth	Number of women with a live birth and/or stillbirth in the past 2 years
	Blood pressure measured	Urine sample taken	Blood sample taken	Baby's heartbeat checked	Counseled about maternal diet	Counseled about breastfeeding	Asked about vaginal bleeding		
					LIVE BIRTHS				
Age at birth									
<20	86.1	86.1	86.1	86.1	83.6	79.5	75.4	6.4	127
20–34	80.7	80.5	80.6	80.7	77.3	71.9	72.2	5.4	1,759
35–49	78.0	78.0	78.0	78.0	73.9	67.5	69.8	7.8	181
Birth order[1]									
1	82.7	82.4	82.4	82.0	79.2	73.8	73.0	6.0	536
2–3	81.1	80.9	81.1	81.2	78.1	72.4	72.4	5.3	1,086
4–5	77.9	77.9	77.9	78.6	73.2	68.4	70.2	6.5	411
6+	(78.1)	(78.1)	(78.1)	(78.1)	(78.1)	(74.9)	(74.9)	(5.4)	32
Residence									
Urban	84.1	83.4	84.1	83.8	81.0	76.1	76.9	8.3	536
Rural	79.7	79.7	79.6	79.8	76.1	70.5	70.5	4.8	1,530
Region									
Dushanbe	90.8	90.7	91.0	90.8	89.2	84.2	87.3	13.0	208
GBAO	92.7	92.7	92.7	92.7	90.4	53.7	85.5	3.0	25
Sughd	89.9	89.4	89.7	89.1	84.5	80.4	79.3	3.9	576
DRS	81.2	81.5	81.5	81.5	76.6	68.9	66.9	6.5	472
Khatlon	71.0	70.7	70.7	71.3	69.2	65.0	65.7	4.7	785
FTF districts	79.7	79.7	79.3	79.7	77.7	73.2	72.6	5.0	471
Education									
None/primary	77.1	73.0	74.5	77.1	67.1	64.7	62.3	7.0	103
General basic	81.2	81.4	81.5	81.8	77.7	70.7	68.8	5.0	545
General secondary	79.8	80.0	80.0	79.6	76.9	71.3	72.9	5.6	934
Professional primary/ middle	85.1	85.1	84.3	85.1	80.8	77.6	79.3	7.1	217
Higher	81.6	80.9	81.4	80.9	79.9	75.5	74.5	6.0	266
Wealth quintile									
Lowest	65.4	65.1	65.1	65.4	62.4	54.4	56.2	5.7	389
Second	79.9	79.1	79.3	79.5	77.4	72.1	69.5	3.6	410
Middle	82.9	82.9	82.9	82.9	78.6	72.9	74.5	3.9	419
Fourth	87.1	87.2	87.4	87.4	82.4	77.5	77.8	5.1	434
Highest	87.6	87.6	87.8	87.6	85.0	81.7	81.6	10.3	414
Total	80.8	80.7	80.7	80.8	77.4	72.0	72.2	5.7	2,066
					STILLBIRTHS				
Total	*	*	*	*	*	*	*	*	11
					LIVE BIRTHS AND STILLBIRTHS[2]				
Total	80.9	80.7	80.8	80.9	77.4	72.1	72.3	5.7	2,073

Note: The denominator for this table includes all women with a birth in the 2 years preceding the survey, whether or not they received ANC for that birth. Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal deaths in pregnancies lasting 7 or more months. 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.
[1] Birth order refers to the order of the birth among the respondent's live births.
[2] For women who had both a live birth and a stillbirth in the 2 years preceding the survey, data are tabulated for the most recent birth only.

Table 9.4 Food/cash assistance, folic acid supplementation, and iron-containing supplementation during pregnancy

Among women age 15–49 with a live birth or stillbirth in the 2 years preceding the survey, percentages who received food or cash assistance, took folic acid during the first 3 months of pregnancy, and took any iron-containing supplements during the pregnancy of the most recent live birth or stillbirth, and percent distribution of the number of days during which women age 15–49 with a live birth or stillbirth in the 2 years preceding the survey took iron-containing supplements during the pregnancy for the most recent live birth or stillbirth, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Among women with a live birth and/or stillbirth in the past 2 years, percentage who during the pregnancy for the most recent live birth or stillbirth:			Number of days during which women with a live birth and/or stillbirth in the past 2 years took iron-containing supplements[2] during the pregnancy for the most recent live birth or stillbirth:							Number of women with a live birth and/or stillbirth in the past 2 years
	Received food or cash assistance[1]	Took folic acid tablets during the first 3 months of pregnancy	Took any iron-containing supplements[2]	None	<60	60–89	90–179	180+	Don't know	Total	
LIVE BIRTHS											
Age at birth											
<20	6.2	73.6	74.3	25.7	52.6	6.9	12.7	0.4	1.7	100.0	127
20–34	4.2	75.1	75.4	24.6	55.2	6.9	11.4	0.7	1.2	100.0	1,759
35–49	3.9	68.6	65.8	34.2	51.4	6.1	7.8	0.3	0.3	100.0	181
Birth order[3]											
1	4.2	77.6	76.7	23.3	55.6	7.0	11.5	0.8	1.9	100.0	536
2–3	4.2	74.2	76.5	23.5	55.8	7.0	12.1	0.6	1.0	100.0	1,086
4–5	4.9	72.4	68.0	32.0	52.1	6.1	8.6	0.6	0.5	100.0	411
6+	(0.0)	(54.8)	(56.7)	(43.3)	(40.9)	(8.0)	(7.7)	(0.0)	(0.0)	100.0	32
Residence											
Urban	6.6	83.8	82.7	17.3	55.8	8.1	14.5	1.7	2.6	100.0	536
Rural	3.5	71.1	71.7	28.3	54.4	6.4	10.0	0.3	0.6	100.0	1,530
Region											
Dushanbe	9.8	91.6	92.0	8.0	52.0	7.4	25.1	3.3	4.3	100.0	208
GBAO	5.1	85.7	87.6	12.4	62.0	11.0	14.6	0.0	0.0	100.0	25
Sughd	9.2	68.1	71.7	28.3	56.3	9.0	5.0	0.8	0.6	100.0	576
DRS	1.3	74.2	73.8	26.2	59.8	3.0	9.6	0.4	0.9	100.0	472
Khatlon	1.0	74.3	72.0	28.0	51.1	7.3	12.8	0.0	0.9	100.0	785
FTF districts	1.3	75.6	74.0	26.0	41.1	11.4	20.4	0.0	1.0	100.0	471
Education											
None/primary	2.5	58.5	62.2	37.8	45.3	4.1	11.2	1.5	0.0	100.0	103
General basic	4.6	69.3	69.1	30.9	53.6	4.5	9.5	0.4	1.0	100.0	545
General secondary	4.2	76.8	76.2	23.8	55.3	7.2	12.0	0.6	1.1	100.0	934
Professional primary/middle	3.6	78.1	78.6	21.4	55.1	11.3	10.2	0.8	1.3	100.0	217
Higher	5.1	79.8	81.5	18.5	58.5	7.8	12.5	0.9	1.8	100.0	266
Wealth quintile											
Lowest	0.9	62.3	61.0	39.0	50.1	2.9	7.5	0.5	0.0	100.0	389
Second	1.2	73.7	72.0	28.0	54.5	6.2	9.8	0.4	1.1	100.0	410
Middle	3.9	75.4	78.4	21.6	53.4	10.8	12.3	0.8	1.1	100.0	419
Fourth	9.1	72.3	73.8	26.2	56.1	5.4	11.1	0.3	0.9	100.0	434
Highest	5.9	87.8	86.7	13.3	59.4	8.6	14.9	1.3	2.5	100.0	414
Total	4.3	74.4	74.5	25.5	54.8	6.8	11.2	0.6	1.1	100.0	2,066
STILLBIRTHS											
Total	*	*	*	*	*	*	*	*	*	100.0	11
LIVE BIRTHS AND STILLBIRTHS[4]											
Total	4.3	74.4	74.5	25.5	54.8	6.8	11.1	0.6	1.1	100.0	2,073

Note: Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal deaths in pregnancies lasting 7 or more months. 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.

[1] Food or cash assistance programs include Adresnaya Socialnaya Pomosh.

[2] Iron tablets and syrup

[3] Birth order refers to the order of the birth among the respondent's live births.

[4] For women who had both a live birth and a stillbirth in the 2 years preceding the survey, data are tabulated for the most recent birth only.

Table 9.5 Source of iron-containing supplements

Among women age 15–49 who had a live birth and/or stillbirth in the 2 years preceding the survey and were given or bought iron-containing supplements during the pregnancy of the most recent live birth or stillbirth, percentage who obtained supplements, according to source, Tajikistan DHS 2023

	Percentage who obtained iron-containing supplements[1] from each source:		
Source	Live births	Stillbirths	Live births and stillbirths[2]
Public sector	**37.2**	*****	**37.3**
Government hospital	1.1	*	1.1
Maternity home	0.2	*	0.2
Health center (urban/rayon/rural)	31.5	*	31.5
Reproductive health center	2.6	*	2.6
Health house	0.1	*	0.1
Integrated management of childhood illness center	0.7	*	0.7
Immunoprophylaxis center	0.3	*	0.3
Healthy lifestyle center	0.7	*	0.7
Family medicine center	0.7	*	0.7
Patronage medical worker	0.8	*	0.8
Private medical sector	**67.4**	*****	**67.4**
Private hospital	0.1	*	0.1
Private clinic	0.2	*	0.2
Private doctor	0.0	*	0.0
Pharmacy	67.1	*	67.1
Other private sector	**0.6**	*****	**0.6**
Shop	0.2	*	0.2
Market	0.4	*	0.4
Other	0.0	*	0.0
Number of women	1,543	6	1,547

Note: Supplements may have been obtained from more than one source. Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal deaths in pregnancies lasting 7 or more months. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

[1] Iron tablets and syrup

[2] For women who had both a live birth and a stillbirth in the 2 years preceding the survey, data are tabulated for the most recent birth only.

Table 9.6 Preconception folic acid supplementation

Among women with a live birth and/or stillbirth in the 2 years before the survey, percentage who received folic acid tablets before the pregnancy for the most recent live birth or stillbirth, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who took folic acid tablets before the pregnancy for their most recent live birth or stillbirth	Number of women with a live birth and/or stillbirth in the past 2 years[1]
LIVE BIRTHS		
Age at birth		
<20	68.0	127
20–34	68.2	1,759
35–49	61.7	181
Birth order[2]		
1	68.6	536
2–3	69.2	1,086
4–5	63.1	411
6+	(56.5)	32
Residence		
Urban	76.3	536
Rural	64.6	1,530
Region		
Dushanbe	83.4	208
GBAO	78.4	25
Sughd	65.0	576
DRS	62.7	472
Khatlon	68.0	785
FTF districts	72.2	471
Education		
None/primary	46.9	103
General basic	62.9	545
General secondary	71.4	934
Professional primary/ middle	66.0	217
Higher	73.7	266
Wealth quintile		
Lowest	56.5	389
Second	66.2	410
Middle	68.2	419
Fourth	66.0	434
Highest	80.6	414
Total	67.6	2,066
STILLBIRTHS		
Total	*	11
LIVE BIRTHS AND STILLBIRTHS[1]		
Total	67.5	2,073

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.

[1] For women who had both a live birth and a stillbirth in the 2 years preceding the survey, data are tabulated for the most recent birth only.

[2] Birth order refers to the order of birth among the respondent's live births.

Table 9.7 COVID during pregnancy

Among all women age 15–49 with a pregnancy in the 2 years preceding the survey, percentage who reported becoming ill with COVID-19 during their most recent pregnancy, according to pregnancy outcome and background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who reported becoming ill with COVID-19 during their most recent pregnancy	Number of women with a pregnancy in the past 2 years
LIVE BIRTHS		
Age at birth		
<20	6.4	127
20–34	5.4	1,759
35–49	7.8	181
Birth order[1]		
1	6.0	536
2–3	5.3	1,086
4–5	6.5	411
6+	(5.4)	32
Residence		
Urban	8.3	536
Rural	4.8	1,530
Region		
Dushanbe	13.0	208
GBAO	3.0	25
Sughd	3.9	576
DRS	6.5	472
Khatlon	4.7	785
FTF districts	5.0	471
Education		
None/primary	7.0	103
General basic	5.0	545
General secondary	5.6	934
Professional primary/ middle	7.1	217
Higher	6.0	266
Wealth quintile		
Lowest	5.7	389
Second	3.6	410
Middle	3.9	419
Fourth	5.1	434
Highest	10.3	414
Total	5.7	2,066
ABORTIONS/MISCARRIAGES		
Total	6.7	466
STILLBIRTHS		
Total	*	11
LIVE BIRTHS AND STILLBIRTHS[2]		
Total	6.0	2,380

Note: The denominator for this table includes all women with a pregnancy in the 2 years preceding the survey, whether or not they received ANC for that birth. Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal deaths in pregnancies lasting 7 or more months. 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.

[1] Birth order refers to the order of the birth among the respondent's live births.

[2] For women who had both a live birth and a stillbirth in the 2 years preceding the survey, data are tabulated for the most recent birth only.

Table 9.8 Place of delivery

Percent distribution of live births and/or stillbirths in the 2 years preceding the survey by place of delivery and percentage delivered in a health facility, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Health facility		Home	Other	Total	Percentage delivered in a health facility	Number of births
	Public sector	Private sector					
			LIVE BIRTHS				
Mother's age at birth							
<20	96.5	0.0	3.5	0.0	100.0	96.5	151
20–34	94.7	0.2	5.0	0.1	100.0	94.9	1,875
35–49	91.4	0.4	8.2	0.0	100.0	91.8	186
Birth order[1]							
1	97.0	0.1	2.9	0.0	100.0	97.1	608
2–3	94.9	0.3	4.6	0.1	100.0	95.2	1,145
4–5	91.1	0.0	8.9	0.0	100.0	91.1	428
6+	(80.1)	(0.0)	(19.9)	(0.0)	100.0	(80.1)	32
Antenatal care visits[2]							
None	89.7	0.0	10.3	0.0	100.0	89.7	387
1–3	92.9	0.3	6.9	0.0	100.0	93.1	394
4+	96.2	0.2	3.5	0.1	100.0	96.3	1,282
Don't know/missing	*	*	*	*	100.0	*	2
Residence							
Urban	98.0	0.2	1.8	0.0	100.0	98.2	578
Rural	93.3	0.2	6.4	0.1	100.0	93.5	1,635
Region							
Dushanbe	98.6	0.0	1.4	0.0	100.0	98.6	222
GBAO	87.5	5.8	6.6	0.0	100.0	93.4	27
Sughd	98.4	0.0	1.4	0.2	100.0	98.4	620
DRS	87.0	0.4	12.6	0.0	100.0	87.4	501
Khatlon	95.4	0.0	4.6	0.0	100.0	95.4	844
FTF districts	98.1	0.0	1.9	0.0	100.0	98.1	507
Mother's education							
None/primary	86.2	0.0	13.8	0.0	100.0	86.2	109
General basic	90.3	0.4	9.3	0.0	100.0	90.7	572
General secondary	96.2	0.0	3.6	0.1	100.0	96.2	1,014
Professional primary/ middle	97.4	0.1	2.5	0.0	100.0	97.5	233
Higher	98.1	0.4	1.5	0.0	100.0	98.5	285
Wealth quintile							
Lowest	86.0	0.3	13.4	0.4	100.0	86.3	410
Second	94.2	0.4	5.4	0.0	100.0	94.6	425
Middle	96.5	0.0	3.5	0.0	100.0	96.5	460
Fourth	97.0	0.0	3.0	0.0	100.0	97.0	474
Highest	98.3	0.2	1.5	0.0	100.0	98.5	443
Total	94.6	0.2	5.2	0.1	100.0	94.7	2,213
			STILLBIRTHS				
Total	*	*	*	*	100.0	*	11
			LIVE BIRTHS AND STILLBIRTHS				
Total	94.6	0.2	5.2	0.1	100.0	94.8	2,223

Note: Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal deaths in pregnancies lasting 7 or more months. Total includes 2 births for which the number of antenatal care visits was not known or missing. 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.

[1] Birth order refers to the order of the birth among the respondent's live births.

[2] Includes only the most recent birth in the 2 years preceding the survey

Table 9.9 Cesarean section

Percentage of live births and/or stillbirths in the 2 years preceding the survey delivered via cesarean section (C-section), according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage delivered via C-section	Number of births
LIVE BIRTHS		
Mother's age at birth		
<20	4.2	151
20–34	10.5	1,875
35–49	14.4	186
Birth order[1]		
1	8.9	608
2–3	10.8	1,145
4–5	11.5	428
6+	(12.2)	32
Antenatal care visits[2]		
None	7.6	387
1–3	12.9	394
4+	10.7	1,282
Don't know/missing	*	2
Place of delivery		
Health facility	11.0	2,096
Public sector	11.0	2,093
Private sector	*	4
Residence		
Urban	12.5	578
Rural	9.6	1,635
Region		
Dushanbe	9.2	222
GBAO	10.6	27
Sughd	9.2	620
DRS	9.9	501
Khatlon	11.9	844
FTF districts	10.6	507
Mother's education		
None/primary	9.3	109
General basic	12.8	572
General secondary	8.5	1,014
Professional primary/ middle	12.0	233
Higher	11.5	285
Wealth quintile		
Lowest	10.0	410
Second	7.9	425
Middle	12.1	460
Fourth	9.4	474
Highest	12.5	443
Total	10.4	2,213
STILLBIRTHS		
Total	*	11
LIVE BIRTHS AND STILLBIRTHS		
Total	10.4	2,223

Note: The question on C-section is asked only of women who delivered in a health facility. In this table, it is assumed that women who did not give birth in a health facility did not receive a C-section. Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal deaths in pregnancies lasting 7 or more months. Total includes 2 births for which the number of antenatal care visits was not known or missing. 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.

[1] Birth order refers to the order of the birth among the respondent's live births.

[2] Includes only the most recent birth in the 2 years preceding the survey

Table 9.10 Assistance during delivery

Percent distribution of live births and/or stillbirths in the 2 years preceding the survey by person providing assistance during delivery and percentage assisted by a skilled provider, and among most recent live births in the 2 years preceding the survey, percentage with skin-to-skin contact immediately after birth, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Person providing assistance during delivery										Among most recent live births	
	Family doctor	Obstetrician/ gynecologist	Other doctor	Nurse/ midwife	Traditional birth attendant	Relative/ other	No one	Total	Percentage delivered by a skilled provider[1]	Number of live births and/or stillbirths	Percentage with skin-to-skin contact immediately after birth	Number of live births
LIVE BIRTHS												
Mother's age at birth												
<20	3.3	88.1	4.0	3.8	0.7	0.0	0.0	100.0	99.3	151	70.1	127
20–34	2.7	85.8	2.6	6.3	1.2	1.3	0.0	100.0	97.4	1,875	68.4	1,759
35–49	3.7	79.7	2.7	12.2	0.9	0.0	0.8	100.0	98.3	186	65.8	181
Birth order[2]												
1	3.7	87.8	2.5	4.6	1.0	0.4	0.0	100.0	98.6	608	67.0	536
2–3	2.6	86.2	2.8	6.1	1.1	1.1	0.1	100.0	97.7	1,145	69.6	1,086
4–5	2.3	81.3	2.3	10.5	1.4	2.3	0.0	100.0	96.3	428	66.4	411
6+	(0.0)	(71.1)	(9.9)	(12.3)	(3.5)	(3.3)	(0.0)	100.0	(93.3)	32	(68.1)	32
Antenatal care visits[3]												
None	2.1	85.1	0.5	7.0	3.4	1.8	0.0	100.0	94.8	387	65.9	387
1–3	3.1	81.2	4.9	7.4	1.2	1.7	0.4	100.0	96.8	394	61.0	394
4+	2.5	87.1	2.6	6.5	0.6	0.8	0.0	100.0	98.6	1,282	71.3	1,282
Don't know/missing	*	*	*	*	*	*	*	100.0	*	2	*	2
Place of delivery												
Health facility	3.0	88.7	2.7	5.6	0.0	0.0	0.0	100.0	100.0	2,096	68.7	1,952
Public sector	2.9	88.8	2.7	5.6	0.0	0.0	0.0	100.0	100.0	2,093	68.7	1,949
Private sector	*	*	*	*	*	*	*	100.0	*	4	*	4
Elsewhere	0.0	27.7	2.6	24.4	22.4	21.7	1.3	100.0	54.7	117	60.5	114
Residence												
Urban	3.4	88.1	2.0	6.0	0.5	0.0	0.0	100.0	99.5	578	65.5	536
Rural	2.6	84.5	3.0	6.8	1.4	1.5	0.1	100.0	96.9	1,635	69.3	1,530
Region												
Dushanbe	4.7	85.1	1.6	8.0	0.6	0.0	0.0	100.0	99.4	222	64.3	208
GBAO	0.6	79.6	5.3	14.5	0.0	0.0	0.0	100.0	100.0	27	79.7	25
Sughd	2.6	93.3	1.0	2.2	0.2	0.5	0.2	100.0	99.1	620	69.8	576
DRS	3.3	73.7	8.8	7.7	2.9	3.6	0.0	100.0	93.4	501	59.1	472
Khatlon	2.3	87.0	0.6	8.7	1.0	0.5	0.0	100.0	98.5	844	73.4	785
FTF districts	2.2	85.1	0.4	11.1	0.8	0.5	0.0	100.0	98.8	507	72.4	471
Mother's education												
None/primary	4.7	72.4	5.0	13.1	1.7	3.0	0.0	100.0	95.3	109	67.0	103
General basic	3.5	78.9	5.3	7.7	1.9	2.3	0.3	100.0	95.5	572	64.2	545
General secondary	2.3	88.2	1.6	6.0	1.0	0.9	0.0	100.0	98.1	1,014	69.8	934
Professional primary/ middle	2.0	92.7	0.9	3.8	0.7	0.0	0.0	100.0	99.3	233	72.7	217
Higher	3.1	87.8	2.0	6.5	0.6	0.0	0.0	100.0	99.4	285	68.4	266
Wealth quintile												
Lowest	0.8	80.1	1.6	10.3	4.1	3.0	0.0	100.0	92.9	410	66.4	389
Second	2.6	82.8	1.8	10.5	0.5	1.4	0.3	100.0	97.7	425	68.8	410
Middle	3.8	85.8	2.9	5.9	0.8	0.8	0.0	100.0	98.4	460	75.3	419
Fourth	2.8	89.0	5.4	2.0	0.2	0.7	0.0	100.0	99.1	474	64.1	434
Highest	3.9	88.7	1.7	5.2	0.5	0.0	0.0	100.0	99.5	443	66.8	414
Total	2.8	85.5	2.7	6.6	1.2	1.1	0.1	100.0	97.6	2,213	68.3	2,066
STILLBIRTHS												
Total	*	*	*	*	*	*	*	100.0	*	11	na	na
LIVE BIRTHS AND STILLBIRTHS												
Total	2.8	85.5	2.7	6.6	1.2	1.1	0.1	100.0	97.6	2,223	na	na

Note: If the respondent mentioned more than one person attending during delivery, only the most qualified person is considered in this tabulation. Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal deaths in pregnancies lasting 7 or more months. Total includes 2 births for which the number of antenatal care visits was not known or missing. 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.
na = not applicable
[1] Skilled provider includes a family doctor, obstetrician/gynecologist, other doctor, nurse, male nurse, and midwife.
[2] Birth order refers to the order of the birth among the respondent's live births.
[3] Includes only the most recent birth in the 2 years preceding the survey

Table 9.11 Duration of stay in health facility after birth

Among women with a live birth and/or stillbirth in the 2 years preceding the survey who delivered their most recent live birth in a health facility, percent distribution by duration of stay in the health facility following their most recent live birth, according to type of delivery, Tajikistan DHS 2023

Type of delivery	<6 hours	6–11 hours	12–23 hours	1–2 days	3+ days	Total	Number of women
LIVE BIRTHS							
Vaginal birth	2.3	0.4	0.1	28.9	68.3	100.0	1,735
Cesarean section	2.9	0.0	0.0	16.9	80.1	100.0	218
STILLBIRTHS							
Vaginal birth	*	*	*	*	*	100.0	10
Cesarean section	*	*	*	*	*	100.0	1
LIVE BIRTHS AND STILLBIRTHS[1]							
Vaginal birth	2.3	0.4	0.1	28.9	68.3	100.0	1,741
Cesarean section	2.9	0.0	0.0	16.9	80.2	100.0	218

Note: Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal deaths in pregnancies lasting 7 or more months. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

[1] For women who had both a live birth and a stillbirth in the 2 years preceding the survey, data are tabulated for the most recent birth only.

Table 9.12 Timing of first postnatal check for the mother

Among women age 15–49 with a live birth and/or stillbirth in the 2 years preceding the survey, percent distribution of the mother's first postnatal check for the most recent live birth or stillbirth by time after delivery and percentage of women with a live birth or stillbirth during the 2 years preceding the survey who received a postnatal check in the first 2 days after giving birth, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Time after delivery of mother's first postnatal check[1]								Percentage of women with a postnatal check during the first 2 days after birth[1]	Number of women
	Less than 4 hours	4–23 hours	1–2 days	3–6 days	7–41 days	Don't know/ missing	No postnatal check[2]	Total		
LIVE BIRTHS										
Age at birth										
<20	78.5	7.3	10.1	1.8	0.0	0.5	1.8	100.0	95.9	127
20–34	74.3	5.9	8.6	3.1	1.5	0.8	5.8	100.0	88.8	1,759
35–49	76.8	4.0	7.7	2.3	1.3	2.0	5.9	100.0	88.5	181
Birth order[3]										
1	76.6	6.3	9.5	2.2	1.0	0.4	4.0	100.0	92.4	536
2–3	76.1	5.6	7.9	3.0	1.4	1.1	4.8	100.0	89.7	1,086
4–5	69.7	5.9	9.6	3.9	1.7	1.0	8.1	100.0	85.2	411
6+	(65.7)	(2.4)	(6.4)	(0.0)	(0.0)	(0.0)	(25.5)	100.0	(74.5)	32
Place of delivery										
Health facility	77.0	5.8	8.4	2.8	1.2	0.9	3.8	100.0	91.3	1,952
Elsewhere	37.1	5.4	12.0	5.1	4.2	0.6	35.7	100.0	54.4	114
Residence										
Urban	70.3	6.5	10.9	6.0	2.6	0.8	3.0	100.0	87.6	536
Rural	76.4	5.6	7.9	1.9	0.9	0.9	6.5	100.0	89.8	1,530
Region										
Dushanbe	58.4	11.4	12.6	10.1	3.8	1.0	2.7	100.0	82.3	208
GBAO	79.8	6.4	3.3	3.4	2.0	0.0	5.1	100.0	89.5	25
Sughd	77.7	3.3	13.0	2.3	1.9	0.0	1.6	100.0	94.1	576
DRS	71.2	6.1	11.3	2.5	1.2	0.7	7.1	100.0	88.6	472
Khatlon	79.0	5.9	3.0	1.7	0.4	1.6	8.4	100.0	87.9	785
FTF districts	76.7	7.2	2.4	1.4	0.3	2.6	9.3	100.0	86.4	471
Education										
None/primary	68.6	5.2	15.1	2.0	1.6	0.0	7.6	100.0	88.9	103
General basic	70.6	5.8	9.9	3.4	1.3	0.7	8.4	100.0	86.3	545
General secondary	76.8	6.4	6.7	2.0	1.4	1.3	5.3	100.0	89.9	934
Professional primary/ middle	76.9	5.1	10.0	5.0	0.6	0.6	1.9	100.0	91.9	217
Higher	77.1	4.5	9.4	3.8	1.8	0.2	3.3	100.0	90.9	266
Wealth quintile										
Lowest	74.6	5.7	5.1	1.8	1.7	0.6	10.5	100.0	85.4	389
Second	78.3	3.7	8.2	1.5	0.0	1.8	6.5	100.0	90.2	410
Middle	78.9	5.3	8.5	1.6	0.8	0.9	4.1	100.0	92.6	419
Fourth	74.7	6.0	9.2	2.8	2.4	0.4	4.5	100.0	89.9	434
Highest	67.5	8.3	11.9	7.0	1.8	0.7	2.7	100.0	87.8	414
Total	74.8	5.8	8.6	2.9	1.4	0.9	5.6	100.0	89.2	2,066
STILLBIRTHS										
Total	*	*	*	*	*	*	*	100.0	*	11
LIVE BIRTHS AND STILLBIRTHS[4]										
Total	74.9	5.8	8.6	2.9	1.4	0.9	5.6	100.0	89.3	2,073

Note: Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal deaths in pregnancies lasting 7 or more months. 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.

[1] Includes women who received a check from a family doctor, obstetrician/gynecologist, other doctor, nurse, male nurse, midwife, or traditional birth attendant

[2] Includes women who received a check after 41 days

[3] Birth order refers to the order of the birth among the respondent's live births.

[4] For women who had both a live birth and a stillbirth in the 2 years preceding the survey, data are tabulated for the most recent birth only.

Table 9.13 Type of provider of first postnatal check for the mother

Among women age 15–49 with a live birth and/or stillbirth in the 2 years preceding the survey, percent distribution by type of provider for the mother's first postnatal health check during the 2 days after the most recent live birth, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Type of health provider of mother's first postnatal check					No postnatal check during the first 2 days after birth	Total	Number of women
	Family doctor	Obstetrician/ gynecologist	Other doctor	Nurse/ midwife	Traditional birth attendant			
				LIVE BIRTHS				
Age at birth								
<20	3.6	56.5	13.0	22.8	0.0	4.1	100.0	127
20–34	1.9	56.0	12.9	17.7	0.4	11.2	100.0	1,759
35–49	0.6	54.8	13.3	18.8	1.1	11.5	100.0	181
Birth order[1]								
1	2.4	59.1	12.1	18.7	0.0	7.6	100.0	536
2–3	2.1	55.5	13.3	18.1	0.6	10.3	100.0	1,086
4–5	0.9	53.9	12.8	17.2	0.5	14.8	100.0	411
6+	(0.0)	(44.6)	(14.1)	(15.8)	(0.0)	(25.5)	100.0	32
Place of delivery								
Health facility	1.9	57.6	13.5	18.2	0.1	8.7	100.0	1,952
Elsewhere	0.9	27.1	3.3	16.3	6.8	45.6	100.0	114
Residence								
Urban	2.0	56.5	15.2	13.8	0.0	12.4	100.0	536
Rural	1.8	55.7	12.1	19.6	0.6	10.2	100.0	1,530
Region								
Dushanbe	4.4	52.3	20.5	5.2	0.0	17.7	100.0	208
GBAO	0.0	64.9	19.6	4.9	0.0	10.5	100.0	25
Sughd	2.2	60.2	11.5	19.9	0.2	5.9	100.0	576
DRS	1.6	51.3	25.0	9.1	1.6	11.4	100.0	472
Khatlon	1.2	56.3	4.5	25.9	0.0	12.1	100.0	785
FTF districts	1.1	48.5	4.6	32.1	0.0	13.6	100.0	471
Education								
None/primary	2.8	43.0	11.0	32.0	0.0	11.1	100.0	103
General basic	3.0	51.0	17.8	13.8	0.6	13.7	100.0	545
General secondary	1.4	57.6	9.4	20.9	0.6	10.1	100.0	934
Professional primary/ middle	1.1	69.0	9.5	12.3	0.0	8.1	100.0	217
Higher	1.6	54.6	18.8	15.9	0.0	9.1	100.0	266
Wealth quintile								
Lowest	0.5	58.2	6.9	19.0	0.8	14.6	100.0	389
Second	1.4	53.5	12.0	22.7	0.5	9.8	100.0	410
Middle	2.5	57.5	11.5	20.6	0.5	7.4	100.0	419
Fourth	2.5	52.0	18.7	16.4	0.2	10.1	100.0	434
Highest	2.2	58.8	14.9	11.8	0.0	12.2	100.0	414
Total	1.9	55.9	12.9	18.1	0.4	10.8	100.0	2,066
				STILLBIRTHS				
Total	*	*	*	*	*	*	100.0	11
				LIVE BIRTHS AND STILLBIRTHS[2]				
Total	1.9	56.1	12.8	18.1	0.4	10.7	100.0	2,073

Note: Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal deaths in pregnancies lasting 7 or more months. 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.

[1] Birth order refers to the order of the birth among the respondent's live births.

[2] For women who had both a live birth and a stillbirth in the 2 years preceding the survey, data are tabulated for the most recent birth only.

Table 9.14 Content of postnatal care for the mother

Among women age 15–49 with a live birth and/or stillbirth in the 2 years preceding the survey, percentage for whom selected checks were performed during the first 2 days after the most recent birth, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage for whom during the first 2 days after the most recent birth, any health care provider:			Percentage with all three checks performed in the first 2 days after birth	Number of women
	Measured blood pressure	Discussed vaginal bleeding	Discussed family planning		
			LIVE BIRTHS		
Age at birth					
<20	92.0	90.1	81.3	81.3	127
20–34	92.6	89.7	80.6	78.9	1,759
35–49	91.6	89.1	75.0	74.1	181
Birth order[1]					
1	92.1	90.2	83.5	80.8	536
2–3	94.0	91.2	80.9	79.7	1,086
4–5	90.6	86.3	74.8	74.0	411
6+	(70.7)	(70.7)	(67.5)	(67.5)	32
Place of delivery					
Health facility	94.3	91.4	82.3	80.8	1,952
Public sector	94.3	91.5	82.5	80.9	1,949
Private sector	*	*	*	*	4
Elsewhere	61.2	59.0	42.6	42.6	114
Residence					
Urban	94.3	91.1	84.2	82.0	536
Rural	91.8	89.1	78.8	77.5	1,530
Region					
Dushanbe	98.3	96.6	90.9	89.9	208
GBAO	90.0	86.1	66.0	64.5	25
Sughd	95.6	92.0	79.7	77.4	576
DRS	83.1	79.4	65.1	64.5	472
Khatlon	94.4	92.3	87.1	85.6	785
FTF districts	95.2	92.8	87.7	85.9	471
Mother's education					
None/primary	91.0	86.0	76.6	76.6	103
General basic	87.3	84.3	75.2	73.9	545
General secondary	93.6	91.1	80.7	79.4	934
Professional primary/ middle	97.5	93.9	87.1	86.2	217
Higher	95.5	93.7	84.0	80.5	266
Wealth quintile					
Lowest	85.7	83.0	72.4	71.6	389
Second	90.1	86.1	76.3	75.1	410
Middle	93.8	91.2	78.5	76.8	419
Fourth	96.4	92.8	84.6	82.8	434
Highest	95.6	94.7	88.3	86.4	414
Total	92.5	89.6	80.2	78.7	2,066
			STILLBIRTHS		
Total	*	*	*	*	11
			LIVE BIRTHS AND STILLBIRTHS[2]		
Total	92.5	89.7	80.2	78.7	2,073

Note: Stillbirths are fetal deaths in pregnancies lasting 28 or more weeks. When pregnancy duration is reported in months, stillbirths are fetal deaths in pregnancies lasting 7 or more months. 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.

[1] Birth order refers to the order of the birth among the respondent's live births.

[2] For women who had both a live birth and a stillbirth in the 2 years preceding the survey, data are tabulated for the most recent birth only.

Table 9.15 Timing of first postnatal check for the newborn

Percent distribution of most recent live births in the 2 years preceding the survey by time after birth of first postnatal check, and percentage of births with a postnatal check during the first 2 days after birth, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Time after delivery of newborn's first postnatal check[1]						No postnatal check[2]	Total	Percentage of births with a postnatal check during the first 2 days after birth[1]	Number of births
	Less than 1 hour	1–3 hours	4–23 hours	1–2 days	3–6 days	Don't know				
Mother's age at birth										
<20	11.6	60.4	6.9	6.9	1.3	2.5	10.3	100.0	85.9	127
20–34	10.2	61.6	5.7	7.6	4.6	1.2	9.1	100.0	85.1	1,759
35–49	10.5	59.4	7.9	6.5	4.8	2.1	8.8	100.0	84.3	181
Birth order[3]										
1	11.1	58.8	5.9	8.3	4.0	1.5	10.3	100.0	84.1	536
2–3	9.4	64.2	5.3	7.0	4.3	1.5	8.3	100.0	85.9	1,086
4–5	12.1	57.1	7.9	7.8	5.4	0.9	8.7	100.0	85.0	411
6+	(3.2)	(58.9)	(7.3)	(5.6)	(2.3)	(2.3)	(20.5)	100.0	(74.9)	32
Place of delivery										
Health facility	10.6	63.3	5.9	7.0	4.3	1.5	7.5	100.0	86.7	1,952
Elsewhere	5.3	27.9	7.9	15.6	7.0	0.0	36.2	100.0	56.8	114
Residence										
Urban	7.9	57.9	5.7	8.9	9.1	1.1	9.4	100.0	80.4	536
Rural	11.2	62.5	6.1	7.0	2.8	1.5	9.0	100.0	86.7	1,530
Region										
Dushanbe	7.6	47.2	8.4	11.1	14.8	1.6	9.3	100.0	74.3	208
GBAO	4.5	73.4	4.1	6.8	6.1	0.8	4.4	100.0	88.8	25
Sughd	15.7	56.4	3.5	8.0	4.5	0.6	11.4	100.0	83.5	576
DRS	11.6	55.0	6.8	12.5	3.8	1.3	8.9	100.0	86.0	472
Khatlon	6.5	72.1	6.7	3.2	1.9	2.0	7.7	100.0	88.4	785
FTF districts	4.0	74.2	6.9	2.6	0.4	3.4	8.5	100.0	87.7	471
Mother's education										
None/primary	12.7	50.4	8.7	13.6	2.3	0.0	12.4	100.0	85.3	103
General basic	11.8	57.4	5.7	8.6	5.1	1.3	10.3	100.0	83.4	545
General secondary	7.8	65.5	7.0	5.0	3.3	1.9	9.5	100.0	85.3	934
Professional primary/ middle	10.2	62.7	3.8	10.1	6.4	1.1	5.7	100.0	86.8	217
Higher	15.1	58.0	3.7	9.7	6.0	0.4	7.1	100.0	86.5	266
Wealth quintile										
Lowest	12.7	59.0	7.4	5.3	2.3	0.7	12.7	100.0	84.3	389
Second	6.6	68.9	4.5	8.4	2.1	2.1	7.4	100.0	88.4	410
Middle	7.8	68.2	6.8	6.5	3.7	1.2	5.7	100.0	89.4	419
Fourth	11.8	58.3	5.2	7.5	3.1	1.6	12.5	100.0	82.8	434
Highest	12.6	52.1	6.2	9.7	10.7	1.4	7.4	100.0	80.6	414
Total	10.3	61.3	6.0	7.5	4.4	1.4	9.1	100.0	85.1	2,066

Note: Figures in parentheses are based on 25–49 unweighted cases.
[1] Includes newborns who received a check from a family doctor, obstetrician/gynecologist, other doctor, nurse, male nurse, midwife, or traditional birth attendant
[2] Includes newborns who received a check after the first week of life
[3] Birth order refers to the order of the birth among the respondent's live births.

Table 9.16 Type of provider of first postnatal check for the newborn

Percent distribution of most recent live births in the 2 years preceding the survey by type of provider of the newborn's first postnatal health check during the 2 days after the most recent live birth, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Type of health provider of newborn's first postnatal check					No postnatal check during the first 2 days after birth	Total	Number of births
	Family doctor	Obstetrician/ gynecologist	Other doctor	Nurse/midwife	Traditional birth attendant			
Mother's age at birth								
<20	2.8	6.2	61.0	15.9	0.0	14.1	100.0	127
20–34	2.1	8.6	57.3	16.6	0.5	15.0	100.0	1,759
35–49	2.2	12.9	53.5	14.3	1.5	15.7	100.0	181
Birth order[1]								
1	2.5	7.1	59.6	14.6	0.2	15.9	100.0	536
2–3	2.4	8.5	56.3	18.0	0.6	14.1	100.0	1,086
4–5	1.1	12.0	56.5	14.4	0.6	15.4	100.0	411
6+	(0.0)	(7.4)	(54.1)	(13.5)	(0.0)	(25.1)	100.0	32
Place of delivery								
Health facility	2.1	8.6	59.5	16.3	0.1	13.4	100.0	1,952
Elsewhere	2.3	13.3	17.4	16.8	7.0	43.2	100.0	114
Residence								
Urban	2.5	9.5	57.1	11.3	0.0	19.6	100.0	536
Rural	2.0	8.6	57.2	18.1	0.7	13.4	100.0	1,530
Region								
Dushanbe	4.7	9.9	53.6	6.1	0.0	25.7	100.0	208
GBAO	2.6	2.2	79.4	4.5	0.0	11.2	100.0	25
Sughd	1.7	7.7	53.4	20.1	0.2	16.9	100.0	576
DRS	1.8	16.3	58.5	7.7	1.6	14.0	100.0	472
Khatlon	1.9	5.1	59.4	21.9	0.2	11.6	100.0	785
FTF districts	1.4	2.7	55.8	27.8	0.0	12.3	100.0	471
Mother's education								
None/primary	2.3	12.0	49.6	21.4	0.0	14.7	100.0	103
General basic	2.7	11.2	56.3	12.2	0.8	16.9	100.0	545
General secondary	1.4	7.2	55.9	20.2	0.5	14.8	100.0	934
Professional primary/ middle	2.1	7.9	64.4	11.7	0.7	13.2	100.0	217
Higher	3.4	9.4	60.6	13.1	0.0	13.5	100.0	266
Wealth quintile								
Lowest	2.0	13.3	52.5	15.3	1.1	15.7	100.0	389
Second	2.2	6.3	58.7	20.4	0.7	11.6	100.0	410
Middle	1.3	7.7	60.2	19.6	0.5	10.6	100.0	419
Fourth	1.9	8.3	55.2	16.6	0.2	17.7	100.0	434
Highest	3.0	8.9	59.0	9.7	0.0	19.4	100.0	414
Total	2.1	8.8	57.2	16.4	0.5	15.0	100.0	2,066

Note: Figures in parentheses are based on 25–49 unweighted cases.
[1] Birth order refers to the order of the birth among the respondent's live births.

Table 9.17 Content of postnatal care for newborns

Among most recent live births in the 2 years preceding the survey, percentage for whom selected functions were performed during the first 2 days after birth and percentage with five signal functions performed during the first 2 days after birth, according to background characteristics, Tajikistan DHS 2023

	Percentage of most recent live births for whom a health care provider performed the selected functions during the first 2 days after birth:								
Background characteristic	Cord examined	Temperature measured	Mother told how to recognize if the baby needs immediate medical attention	Mother counseled on breastfeeding	Mother observed breastfeeding	Mother both counseled on breastfeeding and observed breastfeeding	Weighed[1]	Percentage with five[2] signal functions performed during the first 2 days after birth	Number of births
Mother's age at birth									
<20	92.6	92.6	81.0	90.7	84.6	84.6	100.0	81.0	127
20–34	94.2	94.3	80.9	90.1	85.0	83.8	95.4	76.7	1,759
35–49	92.5	93.4	77.5	88.4	84.4	82.1	94.2	74.1	181
Birth order[3]									
1	93.6	93.2	79.9	90.3	87.5	86.3	98.6	78.4	536
2–3	95.6	95.9	82.0	91.6	85.6	84.7	96.0	78.0	1,086
4–5	91.1	91.9	79.4	86.3	81.3	79.5	91.2	72.5	411
6+	(81.4)	(77.8)	(64.5)	(75.8)	(62.2)	(62.2)	(90.0)	(61.3)	32
Place of delivery									
Health facility	95.8	95.9	82.0	91.6	86.3	85.2	98.0	79.1	1,952
Elsewhere	61.8	63.8	56.6	61.9	61.4	58.1	53.6	35.3	114
Residence									
Urban	96.0	96.7	77.9	93.9	90.1	89.2	99.0	77.0	536
Rural	93.2	93.3	81.6	88.6	83.1	81.8	94.4	76.6	1,530
Region									
Dushanbe	98.4	98.4	72.7	98.6	96.8	96.2	99.2	72.5	208
GBAO	96.9	96.9	79.3	88.6	93.3	87.1	95.2	72.9	25
Sughd	96.8	97.1	85.3	92.4	84.2	83.7	97.5	82.3	576
DRS	83.7	84.1	72.6	79.0	74.8	73.4	92.2	68.3	472
Khatlon	96.8	96.8	84.2	92.6	88.1	86.6	95.3	78.9	785
FTF districts	97.1	97.5	85.8	93.4	86.3	84.9	94.0	79.1	471
Mother's education									
None/primary	83.9	87.1	70.5	80.0	74.5	72.4	88.1	65.1	103
General basic	90.0	90.1	76.4	85.5	80.1	79.0	92.1	70.5	545
General secondary	95.1	95.2	82.4	90.9	85.0	83.6	96.9	78.6	934
Professional primary/ middle	97.7	97.4	87.7	94.9	93.1	92.2	98.7	85.5	217
Higher	98.7	98.7	81.4	96.0	92.0	91.4	98.5	80.3	266
Wealth quintile									
Lowest	87.5	88.0	77.6	82.1	78.3	76.7	89.5	70.0	389
Second	91.7	92.0	79.5	86.7	81.3	79.2	94.9	75.8	410
Middle	95.3	95.4	81.1	91.1	82.6	81.7	97.4	78.0	419
Fourth	97.4	97.4	84.6	93.4	89.0	88.3	96.4	79.9	434
Highest	97.3	97.4	80.0	96.0	92.9	92.1	99.5	79.2	414
Total	94.0	94.1	80.6	90.0	84.9	83.7	95.6	76.7	2,066

Note: Figures in parentheses are based on 25–49 unweighted cases.
[1] Captures newborns who were weighed "at birth." May exclude some newborns who were weighed during the 2 days after birth.
[2] The functions are (1) examining the umbilical cord, (2) measuring temperature, (3) observing and/or counseling on breastfeeding, (4) telling the mother about danger signs/how to recognize if the baby needs immediate attention, and (5) weighing. Corresponds to the definition of the five signal functions to assess the content of postnatal care for newborns described in Moran et al. 2013.
[3] Birth order refers to the order of the birth among the respondent's live births.

Table 9.18 Postnatal checks on mother and newborn

Among most recent live births in the 2 years preceding the survey, percentage for which mothers age 15–49 received a postnatal check during the first 2 days after birth, percentage for which newborns received a postnatal check during the first 2 days after birth, percentage for which both mothers and newborns received a postnatal check, and percentage for which neither mothers nor newborns received a postnatal check, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who received a postnatal check[1] during the first 2 days after birth				Number of births
	Mother	Newborn	Both mother and newborn	Neither mother nor newborn received a postnatal check[2]	
Mother's age at birth					
<20	95.9	85.9	84.5	2.7	127
20–34	88.8	85.0	81.4	7.5	1,759
35–49	88.5	84.3	82.7	9.9	181
Birth order[3]					
1	92.4	84.1	82.4	5.9	536
2–3	89.7	85.9	82.5	7.0	1,086
4–5	85.2	84.6	79.5	9.7	411
6+	(74.5)	(74.9)	(68.1)	(18.7)	32
Place of delivery					
Health facility	91.3	86.6	83.7	5.8	1,952
Public sector	91.2	86.6	83.7	5.8	1,949
Private sector	*	*	*	*	4
Elsewhere	54.4	56.8	46.4	35.2	114
Residence					
Urban	87.6	80.4	77.4	9.5	536
Rural	89.8	86.6	83.2	6.7	1,530
Region					
Dushanbe	82.3	74.3	70.2	13.6	208
GBAO	89.5	88.8	84.6	6.4	25
Sughd	94.1	83.1	80.6	3.4	576
DRS	88.6	86.0	83.0	8.4	472
Khatlon	87.9	88.4	84.6	8.3	785
FTF districts	86.4	87.7	84.2	10.1	471
Mother's education					
None/primary	88.9	85.3	84.8	10.6	103
General basic	86.3	83.1	78.7	9.3	545
General secondary	89.9	85.2	82.0	6.9	934
Professional primary/ middle	91.9	86.8	84.5	5.8	217
Higher	90.9	86.5	82.9	5.5	266
Wealth quintile					
Lowest	85.4	84.3	81.5	11.8	389
Second	90.2	88.4	85.0	6.5	410
Middle	92.6	89.4	86.5	4.5	419
Fourth	89.9	82.3	77.8	5.6	434
Highest	87.8	80.6	77.6	9.3	414
Total	89.2	85.0	81.7	7.4	2,066

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.

[1] Includes checks from a family doctor, obstetrician/gynecologist, other doctor, nurse, male nurse, midwife, or traditional birth attendant

[2] Includes checks after the first 2 days or by other persons

[3] Birth order refers to the order of the birth among the respondent's live births.

Table 9.19 Examinations for breast and cervical cancer

Percentage of women age 15–49 ever examined by a doctor or health care worker for breast cancer and percentage ever tested by a doctor or health care worker for cervical cancer, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage examined for breast cancer	Percentage tested for cervical cancer	Number of women
Age			
15–29	3.7	5.6	4,885
30–49	8.8	12.9	4,994
30–34	8.1	11.0	1,545
35–39	7.3	13.1	1,435
40–44	11.4	15.3	1,096
45–49	9.4	12.9	917
30–44	8.7	12.9	4,077
40–49	10.5	14.2	2,014
Number of living children			
0	1.5	2.8	2,732
1–2	8.4	10.1	2,874
3–4	8.5	12.9	3,678
5+	4.8	12.4	595
Marital status			
Never married	0.2	0.5	1,964
Married or living together	7.8	11.4	7,392
Divorced/separated/ widowed	8.4	11.9	522
Employment (past 12 months)			
Not employed	5.3	7.9	7,589
Employed for cash	9.9	14.4	1,976
Employed not for cash	8.6	11.1	314
Residence			
Urban	9.1	11.3	2,705
Rural	5.3	8.5	7,174
Region			
Dushanbe	12.2	15.3	1,077
GBAO	11.5	15.7	157
Sughd	7.7	7.6	2,780
DRS	4.1	9.3	2,356
Khatlon	4.6	8.5	3,509
FTF districts	5.2	7.1	1,937
Education			
None/primary	5.6	7.6	443
General basic	5.1	9.6	3,271
General secondary	6.4	8.5	4,230
Professional primary/ middle	7.5	9.6	778
Higher	8.8	11.7	1,157
Wealth quintile			
Lowest	3.0	5.0	1,842
Second	5.7	8.5	1,967
Middle	5.7	9.2	1,966
Fourth	7.2	11.2	1,964
Highest	9.3	12.0	2,140
Total	6.3	9.3	9,879

Table 9.20 Problems in accessing health care

Percentage of women age 15–49 who reported that they have serious problems in accessing health care for themselves when they are sick, by type of problem, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Problems in accessing health care					
	Getting permission to go for treatment	Getting money for treatment	Distance to health facility	Not wanting to go alone	At least one problem accessing health care	Number of women
Age						
15–19	4.2	11.1	5.6	9.8	17.8	1,710
20–34	5.0	12.6	5.5	7.3	17.8	4,720
35–49	2.9	12.4	5.0	5.3	16.4	3,448
Number of living children						
0	4.1	10.8	5.2	8.6	16.7	2,732
1–2	4.3	13.7	6.0	7.6	19.0	2,874
3–4	4.1	12.3	5.1	5.8	16.8	3,678
5+	3.5	12.2	4.5	4.9	15.5	595
Marital status						
Never married	3.9	10.9	5.1	8.6	16.7	1,964
Married or living together	4.3	12.4	5.5	6.8	17.4	7,392
Divorced/separated/ widowed	1.4	16.1	4.3	4.9	18.8	522
Employment (past 12 months)						
Not employed	4.5	12.6	5.3	7.4	17.5	7,589
Employed for cash	2.8	11.3	4.8	5.7	15.9	1,976
Employed not for cash	3.5	11.4	9.7	6.3	20.1	314
Residence						
Urban	3.0	13.3	4.9	9.1	20.4	2,705
Rural	4.5	11.9	5.5	6.3	16.1	7,174
Region						
Dushanbe	2.6	18.7	5.7	13.4	30.0	1,077
GBAO	6.1	19.7	10.1	10.0	28.8	157
Sughd	3.3	12.4	6.4	7.6	19.6	2,780
DRS	3.1	10.1	5.1	8.0	15.1	2,356
Khatlon	5.8	11.3	4.3	3.9	12.6	3,509
FTF districts	7.0	15.5	4.3	4.5	17.0	1,937
Education						
None/primary	10.7	23.5	11.2	11.8	28.4	443
General basic	5.0	14.0	6.1	9.1	20.0	3,271
General secondary	3.4	11.2	4.5	5.1	15.2	4,230
Professional primary/middle	1.9	8.0	4.1	4.7	13.2	778
Higher	3.1	10.0	4.9	8.2	15.6	1,157
Wealth quintile						
Lowest	4.7	12.6	6.8	6.1	16.0	1,842
Second	4.7	12.5	5.6	5.4	17.0	1,967
Middle	5.5	13.4	5.1	6.4	17.0	1,966
Fourth	3.6	11.5	5.0	8.1	16.8	1,964
Highest	2.3	11.5	4.3	9.0	19.4	2,140
Total	4.1	12.3	5.3	7.0	17.3	9,879

Table 9.21 Distance from health care

Percent distributions of women age 15–49 by travel time to nearest health facility and by means of transport to nearest health facility, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Travel time to nearest health facility					Means of transport to nearest health facility				
	<30 minutes	30–59 minutes	60–119 minutes	≥2 hours	Total	Motorized[1]	Not motorized[2]	Other	Total	Number of women
Age										
15–19	74.4	22.1	3.4	0.1	100.0	27.2	72.8	0.0	100.0	1,710
20–34	73.8	23.0	3.2	0.0	100.0	25.6	74.4	0.0	100.0	4,720
35–49	73.3	22.2	4.4	0.1	100.0	25.4	74.6	0.0	100.0	3,448
Accessing health care										
Distance to health facility is a problem	49.7	33.0	16.8	0.5	100.0	40.3	59.6	0.1	100.0	527
Distance to health facility is not a problem	75.1	22.0	2.9	0.0	100.0	25.0	75.0	0.0	100.0	9,352
Means of transport to nearest health facility										
Motorized[1]	63.2	29.6	7.1	0.1	100.0	na	na	na	na	2,550
Not motorized[2]	77.4	20.1	2.5	0.0	100.0	na	na	na	na	7,328
Other	*	*	*	*	100.0	na	na	na	na	1
Residence										
Urban	76.4	20.9	2.7	0.0	100.0	41.1	58.9	0.0	100.0	2,705
Rural	72.7	23.2	4.0	0.1	100.0	20.1	79.9	0.0	100.0	7,174
Region										
Dushanbe	72.8	25.1	2.1	0.0	100.0	51.8	48.2	0.0	100.0	1,077
GBAO	72.2	21.4	5.9	0.5	100.0	31.1	68.4	0.5	100.0	157
Sughd	76.9	18.4	4.6	0.1	100.0	18.4	81.6	0.0	100.0	2,780
DRS	73.9	24.9	1.1	0.1	100.0	15.4	84.6	0.0	100.0	2,356
Khatlon	71.4	23.5	5.0	0.0	100.0	30.5	69.5	0.0	100.0	3,509
FTF districts	79.8	18.8	1.5	0.0	100.0	24.8	75.2	0.0	100.0	1,937
Education										
None/primary	67.9	26.1	6.0	0.0	100.0	28.8	71.2	0.0	100.0	443
General basic	73.7	22.6	3.6	0.1	100.0	24.4	75.6	0.0	100.0	3,271
General secondary	72.6	23.6	3.7	0.1	100.0	23.5	76.5	0.0	100.0	4,230
Professional primary/ middle	76.3	21.9	1.8	0.0	100.0	27.9	72.1	0.0	100.0	778
Higher	78.2	17.7	4.0	0.0	100.0	35.8	64.2	0.0	100.0	1,157
Wealth quintile										
Lowest	64.9	27.9	7.0	0.2	100.0	23.9	76.1	0.0	100.0	1,842
Second	71.9	24.3	3.8	0.1	100.0	20.3	79.7	0.0	100.0	1,967
Middle	76.3	20.6	3.0	0.0	100.0	20.8	79.2	0.0	100.0	1,966
Fourth	75.4	21.6	2.9	0.1	100.0	19.9	80.1	0.0	100.0	1,964
Highest	79.1	19.0	1.8	0.0	100.0	42.5	57.5	0.0	100.0	2,140
Total	73.7	22.6	3.6	0.1	100.0	25.8	74.2	0.0	100.0	9,879

Note: An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.
na = not applicable
[1] Includes car/truck, public bus, motorcycle/scooter, and boat with motor
[2] Includes animal-drawn cart, bicycle, boat without motor, and walking

CHILD HEALTH 10

Key Findings

- ***Vaccinations:*** 94% of children age 12–23 months received any type of vaccine according to the national calendar of immunizations, and 71% of children age 24–35 months have been fully vaccinated with all basic antigens according to the national calendar of immunizations.
- ***Symptoms of acute respiratory infection:*** 2% of children under age 5 had symptoms of acute respiratory infection (ARI) in the 2 weeks preceding the survey. Advice or treatment was sought for 82% of children with ARI symptoms.
- ***Fever:*** 11% of children under age 5 had a fever in the 2 weeks preceding the survey. Among children with fever, 52% were taken for advice or treatment.
- ***Diarrhea:*** 16% of children under age 5 had diarrhea in the 2 weeks preceding the survey. Treatment or advice was sought for 64% of children with diarrhea.
- ***Treatment of diarrhea:*** 79% of children under age 5 with diarrhea in the 2 weeks preceding the survey received some form of oral rehydration therapy (ORT), while 2% received no treatment.

Information on child health and survival can help policymakers and program managers assess the efficacy of current strategies, formulate appropriate interventions to prevent deaths from childhood illnesses, and improve the health of children in Tajikistan.

This chapter presents information on birth weight and vaccination status for young children. It also looks at the prevalence of, and care-seeking behaviors for, three common childhood illnesses: symptoms of acute respiratory infection (ARI), fever, and diarrhea.

10.1 CHILD'S SIZE AND BIRTH WEIGHT

Low birth weight

Percentage of births with a reported birth weight below 2.5 kilograms regardless of gestational age.

Sample: Live births in the 2 years before the survey that have a reported birth weight, from either a written record or the mother's report

Birth weight is an indicator of a child's risk of malnutrition and neonatal death. It also is an indirect indicator of maternal nutritional status in the months prior to the child's birth. Data on birth weight were obtained for 96% of births in the 2 years preceding the survey from either a written record or the mother's recall. Among children with a reported birth weight, 6% weighed less than 2.5 kilograms at birth (**Table 10.1**).

The survey also collected information on the mother's estimate of the child's size at birth. Although birth size estimates provided by the mother are subjective, they have been shown to serve as a reasonable proxy for a child's birth weight. One percent of births in the 2 years preceding the survey were considered by mothers to be very small, 9% were reported as smaller than average, and 89% were reported to be average or larger than average (**Table 10.1**).

10.2 VACCINATION OF CHILDREN

Universal immunization of children against common vaccine-preventable diseases is crucial in reducing infant and child morbidity and mortality. In Tajikistan, routine childhood vaccines include bacille Calmette-Guérin (BCG) (tuberculosis); HepB (hepatitis B); oral polio vaccine (OPV); inactivated polio vaccine (IPV); DPT-containing vaccines such as DPT-HepB-Hib (diphtheria, pertussis, and tetanus; hepatitis B; and *Haemophilus influenzae* type b), DPT, DT, and Td; rotavirus vaccine (RV); and measles-containing vaccine such as measles-rubella (MR) or measles, mumps, and rubella (MMR). The MMR vaccine replaced the MR vaccine in November 2020. A second dose of inactivated polio vaccine (IPV 2) given at age 9 months was introduced into the national childhood immunization schedule in July 2022, and a pneumococcal conjugate vaccine (PCV) given at age 2, 4, and 12 months was added in November 2022. Of the 11 types of vaccines currently used in the national calendar of immunizations, within the framework of the 2023 TjDHS, immunization coverage data were collected for nine vaccines: BCG, HepB, DPT-HepB-Hib, OPV, IPV, pneumococcal, rotavirus, MR/MMR, and DPT.

In the 2023 TjDHS, information on vaccination coverage for children age 0–35 months was obtained in three overlapping ways: from vaccination cards available at home, from mothers' verbal reports, and from vaccination records maintained at a health facility. For each child born in the 3 years before the survey, mothers were asked to show the interviewer the vaccination passport or other document used for recording the child's immunizations. If the vaccination passport or other document was available, the interviewer copied the dates of each vaccination received. If the mother was not able to present the vaccination passport or other document for a child, she was asked to recall whether the child had received the BCG, hepatitis B birth dose, OPV, IPV, DPT-HepB-Hib, DPT 4, pneumococcal, rotavirus, and measles-containing vaccines. If she indicated that the child had received any of the multidose vaccines, she was asked the number of doses the child received. In Tajikistan, written vaccination records are usually maintained in local health facilities and are only rarely found in the home. Thus, in an effort to increase the information obtained from written records, the TjDHS team supervisor also went to the local health clinic after all interviews were completed in the cluster to record vaccination data from the MoHSPP vaccination forms or development health cards of children whose mothers agreed to allow their child's vaccination records to be reviewed.

10.2.1 Vaccination Card Ownership and Availability

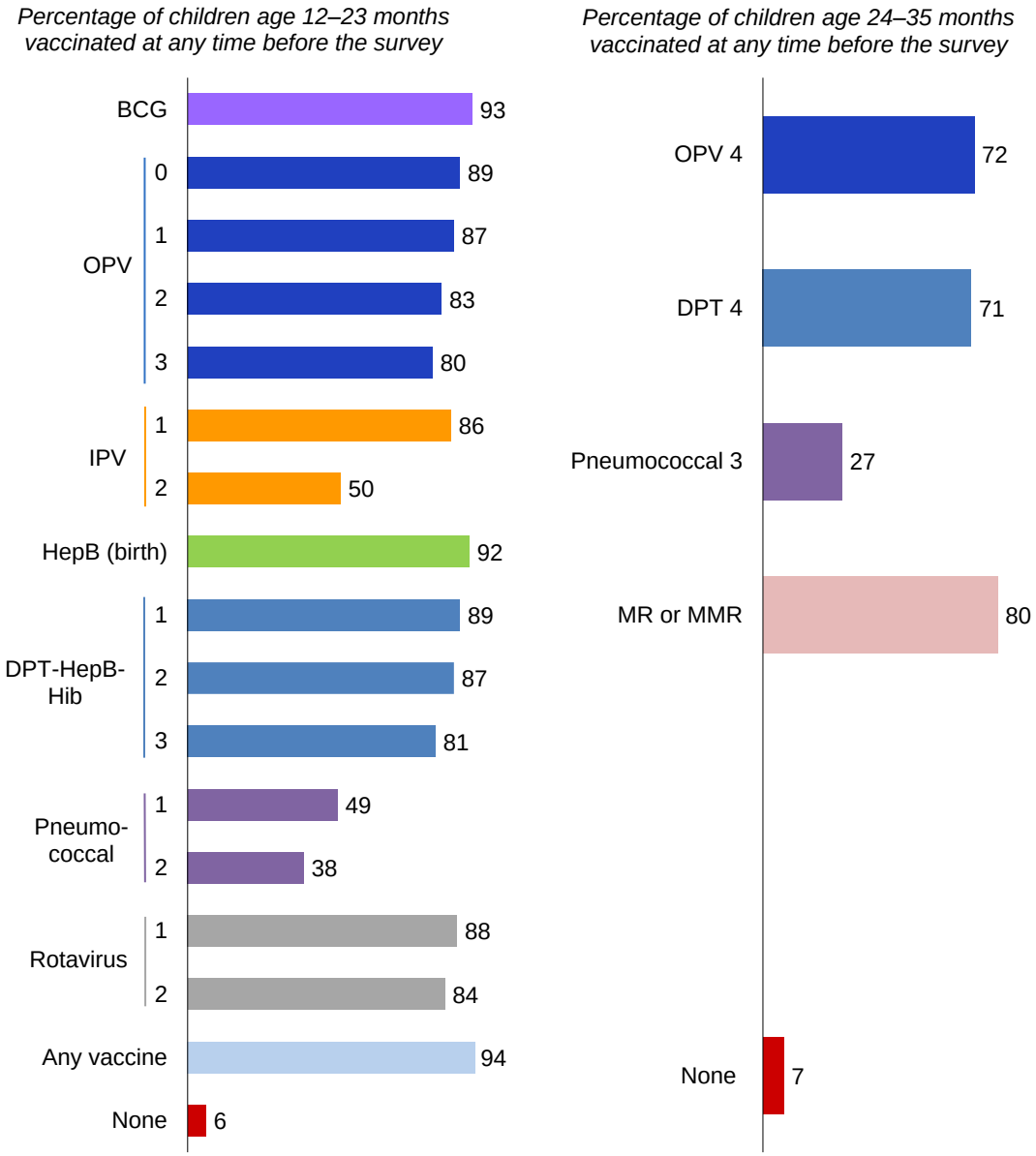
Vaccination cards are a critical tool in ensuring that a child receives all recommended vaccinations on schedule. Among children age 12–23 months and age 24–35 months, 97% and 96%, respectively, ever had a vaccination card or other document on which their vaccinations were recorded (**Table 10.2**). The 2023 TjDHS field staff ultimately viewed the records for most children (82% of children age 12–23 months and 79% of children age 24–35 months) either in the home or at a health facility.

10.2.2 Vaccination Coverage according to a Vaccination Card or the Mother's Report

The majority of children age 12–23 months (94%) received any type of vaccine according to the national calendar of immunizations at any time before the survey (according to a vaccination card or the mother's report), while 6% of children received no vaccinations (**Figure 10.1**, **Table 10.3**, and **Table 10.4**). According to a vaccination card or the mother's report, 94% of children age 12–23 months received the BCG vaccine, 81% received three doses of DPT-HepB-Hib, and 80% received three doses of polio vaccine (excluding the polio vaccine given at birth). Eighty percent of children age 24–35 months received one dose of measles-containing vaccine (MR or MMR), 71% received DPT 4, and 72% received a fifth dose of polio vaccine (OPV 4) (**Figure 10.1**). The percentages of children who received IPV 2 and PCV 1–3 are low because these vaccines were only recently introduced into the national calendar of immunizations, and many children in both age groups were too old to receive them.

According to MoHSPP annual statistical data, coverage of target population groups with any antigen is above 95%. It should be noted that, according to the 2023 TjDHS data based only on a vaccination card, almost all children age 12–23 months (more than 99%) whose vaccination cards were seen received any type of vaccine at any time before the survey (**Table 10.3** and **Table 10.4**).

Figure 10.1 **Childhood vaccinations**



10.2.3 Basic Antigen Coverage

Fully vaccinated: basic antigens

Percentage of children who received specific vaccines before the survey (according to a vaccination card or the mother's report). To have received all basic antigens, a child must receive at least:

- One dose of BCG vaccine, which protects against tuberculosis
- Three doses of polio vaccine given as oral polio vaccine (OPV), inactivated polio vaccine (IPV), or a combination of OPV and IPV
- Three doses of DPT-containing vaccine, which protects against diphtheria, pertussis (whooping cough), and tetanus
- One dose of measles-containing vaccine given as measles-rubella (MR) or measles, mumps, and rubella (MMR)

Sample: Children age 24–35 months[1]

Historically, an important measure of vaccination coverage has been the proportion of children receiving all "basic" antigens. Children are considered fully vaccinated against all basic antigens if they have received the BCG vaccine, three doses each of polio vaccine (given as OPV, IPV, or a combination of OPV and IPV) and DPT-containing vaccine, and a single dose of measles-containing vaccine. In Tajikistan, the BCG vaccine is usually given at birth or at first clinic contact, while the OPV (excluding the birth dose) and DPT-containing vaccines are given at approximately age 2, 3, and 4 months. IPV is given at age 3 and 9 months. A first measles-containing vaccination (MR or MMR) should be given in the second year of life (at or soon after age 12 months); therefore, data on coverage of all basic antigens are presented only for children age 24–35 months.

Seventy-one percent of children age 24–35 months have been fully vaccinated with basic antigens according to a vaccination card or the mother's report (**Table 10.3** and **Table 10.4**). It should be noted that, based on data from a vaccination card only, 87% of children age 24–35 months whose vaccination card was seen received all basic antigens (**Table 10.4**).

Patterns by background characteristics

- The percentage of children age 24–35 months who are fully vaccinated with basic antigens is higher among boys (73%) than among girls (67%) (**Table 10.4**).
- The percentage of children fully vaccinated with basic antigens increases from 70% for first-order births to 75% for fourth- and fifth-order births.
- The percentage of children fully vaccinated with basic antigens varies by region, from 51% in Districts of Republican Subordination (DRS) to 85% in Gorno-Badakhshan Autonomous Oblast (GBAO).

[1] Data on coverage of all basic antigens are not presented for children age 12–23 months because some of the children in that age group have only recently reached the age when the measles vaccine is recommended (12 months) and, thus, may not yet have received the MR or MMR vaccine.

10.2.4 National Schedule Coverage

Vaccinated according to national calendar of immunizations: age 12–23 months[2]

Percentage of children who received specific vaccines before the survey (according to a vaccination card or the mother's report). According to the national calendar of immunizations, a child must receive the following:

- One dose of BCG vaccine
- Hepatitis B vaccine (birth dose)
- Four doses of OPV (birth dose and doses 1–3) and one dose of IPV[2]
- Three doses of DPT-HepB-Hib (pentavalent vaccine)
- Two doses of rotavirus vaccine

Sample: Children age 12–23 months

Vaccinated according to national calendar of immunizations: age 24–35 months[3]

Percentage of children who received specific vaccines before the survey (according to a vaccination card or the mother's report). According to the national calendar of immunizations, a child must receive the vaccines listed for children age 12–23 months along with the following:

- One dose of measles and rubella (MR) or measles, mumps, and rubella (MMR)
- A fifth dose of OPV (OPV 4)
- DPT 4

Sample: Children age 24–35 months

A second measure of vaccination coverage is the percentage of children age 12–23 months and 24–35 months who are vaccinated according to the national calendar of immunizations.

Vaccinated According to the National Calendar of Immunizations: Age 12–23 Months

In this report, a child age 12–23 months is considered to be vaccinated according to the national calendar of immunizations if the child has received the BCG vaccine, a birth dose of HepB vaccine, four doses of OPV (birth dose and doses 1–3), one dose of IPV, three doses of DPT-HepB-Hib (pentavalent vaccine), and two doses of rotavirus vaccine. Seventy-four percent of children age 12–23 months received these 12 vaccinations according to a vaccination card or the mother's report (**Table 10.3**).[2] It should be noted that, based on data from a vaccination card only, 88% of children age 12–23 months whose vaccination card was seen received the 12 vaccinations (**Table 10.4**).

[2] IPV 2 is excluded from the calculation of the indicator because it was introduced into the routine immunization schedule in July 2022, and therefore not all children for whom vaccination data were collected would have been eligible to receive it. Similarly, the first and second doses of the pneumococcal vaccine are excluded from the calculation because the vaccine was not introduced until November 2022, and not all children were eligible to receive it.

[3] IPV 2 and pneumococcal doses 1–3 are excluded from calculation because they were introduced into the routine immunization schedule in July and November 2022, respectively, and therefore not all children for whom vaccination data were collected would have been eligible to receive them.

Patterns by background characteristics

- The percentage of children age 12–23 months who received 12 vaccinations according to a vaccination card or the mother's report is higher in rural areas (76%) than in urban areas (67%) (**Table 10.4**).
- The percentage of children who received 12 vaccinations according to a vaccination card or the mother's report ranges from 57% in DRS to 86% in Sughd.

Vaccinated According to the National Calendar of Immunizations: Age 24–35 Months

In this report, children age 24–35 months are considered vaccinated according to the national calendar of immunization if they receive BCG, HepB (birth dose), three doses of DPT-HepB-Hib and a fourth dose of DPT, five doses of OPV (birth dose and doses 1–4), one dose of IPV, two doses of rotavirus vaccine, and one dose of MR or MMR. Sixty-three percent of children age 24–35 months received these 15 vaccinations according to a vaccination card or the mother's report (**Table 10.3** and **Table 10.4**).[3] It should be noted that, based on data from a vaccination card only, 78% of children age 24–35 months whose vaccination card was seen received the 15 vaccinations (**Table 10.4**).

Patterns by background characteristics

- The percentage of children age 24–35 months who received 15 vaccinations according to a vaccination card or the mother's report is comparable across urban and rural areas (63% and 62%, respectively) but varies by region, ranging from 44% in DRS to 74% in Sughd (**Table 10.4**).
- The percentage of children who received 15 vaccinations according to a vaccination card or the mother's report increases with increasing mother's education, from 56% among those whose mothers have a general basic education to 70% among those whose mothers have a higher education.

Source of Vaccinations

More than 99% of children age 12–23 months and all children age 24–35 months received vaccinations from public sector sources, predominantly health centers (**Table 10.5**).

10.3 Symptoms of Acute Respiratory Infection and Care-seeking Behavior

Acute respiratory infection (predominantly pneumonia) is a common cause of death in young children. Caregivers are advised that a young child with a cough and/or difficult breathing should be taken to a health facility promptly.

Care seeking for symptoms of acute respiratory infection (ARI)

Children with symptoms of ARI for whom advice or treatment was sought. ARI symptoms consist of short, rapid breathing that is chest-related and/or difficult breathing that is chest-related.

Sample: Children under age 5 with symptoms of ARI in the 2 weeks before the survey

Two percent of children under age 5 had symptoms of ARI in the 2 weeks preceding the survey (**Table 10.6**). Advice or treatment was sought for 82% of children with ARI symptoms, and advice or treatment was sought the same or next day for 53% of these children (data not shown separately).

Source of Advice or Treatment for Symptoms of ARI

Seventy-six percent of children with symptoms of ARI were taken to a health center (urban/rayon/rural) for advice or treatment (**Table 10.7**).

10.4 Fever and Care-seeking Behavior

Fever is a symptom of tuberculosis, typhoid fever, respiratory infections, diarrheal diseases, and other infectious diseases. **Table 10.8** shows the percentage of children under age 5 with a fever during the 2 weeks preceding the survey and the percentage receiving various treatments.

Care seeking for fever
Children with fever for whom advice or treatment was sought.
Sample: Children under age 5 with a fever in the 2 weeks before the survey

Eleven percent of children under age 5 had a fever in the 2 weeks preceding the survey. Among children with fever, 52% were taken for advice or treatment, and advice or treatment was sought the same or next day for 37% of these children. Twenty-two percent of children with fever had blood taken from a finger or heel for testing, and 55% were given antibiotics (**Table 10.8**).

Patterns by background characteristics

- Fever was most often reported among children age 6–11 months (16%) and children living in Dushanbe and Sughd (17% each) (**Table 10.8**).
- The percentage of children with fever for whom advice or treatment was sought is higher in urban areas (62%) than in rural areas (47%).
- Advice or treatment for children with fever was sought most frequently in Dushanbe (68%) and least frequently in DRS (42%). Antibiotics were administered to children with fever most frequently in Khatlon (65%) and least frequently in DRS (40%). GBAO had too few reported cases of children with fever for care-seeking indicators to be shown.

Source of Advice or Treatment for Fever

Among children under age 5 with fever, treatment or advice was more frequently sought from the public sector (52%) than the private sector (1%), with health centers being the most common source (47%). Nearly all (99%) children for whom advice or treatment was sought were taken to public sector facilities, and 91% were taken to health centers (**Table 10.9**).

10.5 DIARRHEAL DISEASE

Diarrheal disease remains an important cause of morbidity and mortality among young children in Tajikistan—7% of children under age 5 who died in 2021 died due to diarrheal illness.[†] Oral rehydration therapy (ORT) and supplemental zinc, combined with continued feeding, are the recommended interventions for treating diarrhea. ORT can be provided as increased fluids (especially increased breastfeeding), as fluid prepared from a packet of oral rehydration salts (ORS), or as government-recommended homemade fluids (RHF). Zinc has been shown to reduce the severity and duration of diarrhea, and it is recommended that all children with diarrhea receive a 5-day course of zinc.

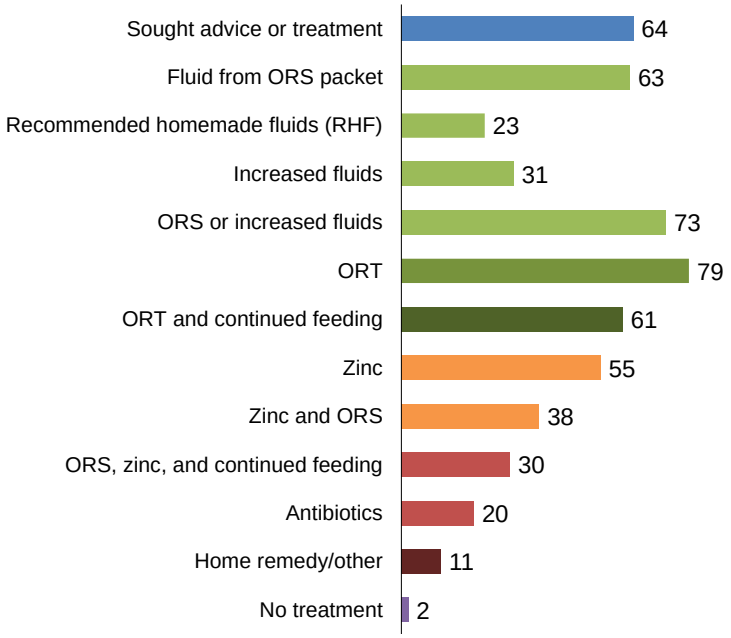
10.5.1 Diarrhea and Care-seeking Behavior

Care seeking for diarrhea
Children with diarrhea for whom advice or treatment was sought.
Sample: Children under age 5 with diarrhea in the 2 weeks before the survey

Sixteen percent of children under age 5 had diarrhea in the 2 weeks preceding the survey. Treatment or advice was sought for 64% of children with diarrhea (**Table 10.10** and **Figure 10.2**).

Figure 10.2 **Treatment of diarrhea**

Percentage of children under age 5 with diarrhea in the 2 weeks before the survey



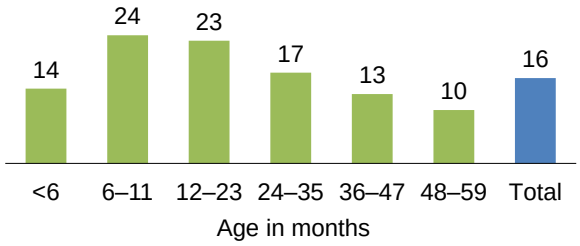
[†] https://data.unicef.org/topic/child-health/diarrhoeal-disease/

Patterns by background characteristics

- Diarrhea is most prevalent among children under age 2. Twenty-four percent of children age 6–11 months (when most children start solid foods) and 23% of children age 12–23 months had diarrhea in the 2 weeks before the survey. The latter age range corresponds to the time when children start losing protection from maternal antibodies through breastfeeding, begin to crawl and walk, and are at increased risk of contamination from food, water, and the environment. The prevalence of diarrhea steadily declines after children reach age 2, with 10% of children age 48–59 months having had diarrhea in the 2 weeks preceding the survey (**Figure 10.3**). Treatment was most commonly sought for children age 6–11 months (69%) and 12–23 months (70%).

Figure 10.3 **Diarrhea prevalence by age**

Percentage of children under age 5 who had diarrhea in the 2 weeks before the survey



- The prevalence of diarrhea is higher among children living in urban areas (20%) than among those living in rural areas (15%). Diarrhea prevalence is highest in Dushanbe (24%) and lowest in GBAO (10%).
- Thirty-one percent of children in households with unimproved drinking water sources had diarrhea in the 2 weeks preceding the survey, as compared with 16% of children in households with improved water sources. Interestingly, only 12% of children in households drinking surface water were reported as having diarrhea.
- Care seeking is higher in urban areas (69%) than in rural areas (62%). By region, care seeking is highest in Dushanbe (78%) and lowest in GBAO (31%) and DRS (58%). However, very few children in GBAO were reported to have diarrhea, so the estimate should be interpreted with caution.

10.5.2 Feeding Practices

Appropriate feeding practices

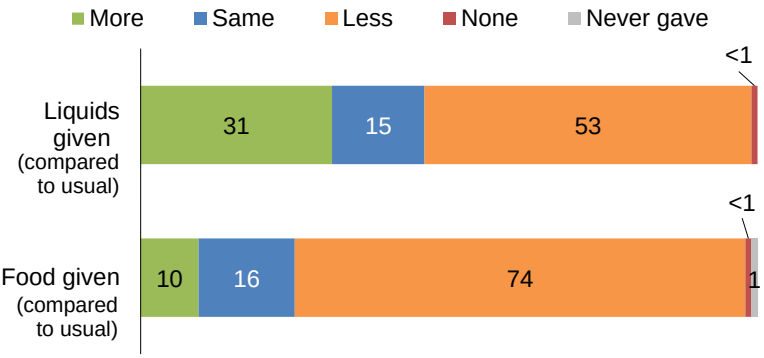
Children with diarrhea are given more liquids than usual and as much food or more than usual.

Sample: Children under age 5 with diarrhea in the 2 weeks before the survey

Dehydration from diarrhea is a major cause of malnutrition and mortality among young children. To reduce dehydration and minimize the effects of diarrhea on nutritional status, mothers are encouraged to increase the amount of fluids given to children during diarrheal episodes and to either increase feeding or at least continue normal feeding.

***Figure 10.4* Feeding practices during diarrhea**

Percentage of children under age 5 with diarrhea in the 2 weeks before the survey



Note: Data do not add to 100% due to rounding.

In Tajikistan, feeding practices during diarrheal episodes often deviate from these recommendations. Only 31% of children under age 5 with diarrhea in the 2 weeks before the survey were given more liquids than usual, while 15% received the same amount of liquids. It is of concern that over half of children were given somewhat less (34%) or much less (20%) liquid than usual. Less than 1% were given no liquids at all. Only 26% of children with diarrhea were given the same amount of food or more food than usual. Seventy-four percent of children were given much less or somewhat less food than usual; less than 1% were given no food at all (**Figure 10.4** and **Table 10.11**).

10.5.3 Oral Rehydration Therapy, Zinc, Continued Feeding, and Other Treatments

Oral rehydration therapy

Children with diarrhea are given increased fluids, a fluid made from a special packet of oral rehydration salts (ORS), or government-recommended homemade fluids (RHF).

Sample: Children under age 5 with diarrhea in the 2 weeks before the survey

Seventy-nine percent of children under age 5 with diarrhea in the 2 weeks preceding the survey received ORT. Thirty-one percent of children received ORT in the form of increased fluids, 63% in ORS packets, and 23% as recommended home fluids (RHF) (**Table 10.11**, **Table 10.12**, and **Figure 10.2**). Twenty percent of children were given antibiotics and 55% received zinc, which can reduce the duration and severity of diarrhea. Only 2% of children received no treatment.

Trends: The percentage of children under age 5 with diarrhea in the 2 weeks before the survey who received ORT increased from 73% in 2017 to 79% in 2023.

Patterns by background characteristics

- A higher percentage of children with diarrhea in urban areas (90%) than rural areas (74%) received ORT (**Table 10.12**).
- Treatment of diarrhea with ORT varies by region, ranging from 70% in DRS to 95% in Dushanbe.

Source of Advice or Treatment for Diarrhea

Among children under age 5 with diarrhea, advice or treatment was more frequently sought from the public sector (63%) than the private sector (1%) (**Table 10.13**).

10.6 TREATMENT OF CHILDHOOD ILLNESS

Diarrhea was the most common illness among children under age 5 during the 2 weeks before the survey (16%), followed by fever (11%) and symptoms of ARI (2%) (**Figure 10.5**). Advice or treatment was sought for 82% of children with ARI symptoms, 64% of children with diarrhea, and 52% of children with a fever.

Figure 10.5 **Symptoms of childhood illness and care seeking**

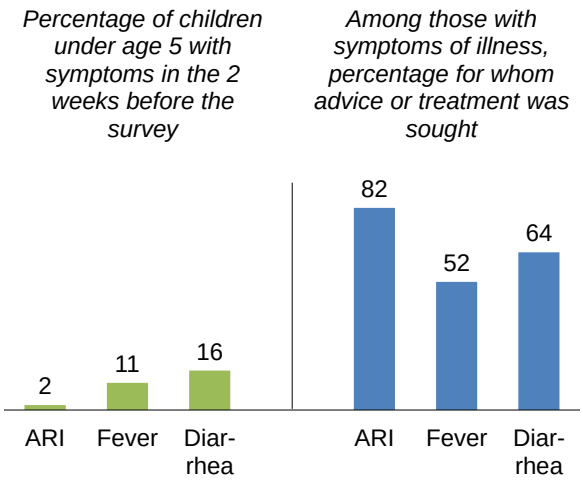


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Table 10.1 Child's size and weight at birth

Percent distribution of live births in the 2 years preceding the survey by mother's estimate of baby's size at birth, percentage of live births in the 2 years preceding the survey that have a reported birth weight by source of information (written record or mother's report), and among live births in the 2 years preceding the survey with a reported birth weight, percentage less than 2.5 kg, according to background characteristics, Tajikistan DHS 2023

	Percent distribution of births by size of baby at birth based on mother's estimate					Percentage of births that have a reported birth weight according to:				Among births with a reported birth weight[1]	
Background characteristic	Very small	Smaller than average	Average or larger	Don't know	Total	Written record	Mother's report	Either	Number of births	Percent-age less than 2.5 kg	Number of births
Mother's age at birth											
<20	0.0	10.8	88.5	0.7	100.0	15.2	84.1	99.3	151	10.1	150
20–34	0.6	7.8	89.5	2.1	100.0	21.0	74.5	95.5	1,875	5.3	1,792
35–49	1.4	13.5	84.3	0.9	100.0	18.7	75.6	94.4	186	8.3	176
Birth order											
1	0.4	10.0	89.1	0.6	100.0	21.0	77.5	98.5	608	8.1	599
2–3	0.3	7.5	90.1	2.1	100.0	20.8	75.3	96.1	1,145	4.9	1,100
4–5	1.9	9.4	85.7	3.0	100.0	18.5	72.5	91.1	428	5.8	390
6+	(0.0)	(4.3)	(92.2)	(3.5)	100.0	(19.7)	(70.3)	(90.0)	32	(0.0)	29
Mother's smoking status											
Smokes cigarettes/ tobacco	(0.0)	(9.0)	(72.4)	(18.6)	100.0	(30.3)	(44.1)	(74.5)	39	(8.4)	29
Does not smoke	0.6	8.5	89.3	1.6	100.0	20.2	75.8	96.1	2,174	5.9	2,089
Residence											
Urban	1.0	6.2	92.5	0.3	100.0	25.5	73.5	99.0	578	5.4	572
Rural	0.5	9.3	87.8	2.4	100.0	18.6	75.9	94.5	1,635	6.1	1,546
Region											
Dushanbe	0.3	5.5	94.2	0.0	100.0	28.7	70.6	99.2	222	3.7	220
GBAO	1.5	17.9	78.4	2.2	100.0	20.0	75.1	95.0	27	14.4	25
Sughd	0.8	7.9	91.0	0.2	100.0	14.9	82.7	97.7	620	8.9	606
DRS	1.1	12.1	85.5	1.3	100.0	17.0	75.3	92.3	501	4.0	462
Khatlon	0.3	7.3	88.5	3.9	100.0	24.3	71.0	95.4	844	5.1	805
FTF districts	0.1	7.4	87.2	5.3	100.0	22.5	71.5	94.1	507	5.8	477
Mother's education											
None/primary	3.0	5.1	86.2	5.7	100.0	15.3	73.5	88.7	109	5.7	97
General basic	0.5	9.5	86.2	3.8	100.0	19.1	73.0	92.2	572	5.8	527
General secondary	0.4	8.4	90.1	1.1	100.0	21.1	75.8	96.9	1,014	7.0	983
Professional primary/ middle	0.4	11.7	86.9	1.0	100.0	18.4	80.4	98.8	233	3.9	230
Higher	0.9	5.5	93.7	0.0	100.0	24.0	74.6	98.6	285	4.3	281
Wealth quintile											
Lowest	0.8	9.3	85.3	4.5	100.0	17.0	72.3	89.3	410	7.5	366
Second	0.3	10.5	87.1	2.1	100.0	19.8	75.3	95.1	425	5.7	404
Middle	0.9	8.8	88.7	1.6	100.0	16.5	80.8	97.4	460	6.3	448
Fourth	0.7	7.8	90.4	1.0	100.0	25.2	71.5	96.7	474	5.6	459
Highest	0.3	6.2	93.1	0.3	100.0	23.1	76.3	99.5	443	4.8	441
Total	0.6	8.5	89.0	1.9	100.0	20.4	75.3	95.7	2,213	5.9	2,118

Note: Figures in parentheses are based on 25–49 unweighted cases.
[1] Based on either a written record or the mother's recall

Table 10.2 Possession and observation of vaccination cards according to background characteristics

Percentage of children age 12–23 months and children age 24–35 months who ever had a vaccination card kept at a health facility or a home-based vaccination passport, and percentage with a vaccination card or a passport seen, according to background characteristics, Tajikistan DHS 2023

	Children age 12–23 months			Children age 24–35 months		
Background characteristic	Percentage who ever had a vaccination card or vaccination passport[1]	Percentage with a vaccination card or passport seen[1]	Number of children	Percentage who ever had a vaccination card or vaccination passport[1]	Percentage with a vaccination card or passport seen[1]	Number of children
Sex						
Male	96.4	80.2	513	95.9	79.2	530
Female	97.4	83.7	494	95.8	78.0	428
Birth order						
1	95.2	79.9	276	96.6	79.3	296
2–3	97.4	82.2	527	96.1	77.1	464
4–5	97.8	84.2	191	94.4	82.9	187
6+	*	*	12	*	*	12
Residence						
Urban	97.7	76.6	260	96.8	77.6	222
Rural	96.6	83.8	746	95.6	79.0	736
Region						
Dushanbe	97.3	75.7	98	97.8	79.1	101
GBAO	93.8	90.4	14	98.3	91.0	13
Sughd	99.5	88.6	278	99.4	82.9	247
DRS	95.0	72.8	234	91.9	65.5	239
Khatlon	96.2	84.0	382	95.4	83.9	357
FTF districts	95.0	87.4	225	92.9	85.8	211
Mother's education						
None/primary	(97.9)	(81.4)	54	(94.1)	(80.4)	45
General basic	97.5	83.9	256	93.8	74.4	308
General secondary	95.8	81.1	472	96.3	80.9	433
Professional primary/middle	98.9	80.9	95	99.2	82.0	73
Higher	98.0	82.1	129	98.5	79.4	100
Wealth quintile						
Lowest	95.8	82.8	199	93.7	80.3	208
Second	95.9	84.1	200	93.8	87.5	193
Middle	96.8	84.3	214	97.1	73.1	196
Fourth	98.2	81.4	206	98.1	76.5	192
Highest	98.0	76.5	187	97.0	75.5	169
Total	96.9	81.9	1,006	95.9	78.7	958

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.

[1] Vaccination card or record from a health facility, child development card from a health facility, or home-based vaccination passport, booklet, or other home-based record

Table 10.3 Vaccinations by source of information

Percentage of children age 12–23 months and children age 24–35 months who received specific vaccines at any time before the survey, by source of information (vaccination card or mother's report), Tajikistan DHS 2023

	Children age 12–23 months vaccinated according to:			Children age 24–35 months vaccinated according to:		
Vaccine	Vaccination card[1]	Mother's report	Either source (crude coverage)	Vaccination card[1]	Mother's report	Either source (crude coverage)
BCG	81.0	12.2	93.2	77.2	15.0	92.3
HepB (birth dose)[2]	80.9	11.5	92.4	78.1	14.5	92.5
Within 1 day of birth	76.1	11.2	87.3	72.0	13.9	85.9
After 1 day of birth	4.8	0.3	5.1	6.1	0.6	6.6
DPT-HepB-Hib						
1	78.7	10.2	88.9	75.8	12.2	88.0
2	78.1	8.7	86.7	74.7	11.3	86.1
3	75.9	5.0	81.0	73.6	6.3	80.0
DPT 4	na	na	na	66.3	4.5	70.8
Polio						
OPV 0 (birth dose)	79.7	9.2	88.9	76.6	10.8	87.4
OPV 1	79.9	7.1	87.0	76.6	8.4	85.0
OPV 2	78.7	4.5	83.2	75.7	6.3	82.0
OPV 3	76.8	2.8	79.7	74.5	3.7	78.2
OPV 4	na	na	na	69.6	2.0	71.6
IPV 1	76.5	9.8	86.3	73.8	11.9	85.7
IPV 2[3]	44.6	5.5	50.1	26.4	6.6	32.9
Pneumococcal[4]						
1	40.6	8.4	49.0	39.5	10.2	49.7
2	32.4	5.6	37.9	30.6	6.7	37.3
3	na	na	na	22.6	4.0	26.6
Rotavirus						
1	79.0	8.8	87.7	75.4	10.9	86.4
2	78.1	5.5	83.7	74.2	7.1	81.3
MR or MMR	na	na	na	70.2	9.8	80.0
Fully vaccinated (basic antigens)[5]	na	na	na	68.3	2.4	70.7
Received specified number of recommended vaccinations (according to national calendar of immunizations)[6]	72.0	1.6	73.7	61.3	1.1	62.5
No vaccinations	0.1	5.9	6.0	0.3	6.3	6.6
Number of children	824	182	1,006	754	204	958

na = not applicable
BCG = bacille Calmette-Guérin; DPT = diphtheria-pertussis-tetanus; HepB = hepatitis B; Hib = *Haemophilus influenzae* type b; IPV = inactivated polio vaccine; OPV = oral polio vaccine; MR = measles and rubella
MMR = measles, mumps and rubella
[1] Facility-based vaccination card or record, child development card, or home-based vaccination passport
[2] Children are considered to have received HepB (birth dose) if it was recorded on their card or reported by their mother, regardless of timing.
[3] IPV 2 given at age 9 months was introduced in July 2022. Not all children age 12–23 months at the time of the interview would have been eligible for IPV 2. For example, a child who was age 23 months in October 2023 would have been too old to receive the vaccine when it was rolled out in 2022.
[4] Pneumococcal vaccine was introduced in 2022. The estimates are low because doses 1 (given at 2 months) and 2 (given at 4 months) were not available until November 2022 and January 2023, respectively, and many children age 12–23 months would have been too old to receive them.
[5] BCG, three doses of DPT-containing vaccine, three doses of polio vaccine (excluding polio vaccine given at birth), and one dose of MR or MMR. Data on coverage of all basic antigens are not presented for children age 12–23 months because children who had just turned age 12 months at the time of data collection would have only recently been eligible to receive MR/MMR.
[6] For children age 12–23 months, there are 12 recommended vaccinations: BCG, HepB (birth dose), three doses of DPT-HepB-Hib, four doses of oral polio vaccine (OPV 0–3), one dose of IPV vaccine, and two doses of rotavirus vaccine. For children age 24–35 months, there are 15 recommended vaccinations: BCG, HepB (birth dose), three doses of DPT-HepB-Hib and a fourth dose of DPT, five doses of OPV (0–4), one dose of IPV vaccine, two doses of rotavirus vaccine, and one dose of MR or MMR. The IPV 2 and pneumococcal vaccines are excluded from this indicator for both age groups because they were introduced into the routine immunization schedule for children in Tajikistan in July and November 2022, respectively. Thus, not all children for whom vaccination data were collected would have been eligible to receive these vaccinations.

Table 10.4 Vaccinations by background characteristics

Percentage of children age 12–23 months and children age 24–35 months who received specific vaccines before the survey (according to a vaccination card kept at home or in a health facility or the mother's report), percentage who received any vaccinations, percentage who received specified numbers of vaccinations according to the national calendar of immunizations, percentage who received no vaccinations, and percentage fully vaccinated (basic antigens), according to background characteristics, Tajikistan DHS 2023

	Children age 12–23 months																		Children age 24–35 months						
			DPT-HepB-Hib			OPV[2]				IPV[3]		Pneumococcal[4]		Rotavirus											
Background characteristic	BCG	HepB (birth dose)[1]	1	2	3	0 (birth dose)	1	2	3	1	2	1	2	1	2	Received any vaccinations according to national calendar of immunizations	Received 12 vaccinations according to national calendar of immunizations[5]	No vaccinations	Number of children	MR or MMR	DPT 4 booster	OPV 4 (5th dose)	Pneumococcal 3[6]	Fully vaccinated according to national calendar of immunizations (basic antigens)[7]	Received 15 vaccinations according to national calendar of immunizations[8]	Number of children
Sex																										
Male	92.9	92.3	88.7	86.3	80.1	89.0	86.2	81.8	78.7	86.5	47.2	48.9	36.6	87.2	82.5	94.2	73.3	5.8	513	84.1	72.1	73.7	27.0	73.4	64.7	530
Female	93.5	92.5	89.1	87.1	81.9	88.8	87.8	84.6	80.7	86.0	53.2	49.2	39.4	88.3	84.9	93.7	74.1	6.3	494	75.1	69.2	69.0	26.0	67.4	59.7	428
Birth order																										
1	90.8	90.4	86.6	85.6	79.1	86.5	84.8	81.9	77.6	83.9	49.4	45.7	37.0	86.5	81.6	91.3	72.2	8.7	276	79.1	72.0	71.4	24.4	69.9	63.2	296
2–3	93.5	92.6	89.4	87.1	81.5	89.4	86.8	82.5	79.3	86.5	50.1	51.1	38.9	87.0	83.6	94.6	73.2	5.4	527	79.6	69.7	70.5	29.6	70.0	60.4	464
4–5	95.4	94.4	90.6	87.3	82.4	90.8	90.6	87.2	83.8	88.6	52.2	49.1	37.5	91.8	87.3	95.9	76.7	4.1	191	82.4	71.5	75.5	23.4	75.3	67.2	187
6+	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	12	*	*	*	*	*	*	12
Vaccination card[9]																										
Seen	98.9	98.7	96.1	95.3	92.7	97.2	97.6	96.0	93.8	93.4	54.5	49.6	39.5	96.4	95.4	99.9	88.0	0.1	824	89.2	84.3	88.4	28.7	86.8	77.9	754
Not seen or no longer has	76.0	72.8	63.5	55.0	31.4	57.8	44.9	29.4	18.7	61.1	35.2	53.9	35.8	56.0	36.0	76.0	10.5	24.0	151	52.9	24.4	11.8	22.7	14.2	6.6	165
Never had	(25.1)	(20.3)	(20.3)	(13.4)	(11.1)	(18.9)	(11.1)	(3.4)	(1.3)	(20.3)	(6.8)	(11.0)	(7.4)	(11.8)	(4.6)	(25.1)	(1.3)	(74.9)	31	(18.1)	(6.8)	(0.0)	(2.9)	(0.0)	(0.0)	40
Residence																										
Urban	94.1	93.6	88.8	85.0	76.9	87.3	88.3	82.8	74.5	86.0	62.8	54.8	42.2	87.9	85.5	94.7	66.8	5.3	260	86.3	72.6	72.4	32.1	73.0	62.5	222
Rural	92.9	92.0	88.9	87.3	82.4	89.5	86.5	83.3	81.5	86.4	45.7	47.0	36.4	87.7	83.1	93.7	76.1	6.3	746	78.2	70.3	71.3	24.9	70.0	62.4	736
Region																										
Dushanbe	95.7	96.1	90.5	84.9	75.2	84.9	90.6	82.6	71.5	85.0	69.1	63.9	50.4	90.0	88.4	96.8	61.2	3.2	98	89.0	73.1	72.2	37.8	74.3	61.5	101
GBAO	97.3	96.1	97.1	95.4	94.0	91.5	98.6	94.2	89.2	95.6	46.7	46.9	42.2	93.5	93.5	100.0	80.9	0.0	14	91.1	86.4	86.9	30.1	85.4	70.1	13
Sughd	98.4	97.5	96.6	96.1	92.5	95.9	96.5	94.5	91.2	94.4	76.5	60.7	56.7	96.4	95.9	99.0	85.8	1.0	278	89.4	86.1	80.4	51.2	81.0	73.9	247
DRS	91.3	88.7	82.2	77.8	65.6	84.2	74.7	68.6	66.1	79.3	32.8	38.7	21.2	79.9	67.0	93.2	56.9	6.8	234	67.5	50.3	53.7	8.6	51.3	43.5	239
Khatlon	89.7	89.9	86.6	85.6	83.0	87.7	86.3	83.7	81.4	84.6	36.8	43.1	31.2	85.5	83.4	89.9	78.1	10.1	382	79.0	72.7	76.7	18.2	75.1	67.2	357
FTF districts	90.7	91.0	86.4	85.7	84.9	88.5	87.6	84.9	83.1	84.6	29.6	57.5	45.5	86.2	84.6	91.0	81.1	9.0	225	81.9	74.8	81.1	27.0	79.0	69.9	211
Mother's education																										
None/primary	(91.6)	(91.6)	(90.3)	(88.3)	(85.0)	(88.8)	(89.0)	(85.0)	(82.9)	(90.4)	(43.9)	(49.3)	(29.1)	(84.5)	(77.2)	(93.6)	(75.1)	(6.4)	54	(84.2)	(64.0)	(76.2)	(16.9)	(69.7)	(55.9)	45
General basic	94.0	92.9	85.9	82.6	76.7	89.7	84.2	80.3	77.3	84.3	42.0	46.1	31.1	85.2	80.3	94.9	71.0	5.1	256	75.4	64.0	64.5	19.2	64.3	56.1	308
General secondary	92.0	91.0	89.3	87.4	82.1	87.1	86.7	83.5	80.0	86.0	49.8	47.9	39.7	87.6	84.0	92.8	74.8	7.2	472	80.4	72.1	73.6	30.8	72.5	64.8	433
Professional primary/middle	93.4	93.2	90.1	88.3	80.6	90.8	88.0	83.7	79.4	84.6	52.4	45.9	34.4	89.4	86.1	93.4	72.1	6.6	95	83.6	80.7	79.9	34.0	78.5	68.9	73
Higher	96.2	96.7	91.8	90.5	84.0	92.4	92.1	86.8	81.9	90.6	68.2	61.4	51.5	93.5	90.0	97.2	75.3	2.8	129	88.3	82.1	76.4	30.3	77.5	70.1	100

Continued…

Table 10.4—*Continued*

Background characteristic	Children age 12–23 months																		Children age 24–35 months						
			DPT-HepB-Hib			OPV[2]				IPV[3]		Pneumococcal[4]		Rotavirus											
	BCG	HepB (birth dose)[1]	1	2	3	0 (birth dose)	1	2	3	1	2	1	2	1	2	Received any vaccinations according to national calendar of immunizations	Received 12 vaccinations according to national calendar of immunizations[5]	No vaccinations	Number of children	MR or MMR	DPT 4 booster	OPV 4 (5th dose)	Pneumococcal 3[6]	Fully vaccinated according to national calendar of immunizations (basic antigens)[7]	Received 15 vaccinations according to national calendar of immunizations[8]	Number of children
Wealth quintile																										
Lowest	89.8	89.4	86.6	84.1	77.9	86.3	87.3	82.1	78.4	83.0	33.3	32.5	19.4	85.6	80.1	91.0	68.9	9.0	199	74.2	67.5	67.7	14.4	67.8	60.1	208
Second	91.9	90.4	88.6	86.6	84.3	86.7	86.7	83.7	83.1	86.1	43.7	47.0	35.9	87.5	84.0	93.9	75.8	6.1	200	80.6	73.7	78.1	20.5	75.2	64.4	193
Middle	95.0	94.2	91.5	91.0	84.5	91.7	88.0	86.1	83.7	90.0	52.1	55.9	44.9	90.4	84.7	95.3	79.5	4.7	214	74.4	66.0	65.3	23.3	62.9	58.5	196
Fourth	94.8	94.3	89.8	87.9	81.1	91.5	85.8	83.0	81.4	86.6	57.3	55.4	44.7	87.8	84.1	94.8	77.7	5.2	206	86.2	76.5	76.8	41.3	77.6	68.7	192
Highest	94.3	93.7	87.5	83.5	76.5	88.0	87.0	80.6	71.0	85.2	64.5	53.9	44.5	87.3	85.5	94.8	65.4	5.2	187	86.2	70.8	70.4	35.6	70.5	60.5	169
Total	93.2	92.4	88.9	86.7	81.0	88.9	87.0	83.2	79.7	86.3	50.1	49.0	37.9	87.7	83.7	94.0	73.7	6.0	1,006	80.0	70.8	71.6	26.6	70.7	62.5	958

Note: Children are considered to have received the vaccine if it was either written on the child's vaccination card or reported by the mother. For children whose vaccination information is based on the mother's report, date of vaccination is not collected. The proportions of vaccinations given during the first and second years of life are assumed to be the same as for children with a written record of vaccination. 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.

BCG = bacille Calmette-Guérin; DPT = diphtheria-pertussis-tetanus; HepB = hepatitis B; Hib = *Haemophilus influenzae* type b; OPV = oral polio vaccine; IPV = inactivated polio vaccine; MR = measles and rubella; MMR = measles, mumps, and rubella

[1] Children are considered to have received HepB (birth dose) if it was recorded on their card or reported by their mother, regardless of timing.

[2] OPV 0 is the polio vaccination given at birth.

[3] IPV 2 given at age 9 months was introduced in July 2022. Not all children age 12–23 months at the time of the interview would have been eligible for IPV 2. For example, a child who was age 23 months in October 2023 would have been too old to receive the vaccine when it was rolled out in 2022.

[4] Pneumococcal vaccine was introduced in 2022. The estimates are low because doses 1 (given at 2 months) and 2 (given at 4 months) were not available until November 2022 and January 2023, respectively, and many children age 12–23 months would have been too old to receive them.

[5] For children age 12–23 months, there are 12 recommended vaccinations: BCG, HepB (birth dose), three doses of DPT-HepB-Hib, four doses of OPV (birth dose and doses 1–3), one dose of IPV, and two doses of rotavirus vaccine. The measles-containing vaccine is excluded from this indicator because in Tajikistan it is given in the second year of life (at 12 months). IPV 2 is excluded from the calculation of the indicator because it was introduced into the routine immunization schedule in July 2022, and therefore not all children for whom vaccination data were collected would have been eligible to receive it. Similarly, the first and second doses of the pneumococcal vaccine are excluded from the calculation because the vaccine was not introduced until November 2022, and not all children were eligible to receive it.

[6] Pneumococcal vaccine dose 3 was introduced in September 2023. The estimates are low because many children age 24–35 months would have been too old to receive it.

[7] BCG, three doses of the DPT-containing vaccine, three doses of polio vaccine (OPV, IPV, or a combination of OPV and IPV, excluding the polio vaccine given at birth), and one dose of MR or MMR.

[8] For children age 24–35 months, there are 15 recommended vaccinations: BCG, HepB (birth dose), three doses of DPT-HepB-Hib and a fourth dose of DPT 4, five doses of OPV (birth dose and doses 1–4), one dose of IPV, two doses of rotavirus vaccine, and one dose of MR or MMR. IPV 2 and pneumococcal vaccine doses 1–3 are excluded from the calculation because they were introduced into the routine immunization schedule for children in Tajikistan in July and November 2022, respectively, and therefore not all children for whom vaccination data were collected would have been eligible to receive them.

[9] Facility-based vaccination card or record, child development card, or home-based vaccination passport

Table 10.5 Source of vaccinations

Among children who received at least one vaccination, percent distribution of children age 12–23 months and children age 24–35 months by source of most vaccinations, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Children age 12–23 months who received at least one vaccination[1]							Children age 24–35 months who received at least one vaccination[1]				
	Source of most vaccinations							Source of most vaccinations				
	Public maternity home	Public health center	Other public medical sector	Private medical sector	Other	Total	Number of children[1]	Public maternity home	Public health center	Other public medical sector	Total	Number of children[1]
Sex												
Male	2.1	95.2	2.5	0.2	0.0	100.0	414	1.6	95.2	3.2	100.0	415
Female	3.9	93.5	2.2	0.5	0.0	100.0	376	2.8	95.6	1.7	100.0	305
Birth order												
1	2.7	94.5	1.8	0.9	0.0	100.0	210	3.3	94.1	2.6	100.0	221
2–3	2.5	94.3	3.1	0.1	0.0	100.0	416	1.5	96.2	2.3	100.0	354
4–5	2.7	96.1	0.9	0.3	0.0	100.0	156	1.9	94.6	3.5	100.0	135
6+	*	*	*	*	*	100.0	8	*	*	*	100.0	10
Residence												
Urban	2.1	92.9	4.9	0.1	0.0	100.0	229	0.0	95.8	4.2	100.0	188
Rural	3.2	95.0	1.2	0.4	0.0	100.0	561	2.9	95.2	2.0	100.0	532
Region												
Dushanbe	4.2	92.6	3.2	0.0	0.0	100.0	92	0.0	96.4	3.6	100.0	96
GBAO	0.0	85.3	6.2	7.2	1.2	100.0	13	0.0	97.3	2.7	100.0	12
Sughd	1.4	96.4	2.2	0.0	0.0	100.0	267	0.0	97.0	3.0	100.0	232
DRS	6.6	91.2	2.2	0.0	0.0	100.0	209	7.6	91.2	1.2	100.0	201
Khatlon	0.8	96.5	1.9	0.8	0.0	100.0	209	0.0	97.1	2.9	100.0	179
FTF districts	1.4	98.6	0.0	0.0	0.0	100.0	117	0.0	96.4	3.6	100.0	87
Mother's education												
None/primary	(14.1)	(84.1)	(1.8)	(0.0)	(0.0)	100.0	43	(4.0)	(96.0)	(0.0)	100.0	25
General basic	4.2	94.1	1.6	0.1	0.0	100.0	206	3.7	92.8	3.5	100.0	247
General secondary	1.5	94.8	3.0	0.6	0.0	100.0	350	1.3	96.4	2.3	100.0	305
Professional primary/middle	2.0	97.2	0.8	0.0	0.0	100.0	74	2.0	97.7	0.3	100.0	59
Higher	1.3	95.8	2.5	0.3	0.0	100.0	117	0.0	97.1	2.9	100.0	84
Wealth quintile												
Lowest	3.7	94.9	1.3	0.0	0.1	100.0	129	3.1	92.3	4.6	100.0	139
Second	3.2	95.3	1.1	0.4	0.0	100.0	140	0.9	97.3	1.8	100.0	130
Middle	3.9	93.1	2.9	0.1	0.0	100.0	175	2.1	97.9	0.0	100.0	138
Fourth	1.8	96.1	1.1	1.0	0.0	100.0	180	3.8	95.4	0.8	100.0	162
Highest	2.3	93.0	4.8	0.0	0.0	100.0	166	0.5	94.1	5.4	100.0	151
Total	2.9	94.4	2.3	0.3	0.0	100.0	790	2.1	95.3	2.5	100.0	720

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.
[1] The source of most vaccinations was asked only if the child had any vaccinations recorded on the vaccination passport or other documents kept at home; thus, children who did not have vaccination passports or other documents kept at home were excluded from the table.

Table 10.6 Children with symptoms of ARI

Among children under age 5, percentage who had symptoms of acute respiratory infection (ARI) in the 2 weeks preceding the survey, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage with symptoms of ARI[1]	Number of children
Age in months		
<6	0.9	623
6–11	2.4	547
12–23	2.0	1,006
24–35	1.3	958
36–47	1.5	998
48–59	1.3	1,000
Sex		
Male	1.4	2,686
Female	1.7	2,445
Mother's smoking status		
Smokes cigarettes/tobacco	0.7	104
Does not smoke	1.6	5,027
Cooking fuels and technologies		
Clean fuel and technology[2]	1.4	4,393
Solid fuel[3]	2.4	736
Other fuel	*	3
Residence		
Urban	2.2	1,286
Rural	1.4	3,846
Region		
Dushanbe	2.3	520
GBAO	0.3	71
Sughd	2.4	1,381
DRS	0.8	1,215
Khatlon	1.3	1,946
FTF districts	1.5	1,206
Mother's education		
None/primary	0.3	280
General basic	1.3	1,532
General secondary	1.8	2,319
Professional primary/middle	1.1	415
Higher	2.1	585
Wealth quintile		
Lowest	0.8	1,031
Second	2.2	1,041
Middle	1.5	1,024
Fourth	1.0	1,048
Highest	2.3	987
Total	1.6	5,132

Note: An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.
[1] Symptoms of ARI include short, rapid breathing that is chest-related and/or difficult breathing that is chest-related.
[2] Includes stoves/cookers using electricity and microwave, liquefied petroleum gas (LPG)/natural gas/biogas, and alcohol/ethanol
[3] Includes coal/lignite, charcoal, wood, straw/shrubs/grass, agricultural crops, animal dung/waste, processed biomass (pellets) or woodchips, garbage/plastic, and sawdust

Table 10.7 Source of advice or treatment for children with symptoms of ARI

Percentage of children under age 5 with symptoms of ARI in the 2 weeks preceding the survey for whom advice or treatment was sought from specific sources, and among children under age 5 with symptoms of ARI in the 2 weeks preceding the survey for whom advice or treatment was sought, percentage for whom advice or treatment was sought from specific sources, Tajikistan DHS 2023

	Percentage for whom advice or treatment was sought from each source:	
Source	Among children with symptoms of ARI[1]	Among children with symptoms of ARI for whom advice or treatment was sought[1]
Public sector	82.2	100.0
Government hospital	3.4	4.1
Health center (urban/rayon/rural)	76.4	93.0
Reproductive health center	0.7	0.9
Health house	1.9	2.3
Number of children	80	66

Note: Advice or treatment for children with symptoms of ARI may have been sought from more than one source.
[1] Symptoms of ARI include short, rapid breathing that is chest-related and/or difficult breathing that is chest-related.

Table 10.8 Children with fever and care seeking for fever

Among children under age 5, percentage who had a fever in the 2 weeks preceding the survey, and among children with a fever in the 2 weeks preceding the survey, percentage for whom advice or treatment was sought, percentage for whom advice or treatment was sought the same or next day following the onset of fever, percentage who had blood taken from a finger or heel for testing, and percentage who received antibiotics as treatment, according to background characteristics, Tajikistan DHS 2023

	Among children under age 5:		Among children under age 5 with fever:				
Background characteristic	Percentage with fever	Number of children	Percentage for whom advice or treatment was sought[1]	Percentage for whom advice or treatment was sought the same or next day[1]	Percentage who had blood taken from a finger or heel for testing	Percentage who took antibiotics	Number of children with fever
Age in months							
<6	8.3	623	60.9	46.8	12.2	43.7	52
6–11	15.8	547	49.3	33.6	26.5	51.8	86
12–23	12.4	1,006	58.6	38.5	28.1	53.8	125
24–35	12.6	958	49.1	36.6	21.3	60.0	120
36–47	11.3	998	50.7	37.4	19.7	54.5	113
48–59	8.2	1,000	44.6	31.8	17.0	60.8	82
Sex							
Male	11.9	2,686	50.9	34.6	19.9	52.8	318
Female	10.6	2,445	53.1	39.8	24.2	57.8	259
Residence							
Urban	14.7	1,286	62.3	44.8	25.0	57.8	189
Rural	10.1	3,846	46.8	33.1	20.3	53.7	388
Region							
Dushanbe	17.0	520	67.7	38.2	30.9	55.1	88
GBAO	6.0	71	*	*	*	*	4
Sughd	17.2	1,381	50.7	46.5	17.6	55.6	238
DRS	7.8	1,215	41.9	21.4	6.1	39.5	95
Khatlon	7.8	1,946	51.3	31.9	33.2	65.2	152
FTF districts	5.8	1,206	58.6	42.0	41.6	70.7	69
Mother's education							
None/primary	7.5	280	*	*	*	*	21
General basic	12.3	1,532	44.8	31.8	23.4	47.9	189
General secondary	9.8	2,319	57.7	41.7	23.0	59.7	227
Professional primary/ middle	12.4	415	55.9	38.6	27.4	67.8	51
Higher	15.3	585	54.9	40.0	14.2	57.3	89
Wealth quintile							
Lowest	6.4	1,031	29.9	16.7	16.9	45.7	66
Second	11.8	1,041	50.2	35.2	23.4	64.3	122
Middle	10.2	1,024	53.4	39.1	20.2	59.1	105
Fourth	12.1	1,048	50.0	40.3	23.1	46.4	127
Highest	16.0	987	62.9	42.6	22.6	55.9	158
Total	11.3	5,132	51.9	36.9	21.8	55.0	578

Note: An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.
[1] Includes advice or treatment from the following sources: public sector, private medical sector, shop, and market. Excludes advice or treatment from a traditional practitioner.

Table 10.9 Source of advice or treatment for children with fever

Percentage of children under age 5 with a fever in the 2 weeks preceding the survey for whom advice or treatment was sought from specific sources, and among children under age 5 with a fever in the 2 weeks preceding the survey for whom advice or treatment was sought, percentage for whom advice or treatment was sought from specific sources, Tajikistan DHS 2023

	Percentage for whom advice or treatment was sought from each source:	
Source	Among children with fever	Among children with fever for whom advice or treatment was sought
Public sector	51.5	98.8
Government hospital	2.7	5.3
Health center (urban/rayon/rural)	47.4	90.9
Reproductive health center	0.3	0.6
Health house	0.4	0.7
Integrated management of childhood illness center	0.6	1.2
Family medicine center	0.2	0.4
Private medical sector	0.7	1.4
Private clinic	0.4	0.8
Private doctor	0.2	0.4
Pharmacy	0.1	0.3
Other	0.2	0.4
Number of children	578	301

Note: Advice or treatment for children with fever may have been sought from more than one source.

Table 10.10 Children with diarrhea and care seeking for diarrhea

Percentage of children under age 5 who had diarrhea in the 2 weeks preceding the survey, and among children with diarrhea in the 2 weeks preceding the survey, percentage for whom advice or treatment was sought, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage with diarrhea	Number of children	Among children under age 5 with diarrhea: Percentage for whom advice or treatment was sought[1]	Among children under age 5 with diarrhea: Number of children with diarrhea
Age in months				
<6	14.3	623	57.5	89
6–11	23.7	547	69.4	129
12–23	23.0	1,006	69.5	232
24–35	16.6	958	60.6	159
36–47	12.8	998	65.4	128
48–59	10.3	1,000	53.2	103
Sex				
Male	16.8	2,686	66.8	452
Female	15.9	2,445	60.5	388
Source of drinking water[2]				
Improved	16.4	4,764	64.5	782
Unimproved	30.7	71	*	22
Surface	12.2	296	(46.9)	36
Type of toilet facility[3]				
Improved sanitation facility	16.4	5,047	64.0	827
Unimproved facility	14.9	85	*	13
Residence				
Urban	19.5	1,286	68.7	251
Rural	15.3	3,846	61.9	588
Region				
Dushanbe	24.3	520	77.8	126
GBAO	9.5	71	(31.2)	7
Sughd	19.5	1,381	60.7	269
DRS	13.6	1,215	57.8	166
Khatlon	14.0	1,946	65.2	272
FTF districts	11.5	1,206	74.0	139
Mother's education				
None/primary	12.2	280	(56.9)	34
General basic	16.7	1,532	61.9	257
General secondary	15.4	2,319	65.0	356
Professional primary/middle	19.7	415	65.2	82
Higher	18.9	585	66.4	111
Wealth quintile				
Lowest	13.0	1,031	55.9	134
Second	15.9	1,041	59.1	166
Middle	16.6	1,024	65.4	170
Fourth	15.5	1,048	64.8	163
Highest	21.0	987	71.1	207
Total	16.4	5,132	63.9	839

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.
[1] Includes advice or treatment from the following sources: public and private health sector, shop, and market. Excludes advice or treatment from a traditional practitioner.
[2] See Table 15.1 for definition of categories.
[3] See Table 15.6 for definition of categories.

Table 10.11 Feeding practices during diarrhea

Percent distribution of children under age 5 who had diarrhea in the 2 weeks preceding the survey by amount of liquids and food given compared with normal practice, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Amount of liquids given						Amount of food given						Number of children with diarrhea
	More	Same as usual	Somewhat less	Much less	None	Total	More	Same as usual	Somewhat less	Much less	None	Never gave food	Total	
Age in months														
<6	26.0	22.9	41.7	8.9	0.5	100.0	8.5	21.7	59.2	7.5	0.0	3.1	100.0	89
6–11	27.8	18.2	32.4	20.3	1.3	100.0	10.9	21.7	51.7	14.4	0.5	0.8	100.0	129
12–23	34.1	12.2	28.8	24.6	0.3	100.0	11.9	10.0	56.2	21.9	0.0	0.0	100.0	232
24–35	33.2	11.6	33.9	21.3	0.0	100.0	3.2	16.1	58.9	21.7	0.0	0.0	100.0	159
36–47	34.1	11.6	38.9	15.4	0.0	100.0	13.6	13.7	47.8	23.8	1.1	0.0	100.0	128
48–59	26.9	20.9	32.1	20.1	0.0	100.0	7.8	18.6	48.1	25.5	0.0	0.0	100.0	103
Sex														
Male	31.9	15.3	32.6	19.9	0.3	100.0	9.9	16.5	53.7	19.0	0.3	0.6	100.0	452
Female	30.5	15.0	34.8	19.5	0.3	100.0	9.0	15.0	54.6	20.9	0.2	0.3	100.0	388
Breastfeeding status[1]														
Breastfeeding	29.8	16.1	32.4	21.2	0.5	100.0	10.5	13.8	56.4	18.1	0.0	1.2	100.0	323
Not breastfeeding	33.1	13.5	33.2	19.8	0.4	100.0	7.1	18.1	56.5	18.1	0.2	0.0	100.0	285
Residence														
Urban	35.3	12.8	33.2	18.1	0.7	100.0	8.6	11.9	46.7	31.4	0.2	1.1	100.0	251
Rural	29.5	16.1	33.8	20.4	0.2	100.0	9.9	17.5	57.2	15.0	0.2	0.2	100.0	588
Region														
Dushanbe	35.6	10.3	33.5	19.4	1.3	100.0	4.2	11.8	45.3	37.5	0.5	0.8	100.0	126
GBAO	(48.4)	(18.7)	(28.9)	(4.0)	(0.0)	100.0	(5.5)	(8.1)	(66.7)	(19.7)	(0.0)	(0.0)	100.0	7
Sughd	40.2	21.2	28.0	10.6	0.0	100.0	13.6	21.9	44.4	19.0	0.5	0.7	100.0	269
DRS	26.4	18.0	19.1	35.9	0.6	100.0	7.6	17.9	58.7	15.1	0.0	0.6	100.0	166
Khatlon	22.9	9.5	48.2	19.3	0.0	100.0	9.2	10.6	64.6	15.5	0.0	0.0	100.0	272
FTF districts	13.0	12.1	52.1	22.8	0.0	100.0	8.9	11.4	64.8	14.9	0.0	0.0	100.0	139
Mother's education														
None/primary	(34.0)	(6.4)	(24.4)	(30.9)	(4.4)	100.0	(6.9)	(16.0)	(47.9)	(26.1)	(0.0)	(3.1)	100.0	34
General basic	32.0	17.2	28.4	22.2	0.2	100.0	10.2	17.0	53.0	18.6	0.8	0.4	100.0	257
General secondary	29.5	15.6	37.8	17.0	0.2	100.0	9.0	17.0	54.7	19.2	0.0	0.0	100.0	356
Professional primary/ middle	26.9	10.3	40.2	22.6	0.0	100.0	6.5	12.7	61.1	17.5	0.0	2.2	100.0	82
Higher	37.4	15.1	30.5	17.1	0.0	100.0	12.3	11.4	51.3	24.9	0.0	0.0	100.0	111
Wealth quintile														
Lowest	15.9	16.4	42.6	24.7	0.4	100.0	6.2	12.8	67.9	13.2	0.0	0.0	100.0	134
Second	38.0	15.0	30.7	15.6	0.6	100.0	9.6	20.2	57.1	11.6	0.9	0.6	100.0	166
Middle	38.6	10.9	30.3	20.2	0.0	100.0	14.3	12.4	51.8	21.6	0.0	0.0	100.0	170
Fourth	27.5	21.0	32.7	18.7	0.0	100.0	11.1	23.3	48.4	16.8	0.0	0.3	100.0	163
Highest	32.5	13.2	33.7	20.1	0.5	100.0	6.4	11.2	49.0	32.0	0.3	1.1	100.0	207
Total	31.2	15.1	33.6	19.7	0.3	100.0	9.5	15.8	54.1	19.9	0.2	0.5	100.0	839

Note: It is recommended that children be given more liquids to drink during diarrhea and that food not be reduced. Figures in parentheses are based on 25–49 unweighted cases.

[1] Breastfeeding status is captured for children age 0–35 months only.

Table 10.12 Oral rehydration salts, zinc, continued feeding, and other treatments for diarrhea

Among children under age 5 who had diarrhea in the 2 weeks preceding the survey, percentage given fluid from an ORS packet; zinc; ORS and zinc; ORS and continued feeding; ORS, zinc, and continued feeding; ORS or increased fluids; recommended homemade fluids (RHF); oral rehydration therapy (ORT); ORT and continued feeding; and other treatments, and percentage given no treatment, according to background characteristics, Tajikistan DHS 2023

	Percentage of children with diarrhea who were given:														
										Other treatments					
Background characteristic	Fluid from ORS packet	Zinc	ORS and zinc	ORS and continued feeding[1]	ORS, zinc, and continued feeding[1]	ORS or increased fluids	Recommended homemade fluids (RHF)	ORT (ORS, RHF, or increased fluids)	ORT and continued feeding[1]	Antibiotic drugs	Antimotility drugs	Intravenous solution	Home remedy/ other	Percentage given no treatment	Number of children with diarrhea
Age in months															
<6	53.9	46.3	22.1	43.9	18.0	63.2	11.8	68.4	57.8	13.0	27.7	2.1	10.1	2.8	89
6–11	62.9	56.0	39.7	53.5	32.9	72.3	24.4	77.7	63.7	11.9	27.8	3.6	10.4	2.1	129
12–23	66.5	56.5	41.7	51.0	31.6	73.9	21.2	79.8	61.9	25.3	26.9	5.2	12.0	1.7	232
24–35	65.0	52.7	39.5	47.8	30.4	75.7	21.5	82.3	63.2	17.6	32.5	1.3	10.7	1.0	159
36–47	62.3	59.5	41.0	47.2	28.6	73.4	30.4	82.5	60.5	20.2	21.7	7.6	8.7	1.9	128
48–59	63.7	55.1	35.7	53.4	30.8	71.9	25.4	77.4	58.8	27.5	28.4	2.4	12.9	4.0	103
Sex															
Male	62.9	54.6	39.0	50.2	31.6	74.3	25.1	81.5	64.6	20.8	25.6	3.6	11.3	2.5	452
Female	63.8	55.2	36.9	49.1	27.2	70.4	19.8	75.8	57.7	19.1	29.9	4.3	10.5	1.7	388
Residence															
Urban	78.9	62.3	51.6	50.8	35.7	86.0	25.9	90.1	58.6	18.6	25.5	2.2	10.2	1.4	251
Rural	56.7	51.7	32.3	49.3	26.9	66.7	21.3	74.0	62.6	20.6	28.5	4.7	11.2	2.4	588
Region															
Dushanbe	89.1	68.6	62.6	54.4	42.8	93.0	29.9	94.7	57.4	22.3	18.2	1.2	11.3	1.4	126
GBAO	(57.4)	(47.9)	(32.9)	(47.2)	(25.5)	(77.6)	(29.5)	(88.8)	(69.2)	(5.7)	(34.3)	(0.0)	(2.7)	(2.6)	7
Sughd	71.0	47.7	35.2	54.8	26.0	79.2	16.3	84.4	65.9	18.0	37.4	7.3	8.4	1.4	269
DRS	48.9	48.7	32.0	41.4	25.6	63.9	20.8	70.1	57.0	17.8	31.5	1.8	19.4	1.8	166
Khatlon	52.7	59.7	33.3	47.8	29.5	61.5	26.6	71.2	61.3	22.6	19.7	3.3	8.2	3.3	272
FTF districts	58.3	66.4	41.9	51.9	36.7	62.1	26.5	71.6	61.2	22.3	17.1	5.9	9.1	3.4	139
Mother's education															
None/primary	(56.2)	(39.3)	(22.6)	(45.4)	(16.1)	(65.1)	(19.9)	(72.5)	(54.1)	(10.5)	(33.4)	(3.2)	(2.3)	(9.3)	34
General basic	57.7	50.4	35.0	45.9	27.2	68.3	20.4	76.7	59.8	22.4	26.2	7.1	13.8	2.6	257
General secondary	63.9	54.3	36.9	51.0	29.6	74.9	26.5	82.1	64.8	19.1	27.5	2.9	9.8	1.2	356
Professional primary/middle	67.9	58.2	39.0	52.3	30.0	69.1	25.4	70.9	55.3	14.0	34.5	1.7	10.6	2.9	82
Higher	73.4	70.0	53.0	54.1	38.9	79.6	14.2	81.0	60.7	24.6	24.2	1.9	10.8	1.1	111
Wealth quintile															
Lowest	53.9	43.5	28.2	49.5	26.2	57.2	19.5	66.8	61.1	12.9	24.0	2.6	14.1	5.4	134
Second	60.9	48.3	33.5	52.5	27.8	75.3	20.9	81.4	69.1	20.7	40.0	4.1	7.6	1.6	166
Middle	52.4	51.6	27.8	43.4	22.1	69.6	18.1	78.3	61.9	22.1	21.0	4.3	13.4	0.6	170
Fourth	61.5	63.0	38.7	50.7	29.4	66.6	28.3	72.2	57.7	20.6	28.2	5.7	10.7	2.1	163
Highest	81.7	64.0	56.0	52.0	39.4	87.3	25.5	90.4	57.9	21.8	24.9	2.9	9.6	1.6	207
Total	63.3	54.9	38.0	49.7	29.6	72.5	22.7	78.9	61.4	20.0	27.6	3.9	10.9	2.1	839

Note: Figures in parentheses are based on 25–49 unweighted cases.
ORS = oral rehydration salts
[1] Continued feeding includes children who were given more, the same as usual, or somewhat less food during the diarrhea episode.

Table 10.13 Source of advice or treatment for children with diarrhea

Percentage of children under age 5 with diarrhea in the 2 weeks preceding the survey for whom advice or treatment was sought from specific sources; among children under age 5 with diarrhea in the 2 weeks preceding the survey for whom advice or treatment was sought, percentage for whom advice or treatment was sought from specific sources; among children with diarrhea who received ORS, percentage for whom advice or treatment was sought from specific sources; and among children with diarrhea who were given zinc tablets or syrup, percentage for whom advice or treatment was sought from specific sources, Tajikistan DHS 2023

	Percentage for whom advice or treatment was sought from each source:			
Source	Among children with diarrhea	Among children with diarrhea for whom advice or treatment was sought	Among children with diarrhea who received ORS[1]	Among children with diarrhea who were given zinc
Public sector	62.9	98.0	73.7	68.6
Government hospital	2.8	4.4	2.8	2.8
Health center (urban/rayon/ rural)	58.7	91.6	69.7	64.6
Reproductive health center	0.8	1.3	0.8	0.9
Health house	0.4	0.7	0.4	0.8
Integrated management of childhood illness center	0.3	0.5	0.3	0.0
AIDS center	0.3	0.5	0.0	0.0
Healthy lifestyle center	0.1	0.1	0.0	0.1
Family medicine center	0.1	0.1	0.1	0.0
Private medical sector	1.2	1.9	0.5	1.0
Pharmacy	0.7	1.2	0.0	0.3
Private doctor	0.5	0.7	0.5	0.7
Other	0.2	0.3	0.3	0.0
Number of children	839	538	532	461

Note: Advice or treatment for children with diarrhea may have been sought from more than one source.
ORS = oral rehydration salts
[1] Fluids from ORS packet

NUTRITION OF CHILDREN AND WOMEN 11

Key Findings

- ***Nutritional status of children:*** 14% of children under age 5 are stunted (too short for their age), 6% are wasted (too thin for their height), 5% are underweight (too thin for their age), and 5% are overweight or obese (too heavy for their height).
- ***Growth monitoring:*** 54% of children under age 5 had their weight measured in the 3 months prior to the survey, while 52% had their height measured.
- ***Breastfeeding:*** Among children age 0–23 months, 41% were put to the breast within 1 hour of birth and 78% were exclusively breastfed for the first 2 days after birth; 41% of children under age 6 months are exclusively breastfed.
- ***Complementary feeding:*** 28% of children age 6–23 months received the minimum number of food groups during the day or night preceding the interview, 30% were fed the minimum number of times, and 9% were fed a minimum acceptable diet. Sixty-five percent of children age 6–23 months were given sweet beverages, 35% were given unhealthy foods, and 56% were not given vegetables or fruits.
- ***Anemia in women and children:*** 35% of children age 6–59 months and 36% of women age 15–49 are classified as having anemia. The prevalence of anemia is 30% among pregnant women and 36% among young women age 15–19.
- ***Nutritional status of women:*** 50% of women age 20–49 are overweight or obese, and 3% are thin. Among young women age 15–19, 12% are overweight or obese and 11% are thin.
- ***Women's dietary practices:*** 87% of women age 15–49 consumed foods from at least five of 10 defined food groups during the day or night preceding the survey, 95% consumed sweet beverages, and 67% consumed unhealthy foods.

Nutrition is the foundation for the health and development of children and adults. This chapter reports on nutritional status and anemia among children and women, infant and young child feeding (IYCF) practices, and women's dietary practices. In addition, the chapter presents key nutrition interventions including infant and young child feeding counseling, child growth monitoring, micronutrient supplementation, and the presence of iodine in household cooking salt. Chapter 9 presents information on nutritional interventions provided during the antenatal period such as maternal nutrition counseling, breastfeeding counseling, iron-containing supplementation and sources of the supplements, and postnatal breastfeeding counseling and observation. Chapter 10 presents information on child feeding practices during diarrhea.

11.1 Nutritional Status of Children

Anthropometry is commonly used to measure child nutritional status. The anthropometric measurements are used to report on child growth indicators. The distribution of height and weight among children under age 5 was compared with the World Health Organization (WHO) Child Growth Standards reference population (WHO 2006b). The distribution of a well-nourished population will be similar to that of the reference population, while the distribution of a poorly nourished population will not. The indices height-for-age, weight-for-height, and weight-for-age can be expressed in standard deviation units (*z* scores) from the median of the reference population. Values that are greater than two standard deviations below the median of the WHO Child Growth Standards are used to define malnutrition.

Stunting, or low height-for-age, is a measure of growth faltering. Stunting is a marker of the deficient growth environment to which children have been exposed and reflects the overall well-being of a population (Perumal et al. 2018). Suboptimal nutrition can contribute to stunting, while other causes include recurrent infection, chronic diseases, and more; many of the causes of stunting are complex and unknown (WHO 2014a).

Wasting, or low weight-for-height, is a measure of acute undernutrition. It represents the failure to receive adequate nutrition in the period immediately before the survey. Wasting may result from inadequate food intake or from a recent episode of illness or infection causing weight loss.

Underweight, or low weight-for-age, is a composite index of weight-for-height and height-for-age. It reflects children who are stunted, wasted, or both.

Overweight, or high weight-for-height, results from an imbalance between energy consumed (too much) and energy expended (too little).

Stunting (assessed via height-for-age)

Height-for-age is a measure of growth faltering. Children whose height-for-age *z* score is below minus two standard deviations (−2 SD) from the median of the reference population are considered short for their age (stunted). Children whose *z* score is below minus three standard deviations (−3 SD) from the median are considered severely stunted.

Sample: Children under age 5

Wasting (assessed via weight-for-height)

The weight-for-height index measures body mass in relation to body height or length and describes acute undernutrition. Children whose weight-for-height *z* score is below minus two standard deviations (−2 SD) from the median of the reference population are considered thin (wasted). Children whose *z* score is below minus three standard deviations (−3 SD) from the median are considered severely wasted.

Sample: Children under age 5

Underweight (assessed via weight-for-age)

Weight-for-age is a composite index of height-for-age and weight-for-height that takes into account both wasting and stunting. Children whose weight-for-age *z* score is below minus two standard deviations (−2 SD) from the median of the reference population are classified as underweight. Children whose *z* score is below minus three standard deviations (−3 SD) from the median are considered severely underweight.

Sample: Children under age 5

Overweight (assessed via weight-for-height)

Children whose weight-for-height *z* score is more than two standard deviations (+2 SD) above the median of the reference population are considered overweight.

Sample: Children under age 5

The means of the *z* scores for height-for-age, weight-for-height, and weight-for-age are also calculated as summary statistics that represent the nutritional status of children in a population. The mean scores describe the nutritional status of the entire population of children without the use of a cutoff point. A mean *z* score of less than 0 (a negative mean value for stunting, wasting, or underweight) suggests a downward shift in the entire sample population's nutritional status relative to the reference population. The farther away mean *z* scores are from 0, the higher the prevalence of malnutrition.

Child Growth Measures of Malnutrition

Information on anthropometry training, standardization, and data collection methodology can be found in Chapter 1. Appendix C, **Table C.7** provides the standardization results. The 2023 TjDHS identified a total of 5,040 children under age 5 who were eligible for height and weight measurements (Appendix C, **Table C.8**). During measurements, 3% of children had hairstyles or ornamentation that interfered with height measurement, and 5% of children were not minimally dressed or wore heavy permanent ornaments that interfered with weight measurement (Appendix C, **Table C.10**). Valid height-for-age measurements were obtained for 98% of eligible children, valid weight-for-height measurements were obtained for 98% of eligible children, and valid weight-for-age measurements were obtained for 98% of eligible children (Appendix C, **Table C.8**). Appendix C, **Table C.8** provides additional information on the completeness and quality of anthropometry data for children.

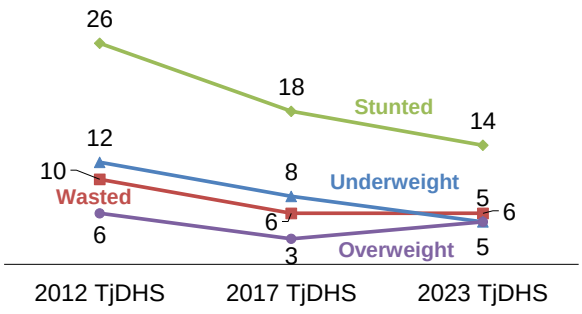
Data collection included remeasurement of children as described in Chapter 1. The calculation of final *z* scores was based on the first measurement among children randomly selected for remeasurement, while the calculation of final *z* scores was based on the second measurement among children flagged for remeasurement. The remeasurement completion rate was 100% among those selected for remeasurement. Appendix C, **Tables C.8–C.10** provide additional information on the completeness and quality of anthropometry data for children, remeasurement data, and interference of height and weight measurements from hairstyles or ornamentation and heavy clothing (WHO and UNICEF 2019).

Table 11.1 shows the nutritional status of children under age 5 according to the three anthropometric indices. Fourteen percent of children under age 5 are stunted (too short for their age), and 4% are severely stunted. Six percent of children are wasted (too thin for their height), including 2% who are severely wasted. Five percent of children are underweight (too thin for their age), and 5% are overweight or obese.

Trends: A comparison of anthropometric measurements from previous TjDHS surveys generally shows improvements in the nutritional status of children under age 5 over the past decade. The prevalence of stunting declined from 26% in 2012 to 14% in 2023 (**Figure 11.1**). The percentage of children who are wasted and underweight followed a similar trend during the period, falling from 10% to 6% and from 12% to 5%, respectively. There have been only slight changes over the past decade in the percentage of children who are overweight (6% in 2012, 3% in 2017, and 5% in 2023).

Figure 11.1 **Trends in child growth measures**

Percentage of children under age 5 who are malnourished

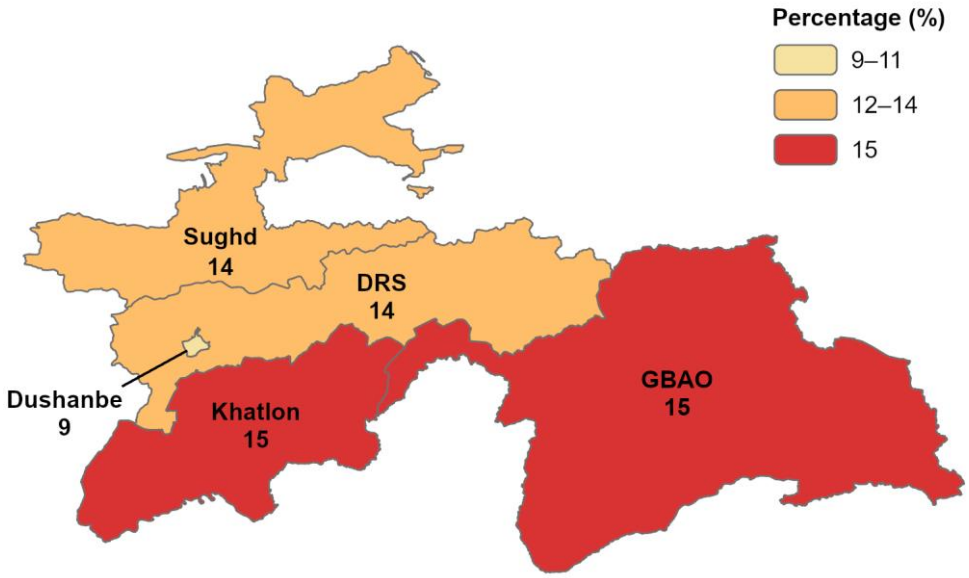


Patterns by background characteristics

- The prevalence of stunting, wasting, and underweight is higher among children residing in rural areas (15%, 7%, and 6%, respectively) than among those residing in urban areas (11%, 4%, and 4%, respectively), while the prevalence of overweight is the same in rural and urban areas (5%) (**Table 11.1**).
- Stunting varies from 14% to 16% in the four lowest quintiles and declines to 10% in the highest quintile. The opposite pattern is seen for overweight, which increases slightly from 3% in the lowest wealth quintile to 5% in the highest quintile.
- The prevalence of stunting is similar across regions (14%–15%) with the exception of Dushanbe, where the prevalence is 9% (**Map 11.1**).

Map 11.1 **Stunting in children by region**

Percentage of children under age 5 who are stunted



11.2 GROWTH MONITORING AND PROMOTION

Growth monitoring and promotion programs include monitoring children's nutritional status through physical growth measurements and using this information to provide caregivers with counseling and referrals of children whose growth appears abnormal (WHO 2013; WHO 2017a). An important component of growth monitoring is regular measurement of children's weight, length/height, and/or mid-upper-arm circumference (MUAC).

Weight measured in the past 3 months

Percentage of children under age 5 who had their weight measured in the past 3 months.

Weight and height measured in the past 3 months

Percentage of children under age 5 who had their weight and height measured in the past 3 months.

Mid-upper-arm circumference (MUAC) measured in the past 3 months

Percentage of children under age 5 who had their MUAC measured in the past 3 months.

Weight, height, and MUAC measured in the past 3 months

Percentage of children under age 5 who had their weight, height, and MUAC measured in the past 3 months.

Sample: Children under age 5

Overall, 52% of children under age 5 had their weight and height measured by a health care provider in the 3 months before the survey. Fifty-four percent of children had their weight measured, 52% had height measurements taken, and 25% had their MUAC measured. Twenty-four percent of children had all three measurements taken (**Table 11.2**).

Patterns by background characteristics

- The percentage of children who had both their weight and height measured decreases with age, from 66% among those under age 6 months to 39% among those age 48–59 months (**Table 11.2**).
- There is wide variation by region in the percentage of children who had their weight, height, and MUAC measured. The percentage of children who had both their weight and height measured is lowest in Districts of Republican Subordination (DRS) (33%) and highest in Gorno-Badakhshan Autonomous Oblast (GBAO) (83%). The percentage of children with MUAC measurements is lowest in Sughd (13%) and highest in GBAO (76%).
- The percentage of children who had both weight and height measurements taken increases with increasing mother's education and household wealth.

11.3 Infant and Young Child Feeding Practices

Optimal infant and young child feeding (IYCF) practices are critical to the health and survival of young children. Recommended IYCF practices include early initiation of breastfeeding (within the first hour after birth), exclusive breastfeeding for the first 2 days after birth, exclusive breastfeeding for the first 6 months of life, continued breastfeeding for 2 years or more, and introduction of safe, appropriate, and adequate complementary foods at age 6 months (WHO and UNICEF 2021). This section reports on IYCF indicators for children under age 2.

11.3.1 Ever Breastfed, Early Initiation of Breastfeeding, and Exclusive Breastfeeding for the First 2 Days after Birth

Breastfeeding supports children's growth and development and benefits mothers' health. Initiation of breastfeeding within the first hour of birth is important for both the mother and the child. The first breast milk contains colostrum, which is highly nutritious and has antibodies that protect the newborn from infections. Early initiation of breastfeeding also encourages bonding between the mother and her newborn, especially through skin-to-skin contact, which facilitates the production of breast milk. Feeding newborns anything other than breast milk in the first 2 days after birth can delay early initiation of breastfeeding and interrupt exclusive breastfeeding and is not recommended unless medically indicated (WHO and UNICEF 2021).

Ever breastfed

Percentage of children born in the past 2 years who were ever breastfed.

Early initiation of breastfeeding

Percentage of children born in the past 2 years who were put to the breast within 1 hour of birth.

Exclusive breastfeeding for the first 2 days after birth

Percentage of children born in the past 2 years who were fed exclusively with breast milk for the first 2 days after birth.

Sample: Children born in the past 2 years

Among children born in the 2 years preceding the survey, 97% were ever breastfed, 41% were put to the breast within the first hour after birth, and 78% were exclusively breastfed (given nothing other than breast milk to eat or drink) for the first 2 days after birth (**Table 11.3**).

Patterns by background characteristics

- Forty-two percent of children in rural areas were put to the breast within an hour after birth, as compared with 37% in urban areas (**Table 11.3**).
- Early initiation of breastfeeding varies greatly between regions; the lowest percentage is in Khatlon (25%) and the highest is in GBAO (72%).
- Early initiation of breastfeeding is higher among vaginal births (43%) than among cesarean section births (21%).
- Eighty-one percent of children whose mothers were counseled on breastfeeding during antenatal care (ANC) visits were exclusively breastfed for the first 2 days after birth, compared with 66% of children whose mothers did not receive any ANC.

11.3.2 Exclusive Breastfeeding and Mixed Milk Feeding

In the first 6 months, children should be exclusively breastfed; that is, they should be given nothing but breast milk. Exclusive breastfeeding for 6 months lowers the risk of infections that can lead to diarrhea and respiratory illnesses and provides all of the nutrients and liquid an infant requires for optimal growth and development. Mixed milk feeding, in which children are fed both breast milk and formula or animal milk within the first 6 months, has the adverse effect of reducing breast milk output because the production of breast milk is modulated by the frequency and intensity of suckling. Mixed feeding under age 6 months also can increase children's risk of diarrhea, alter their intestinal microflora, and lead to early cessation of breastfeeding (WHO and UNICEF 2021).

Exclusive breastfeeding under 6 months

Percentage of children age 0–5 months who were fed exclusively with breast milk during the previous day.

Sample: Youngest children age 0–5 months living with their mother

Mixed milk feeding under 6 months

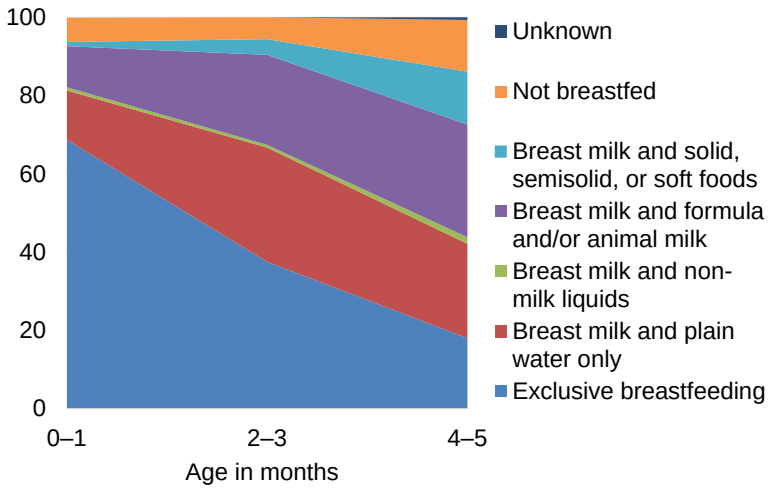
Percentage of children age 0–5 months who were fed both breast milk and formula and/or animal milk during the previous day.

Sample: Youngest children age 0–5 months living with their mother

Figure 11.2 shows the pattern of how children are fed in the first 6 months. At age 0–1 month, 69% of children are exclusively breastfed as per WHO recommendations. Thirty-one percent of children are not being fed according to recommended guidelines, with 13% receiving breast milk and plain water only and 11% receiving breast milk and infant formula and/or animal milk. By age 2–3 months, there is a substantial 31 percentage point decline in the percentage of children exclusively breastfed, with 63% of children receiving liquids or foods in addition to breast milk or instead of breast milk. More children are receiving breast milk and plain water only (29%) and breast milk and animal milk and/or infant formula (23%) at 2–3 months than at the earliest age (0–1 month). By age 4–5 months, the percentage of children exclusively breastfed decreases to 18%, and more than 4 out of 5 children (82%) are receiving liquids or foods other than breast milk, primarily breast milk and animal milk and/or infant formula (29%) (**Table 11.4** and **Table 11.5**). Overall, 41% of children under age 6 months are exclusively breastfed, while 9% are not breastfed at all.

Figure 11.2 **Infant feeding practices by age**

Percent distribution of youngest children age 0–5 months



Trends: Exclusive breastfeeding among children under age 6 months has increased steadily over time, from 34% in 2012 and 36% in 2017 to 41% in 2023.

Patterns by background characteristics

- Exclusive breastfeeding among children age 0–5 months generally increases with increasing mother's education, from 31% among those whose mothers have a general basic education to 52% among those whose mothers have a higher education (**Table 11.4**).
- Exclusive breastfeeding among children age 0–5 months is slightly higher in rural areas (42%) than in urban areas (37%). Conversely, mixed milk feeding among children age 0–5 months is less prevalent in rural (21%) than urban (28%) areas.
- Exclusive breastfeeding among children under age 6 months varies widely by region, from 25% in Dushanbe to 51% in Sughd. Mixed milk feeding is highest in Dushanbe (34%).

11.3.3 Continued Breastfeeding and Bottle Feeding

Breastfeeding should continue for the first 2 years or beyond because breast milk lowers children's risk of illness, promotes their recovery during illness, and remains an important source of nutrients for healthy growth and development. Longer durations of breastfeeding have many health benefits for women, including reducing risks of certain breast and ovarian cancers and diabetes. The nipple on a feeding bottle is susceptible to contamination and increases the risk of disease among children (WHO and UNICEF 2021). Thus, bottle feeding is not recommended for children under age 2.

Continued breastfeeding 12–23 months

Percentage of children age 12–23 months who were fed breast milk during the previous day.

Sample: Children age 12–23 months

Bottle feeding 0–23 months

Percentage of children age 0–23 months who were fed from a bottle with a nipple during the previous day.

Sample: Children age 0–23 months

Fifty-five percent of children age 12–23 months are currently breastfeeding, with no difference by urban-rural residence. Forty-six percent of children age 0–23 months are bottle fed (**Table 11.4**).

Patterns by background characteristics

- The percentage of children age 0–23 months who are bottle fed is higher in urban areas than in rural areas (53% versus 43%) (**Table 11.4**). By region, the percentage varies from 41% in Khatlon to 59% in Dushanbe.
- The percentage of children age 12–23 months who are currently breastfeeding is highest in Khatlon (60%) and lowest in DRS (48%).

11.3.4 Introduction of Complementary Foods

After the first 6 months, breast milk alone is no longer sufficient to meet all of the nutritional needs of an infant. After 6 months, appropriate complementary foods should be introduced while breastfeeding is continued until age 2 or older. The transition from exclusive breastfeeding to complementing breastfeeding with family foods is when children are most vulnerable to becoming undernourished. During this time, it is important that children receive solid, semisolid, or soft foods (WHO 2003; WHO and UNICEF 2021).

Introduction of solid, semisolid, or soft foods 6–8 months

Percentage of children age 6–8 months who were fed solid, semisolid, or soft foods during the previous day.

Sample: Youngest children age 6–8 months living with their mother

Overall, 56% of children were introduced to solid, semisolid, or soft foods at age 6–8 months (**Table 11.10**).

11.3.5 Minimum Dietary Diversity, Minimum Meal Frequency, Minimum Milk Feeding Frequency, Minimum Acceptable Diet, and Egg and/or Flesh Food Consumption

Infants and young children should be fed a minimum acceptable diet, which means that they are fed meals with appropriate frequency and a variety of foods to meet their energy and nutrient needs. The minimum acceptable diet indicator is a combination of minimum dietary diversity and minimum meal frequency for breastfeeding children and the same combination along with minimum milk feeding frequency for nonbreastfed children.

Minimum dietary diversity is a proxy for adequate micronutrient density of foods. Consumption of food from at least five groups means that the child has a higher likelihood of consuming at least one animal source of food and at least one fruit or vegetable in addition to a staple food such as grains, roots, or tubers. The five groups should come from a list of eight food groups: breast milk; grains, roots, and tubers;

legumes and nuts; dairy products (milk, yogurt, and cheese); flesh foods (meat, fish, poultry, and organ meat); eggs; vitamin A-rich fruits and vegetables; and other fruits and vegetables.

Minimum meal frequency is a proxy for meeting energy requirements. Breastfed children age 6–8 months are considered to be fed with a minimum meal frequency if they receive solid, semisolid, or soft foods at least twice a day. Breastfed children age 9–23 months are considered to be fed with a minimum meal frequency if they receive solid, semisolid, or soft foods at least three times a day. Nonbreastfed children age 6–23 months are considered to be fed with a minimum meal frequency if they receive solid, semisolid, or soft foods or milk feeds at least four times a day and if at least one of the feeds is a solid, semisolid, or soft food.

Minimum milk feeding frequency is a proxy for meeting the nutrient needs of nonbreastfed children. Milk and milk products are important sources of nutrients. Nonbreastfed children age 6–23 months are considered to be fed with a minimum milk feeding frequency if they receive at least two feeds of milk and/or milk products each day.

Egg and/or flesh food consumption by breastfed and nonbreastfed children age 6–23 months increases energy, protein, and nutrient intake. Eggs, meat, fish, poultry, and organ meats are important sources of nutrients that support healthy child growth (WHO and UNICEF 2021).

Minimum dietary diversity 6–23 months

Percentage of children age 6–23 months who were fed a minimum of five out of eight defined food groups during the previous day. The eight food groups are as follows: breast milk; grains, roots, and tubers; legumes and nuts; dairy products (milk, yogurt, and cheese); flesh foods (meat, fish, poultry, and organ meat); eggs; vitamin A-rich fruits and vegetables; and other fruits and vegetables.

Minimum meal frequency 6–23 months

Percentage of children age 6–23 months who were fed solid, semisolid, or soft foods (including milk feeds for non-breastfed children) the minimum number of times or more during the previous day.

Minimum milk feeding frequency 6–23 months

Percentage of non-breastfed children age 6–23 months who were given at least two milk feeds during the previous day.

Minimum acceptable diet 6–23 months

Percentage of children age 6–23 months who were fed a minimum acceptable diet during the previous day. This indicator is a composite of children fed with a minimum dietary diversity and a minimum meal frequency, with the additional requirement that nonbreastfed children are fed with a minimum milk feeding frequency.

Sample: Youngest children age 6–23 months living with their mother

Egg and/or flesh food consumption 6–23 months

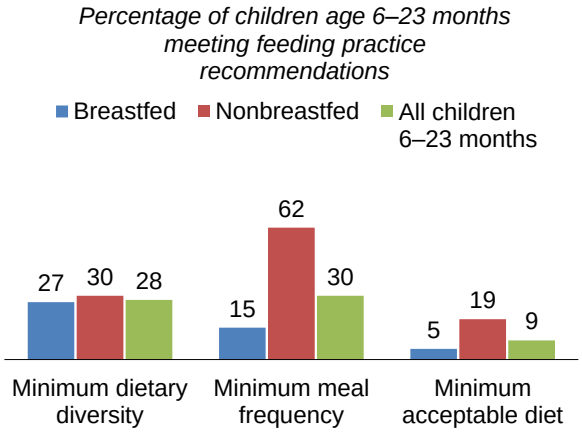
Percentage of children age 6–23 months who were fed eggs and/or flesh food during the previous day.

Sample: Youngest children age 6–23 months living with their mother

Twenty-eight percent of children age 6–23 months received the minimum number of food groups during the day or night prior to the survey (27% of breastfed children and 30% of nonbreastfed children), while 30% were fed the minimum number of times (15% of breastfed children and 62% of nonbreastfed children). Overall, 9% of children were fed a minimum acceptable diet (5% of breastfed children and 19% of nonbreastfed children) (**Table 11.8** and **Figure 11.3**).

Forty-two percent of children age 6–23 months consumed eggs and/or flesh foods during the day or night preceding the survey (**Table 11.9**).

Figure 11.3 **IYCF indicators on minimum acceptable diet by breastfeeding status**



Patterns by background characteristics

- Minimum dietary diversity, minimum meal frequency, minimum acceptable diet, and consumption of eggs and/or flesh foods generally increase with increasing mother's education and household wealth (**Table 11.8** and **Table 11.9**).
- By region, minimum dietary diversity ranges from a low of 18% in Khatlon to a high of 46% in Sughd.
- Eleven percent of children in urban areas are fed a minimum acceptable diet, as compared with 8% in rural areas.
- Consumption of eggs and/or flesh food is higher among nonbreastfeeding children (57%) than among breastfeeding children (35%).
- Over half of children in Sughd (58%) consumed eggs and/or flesh food during the day or night preceding the survey, compared with 32%–48% of children in other regions.

11.3.6 Sweet Beverage Consumption, Unhealthy Food Consumption, and Zero Vegetable or Fruit Consumption among Children

Unhealthy infant and young child feeding practices should be avoided because they can replace nutritious foods that provide important nutrients for children and promote unhealthy weight gain. For infants and young children, consumption of sweet foods and beverages increases the risk of dental caries and obesity in childhood. In addition, too much salt in the diet increases the risk of noncommunicable diseases, and unhealthy fats and refined carbohydrates contribute to unhealthy weight gain. Children consuming diets low in vegetables and fruits have reduced nutrient intakes, which can negatively impact healthy growth and development; low vegetable and fruit consumption is also associated with noncommunicable diseases later in life. The indicator definition below for unhealthy food consumption describes "sentinel unhealthy foods," which are foods high in sugar, salt, and/or unhealthy fats that are commonly consumed by infants and young children (WHO and UNICEF 2021).

Sweet beverage consumption 6–23 months

Percentage of children age 6–23 months who were given a sweet beverage during the previous day.

Unhealthy food consumption 6–23 months

Percentage of children age 6–23 months who were fed sentinel unhealthy foods during the previous day.

Zero vegetable or fruit consumption 6–23 months

Percentage of children age 6–23 months who were not fed any vegetables or fruits during the previous day.

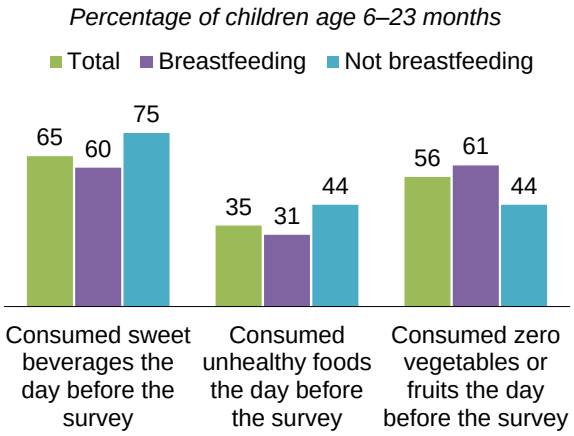
Sample: Youngest children age 6–23 months living with their mother

Sixty-five percent of children age 6–23 months consumed sweet beverages, 35% consumed unhealthy foods, and 56% did not consume any vegetables or fruits during the day or night preceding the survey (**Table 11.9**).

Patterns by background characteristics

- The percentages of children who consumed sweet beverages and unhealthy foods the day before the survey are higher among those who are not breastfeeding (75% and 44%, respectively) than among those who are breastfeeding (60% and 31%, respectively). However, 61% of breastfeeding children did not consume any fruits or vegetables the day or night before the survey, as compared with 44% of nonbreastfeeding children (**Figure 11.4**).
- There is no difference in unhealthy food consumption by urban-rural residence (35%) (**Table 11.9**).
- The percentage of children who consume unhealthy foods generally increases with increasing household wealth. In contrast, the percentage who do not consume vegetables or fruits generally decreases with increasing household wealth.

Figure 11.4 **Unhealthy feeding practices among children age 6–23 months by breastfeeding status**



11.3.7 Infant and Young Child Feeding (IYCF) Indicators

Table 11.10 summarizes all 17 WHO-UNICEF IYCF indicators.

11.4 Infant and Young Child Feeding Counseling

IYCF counseling helps support appropriate breastfeeding and complementary feeding practices (WHO 2003; WHO 2018). Counseling is an interactive process that helps empower mothers and caregivers to follow the recommended IYCF practices. Counseling can take place in health facilities and the community and is delivered by trained health providers, community health workers, and others in the community.

Mothers who received IYCF counseling in the past 6 months

Percentage of mothers with children age 6–23 months who received IYCF counseling in the past 6 months from a health care provider or community health worker.

Sample: Women whose youngest child age 6–23 months is living with them

Forty-four percent of women with a child age 6–23 months were counseled by a health care provider in the previous 6 months about how or what to feed their child (**Table 11.11**).

Patterns by background characteristics

- Fifty-nine percent of mothers in urban areas received IYCF counseling, as compared with 39% of mothers in rural areas (**Table 11.11**).
- The percentage of mothers receiving IYCF counseling generally increases with increasing household wealth, from 32% in the lowest wealth quintile to 64% in the highest quintile.
- By region, the percentage of mothers who received IYCF counseling ranges from a low of 30% in Khatlon to a high of 76% in Dushanbe.

11.5 Anemia in Children

Anemia is a condition characterized by an insufficient level of hemoglobin in the blood (Chaparro and Suchdev 2019). Hemoglobin is a protein responsible for transporting oxygen in the blood. In children, anemia can impair cognitive development and is associated with long-term health consequences. When anemia is severe, it can cause death (Chaparro and Suchdev 2019).

Anemia in children

Anemia status	Hemoglobin level in grams/deciliter*	
	Children age 6–23 months	Children age 24–59 months
Anemic	<10.5	<11.0
Mildly anemic	9.5–10.4	10.0–10.9
Moderately anemic	7.0–9.4	7.0–9.9
Severely anemic	<7.0	<7.0
Not anemic	≥10.5	≥11.0

* Hemoglobin levels are adjusted for altitude according to WHO 2024.

Sample: Children age 6–59 months

In 2024, WHO released new guidelines on hemoglobin cutoffs to define anemia in children and women (WHO 2024). In addition, the guidelines have updated the methodology for making altitude and cigarette smoking adjustments to hemoglobin levels. The new guidelines also recommend using venous blood to measure hemoglobin levels. This is because recent evidence shows that the type of blood source (e.g., venous blood or capillary blood) can result in different hemoglobin levels and anemia estimates (Hackl et al. 2024; Namaste et al. 2024; Neufeld et al. 2019; Stevens et al. 2022). Hemoglobin levels (and anemia estimates) based on different blood source types should not be compared.

The results for children presented in this report use the new cutoffs to define anemia and have been adjusted for altitude according to the latest WHO guidance.[1] However, at the time of survey data collection, single-drop capillary blood was still recommended and was used to measure hemoglobin (see Chapter 1) (WHO 2011c). Therefore, caution is advised when interpreting the anemia estimates in this survey and any others that have used single-drop capillary blood. In addition, it is not advisable to examine trends in anemia prevalence estimates derived using different blood testing methods, adjustment factors, or hemoglobin cutoffs.

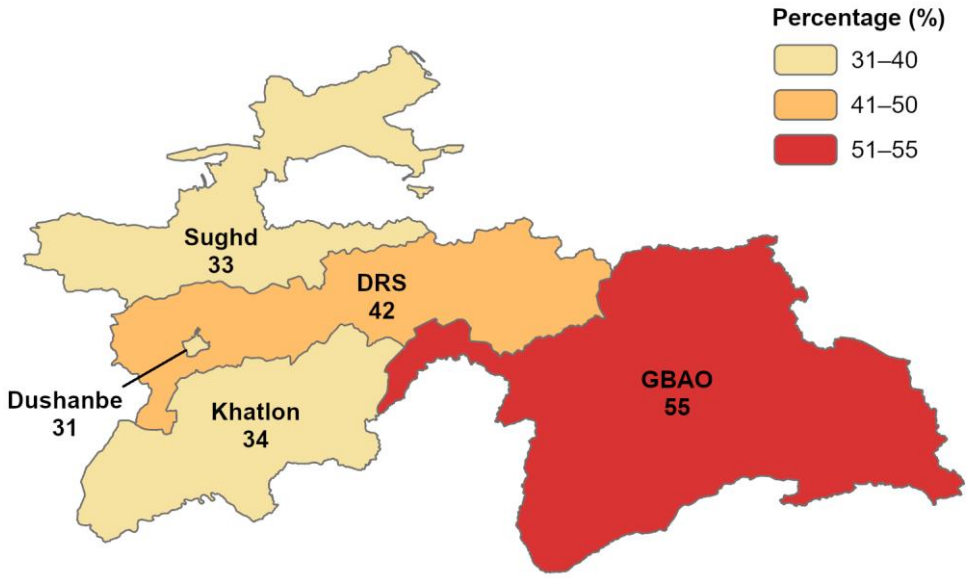
Anemia testing using capillary blood was successfully completed for 96% of eligible children (Appendix C, **Table C.6**). Overall, 35% of children age 6–59 months are anemic. Most children have mild anemia (24%). Eleven percent have moderate anemia, and less than 1% have severe anemia (**Table 11.12**).

Patterns by background characteristics

- The percentage of children with anemia ranges widely among the regions, from 31% in Dushanbe to 55% in GBAO (**Map 11.2**).
- The mean hemoglobin level among children age 6–23 months (10.8 g/dl) is lower than that among children age 24–59 months (11.3 g/dl) (**Table 11.12**).
- The percentage of children with anemia is higher in rural areas (37%) than in urban areas (32%).
- The percentage of children with anemia declines with increasing household wealth, from 40% in the lowest wealth quintile to 28% in the highest wealth quintile.

Map 11.2 **Anemia in children by region**

Percentage of children age 6–59 months with any anemia



[1] Anemia estimates based on the 2024 WHO guidelines are expected to result in lower anemia estimates for children age 6–23 months compared to estimates derived from the 2011 guidelines. For children age 24–59 months, anemia estimates are expected to be higher than under the 2011 WHO guidelines. For reference, **Table C.16** and **Table C.17** in Appendix C include the anemia estimates based on the 2011 WHO guidelines.

11.6 Micronutrient Supplementation among Children

Micronutrient deficiency is a major contributor to childhood morbidity and mortality. Micronutrient deficiency can be caused by a lack of consumption of foods that supply vitamins and minerals, as well as by infections and genetic abnormalities. Strategies to prevent or address micronutrient deficiency include agricultural approaches such as biofortification, food-based approaches that can be complemented with food fortification, and, for specific life stages and population groups, direct micronutrient supplementation (USAID 2019).

Iron is a micronutrient that plays an important role in numerous biological systems. Iron deficiency is one of the primary causes of anemia. Interventions targeting iron deficiency and anemia include periodically giving children iron tablets or syrup (WHO 2011a; WHO 2016a; WHO 2016b).

Vitamin A is a micronutrient that supports the immune system and plays an important role in maintaining the epithelial tissue in the body. Severe vitamin A deficiency can cause eye damage, increase the severity of infections such as those causing measles, and slow recovery from illness. Vitamin A supplementation programs help reduce vitamin A deficiency and mortality in children (WHO 2011b).

Iron tablets or syrup

Percentage of children age 6–59 months who were given iron tablets or syrup in the past 12 months.

Sample: Children age 6–59 months

Vitamin A supplements

Percentage of children age 6–59 months who were given vitamin A supplements in the past 6 months.

Sample: Children age 6–59 months

Overall, 56% of children age 6–59 months were given iron-containing supplements in the past 12 months and 72% were given vitamin A supplements in the past 6 months (**Table 11.13**).

Patterns by background characteristics

- The percentages of children given vitamin A supplements and iron-containing supplements increase with increasing household wealth.
- The percentages of children receiving iron-containing supplements and vitamin A supplements are higher in urban areas (66% and 78%, respectively) than in rural areas (53% and 70%, respectively).
- By region, the percentage of children given iron-containing supplements is lowest in Sughd (50%) and highest in Dushanbe (79%). The percentage of children receiving vitamin A supplements ranges from 67% in Khatlon to 86% in GBAO.

11.7 Women's Nutritional Status

Chronic energy deficiency is caused by eating too little or having an unbalanced diet that lacks adequate nutrients. Women of reproductive age (age 15–49) are especially vulnerable to chronic energy deficiency and malnutrition due to low dietary intakes, inequitable distribution of food within the household, improper food storage and preparation, dietary taboos, infectious diseases, and inadequate care practices. Chronic energy deficiency leads to low productivity among adults and greater morbidity and mortality (WHO 1995). In addition, undernutrition among women is a major risk factor for adverse birth outcomes. Overweight and obesity have adverse health outcomes as well. Overweight and obesity are major risk factors for several chronic diseases, including diabetes, cardiovascular diseases, and cancer.

Body mass index (BMI) is the ratio of weight relative to height squared; it is used to measure nutritional status among adults age 20–49. BMI values are independent of age and sex. Adult women age 20–49 whose height is less than 145 centimeters are classified as being of short stature.

BMI-for-age, the ratio of weight relative to height for different age groups, is used to measure nutritional status among children and adolescents age 5–19 (WHO 2007). BMI-for-age is sex and age specific. The reason is that adolescents are still growing, and the timing of peak growth velocity differs in boys and girls. In the DHS surveys, BMI-for-age is reported among adolescents age 15–19. Similarly, short stature among adolescent women (age 15–19) is assessed according to low height-for-age.

Body mass index (BMI)

BMI is calculated by dividing weight in kilograms by height in meters squared (kg/m^2).

Adult status	BMI
Too thin for height	Less than 18.5
Normal	Between 18.5 and 24.9
Overweight	Between 25.0 and 29.9
Obese	Greater than or equal to 30.0

Sample: Women age 20–49 who are not pregnant and who have not had a birth in the 2 months before the survey

BMI-for-age

BMI-for-age is measured in *z* score standard deviations (SD).

Adolescent status	BMI-for-age
Too thin for height	Less than −1 SD
Normal	Between −1 SD and +1 SD
Overweight	Between +1 SD and +2 SD
Obese	Greater than +2 SD

Sample: Women age 15–19 who are not pregnant and who have not had a birth in the 2 months before the survey

Short stature

Percentage of women age 20–49 with height under 145 cm.

Sample: Women age 20–49

Percentage of women age 15–19 with height-for-age *z* score less than −2 SD.

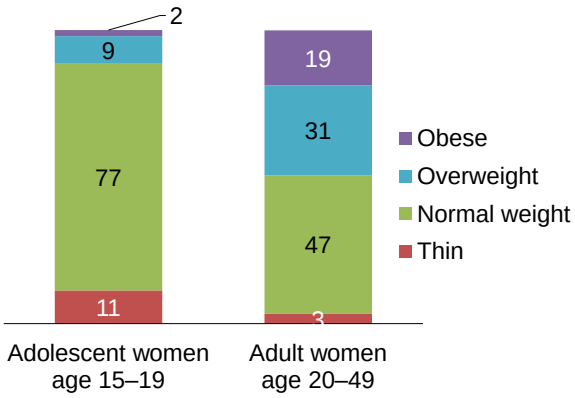
Sample: Women age 15–19

Height and weight data were collected for 99% of eligible women age 15–49 (Appendix C, **Table C.6**). During measurements, 17% of women had hairstyles or ornamentation that interfered with height measurement, and 7% of women were not wearing lightweight clothing or wore heavy permanent ornaments that interfered with weight measurement (Appendix C, **Table C.11**).

Among women age 20–49, data on height and weight were used to calculate two measures of nutritional status: height and BMI. Overall, 1% of women are shorter than 145 cm. Three percent of women are thin, while 50% are overweight or obese (**Table 11.14.1** and **Figure 11.5**).

Figure 11.5 **Nutritional status of adolescent and adult women**

Percent distribution of women age 15–19 and 20–49 by nutritional status



Note: Total for adolescent women age 15–19 is less than 100% due to rounding.

Among adolescent women age 15–19, data on height, weight, and age were used to calculate two measures of nutritional status: height-for-age and BMI-for-age. Overall, 9% of young women are of short stature, 11% are thin, and 12% are overweight or obese (**Table 11.14.2** and **Figure 11.5**).

Patterns by background characteristics

- Among women age 20–49, overweight or obesity increases with age, from 31% among women age 20–29 to 69% among women age 40–49 (**Table 11.14.1**).
- The percentage of women age 20–49 classified as thin is higher in GBAO (9%) than in the other regions (3%–4%) (**Table 11.14.1**).
- Among adolescent women age 15–19, the percentage who are overweight or obese is highest in Sughd (14%) and lowest in GBAO (9%) (**Table 11.14.2**).

11.8 Women's Dietary Practices

Dietary practices that support a healthy diet include eating a variety of different foods and food groups and limiting consumption of sugary beverages and unhealthy foods. Eating a variety of unprocessed foods helps women consume the appropriate amount of essential vitamins and minerals. A healthy diet also protects against overweight, obesity, and noncommunicable diseases.

Minimum dietary diversity for women is an indicator of diet diversity validated for nonpregnant women age 15–49. The indicator is based on 10 food groups: grains, white/pale starchy roots, tubers, and plantains; pulses (beans, peas, and lentils); nuts and seeds; dairy (milk and milk products); flesh foods (meat, fish, poultry, and organ meat); eggs; dark green leafy vegetables; vitamin-A rich fruits and vegetables; other vegetables; and other fruits. Women who consumed at least five of the 10 possible food groups in the 24 hours before the survey were classified as having minimally adequate dietary diversity. Deficiencies in micronutrients such as iron, iodine, vitamin A, folate, and zinc can have devastating consequences for the human body. Women, particularly those of childbearing age, are especially vulnerable due to their greater needs for essential vitamins and minerals. Having minimally adequate dietary diversity is important for micronutrient adequacy (FAO 2021).

Unhealthy foods and sweet beverages should be limited because they are associated with overweight, obesity, and noncommunicable diseases (Askari et al. 2020). Overweight and obesity among women can affect reproductive health and increase complications in pregnancy (Mitchell and Shaw 2015). The indicator for unhealthy food consumption describes "sentinel unhealthy foods," which are fried foods or foods high in sugar, salt, and/or unhealthy fats that are commonly consumed by women (FAO 2021).

Minimum dietary diversity for women

Percentage of women who consumed foods from at least five out of 10 defined food groups during the previous day. The 10 food groups are as follows: grains, white/pale starchy roots, tubers, and plantains; pulses (beans, peas, and lentils); nuts and seeds; dairy (milk and milk products); flesh foods (meat, fish, poultry, and organ meat); eggs; dark green leafy vegetables; vitamin-A rich fruits and vegetables; other vegetables; and other fruits.

Sample: Women age 15–49

Sweet beverage consumption

Percentage of women who consumed sweet beverages during the previous day.

Sample: Women age 15–49

Unhealthy food consumption

Percentage of women who consumed selected sentinel unhealthy foods during the previous day.

Sample: Women age 15–49

The most commonly consumed foods among women age 15–49 are those made from grains (99%); roots, tubers, and plantains (90%); and meat, fish, poultry, and organ meat (86%). The foods consumed least often are fried and salty foods (15%) and sodas, malt drinks, sports drinks, and energy drinks (27%) (**Table 11.15**). Overall, 87% of women age 15–49 consumed foods from at least five of the 10 defined food groups during the day or night preceding the survey, while 95% consumed sweet beverages and 67% consumed unhealthy foods (**Table 11.16**).

Patterns by background characteristics

- Minimum dietary diversity among women is greater than 80% across all regions and ranges from 82% in Khatlon to 95% in Sughd.
- Unhealthy food consumption increases as household wealth increases, from 49% among women in the lowest wealth quintile to 78% among those in the highest wealth quintile. The same pattern is observed with education; the percentage of women consuming unhealthy foods increases from 54% among those with no education or a primary education to 74% among those with a higher education (**Table 11.16**).

11.9 Anemia in Women

Anemia in adults can cause fatigue, lethargy, reduced physical productivity, and poor work performance (Chaparro and Suchdev 2019). Anemia is a major concern among pregnant women because it can lead to increased maternal mortality and poor birth outcomes (Haider et al. 2013).

Anemia in women

Anemia status	Hemoglobin level in grams/deciliter*			
	Nonpregnant women age 15–49	Pregnant women age 15–49		
		First trimester	Second trimester	Third trimester
Anemic	<12.0	<11.0	<10.5	<11.0
Mildly anemic	11.0–11.9	10.0–10.9	9.5–10.4	10.0–10.9
Moderately anemic	8.0–10.9	7.0–9.9	7.0–9.4	7.0–9.9
Severely anemic	<8.0	<7.0	<7.0	<7.0
Not anemic	≥12.0	≥11.0	≥10.5	≥11.0

* Hemoglobin levels are adjusted for cigarette smoking and for altitude according to WHO 2024.

Sample: Women age 15–49

As described in Section 11.5, WHO released new guidelines on the preferred blood source for measuring hemoglobin, the methodology for adjusting hemoglobin levels for altitude and cigarette smoking, and the hemoglobin cutoffs used to define anemia (WHO 2024).[2] Under this new guidance, the cutoffs to define anemia among pregnant women have changed.

The results for women presented in this report use the new cutoffs to define anemia and have been adjusted for altitude and cigarette smoking according to the latest WHO guidelines. However, since single-drop capillary blood rather than venous blood was used to measure hemoglobin (see Chapter 1), caution is advised when interpreting the anemia estimates in this survey and any others that have used single-drop capillary blood. In addition, it is not advisable to examine trends in anemia prevalence estimates derived using different blood testing methods, adjustment factors, or hemoglobin cutoffs.

Anemia testing using capillary blood was successfully completed for 96% of eligible women (Appendix C, **Table C.6**). Overall, 36% of women age 15–49 were classified as anemic. The majority of women have mild anemia (21%). Fourteen percent have moderate anemia, and less than 1% have severe anemia (**Table 11.17**).

Patterns by background characteristics

- The prevalence of severe anemia is higher among women who have given birth to six or more children (3%) than among women who have given birth to five or fewer children (1%) (**Table 11.17**).
- The percentage of women with anemia is lower in urban areas (33%) than in rural areas (37%).
- Anemia prevalence decreases with increasing household wealth, from 38% among women in the lowest wealth quintile to 33% among those in the highest quintile.
- By region, the percentage of women with anemia is lowest in Dushanbe (28%) and highest in GBAO (42%).

[2] Anemia estimates based on the 2024 WHO guidelines are expected to result in lower anemia estimates for pregnant women in the second trimester compared to estimates derived from the 2011 guidelines. For nonpregnant women and pregnant women in the first and third trimesters, anemia estimates are expected to be higher than under the 2011 WHO guidelines. For reference, **Table C.16** and **Table C.17** in Appendix C include the anemia estimates based on the 2011 WHO guidelines.

11.10 Presence of Iodized Salt in Households

Iodine is a micronutrient that plays an important role in thyroid function, which is critical for reproductive function, growth, and development. It is recommended that household salt be fortified with iodine. Sufficient iodine prevents goiter, brain damage, and other thyroid-related health problems (WHO 2014b).

Household salt iodization
Percentage of households with iodized salt.
Sample: Households in which salt was tested for iodine content

In Tajikistan, salt is fortified with potassium iodate. The 2023 TjDHS tested for the presence of potassium iodate in salt available in the household using a rapid test kit. Among households with tested salt, 84% had iodized salt. Less than 1% of households did not have salt on the day of the survey (**Table 11.18**).

Patterns by background characteristics

- The percentage of households with iodized salt is higher in urban than rural areas (91% versus 81%).
- By region, the percentage of households with iodized varies from a low of 75% in GBAO to a high of 97% in Dushanbe.
- The percentage of households with iodized salt increases with increasing wealth, from 76% in the lowest wealth quintile to 93% in the highest wealth quintile.

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Table 11.1 Nutritional status of children

Percentage of children under age 5 classified as malnourished according to three anthropometric indices of child growth: height-for-age, weight-for-height, and weight-for-age, according to background characteristics, Tajikistan DHS 2023

	Height-for-age[1]				Weight-for-height					Weight-for-age			
Background characteristic	Percent-age below −3 SD	Percent-age below −2 SD[2]	Mean *z* score (SD)	Number of children	Percent-age below −3 SD	Percent-age below −2 SD[2]	Percent-age above +2 SD	Mean *z* score (SD)	Number of children	Percent-age below −3 SD	Percent-age below −2 SD[2]	Mean *z* score (SD)	Number of children
Age in months													
<6	1.7	5.8	0.3	626	5.4	14.6	5.0	−0.4	632	0.6	4.0	−0.1	641
6–11	3.3	9.3	−0.1	557	1.5	9.4	3.3	−0.1	554	0.7	5.2	−0.2	558
12–23	3.8	13.6	−0.6	1,033	1.4	9.3	4.5	−0.1	1,038	1.0	6.4	−0.4	1,044
24–35	4.3	16.9	−0.9	988	0.7	2.7	4.6	0.2	988	0.9	4.7	−0.3	996
36–47	5.8	17.0	−0.9	1,057	0.9	3.3	5.2	0.1	1,052	1.1	6.5	−0.4	1,060
48–59	3.8	14.4	−0.9	1,037	1.0	3.4	4.4	0.1	1,030	0.7	3.8	−0.4	1,045
0–23	3.1	10.3	−0.2	2,216	2.5	10.8	4.3	−0.2	2,224	0.8	5.4	−0.2	2,243
24–59	4.6	16.1	−0.9	3,082	0.9	3.2	4.7	0.2	3,069	0.9	5.0	−0.4	3,102
Sex													
Male	4.1	15.1	−0.6	2,782	2.1	6.9	3.9	−0.0	2,765	1.1	5.6	−0.4	2,793
Female	3.8	12.0	−0.6	2,516	1.1	5.8	5.2	0.0	2,528	0.6	4.7	−0.3	2,552
Birth interval in months[3]													
First birth[4]	3.9	12.4	−0.6	1,368	1.8	5.7	3.8	−0.0	1,369	0.6	5.4	−0.3	1,382
<24	4.4	15.2	−0.7	1,367	1.5	7.1	4.9	−0.0	1,362	1.0	5.4	−0.4	1,372
24–47	4.1	14.2	−0.7	1,504	1.2	6.0	5.1	0.0	1,504	0.9	4.9	−0.3	1,524
48+	3.3	12.3	−0.5	966	1.8	7.0	4.6	−0.0	964	1.1	4.9	−0.3	974
Size at birth[3,5]													
Very small	*	*	*	19	*	*	*	*	19	*	*	*	19
Small	4.2	19.0	−0.8	249	3.1	14.1	2.9	−0.4	253	1.9	8.2	−0.7	256
Average or larger	3.3	11.6	−0.4	2,827	1.9	7.8	4.6	−0.0	2,830	0.7	4.7	−0.2	2,854
Don't know	(2.0)	(9.2)	−0.5	59	(0.0)	(13.7)	(4.8)	−0.1	59	(0.0)	(6.5)	−0.3	61
Mother's interview status													
Interviewed	3.9	13.6	−0.6	5,205	1.6	6.4	4.6	0.0	5,200	0.9	5.2	−0.3	5,252
Not interviewed but in household	(11.4)	(22.2)	−0.9	43	(3.1)	(7.1)	(3.2)	−0.1	43	(1.3)	(8.6)	−0.5	43
Not interviewed and not in household[6]	0.4	9.6	−0.1	50	3.3	3.3	1.9	0.2	50	0.0	2.3	0.0	50
Mother's age at birth[3]													
<20	4.0	12.5	−0.7	383	1.2	4.2	5.4	0.1	387	0.5	3.9	−0.2	389
20–34	3.9	13.8	−0.6	4,432	1.5	6.5	4.6	0.0	4,427	0.8	5.1	−0.3	4,467
35–49	3.9	12.4	−0.5	390	2.2	7.1	3.5	−0.2	386	1.9	7.0	−0.4	396
Mother's nutritional status[7]													
Thin	2.2	13.8	−0.8	222	1.0	10.7	4.6	−0.5	222	2.0	11.7	−0.7	225
Normal	4.0	15.4	−0.7	2,446	1.6	6.6	4.5	−0.0	2,443	1.0	5.5	−0.4	2,463
Overweight/obese	4.2	12.3	−0.6	1,709	1.5	5.1	5.2	0.1	1,705	0.8	4.4	−0.3	1,724
Residence													
Urban	2.6	10.9	−0.4	1,318	0.6	3.7	4.7	0.1	1,319	0.3	4.1	−0.2	1,325
Rural	4.4	14.6	−0.7	3,980	1.9	7.3	4.5	−0.0	3,974	1.0	5.5	−0.4	4,020
Region													
Dushanbe	1.9	8.7	−0.4	539	0.0	2.4	3.0	0.1	540	0.3	2.9	−0.1	540
GBAO	4.0	14.8	−0.9	76	0.6	2.3	2.9	0.1	77	1.6	4.6	−0.4	77
Sughd	2.8	13.8	−0.7	1,440	1.0	3.0	6.0	0.3	1,434	0.3	4.1	−0.2	1,441
DRS	3.8	13.9	−0.7	1,239	0.9	4.6	3.4	−0.0	1,243	1.1	5.8	−0.4	1,252
Khatlon	5.4	14.7	−0.5	2,004	2.9	11.1	4.7	−0.2	2,000	1.2	6.1	−0.4	2,035
FTF districts	6.1	14.4	−0.5	1,244	4.1	13.8	4.7	−0.2	1,241	1.4	6.7	−0.4	1,270
Mother's education[8]													
None/primary	3.9	17.5	−0.8	281	0.4	8.1	3.7	−0.0	285	0.9	9.1	−0.5	287
General basic	3.7	15.3	−0.7	1,566	1.0	4.4	4.9	0.0	1,560	1.0	5.4	−0.4	1,577
General secondary	4.3	12.9	−0.6	2,377	1.9	7.7	4.3	−0.0	2,374	1.0	4.7	−0.3	2,400
Professional primary/ middle	5.3	14.3	−0.5	434	2.6	5.6	7.8	0.1	430	0.7	4.9	−0.3	435
Higher	2.7	10.5	−0.4	590	1.7	6.2	3.0	−0.0	594	0.1	4.7	−0.2	597
Wealth quintile													
Lowest	4.7	14.6	−0.8	1,064	1.9	7.5	3.4	−0.1	1,065	1.1	6.2	−0.5	1,071
Second	4.2	15.6	−0.6	1,088	2.0	7.8	3.8	−0.1	1,087	1.4	6.6	−0.4	1,096
Middle	4.4	13.5	−0.6	1,058	1.0	6.1	4.5	0.0	1,059	0.6	4.4	−0.3	1,073
Fourth	3.7	14.1	−0.6	1,074	2.5	7.3	6.1	0.1	1,067	0.8	5.2	−0.3	1,087
Highest	2.8	10.3	−0.4	1,013	0.5	3.0	5.1	0.2	1,015	0.4	3.4	−0.1	1,018
Total	4.0	13.7	−0.6	5,298	1.6	6.4	4.6	0.0	5,293	0.9	5.2	−0.3	5,345

Note: Each of the indices is expressed in standard deviation units (SD) from the median of the WHO Child Growth Standards. 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.

[1] Recumbent length is measured for children under age 2; standing height is measured for all other children.

[2] Includes children who are below −3 SD from the WHO Child Growth Standards population median

[3] Excludes children whose mothers were not interviewed

[4] First-born twins (triplets, etc.) are counted as first births because they do not have a previous birth interval.

[5] Information available only for children age 0–35 months

[6] Includes children whose mothers are deceased

[7] Excludes children whose mothers were not weighed and measured, children whose mothers were not interviewed, and children whose mothers are pregnant or gave birth within the preceding 2 months. Mother's nutritional status is defined using body mass index (BMI) for mothers age 20–49 and BMI-for-age for mothers age 15–19 (as presented in Tables 11.14.1 and 11.14.2).

[8] For women who are not interviewed, information is taken from the Household Questionnaire. Excludes children whose mothers are not listed in the Household Questionnaire.

Table 11.2 Child growth monitoring

Percentage of children under age 5 who had selected measurements performed by a health care provider in the 3 months preceding the survey, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Weight	Height	Mid-upper-arm circumference (MUAC)	Weight and height	Weight, height, and MUAC	Number of children
Age in months						
<6	67.1	66.0	25.8	65.5	25.4	623
6–11	66.7	64.3	28.7	64.3	28.7	547
12–23	62.8	61.4	29.2	61.1	29.0	1,006
24–35	52.3	50.5	24.9	50.4	24.5	958
36–47	44.7	43.7	20.8	43.6	20.3	998
48–59	40.2	39.0	20.4	38.8	20.2	1,000
0–23	65.0	63.4	28.1	63.2	27.9	2,176
24–59	45.6	44.3	22.0	44.2	21.6	2,956
Sex						
Male	54.4	53.1	25.8	52.9	25.5	2,686
Female	53.2	51.6	23.3	51.5	23.0	2,445
Mother's age						
15–19	52.7	50.2	20.6	49.8	20.6	382
20–29	54.4	53.0	25.0	52.8	24.6	3,565
30–39	52.5	51.1	24.4	51.0	24.2	1,112
40–49	54.9	54.3	27.6	54.3	27.6	73
Residence						
Urban	68.6	67.9	37.2	67.6	36.7	1,286
Rural	48.9	47.2	20.3	47.1	20.1	3,846
Region						
Dushanbe	82.3	82.1	59.4	81.5	58.5	520
GBAO	83.8	83.5	76.2	83.3	75.7	71
Sughd	67.1	65.7	12.8	65.6	12.4	1,381
DRS	34.6	33.2	29.4	33.2	29.2	1,215
Khatlon	47.8	45.9	18.7	45.7	18.6	1,946
FTF districts	35.9	32.9	13.2	32.8	13.2	1,206
Mother's education						
None/primary	38.2	38.6	22.8	38.2	22.4	280
General basic	47.4	45.6	27.3	45.5	27.1	1,532
General secondary	54.5	52.7	19.9	52.4	19.5	2,319
Professional primary/ middle	60.1	59.5	19.2	59.5	19.2	415
Higher	71.3	70.8	40.8	70.7	40.6	585
Wealth quintile						
Lowest	42.0	40.2	16.1	40.0	16.0	1,031
Second	46.3	44.1	16.2	44.1	15.9	1,041
Middle	51.6	50.1	24.7	50.1	24.4	1,024
Fourth	58.6	57.3	27.6	56.9	27.3	1,048
Highest	71.5	71.2	38.9	70.8	38.4	987
Total	53.8	52.4	24.6	52.2	24.3	5,132

Note: "Height" refers to length (recumbent measurement) or height (standing measurement).

Table 11.3 Early breastfeeding

Percentage of children born in the past 2 years who were ever breastfed, percentage who were put to the breast within 1 hour of birth, and percentage who were exclusively breastfed for the first 2 days after birth, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage ever breastfed	Percentage who were put to the breast within 1 hour of birth	Percentage exclusively breastfed for the first 2 days after birth[1]	Number of children born in the past 2 years
Sex				
Male	96.2	42.6	76.8	1,149
Female	97.2	39.0	78.1	1,064
Breastfeeding counseling during ANC[2]				
Counseled	97.4	43.9	80.6	1,487
Not counseled/don't know	95.9	35.6	84.2	191
Did not receive ANC	94.9	34.1	66.4	534
Assistance at delivery				
Health personnel[3]	96.7	40.7	77.5	2,160
Traditional birth attendant	*	*	*	26
Other	*	*	*	25
No one	*	*	*	1
Place of delivery				
Health facility	96.7	40.5	77.6	2,096
At home	95.9	47.6	74.9	115
Other	*	*	*	1
Type of delivery				
Vaginal birth	96.8	43.2	79.0	1,983
Cesarean section	96.1	20.9	64.6	230
Breastfeeding counseling during PNC[2,4]				
Counseled	97.2	41.5	77.8	1,859
Not counseled/don't know	92.9	37.2	74.7	207
Breastfeeding observation during PNC[2,4]				
Observed	97.2	42.0	77.1	1,754
Not observed/don't know	94.4	35.8	79.5	312
Residence				
Urban	95.5	37.2	75.9	578
Rural	97.1	42.1	78.0	1,635
Region				
Dushanbe	96.7	33.6	72.5	222
GBAO	99.3	72.0	86.2	27
Sughd	96.3	52.6	88.7	620
DRS	97.8	55.1	85.6	501
Khatlon	96.2	24.7	65.4	844
FTF districts	96.2	21.4	70.1	507
Mother's education				
None/primary	94.9	42.2	77.0	109
General basic	96.7	40.9	78.2	572
General secondary	96.4	38.7	77.0	1,014
Professional primary/ middle	97.2	48.1	80.0	233
Higher	98.1	41.9	75.8	285
Wealth quintile				
Lowest	96.2	42.5	73.9	410
Second	97.2	38.5	79.4	425
Middle	96.8	40.3	78.1	460
Fourth	96.2	41.9	79.1	474
Highest	97.0	41.0	76.6	443
Total	96.7	40.8	77.5	2,213

Note: Table is based on children born in the 2 years preceding the survey regardless of whether the children were living or dead at the time of the interview. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.
ANC = antenatal care
PNC = postnatal care
[1] Children given nothing other than breast milk to eat or drink during the first 2 days after delivery
[2] Information available for the most recent live birth only
[3] Doctor, nurse, or midwife
[4] Women were asked about counseling on breastfeeding by any health care provider in the first 2 days after their most recent live birth regardless of where they gave birth.

Table 11.4 Breastfeeding status according to age

Among youngest children age 0–5 months living with their mother, percentage exclusively breastfeeding and percentage receiving mixed milk feeding; among all children age 12–23 months, percentage currently breastfeeding; and among all children age 0–23 months, percentage using a bottle with a nipple, according to background characteristics, Tajikistan DHS 2023

	Among youngest children age 0–5 months living with their mother:			Among all children age 12–23 months:		Among all children age 0–23 months:	
Background characteristic	Percentage exclusively breastfeeding	Percentage receiving mixed milk feeding[1]	Number of children	Percentage currently breastfeeding[2]	Number of children	Percentage using a bottle with a nipple	Number of children
Age in months							
0–1	68.7	10.9	197	na	na	14.5	204
2–3	37.5	24.3	193	na	na	34.6	202
4–5	18.0	33.4	214	na	na	46.5	217
6–11	na	na	na	na	na	56.2	547
12–15	na	na	na	70.7	353	55.3	353
16–19	na	na	na	52.3	306	47.1	306
20–23	na	na	na	40.4	347	43.5	347
Sex							
Male	40.1	23.3	316	56.2	513	47.0	1,131
Female	41.5	23.0	288	53.1	494	44.7	1,045
Residence							
Urban	36.8	28.0	156	53.9	260	53.4	570
Rural	42.2	21.4	448	54.9	746	43.2	1,606
Region							
Dushanbe	24.9	33.9	61	52.4	98	59.4	220
GBAO	(56.7)	(29.7)	6	54.6	14	42.2	26
Sughd	51.0	19.7	182	53.5	278	47.8	602
DRS	38.5	19.2	130	48.0	234	46.3	493
Khatlon	37.7	25.2	225	60.2	382	40.8	835
FTF districts	43.5	21.4	143	62.3	225	42.0	506
Mother's education							
None/primary	(32.6)	(19.3)	34	(55.5)	54	44.6	108
General basic	31.0	28.3	143	62.2	256	47.9	559
General secondary	43.0	18.9	280	55.8	472	44.0	998
Professional primary/ middle	44.8	28.5	73	42.8	95	40.4	229
Higher	51.5	26.0	73	43.8	129	53.4	282
Wealth quintile							
Lowest	42.6	16.6	113	55.7	199	33.9	404
Second	40.4	28.6	110	58.8	200	44.4	418
Middle	44.9	15.8	122	53.9	214	42.7	451
Fourth	39.6	22.8	141	52.0	206	46.3	463
Highest	36.6	32.3	118	52.9	187	61.1	439
Total	40.8	23.1	604	54.6	1,006	45.9	2,176

Note: Breastfeeding status refers to a "24-hour" period (yesterday during the day or at night). Figures in parentheses are based on 25–49 unweighted cases.
na = not applicable
[1] Received breast milk and infant formula and/or animal milk. Excludes yogurt drinks because they are generally not fed as a substitute for breast milk.
[2] Corresponds to the IYCF indicator "continued breastfeeding"

Table 11.5 Infant feeding practices by age

Percent distribution of youngest children age 0–5 months living with their mother by feeding category, according to age in months, Tajikistan DHS 2023

Age group in months	Breast milk only (exclusively breastfed)	Breast milk and plain water only	Breast milk and non-milk liquids[1]	Breast milk and animal milk and/or infant formula[2]	Breast milk and solid, semisolid, or soft foods[3]	Not breastfed	Unknown[4]	Total	Number of youngest children 0–5 months living with their mother
0–1	68.7	12.6	0.8	10.5	1.1	6.2	0.0	100.0	197
2–3	37.5	29.2	0.7	23.0	4.0	5.6	0.0	100.0	193
4–5	18.0	24.1	1.7	28.8	13.5	13.2	0.8	100.0	214
0–5	40.8	22.0	1.1	21.0	6.4	8.5	0.3	100.0	604

Note: Breastfeeding status refers to a "24-hour" period (yesterday during the day or at night). The categories of breast milk only, breast milk and plain water only, breast milk and non-milk liquids, breast milk and formula and/or animal milk, breast milk and solid, semisolid, or soft foods, and not breastfed are hierarchical and mutually exclusive. When combined with children whose feeding category is classified as unknown due to "don't know" responses, the percentages in each row add to 100%.

[1] Children fed breast milk along with non-milk liquids (e.g., juice, herbal tea, sweetened water, flavored water). Children in this category may have also been fed plain water.

[2] Children fed breast milk along with animal milk, infant formula, and/or animal milk-based yogurt drinks. Children in this category may have also been fed non-milk liquids and/or plain water.

[3] Children fed breast milk along with solid, semisolid, or soft food from any food group (e.g., grains, meat, eggs, fruits, vegetables). Children in this category may have also been fed plain water, non-milk liquids, and/or animal milk, infant formula, and animal milk-based yogurt drinks.

[4] Not classified elsewhere due to "don't know" responses

Table 11.6 Liquids consumed by children in the day or night preceding the interview

Percentage of youngest children under age 2 living with their mother by type of liquids consumed in the day or night preceding the interview, according to age and breastfeeding status, Tajikistan DHS 2023

Age in months	Plain water	Infant formula[1]	Animal milk		Yogurt drinks		Fruit juice or fruit-flavored drinks	Sodas, malt drinks, sports drinks, or energy drinks	Tea, coffee, or herbal drinks		Clear broth or clear soup	Other liquids		Number of youngest children under age 2 living with their mother
			Any	Sweet/ flavored	Any	Sweet/ flavored			Any	Sweet-ened		Any	Sweet-ened	
BREASTFEEDING CHILDREN														
0–1	22.2	9.0	2.6	2.2	0.0	0.0	0.0	0.0	1.2	1.2	0.9	0.0	0.0	185
2–3	53.0	20.3	6.8	4.4	0.0	0.0	0.0	0.0	3.1	2.1	1.4	0.0	0.0	182
4–5	70.0	29.4	12.9	7.8	1.2	1.2	1.0	0.0	14.0	7.9	8.3	0.6	0.0	186
6–8	82.5	28.5	28.2	14.7	11.3	7.3	9.8	0.9	27.6	20.3	35.8	0.9	0.0	180
9–11	92.1	22.5	31.7	17.5	16.5	11.2	17.0	1.0	48.8	33.9	50.7	3.2	0.0	267
12–17	95.9	15.7	47.9	28.2	27.1	18.7	23.3	2.4	53.6	41.6	52.9	2.0	0.0	332
18–23	98.3	9.8	52.5	29.2	24.0	17.1	31.0	3.4	57.5	42.7	61.2	3.7	0.0	210
0–5	48.4	19.6	7.4	4.8	0.4	0.4	0.3	0.0	6.1	3.8	3.5	0.2	0.0	553
6–11	88.3	24.9	30.3	16.4	14.4	9.6	14.1	1.0	40.2	28.4	44.7	2.3	0.0	447
12–23	96.8	13.4	49.7	28.6	25.9	18.1	26.3	2.8	55.1	42.0	56.1	2.7	0.0	542
6–23	92.9	18.6	40.9	23.1	20.7	14.2	20.8	2.0	48.4	35.9	50.9	2.5	0.0	989
Total	77.0	19.0	28.9	16.5	13.4	9.3	13.5	1.3	33.2	24.4	33.9	1.7	0.0	1,542
NONBREASTFEEDING CHILDREN														
0–1	*	*	*	*	*	*	*	*	*	*	*	*	*	12
2–3	*	*	*	*	*	*	*	*	*	*	*	*	*	11
4–5	(81.7)	(58.0)	(21.0)	(21.0)	(10.4)	(4.7)	(1.1)	(0.0)	(11.2)	(11.2)	(26.3)	(0.0)	(0.0)	28
6–8	(87.1)	(58.7)	(43.9)	(33.6)	(10.2)	(10.2)	(7.6)	(0.0)	(28.5)	(20.8)	(42.7)	(3.6)	(0.0)	46
9–11	94.5	55.3	48.8	34.0	22.7	19.3	15.9	1.9	52.0	37.6	59.2	1.1	0.0	51
12–17	97.6	33.7	66.7	39.7	32.8	24.8	24.0	3.0	62.6	48.2	65.6	6.1	0.0	157
18–23	98.1	15.5	61.9	33.7	32.6	25.8	27.0	4.4	67.0	55.1	48.9	9.2	0.3	197
0–5	(65.9)	(41.0)	(17.0)	(13.6)	(6.8)	(2.6)	(0.6)	(1.1)	(9.9)	(9.9)	(19.4)	(1.5)	(0.0)	51
6–11	91.0	56.9	46.4	33.8	16.7	15.0	12.0	1.0	40.8	29.6	51.3	2.3	0.0	97
12–23	97.9	23.6	64.0	36.4	32.7	25.3	25.6	3.8	65.1	52.1	56.3	7.8	0.2	354
6–23	96.4	30.7	60.2	35.8	29.2	23.1	22.7	3.2	59.8	47.2	55.2	6.7	0.1	451
Total	93.3	31.8	55.8	33.5	27.0	21.0	20.4	3.0	54.7	43.4	51.6	6.1	0.1	503

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.
[1] Infant formula includes NAN, Nutrilac, Malutka, and Malysh.

Table 11.7 Foods consumed by children in the day or night preceding the interview

Percentage of youngest children under age 2 living with their mother by type of foods consumed in the day or night preceding the interview, according to age and breastfeeding status, Tajikistan DHS 2023

Age in months	Grains	Roots, tubers, and plantains	Pulses (beans, peas, lentils), nuts, and seeds	Dairy products (milk, infant formula, yogurt, cheese)	Flesh foods (meat, fish, poultry, organ meats)	Eggs	Vitamin A-rich fruits and vegetables	Other fruits and vegetables	Sweet foods[1]	Fried and salty foods[2]	Other solid, semisolid, and soft food	Number of youngest children under age 2 living with their mother
BREASTFEEDING CHILDREN												
0–1	0.0	0.0	0.9	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	185
2–3	1.3	0.9	1.0	1.0	0.0	0.4	0.0	0.9	1.0	0.0	0.0	182
4–5	5.7	5.8	1.5	6.3	2.2	1.6	1.5	3.2	1.4	0.0	0.0	186
6–8	31.4	28.8	3.8	27.4	7.0	7.6	8.7	11.2	11.8	1.3	1.4	180
9–11	48.4	52.3	4.2	26.9	15.5	22.0	19.4	23.9	29.5	3.0	2.4	267
12–17	69.7	64.3	8.2	36.7	28.0	28.9	23.8	35.8	35.9	4.6	5.3	332
18–23	77.9	71.0	18.5	44.1	31.5	37.5	32.6	45.2	34.8	9.2	7.5	210
0–5	2.3	2.2	1.1	2.6	0.7	0.7	0.5	1.4	0.8	0.0	0.0	553
6–11	41.6	42.8	4.0	27.1	12.1	16.2	15.1	18.8	22.4	2.3	2.0	447
12–23	72.9	66.9	12.2	39.6	29.4	32.2	27.2	39.4	35.5	6.4	6.2	542
6–23	58.7	56.0	8.5	33.9	21.6	25.0	21.8	30.1	29.6	4.6	4.3	989
Total	38.5	36.7	5.9	22.7	14.1	16.3	14.1	19.8	19.3	2.9	2.8	1,542
NONBREASTFEEDING CHILDREN												
0–1	*	*	*	*	*	*	*	*	*	*	*	12
2–3	*	*	*	*	*	*	*	*	*	*	*	11
4–5	(14.8)	(11.5)	(0.0)	(10.6)	(5.7)	(5.7)	(2.7)	(9.2)	(5.3)	(0.0)	(0.0)	28
6–8	(39.2)	(46.3)	(0.0)	(25.5)	(5.1)	(15.5)	(17.7)	(16.6)	(18.1)	(0.0)	(0.0)	46
9–11	63.9	70.1	9.7	48.5	24.0	27.8	17.8	30.0	38.3	4.3	3.2	51
12–17	84.0	78.0	15.0	40.0	37.8	34.0	37.3	47.4	42.4	4.1	6.3	157
18–23	85.9	80.1	20.8	29.3	56.9	49.7	35.1	54.5	51.5	6.7	9.1	197
0–5	(11.9)	(10.1)	(1.5)	(9.6)	(4.6)	(4.6)	(3.0)	(6.6)	(4.4)	(0.0)	(1.5)	51
6–11	52.1	58.8	5.1	37.5	15.0	21.9	17.7	23.7	28.7	2.2	1.7	97
12–23	85.0	79.2	18.2	34.1	48.4	42.7	36.1	51.4	47.5	5.5	7.9	354
6–23	78.0	74.8	15.4	34.8	41.2	38.2	32.2	45.4	43.4	4.8	6.5	451
Total	71.2	68.2	14.0	32.2	37.5	34.8	29.2	41.4	39.4	4.3	6.0	503

Note: See the Woman's Questionnaire for list of liquids and foods. 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.

[1] Sentinel sweet foods such as chocolates, candies, pastries, cakes, biscuits, ice cream, or popsicles

[2] Sentinel fried and salty foods such as chips, crisps, puffs, French fries, fried dough, or instant noodles

Table 11.8 Minimum dietary diversity, minimum meal frequency, and minimum acceptable diet among children

Percentage of youngest children age 6–23 months living with their mother who are fed a minimum acceptable diet based on breastfeeding status, number of food groups, and times they are fed during the day or night preceding the survey, according to background characteristics, Tajikistan DHS 2023

	Among youngest breastfed children age 6–23 months living with their mother, percentage fed:				Among youngest nonbreastfed children age 6–23 months living with their mother, percentage fed:					Among all youngest children age 6–23 months living with their mother, percentage fed:			
Background characteristic	Minimum dietary diversity[1]	Minimum meal frequency[2]	Minimum acceptable diet[3]	Number of breastfed children age 6–23 months	Minimum milk feeding frequency[4]	Minimum dietary diversity[1]	Minimum meal frequency[5]	Minimum acceptable diet[6]	Number of non-breastfed children age 6–23 months	Minimum dietary diversity[1]	Minimum meal frequency[7]	Minimum acceptable diet[8]	Number of all children age 6–23 months
Age in months													
6–11	16.0	19.6	3.7	447	89.6	12.5	58.6	8.4	97	15.3	26.6	4.5	544
6–8	9.9	36.8	6.1	180	(89.2)	(2.4)	(51.7)	(2.4)	46	8.3	39.9	5.4	226
9–11	20.1	7.9	2.0	267	90.0	21.6	65.0	13.9	51	20.3	17.1	3.9	318
12–17	30.8	11.5	5.5	332	79.2	27.7	70.4	18.2	157	29.8	30.5	9.6	489
18–23	44.4	10.0	4.6	210	68.0	39.6	57.7	23.6	197	42.1	33.1	13.8	407
Sex													
Male	27.3	17.2	5.6	523	79.3	32.1	65.0	21.1	232	28.8	31.9	10.3	755
Female	26.6	12.2	3.2	466	73.7	27.0	59.5	15.7	220	26.7	27.4	7.2	685
Residence													
Urban	33.5	19.5	7.1	255	82.6	34.1	68.8	19.6	118	33.7	35.1	11.1	373
Rural	24.7	13.2	3.6	734	74.4	28.1	60.0	18.1	334	25.7	27.8	8.1	1,067
Region													
Dushanbe	27.3	20.3	5.6	94	89.6	22.6	74.7	14.1	52	25.7	39.8	8.6	146
GBAO	33.5	20.1	8.5	12	(86.2)	(28.9)	(68.0)	(26.0)	6	32.0	36.1	14.3	18
Sughd	42.8	17.1	8.7	256	65.2	53.5	58.8	30.2	131	46.4	31.2	15.9	387
DRS	21.5	15.2	1.8	204	84.9	25.4	63.5	18.4	130	23.0	34.0	8.3	334
Khatlon	19.8	11.9	2.9	423	74.0	13.1	59.6	8.4	133	18.2	23.3	4.2	555
FTF districts	22.5	14.5	3.1	256	(74.9)	(12.0)	(60.5)	(9.8)	72	20.2	24.6	4.6	328
Mother's education													
None/primary	(21.3)	(8.2)	(0.0)	45	*	*	*	*	22	24.4	26.4	4.8	68
General basic	25.4	14.2	3.9	280	78.4	25.6	56.4	16.1	113	25.4	26.3	7.4	394
General secondary	28.3	15.0	5.5	454	74.7	26.8	64.7	17.1	192	27.9	29.8	8.9	646
Professional primary/middle	22.5	18.5	4.2	91	70.7	31.5	57.9	19.1	52	25.8	32.9	9.7	143
Higher	31.2	15.4	4.2	118	81.9	41.9	68.2	26.6	72	35.2	35.3	12.7	190
Wealth quintile													
Lowest	20.2	14.0	3.7	185	70.9	14.2	53.9	8.9	86	18.3	26.7	5.4	271
Second	23.3	13.1	4.8	207	82.5	31.3	67.8	23.5	86	25.7	29.2	10.3	293
Middle	26.0	16.9	4.5	202	71.2	29.1	56.6	14.3	93	27.0	29.4	7.6	295
Fourth	31.9	11.9	3.3	199	74.4	38.2	64.1	24.3	91	33.9	28.2	9.9	290
Highest	33.2	18.3	6.0	196	83.5	34.3	68.8	21.0	96	33.6	34.9	10.9	292
Total	27.0	14.8	4.5	989	76.6	29.6	62.3	18.5	451	27.8	29.7	8.9	1,440

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.
[1] Minimum dietary diversity is receiving foods from five or more of the following eight food groups: a. breast milk; b. grains, white/pale starchy roots, tubers, and plantains; c. beans, peas, lentils, nuts, and seeds; d. dairy products (tinned, powdered, or fresh animal milk; infant formula; yogurt; cheese); e. flesh foods (meat, fish, poultry, organ meats); f. eggs; g. vitamin A-rich fruits and vegetables; h. other fruits and vegetables.
[2] For breastfed children, minimum meal frequency is receiving solid, semisolid, or soft food at least twice a day for infants age 6–8 months and at least three times a day for children age 9–23 months.
[3] For breastfed children, minimum acceptable diet is being fed with a minimum dietary diversity (footnote 1) and a minimum meal frequency (footnote 2).
[4] For nonbreastfed children, minimum milk feeding frequency is two or more feedings of infant formula; tinned, powdered, or fresh animal milk; and liquid or solid yogurt.
[5] For nonbreastfed children, minimum meal frequency is receiving solid, semisolid, or soft food or milk feeds at least four times a day. At least one of the feeds must be a solid, semisolid, or soft feed.
[6] For nonbreastfed children, minimum acceptable diet is being fed with a minimum dietary diversity (footnote 1), a minimum milk feeding frequency (footnote 4), and a minimum meal frequency (footnote 5).
[7] Minimum meal frequency is receiving the minimum recommended number of feeds per day according to age and breastfeeding status as defined in footnotes 2 and 5.
[8] Minimum acceptable diet is being fed with a minimum dietary diversity (footnote 1), a minimum meal frequency (footnotes 2 and 5), and a minimum milk feeding frequency (footnote 4).

Table 11.9 Egg and/or flesh food consumption and unhealthy feeding practices among children age 6–23 months

Percentage of youngest children age 6–23 months living with their mother who consumed eggs and/or flesh food, and percentage who experienced each specified unhealthy feeding practice, during the day or night preceding the survey, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Eggs and/or flesh foods (meat, fish, poultry, organ meats)	Unhealthy feeding practices:			Number of youngest children age 6–23 months living with their mother
		Sweet beverage[1]	Unhealthy food[2]	Zero vegetables or fruits[3]	
Age in months					
6–11	23.5	50.2	23.5	72.2	544
6–8	13.2	41.8	13.1	81.8	226
9–11	30.8	56.2	30.9	65.3	318
12–17	46.7	71.1	38.7	49.6	489
18–23	60.6	76.9	46.8	41.5	407
Sex					
Male	41.9	63.5	35.0	56.6	755
Female	41.9	66.3	35.5	55.0	685
Breastfeeding status					
Breastfeeding	35.2	60.2	31.1	61.4	989
Not breastfeeding	56.5	75.1	44.3	43.7	451
Residence					
Urban	48.2	68.0	34.9	50.6	373
Rural	39.7	63.8	35.4	57.7	1,067
Region					
Dushanbe	48.0	71.9	33.1	61.5	146
GBAO	38.4	91.0	34.8	46.6	18
Sughd	57.6	74.7	50.4	33.1	387
DRS	37.1	60.5	35.1	59.1	334
Khatlon	32.3	57.9	25.3	68.5	555
FTF districts	33.6	57.1	23.4	67.0	328
Mother's education					
None/primary	37.9	64.8	31.8	58.7	68
General basic	40.0	68.6	36.0	60.1	394
General secondary	42.4	61.2	33.8	56.3	646
Professional primary/ middle	38.9	58.8	33.1	53.7	143
Higher	47.7	74.2	41.5	46.0	190
Wealth quintile					
Lowest	30.7	59.0	29.4	66.3	271
Second	40.0	65.6	33.2	54.0	293
Middle	44.8	61.1	38.2	55.2	295
Fourth	45.3	70.6	37.1	54.6	290
Highest	47.9	67.6	37.8	49.9	292
Total	41.9	64.9	35.2	55.8	1,440

[1] Sweet beverages include sweet/flavored milk and yogurt drinks, fruit juice and fruit-flavored drinks, kompot, mors, cacao, sodas, sports drinks, energy drinks, sweetened tea, coffee, herbal drinks, and other sweetened liquids.
[2] Unhealthy foods are a group of sentinel food types that include sweet foods such as chocolates, candies, ice cream, halva, cakes, cookies, wafers, pastries, sweet rolls, and chak chak and fried and salty foods such as chips, suhariki, instant noodles (e.g., Rolton or Doshirak), French fries, piroshki, chebureki, and belyashi.
[3] No vitamin A-rich fruits or vegetables and no other fruits or vegetables

Table 11.10 Infant and young child feeding (IYCF) indicators

Percentage of children fed according to various IYCF practices, Tajikistan DHS 2023

IYCF #	IYCF abbre-viation	DHS-8 table #	Indicator	Indicator definition and denominator	Value
1	EvBF	11.3	Ever breastfed[1]	Percentage of children born in the last 2 years who were ever breastfed	96.7
				Number of children born in the last 2 years	2,213
2	EIBF	11.3	Early initiation of breastfeeding[1]	Percentage of children born in the last 2 years who were put to the breast within 1 hour of birth	40.8
				Number of children born in the last 2 years	2,213
3	EBF2D	11.3	Exclusively breastfed for the first 2 days after birth[1]	Percentage of children born in the last 2 years who were fed exclusively with breast milk for the first 2 days after birth	77.5
				Number of children born in the last 2 years	2,213
4	EBF	11.4	Exclusive breastfeeding under 6 months	Percentage of children age 0–5 months who were fed exclusively with breast milk during the previous day	40.8
				Number of youngest children age 0–5 months living with their mother	604
5	MixMF	11.4	Mixed milk feeding under 6 months	Percentage of children age 0–5 months who were fed both breast milk and formula and/or animal milk during the previous day	23.1
				Number of youngest children age 0–5 months living with their mother	604
6	CBF	11.4	Continued breastfeeding 12–23 months	Percentage of children age 12–23 months who were fed breast milk during the previous day	54.6
				Number of children age 12–23 months	1,006
7	ISSSF	-	Introduction of solid, semisolid, or soft foods 6–8 months	Percentage of children age 6–8 months who were fed solid, semisolid, or soft foods during the previous day	55.5
				Number of youngest children age 6–8 months living with their mother	226
8	MDD	11.8	Minimum dietary diversity 6–23 months	Percentage of children age 6–23 months who were fed foods and beverages from at least 5 out of 8 defined food groups during the previous day	27.8
				Number of youngest children age 6–23 months living with their mother	1,440
9	MMF	11.8	Minimum meal frequency 6–23 months	Percentage of children age 6–23 months who were fed solid, semisolid, or soft foods (but also including milk feeds for nonbreastfed children) the minimum number of times or more during the previous day	29.7
				Number of youngest children age 6–23 months living with their mother	1,440
10	MMFF	11.8	Minimum milk feeding frequency for nonbreastfed children 6–23 months	Percentage of nonbreastfed children age 6–23 months who were given at least two milk feeds during the previous day	76.6
				Number of youngest children age 6–23 months living with their mother who were not breastfed	451
11	MAD	11.8	Minimum acceptable diet 6–23 months	Percentage of children age 6–23 months who were fed a minimum acceptable diet during the previous day	8.9
				Number of youngest children age 6–23 months living with their mother	1,440
12	EFF	11.9	Egg and/or flesh food consumption 6–23 months	Percentage of children age 6–23 months who were fed eggs and/or flesh food during the previous day	41.9
				Number of youngest children age 6–23 months living with their mother	1,440
13	SWB	11.9	Sweet beverage consumption 6–23 months	Percentage of children age 6–23 months who were given a sweet beverage during the previous day	64.9
				Number of youngest children age 6–23 months living with their mother	1,440
14	UFC	11.9	Unhealthy food consumption 6–23 months	Percentage of children age 6–23 months who were fed selected sentinel unhealthy foods during the previous day	35.2
				Number of youngest children age 6–23 months living with their mother	1,440
15	ZVF	11.9	Zero vegetable or fruit consumption 6–23 months	Percentage of children age 6–23 months who were not fed any vegetables or fruits during the previous day	55.8
				Number of youngest children age 6–23 months living with their mother	1,440
16	BoF	11.4	Bottle feeding 0–23 months	Percentage of children age 0–23 months who were fed from a bottle with a nipple during the previous day	45.9
				Number of children age 0–23 months	2,176
17		11.5	Infant feeding area graph	Percent distribution of youngest children age 0–5 months living with their mother, by feeding category	-
				Number of youngest children age 0–5 months living with their mother	-

[1] Includes children born in the 2 years preceding the survey regardless of whether the children were living or dead at the time of the interview

Table 11.11 Infant and young child feeding counseling

Among women age 15–49 whose youngest child age 6–23 months is living with them, percentage who talked with a health care provider or community health worker about how or what to feed their child in the past 6 months, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Counseled in past 6 months about how or what to feed their child	Number of women whose youngest child age 6–23 months is living with them
Child's age in months		
6–11	44.5	544
12–23	43.4	896
Child's sex		
Male	43.6	755
Female	44.0	685
Age		
15–19	*	13
20–29	43.4	997
30–39	44.8	396
40–49	(43.9)	35
Residence		
Urban	58.7	373
Rural	38.6	1,067
Region		
Dushanbe	76.3	146
GBAO	69.7	18
Sughd	58.7	387
DRS	34.7	334
Khatlon	29.5	555
FTF districts	23.5	328
Mother's education		
None/primary	39.0	68
General basic	42.0	394
General secondary	39.5	646
Professional primary/ middle	50.2	143
Higher	58.9	190
Wealth quintile		
Lowest	31.7	271
Second	39.1	293
Middle	37.6	295
Fourth	45.3	290
Highest	64.4	292
Total	43.8	1,440

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 11.12 Prevalence of anemia in children

Percentage of children age 6–59 months classified as having anemia, and mean hemoglobin level, according to background characteristics, Tajikistan DHS 2023

Background characteristic	6–23 months / 24–59 months	Anemia status by hemoglobin level: Any <10.5 g/dl / <11.0 g/dl	Mild 9.5–10.4 g/dl / 10.0–10.9 g/dl	Moderate 7.0–9.4 g/dl / 7.0–9.9 g/dl	Severe <7.0 g/dl / <7.0 g/dl	Mean hemoglobin level (g/dl)	Number of children age 6–59 months
Age in months							
6–11		36.7	24.3	12.4	0.0	10.9	545
12–23		39.3	25.3	13.9	0.1	10.7	1,025
24–35		44.0	28.2	15.3	0.4	11.0	978
36–47		31.5	23.2	8.0	0.3	11.4	1,044
48–59		26.8	19.0	7.8	0.0	11.5	1,033
6–23		38.4	24.9	13.4	0.1	10.8	1,570
24–59		33.9	23.4	10.3	0.3	11.3	3,054
Sex							
Male		37.1	24.4	12.4	0.3	11.1	2,411
Female		33.6	23.4	10.1	0.1	11.2	2,214
Mother's interview status							
Interviewed		35.6	24.1	11.3	0.2	11.1	4,545
Not interviewed but in household		(29.8)	(18.1)	(11.8)	(0.0)	(11.2)	34
Not interviewed and not in the household[1]		23.1	12.5	10.6	0.0	11.5	46
Residence							
Urban		31.9	21.6	10.1	0.2	11.1	1,131
Rural		36.6	24.6	11.7	0.2	11.1	3,493
Region							
Dushanbe		31.1	22.7	8.2	0.2	11.1	468
GBAO		55.1	24.9	28.1	2.0	10.4	69
Sughd		32.8	21.6	10.9	0.2	11.2	1,225
DRS		41.5	27.9	13.2	0.3	11.0	1,092
Khatlon		33.9	23.2	10.6	0.0	11.2	1,771
FTF districts		32.9	23.8	9.1	0.0	11.2	1,111
Mother's education[2]							
None/primary		37.0	20.8	16.2	0.0	11.1	214
General basic		32.8	20.7	11.9	0.2	11.2	1,445
General secondary		37.8	27.6	9.9	0.3	11.1	2,049
Professional primary/ middle		33.8	20.0	13.8	0.0	11.1	393
Higher		33.8	22.4	11.3	0.1	11.1	523
Wealth quintile							
Lowest		40.0	25.1	14.6	0.3	11.0	935
Second		37.5	26.1	11.0	0.4	11.1	966
Middle		36.2	24.4	11.8	0.0	11.1	936
Fourth		34.4	23.6	10.6	0.1	11.1	919
Highest		28.4	19.9	8.3	0.2	11.3	869
Total		35.4	23.9	11.3	0.2	11.1	4,624

Note: Table is based on children who stayed in the household on the night before the interview and who were tested for anemia. Anemia classifications are based on cutoffs applied to hemoglobin levels that have been adjusted for altitude (WHO 2024). Hemoglobin is measured in grams per deciliter (g/dl) using the HemoCue 201+ device. Figures in parentheses are based on 25–49 unweighted cases.

[1] Includes children whose mothers are deceased

[2] For women who are not interviewed, information is taken from the Household Questionnaire. Excludes children whose mothers are not listed in the Household Questionnaire.

Table 11.13 Micronutrient supplementation among children

Among children age 6–59 months, percentages who were given iron tablets or syrup in the past 12 months, and percentage who were given vitamin A supplements in the past 6 months, according to background characteristics, Tajikistan DHS 2023

	Among children age 6–59 months:		
Background characteristic	Percentage given iron tablets or syrup in past 12 months[1]	Percentage given vitamin A supplements in past 6 months[2]	Number of children
Age in months			
6–8	59.9	68.8	229
9–11	63.5	83.0	319
12–17	66.3	85.1	512
18–23	62.1	86.0	494
24–35	57.3	78.8	958
36–47	53.1	63.5	998
48–59	47.7	58.9	1,000
6–23	63.4	82.6	1,553
24–59	52.7	66.9	2,956
Sex			
Male	57.0	72.5	2,359
Female	55.7	72.0	2,150
Breastfeeding status[3]			
Breastfeeding	65.1	83.1	1,136
Not breastfeeding	57.8	79.5	1,375
Mother's age			
15–19	*	*	13
20–29	56.0	72.7	2,826
30–39	56.9	72.1	1,498
40–49	56.8	69.1	172
Residence			
Urban	65.8	78.1	1,126
Rural	53.2	70.4	3,383
Region			
Dushanbe	78.9	82.7	458
GBAO	65.4	86.1	65
Sughd	50.0	76.0	1,193
DRS	55.9	72.1	1,081
Khatlon	54.7	66.5	1,713
FTF districts	50.8	61.8	1,057
Mother's education			
None/primary	61.4	62.3	246
General basic	55.2	69.8	1,385
General secondary	54.3	72.4	2,028
Professional primary/ middle	56.5	76.9	340
Higher	65.3	80.3	509
Wealth quintile			
Lowest	49.5	65.0	916
Second	52.1	68.4	927
Middle	56.3	73.2	897
Fourth	57.8	76.7	905
Highest	66.8	78.7	865
Total	56.4	72.3	4,509

Note: An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.
[1] Based on mother's recall
[2] Based on both mother's recall and the vaccination card (where available)
[3] Information available for children age 0–35 months only

Table 11.14.1 Nutritional status of women age 20–49

Among women age 20–49, percentage with height below 145 cm, mean body mass index (BMI), and percentage with specific BMI levels, according to background characteristics, Tajikistan DHS 2023

	Short stature		Body mass index[1]								
Background characteristic	Height below 145 cm	Number of women	Mean body mass index (BMI)	18.5–24.9 (total normal)	<18.5 (total thin)	17.0–18.4 (mildly thin)	<17 (moderately or severely thin)	≥25.0 (total overweight or obese)	25.0–29.9 (overweight)	≥30.0 (obese)	Number of women
Age											
20–29	1.6	3,149	23.7	62.9	6.6	4.8	1.8	30.6	22.5	8.1	2,527
30–39	0.7	2,960	26.0	44.9	2.1	1.6	0.6	53.0	35.6	17.4	2,755
40–49	0.6	1,993	28.3	30.5	0.9	0.8	0.2	68.6	34.5	34.1	1,977
Residence											
Urban	0.7	2,195	26.2	45.1	3.1	2.3	0.8	51.9	31.7	20.2	1,991
Rural	1.1	5,908	25.7	48.0	3.4	2.5	0.9	48.5	30.4	18.1	5,269
Region											
Dushanbe	0.7	864	25.9	47.5	2.8	2.0	0.8	49.8	32.1	17.6	784
GBAO	2.0	130	24.4	52.2	8.6	6.9	1.7	39.1	25.6	13.5	120
Sughd	1.3	2,288	26.0	48.2	2.6	1.9	0.8	49.2	29.0	20.1	2,067
DRS	1.1	1,924	26.3	42.7	2.7	2.0	0.7	54.7	34.2	20.5	1,742
Khatlon	0.8	2,896	25.4	49.2	4.3	3.2	1.1	46.5	29.6	16.9	2,547
FTF districts	0.2	1,596	25.2	51.5	3.4	2.5	0.9	45.1	31.4	13.7	1,416
Education											
None/primary	2.2	407	25.5	52.9	4.7	2.9	1.8	42.4	24.4	18.0	370
General basic	0.9	2,439	26.5	42.7	2.5	2.1	0.5	54.8	32.9	21.9	2,197
General secondary	1.1	3,564	25.8	48.1	2.8	2.0	0.8	49.1	31.5	17.6	3,194
Professional primary/ middle	0.8	645	25.1	51.0	5.7	4.1	1.5	43.3	26.7	16.6	558
Higher	0.6	1,048	25.2	50.3	5.1	4.0	1.1	44.6	28.1	16.5	940
Wealth quintile											
Lowest	1.1	1,534	25.4	49.5	4.4	3.2	1.2	46.1	28.6	17.5	1,367
Second	1.6	1,599	25.5	49.8	4.4	3.1	1.3	45.8	27.6	18.2	1,418
Middle	1.2	1,616	25.7	48.4	2.6	1.8	0.8	48.9	31.7	17.2	1,430
Fourth	0.7	1,642	26.1	44.7	2.6	2.1	0.4	52.7	32.6	20.1	1,489
Highest	0.5	1,713	26.3	44.2	2.8	2.2	0.6	53.1	32.8	20.2	1,555
Total	1.0	8,103	25.8	47.2	3.3	2.5	0.9	49.5	30.7	18.7	7,259

Note: Body mass index (BMI) is expressed as the ratio of weight in kilograms to the square of height in meters (kg/m^2) for adults age 20–49.
[1] Excludes pregnant women and women with a birth in the preceding 2 months

Table 11.14.2 Nutritional status of adolescent women age 15–19

Among women age 15–19, percentage with height-for-age below −2 standard deviations (SD), mean body mass index (BMI)-for-age *z* score, and percentage with specific BMI-for-age levels, according to background characteristics, Tajikistan DHS 2023

	Short stature		Body mass index-for-age[1]								
Background characteristic	Height-for-age below −2 SD	Number of women	Mean BMI-for-age *z* score	−1 SD to +1 SD (total normal)	<−1 SD (total thin)[2]	<−1 SD to −2 SD (mildly thin)	<−2 SD (moderately or severely thin)	>+1 SD (total over-weight or obese)[3]	>+1 SD to +2 SD (overweight)	>+2 SD (obese)	Number of women
Residence											
Urban	7.7	472	0.0	79.1	10.0	9.2	0.8	10.9	9.0	1.9	454
Rural	8.9	1,221	0.0	76.5	11.7	10.8	0.9	11.8	9.6	2.2	1,143
Region											
Dushanbe	8.2	202	−0.1	80.1	10.4	9.9	0.5	9.5	8.8	0.6	199
GBAO	7.4	26	−0.2	74.0	17.0	13.2	3.8	9.1	8.2	0.8	25
Sughd	8.1	468	0.1	75.3	10.2	10.0	0.3	14.4	12.0	2.4	433
DRS	9.4	410	−0.0	76.8	11.5	9.9	1.6	11.7	10.4	1.4	385
Khatlon	8.5	587	−0.0	78.2	11.9	10.9	1.0	9.9	7.0	2.9	555
FTF districts	7.2	336	0.0	79.6	10.0	9.5	0.5	10.3	7.2	3.1	315
Education											
None/primary	(7.0)	33	0.1	(76.3)	(13.2)	(13.2)	(0.0)	(10.5)	(4.8)	(5.7)	28
General basic	9.3	809	0.0	78.1	10.5	9.9	0.6	11.4	9.4	2.0	786
General secondary	8.7	627	0.1	76.1	11.3	10.7	0.6	12.6	10.0	2.6	574
Professional primary/middle	4.3	125	−0.0	76.7	12.4	9.5	2.9	10.9	10.4	0.6	116
Higher	7.2	99	−0.1	77.8	15.1	12.0	3.1	7.1	6.2	0.8	92
Wealth quintile											
Lowest	8.2	291	−0.0	77.1	11.7	10.9	0.8	11.2	8.8	2.3	280
Second	6.9	354	−0.0	77.7	13.0	12.4	0.7	9.2	5.9	3.3	340
Middle	11.2	338	0.1	74.2	11.2	9.9	1.3	14.5	13.1	1.4	314
Fourth	10.0	313	0.1	76.0	9.7	9.5	0.2	14.3	11.2	3.1	283
Highest	7.0	397	−0.1	80.3	10.5	9.1	1.4	9.2	8.6	0.7	379
Total	8.6	1,692	0.0	77.2	11.3	10.3	0.9	11.5	9.4	2.1	1,597

Note: Height-for-age and body mass index (BMI)-for-age are expressed in standard deviation units (SD) from the median of the WHO Growth Reference for adolescent women age 15–19. Figures in parentheses are based on 25–49 unweighted cases.

[1] Excludes pregnant women and women with a birth in the preceding 2 months

[2] Includes adolescent women age 15–19 who are below −2 standard deviations (SD) from the WHO Growth Reference population median

[3] Includes adolescent women age 15–19 who are above +2 standard deviations (SD) from the WHO Growth Reference population median

Table 11.15 Foods and liquids consumed by women in the day or night preceding the interview

Percentage of women age 15–49 by type of foods and liquids consumed in the day or night preceding the interview, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Grains	Roots, tubers, and plantains	Pulses (beans, peas, lentils)	Nuts and seeds	Dairy products (milk, cheese, yogurt)	Flesh foods (meat, fish, poultry, organ meats)	Eggs	Dark green leafy vegetables	Vitamin A-rich fruits and vegetables	Other vegetables	Other fruits	Sweet foods[1]	Fried and salty foods[2]	Fruit juice and fruit-flavored drinks, kompot, or mors	Sodas, malt drinks, sports drinks, and energy drinks	Sweetened tea, coffee, herbal drinks, and other sweet beverages[3]	Number of women
Age																	
15–19	98.3	88.9	41.1	33.7	66.4	85.2	60.3	26.3	78.6	81.0	70.9	68.3	26.6	38.0	39.7	87.6	1,710
20–29	98.7	90.3	44.4	27.9	65.6	87.1	63.3	28.6	80.9	77.5	67.8	63.5	14.1	35.7	24.1	89.2	3,175
30–39	98.5	90.8	48.2	28.3	67.5	84.9	61.6	29.3	81.7	82.7	68.4	60.4	11.9	35.8	22.8	89.5	2,980
40–49	98.8	90.7	49.5	29.2	68.3	86.7	64.2	33.5	83.2	83.6	70.2	62.6	12.8	38.0	24.9	89.8	2,014
Maternity status																	
Pregnant	98.8	88.6	46.7	32.0	68.9	88.5	60.7	28.8	81.8	81.8	73.4	67.5	15.6	41.8	21.8	90.1	752
Not pregnant[4]	98.6	90.4	46.0	29.1	66.7	85.8	62.6	29.5	81.1	80.9	68.6	62.9	15.3	36.1	26.9	89.0	9,127
Residence																	
Urban	98.5	91.8	44.2	27.8	68.2	90.9	67.2	34.8	78.0	81.9	70.7	71.2	17.1	42.9	36.6	87.1	2,705
Rural	98.6	89.7	46.7	29.8	66.3	84.2	60.6	27.4	82.4	80.6	68.3	60.2	14.7	34.2	22.7	89.9	7,174
Region																	
Dushanbe	98.9	91.8	45.8	20.6	70.4	93.0	67.7	36.1	70.8	82.9	72.3	74.7	15.5	50.7	45.7	83.4	1,077
GBAO	99.3	85.8	40.6	31.8	94.3	88.2	45.4	38.5	79.3	66.4	78.7	65.8	8.3	30.4	8.1	94.3	157
Sughd	98.2	95.8	53.5	35.1	68.3	93.7	65.2	42.1	89.9	86.3	79.7	71.1	14.8	35.0	23.7	90.4	2,780
DRS	98.9	91.2	42.4	28.1	66.4	78.1	60.5	22.3	80.5	81.2	65.2	56.6	16.9	34.3	22.6	91.8	2,356
Khatlon	98.6	85.1	42.8	28.0	63.6	83.1	60.7	21.7	78.0	76.6	61.6	57.8	15.1	35.2	26.4	87.8	3,509
FTF districts	99.7	81.9	43.7	28.7	63.9	82.1	57.6	25.8	79.0	75.5	60.3	56.2	17.1	38.3	31.1	86.9	1,937
Education																	
None/primary	97.2	90.6	46.5	25.9	59.6	77.7	54.4	28.8	76.9	78.0	60.7	49.9	15.4	32.2	20.1	86.1	443
General basic	98.7	89.3	46.1	26.3	66.5	82.5	61.2	26.5	78.5	81.8	67.1	60.4	16.3	35.2	26.9	89.6	3,271
General secondary	98.6	90.5	47.2	30.1	66.6	87.3	63.0	30.8	84.3	80.7	69.6	64.2	13.9	37.3	24.3	89.3	4,230
Professional primary/ middle	99.3	92.1	41.6	33.4	67.7	89.3	63.9	29.8	83.9	80.8	70.1	66.8	16.4	34.7	30.3	86.3	778
Higher	98.2	90.9	44.1	33.4	70.9	92.3	65.6	32.6	77.4	80.5	74.4	70.3	17.3	40.7	33.7	90.2	1,157
Wealth quintile																	
Lowest	98.6	87.1	42.1	17.4	65.8	72.7	55.5	18.2	77.5	74.9	62.4	45.4	10.1	30.7	16.7	88.5	1,842
Second	98.8	88.9	47.6	26.4	63.2	83.2	59.0	27.2	82.6	82.2	67.0	60.3	14.7	33.6	22.4	91.4	1,967
Middle	98.7	92.1	46.9	33.7	64.7	88.8	62.0	31.8	84.8	82.7	69.7	63.3	16.3	34.1	23.8	89.8	1,966
Fourth	98.5	89.9	48.7	37.8	69.4	90.5	65.7	33.0	83.4	81.7	71.1	69.7	17.3	38.0	28.4	89.7	1,964
Highest	98.3	93.0	44.6	30.3	70.7	93.4	68.9	35.6	77.7	82.6	74.0	75.3	17.8	45.3	39.7	86.4	2,140
Total	98.6	90.3	46.0	29.3	66.9	86.0	62.4	29.4	81.2	80.9	69.0	63.2	15.4	36.6	26.5	89.1	9,879

Note: See the Woman's Questionnaire for list of liquids and foods.
[1] Sentinel sweet foods such as chocolates, candies, ice cream, halva, cakes, cookies, wafers, pastries, sweet rolls, or chak chak
[2] Sentinel fried and salty foods such as chips, suhariki, instant noodles (e.g., Rolton or Doshirak), French fries, piroshki, chebureki, or belyashi
[3] Other sweetened beverages include beverages such as tea with sugar, coffee with sugar, cocoa, milk cocktails, and other liquids.
[4] Includes women who do not know if they are pregnant

Table 11.16 Minimum dietary diversity and unhealthy food and beverage consumption among women

Percentage of women age 15–49 consuming sweet beverages, percentage consuming sentinel unhealthy foods, and percentage achieving minimum dietary diversity for women, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Minimum dietary diversity for women[1]	Sweet beverage consumption[2]	Unhealthy food consumption[3]	Number of women
Age				
15–19	85.1	95.5	73.1	1,710
20–29	86.5	94.4	67.5	3,175
30–39	86.8	94.5	63.6	2,980
40–49	89.4	94.4	66.1	2,014
Maternity status				
Pregnant	88.9	95.2	71.6	752
Not pregnant[4]	86.8	94.6	66.6	9,127
Residence				
Urban	88.3	95.8	74.4	2,705
Rural	86.4	94.2	64.2	7,174
Region				
Dushanbe	86.7	97.0	76.8	1,077
GBAO	92.1	97.5	67.8	157
Sughd	94.5	94.6	73.2	2,780
DRS	84.5	96.7	62.9	2,356
Khatlon	82.4	92.4	61.8	3,509
FTF districts	83.0	91.7	60.2	1,937
Education				
None/primary	79.8	90.5	53.6	443
General basic	85.1	95.0	65.2	3,271
General secondary	88.0	94.5	67.3	4,230
Professional primary/ middle	88.0	93.9	69.8	778
Higher	90.2	96.1	74.3	1,157
Wealth quintile				
Lowest	77.1	91.8	49.3	1,842
Second	86.4	94.7	63.5	1,967
Middle	89.6	94.6	67.6	1,966
Fourth	90.9	95.3	74.1	1,964
Highest	89.7	96.4	78.4	2,140
Total	86.9	94.6	67.0	9,879

[1] Minimum dietary diversity for women is defined as consuming foods from five or more of the following 10 food groups: a. grains, roots, and tubers; b. pulses (beans, peas, lentils); c. nuts and seeds; d. dairy products (milk, cheese, yogurt); e. flesh foods (meat, fish, poultry, organ meats); f. eggs; g. dark green leafy vegetables; h. vitamin A-rich fruits and vegetables; i. other vegetables; j. other fruits.
[2] Sweet beverages include fruit juice and fruit-flavored drinks, kompot, mors, sodas, sports drinks, energy drinks, sweetened tea, coffee, cocoa, milk cocktails, and other sweetened liquids.
[3] Unhealthy foods include sweet foods such as chocolates, candies, ice cream, halva, cakes, cookies, wafers, pastries, sweet rolls, and chak chak and fried and salty foods such as chips, suhariki, instant noodles (e.g., Rolton or Doshirak), French fries, piroshki, chebureki, and belyashi.
[4] Includes women who do not know if they are pregnant

Table 11.17 Prevalence of anemia in women

Percentage of women age 15–49 classified as having anemia, and mean hemoglobin level, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Anemia status by hemoglobin level				Mean hemoglobin level (g/dl)	Number of women
	Any	Mild	Moderate	Severe		
Not pregnant	<12.0 g/dl	11.0–11.9 g/dl	8.0–10.9 g/dl	<8.0 g/dl		
Pregnant trimester 1	<11.0 g/dl	10.0–10.9 g/dl	7.0–9.9 g/dl	<7.0 g/dl		
Pregnant trimester 2	<10.5 g/dl	9.5–10.4 g/dl	7.0–9.4 g/dl	<7.0 g/dl		
Pregnant trimester 3	<11.0 g/dl	10.0–10.9 g/dl	7.0–9.9 g/dl	<7.0 g/dl		
Age						
15–19	36.0	22.5	12.8	0.7	12.2	1,684
20–29	34.1	21.1	12.6	0.3	12.1	3,126
30–39	36.4	21.1	14.2	1.0	12.1	2,944
40–49	36.6	20.6	14.6	1.5	12.1	1,992
Number of children ever born						
0	35.6	22.4	12.6	0.6	12.2	2,664
1	35.1	21.2	13.0	0.9	12.1	1,071
2–3	35.1	20.1	14.2	0.8	12.1	3,799
4–5	36.5	21.5	14.1	0.9	12.2	2,011
6+	38.9	24.3	11.8	2.7	12.2	201
Maternity status						
Pregnant	29.8	18.9	10.7	0.2	11.5	744
Not pregnant[1]	36.1	21.4	13.8	0.9	12.2	9,002
Using IUD						
Yes	35.2	20.7	13.5	1.0	12.2	1,326
No	35.7	21.3	13.6	0.8	12.1	8,420
Residence						
Urban	33.4	20.3	12.3	0.8	12.2	2,645
Rural	36.5	21.6	14.0	0.9	12.1	7,101
Region						
Dushanbe	28.4	18.0	9.6	0.8	12.3	1,056
GBAO	42.4	20.9	19.2	2.3	12.0	156
Sughd	35.8	19.6	15.0	1.2	12.1	2,737
DRS	40.8	24.6	15.1	1.1	12.0	2,328
Khatlon	34.0	21.3	12.3	0.4	12.2	3,469
FTF districts	29.4	18.9	10.4	0.2	12.4	1,931
Education						
None/primary	38.3	24.0	13.9	0.3	12.1	431
General basic	36.2	22.0	13.1	1.1	12.2	3,235
General secondary	35.1	20.3	14.0	0.7	12.2	4,173
Professional primary/ middle	35.0	20.3	14.0	0.8	12.1	768
Higher	35.3	21.9	12.6	0.8	12.1	1,139
Wealth quintile						
Lowest	38.4	23.4	13.5	1.6	12.1	1,816
Second	35.9	20.9	14.2	0.8	12.2	1,949
Middle	35.7	20.8	14.3	0.6	12.2	1,946
Fourth	35.9	21.1	14.3	0.5	12.2	1,934
Highest	32.7	20.3	11.6	0.7	12.2	2,100
Total	35.6	21.2	13.5	0.8	12.2	9,746

Note: Anemia classifications are based on cutoffs applied to hemoglobin levels that have been adjusted for altitude and cigarette smoking (WHO 2024). Hemoglobin is measured in grams per deciliter (g/dl) using the HemoCue 201+ device.

[1] Includes women who do not know if they are pregnant

Table 11.18 Presence of iodized salt in household

Among all households, percentage with salt tested for iodine content and percentage with no salt in the household, and among households with salt tested, percentage with iodized salt, according to background characteristics, Tajikistan DHS 2023

	Among all households, percentage:			Among households with tested salt:	
Background characteristic	With salt tested	With no salt in the household	Number of households	Percentage with iodized salt	Number of households
Residence					
Urban	99.9	0.1	2,393	91.0	2,391
Rural	100.0	0.0	5,642	81.4	5,640
Region					
Dushanbe	99.8	0.2	911	97.0	909
GBAO	99.9	0.1	180	75.0	180
Sughd	100.0	0.0	2,322	85.1	2,322
DRS	99.9	0.1	1,849	76.8	1,847
Khatlon	100.0	0.0	2,773	84.8	2,773
FTF districts	100.0	0.0	1,510	85.9	1,509
Wealth quintile					
Lowest	100.0	0.0	1,521	76.0	1,521
Second	100.0	0.0	1,525	80.5	1,525
Middle	99.9	0.1	1,540	83.3	1,538
Fourth	100.0	0.0	1,572	86.4	1,572
Highest	99.9	0.1	1,876	92.9	1,875
Total	99.9	0.1	8,035	84.2	8,030

Note: Salt was tested for the presence of potassium iodate.

KNOWLEDGE, ATTITUDES, AND BEHAVIOR RELATED TO HIV AND AIDS

12

Key Findings

- ***Knowledge of HIV or AIDS:*** 78% of women age 15–49 have heard of HIV or AIDS, an increase from 53% in the 2017 TjDHS.
- ***Discriminatory attitudes towards people living with HIV:*** 72% of women who have heard of HIV or AIDS expressed discriminatory attitudes towards people living with HIV.
- ***HIV testing:*** 70% of women who gave birth in the 2 years preceding the survey were tested for HIV during either antenatal care (ANC) or labor and received the results.
- ***Self-reported prevalence of STIs:*** 8% of women who had ever had sexual intercourse reported having had a sexually transmitted infection (STI) and/or STI symptoms in the 12 months preceding the survey.
- ***Knowledge of HIV prevention methods among young women:*** Only 10% of women age 15–24 are knowledgeable about HIV prevention.

This chapter presents information on the current status of HIV knowledge, attitudes, and testing coverage among all women age 15–49 and young women age 15–24.

12.1 KNOWLEDGE OF HIV OR AIDS

Nearly 8 in 10 women age 15–49 (78%) have heard of HIV or AIDS (**Table 12.1**), a substantial increase from 53% in the 2017 TjDHS.

Patterns by background characteristics

- Eighty percent of ever-married women have heard of HIV or AIDS, as compared with 67% of never-married women.
- By region, the percentages of women who have heard of HIV or AIDS are highest in Dushanbe (94%) and Gorno-Badakhshan Autonomous Oblast (GBAO) (90%) and lowest in Khatlon (77%) and Districts of Republican Subordination (DRS) (62%).
- Knowledge of HIV or AIDS increases with increasing education, from 65% among women with no education or a primary education to 91% among women with a higher education.

12.2 KNOWLEDGE AND ATTITUDES ABOUT MEDICINES TO TREAT OR PREVENT HIV

Antiretroviral medicines, or ARVs, are a powerful tool in the fight against HIV. ARVs are taken by people living with HIV to keep them healthy by preventing the virus from progressing to AIDS. By taking ARVs, individuals living with HIV also greatly reduce the risk of passing the virus on to others. Women living with HIV who take ARVs during pregnancy and breastfeeding reduce the chances of passing the virus on to their children. In addition, people who are HIV negative can take ARVs to reduce their chances of

acquiring HIV. This is called preexposure prophylaxis, or PrEP. Knowledge about and positive attitudes towards these treatment and prevention measures help to promote their use and prevent transmission of HIV.

Thirty-six percent of women have heard of ARVs, 27% know that the risk of mother-to-child transmission (MTCT) can be reduced by the mother taking special drugs, and 27% have heard of PrEP (**Table 12.2** and **Figure 12.1**). Of women who have heard of PrEP, 56% approve of people taking PrEP to prevent acquiring HIV.

Trends: The percentage of women age 15–49 who know that the risk of MTCT can be reduced by the mother taking special drugs decreased from 23% in 2012 to 20% in 2017 before increasing to 27% in 2023 (**Figure 12.2**).

Patterns by background characteristics

- The percentage of women who have heard of ARVs is higher in urban areas than in rural areas (44% versus 33%). Similarly, 31% of women in urban areas and 26% in rural areas know that the risk of MTCT can be reduced by the mother taking special drugs, and 34% and 24%, respectively, have heard of PrEP. Among women who have heard of PrEP, there is little difference by residence in the percentage who approve of people who take PrEP (57% in urban areas and 55% in rural areas).
- Knowledge of ARVs, knowledge that the risk of MTCT can be reduced by the mother taking special drugs, and knowledge of PrEP all increase with increasing education, with the largest percentage increases occurring between the general secondary and professional primary levels.

Figure 12.1 Knowledge of medicines to treat HIV or prevent HIV transmission

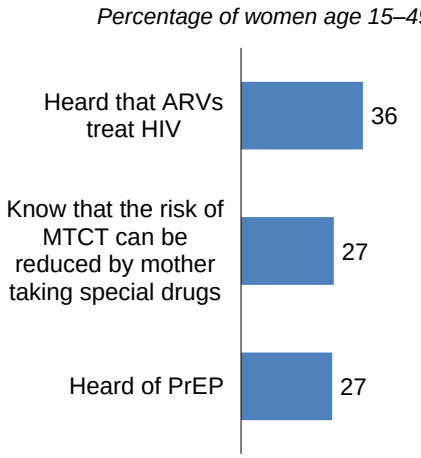
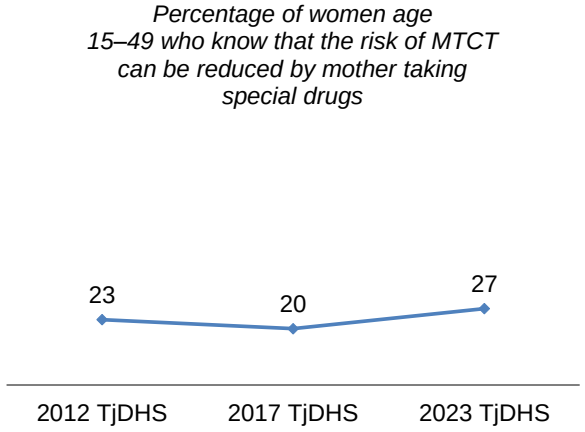


Figure 12.2 Trends in knowledge of mother-to-child transmission (MTCT)



12.3 Discriminatory Attitudes towards People Living with HIV

Widespread stigma and discrimination in a population can adversely affect both people's willingness to be tested and their adherence to antiretroviral therapy (ART). Thus, reduction of stigma and discrimination in a population is an important indicator of the success of programs targeting HIV prevention and control.

Discriminatory attitudes towards people living with HIV

Women were asked two questions to assess discriminatory attitudes towards people living with HIV. Respondents with discriminatory attitudes towards people living with HIV are those who say that they would not buy fresh vegetables from a shopkeeper or vendor if they knew that person had HIV or who say that children living with HIV should not be allowed to attend school with children who do not have HIV.

Sample: Women age 15–49 who have heard of HIV or AIDS

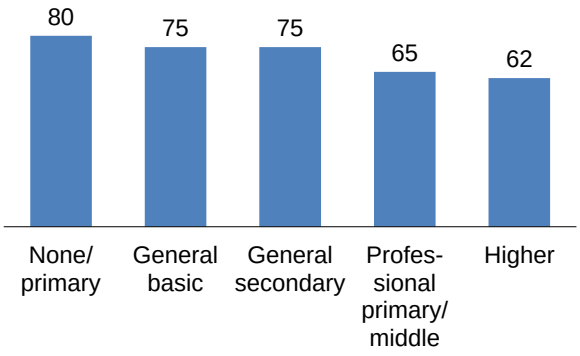
Seventy-two percent of women who have heard of HIV or AIDS expressed discriminatory attitudes towards people living with HIV (**Table 12.3**). Sixty-six percent of women did not think that children living with HIV should be able to attend school with children who are HIV negative, an increase from 52% in 2017.

Patterns by background characteristics

- The percentages of women with discriminatory attitudes toward people living with HIV are lowest in Dushanbe and GBAO (52% and 50%, respectively) and highest in Sughd and DRS (78% and 77%, respectively).
- Discriminatory attitudes decrease with increasing education. Eighty percent of women with no education or a primary education have discriminatory attitudes towards people living with HIV, as compared with 62% of women with a higher education (**Figure 12.3**).

Figure 12.3 **Discriminatory attitudes towards people living with HIV by education**

Percentage among women age 15–49 who have heard of HIV



Note: Respondents have discriminatory attitudes if they do not think that children living with HIV should be able to attend school with children who are HIV negative or would not buy fresh vegetables from a shopkeeper who has HIV.

12.4 Multiple Sexual Partners

Less than 1% of women had two or more sexual partners in the past 12 months. The mean lifetime number of sexual partners among women is 1.1 (**Table 12.4**).

12.5 Coverage of HIV Testing Services

HIV testing programs diagnose people living with HIV so that they can be linked to care and access antiretroviral therapy (ART). Knowledge of HIV status helps HIV-negative individuals reduce their risk and remain negative.

12.5.1 HIV Testing of Pregnant Women

Sixty percent of women who gave birth in the 2 years preceding the survey had an HIV test during antenatal care (ANC) and received the test results (**Table 12.5**). Seventy percent of women were tested for HIV during either ANC or labor and received the results. A higher percentage of women in Dushanbe (85%) and GBAO (87%) than in Khatlon (68%) and DRS (57%) were tested for HIV during ANC or labor and received the results. The percentage of women who had an HIV test and received the results increases with both increasing education and increasing household wealth.

12.5.2 Experience with Prior HIV Testing

Forty-nine percent of women have ever been tested for HIV, and almost all of these women received their test results. Nineteen percent of women were tested for HIV in the 12 months preceding the survey and received the results of the most recent test (**Table 12.6** and **Figure 12.4**). Eleven percent of women have been tested for HIV once in their life, 12% have been tested twice, and 27% have been tested three or more times (**Table 12.7**).

Trends: The percentage of women who have ever been tested for HIV and received the results increased from 13% in 2012 to 48% in 2023 (**Figure 12.5**).

Patterns by background characteristics

- The percentage of women who have ever been tested for HIV and received results increases with increasing education, from 40% among those with no education or a primary education to 64% among those with a professional primary/middle education or a higher education (**Figure 12.6**).

Figure 12.4 **HIV testing**

Percentage of women age 15–49

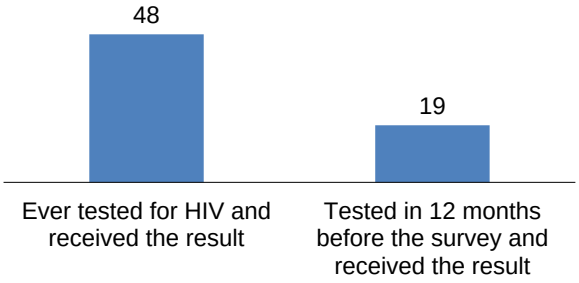


Figure 12.5 **Trends in HIV testing**

Percentage of women age 15–49 who have ever been tested for HIV and received the results

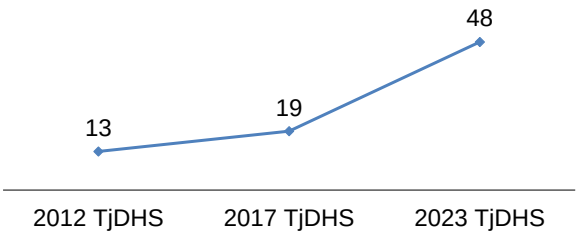
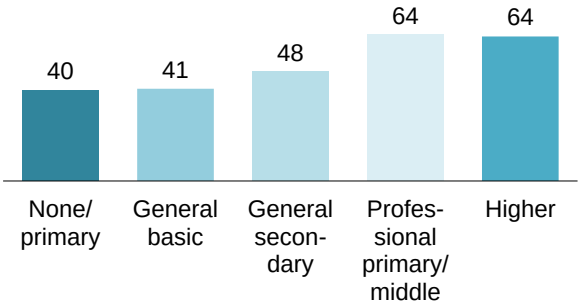


Figure 12.6 **HIV testing by education**

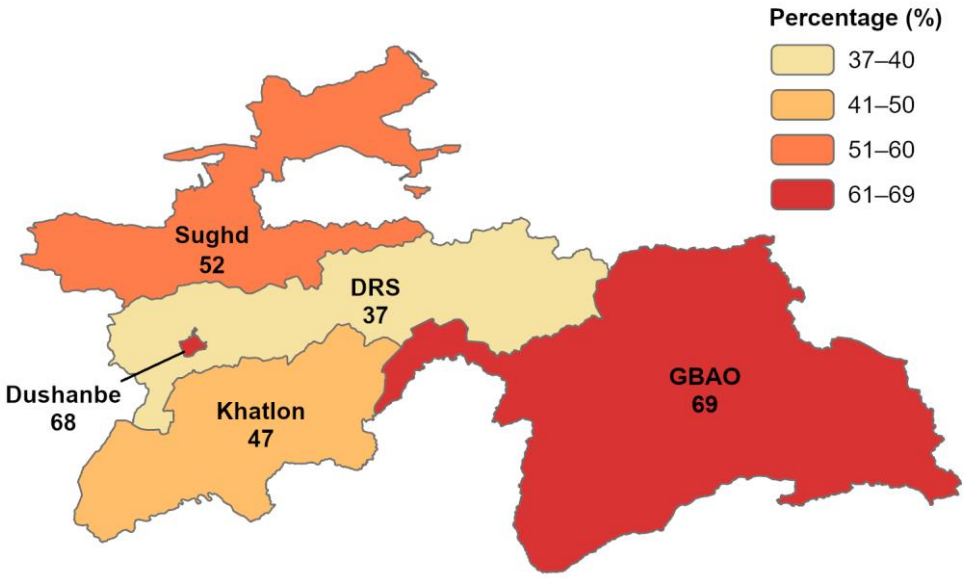
Percentage of women age 15–49 who have ever been tested for HIV and received results



- By region, the percentage of women who have ever been tested and received results is higher in GBAO (69%) and Dushanbe (68%) than in Sughd (52%), Khatlon (47%), and DRS (37%) (**Map 12.1**).

Map 12.1 HIV testing among women by region

Percentage of women age 15–49 who have ever been tested for HIV and received the results



- The percentage of women who have been tested for HIV in the past 12 months and received the results is higher among those age 20–24 (31%) than among those in the other age groups (**Table 12.6**).

Knowledge and Coverage of Self-testing

Eighteen percent of women have ever heard of HIV self-test kits. However, only 6% of women have used an HIV self-test kit (**Table 12.8**). The percentage of women who have heard about and used HIV self-test kits is higher among those with a professional primary/middle education (31% and 11%, respectively) than among those in the other education groups. Knowledge of HIV self-test kits increases with increasing household wealth (from 13% in the lowest wealth quintile to 25% in the highest quintile), but personal use varies little according to wealth (5%–6%).

12.6 Self-reporting of Sexually Transmitted Infections

Sexually transmitted infections (STIs) and symptoms

Respondents who have ever had sex were asked whether they had an STI or symptoms of an STI (a bad-smelling, abnormal discharge from the vagina or a genital sore or ulcer) in the 12 months before the survey.

Sample: Women age 15–49 who have ever had sex

Eight percent of women who had ever had sexual intercourse reported having had a sexually transmitted infection (STI) and/or STI symptoms in the 12 months preceding the survey (**Table 12.9**). The percentage of women who reported having had an STI and/or symptoms of an STI is higher among those who have never been married (11%) than among those who are currently married (8%) or divorced, separated, or widowed (7%). The percentage of women who reported ever having had an STI and/or symptoms of an STI is much higher among those from GBAO (18%) than among those from other regions.

12.7 KNOWLEDGE AND BEHAVIOR RELATED TO HIV AND AIDS AMONG YOUNG WOMEN

This section addresses HIV-related knowledge among young women age 15–24 and also assesses the extent to which young women engage in behaviors that may place them at risk of acquiring HIV.

12.7.1 Knowledge about HIV Prevention

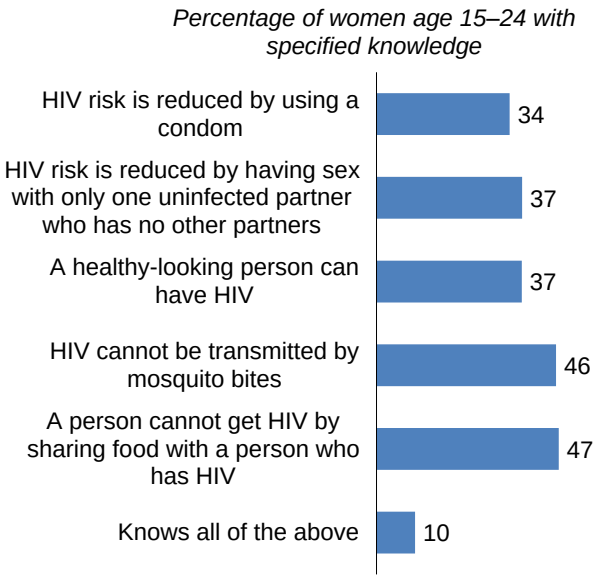
Knowledge about HIV prevention

Knowing that consistent use of condoms during sexual intercourse and having just one uninfected faithful partner can reduce the chances of getting HIV, knowing that a healthy-looking person can have HIV, and rejecting two major misconceptions about HIV transmission: HIV can be transmitted by mosquito bites and a person can become infected by sharing food with a person who has HIV.

Sample: Women age 15–24

Knowledge of how HIV is transmitted is crucial in enabling people to avoid HIV infection, and this is especially true for young people, who are often at greater risk because they may have shorter relationships with more partners or engage in other risky behaviors. Only 10% of women age 15–24 are knowledgeable about HIV prevention (**Table 12.10** and **Figure 12.7**).

***Figure 12.7* Knowledge about HIV prevention among young women**



Patterns by background characteristics

- Twelve percent of ever-married young women have knowledge about HIV prevention, as compared with 8% of never-married young women.
- A higher percentage of young women in Dushanbe (13%), Sughd (14%), and GBAO (17%) than in DRS (5%) and Khatlon (8%) have knowledge about HIV prevention.
- The percentage of young women who have knowledge about HIV prevention is higher among those with a professional primary/middle education (17%) than among those in the other education groups (7–14%).

12.7.2 First Sex

Young women who initiate sex at an early age are typically at higher risk of becoming pregnant or contracting an STI than young women who initiate sex later. Consistent condom use can reduce such risks. Less than 1% of women age 15–24 had sexual intercourse before age 15. A slightly higher percentage of young women (6%) had sexual intercourse before age 18 (**Table 12.11**).

Patterns by background characteristics

- The percentage of young women who reported having sexual intercourse before age 18 increases from 9% among those with no education or a primary education to 13% among those with a general basic education and then decreases with increasing education.

- The percentage of young women who had sexual intercourse before age 18 is slightly higher in rural areas (6%) than in urban areas (4%).

12.7.3 Premarital Sex

Nearly all (more than 99%) never-married women age 15–24 have never had sexual intercourse (**Table 12.12**).

12.7.4 Multiple Sexual Partners

Less than 1% of women age 15–24 had two or more sexual partners in the past 12 months, and less than 1% had sex with a person who neither was their husband nor lived with them (**Table 12.13**).

12.7.5 Recent HIV Testing

Seeking an HIV test may be more difficult for young people than adults because many young people lack experience in accessing health services for themselves and because there are often barriers to young people obtaining services. Thirty-eight percent of women age 15–24 who had sex in the 12 months preceding the survey were tested for HIV in the past 12 months and received the results of the most recent test (**Table 12.14**).

Trends: The percentage of sexually active young women who were tested for HIV in the past 12 months and received the results of the most recent test increased from 10% in 2012 to 19% in 2017 and 38% in 2023.

List of Tables

For more information on knowledge, attitudes, and behavior related to HIV and AIDS, see the following tables:

- **Table 12.1 Knowledge of HIV or AIDS**
- **Table 12.2 Knowledge of and attitudes about medicines to treat HIV or prevent HIV transmission**
- **Table 12.3 Discriminatory attitudes towards people living with HIV**
- **Table 12.4 Multiple sexual partners and higher-risk sexual intercourse in the past 12 months**
- **Table 12.5 Pregnant women tested for HIV**
- **Table 12.6 Coverage of prior HIV testing**
- **Table 12.7 Number of times tested for HIV in lifetime**
- **Table 12.8 Knowledge and coverage of self-testing for HIV**
- **Table 12.9 Self-reported prevalence of sexually transmitted infections (STIs) and STI symptoms**
- **Table 12.10 Knowledge about HIV prevention among young women**
- **Table 12.11 Age at first sexual intercourse among young women**
- **Table 12.12 Premarital sexual intercourse among young women**
- **Table 12.13 Multiple sexual partners and higher-risk sexual intercourse in the past 12 months among young women**
- **Table 12.14 Recent HIV tests among young women**

Table 12.1 Knowledge of HIV or AIDS

Percentage of women age 15–49 who have heard of HIV or AIDS, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Has heard of HIV or AIDS	Number of women
Age		
15–24	73.8	3,327
15–19	66.8	1,710
20–24	81.1	1,616
25–29	80.2	1,559
30–39	79.5	2,980
40–49	78.5	2,014
Marital status		
Never married	66.9	1,964
Ever had sex	71.7	50
Never had sex	66.8	1,914
Married/living together	80.1	7,392
Divorced/separated/ widowed	80.1	522
Residence		
Urban	86.9	2,705
Rural	73.9	7,174
Region		
Dushanbe	94.3	1,077
GBAO	89.9	157
Sughd	83.7	2,780
DRS	62.1	2,356
Khatlon	77.2	3,509
FTF districts	75.7	1,937
Education		
None/primary	65.0	443
General basic	72.2	3,271
General secondary	76.9	4,230
Professional primary/middle	89.6	778
Higher	91.4	1,157
Wealth quintile		
Lowest	65.5	1,842
Second	74.7	1,967
Middle	75.6	1,966
Fourth	78.4	1,964
Highest	91.2	2,140
Total	77.5	9,879

Table 12.2 Knowledge of and attitudes about medicines to treat HIV or prevent HIV transmission

Percentage of women age 15–49 who have heard of antiretroviral medicines (ARVs) that treat HIV, percentage who know that the risk of mother-to-child transmission (MTCT) of HIV can be reduced by the mother taking special drugs, and percentage who have heard of preexposure prophylaxis (PrEP), and among women age 15–49 who have heard of PrEP, percentage who approve of people who take PrEP to prevent getting HIV, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who have heard of ARVs that treat HIV	Percentage who know that the risk of MTCT can be reduced by mother taking special drugs	Percentage who have heard of PrEP	Number of respondents	Percentage who approve of people who take PrEP to prevent getting HIV	Number of respondents who have heard of PrEP
Age						
15–24	23.5	20.2	20.6	3,327	56.5	685
15–19	19.6	17.8	17.5	1,710	52.4	299
20–24	27.5	22.7	23.8	1,616	59.7	385
25–29	44.0	32.5	32.0	1,559	53.1	499
30–39	41.6	31.6	28.9	2,980	56.1	862
40–49	42.2	29.4	30.6	2,014	56.0	616
Marital status						
Never married	21.7	17.6	18.0	1,964	52.9	355
Ever had sex	46.5	29.3	36.4	50	*	18
Never had sex	21.0	17.3	17.6	1,914	52.9	336
Married/living together	39.2	29.7	28.8	7,392	56.9	2,128
Divorced/separated/ widowed	44.7	32.7	34.3	522	45.3	179
Residence						
Urban	43.6	31.2	33.9	2,705	56.9	917
Rural	33.1	26.0	24.3	7,174	55.0	1,744
Education						
None/primary	29.7	19.6	21.0	443	42.6	93
General basic	31.0	23.0	21.4	3,271	51.4	702
General secondary	33.1	25.9	25.3	4,230	57.6	1,072
Professional primary/middle	51.1	39.8	40.7	778	60.1	317
Higher	52.8	40.2	41.3	1,157	57.0	478
Total	36.0	27.4	26.9	9,879	55.6	2,662

Note: An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

Table 12.3 Discriminatory attitudes towards people living with HIV

Among women age 15–49 who have heard of HIV or AIDS, percentage who do not think that children living with HIV should be able to attend school with children who are HIV negative, percentage who would not buy fresh vegetables from a shopkeeper who has HIV, and percentage with discriminatory attitudes towards people living with HIV, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who do not think that children living with HIV should be able to attend school with children who are HIV negative	Percentage who would not buy fresh vegetables from a shopkeeper who has HIV	Percentage with discriminatory attitudes towards people living with HIV[1]	Number of women who have heard of HIV or AIDS
Age				
15–24	66.3	70.7	73.4	2,454
15–19	65.6	70.9	73.5	1,142
20–24	67.0	70.6	73.3	1,311
25–29	63.7	66.4	70.0	1,250
30–39	67.4	68.8	72.6	2,369
40–49	65.8	69.1	72.4	1,581
Marital status				
Never married	63.0	68.3	71.1	1,315
Ever had sex	(46.0)	(55.6)	(64.0)	36
Never had sex	63.5	68.7	71.3	1,279
Married/living together	66.8	69.4	72.8	5,921
Divorced/separated/ widowed	66.0	67.3	69.8	418
Residence				
Urban	56.9	61.0	64.7	2,352
Rural	70.2	72.7	75.8	5,302
Region				
Dushanbe	44.1	47.9	52.1	1,016
GBAO	43.3	46.6	49.9	141
Sughd	70.2	74.8	78.1	2,326
DRS	72.9	74.0	77.1	1,463
Khatlon	68.3	70.6	73.6	2,707
FTF districts	69.7	74.0	76.0	1,466
Education				
None/primary	74.9	77.7	79.6	288
General basic	68.1	71.1	74.9	2,361
General secondary	69.2	72.1	74.9	3,251
Professional primary/middle	58.4	62.3	64.6	696
Higher	54.8	57.4	62.0	1,057
Wealth quintile				
Lowest	73.5	73.6	77.3	1,207
Second	69.4	72.7	75.3	1,468
Middle	72.6	74.7	78.1	1,486
Fourth	65.9	69.7	72.3	1,540
Highest	54.4	58.8	62.9	1,952
Total	66.1	69.1	72.4	7,654

Note: Figures in parentheses are based on 25–49 unweighted cases.
[1] Percentage who do not think that children living with HIV should be able to attend school with children who are HIV negative and/or would not buy fresh vegetables from a shopkeeper who has HIV

Table 12.4 Multiple sexual partners and higher-risk sexual intercourse in the past 12 months

Among all women age 15–49, percentage who had sexual intercourse with more than one sexual partner in the past 12 months and percentage who had intercourse in the past 12 months with a person who neither was their husband nor lived with them; among women having more than one partner in the past 12 months, percentage reporting that a condom was used during most recent intercourse; among women who had sexual intercourse in the past 12 months with a person who neither was their husband nor lived with them, percentage who used a condom during most recent sexual intercourse with such a partner; and among women who ever had sexual intercourse, mean number of sexual partners during their lifetime, according to background characteristics, Tajikistan DHS 2023

	All women			Women who had 2+ partners in the past 12 months		Women who had intercourse in the past 12 months with a person who neither was their husband nor lived with them		Women who ever had sexual intercourse[1]	
Background characteristic	Percentage who had 2+ partners in the past 12 months	Percentage who had intercourse in the past 12 months with a person who neither was their husband nor lived with them	Number of women	Percentage who reported using a condom during most recent sexual inter-course	Number of women	Percentage who reported using a condom during most recent sexual intercourse with such a partner	Number of women	Mean number of sexual partners in lifetime	Number of women
Age									
15–24	0.2	0.1	3,327	*	6	*	3	1.0	1,551
15–19	0.0	0.0	1,710	*	0	*	1	1.0	223
20–24	0.4	0.1	1,616	*	6	*	2	1.1	1,328
25–29	0.4	0.1	1,559	*	6	*	2	1.0	1,504
30–39	0.3	0.1	2,980	*	9	*	3	1.1	2,923
40–49	0.4	0.3	2,014	*	9	*	7	1.1	1,980
Marital status									
Never married	0.0	0.1	1,964	*	0	*	2	1.2	49
Married/living together	0.4	0.1	7,392	(9.9)	29	*	5	1.1	7,390
Divorced/separated/ widowed	0.1	1.3	522	*	1	*	7	1.1	520
Residence									
Urban	0.5	0.4	2,705	*	13	*	11	1.1	2,088
Rural	0.2	0.1	7,174	*	17	*	4	1.1	5,871
Region									
Dushanbe	0.5	0.4	1,077	*	5	*	5	1.1	795
GBAO	0.4	1.2	157	*	1	*	2	1.1	117
Sughd	0.2	0.1	2,780	*	6	*	2	1.1	2,284
DRS	0.3	0.1	2,356	*	7	*	2	1.1	1,918
Khatlon	0.3	0.1	3,509	*	11	*	4	1.0	2,846
FTF districts	0.2	0.0	1,937	*	4	*	1	1.0	1,580
Education									
None/primary	0.4	0.0	443	*	2	*	0	1.1	391
General basic	0.4	0.0	3,271	*	12	*	1	1.1	2,455
General secondary	0.2	0.1	4,230	*	9	*	6	1.0	3,596
Professional primary/middle	0.2	0.3	778	*	2	*	2	1.0	602
Higher	0.4	0.4	1,157	*	5	*	5	1.1	915
Wealth quintile									
Lowest	0.2	0.1	1,842	*	3	*	2	1.1	1,516
Second	0.3	0.0	1,967	*	6	*	0	1.1	1,553
Middle	0.2	0.1	1,966	*	5	*	2	1.1	1,605
Fourth	0.2	0.0	1,964	*	4	*	0	1.0	1,647
Highest	0.5	0.5	2,140	*	12	*	10	1.1	1,638
Total	0.3	0.1	9,879	(10.1)	29	(25.7)	15	1.1	7,959

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.
[1] Means are calculated excluding respondents who gave non-numeric responses.

Table 12.5 Pregnant women tested for HIV

Among all women age 15–49 who gave birth in the 2 years preceding the survey, percentage who received an HIV test during antenatal care (ANC) for their most recent birth by whether they received their results and percentage who received an HIV test during ANC or labor for their most recent birth by whether they received their results, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who were tested for HIV during ANC and who:		Percentage who had an HIV test during ANC or labor and who:[1]		Number of women who gave birth in the past 2 years[2]
	Received results	Did not receive results	Received results	Did not receive results	
Age					
15–24	60.9	1.4	71.0	0.7	822
15–19	(70.9)	(0.0)	(81.2)	(0.0)	44
20–24	60.3	1.4	70.4	0.8	778
25–29	57.3	1.3	67.0	0.9	642
30–39	62.0	1.3	70.8	1.4	559
40–49	(59.2)	(0.0)	(70.9)	(0.0)	43
Marital status					
Never married	*	*	*	*	3
Married/living together	60.0	1.3	69.7	0.9	2,026
Divorced/separated/ widowed	(58.8)	(1.9)	(64.4)	(1.9)	37
Residence					
Urban	68.9	2.0	78.6	1.3	536
Rural	57.0	1.0	66.5	0.8	1,530
Region					
Dushanbe	77.4	2.5	84.5	0.8	208
GBAO	77.1	0.0	87.2	0.0	25
Sughd	69.2	0.4	76.7	0.0	576
DRS	52.4	0.9	57.0	0.9	472
Khatlon	52.8	2.0	67.7	1.7	785
FTF districts	56.4	2.6	65.4	1.9	471
Education					
None/primary	43.2	0.7	48.7	0.7	103
General basic	56.3	1.0	63.2	0.9	545
General secondary	58.7	1.7	69.3	1.1	934
Professional primary/middle	69.8	1.5	80.8	1.3	217
Higher	71.0	0.4	83.2	0.3	266
Wealth quintile					
Lowest	42.7	0.4	53.8	0.8	389
Second	57.1	1.8	66.7	1.8	410
Middle	61.7	1.9	72.1	0.9	419
Fourth	63.4	0.4	72.3	0.4	434
Highest	74.1	2.0	82.4	0.9	414
Total	60.1	1.3	69.7	0.9	2,066

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.

[1] Women were asked whether they received an HIV test during labor only if they gave birth in a health facility.

[2] Denominator for percentages includes women who did not receive antenatal care for their most recent birth in the past 2 years.

Table 12.6 Coverage of prior HIV testing

Percent distribution of women age 15–49 by HIV testing status and by whether they received the results of the most recent test, percentage of women ever tested, and percentage of women who were tested in the past 12 months and received the results of the most recent test, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percent distribution of women by testing status and by whether they received the results of the most recent test			Total	Percentage ever tested	Percentage who have been tested for HIV in the past 12 months and received the results of the most recent test	Number of women
	Ever tested and received results	Ever tested, did not receive results	Never tested[1]				
Age							
15–24	35.9	0.6	63.5	100.0	36.5	21.0	3,327
15–19	16.3	0.1	83.7	100.0	16.3	11.8	1,710
20–24	56.6	1.1	42.2	100.0	57.8	30.8	1,616
25–29	63.4	1.3	35.4	100.0	64.6	24.2	1,559
30–39	56.9	0.8	42.4	100.0	57.6	16.9	2,980
40–49	44.9	0.5	54.6	100.0	45.4	13.4	2,014
Marital status							
Never married	13.9	0.1	86.0	100.0	14.0	7.7	1,964
Ever had sex	27.9	0.0	72.1	100.0	27.9	4.0	50
Never had sex	13.6	0.1	86.3	100.0	13.7	7.8	1,914
Married/living together	57.7	0.9	41.3	100.0	58.7	22.0	7,392
Divorced/separated/ widowed	45.7	0.4	53.9	100.0	46.1	14.4	522
Residence							
Urban	57.5	0.9	41.6	100.0	58.4	23.3	2,705
Rural	44.9	0.7	54.4	100.0	45.6	17.0	7,174
Region							
Dushanbe	68.1	1.0	30.9	100.0	69.1	25.8	1,077
GBAO	68.6	0.1	31.2	100.0	68.8	36.6	157
Sughd	51.8	0.2	48.0	100.0	52.0	21.3	2,780
DRS	36.6	0.7	62.7	100.0	37.3	14.7	2,356
Khatlon	46.7	1.1	52.2	100.0	47.8	16.4	3,509
FTF districts	43.5	1.4	55.1	100.0	44.9	12.4	1,937
Education							
None/primary	40.0	0.4	59.6	100.0	40.4	13.2	443
General basic	40.6	0.6	58.8	100.0	41.2	13.0	3,271
General secondary	48.1	0.8	51.1	100.0	48.9	18.3	4,230
Professional primary/middle	64.4	0.8	34.8	100.0	65.2	34.7	778
Higher	63.7	1.0	35.3	100.0	64.7	28.0	1,157
Wealth quintile							
Lowest	36.2	0.4	63.4	100.0	36.6	12.3	1,842
Second	43.4	1.0	55.5	100.0	44.5	16.6	1,967
Middle	47.6	0.5	51.9	100.0	48.1	18.4	1,966
Fourth	50.6	0.8	48.6	100.0	51.4	20.4	1,964
Highest	62.2	0.9	36.9	100.0	63.1	25.1	2,140
Total	48.4	0.7	50.9	100.0	49.1	18.7	9,879

[1] Includes respondents who have not heard of HIV or who refused to answer questions on testing

Table 12.7 Number of times tested for HIV in lifetime

Percent distribution of women age 15–49 by number of times they have been tested for HIV in their lifetime, according to age, Tajikistan DHS 2023

Age	Number of times tested for HIV in lifetime							Never tested	Total	Number of respondents
	1	2	3	4	5–9	10–19	20+			
15–24	14.1	11.9	4.8	3.0	2.6	0.1	0.0	63.5	100.0	3,327
15–19	10.7	4.2	1.0	0.3	0.1	0.0	0.0	83.7	100.0	1,710
20–24	17.7	20.1	8.9	5.8	5.2	0.1	0.0	42.2	100.0	1,616
25–29	10.4	16.6	15.9	11.4	9.6	0.7	0.0	35.4	100.0	1,559
30–39	10.1	10.1	10.1	11.9	14.2	1.1	0.2	42.4	100.0	2,980
40–49	7.0	9.7	8.8	7.7	11.0	1.0	0.3	54.6	100.0	2,014
Total	10.9	11.7	9.0	7.9	8.9	0.7	0.1	50.9	100.0	9,879

Table 12.8 Knowledge and coverage of self-testing for HIV

Percentage of women age 15–49 who have ever heard of HIV self-test kits, and percentage who have ever used an HIV self-test kit, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Ever heard of HIV self-test kits	Ever used an HIV self-test kit	Number of women
Age			
15–19	9.5	1.8	1,710
20–24	16.6	6.3	1,616
25–29	19.5	7.2	1,559
30–34	20.6	6.2	1,545
35–39	19.5	7.7	1,435
40–44	20.9	4.6	1,096
45–49	19.0	5.4	917
Residence			
Urban	23.0	6.0	2,705
Rural	15.5	5.4	7,174
Education			
None/primary	12.7	5.3	443
General basic	14.2	3.8	3,271
General secondary	15.8	5.4	4,230
Professional primary/middle	30.6	10.5	778
Higher	26.7	8.0	1,157
Wealth quintile			
Lowest	12.5	5.9	1,842
Second	14.9	6.0	1,967
Middle	15.4	5.2	1,966
Fourth	19.1	4.7	1,964
Highest	25.1	6.1	2,140
Total	17.6	5.6	9,879

Table 12.9 Self-reported prevalence of sexually transmitted infections (STIs) and STI symptoms

Among women age 15–49 who ever had sexual intercourse, percentage reporting having an STI and/or symptoms of an STI in the past 12 months, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage of women who reported having in the past 12 months: STI	Bad-smelling/ abnormal genital discharge	Genital sore or ulcer	STI/genital discharge/ sore or ulcer	Number of women who ever had sexual intercourse
Age					
15–24	1.5	4.3	1.6	5.7	1,552
15–19	4.4	6.2	3.2	7.3	224
20–24	1.0	4.0	1.4	5.4	1,328
25–29	1.3	6.3	3.1	8.2	1,505
30–39	1.1	7.1	2.3	8.4	2,924
40–49	1.4	6.6	3.6	8.7	1,982
Marital status					
Never married	0.0	4.9	6.7	11.3	50
Married/living together	1.3	6.3	2.7	8.0	7,392
Divorced/separated/ widowed	1.5	5.6	2.0	6.6	521
Residence					
Urban	1.6	4.7	2.4	6.8	2,093
Rural	1.2	6.8	2.7	8.3	5,871
Region					
Dushanbe	2.0	3.2	2.8	6.5	795
GBAO	1.1	15.1	7.0	17.8	117
Sughd	1.3	6.1	2.5	7.5	2,284
DRS	0.9	5.0	1.9	6.3	1,922
Khatlon	1.4	7.8	3.0	9.3	2,846
FTF districts	1.9	11.5	4.6	13.3	1,580
Education					
None/primary	1.5	7.7	2.3	9.3	391
General basic	1.6	7.8	3.2	9.6	2,458
General secondary	1.1	5.9	2.4	7.4	3,597
Professional primary/middle	0.8	4.2	1.4	4.9	603
Higher	1.8	4.4	3.0	6.8	915
Wealth quintile					
Lowest	0.7	6.3	2.3	7.3	1,516
Second	1.2	8.1	2.3	9.7	1,553
Middle	1.2	6.8	2.9	8.6	1,605
Fourth	1.8	5.6	3.0	7.1	1,647
Highest	1.6	4.8	2.6	6.9	1,644
Total	1.3	6.3	2.6	7.9	7,964

Table 12.10 Knowledge about HIV prevention among young women

Percentages of young women age 15–24 who, in response to prompted questions, say that people can reduce their risk of getting HIV by using condoms every time they have sexual intercourse and by having one sex partner who is not infected and has no other partners, that a healthy-looking person can have HIV, that HIV cannot be transmitted by mosquito bites, and that a person cannot get HIV by sharing food with a person who has HIV, and percentage with knowledge about HIV prevention, according to background characteristics, Tajikistan DHS 2023

	Percentage who know:						
	People can reduce their chance of HIV by:						
Background characteristic	Using a condom every time they have sex	Having sex with only one uninfected partner who has no other partners	A healthy-looking person can have HIV	HIV cannot be transmitted by mosquito bites	A person cannot get HIV by sharing food with a person who has HIV	Percentage with knowledge about HIV prevention[1]	Number of women
Age							
15–19	25.9	30.3	33.5	42.4	41.5	7.5	1,710
15–17	20.3	25.5	28.9	39.8	38.4	5.9	1,071
18–19	35.1	38.4	41.2	46.8	46.7	10.3	639
20–24	43.0	45.0	41.4	50.0	52.3	12.4	1,616
20–22	42.8	44.2	42.3	48.1	51.7	12.5	939
23–24	43.2	45.9	40.1	52.8	53.2	12.2	677
Marital status							
Never married	26.1	29.1	33.2	41.6	41.5	7.7	1,780
Ever had sex	*	*	*	*	*	*	6
Never had sex	25.9	29.0	33.2	41.7	41.5	7.8	1,774
Ever married	43.5	47.0	42.1	51.3	52.9	12.4	1,546
Residence							
Urban	37.1	40.4	45.4	50.4	55.5	10.7	908
Rural	33.1	36.3	34.3	44.5	43.5	9.6	2,419
Region							
Dushanbe	42.0	40.9	58.0	56.8	63.0	13.4	383
GBAO	47.2	43.8	46.0	69.2	64.0	16.8	42
Sughd	40.4	43.8	47.6	48.1	48.6	14.4	900
DRS	21.3	21.3	17.1	37.5	39.7	5.4	794
Khatlon	35.1	41.9	36.1	46.1	44.3	8.1	1,209
FTF districts	27.6	33.3	32.6	38.2	36.9	4.6	687
Education							
None/primary	35.6	39.4	26.4	36.8	45.3	9.7	87
General basic	22.2	25.3	27.6	39.5	39.0	6.8	1,118
General secondary	35.4	37.9	36.8	45.8	45.7	9.4	1,400
Professional primary/middle	51.0	54.2	54.4	57.0	58.6	17.2	330
Higher	49.5	55.5	54.9	59.0	63.0	14.3	392
Wealth quintile							
Lowest	19.8	25.2	17.5	40.5	38.2	6.6	557
Second	26.6	33.4	33.2	43.6	43.8	7.2	679
Middle	40.4	42.2	39.3	45.3	43.3	10.8	682
Fourth	39.9	40.3	40.7	45.7	47.3	11.5	662
Highest	41.2	43.2	51.0	53.7	58.6	12.5	746
Total	34.2	37.4	37.3	46.1	46.8	9.9	3,327

Note: An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.
[1] Knowledge about HIV prevention means knowing that consistent use of condoms during sexual intercourse and having just one uninfected faithful partner can reduce the chance of getting HIV, knowing that a healthy-looking person can have HIV, and rejecting two major misconceptions about HIV transmission: HIV can be transmitted by mosquito bites and a person can become infected by sharing food with a person who has HIV.

Table 12.11 Age at first sexual intercourse among young women

Percentage of young women age 15–24 who had sexual intercourse before age 15 and percentage of young women age 18–24 who had sexual intercourse before age 18, according to background characteristics, Tajikistan DHS 2023

	Women age 15–24		Women age 18–24	
Background characteristic	Percentage who had sexual intercourse before age 15	Number of women	Percentage who had sexual intercourse before age 18	Number of women
Age				
15–19	0.1	1,710	na	na
15–17	0.0	1,071	na	na
18–19	0.4	639	4.5	639
20–24	0.3	1,616	5.9	1,616
20–22	0.3	939	5.9	939
23–24	0.2	677	6.0	677
Residence				
Urban	0.1	908	4.1	622
Rural	0.2	2,419	6.1	1,633
Education				
None/primary	0.0	87	8.9	74
General basic	0.1	1,118	12.7	403
General secondary	0.3	1,400	5.1	1,101
Professional primary/ middle	0.0	330	1.8	290
Higher	0.4	392	1.2	387
Total	0.2	3,327	5.5	2,255

na = not applicable

Table 12.12 Premarital sexual intercourse among young women

Among never-married women age 15–24, percentage who have never had sexual intercourse, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who have never had sexual intercourse	Number of never-married women
Age		
15–19	99.9	1,487
15–17	100.0	1,063
18–19	99.8	424
20–24	98.3	293
20–22	98.6	224
23–24	97.4	69
Residence		
Urban	99.8	557
Rural	99.6	1,223
Education		
None/primary	(94.7)	30
General basic	100.0	780
General secondary	99.6	604
Professional primary/ middle	99.0	161
Higher	99.9	206
Total	99.7	1,780

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

Table 12.13 Multiple sexual partners and higher-risk sexual intercourse in the past 12 months among young women

Among young women age 15–24, percentage who had sexual intercourse with more than one sexual partner in the past 12 months and percentage who had intercourse in the past 12 months with a person who neither was their husband nor lived with them, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who had 2+ partners in the past 12 months	Percentage who had intercourse in the past 12 months with a person who neither was their husband nor lived with them	Number of women
Age			
15–19	0.0	0.0	1,710
15–17	0.0	0.0	1,071
18–19	0.0	0.1	639
20–24	0.4	0.1	1,616
20–22	0.5	0.1	939
23–24	0.2	0.1	677
Marital status			
Never married	0.0	0.1	1,780
Ever married	0.4	0.1	1,546
Residence			
Urban	0.1	0.2	908
Rural	0.2	0.1	2,419
Education			
None/primary	0.0	0.0	87
General basic	0.4	0.0	1,118
General secondary	0.1	0.2	1,400
Professional primary/middle	0.0	0.2	330
Higher	0.0	0.0	392
Total	0.2	0.1	3,327

Table 12.14 Recent HIV tests among young women

Among young women age 15–24 who have had sexual intercourse in the past 12 months, percentage who were tested for HIV in the past 12 months and received the results of the most recent test, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who have been tested for HIV in the past 12 months and received the results of the most recent test	Number of women
Age		
15–19	47.7	219
15–17	*	8
18–19	47.6	211
20–24	36.5	1,235
20–22	39.1	679
23–24	33.3	556
Marital status		
Never married	*	3
Ever married	38.3	1,452
Total	38.2	1,454

Note: An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

DOMESTIC VIOLENCE 13

Key Findings

- ***Experience of violence:*** 12% of women in Tajikistan age 15–49 have experienced physical violence since age 15, and 2% have ever experienced sexual violence. One percent of women who have ever been pregnant have experienced violence during pregnancy.
- ***Controlling behaviors:*** 80% of women who have ever had a husband/intimate partner have experienced controlling behaviors from their husband/intimate partner, and 25% have experienced three or more controlling behaviors.
- ***Intimate partner violence by current or most recent husband/partner:*** 16% of women who have ever had a husband or intimate partner have experienced physical, sexual, or emotional violence by their current or most recent partner.
- ***Violence by any intimate partner in the past 12 months:*** 14% of women who have ever had one or more husbands or intimate partners experienced emotional, physical, or sexual violence by a husband or intimate partner in the past 12 months.
- ***Injuries due to intimate partner violence:*** 31% of women who have ever experienced violence committed by their current or most recent husband/intimate partner have sustained injuries.
- ***Help seeking:*** Only 23% of women who have ever experienced physical or sexual violence sought help or told someone.

Gender-based violence is defined by the United Nations as any act of violence that results in physical, sexual, or psychological harm or suffering to women, girls, men, and boys, as well as threats of such acts, coercion, or the arbitrary deprivation of liberty. Increasing research has highlighted the health burdens, intergenerational effects, and demographic consequences of such violence (United Nations 2006).

A common form of gender-based violence is intimate partner violence, which refers to behavior within an intimate relationship that causes physical, sexual, or psychological harm and includes acts of physical aggression, sexual coercion, psychological abuse, and controlling behavior. This definition of intimate partner violence covers violence by both current and former spouses and partners.[1] This chapter focuses on intimate partner violence and other forms of domestic violence.

Historically, The DHS Program has collected detailed information only on intimate partner violence experienced by ever-married women, defined as women who are currently married or living with a man as if married and women who were formerly married or lived with a man as if married. More recently, the questionnaire module used to capture intimate partner violence in a DHS survey was revised to also capture intimate partner violence experienced by never-married women who reported that they currently or

[1] https://apps.who.int/violence-info/intimate-partner-violence.

formerly had an intimate partner. In the 2023 Tajikistan DHS, the revised version of the domestic violence questionnaire module was used for the first time, and therefore indicators on intimate partner violence are reported for women who have ever had a husband or other intimate partner. In the context of the revised questionnaire module and this report, the term "boyfriend" excludes anyone reported as an intimate partner. Given these changes, when examining trends in intimate partner violence, only the estimates provided separately for ever-married women should be compared with corresponding estimates from previous surveys.

The 2023 TjDHS implemented the module of questions on domestic violence in accordance with the World Health Organization's guidelines on the ethical collection of information on domestic violence (WHO 2001). Only one eligible woman per household was randomly selected for the module, and the module was not implemented if privacy could not be obtained. Of the 6,787 women age 15–49 who were eligible for the module, 6,448 were successfully interviewed; 309 could not complete the module due to privacy concerns and 30 were not interviewed for other reasons. Special weights were used to adjust for the selection of only one woman per household and to ensure that the domestic violence subsample was nationally representative.

13.1 Measurement of Violence

Terminology for this chapter

Husband: a man with whom a woman is married or living with as if married.

Intimate partner: a man with whom a never-married woman is in a relationship that involves physical and/or emotional intimacy and for which the relationship is or has the expectation of being longer lasting. As defined for the purposes of this chapter, an intimate partner is not a husband or a man a woman is living with and is also not a boyfriend with whom her relationship is casual or a man with whom she has a one-time encounter.

Husband/intimate partner: the current husband for currently married women; the most recent husband for divorced, separated, or widowed women; the current intimate partner for never-married women who currently have an intimate partner; and the most recent intimate partner for never-married women who do not currently have an intimate partner but had one in the past.

Boyfriend: a man with whom a woman has a casual relationship and who she did not mention as an intimate partner.

In the 2023 TjDHS, information was obtained from women age 15–49 on their experience of violence committed by any perpetrator, including current and former husbands or other intimate partners. To capture intimate partner violence, ever-married women were asked about their experience of violence committed by their current and former husbands/live-in partners, and, if applicable, never-married women were asked about their experience of violence committed by their current and former intimate partners. More specifically, intimate partner violence was measured by asking women if their current or former husband/intimate partner ever did the following to them:

- ***Physical violence:*** push you, shake you, or throw something at you; slap you; twist your arm or pull your hair; punch you with his fist or with something that could hurt you; kick you, drag you, or beat you up; choke you or burn you on purpose; or attack you with a knife, gun, or other weapon
- ***Sexual violence:*** physically force you to have sexual intercourse with him when you did not want to, physically force you to perform any other sexual acts you did not want to, or force you with threats or in any other way to perform sexual acts you did not want to
- ***Emotional violence:*** say or do something to humiliate you in front of others, threaten to hurt or harm you or someone you care about, or insult you or make you feel bad about yourself

In addition to the questions on different forms of intimate partner violence, information was also obtained from all women about physical violence committed by anyone other than any husband/intimate partner since they were age 15 by asking if anyone had hit, slapped, kicked, or done something else to hurt them physically. Similarly, women were asked if they had experienced sexual violence committed by anyone other than any husband/intimate partner. Specifically, they were asked if at any time in their life, as a child or as an adult, they were forced in any way to have sexual intercourse or to perform any other sexual acts when they did not want to. Additionally, women who had ever been pregnant were asked about their experience of physical violence during any pregnancy.

13.2 Women's Experience of Physical Violence

Physical violence by any perpetrator

Percentage of women who have experienced any physical violence (committed by a husband, intimate partner, or anyone else) since age 15 and in the 12 months before the survey.

Sample: Women age 15–49

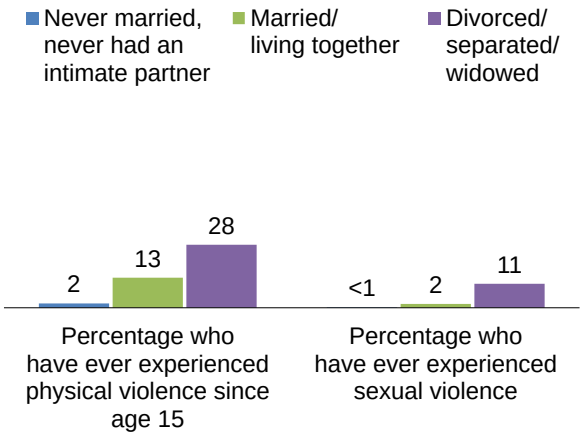
Twelve percent of women age 15–49 have experienced physical violence since age 15, including 9% who experienced physical violence often or sometimes in the 12 months preceding the survey (**Table 13.1**). Only 2% of women who have never been married and never had an intimate partner reported experiencing physical violence since age 15 (**Table 13.1**); however, 3% of these women refused to answer whether they had experienced physical violence since age 15 (data not shown separately).

Trends: The percentage of women who have experienced physical violence since age 15 has decreased over the past decade, from 19% in 2012 to 12% in 2023. However, the data suggest that this pattern has not been uniform over the decade, with the percentage increasing from 19% to 24% between 2012 and 2017 and then falling sharply to 12% in 2023.

Patterns by background characteristics

- The percentage of women who have experienced physical violence since age 15 increases sharply from 4% among those age 15–19 to 17% among those age 30–39 before dropping to 13% among those age 40–49 (**Table 13.1**).
- By region, women's experience of physical violence since age 15 varies from a low of 7% in Dushanbe to a high of 18% in Khatlon.
- Twenty-eight percent of divorced, separated, or widowed women; 13% of currently married women; and 2% of women who have never been married and never had an intimate partner reported experiencing physical violence since age 15 (**Figure 13.1**).

Figure 13.1 **Women's experience of violence by marital status**



- Women's experience of physical violence since age 15 is generally lower among those with more education, declining from 14% among those with no education or a primary education to 12% among those with a higher education. The difference between educational groups is more noticeable with respect to experience of violence during the past 12 months, with the percentage declining from 11% among those with no education to 8% among those with a higher education.

13.2.1 Perpetrators of Physical Violence

Among women who had ever been married or had an intimate partner and who had experienced physical violence since age 15, 83% reported their current husband or intimate partner as the perpetrator. The next most common perpetrator mentioned by these women was their former husband or intimate partner (17%). Two percent of all women who reported any physical violence since age 15 mentioned experiencing violence by a mother or stepmother, and 2% reported violence by a sibling (**Table 13.2**).

13.2.2 Experience of Physical Violence during Pregnancy

Physical violence during pregnancy

Percentage of women who have experienced physical violence (committed by a husband, intimate partner, or anyone else) during any pregnancy.

Sample: Women age 15–49 who have ever been pregnant

Among women age 15–49 who had ever been pregnant, 1% reported experiencing physical violence while pregnant (**Table 13.3**).

Patterns by background characteristics

- Among women who had ever been married, the prevalence of physical violence during pregnancy was much higher among those who were divorced, separated or widowed (5%) than among those who were currently married (1%).

13.3 Experience of Sexual Violence

Sexual violence by any perpetrator

Percentage of women who have experienced any sexual violence (committed by a husband, intimate partner, or anyone else) ever and in the 12 months before the survey.

Sample: Women age 15–49

13.3.1 Prevalence of Sexual Violence

Two percent of women age 15–19 have ever experienced sexual violence by any perpetrator, and 1% experienced such violence in the past 12 months (**Table 13.4**). Notably, while less than 1% of never-married women reported any sexual violence, 3% of them refused to answer the question regarding sexual violence (data not shown separately[2]).

Trends: The percentage of women who have ever experienced sexual violence has decreased over the past decade, from 4% in 2012 to 2% in 2017 and 2023. Trends in experience of sexual violence in the past 12 months are similar, with a slight decline from 2012 to 2017 and no subsequent change (**Table 13.4**).

Patterns by background characteristics

- The percentage of women who have ever experienced sexual violence increases with age, from 0% among those age 15–19 to 3% among those age 30–39 and age 40–49. The pattern with respect to experience of sexual violence in the past 12 months is similar (**Table 13.4**).
- The percentage of women who have ever experienced sexual violence is broadly similar across regions, ranging from 1% in Dushanbe and Districts of Republican Subordination (DRS) to 2% in

[2] Nonresponse for sexual violence by an intimate partner is not available.

Sughd and Khatlon. Again, the pattern with respect to experience of sexual violence in the past 12 months is similar.

- Two percent of women who have ever been married reported ever experiencing sexual violence, as compared with less than 1% of those who have never been married. A higher percentage of divorced, separated, or widowed women (11%) than currently married women (2%) reported ever experiencing sexual violence.

- The percentage of women who have ever experienced sexual violence is higher among those who are employed for cash (5%) than among those who are employed but not for cash (3%) and those who are not employed (1%). Two percent of women who are employed for either cash or not for cash experienced sexual violence in the past 12 months, compared with 1% of those who are not employed.

13.3.2 Perpetrators of Sexual Violence

Among women who had ever been married or had an intimate partner and had experienced sexual violence, 84% reported their current husband or intimate partner as the perpetrator, and 19% reported a former husband or intimate partner. Among all women age 15–49 who had experienced sexual violence, 7% reported a current or former boyfriend as the perpetrator (**Table 13.5**).

13.3.3 Experience of Sexual Violence by a Non-intimate Partner

Less than 1% of women age 15–49 had experienced sexual violence from someone other than a current or former husband or intimate partner. Notably, however, although the figures are still very low, the percentage of women reporting sexual violence by a non-intimate partner is higher among those age 20–24 and 30–39 than among those in the other age groups (**Table 13.6**).

Table 13.6 also shows data on nonresponse to the question regarding experience of sexual violence committed by a non-intimate partner. Overall, 2% of women refused to answer the question. The percentage was highest among women who had never been married (3%) and women in Khatlon (4%).

13.3.4 Age at First Experience of Sexual Violence

Table 13.7 shows that 1% of women age 15–49 had experienced sexual violence by any perpetrator by age 22; no women had experienced such violence at age 15 or younger. While the differences are relatively small, the percentages of women experiencing sexual violence at specific ages are higher if the perpetrator was a current or former husband or intimate partner than if he was a non-intimate partner.

13.4 Experience of Different Forms of Violence

Physical violence or sexual violence may not occur in isolation; rather, women may experience a combination of forms of violence, and these combinations of violence can have a long-lasting negative effect on women's lives, health, and well-being. Among all women, 10% have experienced physical violence only, less than 1% have experienced sexual violence only, and 2% have experienced both physical and sexual violence. Overall, 12% of women have experienced either physical or sexual violence. The percentage of women who have experienced physical or sexual violence increases from 4% among those age 15–19 to a peak of 18% among those age 30–39 before falling to 13% among those age 40–49 (**Table 13.8**).

13.5 Forms of Controlling Behaviors and Intimate Partner Violence

Controlling behavior

Percentage of women whose current or most recent husband/intimate partner demonstrates one or more controlling behaviors.

***Sample*:** Women age 15–49 who ever had a husband or an intimate partner

Intimate partner violence

Percentage of women who have experienced any of the specified acts of physical, sexual, or emotional violence committed by their current or most recent husband/intimate partner, ever and in the 12 months preceding the survey.

Sample: Women age 15–49 who ever had a husband or an intimate partner

13.5.1 Prevalence of Controlling Behaviors and Intimate Partner Violence

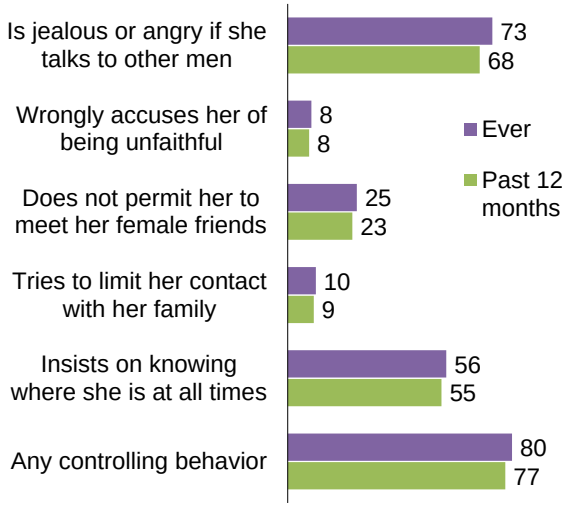
Controlling behaviors can be important warning signs of difficulties in intimate relationships and may be correlated with intimate partner violence. While specific types of controlling behaviors may be important to examine, the combination is often more significant.

Controlling Behaviors

The 2023 TjDHS results show that 80% of women age 15–49 who have ever had a husband/intimate partner have experienced at least one controlling behavior from their husband/intimate partner, and 77% experienced at least one such behavior in the past 12 months (**Table 13.9**). The most common controlling behaviors reported by women were jealousy or anger if they talk to other men (73%) and insisting on knowing where they are at all times (56%). Twenty-five percent of women reported that their husband/intimate partner does not permit them to meet their female friends, 10% said that he has tried to limit their contact with their family, and 8% reported that he had wrongly accused them of being unfaithful (**Figure 13.2**). Overall, 25% of women reported experiencing at least three of the specified behaviors (**Table 13.10**).

***Figure 13.2* Forms of controlling behaviors**

Percentage of women age 15–49 who have ever had a husband/intimate partner and have experienced specific types of controlling behaviors



Trends: The percentage of ever-married women who have experienced three or more controlling behaviors from their current or most recent husband/partner increased from 19% in 2012 to 29% in 2017 before decreasing to 25% in 2023.

Patterns by background characteristics

- The percentage of women whose husband or intimate partner had ever displayed three or more controlling behaviors was highest among those age 15–19 (30%) and lowest among those age 40–49 (21%) (**Table 13.10**).
- By region, the percentage of women reporting that their husband or intimate partner had ever displayed three or more controlling behaviors ranges from 18% in Gorno-Badakhshan Autonomous

Oblast (GBAO) to 28% in DRS. There are large differences by region for the individual controlling behaviors as well. For example, 42% of women in GBAO reported that their husbands were jealous or angry if they talked to other men, as compared with more than 70% in Dushanbe (73%), Khatlon (76%), and Sughd (78%).

- Twenty-two percent of women with a general secondary education reported experiencing three or more controlling behaviors, as compared with 30% of women with no education or a primary education. The percentage of women who reported that their husband/intimate partner wrongly accused them of being unfaithful and insisted on knowing where they are at all times is highest among those with a higher education.
- The percentage of women who reported ever experiencing three or more controlling behaviors increases from 22% among those in the lowest wealth quintile to 26% those in the highest quintile.
- Ten percent of women who are never afraid of their husband/intimate partner reported experiencing three or more controlling behaviors, compared with 21% of those who are sometimes afraid of their husband/partner and 42% of those who are afraid of their husband/intimate partner most of the time.

Violence by Current or Most Recent Husband/Intimate Partner

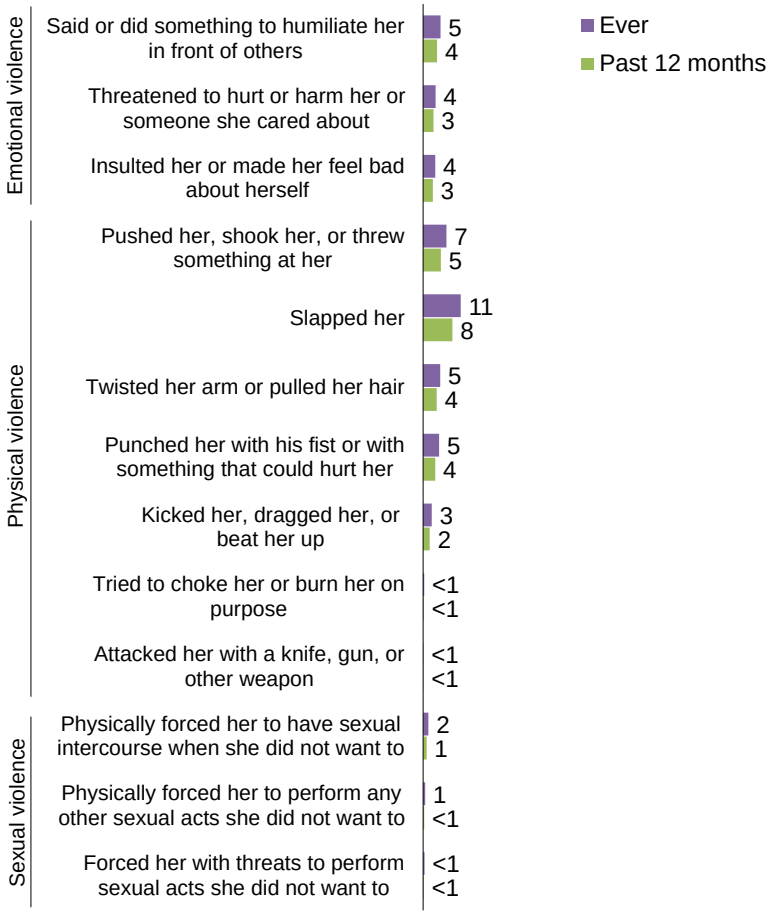
Fourteen percent of women who have ever had a husband/intimate partner reported having experienced physical violence from their current or most recent husband/intimate partner, including 11% who experienced physical violence in the past 12 months; 2% reported having ever experienced sexual violence, including 1% who experienced such violence in the past 12 months; and 7% reported having experienced emotional violence, including 6% who experienced such violence in the past 12 months. Overall, 16% of women have experienced one or more forms of physical, sexual, or emotional violence from their current or most recent husband/intimate partner, including 14% in the past 12 months (**Table 13.9**).

Women who had experienced physical violence most commonly reported being slapped (11%), those who had experienced sexual violence most often reported being physically forced to have sexual intercourse when they did not want to (2%), and those who had experienced emotional violence most commonly reported that their husband or partner said or did something to humiliate them in front of others (5%) (**Figure 13.3**).

Trends: Over the past decade, levels of reported physical, sexual, and emotional violence have declined in Tajikistan. However, the decline has not been consistent across this period, with an increase between 2012 and 2017 followed by a sharp decrease between 2017 and 2023. In 2012, 24% of women reported experiencing physical, sexual, or emotional violence perpetrated by their husbands. This percentage increased to 31% in 2017 and then declined to 16% in 2023. The overall decline is mostly due to large decreases in the percentage of women reporting both physical and emotional violence.

***Figure 13.3* Forms of intimate partner violence**

Percentage of women age 15–49 who have ever had a husband/intimate partner and have experienced specific acts of violence by their most recent husband/ intimate partner



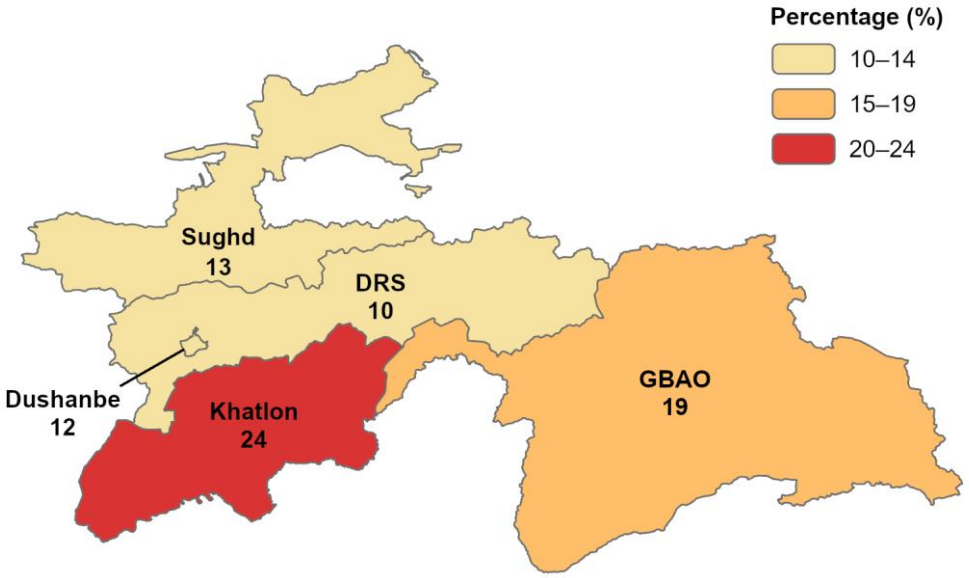
Patterns by background characteristics

- The percentage of women who have experienced physical, sexual, or emotional violence from their current or most recent husband/intimate partner is lowest among those age 20–24 (12%) and highest among those age 30–39 (20%) (**Table 13.11**).

- There is considerable variation by region in women's experience of intimate partner violence; 10% of women in DRS have experienced physical, sexual, or emotional violence from their current or most recent husband/intimate partner, as compared with 24% of women in Khatlon (**Map 13.1**).

Map 13.1 Intimate partner violence by region

Percentage of women age 15–49 who ever had a husband/intimate partner and have ever experienced physical, sexual, or emotional violence committed by their most recent husband/intimate partner



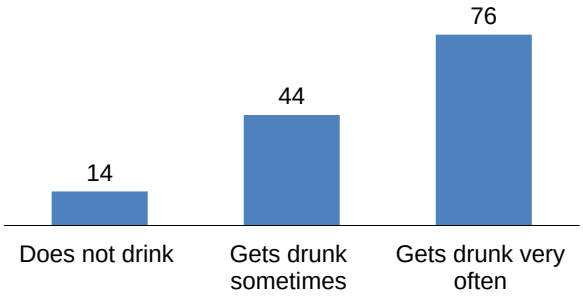
- Thirty-one percent of women who are divorced, separated, or widowed have experienced any of the three forms of violence, more than twice the percentage among women who are currently married or living with their partner (15%).

Patterns by husband's/intimate partner's characteristics and women's empowerment indicators

- The likelihood of experiencing physical, sexual, or emotional violence increases with husbands'/intimate partners' alcohol consumption. Fourteen percent of women whose husband/intimate partner does not drink have ever experienced any of the three types of violence, as compared with 44% of those whose husband/intimate partner is sometimes drunk and 76% of those whose husband/intimate partner is often drunk (**Figure 13.4** and **Table 13.12**).

Figure 13.4 Intimate partner violence by husband's/intimate partner's alcohol consumption

Percentage of women who have ever had a husband/intimate partner and have ever experienced emotional, physical, or sexual violence by their most recent husband/intimate partner



- Women's experience of physical, sexual, or emotional violence increases with their husbands'/intimate partners' education. Twelve percent of women whose husband/intimate partner has no education or a primary education have experienced physical, sexual or emotional violence, compared with 18%–19% of women whose husband/intimate partner has a professional primary/middle or higher education.

- There is a strong relationship between the number of controlling behaviors displayed by a woman's husband or intimate partner and her experience of physical, sexual, or emotional violence. The percentage of women who have experienced any of the three types of violence increases from 3% among those whose husband or intimate partner displays no controlling behaviors to 13% among those whose husband displays one or two behaviors, 30% among those whose husband displays three or four behaviors, and 73% among those whose husband displays all five behaviors.

- The percentage of women who are victims of intimate partner violence is much higher among those who reported that their fathers beat their mothers (50%) than among those who reported that their fathers did not beat their mothers (14%).

- Five percent of women who are never afraid of their husband/intimate partner have ever experienced violence, compared with 14% of those who are sometimes afraid and 30% of those who are afraid most of the time.

13.5.2 Intimate Partner Violence in the Past 12 Months Perpetrated by Any Husband/Intimate Partner

Intimate partner violence by any partner in the past 12 months

Percentage of women who experienced any of the specified acts of physical, sexual, or emotional violence committed by any husband or any intimate partner in the 12 months preceding the survey. These indicators correspond to SDG 5.2.1.

Sample: Women age 15–49 who ever had a husband or an intimate partner

Fourteen percent of women who have ever had one or more husbands/intimate partners experienced physical, sexual, or emotional violence by a husband/intimate partner in the past 12 months; 6% experienced emotional violence, 11% experienced physical violence, and 1% experienced sexual violence (**Table 13.13**).

13.6 Injuries to Women due to Intimate Partner Violence

Injuries due to intimate partner violence

Percentage of women who have the following types of injuries from intimate partner violence: cuts, bruises, or aches; eye injuries, sprains, dislocations, or burns; or deep wounds, broken bones, broken teeth, or any other serious injury.

Sample: Women age 15–49 who have experienced physical or sexual violence committed by their current or most recent husband or intimate partner

Thirty-one percent of women age 15–49 who have ever experienced physical or sexual violence by their current or most recent husband/intimate partner have sustained injuries. The most commonly reported injuries are cuts, bruises, or aches (30%); 12% of women experienced eye injuries, sprains, dislocations, or burns, and 4% experienced deep wounds, broken bones, broken teeth, or any other serious injury (**Table 13.14**).

13.7 Violence Initiated by Women against Their Husband/Intimate Partner

Initiation of physical violence by women

Percentage of women who have ever hit, slapped, kicked, or done anything else to physically hurt their current or most recent husband/intimate partner at times when he was not already beating or physically hurting them.

Sample: Women age 15–49 who ever had a husband or an intimate partner

One percent of women age 15–49 who have ever had a husband/intimate partner have ever initiated physical violence against their current or most recent husband/intimate partner when he was not already beating or physically hurting them. One percent initiated such violence in the past 12 months. Three percent of women who have themselves experienced intimate partner physical violence have ever initiated such violence, as compared with less than 1% of women who have not experienced physical intimate partner violence (**Table 13.15**).

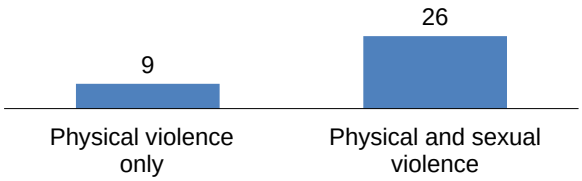
Table 13.16 presents data on initiation of physical violence by women against their husband/intimate partner by the husband's/intimate partner's characteristics and women's empowerment indicators.

13.8 Help Seeking among Women Who Have Experienced Violence

Overall, only 23% of women age 15–49 who have ever experienced physical or sexual violence sought help to stop the violence or told someone about it. The percentage of women who have sought help is higher among those who have experienced both physical and sexual violence (26%) than among those who have experienced only physical violence (9%) (**Table 13.17** and **Figure 13.5**).

***Figure 13.5* Help seeking by type of violence experienced**

Percentage of women age 15–49 who have experienced physical or sexual violence and sought help



Patterns by background characteristics

- More women from urban areas (16%) sought help than women from rural areas (9%). Similarly, more women from urban (15%) than rural (11%) areas told someone about the violence.
- Help-seeking behavior varies greatly by region: 7% of women living in Khatlon sought help, as compared with 27% of those living in Dushanbe. In other regions, the percentage of women who sought help ranged from 11% to 15%.
- Help seeking does not vary consistently with household wealth or education. Notably, however, more women from households in the highest wealth quintile sought help (18%) than women from households in the other quintiles.

Sources for Help

Among women who have experienced physical or sexual violence and sought help, the most common source of help is their own family (64%), followed by their husband's/intimate partner's family (43%). Few women sought help from a friend (7%), a lawyer (5%), or the police (3%) (**Table 13.18**).

List of Tables

For more information on domestic violence, see the following tables:

Table 13.1 Experience of physical violence by any perpetrator

Percentage of women age 15–49 who have experienced physical violence by any perpetrator since age 15 and percentage who experienced physical violence by any perpetrator in the 12 months preceding the survey, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who have experienced physical violence since age 15[1]	Percentage who experienced physical violence in the past 12 months			Number of women
		Often	Sometimes	Often or sometimes[2]	
Age					
15–19	3.6	0.2	3.1	3.3	1,091
20–24	9.3	0.9	7.4	8.3	1,039
25–29	11.7	2.1	8.0	10.1	1,031
30–39	17.3	2.5	10.0	12.6	1,963
40–49	13.1	1.7	7.6	9.3	1,324
Residence					
Urban	11.1	1.4	6.6	8.1	1,760
Rural	12.2	1.7	8.0	9.7	4,688
Region					
Dushanbe	7.4	1.2	3.5	4.7	703
GBAO	16.0	0.4	10.6	11.0	101
Sughd	8.9	1.3	4.0	5.3	1,810
DRS	8.3	1.0	4.7	5.7	1,533
Khatlon	18.0	2.5	13.5	16.0	2,301
FTF districts	12.2	1.3	9.5	10.8	1,293
Marital status					
Never married	1.9	0.0	1.4	1.5	1,215
Never had intimate partner	1.9	0.0	1.4	1.4	1,207
Ever had intimate partner	*	*	*	*	8
Ever married	14.3	2.0	9.0	11.1	5,233
Married or living together	13.3	1.5	9.1	10.7	4,890
Divorced/separated/ widowed	27.9	8.9	7.9	16.8	342
Education					
None/primary	13.5	5.2	6.1	11.3	275
General basic	13.1	1.7	8.8	10.5	2,112
General secondary	10.6	1.4	7.2	8.5	2,803
Professional primary/middle	13.8	2.4	6.8	9.2	506
Higher	11.7	0.7	7.0	7.8	752
Wealth quintile					
Lowest	11.8	2.0	8.1	10.1	1,173
Second	12.9	2.4	8.2	10.7	1,284
Middle	13.6	1.7	9.6	11.3	1,285
Fourth	11.4	0.8	7.4	8.2	1,304
Highest	10.1	1.3	5.0	6.3	1,402
Total	11.9	1.6	7.6	9.3	6,448

Note: An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

[1] Includes physical violence in the past 12 months. For women who were married or living together before age 15 and reported violence only by their husband and for never-married women who had an intimate partner before age 15 and reported violence only by their intimate partner, the violence could have occurred before age 15.

[2] Includes women who reported physical violence in the past 12 months but for whom frequency is not known

Table 13.2 Persons committing physical violence

Among women age 15–49 who have experienced physical violence since age 15, percentage who report specific persons who committed the violence, by the respondent's partnership status, Tajikistan DHS 2023

	Partnership status		
Person	Ever married/ ever had intimate partner	Never married/ never had intimate partner	Total
Current husband/intimate partner	83.3	na	80.8
Former husband/intimate partner	17.4	na	16.9
Current boyfriend	nc	nc	nc
Former boyfriend	0.0	*	0.3
Father/stepfather	0.7	*	0.6
Mother/stepmother	1.0	*	2.1
Sister/brother	0.9	*	2.3
Daughter/son	0.0	*	0.0
Other relative	0.4	*	0.4
Mother-in-law	0.1	na	0.1
Father-in-law	nc	nc	nc
Other in-law	0.2	na	0.2
Teacher	0.0	*	1.2
Schoolmate/classmate	0.3	*	0.3
Employer/someone at work	nc	nc	nc
Police/soldier	nc	nc	nc
Number of women who have experienced physical violence since age 15	747	23	770

Note: The term husband includes a partner with whom a woman is living as if married. Percentages may add to more than 100% since women can report more than one perpetrator. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.
na = not applicable
nc = no cases

Table 13.3 Experience of violence during pregnancy

Among women age 15–49 who have ever been pregnant, percentage who have ever experienced physical violence during pregnancy, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who experienced violence during pregnancy	Number of women who have ever been pregnant
Age		
15–19	0.0	91
20–24	0.2	726
25–29	0.7	966
30–39	1.1	1,876
40–49	0.9	1,257
Residence		
Urban	1.4	1,281
Rural	0.6	3,635
Region		
Dushanbe	2.1	501
GBAO	2.0	74
Sughd	0.8	1,406
DRS	1.4	1,175
Khatlon	0.1	1,760
FTF districts	0.0	1,000
Marital status		
Never married	*	19
Never had intimate partner	*	17
Ever had intimate partner	*	2
Ever married	0.8	4,897
Married or living together	0.5	4,614
Divorced/separated/ widowed	5.4	283
Number of living children		
0	0.1	197
1–2	1.1	1,905
3–4	0.8	2,432
5+	0.3	383
Education		
None/primary	1.5	230
General basic	1.3	1,509
General secondary	0.4	2,277
Professional primary/middle	1.0	364
Higher	0.8	536
Wealth quintile		
Lowest	0.6	945
Second	0.8	999
Middle	0.7	939
Fourth	0.4	1,032
Highest	1.7	1,001
Total	0.8	4,916

Note: An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

Table 13.4 Experience of sexual violence by any perpetrator

Percentage of women age 15–49 who have ever experienced sexual violence by any perpetrator and percentage who experienced sexual violence by any perpetrator in the 12 months preceding the survey, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who have experienced sexual violence by any perpetrator: Ever[1]	In the past 12 months	Number of women
Age			
15–19	0.0	0.0	1,091
20–24	1.3	1.0	1,039
25–29	2.0	1.1	1,031
30–39	2.8	1.5	1,963
40–49	2.5	1.2	1,324
Residence			
Urban	1.9	1.2	1,760
Rural	1.9	1.0	4,688
Region			
Dushanbe	1.3	0.6	703
GBAO	1.8	1.0	101
Sughd	2.1	0.7	1,810
DRS	1.3	0.8	1,533
Khatlon	2.2	1.6	2,301
FTF districts	0.3	0.3	1,293
Marital status			
Never married	0.2	0.0	1,215
Never had intimate partner	0.1	0.0	1,207
Ever had intimate partner	*	*	8
Ever married	2.3	1.3	5,233
Married or living together	1.7	1.2	4,890
Divorced/separated/ widowed	10.6	2.5	342
Employment			
Employed for cash	4.6	2.4	1,307
Employed not for cash	2.9	1.9	196
Not employed	1.1	0.7	4,945
Education			
None/primary	1.1	1.1	275
General basic	1.9	1.0	2,112
General secondary	1.9	1.2	2,803
Professional primary/middle	2.1	0.8	506
Higher	1.6	1.0	752
Wealth quintile			
Lowest	1.9	1.1	1,173
Second	1.4	0.8	1,284
Middle	2.6	1.2	1,285
Fourth	1.9	1.4	1,304
Highest	1.6	0.9	1,402
Total	1.9	1.1	6,448

Note: An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.
[1] Includes experience of sexual violence in the past 12 months

Table 13.5 Persons committing sexual violence

Among women age 15–49 who have experienced sexual violence, percentage who report specific persons who committed the violence, according to respondent's partnership status, Tajikistan DHS 2023

	Partnership status		
Person	Ever married/ ever had intimate partner	Never married/ never had intimate partner	Total
Current husband/intimate partner	84.4	na	83.1
Former husband/intimate partner	19.2	na	18.9
Current/former boyfriend	5.1	*	6.5
Number of women who have experienced sexual violence	119	2	120

Note: The term husband includes a partner with whom a woman is living as if married. Percentages may add to more than 100% since women can report more than one perpetrator. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.
na = not applicable

Table 13.6 Experience of sexual violence by any non-intimate partner

Percentage of women age 15–49 who have ever experienced sexual violence by someone who is not a husband or intimate partner, and percentage who refused to answer whether they experienced sexual violence by someone other than a husband/intimate partner, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who have experienced sexual violence by someone other than a husband/intimate partner		Number of women
	Ever[1]	Refused to answer	
Age			
15–19	0.0	2.8	1,091
20–24	0.3	2.2	1,039
25–29	0.0	3.0	1,031
30–39	0.2	1.9	1,963
40–49	0.1	1.2	1,324
Residence			
Urban	0.1	2.0	1,760
Rural	0.1	2.2	4,688
Region			
Dushanbe	0.0	0.8	703
GBAO	0.0	0.7	101
Sughd	0.4	2.4	1,810
DRS	0.0	0.3	1,533
Khatlon	0.0	3.6	2,301
FTF districts	0.0	3.4	1,293
Marital status			
Never married	0.1	3.4	1,215
Never had intimate partner	0.1	3.4	1,207
Ever had intimate partner	*	*	8
Ever married	0.1	1.8	5,233
Married or living together	0.1	1.8	4,890
Divorced/separated/ widowed	0.8	2.1	342
Education			
None/primary	0.0	0.9	275
General basic	0.1	2.0	2,112
General secondary	0.2	2.4	2,803
Professional primary/middle	0.0	2.3	506
Higher	0.0	1.8	752
Wealth quintile			
Lowest	0.2	2.0	1,173
Second	0.0	3.0	1,284
Middle	0.3	3.0	1,285
Fourth	0.0	1.0	1,304
Highest	0.1	1.7	1,402
Total	0.1	2.1	6,448

Note: The term husband includes a partner with whom a woman is living as if married. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

[1] Includes experience of violence in the past 12 months

Table 13.7 Age at first experience of sexual violence

Percentage of women age 15–49 who experienced sexual violence by specific exact ages, according to current age and type of perpetrator, Tajikistan DHS 2023

Background characteristic	Percentage who first experienced sexual violence by exact age:					Percentage who have not experienced sexual violence	Number of women
	10	12	15	18	22		
Age							
15–19	0.0	0.0	0.0	na	na	100.0	1,091
20–24	0.0	0.0	0.0	0.0	na	98.7	1,039
25–29	0.0	0.0	0.0	0.2	0.9	98.0	1,031
30–39	0.0	0.0	0.0	0.1	1.0	97.2	1,963
40–49	0.0	0.0	0.1	0.5	1.3	97.5	1,324
18–29	0.0	0.0	0.0	0.1	na	98.7	2,486
Total	0.0	0.0	0.0	0.2	0.9	98.1	6,448
Type of perpetrator							
Any husband/ intimate partner[1]	0.0	0.0	0.0	0.2	1.1	97.7	5,241
Any non-intimate partner[2]	0.0	0.0	0.0	0.0	0.1	97.8	6,448

Note: The term husband includes a partner with whom a woman is living as if married.
na = not applicable
[1] Includes only ever-married women and never-married women who have ever had an intimate partner
[2] Includes all women

Table 13.8 Experience of different forms of violence

Percentage of women age 15–49 who have ever experienced different forms of violence by current age, Tajikistan DHS 2023

Age	Physical violence only	Sexual violence only	Physical and sexual violence	Physical or sexual violence	Number of women
15–19	3.6	0.0	0.0	3.6	1,091
15–17	2.1	0.0	0.0	2.1	676
18–19	6.1	0.0	0.0	6.1	415
20–24	8.5	0.4	0.8	9.7	1,039
25–29	10.5	0.7	1.2	12.4	1,031
30–39	15.0	0.5	2.3	17.7	1,963
40–49	10.8	0.2	2.3	13.3	1,324
Total	10.4	0.4	1.5	12.3	6,448

Table 13.9 Forms of controlling behaviors and intimate partner violence

Percentage of women age 15–49 who have ever had a husband or intimate partner and have experienced controlling behaviors and various forms of intimate partner violence ever or in the 12 months preceding the survey perpetrated by a husband or intimate partner, Tajikistan DHS 2023

Type of violence experienced	Ever experienced	Experienced in the past 12 months	Frequency in the past 12 months	
			Often	Sometimes
CONTROLLING BEHAVIORS AND INTIMATE PARTNER VIOLENCE PERPETRATED BY THE CURRENT OR MOST RECENT HUSBAND OR INTIMATE PARTNER				
Controlling behavior				
Any controlling behavior	79.8	77.4	40.7	36.7
Is jealous or angry if she talks to other men	72.8	68.3	29.1	39.2
Wrongly accuses her of being unfaithful	8.4	7.6	2.6	5.0
Does not permit her to meet her female friends	24.6	23.0	9.2	13.7
Tries to limit her contact with her family	10.0	9.3	2.0	7.3
Insists on knowing where she is at all times	56.4	54.7	28.5	26.2
Physical violence				
Any physical violence	13.5	10.9	2.0	8.9
Pushed her, shook her, or threw something at her	6.7	5.1	1.0	4.1
Slapped her	10.8	8.4	1.2	7.2
Twisted her arm or pulled her hair	4.9	3.9	0.8	3.1
Punched her with his fist or with something that could hurt her	4.6	3.5	0.5	3.1
Kicked her, dragged her, or beat her up	2.5	1.9	0.4	1.4
Tried to choke her or burn her on purpose	0.3	0.2	0.1	0.1
Attacked her with a knife, gun, or other weapon	0.1	0.1	0.0	0.0
Sexual violence				
Any sexual violence	1.9	1.3	0.2	1.1
Physically forced her to have sexual intercourse with him when she did not want to	1.5	1.0	0.2	0.8
Physically forced her to perform any other sexual acts she did not want to	0.6	0.3	0.1	0.3
Forced her with threats or in any other way to perform sexual acts she did not want to	0.4	0.2	0.0	0.2
Emotional violence				
Any emotional violence	7.0	6.0	1.5	4.5
Said or did something to humiliate her in front of others	5.0	4.0	1.2	2.8
Threatened to hurt or harm her or someone she cared about	3.6	3.0	0.4	2.6
Insulted her or made her feel bad about herself	3.5	2.8	0.4	2.4
At least three forms of controlling behaviors	24.7	24.1	15.7	8.4
Any form of physical or sexual violence	13.9	11.3	2.2	9.1
Any form of emotional or physical or sexual violence	16.4	13.9	3.1	10.8
INTIMATE PARTNER VIOLENCE PERPETRATED BY ANY CURRENT OR PREVIOUS HUSBAND OR INTIMATE PARTNER				
Physical violence	13.9	10.9	na	na
Sexual violence	2.2	1.3	na	na
Emotional violence	7.3	6.0	na	na
Any form of physical or sexual violence	14.3	11.3	na	na
Any form of emotional or physical or sexual violence	16.8	13.9	na	na
Number of ever-married or never-married women who ever had an intimate partner	5,241	5,241	5,241	5,241

Note: The term husband includes a partner with whom a woman is living as if married. Husband/intimate partner refers to the current husband for currently married women; the most recent husband for divorced, separated, or widowed women; the current intimate partner for never-married women who currently have an intimate partner; and the most recent intimate partner for never-married women who do not currently have an intimate partner but had one in the past.
na = not available

Table 13.10 Controlling behaviors of husband/intimate partner by background characteristics

Percentage of women age 15–49 who have ever had a husband or intimate partner whose husband/intimate partner has ever demonstrated specific types of controlling behaviors, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage of women whose husband/intimate partner:							Number of women who ever had a husband/intimate partner
	Is jealous or angry if she talks to other men	Wrongly accuses her of being unfaithful	Does not permit her to meet her female friends	Tries to limit her contact with her family	Insists on knowing where she is at all times	Displays 3 or more of the specific behaviors	Displays none of the specific behaviors	
Age								
15–19	81.1	3.5	28.4	12.9	62.4	30.0	13.6	170
20–24	78.1	7.1	27.1	9.5	57.8	25.7	16.6	862
25–29	77.3	8.1	23.8	10.2	57.3	25.1	16.9	994
30–39	72.8	9.5	26.4	10.5	57.3	26.0	19.8	1,921
40–49	64.6	8.2	20.4	9.1	52.7	20.9	26.7	1,294
Residence								
Urban	72.9	9.0	27.6	9.5	54.8	26.3	20.0	1,355
Rural	72.7	8.1	23.6	10.2	57.0	24.1	20.3	3,886
Region								
Dushanbe	72.6	8.2	28.6	8.2	51.5	24.2	21.5	529
GBAO	41.7	9.7	26.1	5.0	53.3	18.3	35.7	78
Sughd	77.9	4.5	21.0	6.1	73.7	19.3	10.1	1,492
DRS	64.5	4.9	22.2	13.4	42.2	27.6	32.0	1,259
Khatlon	75.5	13.7	27.9	11.6	53.7	27.4	19.4	1,884
FTF districts	74.2	9.6	25.1	4.7	50.9	22.8	19.7	1,072
Marital status								
Never married	*	*	*	*	*	*	*	8
Currently has intimate partner	*	*	*	*	*	*	*	7
Had intimate partner	*	*	*	*	*	*	*	2
Ever married	72.8	8.3	24.6	10.0	56.5	24.7	20.2	5,233
Currently married or living together	74.1	7.6	24.6	9.4	57.1	24.3	19.0	4,890
Divorced/separated/ widowed	54.7	19.5	25.1	18.5	47.8	29.7	37.4	342
Education								
None/primary	70.2	10.3	30.2	16.0	54.4	29.8	24.0	243
General basic	72.0	8.8	26.7	8.2	54.6	26.4	21.5	1,597
General secondary	72.1	7.2	21.5	10.2	56.4	22.0	20.1	2,416
Professional primary/middle	76.5	8.7	23.9	9.9	56.9	24.5	18.2	396
Higher	76.2	10.6	29.7	11.8	61.9	28.6	17.3	588
Wealth quintile								
Lowest	72.4	9.6	22.9	7.8	48.8	21.9	21.2	1,007
Second	72.4	9.7	24.7	10.6	56.6	24.7	20.2	1,041
Middle	71.5	8.3	26.1	10.8	60.0	25.9	20.0	1,020
Fourth	72.7	6.4	21.2	12.3	60.1	24.3	20.8	1,110
Highest	74.8	7.9	28.4	8.4	56.2	26.4	18.9	1,062
Woman afraid of husband/intimate partner								
Afraid most of the time	89.1	16.1	40.3	16.9	78.4	42.1	5.6	1,268
Sometimes afraid	71.3	6.4	21.3	8.9	52.0	21.3	21.3	3,221
Never afraid	51.6	3.8	12.5	3.3	38.1	9.7	40.2	752
Total	72.8	8.4	24.6	10.0	56.4	24.7	20.2	5,241

Note: The term husband includes a partner with whom a woman is living as if married. Husband/intimate partner refers to the current husband for currently married women; the most recent husband for divorced, separated, or widowed women; the current intimate partner for never-married women who currently have an intimate partner; and the most recent intimate partner for never-married women who do not currently have an intimate partner but had one in the past. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

Table 13.11 Intimate partner violence by background characteristics

Percentage of women age 15–49 who have ever had a husband or intimate partner and have ever experienced emotional, physical, or sexual violence committed by their current or most recent husband/intimate partner, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Emotional violence	Physical violence	Sexual violence	Physical and sexual	Physical and sexual and emotional	Physical or sexual	Physical or sexual or emotional	Number of women who ever had a husband/intimate partner
Age								
15–19	3.2	11.7	0.1	0.1	0.1	11.7	12.5	170
20–24	3.6	10.7	1.5	1.0	0.9	11.2	11.9	862
25–29	6.8	11.5	1.7	0.9	0.5	12.3	15.9	994
30–39	9.1	16.7	2.3	2.0	1.6	17.0	19.5	1,921
40–49	6.8	12.4	2.0	1.8	1.1	12.6	15.6	1,294
Residence								
Urban	8.3	13.1	2.1	1.8	1.4	13.4	16.4	1,355
Rural	6.6	13.6	1.8	1.4	1.0	14.0	16.4	3,886
Region								
Dushanbe	7.8	8.2	1.6	1.0	1.0	8.8	12.2	529
GBAO	8.2	17.6	1.5	1.0	0.7	18.1	19.2	78
Sughd	7.2	9.9	2.2	1.8	1.5	10.2	13.4	1,492
DRS	5.0	8.1	1.2	0.9	0.8	8.3	10.0	1,259
Khatlon	7.9	21.3	2.3	1.8	1.0	21.7	24.1	1,884
FTF districts	2.5	14.7	0.3	0.1	0.1	14.9	16.0	1,072
Marital status								
Never married	*	*	*	*	*	*	*	8
Currently has intimate partner	*	*	*	*	*	*	*	7
Had intimate partner	*	*	*	*	*	*	*	2
Ever married	7.0	13.5	1.9	1.5	1.1	13.9	16.4	5,233
Currently married or living together	6.0	12.6	1.4	1.1	0.6	12.9	15.4	4,890
Divorced/separated/ widowed	20.8	26.5	9.5	8.0	8.0	28.0	31.1	342
Employment								
Employed for cash	14.3	19.9	4.7	4.1	3.4	20.5	24.3	1,131
Employed not for cash	6.4	16.2	3.3	2.7	0.5	16.8	21.4	174
Not employed	5.0	11.5	1.1	0.7	0.5	11.9	13.9	3,936
Education								
None/primary	8.3	14.6	1.2	1.2	1.2	14.6	17.3	243
General basic	8.1	15.3	2.1	1.9	1.6	15.5	18.4	1,597
General secondary	5.1	11.9	1.9	1.3	0.7	12.5	14.5	2,416
Professional primary/middle	9.8	14.9	2.1	1.6	1.5	15.3	17.6	396
Higher	9.5	13.7	1.6	1.4	1.0	13.8	17.6	588
Wealth quintile								
Lowest	7.1	13.1	1.9	1.4	1.1	13.5	16.5	1,007
Second	7.7	15.3	1.7	1.3	1.3	15.7	18.4	1,041
Middle	6.5	15.2	2.3	1.9	1.1	15.7	18.1	1,020
Fourth	6.0	12.1	1.8	1.5	0.6	12.5	14.3	1,110
Highest	7.8	11.9	1.8	1.5	1.3	12.2	14.8	1,062
Total	7.0	13.5	1.9	1.5	1.1	13.9	16.4	5,241

Note: The term husband includes a partner with whom a woman is living as if married. Husband/intimate partner refers to the current husband for currently married women; the most recent husband for divorced, separated, or widowed women; the current intimate partner for never-married women who currently have an intimate partner; and the most recent intimate partner for never-married women who do not currently have an intimate partner but had one in the past. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

Table 13.12 Intimate partner violence by husband's/intimate partner's characteristics and women's empowerment indicators

Percentage of women age 15–49 who have ever had a husband or intimate partner and have ever experienced emotional, physical, or sexual violence committed by their current or most recent husband/intimate partner, according to the husband's/intimate partner's characteristics and women's empowerment indicators, Tajikistan DHS 2023

Background characteristic	Emotional violence	Physical violence	Sexual violence	Physical and sexual	Physical and sexual and emotional	Physical or sexual	Physical or sexual or emotional	Number of women who ever had a husband/intimate partner
Husband's/intimate partner's alcohol consumption								
Does not drink alcohol	5.1	11.0	0.9	0.6	0.3	11.3	13.5	4,806
Drinks alcohol but is never drunk	*	*	*	*	*	*	*	4
Is sometimes drunk	26.6	37.3	11.4	10.5	8.6	38.1	43.9	372
Is often drunk	39.6	69.3	24.8	21.5	14.8	72.5	75.9	59
Husband's education[1]								
None/primary	3.9	12.1	0.0	0.0	0.0	12.1	12.1	80
General basic	9.0	11.6	3.1	2.4	1.8	12.3	16.1	641
General secondary	5.7	13.2	1.9	1.4	1.0	13.6	15.7	2,757
Professional primary/middle	8.2	15.3	1.8	1.8	1.2	15.3	18.9	345
Higher	8.5	14.7	1.6	1.4	1.0	14.9	17.5	1,417
Spousal education difference[1]								
Husband has more education	7.8	15.3	1.5	1.3	0.8	15.5	18.5	2,236
Wife has more education	5.7	11.2	1.7	1.4	0.8	11.5	13.9	748
Both have equal education	4.1	10.0	1.2	0.7	0.3	10.5	12.3	1,900
Neither has any education	*	*	*	*	*	*	*	5
Spousal age difference[1]								
Wife older	8.0	13.6	2.3	2.2	1.9	13.7	15.7	212
Wife is same age	6.4	15.9	0.7	0.7	0.2	15.9	17.8	403
Wife 1–4 years younger	5.5	11.6	1.1	0.8	0.5	11.9	14.0	2,403
Wife 5–9 years younger	5.4	12.0	1.1	0.8	0.3	12.3	15.3	1,561
Wife 10 or more years younger	11.1	18.2	4.8	3.9	2.6	19.1	22.6	311
Number of decisions in which woman participates[2]								
0	5.4	11.7	0.7	0.5	0.3	11.9	14.3	1,929
1–2	6.6	13.0	1.5	1.3	1.0	13.2	15.4	1,229
3	6.3	13.3	2.0	1.5	0.6	13.8	16.5	1,732
Number of controlling behaviors displayed by husband/intimate partner[3]								
0	0.8	2.2	0.4	0.0	0.0	2.5	3.0	1,060
1–2	3.0	11.1	1.3	0.9	0.3	11.5	12.7	2,888
3–4	14.3	24.8	3.9	3.5	3.0	25.2	29.9	1,120
5	64.6	50.2	8.7	8.2	8.2	50.8	72.5	172
Number of reasons for which wife beating is justified[4]								
0	4.3	7.4	1.3	1.0	0.6	7.7	9.2	2,429
1–2	9.0	14.2	2.6	1.8	1.4	15.1	19.7	805
3–4	9.1	20.5	2.6	2.6	2.0	20.5	22.7	1,139
5	10.1	20.7	2.0	1.3	1.0	21.4	25.1	868
Woman's father beat mother								
Yes	27.3	43.2	7.0	6.3	4.8	43.8	50.0	326
No	5.7	11.3	1.5	1.2	0.8	11.7	13.9	4,537
Don't know	5.1	13.8	2.3	1.3	1.1	14.8	17.0	378
Woman afraid of husband/intimate partner								
Afraid most of the time	15.6	26.3	4.6	4.1	3.5	26.7	30.4	1,268
Sometimes afraid	4.8	10.8	1.2	0.8	0.4	11.2	13.5	3,221
Never afraid	1.9	3.5	0.3	0.2	0.2	3.5	5.0	752
Total	7.0	13.5	1.9	1.5	1.1	13.9	16.4	5,241

Note: The term husband includes a partner with whom a woman is living as if married. Husband/intimate partner refers to the current husband for currently married women; the most recent husband for divorced, separated, or widowed women; the current intimate partner for never-married women who currently have an intimate partner; and the most recent intimate partner for never-married women who do not currently have an intimate partner but had one in the past. Total includes 1 woman whose husband's education and spousal education difference are missing. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

[1] Includes only currently married women

[2] According to the wife's report. Includes only currently married women. See Table 14.7 for list of decisions.

[3] According to the woman's report. See Table 13.9 for list of behaviors.

[4] According to the woman's report. See Table 14.8 for list of reasons.

Table 13.13 Violence by any husband or intimate partner in the past 12 months

Percentage of women age 15–49 who have ever had a husband or intimate partner and experienced emotional, physical, or sexual violence by any husband/intimate partner in the past 12 months, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Emotional violence	Physical violence	Sexual violence	Physical and sexual	Physical and sexual and emotional	Physical or sexual	Physical or sexual or emotional	Number of women who ever had a husband/intimate partner
Age								
15–19	3.2	11.7	0.1	0.1	0.1	11.7	12.5	170
20–24	3.0	9.3	1.2	0.7	0.6	9.8	10.6	862
25–29	6.3	10.3	1.2	0.7	0.4	10.8	14.3	994
30–39	7.9	12.8	1.5	1.1	0.8	13.2	16.5	1,921
40–49	5.3	9.6	1.3	1.2	0.4	9.7	12.2	1,294
Residence								
Urban	6.8	10.3	1.6	1.2	0.9	10.7	13.8	1,355
Rural	5.7	11.1	1.2	0.9	0.5	11.5	13.9	3,886
Region								
Dushanbe	6.4	6.1	0.9	0.3	0.2	6.6	10.2	529
GBAO	5.8	13.0	1.3	0.5	0.3	13.8	15.1	78
Sughd	5.4	6.1	0.9	0.7	0.4	6.4	9.5	1,492
DRS	4.0	6.3	0.9	0.7	0.5	6.6	8.1	1,259
Khatlon	7.7	19.0	2.0	1.5	0.9	19.5	22.2	1,884
FTF districts	2.2	13.0	0.3	0.1	0.1	13.2	14.2	1,072
Marital status								
Never married	*	*	*	*	*	*	*	8
Currently has intimate partner	*	*	*	*	*	*	*	7
Had intimate partner	*	*	*	*	*	*	*	2
Ever married	6.0	10.9	1.3	0.9	0.6	11.3	13.9	5,233
Currently married or living together	5.6	10.6	1.2	0.8	0.4	10.9	13.6	4,890
Divorced/separated/ widowed	11.4	16.0	2.5	2.3	2.3	16.2	18.2	342
Education								
None/primary	7.1	12.7	1.2	1.2	1.2	12.7	14.9	243
General basic	7.2	13.1	1.3	1.1	0.9	13.2	16.2	1,597
General secondary	4.2	9.7	1.4	0.9	0.4	10.1	12.1	2,416
Professional primary/middle	8.4	10.6	1.1	0.1	0.0	11.5	14.6	396
Higher	8.0	9.5	1.3	0.9	0.6	9.9	14.0	588
Wealth quintile								
Lowest	5.8	11.3	1.3	0.8	0.5	11.7	14.5	1,007
Second	6.8	13.2	0.9	0.6	0.6	13.5	16.2	1,041
Middle	6.0	13.0	1.5	1.3	0.6	13.1	15.7	1,020
Fourth	5.2	9.4	1.6	1.0	0.4	10.0	11.6	1,110
Highest	6.2	8.0	1.2	0.9	0.8	8.3	11.6	1,062
Total	6.0	10.9	1.3	0.9	0.6	11.3	13.9	5,241

Note: The term husband includes a partner with whom a woman is living as if married. Any husband/intimate partner includes all current, most recent, and former husbands for ever-married women and all current, most recent, and former intimate partners for never-married women. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

Table 13.14 Injuries to women due to intimate partner violence

Among women age 15–49 who have ever had a husband or intimate partner and have experienced violence committed by their current or most recent husband/intimate partner, percentage who have been injured as a result of the violence, by types of injuries, according to type of violence, Tajikistan DHS 2023

Type of violence experienced	Cuts, bruises, or aches	Eye injuries, sprains, dislocations, or burns	Deep wounds, broken bones, broken teeth, or any other serious injury	Any of these injuries	Number of women who have experienced specified type of violence
Physical violence[1]					
Ever[2]	30.7	11.8	3.7	31.8	707
Past 12 months	29.8	11.1	3.3	31.0	572
Sexual violence					
Ever[2]	50.4	19.0	6.5	50.7	100
Past 12 months	39.1	13.2	2.2	39.6	68
Physical or sexual violence[1]					
Ever[2]	29.8	11.5	3.5	30.9	728
Past 12 months	28.8	10.8	3.2	30.1	590

Note: The term husband includes a partner with whom a woman is living as if married. Husband/intimate partner refers to the current husband for currently married women; the most recent husband for divorced, separated, or widowed women; the current intimate partner for never-married women who currently have an intimate partner; and the most recent intimate partner for never-married women who do not currently have an intimate partner but had one in the past.

[1] Excludes women who reported violence only in response to a direct question on violence during pregnancy

[2] Includes in the past 12 months

Table 13.15 Violence by women against their husband/intimate partner by women's background characteristics

Percentage of women age 15–49 who have ever had a husband or intimate partner and have committed physical violence against their current or most recent husband/intimate partner when he was not already beating or physically hurting them, ever and in the past 12 months, according to women's own experience of intimate partner violence and background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who committed physical violence against their husband/intimate partner		Number of women who ever had a husband/ intimate partner
	Ever[1]	Past 12 months	
Women's experience of physical intimate partner violence			
Ever[1]	2.8	2.6	707
In the past 12 months	3.3	3.2	572
Never	0.2	0.2	4,534
Age			
15–19	0.1	0.1	170
20–24	0.7	0.7	862
25–29	0.1	0.1	994
30–39	0.9	0.8	1,921
40–49	0.4	0.4	1,294
Residence			
Urban	0.7	0.5	1,355
Rural	0.5	0.5	3,886
Region			
Dushanbe	0.7	0.6	529
GBAO	2.0	1.7	78
Sughd	0.3	0.2	1,492
DRS	0.5	0.4	1,259
Khatlon	0.7	0.7	1,884
FTF districts	0.2	0.2	1,072
Marital status			
Never married	*	*	8
Currently has intimate partner	*	*	7
Had intimate partner	*	*	2
Ever married	0.5	0.5	5,233
Currently married or living together	0.6	0.5	4,890
Divorced/separated/widowed	0.1	0.0	342
Employment			
Employed for cash	1.4	1.3	1,131
Employed not for cash	0.0	0.0	174
Not employed	0.3	0.3	3,936
Education			
None/primary	0.5	0.5	243
General basic	0.4	0.4	1,597
General secondary	0.5	0.4	2,416
Professional primary/middle	0.5	0.5	396
Higher	1.5	1.4	588
Wealth quintile			
Lowest	0.1	0.1	1,007
Second	0.3	0.3	1,041
Middle	1.4	1.4	1,020
Fourth	0.6	0.5	1,110
Highest	0.3	0.3	1,062
Total	0.5	0.5	5,241

Note: The term husband includes a partner with whom a woman is living as if married. Husband/intimate partner refers to the current husband for currently married women; the most recent husband for divorced, separated, or widowed women; the current intimate partner for never-married women who currently have an intimate partner; and the most recent intimate partner for never-married women who do not currently have an intimate partner but had one in the past. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

[1] Includes in the past 12 months

Table 13.16 Violence by women against their husband/intimate partner by husband's/ intimate partner's characteristics and women's empowerment indicators

Percentage of women age 15–49 who have ever had a husband or intimate partner and have committed physical violence against their current or most recent husband/intimate partner when he was not already beating or physically hurting them, ever and in the past 12 months, according to their husband's/intimate partner's characteristics and women's empowerment indicators, Tajikistan DHS 2023

Background characteristic	Percentage who committed physical violence against their husband/intimate partner		Number of women who ever had a husband/ intimate partner
	Ever[1]	Past 12 months	
Husband's/intimate partner's alcohol consumption			
Does not drink alcohol	0.4	0.4	4,806
Drinks alcohol but is never drunk	*	*	4
Is sometimes drunk	2.4	2.0	372
Is often drunk	2.8	2.4	59
Husband's education[2]			
None/primary	0.0	0.0	80
General basic	0.9	0.8	641
General secondary	0.4	0.3	2,757
Professional primary/middle	1.3	1.3	345
Higher	0.6	0.5	1,417
Spousal education difference[2]			
Husband has more education	0.5	0.5	2,236
Wife has more education	1.3	1.3	748
Both have equal education	0.4	0.3	1,900
Neither has any education	*	*	5
Spousal age difference[2]			
Wife older	1.4	1.4	212
Wife is same age	0.4	0.4	403
Wife 1–4 years younger	0.5	0.5	2,403
Wife 5–9 years younger	0.6	0.5	1,561
Wife 10 or more years younger	1.2	1.0	311
Number of decisions in which woman participates[3]			
0	0.5	0.5	1,929
1–2	0.7	0.7	1,229
3	0.6	0.5	1,732
Number of controlling behaviors displayed by husband/intimate partner[4]			
0	0.2	0.1	1,060
1–2	0.3	0.3	2,888
3–4	1.4	1.3	1,120
5	1.4	1.2	172
Number of reasons for which wife beating is justified[5]			
0	0.2	0.1	2,429
1–2	1.3	1.3	805
3–4	0.8	0.8	1,139
5	0.4	0.4	868
Woman's father beat mother			
Yes	4.5	4.2	326
No	0.3	0.2	4,537
Don't know	0.7	0.6	378
Woman afraid of husband/intimate partner			
Afraid most of the time	1.9	1.8	1,268
Sometimes afraid	0.1	0.1	3,221
Never afraid	0.1	0.0	752
Total	0.5	0.5	5,241

Note: The term husband includes a partner with whom a woman is living as if married. Husband/intimate partner refers to the current husband for currently married women; the most recent husband for divorced, separated, or widowed women; the current intimate partner for never-married women who currently have an intimate partner; and the most recent intimate partner for never-married women who do not currently have an intimate partner but had one in the past. Total includes 1 woman whose husband's education and spousal education difference are missing. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

[1] Includes in the past 12 months

[2] Includes only currently married women

[3] According to the wife's report. Includes only currently married women. See Table 14.7 for list of decisions.

[4] According to the woman's report. See Table 13.9 for list of behaviors.

[5] According to the woman's report. See Table 14.8 for list of reasons.

Table 13.17 Help seeking to stop violence

Percent distribution of women age 15–49 who have ever experienced physical or sexual violence by their help-seeking behavior, according to type of violence and background characteristics, Tajikistan DHS 2023

Type of violence/ background characteristic	Sought help to stop violence	Never sought help but told someone	Never sought help, never told anyone	Total	Number of women who have ever experienced any physical or sexual violence
Type of violence experienced					
Physical only	9.0	10.2	80.8	100.0	673
Sexual only	*	*	*	100.0	23
Both physical and sexual	26.3	20.9	52.9	100.0	97
Age					
15–19	*	*	*	100.0	40
20–24	10.7	10.6	78.7	100.0	101
25–29	12.7	10.8	76.5	100.0	128
30–39	9.1	12.3	78.6	100.0	348
40–49	10.8	14.1	75.1	100.0	176
Residence					
Urban	16.3	15.2	68.5	100.0	200
Rural	9.4	10.8	79.8	100.0	593
Region					
Dushanbe	27.4	24.2	48.4	100.0	54
GBAO	11.1	19.0	69.9	100.0	17
Sughd	14.5	19.4	66.0	100.0	169
DRS	13.2	11.6	75.2	100.0	131
Khatlon	7.0	7.1	85.9	100.0	422
FTF districts	5.0	7.1	87.9	100.0	159
Marital status					
Never married	*	*	*	100.0	24
Never had intimate partner	*	*	*	100.0	23
Ever had intimate partner	*	*	*	100.0	0
Ever married	10.1	11.7	78.2	100.0	770
Married or living together	6.8	11.1	82.1	100.0	668
Divorced/separated/ widowed	31.2	16.1	52.6	100.0	101
Employment					
Employed for cash	12.8	14.1	73.1	100.0	247
Employed not for cash	*	*	*	100.0	29
Not employed	10.4	10.2	79.4	100.0	517
Education					
None/primary	(22.4)	(5.7)	(71.9)	100.0	37
General basic	13.4	12.5	74.1	100.0	281
General secondary	7.9	11.4	80.7	100.0	315
Professional primary/middle	6.1	17.0	77.0	100.0	71
Higher	14.6	10.3	75.1	100.0	89
Wealth quintile					
Lowest	13.0	8.5	78.4	100.0	143
Second	10.5	8.9	80.6	100.0	169
Middle	8.6	14.6	76.8	100.0	183
Fourth	6.8	10.1	83.1	100.0	153
Highest	17.8	17.2	65.0	100.0	144
Total	11.1	11.9	77.0	100.0	793

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 13.18 Sources for help to stop the violence

Percentage of women age 15–49 who have experienced physical or sexual violence and sought help by sources from which they sought help, according to the type of violence that women reported, Tajikistan DHS 2023

	Type of violence experienced			
Source	Physical only	Sexual only	Both physical and sexual	Physical or sexual violence
Own family	67.1	*	(62.5)	64.1
Husband's/intimate partner's family	40.9	*	(43.5)	43.2
Current/former boyfriend	0.4	*	(0.0)	0.2
Friend	6.2	*	(11.1)	7.4
Neighbor	1.2	*	(3.0)	1.7
Religious leader	0.6	*	(0.0)	0.4
Police	1.5	*	(5.2)	2.5
Lawyer	5.8	*	(3.6)	5.0
Other	0.0	*	(3.5)	1.0
Number of women who have sought help	61	2	25	88

Note: Women can report more than one source from which they sought help. 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.

WOMEN'S EMPOWERMENT 14

Key Findings

- ***Employment:*** 23% of currently married women age 15–49 are employed. The majority of women who are employed are paid in cash only (80%), and another 5% are paid in cash and in-kind.
- ***Control over earnings:*** 77% of currently married women with cash earnings participate in decisions about the use of their earnings; 31% decide on their own, and 46% decide jointly with their husbands.
- ***Ownership of property:*** 63% of women own a house alone or jointly with someone else. Over half of women who own a house have a title or deed with their name on it (54%).
- ***Ownership and use of mobile phones and bank accounts:*** Only 2% of women have a bank account that they use; 65% of women own a mobile phone. Only 14% of women used a mobile phone for financial transactions in the past 12 months.
- ***Participation in decision making:*** 36% of currently married women participate in three specific household decisions either alone or jointly with their husbands; 39% do not participate in any of the three decisions.
- ***Attitudes toward wife beating:*** Just under half of women (48%) agree with at least one justification for wife beating.
- ***Negotiating sexual relations:*** 62% of currently married women can say no to their husband if they do not want to have sexual intercourse, and 53% can ask their husband to use a condom.
- ***Decision making regarding sexual and reproductive health:*** 33% of currently married women say that they make their own informed decisions regarding sexual and reproductive health.

This chapter explores women's empowerment in terms of employment, earnings, control over earnings, and magnitude of earnings relative to those of their partners. The chapter also examines women's ownership of assets including houses and mobile phones as well as their use of bank accounts and mobile-money-service providers. In addition, responses to specific questions are used to define three different indicators of women's empowerment: women's participation in household decision making, women's attitudes towards wife beating, and women's participation in decision making regarding sexual and reproductive health.

14.1 MARRIED WOMEN'S EMPLOYMENT

Employment

Respondents are considered to be employed if they have done any work other than their housework in the 12 months before the survey.

Sample: Currently married women age 15–49

Earning cash for employment

Respondents are asked if they are paid for their labor in cash or in-kind. Only those who receive payment in cash only or in cash and in-kind are considered to earn cash for their employment.

Sample: Currently married women age 15–49 employed in the 12 months before the survey

Less than a quarter (23%) of currently married women age 15–49 in Tajikistan were employed in the 12 months prior to the survey. Among those employed, 80% are paid in cash only and 5% are paid both in cash and in-kind. Thirteen percent of currently married women who are employed are not paid at all (**Table 14.1**).

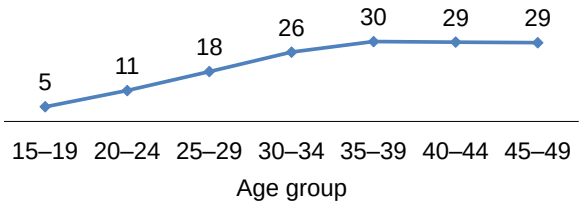
Trends: The percentage of currently married women employed in the past 12 months has declined since 2017, from 25% to 23%; however, the percentage earning only cash has increased, from 74% to 80%.

Patterns by background characteristics

- Employment among currently married women generally increases with age; 5% of women age 15–19 are employed, as compared with 30% of those age 35–39 and 29% of those age 40–49 (**Figure 14.1**).
- The percentage of women who are paid for their work in cash only is highest among those age 40–44 (86%).

Figure 14.1 **Employment by age**

Percentage of currently married women who were employed at any time in the 12 months before the survey



14.2 CONTROL OVER WOMEN'S EARNINGS

Control over one's own cash earnings

Respondents are considered to have control over their own earnings if they participate in decisions alone or jointly with their spouse about how their own earnings will be used.

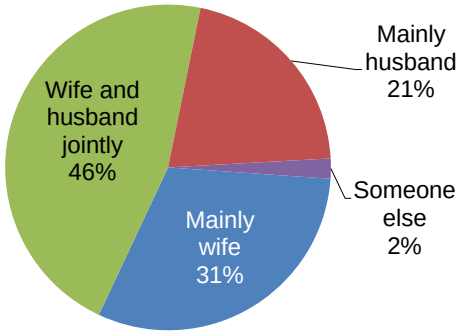
Sample: Currently married women age 15–49 who received cash earnings for employment during the 12 months before the survey

Seventy-seven percent of currently married women age 15–49 with cash earnings decide on their own or jointly with their husbands how their earnings will be used. Thirty-one percent decide on their own how to use earnings, while 46% decide jointly with their husbands. Twenty-one percent of women report that their husband is the main decision maker, and 2% say that the primary decision maker is someone other than themselves or their husband (**Table 14.2.1** and **Figure 14.2**).

Eight percent of currently married women with cash earnings earn more than their husbands, and similarly 8% earn the same as their husbands. Eighty percent of women earn less than their husbands.

Figure 14.2 **Control over women's earnings**

Percent distribution of currently married women with cash earnings in the 12 months before the survey



Trends: The percentage of women who decide on their own or jointly with their husband how they will use their earnings declined from 81% in 2012 to 71% in 2017 before increasing to 77% in 2023. The percentage of women earning more than their husbands increased from 8% in 2012 to 11% in 2017 before decreasing again to 8% in 2023.

Patterns by background characteristics

- The percentage of women who decide on their own how their cash earnings will be used increases from 22% among those age 20–24 to 34% among those age 35–39 and 40–44.
- The percentage of women who participate alone or jointly with their husbands in decisions about how their cash earnings are used varies from a low of 60% in Khatlon to a high of 93% in Dushanbe.
- Women's participation in decisions about their own earnings tends to increase with increasing household wealth; 26% of women in the lowest wealth quintile decide on their own how their cash earnings will be used, as compared with 42% of women in the highest wealth quintile.
- Among currently married women who earn cash, the percentage who earn more than their husbands ranges from a low of 7% in Sughd to a high of 26% in Gorno-Badakhshan Autonomous Oblast (GBAO) (**Table 14.2.1**).

14.3 Control over Men's Earnings

Seven percent of currently married women age 15–49 whose husbands have cash earnings report that they are the main decision maker about how their husband's cash earnings are used, while 49% report that their husband mainly decides how his earnings are used. Notably, the likelihood of joint decision making by the wife and husband is lower for decisions about use of the husband's earnings (38%) than about use of the wife's earnings (46%).

The percentage of women who report that their husband mainly decides how his earnings are used is inversely proportional to educational level; 59% of women with no education or a primary education say that their husband decides how his earnings are used, as compared with 39% of women with a higher education (**Table 14.2.2**).

14.4 Women's Ownership of Assets

14.4.1 Ownership of a House and Documentation of Ownership

Ownership of a house

Respondents who own a house, whether alone or jointly with their spouse, someone else, or both their spouse and someone else.

Documentation of ownership of a house

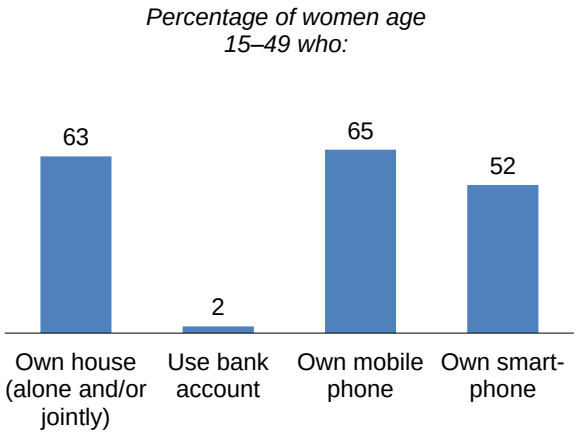
Respondents whose name is on the title/deed or other government-recognized document.

Sample: Women age 15–49

Overall, 63% of women age 15–49 own a house alone and/or jointly. Among them, 5% own a house alone, 56% own a house jointly with someone else, and 1% own a house both alone and jointly. Thirty-eight percent report they do not own a house (**Table 14.3** and **Figure 14.3**).

Documentation of ownership of a house is important with respect to security of tenure as well as the ability to leverage or liquidate the asset if needed. Among women who own a house, 54% possess a title or deed for the house with their name on it; 39% do not possess a title or deed (**Table 14.4**).

Figure 14.3 **Ownership of assets**



Patterns by background characteristics

- The percentage of women who do not own a house decreases with age, from 58% among those age 15–19 to 20% among those age 45–49 (**Table 14.4**).
- House ownership among women is most common in Sughd (72%) and least common in GBAO (51%).
- The percentage of women who own a house does not increase in a linear fashion with increasing household wealth; the percentage is higher among women in the third and fourth wealth quintiles (68% and 72%, respectively) than among women in the lower quintiles (52%–58%) or the highest quintile (61%).

14.4.2 Ownership and Use of Mobile Phones and Bank Accounts

Use of bank accounts or mobile-money-service providers

Respondents who have and use a bank account or who used a mobile phone for financial transactions in the 12 months before the survey.

Sample: Women age 15–49

Ownership of a bank account and a mobile phone are reflections of autonomy and financial independence. Women interviewed in the 2023 TjDHS were asked if they used an account in a bank or other financial institution and whether they owned a mobile phone. Very few women (2%) in Tajikistan have an account in a bank or other financial institution that they use. Sixty-five percent own a mobile phone (**Table 14.5** and **Figure 14.3**).

Women who own a mobile phone were asked if they use it for financial transactions. Among those who own a mobile phone, only 14% say that they used it for financial transactions in the past 12 months (**Table 14.5**).

Patterns by background characteristics

- Mobile phone ownership is higher in urban areas (79%) than in rural areas (60%). Among women who own a mobile phone, use of the phone for financial transactions is twice as high among urban women (23%) as among rural women (11%).
- By region, mobile phone ownership is highest in Dushanbe (87%) and lowest in Districts of Republican Subordination (DRS) and Khatlon (57% and 58%, respectively). Among women who own a mobile phone, the percentage who use the phone for financial transactions ranges from 7% in Khatlon to 34% in Dushanbe.
- Mobile phone ownership rises with increasing education and household wealth. Notably, 92% of women with a higher education have a mobile phone, a larger percentage than any other subgroup of women. Use of mobile phones for financial transactions also increases with increasing education and household wealth.
- Use of bank accounts is rare among women in all groups. Ownership and use of a bank account is more prevalent among women in Dushanbe (11%) and women with a higher education (9%) than among women in other subgroups.

14.5 Participation in Decision Making

Participation in major household decisions

Women are considered to participate in household decisions if they make decisions alone or jointly with their husband in all three of the following areas: (1) their own health care, (2) major household purchases, and (3) visits to their family or relatives.

Sample: Currently married women age 15–49

The 2023 TjDHS sought information from currently married women on their participation in three types of household decisions: their own health care, major household purchases, and visits to their family or relatives. Over half of married women (55%) participate in decisions regarding their own health, either mainly themselves (13%) or jointly with their husbands (42%); 41% participate in decisions on major household purchases, either mainly themselves (7%) or with their husbands (34%); and 51% participate in decisions to visit their families and relatives, either mainly themselves (12%) or with their husbands (39%) (**Table 14.6**). Thirty-six percent of women participate in all three specified household decisions either alone or jointly with their husbands. Thirty-nine percent of women do not participate in any of the three decisions (**Table 14.7**).

Patterns by background characteristics

- The percentage of women who participate in all three decisions increases steadily with age, from 16% among those age 15–19 to 52% among those age 45–49 (**Table 14.7**).
- Participation in all three decisions is higher among women who are employed for cash (45%) than among women who are not employed (34%) and women who are employed but do not earn cash (31%).
- By region, women's participation in all three decisions varies from a low of 21% in Sughd to a high of 58% in Dushanbe.
- Women's participation in all three decisions increases with increasing household wealth, from 30% among women in the lowest and second wealth quintiles to 45% among those in the highest quintile.

14.6 Attitudes toward Wife Beating

Attitudes toward wife beating

Respondents are asked if they agree that a husband is justified in hitting or beating his wife under each of the following five circumstances: she burns the food, she argues with him, she goes out without telling him, she neglects the children, and she refuses to have sex with him. If respondents answer "yes" in at least one circumstance, they are considered to have attitudes justifying wife beating.

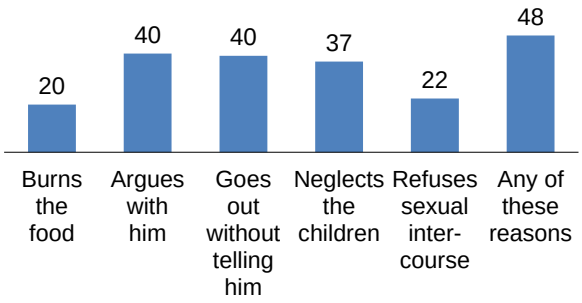
Sample: Women age 15–49

In Tajikistan, 48% of women age 15–49 agree that a husband is justified in beating his wife in at least one of the five specified circumstances; 40% agree that wife beating is justified if she argues with her husband, 40% agree that it is justified if she goes out without telling him, and 37% agree that it is justified if she neglects the children. A smaller percentage of women agree that wife beating is justified if she burns the food (20%) or refuses to have sex with him (22%) (**Table 14.8** and **Figure 14.4**).

Trends: The percentage of women who agree with one or more justifications for wife beating decreased from 64% in 2017 to 48% in 2023.

***Figure 14.4* Attitudes towards wife beating**

Percentage of women age 15–49 who agree that a husband is justified in beating his wife for specific reasons



Patterns by background characteristics

- The belief that wife beating is justified is slightly lower among women who are not employed (47%) and those who are employed and paid in cash (49%) than among those who are employed but are not paid in cash (54%).
- The belief that wife beating is justified is lower among never-married women than among ever-married women; only 28% of women who have never been married agree that wife beating is justified in at least one of the five specified circumstances, as compared with 54% of married women and 40% of divorced, separated, or widowed women.
- More women in rural areas (51%) than urban areas (39%) agree with at least one reason for wife beating.
- Agreement with at least one reason for wife beating varies greatly by region, ranging from a low of 29% among women in GBAO and DRS to a high of 64% among women in Khatlon.
- Agreement with wife beating generally declines with increasing education and household wealth.

14.7 Negotiating Sexual Relations

To assess attitudes toward negotiating safer sexual relations with husbands, women were asked whether they thought that a wife is justified in refusing to have sexual intercourse with her husband if she knows he has sex with other women and asking that he use a condom if she knows he has a sexually transmitted infection (STI).

Over half (55%) of women agree that a wife is justified in refusing to have sexual intercourse with her husband if her husband has other partners, and 49% agree that she is justified in asking her husband to wear a condom if he has an STI (**Table 14.9**).

To assess the ability of women to actually negotiate safer sexual relations with their husband, women were asked whether they could say no to their husband if they do not want to have sexual intercourse and whether they could ask their husband to use a condom. Sixty-two percent of women reported that they can say no to their husband if they do not want to have sex, and 53% reported that they can ask their husband to use a condom (**Table 14.10**).

Patterns by background characteristics

- Currently married women's ability to negotiate safer sex varies only minimally by age. Sixty percent of women age 15–24 report that they can say no to their husband if they do not want to have sexual intercourse, as compared with 64% of women age 40–49.
- Women's ability to negotiate safer sex with their husband varies by region. The percentage of women who can say no to their husband if they do not want to have sexual intercourse ranges from 54% in Khatlon to 75% in GBAO, and the percentage who can ask their husband to use a condom varies from 43% in Khatlon to 68% in GBAO.
- The percentage of women who say that they can negotiate safer sex with their husband is higher in urban than rural areas.

14.8 Women's Participation in Decision Making regarding Sexual and Reproductive Health

Informed decision making on sexual relations, contraceptive use, and reproductive health

Women are considered to make their own informed decisions on sexual relations, contraceptive use, and reproductive health if (1) they can say no to their husband if they do not want to have sexual intercourse, (2) they make decisions about use of family planning alone or jointly with their husband, and (3) they make decisions about their own health care alone or jointly with their husband.

Sample: Currently married women age 15–49

One-third (33%) of currently married women age 15–49 report making their own decisions regarding sexual relations, contraceptive use, and reproductive care (**Table 14.11**).

Patterns by background characteristics

- The percentage of currently married women who report making their own decisions regarding sexual relations, contraceptive use, and reproductive care increases from 18% among those age 15–19 to 40% among those age 45–49 (**Figure 14.5**).

- By region, the percentage of women who report making their own decisions regarding sexual relations, contraceptive use, and reproductive care ranges from 23% in Khatlon to 58% in GBAO.

- Women's participation in decision making regarding sexual and reproductive health generally increases with increasing education and household wealth. Twenty-four percent of women with no education or a primary education report making their own decisions regarding sexual relations, contraceptive use, and reproductive care, as compared with 45% of women with a higher education. Similarly, 27% of women in the lowest wealth quintile report making their own decisions, compared with 45% of women in the highest quintile.

Figure 14.5 Women's participation in decision making regarding sexual and reproductive health by age

Percentage of currently married women who make their own informed decisions about sexual relations, contraceptive use, and reproductive health care

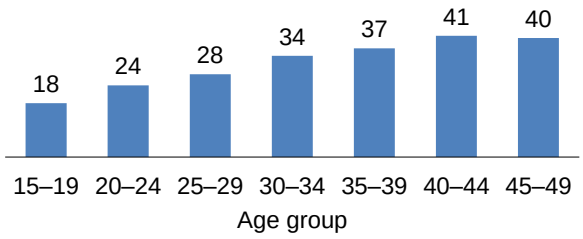


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Table 14.1 Employment and cash earnings of currently married women

Percentage of currently married women age 15–49 who were employed at any time in the past 12 months and percent distribution of currently married women employed in the past 12 months by type of earnings, according to age, Tajikistan DHS 2023

	Among currently married women:		Percent distribution of currently married women employed in the past 12 months, by type of earnings					
Age	Percentage employed in past 12 months	Number of women	Cash only	Cash and in-kind	In-kind only	Not paid	Total	Number of women
15–19	5.4	220	*	*	*	*	100.0	12
20–24	11.4	1,281	80.7	5.3	0.6	13.4	100.0	146
25–29	18.4	1,437	77.6	3.7	2.5	16.2	100.0	265
30–34	25.6	1,407	76.3	7.6	3.1	13.0	100.0	360
35–39	29.5	1,291	81.6	4.8	1.4	12.1	100.0	381
40–44	29.3	974	85.9	3.0	2.5	8.6	100.0	285
45–49	29.1	781	79.9	3.9	3.8	12.4	100.0	228
Total	22.7	7,392	80.1	4.9	2.4	12.6	100.0	1,676

Note: An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

Table 14.2.1 Control over women's cash earnings and relative magnitude of women's cash earnings

Percent distribution of currently married women age 15–49 who received cash earnings for employment in the 12 months preceding the survey by person who decides how wife's cash earnings are used and by whether she earned more or less than her husband, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Person who decides how the wife's cash earnings are used:					Wife's cash earnings compared with husband's cash earnings:						
	Mainly wife	Wife and husband jointly	Mainly husband	Other	Total	More	Less	About the same	Husband has no earnings	Don't know	Total	Number of women
Age												
15–19	*	*	*	*	*	*	*	*	*	*	100.0	9
20–24	21.8	47.5	28.7	2.0	100.0	8.5	82.9	5.8	1.8	1.0	100.0	125
25–29	26.2	45.8	22.2	5.7	100.0	3.9	86.2	5.2	1.1	3.6	100.0	215
30–34	31.8	44.6	22.1	1.5	100.0	5.9	79.3	8.4	1.5	4.9	100.0	302
35–39	33.9	47.1	18.1	0.8	100.0	7.9	79.9	6.1	2.4	3.7	100.0	329
40–44	34.3	45.3	20.3	0.1	100.0	11.3	76.5	9.0	1.4	1.8	100.0	254
45–49	30.9	50.3	18.8	0.0	100.0	13.9	73.1	11.5	1.6	0.0	100.0	191
Number of living children												
0	28.3	43.4	25.7	2.6	100.0	11.1	78.5	6.6	1.0	2.8	100.0	92
1–2	31.0	47.3	19.6	2.1	100.0	9.8	78.9	8.1	1.3	2.0	100.0	485
3–4	32.0	45.7	21.1	1.3	100.0	6.6	80.6	7.5	1.7	3.6	100.0	761
5+	25.7	50.6	23.4	0.3	100.0	11.4	74.3	8.3	4.2	1.8	100.0	86
Residence												
Urban	39.4	44.0	15.7	0.9	100.0	9.4	78.5	9.0	1.0	2.1	100.0	517
Rural	26.2	47.7	24.1	2.0	100.0	7.7	80.1	6.9	2.1	3.3	100.0	907
Region												
Dushanbe	47.9	45.4	5.8	0.9	100.0	9.2	78.6	8.0	1.3	2.9	100.0	207
GBAO	25.5	62.2	11.9	0.5	100.0	25.6	58.6	14.5	1.4	0.0	100.0	47
Sughd	34.0	50.3	14.5	1.2	100.0	6.6	88.7	3.9	0.6	0.2	100.0	522
DRS	28.2	49.7	21.2	0.9	100.0	7.6	70.2	17.8	3.3	1.1	100.0	226
Khatlon	21.2	38.5	37.5	2.8	100.0	8.4	75.9	5.9	2.3	7.5	100.0	423
FTF districts	23.4	26.5	45.7	4.4	100.0	4.8	73.4	5.4	2.0	14.4	100.0	163
Education												
None/primary	(25.2)	(55.8)	(14.1)	(5.0)	100.0	(15.1)	(67.4)	(8.9)	(6.0)	(2.7)	100.0	44
General basic	31.0	45.1	23.0	1.0	100.0	7.2	77.2	9.2	2.1	4.3	100.0	300
General secondary	31.7	42.3	24.3	1.7	100.0	7.2	80.8	7.0	1.6	3.3	100.0	436
Professional primary/ middle	28.6	50.9	18.5	2.0	100.0	11.7	81.7	4.0	1.2	1.3	100.0	212
Higher	32.1	48.2	18.4	1.3	100.0	7.8	79.9	8.9	1.2	2.2	100.0	433
Wealth quintile												
Lowest	26.2	40.5	31.0	2.3	100.0	12.4	69.0	5.9	4.8	7.9	100.0	176
Second	18.8	52.4	24.7	4.0	100.0	7.7	82.6	6.7	1.0	2.0	100.0	238
Middle	25.1	45.4	28.1	1.4	100.0	8.9	77.8	8.0	2.1	3.2	100.0	216
Fourth	31.2	49.4	18.2	1.2	100.0	5.6	83.7	8.3	1.1	1.3	100.0	337
Highest	41.8	43.7	14.1	0.4	100.0	8.7	79.6	8.2	1.0	2.4	100.0	458
Total	31.0	46.4	21.0	1.6	100.0	8.3	79.5	7.7	1.7	2.9	100.0	1,425

Note: The term husband includes a partner with whom a woman is living as if married. 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 14.2.2 Control over men's cash earnings

Percent distribution of currently married women age 15–49 whose husbands receive cash earnings by person who decides how husband's cash earnings are used, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Mainly wife	Wife and husband jointly	Mainly husband	Other	Total	Number of women
Age						
15–19	2.3	23.0	52.3	22.3	100.0	218
20–24	3.4	32.9	51.5	12.2	100.0	1,268
25–29	4.3	32.4	52.9	10.4	100.0	1,431
30–34	8.0	36.2	50.2	5.7	100.0	1,398
35–39	8.2	42.2	46.8	2.8	100.0	1,281
40–44	8.5	46.6	44.5	0.3	100.0	970
45–49	9.7	48.2	41.9	0.1	100.0	771
Number of living children						
0	3.9	29.4	55.1	11.6	100.0	683
1–2	6.2	36.2	48.8	8.9	100.0	2,546
3–4	7.2	40.5	47.9	4.4	100.0	3,533
5+	8.3	43.1	46.9	1.7	100.0	575
Residence						
Urban	8.7	40.5	47.2	3.6	100.0	1,857
Rural	5.9	37.4	49.4	7.4	100.0	5,480
Region						
Dushanbe	12.9	47.8	36.7	2.5	100.0	701
GBAO	9.0	61.0	28.1	1.9	100.0	108
Sughd	3.8	34.8	54.1	7.2	100.0	2,149
DRS	5.0	50.7	38.4	5.9	100.0	1,769
Khatlon	8.2	28.8	55.5	7.4	100.0	2,610
FTF districts	10.1	25.1	55.2	9.6	100.0	1,466
Education						
None/primary	9.6	27.4	58.6	4.4	100.0	358
General basic	7.0	37.0	50.3	5.6	100.0	2,262
General secondary	5.9	36.8	49.6	7.6	100.0	3,365
Professional primary/ middle	4.4	43.9	45.0	6.7	100.0	547
Higher	8.5	47.9	39.3	4.3	100.0	805
Wealth quintile						
Lowest	8.0	26.6	56.4	9.0	100.0	1,373
Second	6.1	35.4	52.6	5.9	100.0	1,438
Middle	5.5	40.8	45.7	8.0	100.0	1,503
Fourth	4.5	43.8	45.6	6.1	100.0	1,561
Highest	9.3	43.0	44.5	3.3	100.0	1,462
Total	6.6	38.2	48.8	6.4	100.0	7,337

Note: The term husband includes a partner with whom a woman is living as if married.

Table 14.3 House ownership

Percent distribution of women age 15–49 by house ownership status, according to current marital status, Tajikistan DHS 2023

Ownership status	Never married	Married/ living together	Divorced/ separated	Widowed	Total
Alone	1.9	4.4	21.2	50.9	5.2
Jointly with husband only	na	37.7	0.6	2.8	28.3
Jointly with someone else only	36.0	10.5	25.7	19.6	16.3
Jointly with husband and someone else	na	15.0	3.6	2.9	11.4
Both alone and jointly	1.8	1.1	3.8	0.0	1.3
Does not own	60.3	31.3	45.1	23.8	37.5
Total	100.0	100.0	100.0	100.0	100.0
Number of women	1,964	7,392	385	137	9,879

Note: The term husband includes a partner with whom a woman is living as if married.
na = not applicable

Table 14.4 House ownership and documentation of ownership

Percent distribution of women age 15–49 by ownership of a house, and among women who own a house, percent distribution by whether the house owned has a title/deed and whether or not the woman's name appears on the title/deed, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who own a house: Alone	Jointly[2]	Both alone and jointly	Percentage who do not own a house	Total	Number of women	House has a title/deed[1]: Woman's name is on title/deed[1]	Woman's name is not on title/deed[1]	Does not have a title/deed[1]	Don't know[3]	Total	Number of women who own a house[4]
Age												
15–19	0.9	38.9	1.8	58.4	100.0	1,710	49.3	1.4	40.2	9.1	100.0	711
20–24	2.3	48.0	1.4	48.3	100.0	1,616	42.4	2.0	47.0	8.6	100.0	836
25–29	3.4	55.0	1.9	39.8	100.0	1,559	49.1	1.6	42.0	7.3	100.0	938
30–34	5.4	62.5	1.5	30.5	100.0	1,545	51.0	1.2	42.6	5.3	100.0	1,073
35–39	7.2	62.4	1.1	29.3	100.0	1,435	61.0	1.2	34.0	3.8	100.0	1,015
40–44	10.5	67.5	0.5	21.5	100.0	1,096	61.0	0.6	35.5	3.0	100.0	861
45–49	11.2	68.6	0.6	19.6	100.0	917	66.9	0.8	30.0	2.3	100.0	738
Residence												
Urban	7.6	48.5	0.5	43.4	100.0	2,705	54.9	1.5	40.7	2.8	100.0	1,531
Rural	4.3	58.8	1.6	35.3	100.0	7,174	54.1	1.2	38.3	6.5	100.0	4,640
Region												
Dushanbe	8.6	46.7	0.5	44.2	100.0	1,077	53.7	1.8	40.9	3.6	100.0	601
GBAO	1.9	49.0	0.1	48.9	100.0	157	87.4	1.2	7.3	4.1	100.0	80
Sughd	1.9	69.8	0.7	27.6	100.0	2,780	58.3	1.5	32.8	7.4	100.0	2,013
DRS	5.0	58.0	2.5	34.4	100.0	2,356	54.3	1.8	39.4	4.5	100.0	1,546
Khatlon	6.9	46.8	1.3	45.0	100.0	3,509	48.9	0.4	45.6	5.1	100.0	1,931
FTF districts	2.5	61.2	2.2	34.1	100.0	1,937	40.1	0.2	53.7	5.9	100.0	1,277
Education												
None/primary	3.5	55.1	2.3	39.1	100.0	443	43.9	1.3	47.1	7.7	100.0	270
General basic	5.2	54.4	2.0	38.4	100.0	3,271	53.3	1.2	39.3	6.2	100.0	2,014
General secondary	4.2	59.0	0.9	35.8	100.0	4,230	54.7	1.2	39.0	5.2	100.0	2,717
Professional primary/middle	5.9	48.3	1.2	44.6	100.0	778	57.0	1.6	33.6	7.7	100.0	431
Higher	8.6	54.8	0.5	36.1	100.0	1,157	57.7	1.4	37.6	3.2	100.0	740
Wealth quintile												
Lowest	4.4	45.7	1.7	48.2	100.0	1,842	49.0	0.9	40.7	9.4	100.0	955
Second	3.8	52.3	2.2	41.8	100.0	1,967	53.3	1.7	37.5	7.5	100.0	1,145
Middle	4.7	62.0	1.3	31.9	100.0	1,966	58.0	1.2	36.3	4.6	100.0	1,338
Fourth	4.7	66.3	1.2	27.7	100.0	1,964	54.9	1.1	40.2	3.8	100.0	1,419
Highest	7.9	53.1	0.4	38.6	100.0	2,140	54.6	1.3	40.1	3.9	100.0	1,314
Total	5.2	56.0	1.3	37.5	100.0	9,879	54.3	1.3	38.9	5.6	100.0	6,171

[1] Title/deed or other government-recognized document
[2] Jointly with husband, someone else, or both a husband and someone else
[3] Includes women who have a house with a title/deed or other government-recognized document, but they do not know if their name is on it, and women who do not know if there is a title/deed or other government-recognized document for the house
[4] Includes women who own a house alone, jointly with their husband only, jointly with someone else only, jointly with their husband and someone else, or both alone and jointly

Table 14.5 Ownership and use of mobile phones and bank accounts

Percentage of women age 15–49 who own any mobile phone, percentage who own a smartphone, and percentage who used a mobile phone to make financial transactions in the past 12 months; percentage of women who have and use a bank account and percentage who deposited or withdrew money from their own bank account in the past 12 months; and percentage of women who have and use a bank account or used a mobile phone for financial transactions in the past 12 months, according to background characteristics, Tajikistan DHS 2023

	Mobile phone ownership:			Bank account ownership and use:			
Background characteristic	Percentage who own any mobile phone	Percentage who own a smartphone	Percentage who used a mobile phone for financial transactions in the past 12 months[1]	Percentage who have and use a bank account	Percentage who deposited or withdrew money from their own account in the past 12 months	Percentage who have and use a bank account or used a mobile phone for financial transactions in the past 12 months	Number of women
Age							
15–19	30.3	26.7	4.1	0.7	0.5	4.5	1,710
20–24	55.7	47.2	11.1	1.6	1.3	11.6	1,616
25–29	65.1	52.0	13.0	2.6	1.7	14.0	1,559
30–34	76.5	61.1	17.5	2.8	2.2	18.4	1,545
35–39	79.4	62.4	17.8	3.3	2.1	18.9	1,435
40–44	81.1	65.2	22.7	3.3	2.8	23.4	1,096
45–49	84.0	64.7	19.9	3.6	2.7	21.0	917
Residence							
Urban	78.7	66.6	23.4	6.1	5.1	24.6	2,705
Rural	59.7	47.0	10.8	1.0	0.5	11.4	7,174
Region							
Dushanbe	87.0	73.4	34.0	11.0	9.8	35.4	1,077
GBAO	82.7	73.2	19.7	6.7	4.9	22.0	157
Sughd	70.5	59.2	16.8	1.8	1.1	17.8	2,780
DRS	57.4	44.7	12.9	0.6	0.2	13.2	2,356
Khatlon	57.9	44.8	6.9	1.3	0.9	7.6	3,509
FTF districts	51.7	42.2	6.8	0.9	0.7	7.2	1,937
Education							
None/primary	52.4	36.7	8.5	0.8	0.4	9.0	443
General basic	55.0	41.0	10.1	1.3	0.9	10.8	3,271
General secondary	63.3	50.2	10.6	1.7	1.1	11.3	4,230
Professional primary/middle	82.8	73.3	19.2	2.6	2.1	19.7	778
Higher	91.7	84.8	38.3	8.9	7.2	40.0	1,157
Wealth quintile							
Lowest	51.0	31.1	5.4	0.2	0.2	5.5	1,842
Second	57.3	44.3	6.8	1.3	0.6	7.8	1,967
Middle	59.7	48.5	10.6	1.0	0.4	11.3	1,966
Fourth	70.0	60.8	17.0	1.9	1.0	17.9	1,964
Highest	84.1	74.2	29.7	7.2	6.2	30.8	2,140
Total	64.9	52.4	14.3	2.4	1.8	15.1	9,879

[1] Respondents were asked about use of a mobile phone for financial transactions whether or not they owned a mobile phone.

Table 14.6 Participation in decision making

Percent distribution of currently married women age 15–49 by person who usually makes decisions about various issues, Tajikistan DHS 2023

Decision	Mainly wife	Wife and husband jointly	Mainly husband	Some-one else	Other	Total	Number of women
Own health care	13.2	41.9	39.7	3.3	1.8	100.0	7,392
Major household purchases	6.6	33.9	44.9	9.9	4.7	100.0	7,392
Visits to her family or relatives	11.6	39.3	37.8	8.4	3.0	100.0	7,392

Note: The term husband includes a partner with whom a woman is living as if married.

Table 14.7 Women's participation in decision making according to background characteristics

Percentage of currently married women age 15–49 who usually make specific decisions either alone or jointly with their husband, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Specific decisions			All three decisions	None of the three decisions	Number of women
	Woman's own health care	Making major household purchases	Visits to her family or relatives			
Age						
15–19	38.7	19.4	28.8	16.4	59.1	220
20–24	45.6	27.1	37.4	23.1	49.0	1,281
25–29	47.7	32.2	40.7	27.6	47.5	1,437
30–34	55.3	41.0	52.9	35.3	37.1	1,407
35–39	61.3	48.6	57.9	43.1	33.4	1,291
40–44	64.3	51.2	63.7	46.1	28.4	974
45–49	66.7	56.1	66.5	52.0	27.6	781
Employment (past 12 months)						
Not employed	50.8	38.1	46.9	33.6	43.6	5,716
Employed for cash	71.0	51.1	65.8	45.0	22.1	1,425
Employed not for cash	62.5	35.1	56.8	31.0	31.1	251
Number of living children						
0	44.3	27.5	36.1	23.7	51.0	687
1–2	52.7	37.1	46.9	32.5	42.3	2,572
3–4	58.3	43.7	55.1	38.7	35.4	3,550
5+	58.7	51.2	59.8	45.3	33.0	584
Residence						
Urban	61.8	47.6	57.5	42.1	32.5	1,870
Rural	52.8	38.1	48.6	33.5	41.3	5,522
Region						
Dushanbe	76.3	65.5	72.2	58.1	16.5	708
GBAO	83.3	62.6	76.3	56.7	11.7	109
Sughd	55.9	25.0	49.3	20.6	37.2	2,160
DRS	63.6	54.1	58.1	51.5	33.3	1,782
Khatlon	41.7	36.5	40.5	30.4	51.7	2,634
FTF districts	37.3	32.6	34.1	27.9	57.7	1,482
Education						
None/primary	48.0	35.4	44.0	27.8	43.5	364
General basic	52.4	42.1	48.9	37.0	41.2	2,276
General secondary	53.1	37.8	49.6	33.1	41.0	3,391
Professional primary/ middle	62.6	41.0	56.6	38.2	33.7	551
Higher	68.8	49.7	60.5	44.4	26.5	811
Wealth quintile						
Lowest	44.4	32.8	40.5	29.5	51.4	1,390
Second	48.6	34.6	45.5	29.6	44.7	1,451
Middle	55.8	42.3	52.4	36.6	36.9	1,512
Fourth	58.6	41.9	53.4	37.0	35.9	1,566
Highest	67.0	50.4	61.7	45.1	27.3	1,474
Total	55.1	40.5	50.9	35.7	39.1	7,392

Note: The term husband includes a partner with whom a woman is living as if married.

Table 14.8 Attitude toward wife beating

Percentage of all women age 15–49 who agree that a husband is justified in hitting or beating his wife for specific reasons, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Husband is justified in hitting or beating his wife if she:					Percentage who agree with at least one specified reason	Number of women
	Goes out without telling him	Neglects the children	Argues with him	Refuses to have sexual intercourse with him	Burns the food		
Age							
15–19	23.3	21.3	23.1	9.3	10.9	30.5	1,710
20–24	39.6	37.9	40.4	22.4	18.7	47.2	1,616
25–29	44.2	42.6	45.4	27.0	24.2	53.2	1,559
30–34	45.3	42.1	45.4	26.9	23.1	53.8	1,545
35–39	45.7	41.7	47.1	24.6	21.4	55.0	1,435
40–44	41.2	39.6	44.2	24.3	19.9	49.9	1,096
45–49	40.0	37.2	41.0	22.0	19.0	48.3	917
Employment (past 12 months)							
Not employed	39.7	37.7	40.5	22.7	20.2	47.3	7,589
Employed for cash	38.9	35.2	40.1	20.7	17.2	48.7	1,976
Employed not for cash	37.8	34.2	39.8	14.7	16.9	53.7	314
Number of living children							
0	28.2	25.9	27.9	13.3	13.1	35.7	2,732
1–2	42.0	39.1	43.7	24.1	21.1	50.4	2,874
3–4	45.1	42.8	46.4	25.7	21.9	53.8	3,678
5+	44.7	43.5	45.3	29.7	25.8	53.6	595
Marital status							
Never married	21.7	19.9	21.8	8.2	10.1	28.4	1,964
Married or living together	44.6	42.3	45.9	26.0	22.5	53.5	7,392
Divorced/separated/ widowed	33.7	28.1	32.6	17.7	11.2	39.7	522
Residence							
Urban	31.5	29.4	32.3	15.6	13.4	39.3	2,705
Rural	42.5	40.0	43.5	24.5	21.7	51.0	7,174
Region							
Dushanbe	24.3	22.1	23.9	10.0	7.2	31.3	1,077
GBAO	16.9	15.6	14.5	8.7	5.4	28.6	157
Sughd	36.2	35.1	42.9	9.8	10.7	51.4	2,780
DRS	25.6	19.0	22.1	12.7	9.8	29.0	2,356
Khatlon	57.2	56.4	57.0	42.3	37.2	63.5	3,509
FTF districts	54.7	54.8	54.4	39.4	36.1	60.9	1,937
Education							
None/primary	48.3	49.8	46.5	29.3	23.5	56.4	443
General basic	39.5	36.7	38.5	21.8	19.9	46.1	3,271
General secondary	41.2	39.5	43.9	24.0	21.1	50.8	4,230
Professional primary/ middle	35.1	31.8	35.0	17.5	15.0	42.0	778
Higher	32.8	28.2	34.7	15.9	13.6	42.4	1,157
Wealth quintile							
Lowest	46.1	45.1	46.4	30.0	29.3	53.8	1,842
Second	45.3	43.8	47.6	27.7	25.1	54.3	1,967
Middle	41.8	38.7	41.3	24.2	19.1	49.4	1,966
Fourth	37.5	33.4	38.0	17.4	14.7	46.3	1,964
Highest	28.2	25.9	30.1	12.2	10.5	36.5	2,140
Total	39.5	37.1	40.4	22.0	19.5	47.8	9,879

Note: The term husband includes a partner with whom a woman is living as if married.

Table 14.9 Attitudes toward negotiating safer sexual relations with husband

Percentage of women age 15–49 who believe that a woman is justified in refusing to have sexual intercourse with her husband if she knows that he has sexual intercourse with other women, and percentage who believe that a woman is justified in asking that they use a condom if she knows that her husband has a sexually transmitted infection (STI), according to background characteristics, Tajikistan DHS 2023

	Woman is justified in:		
Background characteristic	Refusing to have sexual intercourse with her husband if she knows he has sex with other women	Asking that they use a condom if she knows that her husband has an STI	Number of women
Age			
15–24	42.5	37.1	3,327
15–19	31.1	27.9	1,710
20–24	54.6	46.7	1,616
25–29	60.7	50.6	1,559
30–39	61.6	55.8	2,980
40–49	62.2	56.1	2,014
Marital status			
Never married	31.2	29.3	1,964
Ever had sex	38.0	33.0	50
Never had sex	31.1	29.2	1,914
Married/living together	61.3	53.8	7,392
Divorced/separated/ widowed	58.1	49.8	522
Residence			
Urban	60.5	57.0	2,705
Rural	53.1	45.6	7,174
Region			
Dushanbe	62.5	63.6	1,077
GBAO	74.6	62.8	157
Sughd	63.6	58.3	2,780
DRS	57.9	51.6	2,356
Khatlon	43.4	34.0	3,509
FTF districts	38.0	30.7	1,937
Education			
None/primary	48.7	47.8	443
General basic	51.6	45.4	3,271
General secondary	54.3	46.1	4,230
Professional primary/ middle	65.5	61.0	778
Higher	63.8	59.9	1,157
Wealth quintile			
Lowest	49.7	37.3	1,842
Second	52.9	46.9	1,967
Middle	51.6	45.0	1,966
Fourth	57.2	52.2	1,964
Highest	63.3	60.5	2,140
Total	55.2	48.7	9,879

Table 14.10 Ability to negotiate sexual relations with husband

Percentage of currently married women age 15–49 who can say no to their husband if they do not want to have sexual intercourse, and percentage who can ask their husband to use a condom if they wanted to, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who can say no to their husband if they do not want to have sexual intercourse	Percentage who can ask their husband to use a condom	Number of women
Age			
15–24	59.7	50.7	1,501
15–19	60.6	45.9	220
20–24	59.6	51.6	1,281
25–29	60.6	53.2	1,437
30–39	63.5	54.4	2,698
40–49	63.6	53.4	1,756
Residence			
Urban	68.0	58.4	1,870
Rural	60.3	51.4	5,522
Region			
Dushanbe	69.5	65.5	708
GBAO	75.1	67.7	109
Sughd	70.5	54.3	2,160
DRS	60.1	61.3	1,782
Khatlon	54.4	42.8	2,634
FTF districts	45.1	38.8	1,482
Education			
None/primary	56.2	48.2	364
General basic	61.8	55.1	2,276
General secondary	59.0	48.3	3,391
Professional primary/ middle	73.7	61.6	551
Higher	71.6	64.7	811
Wealth quintile			
Lowest	59.9	49.5	1,390
Second	60.2	50.4	1,451
Middle	58.3	46.9	1,512
Fourth	60.9	54.0	1,566
Highest	71.7	64.9	1,474
Total	62.2	53.2	7,392

Note: The term husband includes a partner with whom a woman is living as if married.

Table 14.11 Women's participation in decision making regarding sexual and reproductive health

Percentage of currently married women age 15–49 who make their own informed decisions regarding sexual relations, contraceptive use, and reproductive health care, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage who make decisions regarding sexual relations, contraceptive use, and reproductive care[1]	Number of currently married women
Age		
15–19	18.1	220
20–24	24.1	1,281
25–29	27.8	1,437
30–34	34.0	1,407
35–39	36.5	1,291
40–44	40.7	974
45–49	40.0	781
Employment (past 12 months)		
Not employed	28.5	5,716
Employed for cash	47.6	1,425
Employed not for cash	39.1	251
Residence		
Urban	39.0	1,870
Rural	30.4	5,522
Region		
Dushanbe	49.0	708
GBAO	58.2	109
Sughd	37.9	2,160
DRS	31.8	1,782
Khatlon	23.1	2,634
FTF districts	19.0	1,482
Education		
None/primary	23.5	364
General basic	30.6	2,276
General secondary	30.4	3,391
Professional primary/ middle	42.2	551
Higher	44.5	811
Wealth quintile		
Lowest	27.3	1,390
Second	28.8	1,451
Middle	30.7	1,512
Fourth	31.1	1,566
Highest	44.6	1,474
Total	32.5	7,392

[1] Percentages of currently married women who make decisions regarding sexual relations, contraceptive use, and health care are presented in Table 14.10, Table 7.15, and Table 14.7, respectively.

HOUSEHOLD WATER AND SANITATION 15

Key Findings

- ***Drinking water sources, availability, and treatment:*** 93% of de jure household members have at least basic drinking water service, 52% report that they have had sufficient quantities of drinking water in the past month, and 93% use an appropriate treatment method to make their water safer to drink.
- ***Sanitation:*** Nearly all household members use an improved sanitation facility (99%), and none engage in open defecation.
- ***Management of excreta:*** 98% of household members manage and dispose of their excreta safely.
- ***Disposal of children's stools:*** 14% of children's stools are disposed of appropriately.
- ***Handwashing:*** Overall, 79% of the household population has access to a basic handwashing facility.
- ***Menstrual hygiene:*** 76% of women use cloth during their menstruation; nearly all women (98%) were able to wash and change in privacy during their most recent menstruation.

The extent to which households have access to and use safe drinking water and sanitation facilities and engage in hygienic practices has profound implications for the health, safety, and overall well-being of the population. This chapter presents information on source of drinking water, type of sanitation facility, disposal of excreta (including disposal of young children's stools), handwashing, and menstrual hygiene.

15.1 DRINKING WATER SOURCES, AVAILABILITY, AND TREATMENT

Improved sources of drinking water

Include piped water, public taps, standpipes, tube wells, boreholes, protected dug wells and springs, rainwater, water delivered via a tanker truck or a cart with a small tank, and bottled water.

Sample: Households and de jure population

In Tajikistan, 94% of the de jure population has access to an improved source of drinking water (**Table 15.1**). The majority of household residents have drinking water piped into their dwelling, yard, or plot (63%). Nine percent obtain water through tube wells or boreholes and 8% through public taps or standpipes. Only 1% of the population uses drinking water from an unimproved source, while 5% uses surface water.

Higher percentages of the population in rural areas use unimproved sources and surface water (2% and 7%, respectively) than the population in urban areas (less than 1% each).

Trends: The percentage of the population with access to an improved source of drinking water has increased gradually over the years, from 81% in 2012 and 84% in 2017 to 94% in 2023.

The percentage of the population with water on the premises has increased substantially over the past decade, from 46% in 2012 to 66% in 2017 and 88% in 2023.

15.1.1 Drinking Water Service Ladder

Drinking water service ladder

Safely managed

Drinking water from an improved water source that is located on the premises, available when needed, and free from fecal and priority chemical contamination.

Basic

Drinking water from an improved source, provided either water is on the premises or round-trip collection time is 30 minutes or less.

Limited

Drinking water from an improved source, and round-trip collection time is more than 30 minutes.

Unimproved

Drinking water from an unprotected dug well or unprotected spring.

Surface water

Drinking water directly from a river, dam, lake, pond, stream, canal, or irrigation canal.

Sample: De jure population

Building off the classification of drinking water sources as improved or unimproved, the Joint Monitoring Programme for Water Supply, Sanitation and Hygiene (JMP) has devised a five-rung drinking water service ladder to benchmark and compare progress towards achieving Sustainable Development Goal (SDG) targets (WHO/UNICEF 2018). The 2023 TjDHS captured information on four out of the five rungs; because the survey did not include testing drinking water for fecal or chemical contamination, safely managed and basic drinking water services cannot be distinguished and are grouped together in **Table 15.2** as "at least basic service."

Ninety-three percent of the de jure population has access to at least basic drinking water service (**Table 15.2** and **Figure 15.1**).

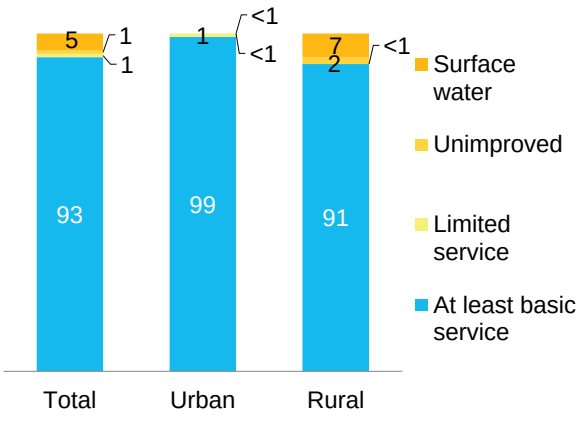
Trends: The population living in households with at least basic water service increased from 78% in 2012 and 84% in 2017 to 93% in 2023.

Patterns by background characteristics

- A higher percentage of the urban population than the rural population has access to at least basic drinking water service (99% versus 91%), while a higher percentage of the rural population uses surface water (7% versus less than 1%).

Figure 15.1 **Household population drinking water service by residence**

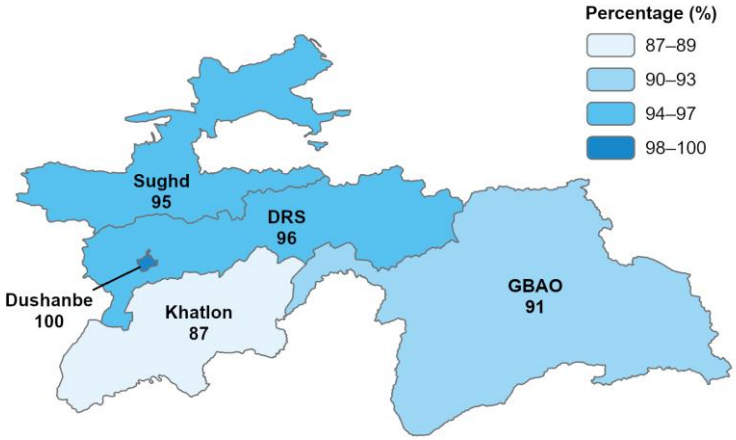
Percent distribution of de jure population by drinking water service ladder



- All residents in Dushanbe have access to at least basic drinking water service (**Map 15.1**).
- Six percent of the population living in Gorno-Badakhshan Autonomous Oblast (GBAO) uses an unimproved drinking water source. Twelve percent of the population in Khatlon uses surface water.
- Access to at least basic drinking water service increases from 85% among the population in the lowest wealth quintile to almost 100% among the population in the highest quintile.

Map 15.1 At least basic drinking water service by region

Percentage of household population with at least basic drinking water service

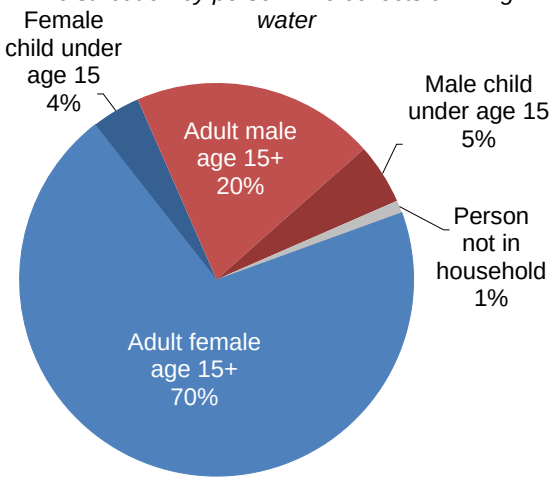


15.1.2 Person Collecting Drinking Water

Twelve percent of the de jure population lives in households without drinking water on the premises (**Table 15.3**), and the majority of these residents use unimproved water sources (69%). In households without drinking water on the premises, water is usually collected by an adult female age 15 or older (70%), followed by an adult male age 15 or older (20%), a male child under age 15 (5%), and a female child under age 15 (4%) (**Figure 15.2**).

Figure 15.2 Person collecting drinking water

Among de jure household population without drinking water on premises, percent distribution by person who collects drinking water



Patterns by background characteristics

- Fifteen percent of the rural population lives in a household without drinking water on the premises, as compared with 6% of the urban population. The variation in participation in drinking water collection between adult females and adult males is larger in rural areas (72% and 18%, respectively) than in urban areas (55% and 36%, respectively).
- By region, the percentage of the population living in households without drinking water on the premises is lowest in Dushanbe (less than 1%) and highest in Sughd (26%).
- In GBAO, there is almost equal participation by adult females and adult males in collection of drinking water (48% and 47%, respectively), while in Khatlon 89% of adult females and only 4% of males collect water.
- The percentage of the de jure population without drinking water on the premises decreases with increasing household wealth, from 24% in the lowest wealth quintile to 2% in the highest wealth quintile.

15.1.3 Availability of Drinking Water

Availability of sufficient drinking water

Percentage of the population with sufficient quantities of drinking water in the past month.

Sample: De jure population

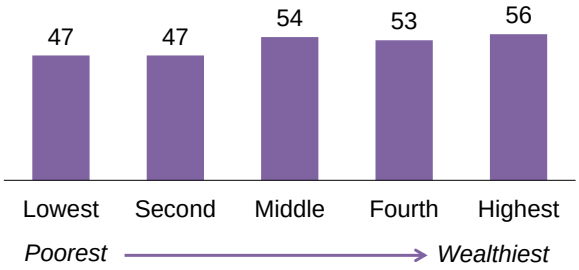
Only 52% of the population has sufficient quantities of drinking water (**Table 15.4**).

Patterns by background characteristics

- The percentage of the population reporting sufficient quantities of drinking water is the same in rural and urban areas (52%).
- Sixty-eight percent of the population in Dushanbe has sufficient drinking water, as compared with 44% in Sughd.
- Just over half of improved water sources (52%) are available in sufficient quantities, compared with 40% of unimproved sources.
- The percentage of the population with sufficient quantities of drinking water increases from 47% in the lowest and second wealth quintiles to 56% in the highest quintile (**Figure 15.3**).

Figure 15.3 **Availability of sufficient quantities of drinking water by household wealth**

Percentage of household population with sufficient quantities of drinking water in the past month



15.1.4 Treatment of Drinking Water

In Tajikistan, 93% of the population uses an appropriate method (boiling, bleaching, filtering, or solar disinfecting) to treat household drinking water. Boiling water is by far the most common method of water treatment (92%). The percentage of the population using appropriate water treatment methods is high across all drinking water sources. The percentage of the population using an appropriate method is much lower in GBAO (39%) than in the other regions (89%–98%) (**Table 15.5**).

Trends: The percentage of the population using appropriate drinking water treatment methods increased from 85% in 2012 to 93% in 2017 and 2023.

15.2 SANITATION

Improved sanitation facilities

Include flush/pour flush toilets that flush water and waste to a piped sewer system, septic tank, pit latrine, or unknown destination; ventilated improved pit (VIP) latrines; pit latrines with slabs; and composting toilets.

Sample: Households and de jure population

Nearly the entire de jure population in Tajikistan reported having an improved sanitation facility (99%) (**Table 15.6**). Most sanitation facilities are pit latrines with slabs (80%) and are located in the household's own yard or plot (83%) rather than in the dwelling (17%). Only 2% of the population reported having an unimproved sanitation facility, and no open defecation was reported.

Trends: The percentage of the population with an improved sanitation facility has remained high over the past decade, ranging from 97% in 2012 to 99% in 2017 and 2023.

15.2.1 Sanitation Service Ladder

Sanitation service ladder

Safely managed

Use of improved facilities that are not shared with other households and where excreta are safely disposed of in situ or transported and treated off-site.

Basic

Use of improved facilities that are not shared with other households.

Limited

Use of improved facilities shared by two or more households.

Unimproved

Use of pit latrines without a slab or platform, hanging latrines, or bucket latrines.

Open defecation

Disposal of human feces in fields, forests, bushes, open bodies of water, beaches, or other open spaces or with solid waste.

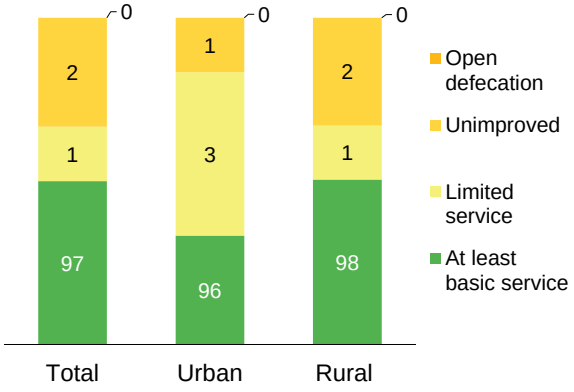
Sample: De jure population

The JMP has also devised a five-rung sanitation service ladder to benchmark and compare progress towards achieving SDG targets related to sanitation. The 2023 TjDHS captured information about all five rungs. However, for those households whose excreta were taken off-site, it is not possible to know if they were treated appropriately; therefore, safely managed and basic sanitation services are grouped together in **Table 15.7** as "at least basic service."

Overall, 97% of the population has at least basic sanitation service, 1% has limited service, and 2% has unimproved service; no open defecation was reported (**Figure 15.4**).

Figure 15.4 **Household population sanitation service by residence**

Percent distribution of de jure population by sanitation service ladder



Trends: The percentage of the population with at least basic sanitation service increased from 94% in 2012 to 97% in 2017 and 2023.

Patterns by background characteristics

- By region, the percentage of the population with at least basic service is lowest in GBAO (93%) and highest in Khatlon (98%).
- The percentage of the population with at least basic sanitation service is high in both rural (98%) and urban (96%) areas and across wealth quintiles (97–98%).

15.2.2 Removal and Disposal of Excreta

Disposal of excreta from on-site facilities

Excreta safely disposed of in situ

Includes septic tanks and latrines in which waste is buried in a covered pit, waste is never emptied, and it is unknown if waste is ever emptied.

Excreta disposed of unsafely

Includes septic tanks and latrines in which waste is emptied to uncovered pits, open ground, a water body, or other locations.

Excreta removed for treatment

Includes septic tanks and latrines in which waste is removed by a service provider to a treatment plant or an unknown location or is removed by a non-service provider to an unknown location.

Sample: De jure population with on-site sanitation facilities (septic tanks, pit latrines, and composting toilets)

Information on the disposal of excreta from sanitation facilities that are not connected to a sewer system is essential for assessing the percentage of the population using safely managed sanitation services.

Overall, 91% of the population with improved, on-site sanitation facilities had excreta safely disposed of in situ. For 8% of the population with on-site sanitation facilities, excreta were removed for treatment, while less than 1% had excreta disposed of unsafely (**Table 15.8**).

Table 15.9 presents information on appropriate management of household excreta. Nearly all residents (98%) live in households that appropriately manage household excreta; 15% have sanitation facilities connected to a sewer, 79% safely dispose of excreta on-site, and 4% have excreta removed for treatment off-site.

Patterns by background characteristics

- Appropriate management of household excreta is high in both urban (99%) and rural (97%) areas, in all regions (95%–99%), and across wealth quintiles (96%–99%).
- Fifty-four percent of the urban population lives in households with sanitation facilities that are connected to a sewer, as compared with only 1% of the rural population.
- Eighty-one percent of the population in Dushanbe lives in households with sanitation facilities connected to a sewer, compared with less than 10% of the population in the other regions.

15.3 Disposal of Children's Stools

Appropriate disposal of children's stools

The child's last stools were put or rinsed into a toilet or latrine, or the child used a toilet or latrine.

Sample: Youngest children under age 2 living with their mother

Proper disposal of human waste is important to prevent diseases transmitted through feces. Only 14% of children under age 2 living with their mother had their last stool disposed of appropriately. Ten percent of children's last stools were put/rinsed into a toilet or latrine, an appropriate method of disposal, while 84% were thrown into the garbage and 2% were buried, the two most common inappropriate methods (**Table 15.10**).

15.4 HANDWASHING

Handwashing facilities

Basic

Availability of a handwashing facility on the premises with soap and water.

Limited

Availability of a handwashing facility on the premises without soap and water.

Sample: De jure population for whom a place for handwashing was observed or with no place for handwashing in dwelling, yard, or plot; excludes the de jure population for whom permission to see the facility was not granted

Handwashing is an important step in monitoring hygiene and preventing the spread of disease. Rather than asking direct questions on the practice of handwashing, which can be subject to overreporting, interviewers asked to see the place where members of the household most often washed their hands. A place for washing hands was observed for 96% of the de jure population (**Table 15.11**). Of the handwashing places observed, 89% were in a fixed location and 8% were mobile.

According to the definitions of handwashing facilities developed by the JMP, 79% of the population had a basic handwashing facility and 17% had a limited handwashing facility.

15.5 MENSTRUAL HYGIENE

Appropriate menstrual hygiene materials

Reusable sanitary pads, disposable sanitary pads, tampons, menstrual cup, cloth, toilet paper, and/or cotton wool.

Sample: Women age 15–49 with a menstrual period in the past year

Privacy and use of appropriate menstrual hygiene materials

Percentage of women who were able to wash and change in privacy and who used appropriate materials during their most recent menstruation.

Sample: Women age 15–49 with a menstrual period in the past year who were home during their most recent menstrual period

Using appropriate menstrual hygiene materials is important for women's health in general and their menstrual health in particular. In the 2023 TjDHS, women age 15–49 were asked what materials they use for menstrual hygiene. Seventy-six percent of women use cloth, 24% use disposable pads, 8% use reusable pads, and 2% use tampons (**Table 15.12**).

Women were also asked if they were able to wash and change in privacy during their most recent menstrual period; nearly all respondents (98%) reported that they were able to do so. Overall, 98% of women were able to wash and change in privacy and used appropriate materials during their most recent menstrual period (**Table 15.12**).

Patterns by background characteristics

- A higher percentage of women in urban than rural areas use disposable pads (36% versus 19%) and reusable pads (16% versus 5%), while a higher percentage of women in rural areas use cloth (81% versus 62%).
- The percentage of women reporting that they can wash or change in privacy varies only minimally by age, residence, region, education, and wealth.

LIST OF TABLES

For more information on water and sanitation characteristics, see the following tables:

Table 15.1 Household drinking water

Percent distribution of households and de jure population by source of drinking water and by time to obtain drinking water, according to residence, Tajikistan DHS 2023

	Households			Population		
Characteristic	Urban	Rural	Total	Urban	Rural	Total
Source of drinking water						
Improved source	99.8	91.4	93.9	99.7	91.3	93.5
Piped into dwelling/yard/plot	88.1	53.6	63.9	87.8	53.6	62.5
Piped to neighbor	0.8	4.7	3.5	0.9	4.3	3.4
Public tap/standpipe	5.9	9.2	8.2	6.1	8.8	8.1
Tube well or borehole	3.0	10.9	8.6	3.2	10.9	8.9
Protected dug well	1.4	8.4	6.3	1.3	8.6	6.7
Protected spring	0.0	1.6	1.1	0.0	1.5	1.1
Tanker truck/cart with small tank	0.5	3.1	2.3	0.5	3.5	2.7
Bottled water	0.0	0.0	0.0	0.0	0.0	0.0
Unimproved source	0.2	2.0	1.4	0.2	1.9	1.4
Unprotected dug well	0.0	0.1	0.1	0.0	0.1	0.1
Unprotected spring	0.1	1.5	1.0	0.1	1.3	1.0
Other	0.1	0.4	0.3	0.1	0.4	0.3
Surface water	0.1	6.6	4.7	0.1	6.8	5.1
Total	100.0	100.0	100.0	100.0	100.0	100.0
Time to obtain drinking water (round trip)						
Water on premises[1]	94.6	84.5	87.5	94.3	85.2	87.6
30 minutes or less	4.6	14.8	11.8	4.7	14.3	11.8
More than 30 minutes	0.7	0.6	0.6	0.9	0.5	0.6
Don't know	0.2	0.0	0.1	0.1	0.0	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of households/ population	2,393	5,642	8,035	11,813	33,480	45,294

[1] Includes water piped to a neighbor and those reporting a round-trip collection time of zero minutes

Table 15.2 Drinking water service ladder

Percent distribution of de jure population by drinking water service ladder, according to background characteristics, Tajikistan DHS 2023

Background characteristic	At least basic service[1]	Limited service[2]	Unim-proved[3]	Surface water	Total	Number of persons
Residence						
Urban	98.7	1.0	0.2	0.1	100.0	11,813
Rural	90.9	0.4	1.9	6.8	100.0	33,480
Region						
Dushanbe	100.0	0.0	0.0	0.0	100.0	4,506
GBAO	90.7	0.3	6.2	2.9	100.0	810
Sughd	95.0	2.0	3.0	0.0	100.0	12,706
DRS	96.2	0.0	0.9	2.9	100.0	10,677
Khatlon	87.4	0.0	0.8	11.8	100.0	16,596
FTF districts	79.1	0.0	0.7	20.1	100.0	9,209
Wealth quintile						
Lowest	84.7	1.5	2.4	11.5	100.0	9,054
Second	91.5	0.6	2.1	5.8	100.0	9,067
Middle	91.1	0.3	2.2	6.4	100.0	9,057
Fourth	97.5	0.4	0.5	1.6	100.0	9,058
Highest	99.8	0.0	0.1	0.1	100.0	9,056
Total	92.9	0.6	1.4	5.1	100.0	45,294

Note: Service ladder concept/definitions are based on the WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene (JMP).
[1] Defined as drinking water from an improved source, provided either water is on the premises or round-trip collection time is 30 minutes or less. Includes safely managed drinking water, which is not shown separately.
[2] Drinking water from an improved source, and round-trip collection time is more than 30 minutes or is unknown
[3] Drinking water from an unprotected dug well or unprotected spring

Table 15.3 Person collecting drinking water

Percentage of de jure population in households without drinking water on premises, and percent distribution of de jure population in households without drinking water on premises by the person who usually collects drinking water used in the household, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage of de jure population without drinking water on premises[1]	Number of persons	Person who usually collects drinking water					Total	Number of persons without drinking water on premises[1]
			Adult female age 15 or older	Adult male age 15 or older	Female child under age 15	Male child under age 15	Person not in household		
Residence									
Urban	5.7	11,813	55.3	36.1	4.0	4.2	0.4	100.0	671
Rural	14.8	33,480	72.2	17.8	4.4	4.9	0.7	100.0	4,941
Region									
Dushanbe	0.2	4,506	*	*	*	*	*	100.0	7
GBAO	19.2	810	47.7	46.5	0.0	5.6	0.2	100.0	156
Sughd	25.5	12,706	60.3	27.7	4.7	6.5	0.7	100.0	3,242
DRS	4.6	10,677	76.6	15.7	3.0	2.6	2.1	100.0	492
Khatlon	10.3	16,596	89.0	4.1	4.4	2.3	0.2	100.0	1,716
FTF districts	12.6	9,209	86.8	5.8	3.8	3.3	0.2	100.0	1,165
Source of drinking water									
Improved	9.8	42,341	67.3	22.7	3.9	5.4	0.7	100.0	4,150
Unimproved	69.2	653	60.5	25.6	5.9	7.3	0.6	100.0	452
Surface	43.9	2,300	86.6	6.4	5.4	1.3	0.3	100.0	1,010
Wealth quintile									
Lowest	23.7	9,054	74.2	18.7	3.4	3.3	0.4	100.0	2,149
Second	16.9	9,067	67.6	20.3	3.8	8.0	0.2	100.0	1,533
Middle	13.3	9,057	65.5	23.5	4.8	4.8	1.4	100.0	1,202
Fourth	6.5	9,058	69.3	17.9	8.2	3.5	1.1	100.0	591
Highest	1.5	9,056	81.1	14.6	4.3	0.0	0.0	100.0	138
Total	12.4	45,294	70.2	20.0	4.3	4.8	0.6	100.0	5,612

Note: An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.
[1] Excludes water piped to a neighbor and those reporting a round-trip collection time of zero minutes

Table 15.4 Availability of sufficient drinking water

Percentage of de jure population with sufficient quantities of drinking water when needed, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage with drinking water available in sufficient quantities[1]	Number of persons
Residence		
Urban	51.5	11,813
Rural	51.6	33,480
Region		
Dushanbe	67.5	4,506
GBAO	51.7	810
Sughd	44.0	12,706
DRS	59.9	10,677
Khatlon	47.8	16,596
FTF districts	55.6	9,209
Source of drinking water		
Improved	52.3	42,341
Unimproved	39.6	653
Surface	41.6	2,300
Time to obtain drinking water (round trip)		
Water on premises[1]	53.3	39,681
30 minutes or less	40.3	5,325
More than 30 minutes	15.4	263
Don't know	39.7	24
Wealth quintile		
Lowest	47.4	9,054
Second	47.4	9,067
Middle	54.4	9,057
Fourth	53.2	9,058
Highest	55.5	9,056
Total	51.6	45,294

[1] Defined as having sufficient quantities of drinking water in the past month
[2] Includes water piped to a neighbor and those reporting a round-trip collection time of zero minutes

Table 15.5 Treatment of household drinking water

Percentage of de jure population using various methods to treat drinking water, and percentage using an appropriate treatment method, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Boiled	Bleach/ chlorine added	Strained through cloth	Ceramic, sand, or other filter	Solar disinfection	Let stand and settle	Other	No treatment	Percentage using an appropriate treatment method[1]	Number of persons
Residence										
Urban	92.9	0.0	0.3	3.7	0.0	15.7	0.2	4.6	93.9	11,813
Rural	92.0	0.0	1.2	0.3	0.0	19.9	0.0	5.5	92.0	33,480
Region										
Dushanbe	90.8	0.0	0.1	6.3	0.0	13.0	0.5	4.9	92.9	4,506
GBAO	39.0	0.0	0.5	0.3	0.0	0.3	0.0	59.9	39.3	810
Sughd	98.1	0.0	1.3	1.3	0.0	22.5	0.0	0.9	98.2	12,706
DRS	88.6	0.0	0.1	0.7	0.0	11.8	0.0	9.1	88.9	10,677
Khatlon	93.0	0.0	1.5	0.1	0.0	23.0	0.0	3.6	93.0	16,596
FTF districts	96.2	0.0	2.6	0.0	0.0	22.0	0.0	1.8	96.2	9,209
Source of drinking water										
Improved	92.2	0.0	0.8	1.2	0.0	17.5	0.0	5.5	92.5	42,341
Unimproved	94.0	0.0	0.0	0.0	0.0	23.9	0.0	4.8	94.0	653
Surface	91.5	0.0	3.8	2.1	0.0	40.8	0.0	1.6	92.2	2,300
Wealth quintile										
Lowest	89.6	0.0	1.6	0.1	0.0	20.6	0.0	7.0	89.6	9,054
Second	91.9	0.0	0.9	0.1	0.0	19.0	0.0	5.1	91.9	9,067
Middle	93.2	0.0	1.5	0.4	0.0	17.6	0.0	4.7	93.3	9,057
Fourth	94.0	0.0	0.4	0.8	0.0	20.3	0.0	4.5	94.3	9,058
Highest	92.4	0.0	0.2	4.7	0.0	16.7	0.2	5.0	93.5	9,056
Total	92.2	0.0	0.9	1.2	0.0	18.8	0.0	5.3	92.5	45,294

Note: Respondents may report multiple treatment methods, so the sum of treatment may exceed 100%. In GBAO, 0.1% of the population reported "don't know," which is not shown separately.
[1] Appropriate water treatment methods are boiling, bleaching, filtering, and solar disinfecting.

Table 15.6 Household sanitation facilities

Percent distribution of households and de jure population by type of toilet/latrine facilities, and percent distribution of households and de jure population with a toilet/latrine facility by location of the facility, according to residence, Tajikistan DHS 2023

	Households			Population		
Type and location of toilet/latrine facility	Urban	Rural	Total	Urban	Rural	Total
Improved sanitation facility	99.5	98.1	98.5	99.4	98.2	98.5
Flush/pour flush to piped sewer system	58.8	0.9	18.1	54.1	0.9	14.8
Flush/pour flush to septic tank	1.0	0.5	0.6	1.0	0.4	0.6
Flush/pour flush to pit latrine	3.2	1.1	1.7	3.5	1.0	1.6
Flush/pour flush, don't know where	0.0	0.1	0.1	0.0	0.1	0.1
Ventilated improved pit (VIP) latrine	0.0	0.3	0.2	0.0	0.3	0.2
Pit latrine with slab	36.2	92.7	75.9	40.5	93.2	79.5
Composting toilet	0.2	2.5	1.8	0.2	2.3	1.8
Unimproved sanitation facility	0.5	1.9	1.5	0.6	1.8	1.5
Flush/pour flush not to sewer/septic tank/pit latrine	0.0	0.1	0.1	0.0	0.1	0.1
Pit latrine without slab/open pit	0.5	1.6	1.3	0.6	1.6	1.3
Bucket	0.0	0.1	0.1	0.0	0.1	0.1
Open defecation (no facility/bush/field)	0.0	0.0	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of households/population	2,393	5,642	8,035	11,813	33,480	45,294
Location of toilet facility						
In own dwelling	56.8	5.0	20.5	51.7	4.5	16.8
In own yard/plot	41.9	94.6	78.9	47.3	95.1	82.6
Elsewhere	1.2	0.4	0.7	1.1	0.4	0.5
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of households/population with a toilet/latrine facility	2,393	5,640	8,033	11,813	33,475	45,288

Table 15.7 Sanitation service ladder

Percent distribution of de jure population by type of sanitation service, according to background characteristics, Tajikistan DHS 2023

Background characteristic	At least basic service[1]	Limited service[2]	Unim-proved[3]	Open defecation	Total	Number of persons
Residence						
Urban	96.1	3.3	0.6	0.0	100.0	11,813
Rural	97.6	0.5	1.8	0.0	100.0	33,480
Region						
Dushanbe	96.4	2.8	0.8	0.0	100.0	4,506
GBAO	93.3	5.5	0.5	0.7	100.0	810
Sughd	97.2	1.0	1.8	0.0	100.0	12,706
DRS	96.4	0.9	2.7	0.0	100.0	10,677
Khatlon	98.2	1.1	0.7	0.0	100.0	16,596
FTF districts	98.8	0.7	0.4	0.0	100.0	9,209
Wealth quintile						
Lowest	97.1	0.9	1.9	0.0	100.0	9,054
Second	97.2	0.9	1.9	0.0	100.0	9,067
Middle	97.1	0.6	2.3	0.0	100.0	9,057
Fourth	97.5	1.4	1.1	0.0	100.0	9,058
Highest	97.4	2.4	0.2	0.0	100.0	9,056
Total	97.2	1.3	1.5	0.0	100.0	45,294

Note: Service ladder concept/definitions are based on the WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene (JMP).
[1] Defined as use of improved facilities that are not shared with other households. Includes safely managed sanitation service, which is not shown separately.
[2] Defined as use of improved facilities shared by two or more households
[3] Use of flush/pour flush toilet not to sewer, septic tank, or pit latrine; pit latrine without a slab/open pit; hanging toilet/latrine; or bucket

Table 15.8 Emptying and removal of waste from on-site sanitation facilities

Percent distribution of de jure population in households with septic tanks and improved latrines by method of emptying and removal, and percentage of the population with on-site sanitation facilities for which excreta were safely disposed of in situ, percentage with on-site sanitation facilities for which excreta were disposed of unsafely, and percentage with on-site sanitation facilities for which excreta were removed for treatment, according to background characteristics, Tajikistan DHS 2023

	Percent distribution of method of emptying and disposal of waste from septic tanks or other on-site sanitation facilities								Percentage of population with on-site sanitation facilities for which:			
Background characteristic	Removed by a service provider to treatment plant	Removed by a service provider, don't know where	Buried in a covered pit	Emptied to un-covered pit, open ground, water body, or else-where	Don't know where waste was taken	Never emptied	Don't know if ever emptied	Total	Excreta were safely disposed of in situ[1]	Excreta were disposed of unsafely[2]	Excreta were removed for treat-ment[3]	Number of persons with improved on-site sanitation facilities
Sanitation facility type												
Flush to septic tank	0.0	21.0	0.0	0.0	0.0	74.9	4.1	100.0	79.0	0.0	21.0	256
Latrines and other improved facilities	1.5	6.4	4.4	0.7	0.4	86.2	0.5	100.0	91.1	0.7	8.3	37,644
Flush to pit latrine	2.6	6.1	0.0	0.0	0.0	87.1	4.2	100.0	91.3	0.0	8.7	746
Ventilated improved pit (VIP) latrine	5.0	6.3	0.0	0.0	0.0	88.7	0.0	100.0	88.7	0.0	11.3	89
Pit latrine with slab	1.5	6.1	3.5	0.1	0.4	88.0	0.4	100.0	91.9	0.1	8.0	36,003
Composting toilet	0.0	20.0	50.7	26.9	0.0	2.4	0.0	100.0	53.1	26.9	20.0	807
Residence												
Urban	3.8	11.1	2.7	0.3	2.2	78.2	1.6	100.0	82.6	0.3	17.2	5,346
Rural	1.1	5.7	4.7	0.8	0.1	87.4	0.3	100.0	92.4	0.8	6.9	32,554
Region												
Dushanbe	5.2	10.7	0.0	0.0	2.0	78.3	3.9	100.0	82.2	0.0	17.8	811
GBAO	0.1	0.3	0.0	0.0	0.0	97.0	2.6	100.0	99.6	0.0	0.4	735
Sughd	1.6	8.3	4.6	2.3	0.4	82.3	0.5	100.0	87.4	2.3	10.3	11,278
DRS	2.2	1.6	0.2	0.0	0.2	95.5	0.3	100.0	96.0	0.0	4.0	9,729
Khatlon	0.8	8.3	7.4	0.0	0.5	82.7	0.3	100.0	90.5	0.0	9.5	15,347
FTF districts	1.1	9.9	2.4	0.0	0.2	86.0	0.4	100.0	88.8	0.0	11.2	8,847
Wealth quintile												
Lowest	0.3	2.9	2.5	0.3	0.1	93.6	0.3	100.0	96.4	0.3	3.3	8,861
Second	0.7	5.2	5.9	0.7	0.0	86.9	0.5	100.0	93.3	0.7	5.9	8,879
Middle	1.5	7.6	6.0	0.8	0.1	83.8	0.2	100.0	90.0	0.8	9.3	8,808
Fourth	2.7	8.6	3.9	0.9	0.8	82.6	0.6	100.0	87.1	0.9	12.0	8,733
Highest	3.9	11.7	2.1	0.9	2.5	77.1	1.7	100.0	81.0	0.9	18.1	2,620
Total	1.5	6.5	4.4	0.7	0.4	86.1	0.5	100.0	91.0	0.7	8.3	37,900

Note: On-site sanitation facilities are those where excreta are stored in a septic tank, pit latrine, or composting toilet.
[1] Includes septic tanks and latrines in which waste was buried in a covered pit, never emptied, and don't know if ever emptied
[2] Includes septic tanks and latrines in which waste was emptied to uncovered pits, open ground, water body, or other locations
[3] Includes septic tanks and latrines in which waste was removed by a service provider to a treatment plant or an unknown location or was removed by a non-service provider to an unknown location

Table 15.9 Management of household excreta

Percent distribution of de jure population by management of excreta from household sanitation facilities, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Connected to sewer	Using improved on-site sanitation facilities			Using improved sanitation facilities, on-site status unknown	Using unimproved sanitation facilities	Practicing open defecation	Total	Percentage connected to sewer, with safe disposal on-site, or with removal for treatment off-site	Number of persons
		Safe disposal in situ of excreta from on-site sanitation facilities	Unsafe disposal of excreta from on-site sanitation facilities	Removal of excreta for treatment off-site						
Residence										
Urban	54.1	38.2	0.3	6.8	0.0	0.6	0.0	100.0	99.1	11,813
Rural	0.9	92.7	1.1	3.4	0.1	1.8	0.0	100.0	96.9	33,480
Region										
Dushanbe	81.3	14.9	0.0	3.0	0.0	0.8	0.0	100.0	99.2	4,506
GBAO	7.9	90.5	0.0	0.3	0.0	0.5	0.7	100.0	98.8	810
Sughd	9.4	78.6	3.2	7.0	0.0	1.8	0.0	100.0	95.0	12,706
DRS	6.0	87.7	0.0	3.4	0.1	2.7	0.0	100.0	97.2	10,677
Khatlon	6.7	89.1	0.0	3.3	0.2	0.7	0.0	100.0	99.1	16,596
FTF districts	3.5	93.8	0.1	2.2	0.0	0.4	0.0	100.0	99.5	9,209
Wealth quintile										
Lowest	0.1	95.7	0.8	1.3	0.1	1.9	0.0	100.0	97.1	9,054
Second	0.2	94.8	1.1	2.0	0.0	1.9	0.0	100.0	97.0	9,067
Middle	0.3	91.6	1.2	4.4	0.2	2.3	0.0	100.0	96.3	9,057
Fourth	2.5	86.6	1.2	8.7	0.1	1.1	0.0	100.0	97.7	9,058
Highest	70.8	23.6	0.3	5.0	0.1	0.2	0.0	100.0	99.4	9,056
Total	14.8	78.5	0.9	4.3	0.1	1.5	0.0	100.0	97.5	45,294

Note: On-site sanitation facilities are those where excreta are stored in a septic tank, pit latrine, or composting toilet.

Table 15.10 Disposal of children's stools

Percent distribution of youngest children under age 2 living with their mother by the manner of disposal of the child's last fecal matter, and percentage of children whose stools are disposed of appropriately, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Manner of disposal of children's stools						Total	Percentage of children whose stools are disposed of appro-priately[1]	Number of children
	Child used toilet or latrine	Put/rinsed into toilet or latrine	Buried	Put/rinsed into drain or ditch	Thrown into garbage	Other			
Age of child in months									
0–1	0.0	5.8	0.7	0.0	93.5	0.0	100.0	5.8	197
2–3	1.1	7.5	2.3	0.6	87.0	1.4	100.0	8.7	193
4–5	0.7	8.4	1.3	0.0	88.6	1.0	100.0	9.1	214
6–8	0.0	9.9	2.7	0.7	86.7	0.0	100.0	9.9	226
9–11	1.4	10.6	2.0	0.7	84.4	0.9	100.0	12.0	318
12–17	2.6	12.0	0.8	0.0	84.1	0.6	100.0	14.6	489
18–23	10.3	13.5	2.4	1.0	72.1	0.8	100.0	23.7	407
6–23	4.1	11.8	1.8	0.5	81.2	0.6	100.0	15.9	1,440
Type of toilet facility[2]									
Improved sanitation facility	3.1	10.6	1.7	0.4	83.4	0.7	100.0	13.7	2,014
Unimproved facility	(0.0)	(0.0)	(0.0)	(0.0)	(100.0)	(0.0)	100.0	(0.0)	30
Open defecation	*	*	*	*	*	*	*	*	0
Residence									
Urban	3.2	7.4	1.7	0.5	87.1	0.1	100.0	10.6	529
Rural	3.0	11.5	1.7	0.4	82.5	0.9	100.0	14.5	1,515
Region									
Dushanbe	4.5	7.1	0.6	1.4	86.5	0.0	100.0	11.5	206
GBAO	1.6	21.7	0.0	0.0	76.7	0.0	100.0	23.3	24
Sughd	6.0	7.7	4.6	0.5	79.1	2.1	100.0	13.7	569
DRS	3.2	8.9	0.5	0.7	86.5	0.2	100.0	12.1	464
Khatlon	0.5	13.9	0.7	0.0	84.8	0.1	100.0	14.5	780
FTF districts	0.1	18.3	0.8	0.0	80.6	0.1	100.0	18.4	471
Mother's education									
None/primary	3.6	16.8	4.1	0.0	75.5	0.0	100.0	20.4	102
General basic	2.2	10.0	1.0	0.3	85.1	1.4	100.0	12.2	537
General secondary	4.0	11.6	2.2	0.0	81.8	0.4	100.0	15.6	926
Professional primary/middle	0.6	7.6	0.6	3.1	87.4	0.8	100.0	8.2	216
Higher	3.3	7.2	1.1	0.2	87.5	0.6	100.0	10.6	263
Wealth quintile									
Lowest	3.9	8.9	2.0	0.0	84.9	0.3	100.0	12.8	383
Second	2.6	14.2	1.5	0.4	81.0	0.4	100.0	16.7	403
Middle	3.3	12.5	2.8	0.4	80.8	0.2	100.0	15.8	417
Fourth	2.6	9.5	1.8	0.3	84.0	1.8	100.0	12.2	431
Highest	3.0	7.0	0.3	1.2	87.7	0.7	100.0	10.1	410
Total	3.1	10.4	1.7	0.4	83.7	0.7	100.0	13.5	2,044

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.

[1] Children's stools are considered to be disposed of appropriately if the child used a toilet or latrine or if the fecal matter was put/rinsed into a toilet or latrine.

[2] See Table 15.6 for definition of categories.

Table 15.11 Handwashing

Percentage of the de jure population for whom the place most often used for washing hands was observed, by whether the location was fixed or mobile, and total percentage of the de jure population for whom the place for handwashing was observed; among the de jure population for whom the place for handwashing was observed, percentage with water available, percentage with soap available, and percentage with a cleansing agent other than soap available; percentage of the de jure population with a basic handwashing facility; and percentage with a limited handwashing facility, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Percentage of de jure population for whom place for washing hands was observed:			Number of persons	Place for handwashing observed and:			Number of persons for whom place for handwashing was observed	Percentage of de jure population with a basic handwashing facility[3]	Percentage of de jure population with a limited handwashing facility[4]	Number of persons for whom a place for handwashing was observed or with no place for handwashing in the dwelling, yard, or plot
	Place for handwashing was a fixed place	Place for handwashing was mobile	Total		Water available	Soap available[1]	Cleansing agent other than soap available[2]				
Residence											
Urban	95.2	2.7	97.8	11,813	97.2	94.1	0.2	11,557	90.6	7.4	11,794
Rural	86.1	9.2	95.3	33,480	92.5	82.3	0.9	31,897	74.9	20.8	33,357
Region											
Dushanbe	97.5	2.3	99.8	4,506	99.4	97.2	0.2	4,498	96.6	3.4	4,498
GBAO	99.9	0.1	100.0	810	92.4	73.8	0.2	810	72.1	27.9	810
Sughd	65.8	24.9	90.7	12,706	97.0	79.2	0.1	11,523	71.4	19.7	12,655
DRS	99.0	0.8	99.8	10,677	94.3	84.8	0.6	10,659	83.7	16.3	10,659
Khatlon	96.0	0.2	96.2	16,596	89.6	87.6	1.4	15,964	77.3	19.3	16,529
FTF districts	95.7	0.0	95.7	9,209	87.4	83.5	1.7	8,812	69.9	26.4	9,153
Wealth quintile											
Lowest	84.0	9.5	93.6	9,054	84.0	67.2	2.0	8,473	56.0	38.3	8,985
Second	85.5	10.1	95.6	9,067	92.6	79.5	0.7	8,667	72.2	23.7	9,040
Middle	86.8	8.5	95.3	9,057	94.8	88.8	0.2	8,627	82.1	13.5	9,023
Fourth	88.8	7.0	95.8	9,058	98.0	93.1	0.3	8,678	88.1	7.7	9,057
Highest	97.2	2.3	99.5	9,056	99.0	97.6	0.3	9,009	96.3	3.3	9,045
Total	88.5	7.5	95.9	45,294	93.8	85.4	0.7	43,454	79.0	17.3	45,151

[1] Soap includes soap or detergent in bar, liquid, powder, or paste form.
[2] Cleansing agents other than soap include locally available materials such as ash, mud, or sand.
[3] The availability of a handwashing facility on premises with soap and water
[4] The availability of a handwashing facility on premises without soap and/or water

Table 15.12 Menstrual hygiene

Among women age 15–49 whose most recent menstrual period was in the past year, percentage who used specified materials to collect or absorb blood from the most recent menstrual period, and among women age 15–49 whose most recent menstrual period was in the past year and who were at home during their most recent menstrual period, percentage who were able to wash and change in privacy while at home and percentage who were able to both wash and change in privacy and who used appropriate materials during their most recent menstruation, according to background characteristics, Tajikistan DHS 2023

	Among women whose most recent menstrual period was in the past year, percentage who used the specified materials to collect or absorb blood from most recent menstrual period									Among women whose most recent menstrual period was in the past year and who were at home during their most recent menstrual period		
Background characteristic	Reusable sanitary pads	Disposable sanitary pads	Tampons	Cloth	Toilet paper	Cotton wool	Underwear only	Nothing	Number of women	Percentage able to wash and change in privacy	Percentage able to wash and change in privacy and who used appropriate materials during most recent menstruation[1]	Number of women
Age												
15–19	9.1	32.6	1.2	67.1	0.1	0.3	0.1	0.0	1,619	97.1	97.0	1,615
20–24	7.9	27.1	1.7	74.2	0.3	0.2	0.0	0.0	1,461	98.5	98.5	1,461
25–29	8.2	21.9	2.5	76.4	0.2	0.2	0.1	0.0	1,394	98.0	97.9	1,391
30–34	7.4	20.3	2.2	79.0	0.0	0.3	0.0	0.1	1,425	98.7	98.5	1,423
35–39	7.1	19.5	2.3	80.0	0.1	0.1	0.0	0.0	1,346	98.1	98.1	1,345
40–44	7.2	20.5	2.1	80.1	0.1	0.0	0.0	0.0	995	98.0	98.0	994
45–49	8.8	17.7	1.9	77.7	0.1	0.5	0.0	0.0	670	99.6	99.6	669
Residence												
Urban	15.6	35.6	2.3	61.6	0.3	0.2	0.2	0.0	2,419	98.4	98.1	2,414
Rural	5.1	19.2	1.8	81.1	0.1	0.2	0.0	0.0	6,490	98.1	98.1	6,483
Region												
Dushanbe	29.9	30.6	1.3	61.7	0.6	0.3	0.0	0.0	969	99.2	99.2	968
GBAO	4.2	39.2	0.0	69.2	0.0	0.2	0.0	0.0	140	98.1	98.1	139
Sughd	8.3	39.6	1.5	57.9	0.0	0.1	0.0	0.0	2,425	99.5	99.5	2,422
DRS	7.7	23.4	1.7	76.9	0.1	0.1	0.0	0.0	2,137	97.1	97.0	2,134
Khatlon	1.6	9.1	2.7	93.0	0.1	0.4	0.2	0.0	3,238	97.6	97.5	3,235
FTF districts	0.8	6.4	3.6	94.4	0.1	0.3	0.0	0.0	1,801	97.6	97.6	1,799
Education												
None/primary	6.7	9.5	1.3	86.6	0.1	0.0	0.8	0.0	404	95.6	94.8	400
General basic	5.7	20.6	1.3	80.5	0.1	0.2	0.0	0.0	3,002	97.4	97.3	2,999
General secondary	7.7	18.4	2.3	79.2	0.2	0.3	0.0	0.0	3,738	98.7	98.7	3,734
Professional primary/middle	12.7	39.6	1.8	61.3	0.0	0.0	0.3	0.0	704	98.8	98.5	703
Higher	12.7	45.5	2.7	56.0	0.2	0.1	0.0	0.0	1,061	99.1	99.1	1,061
Wealth quintile												
Lowest	1.4	4.2	2.3	95.2	0.1	0.2	0.0	0.1	1,665	96.6	96.5	1,661
Second	3.3	14.9	2.0	86.0	0.0	0.1	0.1	0.0	1,782	98.0	97.8	1,779
Middle	4.7	22.5	1.3	80.0	0.0	0.3	0.1	0.0	1,792	98.5	98.5	1,790
Fourth	10.2	31.2	1.8	66.6	0.2	0.4	0.1	0.0	1,770	98.9	98.7	1,768
Highest	19.1	42.8	2.3	53.9	0.4	0.1	0.0	0.0	1,900	98.8	98.8	1,900
Total	8.0	23.6	1.9	75.8	0.1	0.2	0.1	0.0	8,909	98.2	98.1	8,897

[1] Reusable sanitary pads, disposable sanitary pads, tampons, cloth, toilet paper, and/or cotton wool

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SAMPLE DESIGN

Appendix A

A.1 INTRODUCTION

This section describes the objectives of the survey, the overall sample size, survey domains, and subsamples. The 2023 Tajikistan Demographic and Health Survey (2023 TjDHS) is the third DHS survey implemented in Tajikistan, following the 2012 and 2017 surveys. A nationally representative sample of 8,140 households was selected from 370 clusters. All women age 15–49 who were usual residents of the selected households or who slept in the households the night before the survey were eligible for interviews. The main objectives of the 2023 TjDHS were to provide up-to-date information on fertility and childhood mortality levels; fertility preferences; awareness, approval, and use of family planning methods; maternal and child health; knowledge of and attitudes toward HIV/AIDS and other sexually transmitted infections (STIs); and the health and nutritional status of women and their young children under age 5. In every household selected, all women age 15–49 and all children under age 5 were eligible for height and weight measurements and for anemia testing. One woman age 15–49 was randomly selected from each household for the domestic violence module and one child age 1–14 was randomly selected for the child discipline module. There was no male survey in the 2023 TjDHS.

There are five administrative regions in Tajikistan: Dushanbe City, Sughd, Khatlon, Districts of Republican Subordination (DRS), and Gorno-Badakhshan Autonomous Oblast (GBAO). The sample for the 2023 TjDHS was designed to produce representative results for the country as a whole, for urban and rural areas separately, and for each of the five administrative regions. Also, as in the previous TjDHS surveys, the sample was designed to allow certain indicators to be presented for the 12 districts in the Khatlon region covered under the Feed the Future program (FTF).

A.2 SAMPLE FRAME

The sampling frame used for the 2023 TjDHS was the 2020 Tajikistan Population and Housing Census (TPHC), conducted by the Agency on Statistics under the President of the Republic of Tajikistan (Tajstat). As noted, Tajikistan is divided into five administrative regions; each region is subdivided into urban and rural areas, and there are 68 cities and rayons (districts) in total. Each city or rayon (district) is subdivided into census divisions, each census division into instruction areas, and each instruction area into enumeration areas (EAs).

The sampling frame for the 2023 TjDHS was a list of EAs covering all urban and rural areas of the country, with the primary sampling units (PSUs) being EAs in urban and rural areas. An EA is a geographical area, usually a city block, consisting of an adequate number of households; each EA served as a counting unit for the population census. The 2020 TPHC did not use EA maps. Urban EAs can be identified through a list of structures/households in the EA together with a description file. In rural areas, a PSU is a natural village if small or part of a large village. Rural PSUs can be identified with help from the village administration.

Table A.1 shows the percent distribution of households by region and by type of residence. The table indicates that 32.6% of the households in Tajikistan are in urban areas. The size of the regions in Tajikistan varies substantially, with Khatlon and Sughd representing 32.0% and 31.2% of households, respectively, whereas GBAO represents only 2.3% of households. **Table A.2** presents the distribution of PSUs and their average size in number of households by region and by type of residence. There are in total 21,521 PSUs; among them, 3,612 are in urban areas and 17,909 are in rural areas. The average PSU size is 72 households; urban PSUs are larger (140 households on average) than rural PSUs (58 households on average).

Table A.1 Households

Distribution of residential households by region and residence, Tajikistan DHS 2023

Region	Residential households			Percentage urban	Percentage of households in the sampling frame
	Urban	Rural	Total		
Dushanbe	184,456		184,456	100.0	11.9
GBAO	6,476	29,388	35,864	18.1	2.3
Sughd	154,284	329,826	484,110	31.9	31.2
DRS	56,461	292,909	349,370	16.2	22.5
Khatlon	102,880	392,963	495,843	20.7	32.0
Tajikistan	**504,557**	**1,045,086**	**1,549,643**	**32.6**	**100.0**

Source: 2020 TPHC, conducted by the Agency on Statistics under the President of the Republic of Tajikistan

Table A.2 Enumeration areas and households

Distribution of primary sampling units (PSUs) and average number of households per PSU in the sampling frame, by region and residence, Tajikistan DHS 2023

Region	Number of PSUs			Average PSU size		
	Urban	Rural	Total	Urban	Rural	Total
Dushanbe	1,122		1,122	164		164
GBAO	38	516	554	170	57	65
Sughd	1,082	5,001	6,083	143	66	80
DRS	443	5,192	5,635	127	56	62
Khatlon	927	7,200	8,127	111	55	61
Tajikistan	**3,612**	**17,909**	**21,521**	**140**	**58**	**72**

Source: 2020 TPHC, conducted by the Agency on Statistics under the President of the Republic of Tajikistan

A.3 SAMPLE DESIGN AND IMPLEMENTATION

The 2023 TjDHS sample was selected through a stratified two-stage cluster sampling procedure. Each region was stratified into urban and rural areas; since Dushanbe has no rural areas, there were a total of nine sampling strata. Samples were selected independently in each stratum in two stages. Implicit stratification and proportional allocation were achieved at each of the lower administrative levels by sorting the sampling frame within each sampling stratum before sample selection, according to administrative units at different levels, and by using probability proportional to size selection in the first stage of sampling.

In the first stage, 370 PSUs were selected with probability proportional to PSU size and with independent selection in each sampling stratum according to the sample allocation shown in **Table A.3**. PSU size was the number of residential households in the PSU based on the 2020 TPHC. After the selection of PSUs and before the main data collection, a household listing operation was carried out in all of the selected PSUs, and the resulting list of households served as the sampling frame for the selection of households in the second stage.

In the second stage, a fixed number of 22 households per PSU were selected with equal probability systematic selection from the newly updated household listing. The survey interviewers were asked to interview only the preselected households. No replacements and no changes of the preselected households were allowed in the implementation stages in order to prevent bias. When a PSU had less than 22 households listed, all of the households were included in the sample. All women age 15–49 who were usual members of the selected households or who spent the night before the survey in the selected households were eligible for the female survey.

Table A.3 shows the sample allocation of clusters and households by region and residence. **Table A.4** shows the expected number of completed interviews according to region and residence. Based on a fixed sample take of 22 households per cluster, 370 PSUs were selected, 166 in urban areas and 204 in rural

areas. The total number of households selected was 8,140 (3,652 in urban areas and 4,488 in rural areas). The survey was expected to result in about 10,718 completed interviews with women age 15–49 (4,180 in urban areas and 6,538 in rural areas).

Table A.3 Sample allocation of clusters and households

Sample allocation of clusters and households by region, according to residence, Tajikistan DHS 2023

	Number of clusters allocated			Number of households allocated		
Region	Urban	Rural	Total	Urban	Rural	Total
Dushanbe	75		75	1,650		1,650
GBAO	9	33	42	198	726	924
Sughd	29	51	80	638	1,122	1,760
DRS	17	62	79	374	1,364	1,738
Khatlon	36	58	94	792	1,276	2,068
Tajikistan	**166**	**204**	**370**	**3,652**	**4,488**	**8,140**

Table A.4 Sample allocation of completed interviews with women

Sample allocation of expected number of completed interviews with women by region, according to residence, Tajikistan DHS 2023

	Expected number of interviews with women age 15–49		
Region	Urban	Rural	Total
Dushanbe	1,888		1,888
GBAO	227	1,057	1,284
Sughd	730	1,635	2,365
DRS	428	1,987	2,415
Khatlon	907	1,859	2,766
Tajikistan	4,180	6,538	10,718

The sample calculations were based on the results of the 2017 TjDHS: the average number of women age 15–49 per household was 1.2 in urban areas and 1.5 in rural areas, the household completion rate was 96% in urban areas and 98% in rural areas, and the response rate among women was 99% in both urban and rural areas.

A.4 Sample Probabilities and Sampling Weights

Due to the nonproportional allocation of the sample to different regions and to their urban and rural areas and the possible differences in response rates, sampling weights will be required for any analysis using the 2023 TjDHS data to ensure the actual representativeness of the survey results at the national level as well as the domain level. Since the 2023 TjDHS sample was a two-stage stratified cluster sample, sampling weights were calculated based on sampling probabilities separately for each sampling stage and for each cluster. The following notations were used:

P_{1hi}: first-stage sampling probability of the i^{th} cluster in stratum h

P_{2hi}: second-stage sampling probability within the i^{th} cluster (households)

P_{hi}: overall sampling probability of any households in the i^{th} cluster in stratum h

Let n_h be the number of clusters selected in stratum h, M_{hi} the number of households in the i^{th} cluster according to the sampling frame, and $\sum_i M_{hi}$ the total number of households in stratum h. The first stage's probability of selecting the i^{th} cluster in stratum h is calculated as follows:

$$P_{1hi} = \frac{n_h M_{hi}}{\Sigma_i M_{hi}}$$

Let L_{hi} be the number of households listed in the household listing operation in cluster *i* in stratum *h*, and let s_{hi} be the number of households selected in the cluster. The second stage's selection probability for each household in the cluster is calculated as follows:

$$P_{2hi} = \frac{s_{hi}}{L_{hi}}$$

The overall selection probability of each household in cluster *i* of stratum *h* is therefore the product of the two-stage selection probabilities:

$$P_{hi} = P_{1hi} \times P_{2hi}$$

The design weight for each household in cluster *i* of stratum *h* is the inverse of its overall selection probability:

$$W_{hi} = 1/P_{hi}$$

A spreadsheet containing all sampling parameters and selection probabilities was prepared to help calculate the design weights. Design weights were adjusted for household nonresponse and individual nonresponse to obtain the sampling weights for households and for women. Nonresponse was adjusted at the sampling stratum level. For household sampling weights, household design weights were multiplied by the inverse of household response rates according to stratum. For women's individual sampling weights, household sampling weights were multiplied by the inverse of women's individual response rates according to stratum. After adjustment for nonresponse, the sampling weights were normalized (by multiplying the sampling weight by the estimated total sampling fraction obtained from the survey for the household weight and the woman's weight) to obtain the final standard weights that appear in the data files. The normalization process was done so that the total number of unweighted cases was equal to the total number of weighted cases at the national level for both households and women. The normalized weights are relative weights that are valid for estimating means, proportions, ratios, and rates but are not valid for estimations based on pooled data or for estimating population totals.

A.5 SURVEY RESULTS

Table A.5 presents interview response rates in the 2023 TjDHS by urban and rural residence and region.

Table A.5 Sample implementation

Percent distribution of households and eligible women age 15–49 by results of the household and individual interviews, and household, eligible women, and overall women response rates, according to residence and region (unweighted), Tajikistan DHS 2023

	Residence		Region					
Result	Urban	Rural	Dushan-be	GBAO	Sughd	DRS	Khatlon	Total
Selected households								
Completed (C)	99.3	99.5	99.5	99.1	99.4	99.4	99.5	99.4
Household present but no competent respondent at home (HP)	0.2	0.1	0.1	0.0	0.2	0.1	0.1	0.1
Postponed (P)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Refused (R)	0.1	0.0	0.1	0.1	0.0	0.0	0.1	0.1
Dwelling not found (DNF)	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.0
Household absent (HA)	0.3	0.3	0.1	0.7	0.4	0.3	0.3	0.3
Dwelling vacant/address not a dwelling (DV)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Dwelling destroyed (DD)	0.0	0.0	0.1	0.0	0.0	0.0	0.0	0.0
Other (O)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of sampled households	7,897	10,173	3,670	1,749	3,890	4,022	4,739	18,070
Household response rate (HRR)[1]	99.7	99.9	99.8	99.8	99.8	99.8	99.9	99.8
Eligible women								
Completed (EWC)	99.4	99.6	99.3	98.8	99.4	99.7	99.7	99.5
Not at home (EWNH)	0.1	0.1	0.1	0.0	0.2	0.0	0.1	0.1
Postponed (EWP)	0.1	0.0	0.1	0.0	0.0	0.0	0.0	0.0
Refused (EWR)	0.2	0.1	0.2	0.1	0.0	0.1	0.1	0.1
Partly completed (EWPC)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Incapacitated (EWI)	0.3	0.3	0.1	1.1	0.4	0.2	0.1	0.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	4,245	5,685	2,020	825	2,130	2,284	2,671	9,930
Eligible women response rate (EWRR)[2]	99.4	99.6	99.3	98.8	99.4	99.7	99.7	99.5
Overall women response rate (OWRR)[3]	99.1	99.5	99.1	98.6	99.2	99.5	99.6	99.3

[1] Using the number of households falling into specific response categories, the household response rate (HRR) is calculated as:

$$\frac{100 * C}{C + HP + P + R + DNF}$$

[2] The eligible women response rate (EWRR) is equivalent to the percentage of interviews completed (EWC).
[3] The overall women response rate (OWRR) is calculated as:

$$OWRR = HRR * EWRR/100$$

ESTIMATES OF SAMPLING ERRORS

Appendix B

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 of 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 2023 Tajikistan Demographic and Health Survey (2023 TjDHS) 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 2023 TjDHS is only one of many samples that could have been selected from the same population, using the same design and sample 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 among all possible samples. Although the degree of variability is not known exactly, it can be estimated from the survey results.

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% of all possible samples of identical size and design.

If the sample of respondents had been selected by simple random sampling, it would have been possible to use straightforward formulas for calculating sampling errors. However, the 2023 TjDHS sample was the result of a multistage stratified cluster design, and, consequently, it was necessary to use more complex formulas. Sampling errors are computed in SAS programs developed by ICF. These programs use the Taylor linearization method to estimate variances for survey estimates that are means, proportions, or ratios. 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 linear statistic such as a percentage or mean 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:

$$SE^2(r) = var(r) = \frac{1-f}{x^2}\sum_{h=1}^{H}\left[\frac{m_h}{m_h-1}\left(\sum_{i=1}^{m_h} z_{hi}^2 - \frac{z_h^2}{m_h}\right)\right]$$

in which

$$z_{hi} = y_{hi} - rx_{hi} \text{ and } z_h = y_h - rx_h$$

where h represents the stratum, which varies from 1 to H;
m_h is the total number of clusters selected in the h^{th} stratum;
y_{hi} is the sum of the weighted values of variable y in the i^{th} cluster in the h^{th} stratum;
x_{hi} is the sum of the weighted number of cases in the i^{th} cluster in the h^{th} stratum; and
f 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 formulas. Each replication considers *all but one* cluster in the calculation of the estimates. Pseudo-independent replications are thus created. In the 2023 TjDHS, there were 370 non-empty clusters. Hence, 370 replications were created. The variance of a rate *r* is calculated as follows:

$$SE^2(r) = var(r) = \frac{1}{k(k-1)} \sum_{i=1}^{k} (r_i - r)^2$$

in which

$$r_i = kr - (k-1)r_{(i)}$$

where r is the estimate computed from the full sample of 370 clusters,
$r_{(i)}$ is the estimate computed from the reduced sample of 369 clusters (i^{th} cluster excluded), and
k is the total number of clusters.

In addition to the standard error, the design effect (DEFT) for each estimate is calculated. The design effect 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. Relative standard errors and confidence limits for the estimates are also calculated.

Sampling errors for the 2023 TjDHS are calculated for selected variables considered to be of primary interest. The results are presented in this appendix for the country as a whole, for urban and rural areas separately, for each of the five regions, and for the Feed the Future (FTF) program areas. For each variable, the type of statistic (mean, proportion, or rate) and the base population are given in **Table B.1**. **Tables B.2** through **B.10** 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% confidence limits (R±2SE) for each variable. The sampling errors for mortality rates are presented for the 5-year period preceding the survey for the national sample and the urban and rural samples and for the 10-year period preceding the survey at other domain levels. The DEFT is considered undefined when the standard error considering a simple random sample is zero (when the estimate is close to 0 or 1).

The confidence interval (e.g., as calculated for *mean number of children ever born to women age 15–49*) can be interpreted as follows: the overall average from the national sample is 2.115, and its standard error is 0.020. Therefore, to obtain the 95% confidence limits, one adds and subtracts twice the standard error to the sample estimate, that is, 2.115 ± 2 × 0.020. There is a high probability (95%) that the *true* mean number of children ever born to women age 15–49 is between 2.076 and 2.154.

For the total sample, the value of the DEFT, averaged over all variables, is 1.51. This means that, due to multistage clustering of the sample, the average standard error is increased by a factor of 1.51 over that in an equivalent simple random sample.

Table B.1 List of selected variables for sampling errors, Tajikistan DHS 2023

Variable	Estimate	Base population
HOUSEHOLDS AND POPULATION		
Electricity primary source of lighting	Proportion	De jure household population
Primary reliance on clean fuels and technology	Proportion	De jure household population
Births registered with civil authority	Proportion	De jure household population under 5
Improved drinking water source	Proportion	De jure household population
At least basic drinking water service	Proportion	De jure household population
Water available when needed	Proportion	De jure household population
Improved sanitation facility	Proportion	De jure household population
At least basic sanitation service	Proportion	De jure household population
Using open defecation	Proportion	De jure household population
Using a handwashing facility with soap and water	Proportion	De jure household population for whom handwashing place was observed or with no on-site place for handwashing
WOMEN		
Urban residence	Proportion	Women 15–49
No education	Proportion	Women 15–49
Secondary education or higher	Proportion	Women 15–49
Literacy	Proportion	Women 15–49
Use of the internet in last 12 months	Proportion	Women 15–49
Current tobacco use	Proportion	Women 15–49
Currently married/in union	Proportion	Women 15–49
Married before age 15	Proportion	Women 25–49
Married before age 18	Proportion	Women 25–49
Had sexual intercourse before age 18	Proportion	Women 20–49
Age-specific fertility rate 15–19	Rate	Woman-years of exposure to childbearing at age 15–19 in the 3 years preceding the survey
Total fertility rate (3 years)	Rate	Woman-years of exposure to childbearing
Total abortion rate (3 years)	Rate	Woman-years of exposure to childbearing
Currently pregnant	Proportion	Women 15–49
Mean number of children ever born to women age 40–49	Mean	Women 40–49
Mean number of children ever born to women age 15–49	Mean	Women 15–49
Mean number of living children among women age 15–49	Mean	Women 15–49
Median birth interval	Median	Non-first births in the 5 years preceding the survey
First birth before age 18	Proportion	Women 20–49
Want to delay next birth at least 2 years	Proportion	Currently married women 15–49
Want no more children	Proportion	Currently married women 15–49
Ideal number of children	Mean	Women 15–49 with numeric responses
Total wanted fertility rate (3 years)	Rate	Woman-years of exposure to childbearing
Currently using any contraceptive method	Proportion	Currently married women 15–49
Currently using any modern method	Proportion	Currently married women 15–49
Currently using pill	Proportion	Currently married women 15–49
Currently using injectables	Proportion	Currently married women 15–49
Currently using male condom	Proportion	Currently married women 15–49
Currently using any traditional method	Proportion	Currently married women 15–49
12-month discontinuation rate due to method failure	Rate	Women 15–49
12-month discontinuation rate due to any reason	Rate	Women 15–49
12-month discontinuation rate due to switching to another method	Rate	Women 15–49
Unmet need for spacing	Proportion	Currently married women 15–49
Unmet need for limiting	Proportion	Currently married women 15–49
Unmet need total	Proportion	Currently married women 15–49
Demand satisfied by modern methods (married women)	Proportion	Currently married women 15–49
Demand satisfied by modern methods (all women)	Proportion	Women 15–49
Participation in decision making about family planning	Proportion	Currently married women 15–49
Not exposed to any of the eight media sources	Proportion	Women 15–49
Neonatal mortality rate[1]	Rate	Children exposed to the risk of mortality
Postneonatal mortality rate[1]	Rate	Children exposed to the risk of mortality
Infant mortality rate[1]	Rate	Children exposed to the risk of mortality
Child mortality rate[1]	Rate	Children exposed to the risk of mortality
Under-5 mortality rate[1]	Rate	Children exposed to the risk of mortality
Perinatal mortality rate	Rate	Pregnancies of 28 or more weeks' duration among women 15–49 in the 5 years preceding the survey
Stillbirth rate	Rate	Pregnancies of 28 or more weeks' duration among women 15–49 in the 5 years preceding the survey
Early neonatal mortality rate	Rate	Pregnancies of 28 or more weeks' duration among women 15–49 in the 5 years preceding the survey
In any avoidable high-risk category	Proportion	Children born in the 5 years preceding the survey to women 15–49
Received ANC from a skilled provider	Proportion	Women 15–49 who had a live birth in the 2 years preceding the survey
4+ ANC visits	Proportion	Women 15–49 who had a live birth in the 2 years preceding the survey
8+ ANC visits	Proportion	Women 15–49 who had a live birth in the 2 years preceding the survey
Took any iron-containing supplements	Proportion	Women 15–49 who had a live birth in the 2 years preceding the survey
Delivered in a health facility (live births)	Proportion	Live births in the 2 years preceding the survey
Delivered by C-section (live births)	Proportion	Live births in the 2 years preceding the survey
Delivered by a skilled provider (live births)	Proportion	Live births in the 2 years preceding the survey
Women with postnatal check during first 2 days	Proportion	Women 15–49 with a live birth in the 2 years preceding the survey
Newborns with postnatal check during first 2 days	Proportion	Most recent live births in the 2 years preceding the survey
Any problem accessing health care	Proportion	Women 15–49

Continued…

Table B.1—*Continued*

Variable	Estimate	Base population
Received BCG vaccination	Proportion	Children 12–23 months
Received DPT-HepB-Hib vaccination (3 doses)	Proportion	Children 12–23 months
Received pneumococcal vaccination (2 doses)	Proportion	Children 12–23 months
Received 12 vaccinations according to national schedule (12–23 months)	Proportion	Children 12–23 months
Received MR/MMR-1 vaccination (24–35 months)	Proportion	Children 24–35 months
Received all basic vaccinations (24–35 months)	Proportion	Children 24–35 months
Received 15 vaccinations according to national schedule (24–35 months)	Proportion	Children 24–35 months
Sought treatment for diarrhea	Proportion	Children under 5 with diarrhea in last 2 weeks
Treated with ORS	Proportion	Children under 5 with diarrhea in last 2 weeks
Height-for-age (−3 SD)	Proportion	Children under 5 who were measured
Height-for-age (−2 SD)	Proportion	Children under 5 who were measured
Weight-for-height (−2 SD)	Proportion	Children under 5 who were measured
Weight-for-height (+2 SD)	Proportion	Children under 5 who were measured
Weight-for-age (−2 SD)	Proportion	Children under 5 who were measured
Exclusive breastfeeding	Proportion	Youngest children 0–5 months living with their mother
Minimum dietary diversity (children 6–23 months)	Proportion	Youngest children 6–23 months living with their mother
Prevalence of anemia (children 6–59 months) (hemoglobin <11.0 g/dl)	Proportion	Children 6–59 months who were tested
Body mass index (BMI) <18.5	Proportion	Women 20–49 who were measured
Body mass index (BMI) ≥25	Proportion	Women 20–49 who were measured
Body mass index-for-age (−2 SD)	Proportion	Adolescent women 15–19 who were measured
Body mass index-for-age (+1 SD)	Proportion	Adolescent women 15–19 who were measured
Minimum dietary diversity (women 15–49)	Proportion	Women 15–49
Prevalence of any anemia (women 15–49)	Proportion	Women 15–49 who were tested
Prevalence of any anemia (nonpregnant women 15–49) (hemoglobin <12.0 g/dl)	Proportion	Nonpregnant women 15–49 who were tested
Prevalence of any anemia (pregnant women 15–49) (hemoglobin <11.0 g/dl)	Proportion	Pregnant women 15–49 who were tested
Child had fever in last 2 weeks	Proportion	Child under 5
Child had blood taken from finger/heel	Proportion	Child under 5 who had fever in the last 2 weeks
Discriminatory attitudes towards people with HIV	Proportion	Women 15–49 who have heard of HIV/AIDS
Condom use at last sex	Proportion	Women 15–49 with nonmarital, noncohabiting partner in last 12 months
Ever tested for HIV and received results of last test	Proportion	Women 15–49
Employed in last 12 months	Proportion	Currently married women 15–49
Employed in last 12 months but not paid	Proportion	Currently married women 15–49 employed in last 12 months
Mobile phone ownership	Proportion	Women 15–49
Have and use a bank account or mobile phone for financial transactions	Proportion	Women 15–49
Participate in decision making (all three decisions)	Proportion	Currently married women 15–49
Agree with at least one specified reason a husband is justified in wife beating	Proportion	Women 15–49
Make own decisions about sexual relations, contraceptive use, and reproductive care	Proportion	Currently married women 15–49
Experienced physical violence since age 15 by any perpetrator	Proportion	All women 15–49
Experienced sexual violence by any perpetrator ever	Proportion	All women 15–49
Experienced sexual violence by any non-intimate partner	Proportion	All women 15–49
Experienced physical/sexual/emotional violence by any husband or intimate partner ever	Proportion	Ever-married women 15–49
Experienced physical/sexual/emotional violence by current or most recent husband or intimate partner ever	Proportion	Ever-married women 15–49
Experienced physical/sexual violence by current or most recent husband or intimate partner ever	Proportion	Ever-married women 15–49
Experienced physical/sexual/emotional violence by any husband or intimate partner in the last 12 months	Proportion	Ever-married women 15–49

[1] Mortality rates are calculated for the 5 years before the survey for the national, urban, and rural samples and for the 10 years before the survey for the regional samples.

Table B.2 Sampling errors: Total sample, Tajikistan DHS 2023

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
HOUSEHOLDS AND POPULATION								
Electricity primary source of lighting	0.985	0.005	42,958	45,294	2.851	0.005	0.976	0.994
Primary reliance on clean fuels and technology	0.195	0.009	42,958	45,294	1.896	0.044	0.178	0.213
Births registered with civil authority	0.968	0.003	4,965	5,364	1.191	0.004	0.961	0.975
Improved drinking water source	0.935	0.012	42,958	45,294	3.853	0.013	0.911	0.958
At least basic drinking water service	0.929	0.012	42,958	45,294	3.796	0.013	0.905	0.953
Water available when needed	0.516	0.014	42,958	45,294	2.275	0.027	0.488	0.544
Improved sanitation facility	0.985	0.003	42,958	45,294	1.883	0.003	0.979	0.991
At least basic sanitation service	0.972	0.004	42,958	45,294	1.865	0.004	0.965	0.980
Using open defecation	0.000	0.000	42,958	45,294	0.709	0.528	0.000	0.000
Using a handwashing facility with soap and water	0.790	0.013	42,853	45,151	2.588	0.016	0.764	0.816
WOMEN								
Urban residence	0.274	0.006	9,879	9,879	1.340	0.022	0.262	0.286
No education	0.014	0.002	9,879	9,879	1.509	0.130	0.010	0.017
Secondary education or higher	0.955	0.004	9,879	9,879	1.727	0.004	0.948	0.962
Literacy	0.964	0.003	9,879	9,879	1.721	0.003	0.957	0.970
Use of the internet in last 12 months	0.444	0.013	9,879	9,879	2.524	0.028	0.418	0.469
Current tobacco use	0.022	0.002	9,879	9,879	1.512	0.102	0.017	0.026
Currently married/in union	0.748	0.005	9,879	9,879	1.175	0.007	0.738	0.759
Married before age 15	0.005	0.001	6,599	6,552	1.075	0.195	0.003	0.006
Married before age 18	0.136	0.006	6,599	6,552	1.370	0.042	0.125	0.148
Had sexual intercourse before age 18	0.097	0.004	8,165	8,169	1.367	0.046	0.088	0.106
Age-specific fertility rate 15–19	46.569	3.697	4,741	4,783	1.187	0.079	39.176	53.963
Total fertility rate (3 years)	3.468	0.077	27,858	27,858	1.495	0.022	3.314	3.622
Total abortion rate (3 years)	0.191	0.023	27,858	27,858	1.412	0.122	0.144	0.238
Currently pregnant	0.076	0.003	9,879	9,879	1.258	0.044	0.069	0.083
Mean number of children ever born to women age 40–49	3.283	0.048	2,109	2,014	1.411	0.015	3.186	3.380
Mean number of children ever born to women age 15–49	2.115	0.020	9,879	9,879	1.135	0.009	2.076	2.154
Mean number of living children among women age 15–49	2.051	0.019	9,879	9,879	1.117	0.009	2.014	2.088
Median birth interval	32.566	0.584	3,623	3,753	1.342	0.018	31.398	33.733
First birth before age 18	0.022	0.002	8,165	8,169	1.191	0.088	0.018	0.026
Want to delay next birth at least 2 years	0.049	0.004	7,203	7,392	1.581	0.082	0.041	0.057
Want no more children	0.370	0.008	7,203	7,392	1.430	0.022	0.353	0.386
Ideal number of children	3.441	0.021	9,698	9,686	1.692	0.006	3.398	3.483
Total wanted fertility rate (3 years)	3.223	0.070	27,858	27,858	1.420	0.022	3.084	3.363
Currently using any contraceptive method	0.315	0.009	7,203	7,392	1.591	0.028	0.297	0.332
Currently using any modern method	0.281	0.008	7,203	7,392	1.527	0.029	0.265	0.297
Currently using pill	0.020	0.002	7,203	7,392	1.312	0.108	0.016	0.025
Currently using injectables	0.010	0.002	7,203	7,392	1.497	0.175	0.007	0.014
Currently using male condom	0.037	0.003	7,203	7,392	1.234	0.074	0.031	0.042
Currently using any traditional method	0.034	0.003	7,203	7,392	1.287	0.081	0.029	0.040
12-month discontinuation rate due to method failure	0.920	1.399	2,551	2,326	1.376	1.521	0.000	3.719
12-month discontinuation rate due to any reason	35.751	0.288	2,551	2,326	1.413	0.008	35.175	36.326
12-month discontinuation rate due to switching to another method	7.244	0.743	2,551	2,326	1.330	0.103	5.757	8.730
Unmet need for spacing	0.130	0.005	7,203	7,392	1.366	0.042	0.119	0.141
Unmet need for limiting	0.076	0.004	7,203	7,392	1.291	0.053	0.068	0.084
Unmet need total	0.206	0.006	7,203	7,392	1.303	0.030	0.193	0.218
Demand satisfied by modern methods (married women)	0.540	0.011	3,841	3,847	1.396	0.021	0.517	0.562
Demand satisfied by modern methods (all women)	0.540	0.011	3,879	3,876	1.426	0.021	0.517	0.563
Participation in decision making about family planning	0.665	0.010	7,203	7,392	1.762	0.015	0.645	0.684
Not exposed to any of the eight media sources	0.523	0.015	9,879	9,879	2.908	0.028	0.494	0.553
Neonatal mortality (0–4 years)	9.680	1.863	5,084	5,259	1.229	0.192	5.954	13.407
Postneonatal mortality (0–4 years)	10.739	1.634	5,063	5,232	1.155	0.152	7.470	14.008
Infant mortality (0–4 years)	20.419	2.466	5,086	5,260	1.188	0.121	15.488	25.351
Child mortality (0–4 years)	3.830	0.967	4,986	5,144	1.190	0.252	1.897	5.764
Under-5 mortality (0–4 years)	24.172	2.687	5,094	5,269	1.199	0.111	18.798	29.545
Perinatal mortality rate	13.043	1.967	5,101	5,276	1.232	0.151	9.109	16.977
Stillbirth rate	5.740	1.220	5,101	5,276	1.176	0.213	3.299	8.180
Early neonatal mortality rate	7.346	1.559	5,068	5,246	1.260	0.212	4.228	10.463

Continued...

Table B.2—*Continued*

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
In any avoidable high-risk category	0.415	0.008	5,068	5,246	1.215	0.019	0.399	0.431
Received ANC from a skilled provider	0.813	0.015	1,985	2,066	1.751	0.019	0.782	0.843
4+ ANC visits	0.621	0.018	1,985	2,066	1.664	0.029	0.585	0.657
8+ ANC visits	0.134	0.011	1,985	2,066	1.461	0.084	0.111	0.156
Took any iron-containing supplements	0.745	0.012	1,985	2,066	1.238	0.016	0.721	0.770
Delivered in a health facility (live births)	0.947	0.007	2,126	2,213	1.548	0.008	0.932	0.962
Delivered by C-section (live births)	0.104	0.008	2,126	2,213	1.213	0.080	0.087	0.121
Delivered by a skilled provider (live births)	0.976	0.004	2,126	2,213	1.330	0.004	0.967	0.985
Women with postnatal check during first 2 days	0.892	0.008	1,985	2,066	1.136	0.009	0.877	0.908
Newborns with postnatal check during first 2 days	0.851	0.010	1,985	2,066	1.287	0.012	0.830	0.871
Any problem accessing health care	0.173	0.009	9,879	9,879	2.302	0.051	0.155	0.191
Ever had vaccination card	0.969	0.007	967	1,006	1.162	0.007	0.956	0.982
Received BCG vaccination	0.932	0.011	967	1,006	1.314	0.011	0.911	0.953
Received DPT-HepB-Hib vaccination (3 doses)	0.810	0.016	967	1,006	1.290	0.020	0.777	0.842
Received pneumococcal vaccination (2 doses)	0.379	0.023	967	1,006	1.508	0.062	0.333	0.426
Received 12 vaccinations according to national schedule (12–23 months)	0.737	0.019	967	1,006	1.337	0.026	0.699	0.774
Received MR/MMR-1 vaccination (24–35 months)	0.800	0.020	930	958	1.507	0.025	0.761	0.840
Received all basic vaccinations (24–35 months)	0.707	0.022	930	958	1.508	0.032	0.662	0.752
Received 15 vaccinations according to national schedule (24–35 months)	0.625	0.024	930	958	1.542	0.039	0.576	0.673
Sought treatment for diarrhea	0.639	0.022	824	839	1.252	0.034	0.595	0.682
Treated with ORS	0.633	0.024	824	839	1.364	0.038	0.585	0.681
Height-for-age (−3 SD)	0.040	0.004	4,914	5,298	1.403	0.099	0.032	0.048
Height-for-age (−2 SD)	0.137	0.007	4,914	5,298	1.447	0.053	0.122	0.151
Weight-for-height (−2 SD)	0.064	0.006	4,914	5,293	1.550	0.089	0.052	0.075
Weight-for-height (+2 SD)	0.046	0.004	4,914	5,293	1.331	0.091	0.037	0.054
Weight-for-age (−2 SD)	0.052	0.004	4,953	5,345	1.394	0.087	0.043	0.061
Exclusive breastfeeding	0.408	0.024	571	604	1.185	0.060	0.359	0.457
Minimum dietary diversity (children 6–23 months)	0.278	0.015	1,394	1,440	1.267	0.055	0.248	0.309
Prevalence of anemia (children 6–59 months) (hemoglobin <11.0 g/dl)	0.354	0.012	4,292	4,624	1.601	0.034	0.330	0.378
Body mass index (BMI) <18.5	0.033	0.003	7,284	7,259	1.282	0.081	0.028	0.039
Body mass index (BMI) ≥25	0.495	0.008	7,284	7,259	1.312	0.016	0.479	0.510
Body mass index-for-age (−2 SD)	0.009	0.002	1,613	1,597	1.023	0.266	0.004	0.014
Body mass index-for-age (+1 SD)	0.115	0.010	1,613	1,597	1.232	0.085	0.096	0.135
Minimum dietary diversity (women 15–49)	0.869	0.007	9,879	9,879	2.175	0.008	0.855	0.884
Prevalence of any anemia (women 15–49)	0.356	0.008	9,729	9,746	1.624	0.022	0.341	0.372
Prevalence of any anemia (nonpregnant women 15–49) (hemoglobin <12.0 g/dl)	0.361	0.008	9,023	9,002	1.624	0.023	0.345	0.378
Prevalence of any anemia (pregnant women 15–49) (hemoglobin <11.0 g/dl)	0.298	0.022	706	744	1.283	0.074	0.254	0.342
Child had fever in last 2 weeks	0.113	0.008	4,966	5,132	1.608	0.067	0.097	0.128
Child had blood taken from finger/heel	0.218	0.020	565	578	1.171	0.094	0.177	0.259
Discriminatory attitudes towards people with HIV	0.724	0.010	7,925	7,654	2.031	0.014	0.703	0.744
Condom use at last sex	0.257	0.062	30	15	0.767	0.240	0.133	0.381
Ever tested for HIV and received results of last test	0.187	0.009	9,879	9,879	2.310	0.048	0.169	0.205
Employed in last 12 months	0.227	0.008	7,203	7,392	1.613	0.035	0.211	0.243
Employed in last 12 months but not paid	0.126	0.018	1,806	1,676	2.310	0.143	0.090	0.162
Mobile phone ownership	0.649	0.011	9,879	9,879	2.191	0.016	0.628	0.670
Have and use a bank account or mobile phone for financial transactions	0.151	0.007	9,879	9,879	1.967	0.047	0.136	0.165
Participate in decision making (all three decisions)	0.357	0.012	7,203	7,392	2.058	0.033	0.333	0.380
Agree with at least one specified reason a husband is justified in wife beating	0.478	0.011	9,879	9,879	2.133	0.022	0.457	0.500
Make own decisions about sexual relations, contraceptive use, and reproductive care	0.325	0.010	7,203	7,392	1.870	0.032	0.305	0.346
Experienced physical violence since age 15 by any perpetrator	0.119	0.009	6,448	6,448	2.301	0.078	0.101	0.138
Experienced sexual violence by any perpetrator ever	0.019	0.003	6,448	6,448	1.566	0.141	0.013	0.024
Experienced sexual violence by any non-intimate partner	0.001	0.001	6,448	6,448	1.654	0.589	0.000	0.003
Experienced physical/sexual/emotional violence by any husband or intimate partner ever	0.168	0.012	5,515	5,241	2.397	0.072	0.144	0.193
Experienced physical/sexual/emotional violence by current or most recent husband or intimate partner ever	0.164	0.012	5,515	5,241	2.413	0.073	0.140	0.188
Experienced physical/sexual violence by current or most recent husband or intimate partner ever	0.139	0.011	5,515	5,241	2.367	0.079	0.117	0.161
Experienced physical/sexual/emotional violence by any husband or intimate partner in the last 12 months	0.139	0.012	5,515	5,241	2.536	0.085	0.115	0.162

Table B.3 Sampling errors: Urban sample, Tajikistan DHS 2023

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
HOUSEHOLDS AND POPULATION								
Electricity primary source of lighting	0.994	0.002	17,517	11,813	1.421	0.002	0.990	0.999
Primary reliance on clean fuels and technology	0.626	0.032	17,517	11,813	3.493	0.051	0.562	0.690
Births registered with civil authority	0.966	0.007	1,965	1,335	1.274	0.007	0.952	0.979
Improved drinking water source	0.997	0.001	17,517	11,813	1.357	0.001	0.995	1.000
At least basic drinking water service	0.987	0.009	17,517	11,813	4.154	0.009	0.970	1.000
Water available when needed	0.515	0.020	17,517	11,813	2.124	0.038	0.476	0.554
Improved sanitation facility	0.994	0.002	17,517	11,813	1.345	0.002	0.990	0.998
At least basic sanitation service	0.961	0.008	17,517	11,813	2.333	0.008	0.945	0.977
Using open defecation	0.000	0.000	17,517	11,813	na	na	0.000	0.000
Using a handwashing facility with soap and water	0.906	0.014	17,491	11,794	2.564	0.015	0.879	0.934
WOMEN								
No education	0.014	0.004	4,218	2,705	1.997	0.258	0.007	0.021
Secondary education or higher	0.960	0.006	4,218	2,705	1.977	0.006	0.948	0.972
Literacy	0.972	0.005	4,218	2,705	2.125	0.006	0.962	0.983
Use of the internet in last 12 months	0.577	0.017	4,218	2,705	2.236	0.029	0.543	0.611
Current tobacco use	0.026	0.003	4,218	2,705	1.245	0.118	0.020	0.032
Age-specific fertility rate 15–19	36.121	4.972	2,102	1,369	1.146	0.138	26.177	46.065
Total fertility rate (3 years)	3.248	0.089	11,920	7,647	1.159	0.027	3.069	3.426
Total abortion rate (3 years)	0.165	0.025	11,920	7,647	1.138	0.150	0.116	0.215
Currently pregnant	0.066	0.005	4,218	2,705	1.204	0.070	0.057	0.075
Mean number of children ever born to women age 40–49	2.972	0.056	887	555	1.157	0.019	2.859	3.084
Median birth interval	35.172	0.971	1,410	922	1.118	0.028	33.230	37.114
Want no more children	0.368	0.013	2,893	1,870	1.403	0.034	0.343	0.393
Ideal number of children	3.328	0.027	4,150	2,658	1.488	0.008	3.273	3.382
Total wanted fertility rate (3 years)	3.077	0.087	11,920	7,647	1.144	0.028	2.902	3.251
Currently using any contraceptive method	0.367	0.011	2,893	1,870	1.209	0.030	0.345	0.389
Currently using any modern method	0.325	0.011	2,893	1,870	1.224	0.033	0.304	0.347
Currently using pill	0.022	0.003	2,893	1,870	1.056	0.131	0.016	0.028
Currently using injectables	0.004	0.001	2,893	1,870	1.197	0.376	0.001	0.006
Currently using male condom	0.062	0.005	2,893	1,870	1.100	0.080	0.052	0.072
Currently using any traditional method	0.042	0.004	2,893	1,870	1.153	0.103	0.033	0.050
Unmet need for spacing	0.138	0.008	2,893	1,870	1.241	0.058	0.122	0.154
Unmet need for limiting	0.065	0.007	2,893	1,870	1.427	0.101	0.051	0.078
Unmet need total	0.203	0.009	2,893	1,870	1.219	0.045	0.184	0.221
Demand satisfied by modern methods (married women)	0.571	0.014	1,658	1,065	1.160	0.025	0.543	0.599
Demand satisfied by modern methods (all women)	0.573	0.014	1,682	1,079	1.180	0.025	0.545	0.602
Participation in decision making about family planning	0.719	0.014	2,893	1,870	1.673	0.019	0.691	0.747
Not exposed to any of the eight media sources	0.380	0.018	4,218	2,705	2.408	0.047	0.344	0.417
Neonatal mortality (0–4 years)	10.176	2.681	2,013	1,312	1.174	0.263	4.814	15.537
Postneonatal mortality (0–4 years)	7.769	2.306	2,011	1,312	1.229	0.297	3.158	12.381
Infant mortality (0–4 years)	17.945	3.709	2,014	1,312	1.282	0.207	10.528	25.363
Child mortality (0–4 years)	3.059	1.178	1,958	1,266	0.996	0.385	0.704	5.414
Under-5 mortality (0–4 years)	20.949	3.976	2,015	1,313	1.277	0.190	12.998	28.901
Perinatal mortality rate	15.615	3.090	2,027	1,319	1.112	0.198	9.434	21.795
Stillbirth rate	7.055	1.927	2,027	1,319	1.049	0.273	3.202	10.909
Early neonatal mortality rate	8.620	2.498	2,010	1,310	1.170	0.290	3.625	13.615
Received ANC from a skilled provider	0.843	0.018	810	536	1.437	0.022	0.806	0.880
4+ ANC visits	0.713	0.022	810	536	1.398	0.031	0.669	0.758
8+ ANC visits	0.203	0.022	810	536	1.525	0.106	0.159	0.246
Took any iron-containing supplements	0.827	0.017	810	536	1.273	0.020	0.793	0.861
Delivered in a health facility (live births)	0.982	0.005	871	578	1.113	0.005	0.972	0.993
Delivered by C-section (live births)	0.125	0.014	871	578	1.160	0.109	0.098	0.153
Delivered by a skilled provider (live births)	0.995	0.002	871	578	1.034	0.002	0.990	1.000
Women with postnatal check during first 2 days	0.876	0.014	810	536	1.231	0.016	0.847	0.904
Newborns with postnatal check during first 2 days	0.804	0.016	810	536	1.173	0.020	0.771	0.837
Any problem accessing health care	0.204	0.011	4,218	2,705	1.832	0.056	0.181	0.226
Ever had vaccination card	0.977	0.009	394	260	1.135	0.009	0.959	0.995
Received BCG vaccination	0.941	0.013	394	260	1.087	0.014	0.914	0.967
Received DPT-HepB-Hib vaccination (3 doses)	0.769	0.023	394	260	1.094	0.031	0.722	0.816
Received pneumococcal vaccination (2 doses)	0.422	0.031	394	260	1.219	0.072	0.361	0.483
Received 12 vaccinations according to national schedule (12–23 months)	0.668	0.027	394	260	1.104	0.040	0.615	0.721
Received MR/MMR-1 vaccination (24–35 months)	0.863	0.022	355	222	1.184	0.025	0.819	0.907
Received all basic vaccinations (24–35 months)	0.730	0.027	355	222	1.127	0.037	0.676	0.785
Received 15 vaccinations according to national schedule (24–35 months)	0.625	0.030	355	222	1.129	0.047	0.566	0.685
Sought treatment for diarrhea	0.685	0.033	386	251	1.362	0.048	0.619	0.751
Treated with ORS	0.789	0.026	386	251	1.228	0.033	0.737	0.841
Height-for-age (−3 SD)	0.026	0.005	1,949	1,318	1.234	0.178	0.017	0.036
Height-for-age (−2 SD)	0.109	0.009	1,949	1,318	1.261	0.086	0.090	0.127
Weight-for-height (−2 SD)	0.037	0.005	1,951	1,319	1.166	0.140	0.027	0.048

Continued...

Table B.3—*Continued*

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
Weight-for-height (+2 SD)	0.047	0.007	1,951	1,319	1.423	0.158	0.032	0.061
Weight-for-age (−2 SD)	0.041	0.006	1,959	1,325	1.106	0.135	0.030	0.052
Exclusive breastfeeding	0.368	0.035	231	156	1.086	0.094	0.298	0.437
Minimum dietary diversity (children 6–23 months)	0.337	0.025	571	373	1.245	0.073	0.288	0.387
Prevalence of anemia (children 6–59 months) (hemoglobin <11.0 g/dl)	0.319	0.016	1,683	1,131	1.368	0.050	0.287	0.351
Body mass index (BMI) <18.5	0.031	0.004	3,103	1,991	1.149	0.116	0.023	0.038
Body mass index (BMI) ≥25	0.519	0.011	3,103	1,991	1.248	0.022	0.496	0.541
Body mass index-for-age (−2 SD)	0.008	0.003	708	454	0.980	0.407	0.002	0.015
Body mass index-for-age (+1 SD)	0.109	0.014	708	454	1.168	0.126	0.081	0.136
Minimum dietary diversity (women 15–49)	0.883	0.009	4,218	2,705	1.839	0.010	0.865	0.902
Prevalence of any anemia (women 15–49)	0.334	0.011	4,117	2,645	1.438	0.032	0.313	0.356
Child had fever in last 2 weeks	0.147	0.010	1,977	1,286	1.268	0.071	0.126	0.168
Child had blood taken from finger/heel	0.250	0.029	281	189	1.129	0.116	0.192	0.308
Discriminatory attitudes towards people with HIV	0.647	0.013	3,713	2,352	1.633	0.020	0.621	0.672
Condom use at last sex	0.298	0.083	21	11	0.823	0.280	0.131	0.465
Ever tested for HIV and received results of last test	0.233	0.013	4,218	2,705	1.964	0.055	0.208	0.259
Mobile phone ownership	0.787	0.014	4,218	2,705	2.145	0.017	0.760	0.814
Have and use a bank account or mobile phone for financial transactions	0.246	0.013	4,218	2,705	1.939	0.052	0.221	0.272
Participate in decision making (all three decisions)	0.421	0.016	2,893	1,870	1.779	0.039	0.389	0.454
Agree with at least one specified reason a husband is justified in wife beating	0.393	0.015	4,218	2,705	1.965	0.038	0.364	0.423
Make own decisions about sexual relations, contraceptive use, and reproductive care	0.390	0.013	2,893	1,870	1.473	0.034	0.363	0.417
Experienced physical violence since age 15 by any perpetrator	0.111	0.010	2,809	1,760	1.743	0.093	0.091	0.132
Experienced sexual violence by any perpetrator ever	0.019	0.004	2,809	1,760	1.376	0.187	0.012	0.026
Experienced sexual violence by any non-intimate partner	0.001	0.001	2,809	1,760	1.693	0.997	0.000	0.003
Experienced physical/sexual/emotional violence by current or most recent husband or intimate partner ever	0.164	0.014	2,345	1,355	1.849	0.086	0.136	0.192
Experienced physical/sexual violence by current or most recent husband or intimate partner ever	0.134	0.013	2,345	1,355	1.806	0.095	0.109	0.160
Experienced physical/sexual/emotional violence by any husband or intimate partner in the last 12 months	0.138	0.014	2,345	1,355	1.902	0.098	0.111	0.165

na = not applicable

Table B.4 Sampling errors: Rural sample, Tajikistan DHS 2023

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
HOUSEHOLDS AND POPULATION								
Electricity primary source of lighting	0.981	0.006	25,441	33,480	2.642	0.006	0.969	0.994
Primary reliance on clean fuels and technology	0.044	0.006	25,441	33,480	1.962	0.143	0.031	0.056
Births registered with civil authority	0.969	0.004	3,000	4,029	1.111	0.004	0.961	0.977
Improved drinking water source	0.913	0.016	25,441	33,480	3.462	0.017	0.881	0.944
At least basic drinking water service	0.909	0.016	25,441	33,480	3.413	0.017	0.877	0.940
Water available when needed	0.516	0.018	25,441	33,480	2.141	0.034	0.481	0.551
Improved sanitation facility	0.982	0.004	25,441	33,480	1.736	0.004	0.974	0.989
At least basic sanitation service	0.976	0.004	25,441	33,480	1.641	0.004	0.969	0.984
Using open defecation	0.000	0.000	25,441	33,480	0.629	0.528	0.000	0.000
Using a handwashing facility with soap and water	0.749	0.017	25,362	33,357	2.401	0.022	0.715	0.782
WOMEN								
No education	0.013	0.002	5,661	7,174	1.308	0.150	0.009	0.017
Secondary education or higher	0.953	0.004	5,661	7,174	1.572	0.005	0.944	0.962
Literacy	0.960	0.004	5,661	7,174	1.534	0.004	0.952	0.968
Use of the internet in last 12 months	0.393	0.016	5,661	7,174	2.468	0.041	0.361	0.425
Current tobacco use	0.020	0.003	5,661	7,174	1.510	0.139	0.015	0.026
Age-specific fertility rate 15–19	50.759	4.768	2,639	3,414	1.119	0.094	41.223	60.294
Total fertility rate (3 years)	3.548	0.100	15,939	20,211	1.457	0.028	3.349	3.747
Total abortion rate (3 years)	0.201	0.031	15,939	20,211	1.366	0.153	0.139	0.262
Currently pregnant	0.080	0.004	5,661	7,174	1.186	0.054	0.071	0.088
Mean number of children ever born to women age 40–49	3.401	0.064	1,222	1,459	1.385	0.019	3.274	3.528
Median birth interval	31.839	0.666	2,213	2,831	1.308	0.021	30.507	33.170
Want no more children	0.370	0.010	4,310	5,522	1.362	0.027	0.350	0.390
Ideal number of children	3.483	0.028	5,548	7,028	1.623	0.008	3.428	3.539
Total wanted fertility rate (3 years)	3.275	0.089	15,939	20,211	1.380	0.027	3.097	3.453
Currently using any contraceptive method	0.297	0.011	4,310	5,522	1.592	0.037	0.275	0.319
Currently using any modern method	0.266	0.010	4,310	5,522	1.521	0.039	0.245	0.286
Currently using pill	0.020	0.003	4,310	5,522	1.297	0.140	0.014	0.025
Currently using injectables	0.012	0.002	4,310	5,522	1.378	0.188	0.008	0.017
Currently using male condom	0.028	0.003	4,310	5,522	1.302	0.116	0.022	0.035
Currently using any traditional method	0.031	0.003	4,310	5,522	1.269	0.107	0.025	0.038
Unmet need for spacing	0.127	0.007	4,310	5,522	1.324	0.053	0.114	0.141
Unmet need for limiting	0.079	0.005	4,310	5,522	1.192	0.062	0.070	0.089
Unmet need total	0.207	0.008	4,310	5,522	1.251	0.037	0.191	0.222
Demand satisfied by modern methods (married women)	0.527	0.015	2,183	2,782	1.385	0.028	0.498	0.557
Demand satisfied by modern methods (all women)	0.528	0.015	2,197	2,796	1.405	0.028	0.498	0.557
Participation in decision making about family planning	0.646	0.012	4,310	5,522	1.668	0.019	0.622	0.670
Not exposed to any of the eight media sources	0.577	0.019	5,661	7,174	2.893	0.033	0.539	0.615
Neonatal mortality (0–4 years)	9.515	2.321	3,071	3,947	1.156	0.244	4.873	14.158
Postneonatal mortality (0–4 years)	11.726	2.035	3,052	3,921	1.050	0.174	7.655	15.796
Infant mortality (0–4 years)	21.241	3.050	3,072	3,948	1.085	0.144	15.140	27.342
Child mortality (0–4 years)	4.079	1.221	3,028	3,878	1.104	0.299	1.637	6.520
Under-5 mortality (0–4 years)	25.233	3.327	3,079	3,956	1.095	0.132	18.579	31.887
Perinatal mortality rate	12.186	2.410	3,074	3,957	1.198	0.198	7.367	17.005
Stillbirth rate	5.301	1.492	3,074	3,957	1.151	0.282	2.316	8.286
Early neonatal mortality rate	6.922	1.904	3,058	3,936	1.217	0.275	3.114	10.730
Received ANC from a skilled provider	0.802	0.020	1,175	1,530	1.688	0.025	0.762	0.841
4+ ANC visits	0.588	0.023	1,175	1,530	1.605	0.039	0.542	0.635
8+ ANC visits	0.110	0.013	1,175	1,530	1.421	0.118	0.084	0.136
Took any iron-containing supplements	0.717	0.015	1,175	1,530	1.146	0.021	0.687	0.747
Delivered in a health facility (live births)	0.935	0.010	1,255	1,635	1.437	0.011	0.915	0.955
Delivered by C-section (live births)	0.097	0.010	1,255	1,635	1.182	0.105	0.076	0.117
Delivered by a skilled provider (live births)	0.969	0.006	1,255	1,635	1.215	0.006	0.958	0.981
Women with postnatal check during first 2 days	0.898	0.009	1,175	1,530	1.065	0.010	0.879	0.917
Newborns with postnatal check during first 2 days	0.867	0.013	1,175	1,530	1.280	0.015	0.842	0.893
Any problem accessing health care	0.161	0.011	5,661	7,174	2.302	0.070	0.139	0.184
Ever had vaccination card	0.966	0.008	573	746	1.090	0.008	0.950	0.983
Received BCG vaccination	0.929	0.014	573	746	1.270	0.015	0.902	0.956
Received DPT-HepB-Hib vaccination (3 doses)	0.824	0.020	573	746	1.281	0.025	0.784	0.864
Received pneumococcal vaccination (2 doses)	0.365	0.030	573	746	1.487	0.082	0.305	0.424
Received 12 vaccinations according to national schedule (12–23 months)	0.761	0.024	573	746	1.337	0.031	0.713	0.808
Received MR/MMR-1 vaccination (24–35 months)	0.782	0.025	575	736	1.431	0.032	0.732	0.831
Received all basic vaccinations (24–35 months)	0.700	0.028	575	736	1.463	0.040	0.644	0.756
Received 15 vaccinations according to national schedule (24–35 months)	0.624	0.030	575	736	1.505	0.049	0.563	0.685
Sought treatment for diarrhea	0.619	0.028	438	588	1.164	0.045	0.563	0.674
Treated with ORS	0.567	0.031	438	588	1.293	0.055	0.504	0.630
Height-for-age (−3 SD)	0.044	0.005	2,965	3,980	1.308	0.114	0.034	0.054
Height-for-age (−2 SD)	0.146	0.009	2,965	3,980	1.370	0.062	0.128	0.164
Weight-for-height (−2 SD)	0.073	0.007	2,963	3,974	1.454	0.101	0.058	0.087
Weight-for-height (+2 SD)	0.045	0.005	2,963	3,974	1.228	0.110	0.035	0.055
Weight-for-age (−2 SD)	0.055	0.006	2,994	4,020	1.337	0.103	0.044	0.067

Continued...

Table B.4—*Continued*

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
Exclusive breastfeeding	0.422	0.031	340	448	1.140	0.073	0.361	0.483
Minimum dietary diversity (children 6–23 months)	0.257	0.019	823	1,067	1.215	0.072	0.220	0.295
Prevalence of anemia (children 6–59 months) (hemoglobin <11.0 g/dl)	0.366	0.015	2,609	3,493	1.526	0.041	0.336	0.395
Body mass index (BMI) <18.5	0.034	0.003	4,181	5,269	1.230	0.101	0.027	0.041
Body mass index (BMI) ≥25	0.485	0.010	4,181	5,269	1.258	0.020	0.466	0.505
Body mass index-for-age (−2 SD)	0.009	0.003	905	1,143	0.967	0.328	0.003	0.016
Body mass index-for-age (+1 SD)	0.118	0.013	905	1,143	1.172	0.107	0.092	0.143
Minimum dietary diversity (women 15–49)	0.864	0.010	5,661	7,174	2.096	0.011	0.845	0.883
Prevalence of any anemia (women 15–49)	0.365	0.010	5,612	7,101	1.567	0.028	0.344	0.385
Child had fever in last 2 weeks	0.101	0.009	2,989	3,846	1.621	0.093	0.082	0.120
Child had blood taken from finger/heel	0.203	0.027	284	388	1.159	0.133	0.149	0.256
Discriminatory attitudes towards people with HIV	0.758	0.014	4,212	5,302	2.050	0.018	0.731	0.785
Condom use at last sex	0.155	0.056	9	4	0.459	0.362	0.043	0.267
Ever tested for HIV and received results of last test	0.170	0.012	5,661	7,174	2.312	0.068	0.147	0.193
Mobile phone ownership	0.597	0.013	5,661	7,174	2.055	0.022	0.571	0.624
Have and use a bank account or mobile phone for financial transactions	0.114	0.008	5,661	7,174	1.975	0.073	0.098	0.131
Participate in decision making (all three decisions)	0.335	0.015	4,310	5,522	2.021	0.043	0.306	0.364
Agree with at least one specified reason a husband is justified in wife beating	0.510	0.014	5,661	7,174	2.038	0.027	0.483	0.537
Make own decisions about sexual relations, contraceptive use, and reproductive care	0.304	0.013	4,310	5,522	1.857	0.043	0.278	0.330
Experienced physical violence since age 15 by any perpetrator	0.122	0.012	3,639	4,688	2.237	0.099	0.098	0.147
Experienced sexual violence by any perpetrator ever	0.019	0.003	3,639	4,688	1.508	0.182	0.012	0.025
Experienced sexual violence by any non-intimate partner	0.001	0.001	3,639	4,688	1.530	0.704	0.000	0.003
Experienced physical/sexual/emotional violence by current or most recent husband or intimate partner ever	0.164	0.015	3,170	3,886	2.350	0.094	0.133	0.195
Experienced physical/sexual violence by current or most recent husband or intimate partner ever	0.140	0.014	3,170	3,886	2.297	0.101	0.112	0.169
Experienced physical/sexual/emotional violence by any husband or intimate partner in the last 12 months	0.139	0.015	3,170	3,886	2.474	0.109	0.109	0.169

Table B.5 Sampling errors: Dushanbe sample, Tajikistan DHS 2023

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
HOUSEHOLDS AND POPULATION								
Primary reliance on clean fuels and technology	0.880	0.024	8,033	4,506	2.481	0.028	0.832	0.929
Births registered with civil authority	0.968	0.007	958	541	1.173	0.008	0.954	0.983
At least basic drinking water service	1.000	0.000	8,033	4,506	na	0.000	1.000	1.000
Water available when needed	0.675	0.033	8,033	4,506	2.553	0.048	0.609	0.740
At least basic sanitation service	0.964	0.012	8,033	4,506	2.384	0.012	0.941	0.987
Using open defecation	0.000	0.000	8,033	4,506	na	na	0.000	0.000
Using a handwashing facility with soap and water	0.966	0.011	8,020	4,498	2.438	0.011	0.945	0.987
WOMEN								
No education	0.005	0.002	2,006	1,077	1.087	0.336	0.002	0.009
Secondary education or higher	0.962	0.006	2,006	1,077	1.492	0.007	0.950	0.975
Literacy	0.981	0.004	2,006	1,077	1.384	0.004	0.973	0.989
Use of the internet in last 12 months	0.638	0.026	2,006	1,077	2.394	0.040	0.587	0.690
Current tobacco use	0.029	0.005	2,006	1,077	1.373	0.176	0.019	0.040
Total fertility rate (3 years)	3.232	0.126	5,680	3,050	1.148	0.039	2.981	3.484
Total abortion rate (3 years)	0.213	0.041	5,680	3,050	1.165	0.193	0.131	0.296
Currently pregnant	0.062	0.006	2,006	1,077	1.107	0.096	0.050	0.074
Mean number of children ever born to women age 40–49	3.208	0.087	389	205	1.114	0.027	3.034	3.382
Median birth interval	34.327	1.361	682	366	1.145	0.040	31.606	37.049
Want no more children	0.323	0.017	1,325	708	1.347	0.054	0.288	0.357
Ideal number of children	3.338	0.034	1,996	1,073	1.361	0.010	3.270	3.406
Total wanted fertility rate (3 years)	3.126	0.126	5,680	3,050	1.165	0.040	2.874	3.378
Currently using any contraceptive method	0.425	0.016	1,325	708	1.160	0.037	0.393	0.456
Currently using any modern method	0.377	0.016	1,325	708	1.169	0.041	0.346	0.408
Currently using pill	0.024	0.004	1,325	708	1.065	0.186	0.015	0.033
Currently using injectables	0.002	0.001	1,325	708	1.137	0.707	0.000	0.005
Currently using male condom	0.081	0.008	1,325	708	1.023	0.094	0.066	0.097
Currently using any traditional method	0.048	0.006	1,325	708	1.076	0.132	0.035	0.060
Unmet need for spacing	0.166	0.013	1,325	708	1.297	0.080	0.139	0.192
Unmet need for limiting	0.048	0.006	1,325	708	0.960	0.117	0.037	0.060
Unmet need total	0.214	0.013	1,325	708	1.190	0.063	0.187	0.241
Demand satisfied by modern methods (married women)	0.591	0.020	846	452	1.183	0.034	0.551	0.631
Demand satisfied by modern methods (all women)	0.596	0.020	856	457	1.193	0.034	0.555	0.636
Participation in decision making about family planning	0.854	0.017	1,325	708	1.786	0.020	0.819	0.888
Not exposed to any of the eight media sources	0.270	0.021	2,006	1,077	2.089	0.077	0.228	0.311
Neonatal mortality (0–9 years)	13.169	3.171	1,964	1,057	1.080	0.241	6.827	19.511
Postneonatal mortality (0–9 years)	5.316	1.842	1,960	1,055	1.118	0.346	1.633	8.999
Infant mortality (0–9 years)	18.484	3.835	1,964	1,057	1.152	0.207	10.814	26.155
Child mortality (0–9 years)	2.069	1.062	1,912	1,026	0.967	0.513	0.000	4.194
Under-5 mortality (0–9 years)	20.516	4.083	1,964	1,057	1.183	0.199	12.350	28.682
Perinatal mortality rate	19.625	4.880	984	532	1.064	0.249	9.864	29.385
Stillbirth rate	8.932	3.157	984	532	1.063	0.353	2.618	15.245
Early neonatal mortality rate	10.789	4.112	975	527	1.144	0.381	2.565	19.013
Received ANC from a skilled provider	0.910	0.023	381	208	1.538	0.025	0.865	0.955
4+ ANC visits	0.786	0.028	381	208	1.344	0.036	0.729	0.843
8+ ANC visits	0.181	0.024	381	208	1.192	0.130	0.134	0.228
Took any iron-containing supplements	0.920	0.015	381	208	1.116	0.017	0.889	0.951
Delivered in a health facility (live births)	0.986	0.006	408	222	1.017	0.006	0.975	0.998
Delivered by C-section (live births)	0.092	0.013	408	222	0.840	0.136	0.067	0.117
Delivered by a skilled provider (live births)	0.994	0.004	408	222	1.099	0.004	0.985	1.000
Women with postnatal check during first 2 days	0.823	0.023	381	208	1.162	0.028	0.778	0.869
Newborns with postnatal check during first 2 days	0.743	0.026	381	208	1.151	0.035	0.692	0.795
Any problem accessing health care	0.300	0.017	2,006	1,077	1.641	0.056	0.266	0.333
Ever had vaccination card	0.973	0.014	182	98	1.020	0.015	0.944	1.000
Received BCG vaccination	0.957	0.018	182	98	1.053	0.018	0.922	0.992
Received DPT-HepB-Hib vaccination (3 doses)	0.752	0.037	182	98	1.138	0.049	0.678	0.826
Received pneumococcal vaccination (2 doses)	0.504	0.047	182	98	1.247	0.092	0.411	0.597
Received 12 vaccinations according to national schedule (12–23 months)	0.612	0.041	182	98	1.115	0.066	0.531	0.693
Received MR/MMR-1 vaccination (24–35 months)	0.890	0.027	188	101	1.197	0.031	0.836	0.945
Received all basic vaccinations (24–35 months)	0.743	0.032	188	101	0.985	0.043	0.679	0.806
Received 15 vaccinations according to national schedule (24–35 months)	0.615	0.037	188	101	1.039	0.060	0.541	0.690
Sought treatment for diarrhea	0.773	0.029	227	126	1.077	0.038	0.714	0.832
Treated with ORS	0.891	0.023	227	126	1.135	0.026	0.845	0.937
Height-for-age (−3 SD)	0.019	0.004	955	539	0.962	0.222	0.010	0.027
Height-for-age (−2 SD)	0.087	0.011	955	539	1.155	0.124	0.065	0.108
Weight-for-height (−2 SD)	0.024	0.006	956	540	1.120	0.243	0.012	0.036
Weight-for-height (+2 SD)	0.030	0.006	956	540	1.133	0.205	0.018	0.043
Weight-for-age (−2 SD)	0.029	0.006	957	540	1.060	0.201	0.017	0.041
Exclusive breastfeeding	0.249	0.050	112	61	1.212	0.200	0.149	0.349
Minimum dietary diversity (children 6–23 months)	0.257	0.032	266	146	1.194	0.125	0.193	0.321

Continued...

Table B.5—*Continued*

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
Prevalence of anemia (children 6–59 months) (hemoglobin <11.0 g/dl)	0.311	0.021	829	468	1.285	0.069	0.269	0.354
Body mass index (BMI) <18.5	0.028	0.005	1,459	784	1.123	0.174	0.018	0.037
Body mass index (BMI) ≥25	0.498	0.018	1,459	784	1.369	0.036	0.462	0.534
Body mass index-for-age (−2 SD)	0.005	0.004	368	199	0.958	0.705	0.000	0.012
Body mass index-for-age (+1 SD)	0.095	0.018	368	199	1.189	0.192	0.058	0.131
Minimum dietary diversity (women 15–49)	0.867	0.016	2,006	1,077	2.160	0.019	0.834	0.900
Prevalence of any anemia (women 15–49)	0.284	0.016	1,964	1,056	1.578	0.057	0.252	0.316
Child had fever in last 2 weeks	0.170	0.016	961	520	1.330	0.096	0.138	0.203
Child had blood taken from finger/heel	0.309	0.034	160	88	0.927	0.111	0.240	0.377
Discriminatory attitudes towards people with HIV	0.521	0.017	1,893	1,016	1.452	0.032	0.488	0.555
Condom use at last sex	0.571	0.183	9	5	1.039	0.320	0.206	0.937
Ever tested for HIV and received results of last test	0.258	0.019	2,006	1,077	1.894	0.072	0.221	0.295
Mobile phone ownership	0.870	0.013	2,006	1,077	1.749	0.015	0.844	0.896
Have and use a bank account or mobile phone for financial transactions	0.354	0.017	2,006	1,077	1.609	0.049	0.320	0.389
Participate in decision making (all three decisions)	0.581	0.017	1,325	708	1.256	0.029	0.547	0.616
Agree with at least one specified reason a husband is justified in wife beating	0.313	0.017	2,006	1,077	1.655	0.055	0.279	0.348
Make own decisions about sexual relations, contraceptive use, and reproductive care	0.490	0.018	1,325	708	1.300	0.036	0.455	0.526
Experienced physical violence since age 15 by any perpetrator	0.074	0.011	1,337	703	1.492	0.144	0.053	0.095
Experienced sexual violence by any perpetrator ever	0.013	0.004	1,337	703	1.184	0.284	0.006	0.020
Experienced sexual violence by any non-intimate partner	0.000	0.000	1,337	703	na	na	0.000	0.000
Experienced physical/sexual/emotional violence by current or most recent husband or intimate partner ever	0.122	0.016	1,099	529	1.646	0.134	0.089	0.154
Experienced physical/sexual violence by current or most recent husband or intimate partner ever	0.088	0.014	1,099	529	1.675	0.163	0.059	0.116
Experienced physical/sexual/emotional violence by any husband or intimate partner in the last 12 months	0.102	0.015	1,099	529	1.598	0.143	0.073	0.132

na = not applicable

Table B.6 Sampling errors: GBAO sample, Tajikistan DHS 2023

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
HOUSEHOLDS AND POPULATION								
Primary reliance on clean fuels and technology	0.156	0.018	4,028	810	1.444	0.115	0.120	0.192
Births registered with civil authority	0.983	0.009	376	78	1.376	0.009	0.965	1.000
At least basic drinking water service	0.907	0.042	4,028	810	3.540	0.046	0.824	0.990
Water available when needed	0.517	0.032	4,028	810	1.763	0.063	0.452	0.582
At least basic sanitation service	0.933	0.011	4,028	810	1.275	0.011	0.912	0.954
Using open defecation	0.007	0.004	4,028	810	1.595	0.530	0.000	0.014
Using a handwashing facility with soap and water	0.721	0.028	4,028	810	1.662	0.038	0.666	0.776
WOMEN								
No education	0.001	0.001	815	157	0.954	1.006	0.000	0.003
Secondary education or higher	0.994	0.004	815	157	1.470	0.004	0.986	1.000
Literacy	0.989	0.004	815	157	1.031	0.004	0.982	0.997
Use of the internet in last 12 months	0.662	0.040	815	157	2.400	0.060	0.582	0.741
Current tobacco use	0.004	0.002	815	157	0.837	0.487	0.000	0.007
Total fertility rate (3 years)	3.268	0.261	2,282	439	1.441	0.080	2.745	3.790
Total abortion rate (3 years)	0.129	0.040	2,282	439	0.907	0.307	0.050	0.208
Currently pregnant	0.058	0.009	815	157	1.119	0.158	0.039	0.076
Mean number of children ever born to women age 40–49	2.843	0.140	258	48	1.434	0.049	2.563	3.123
Median birth interval	37.694	3.110	275	55	1.467	0.083	31.474	43.915
Want no more children	0.339	0.026	560	109	1.280	0.076	0.288	0.391
Ideal number of children	3.421	0.063	802	154	1.499	0.019	3.294	3.548
Total wanted fertility rate (3 years)	3.192	0.252	2,282	439	1.408	0.079	2.688	3.695
Currently using any contraceptive method	0.364	0.024	560	109	1.193	0.067	0.316	0.413
Currently using any modern method	0.354	0.024	560	109	1.203	0.069	0.305	0.402
Currently using pill	0.026	0.007	560	109	1.028	0.265	0.012	0.040
Currently using injectables	0.015	0.007	560	109	1.384	0.472	0.001	0.029
Currently using male condom	0.045	0.008	560	109	0.916	0.179	0.029	0.061
Currently using any traditional method	0.011	0.005	560	109	1.235	0.505	0.000	0.021
Unmet need for spacing	0.100	0.013	560	109	1.001	0.127	0.074	0.125
Unmet need for limiting	0.061	0.012	560	109	1.212	0.201	0.036	0.085
Unmet need total	0.161	0.016	560	109	1.032	0.100	0.129	0.193
Demand satisfied by modern methods (married women)	0.674	0.032	297	57	1.169	0.048	0.610	0.738
Demand satisfied by modern methods (all women)	0.677	0.032	304	58	1.193	0.047	0.613	0.741
Participation in decision making about family planning	0.825	0.023	560	109	1.426	0.028	0.779	0.871
Not exposed to any of the eight media sources	0.178	0.025	815	157	1.892	0.143	0.127	0.229
Neonatal mortality (0–9 years)	12.051	4.047	764	150	0.975	0.336	3.956	20.145
Postneonatal mortality (0–9 years)	4.791	2.327	761	150	1.003	0.486	0.136	9.445
Infant mortality (0–9 years)	16.841	4.658	764	150	0.950	0.277	7.525	26.158
Child mortality (0–9 years)	2.980	2.074	761	149	1.023	0.696	0.000	7.128
Under-5 mortality (0–9 years)	19.771	4.599	764	150	0.890	0.233	10.574	28.968
Perinatal mortality rate	18.802	6.318	364	73	0.909	0.336	6.167	31.437
Stillbirth rate	7.025	3.905	364	73	0.912	0.556	0.000	14.835
Early neonatal mortality rate	11.860	5.297	361	72	0.948	0.447	1.267	22.454
Received ANC from a skilled provider	0.927	0.024	120	25	1.013	0.026	0.879	0.975
4+ ANC visits	0.776	0.062	120	25	1.605	0.080	0.652	0.899
8+ ANC visits	0.094	0.031	120	25	1.174	0.334	0.031	0.157
Took any iron-containing supplements	0.876	0.035	120	25	1.152	0.040	0.806	0.946
Delivered in a health facility (live births)	0.934	0.050	131	27	2.366	0.054	0.833	1.000
Delivered by C-section (live births)	0.106	0.033	131	27	1.201	0.313	0.040	0.173
Delivered by a skilled provider (live births)	1.000	0.000	131	27	na	0.000	1.000	1.000
Women with postnatal check during first 2 days	0.895	0.045	120	25	1.606	0.051	0.804	0.986
Newborns with postnatal check during first 2 days	0.888	0.031	120	25	1.069	0.035	0.826	0.950
Any problem accessing health care	0.288	0.031	815	157	1.976	0.109	0.225	0.350
Ever had vaccination card	0.938	0.032	66	14	0.930	0.034	0.873	1.000
Received BCG vaccination	0.973	0.020	66	14	1.022	0.020	0.933	1.000
Received DPT-HepB-Hib vaccination (3 doses)	0.940	0.028	66	14	0.980	0.030	0.885	0.996
Received pneumococcal vaccination (2 doses)	0.422	0.056	66	14	0.937	0.134	0.309	0.535
Received 12 vaccinations according to national schedule (12–23 months)	0.809	0.059	66	14	1.261	0.073	0.691	0.926
Received MR/MMR-1 vaccination (24–35 months)	0.911	0.051	68	13	1.494	0.056	0.809	1.014
Received all basic vaccinations (24–35 months)	0.854	0.061	68	13	1.437	0.072	0.731	0.976
Received 15 vaccinations according to national schedule (24–35 months)	0.701	0.078	68	13	1.418	0.111	0.545	0.857
Sought treatment for diarrhea	0.312	0.085	32	7	1.049	0.273	0.142	0.482
Treated with ORS	0.574	0.092	32	7	1.003	0.160	0.390	0.758
Height-for-age (−3 SD)	0.040	0.010	369	76	0.979	0.238	0.021	0.060
Height-for-age (−2 SD)	0.148	0.019	369	76	1.001	0.128	0.110	0.186
Weight-for-height (−2 SD)	0.023	0.007	370	77	0.952	0.315	0.009	0.037
Weight-for-height (+2 SD)	0.029	0.008	370	77	0.992	0.291	0.012	0.046
Weight-for-age (−2 SD)	0.046	0.010	373	77	0.927	0.220	0.025	0.066
Exclusive breastfeeding	0.567	0.109	30	6	1.172	0.191	0.350	0.784
Minimum dietary diversity (children 6–23 months)	0.320	0.045	89	18	0.915	0.142	0.229	0.411

Continued...

Table B.6—*Continued*

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
Prevalence of anemia (children 6–59 months) (hemoglobin <11.0 g/dl)	0.551	0.029	335	69	1.040	0.052	0.493	0.608
Body mass index (BMI) <18.5	0.086	0.011	627	120	1.000	0.130	0.064	0.109
Body mass index (BMI) ≥25	0.391	0.025	627	120	1.300	0.065	0.341	0.442
Body mass index-for-age (−2 SD)	0.038	0.017	127	25	0.996	0.446	0.004	0.072
Body mass index-for-age (+1 SD)	0.091	0.031	127	25	1.213	0.343	0.028	0.153
Minimum dietary diversity (women 15–49)	0.921	0.012	815	157	1.305	0.013	0.896	0.946
Prevalence of any anemia (women 15–49)	0.424	0.018	806	156	1.034	0.042	0.388	0.460
Child had fever in last 2 weeks	0.060	0.015	354	71	1.165	0.240	0.031	0.089
Child had blood taken from finger/heel	0.136	0.101	21	4	1.387	0.744	0.000	0.338
Discriminatory attitudes towards people with HIV	0.499	0.030	739	141	1.626	0.060	0.440	0.559
Condom use at last sex	0.587	0.168	12	2	1.118	0.286	0.251	0.922
Ever tested for HIV and received results of last test	0.366	0.024	815	157	1.407	0.065	0.318	0.413
Mobile phone ownership	0.827	0.032	815	157	2.432	0.039	0.763	0.892
Have and use a bank account or mobile phone for financial transactions	0.220	0.026	815	157	1.766	0.117	0.168	0.271
Participate in decision making (all three decisions)	0.567	0.027	560	109	1.268	0.047	0.514	0.620
Agree with at least one specified reason a husband is justified in wife beating	0.286	0.027	815	157	1.713	0.095	0.232	0.341
Make own decisions about sexual relations, contraceptive use, and reproductive care	0.582	0.026	560	109	1.265	0.045	0.529	0.635
Experienced physical violence since age 15 by any perpetrator	0.160	0.031	618	101	2.074	0.192	0.099	0.222
Experienced sexual violence by any perpetrator ever	0.018	0.006	618	101	1.211	0.360	0.005	0.031
Experienced sexual violence by any non-intimate partner	0.000	0.000	618	101	na	na	0.000	0.000
Experienced physical/sexual/emotional violence by current or most recent husband or intimate partner ever	0.192	0.038	497	78	2.127	0.197	0.116	0.267
Experienced physical/sexual violence by current or most recent husband or intimate partner ever	0.181	0.038	497	78	2.187	0.209	0.105	0.257
Experienced physical/sexual/emotional violence by any husband or intimate partner in the last 12 months	0.151	0.032	497	78	2.000	0.213	0.087	0.216

na = not applicable

Table B.7 Sampling errors: Sughd sample, Tajikistan DHS 2023

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
HOUSEHOLDS AND POPULATION								
Primary reliance on clean fuels and technology	0.172	0.019	9,223	12,706	1.975	0.108	0.135	0.210
Births registered with civil authority	0.984	0.005	1,047	1,455	1.043	0.005	0.974	0.994
At least basic drinking water service	0.950	0.012	9,223	12,706	2.227	0.013	0.925	0.975
Water available when needed	0.440	0.019	9,223	12,706	1.412	0.042	0.403	0.477
At least basic sanitation service	0.972	0.007	9,223	12,706	1.722	0.008	0.957	0.987
Using open defecation	0.000	0.000	9,223	12,706	na	na	0.000	0.000
Using a handwashing facility with soap and water	0.714	0.020	9,191	12,655	1.707	0.028	0.674	0.754
WOMEN								
No education	0.012	0.004	2,117	2,780	1.672	0.328	0.004	0.020
Secondary education or higher	0.970	0.008	2,117	2,780	2.205	0.008	0.953	0.986
Literacy	0.963	0.008	2,117	2,780	1.882	0.008	0.948	0.979
Use of the internet in last 12 months	0.543	0.030	2,117	2,780	2.784	0.056	0.482	0.603
Current tobacco use	0.012	0.003	2,117	2,780	1.356	0.265	0.006	0.019
Total fertility rate (3 years)	3.414	0.138	5,978	7,862	1.223	0.041	3.137	3.691
Total abortion rate (3 years)	0.170	0.051	5,978	7,862	1.324	0.303	0.067	0.273
Currently pregnant	0.072	0.006	2,117	2,780	1.148	0.090	0.059	0.085
Mean number of children ever born to women age 40–49	3.085	0.074	448	580	1.190	0.024	2.937	3.232
Median birth interval	34.440	1.141	759	1,010	1.371	0.033	32.158	36.723
Want no more children	0.488	0.015	1,627	2,160	1.186	0.030	0.458	0.517
Ideal number of children	3.438	0.034	2,082	2,733	1.470	0.010	3.371	3.506
Total wanted fertility rate (3 years)	3.268	0.135	5,978	7,862	1.189	0.041	2.998	3.539
Currently using any contraceptive method	0.403	0.016	1,627	2,160	1.311	0.040	0.371	0.435
Currently using any modern method	0.332	0.014	1,627	2,160	1.174	0.041	0.305	0.360
Currently using pill	0.024	0.004	1,627	2,160	1.151	0.182	0.015	0.033
Currently using injectables	0.012	0.003	1,627	2,160	1.023	0.230	0.007	0.018
Currently using male condom	0.050	0.007	1,627	2,160	1.261	0.136	0.037	0.064
Currently using any traditional method	0.070	0.008	1,627	2,160	1.226	0.111	0.055	0.086
Unmet need for spacing	0.086	0.009	1,627	2,160	1.291	0.104	0.068	0.104
Unmet need for limiting	0.078	0.008	1,627	2,160	1.144	0.098	0.063	0.093
Unmet need total	0.164	0.011	1,627	2,160	1.209	0.068	0.142	0.186
Demand satisfied by modern methods (married women)	0.587	0.017	938	1,224	1.056	0.029	0.552	0.621
Demand satisfied by modern methods (all women)	0.589	0.017	944	1,231	1.069	0.029	0.554	0.623
Participation in decision making about family planning	0.702	0.015	1,627	2,160	1.360	0.022	0.671	0.733
Not exposed to any of the eight media sources	0.369	0.029	2,117	2,780	2.746	0.078	0.311	0.426
Neonatal mortality (0–9 years)	11.954	3.126	2,170	2,867	1.107	0.262	5.702	18.207
Postneonatal mortality (0–9 years)	8.511	2.101	2,159	2,854	1.084	0.247	4.310	12.712
Infant mortality (0–9 years)	20.465	3.532	2,173	2,871	1.053	0.173	13.402	27.529
Child mortality (0–9 years)	2.622	1.139	2,103	2,776	0.997	0.434	0.345	4.899
Under-5 mortality (0–9 years)	23.034	3.978	2,175	2,873	1.133	0.173	15.077	30.990
Perinatal mortality rate	18.268	4.889	1,075	1,427	1.150	0.268	8.491	28.045
Stillbirth rate	5.414	2.179	1,075	1,427	0.981	0.403	1.055	9.773
Early neonatal mortality rate	12.924	4.655	1,069	1,419	1.263	0.360	3.614	22.234
Received ANC from a skilled provider	0.903	0.027	437	576	1.881	0.030	0.849	0.956
4+ ANC visits	0.842	0.029	437	576	1.642	0.034	0.784	0.899
8+ ANC visits	0.306	0.031	437	576	1.402	0.101	0.244	0.368
Took any iron-containing supplements	0.717	0.026	437	576	1.206	0.036	0.665	0.769
Delivered in a health facility (live births)	0.984	0.006	470	620	1.029	0.006	0.972	0.996
Delivered by C-section (live births)	0.092	0.015	470	620	1.061	0.166	0.061	0.122
Delivered by a skilled provider (live births)	0.991	0.005	470	620	1.050	0.005	0.981	1.000
Women with postnatal check during first 2 days	0.941	0.013	437	576	1.164	0.014	0.914	0.967
Newborns with postnatal check during first 2 days	0.835	0.023	437	576	1.295	0.028	0.789	0.881
Any problem accessing health care	0.196	0.017	2,117	2,780	1.949	0.086	0.162	0.229
Ever had vaccination card	0.995	0.005	211	278	1.061	0.005	0.984	1.000
Received BCG vaccination	0.984	0.009	211	278	1.053	0.009	0.966	1.000
Received DPT-HepB-Hib vaccination (3 doses)	0.925	0.019	211	278	1.054	0.021	0.887	0.963
Received pneumococcal vaccination (2 doses)	0.567	0.043	211	278	1.233	0.076	0.481	0.653
Received 12 vaccinations according to national schedule (12–23 months)	0.858	0.027	211	278	1.071	0.031	0.805	0.911
Received MR/MMR-1 vaccination (24–35 months)	0.894	0.025	186	247	1.129	0.028	0.843	0.945
Received all basic vaccinations (24–35 months)	0.810	0.035	186	247	1.226	0.043	0.739	0.880
Received 15 vaccinations according to national schedule (24–35 months)	0.739	0.042	186	247	1.307	0.057	0.655	0.823
Sought treatment for diarrhea	0.607	0.045	206	269	1.266	0.073	0.518	0.696
Treated with ORS	0.710	0.046	206	269	1.417	0.065	0.617	0.802
Height-for-age (−3 SD)	0.028	0.005	1,040	1,440	0.962	0.170	0.019	0.038
Height-for-age (−2 SD)	0.138	0.012	1,040	1,440	1.047	0.084	0.115	0.161
Weight-for-height (−2 SD)	0.030	0.005	1,037	1,434	1.054	0.182	0.019	0.041
Weight-for-height (+2 SD)	0.060	0.009	1,037	1,434	1.103	0.149	0.042	0.078
Weight-for-age (−2 SD)	0.041	0.008	1,041	1,441	1.118	0.182	0.026	0.056
Exclusive breastfeeding	0.510	0.045	135	182	1.038	0.088	0.421	0.600
Minimum dietary diversity (children 6–23 months)	0.464	0.035	297	387	1.214	0.076	0.394	0.535

Continued...

Table B.7—*Continued*

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
Prevalence of anemia (children 6–59 months) (hemoglobin <11.0 g/dl)	0.328	0.025	889	1,225	1.507	0.076	0.278	0.378
Body mass index (BMI) <18.5	0.026	0.004	1,573	2,067	0.944	0.145	0.019	0.034
Body mass index (BMI) ≥25	0.492	0.014	1,573	2,067	1.091	0.028	0.464	0.519
Body mass index-for-age (−2 SD)	0.003	0.003	336	433	0.917	0.999	0.000	0.008
Body mass index-for-age (+1 SD)	0.144	0.022	336	433	1.141	0.152	0.101	0.188
Minimum dietary diversity (women 15–49)	0.945	0.006	2,117	2,780	1.288	0.007	0.933	0.958
Prevalence of any anemia (women 15–49)	0.358	0.013	2,088	2,737	1.261	0.037	0.331	0.384
Child had fever in last 2 weeks	0.172	0.019	1,043	1,381	1.559	0.112	0.134	0.211
Child had blood taken from finger/heel	0.176	0.032	175	238	1.119	0.182	0.112	0.240
Discriminatory attitudes towards people with HIV	0.781	0.015	1,803	2,326	1.532	0.019	0.751	0.811
Condom use at last sex	0.000	na	2	2	na	na	0.000	na
Ever tested for HIV and received results of last test	0.213	0.017	2,117	2,780	1.929	0.081	0.179	0.248
Mobile phone ownership	0.705	0.025	2,117	2,780	2.491	0.035	0.656	0.755
Have and use a bank account or mobile phone for financial transactions	0.178	0.018	2,117	2,780	2.103	0.098	0.143	0.213
Participate in decision making (all three decisions)	0.206	0.022	1,627	2,160	2.153	0.105	0.163	0.249
Agree with at least one specified reason a husband is justified in wife beating	0.514	0.015	2,117	2,780	1.380	0.029	0.484	0.544
Make own decisions about sexual relations, contraceptive use, and reproductive care	0.379	0.022	1,627	2,160	1.802	0.057	0.336	0.423
Experienced physical violence since age 15 by any perpetrator	0.089	0.010	1,420	1,810	1.303	0.111	0.069	0.108
Experienced sexual violence by any perpetrator ever	0.021	0.005	1,420	1,810	1.319	0.237	0.011	0.031
Experienced sexual violence by any non-intimate partner	0.004	0.003	1,420	1,810	1.462	0.587	0.000	0.009
Experienced physical/sexual/emotional violence by current or most recent husband or intimate partner ever	0.134	0.013	1,236	1,492	1.337	0.097	0.108	0.160
Experienced physical/sexual violence by current or most recent husband or intimate partner ever	0.102	0.011	1,236	1,492	1.230	0.104	0.081	0.124
Experienced physical/sexual/emotional violence by any husband or intimate partner in the last 12 months	0.095	0.012	1,236	1,492	1.394	0.122	0.072	0.119

na = not applicable

Table B.8 Sampling errors: DRS sample, Tajikistan DHS 2023

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
HOUSEHOLDS AND POPULATION								
Primary reliance on clean fuels and technology	0.105	0.017	9,817	10,677	2.161	0.160	0.072	0.139
Births registered with civil authority	0.940	0.009	1,172	1,269	1.075	0.010	0.922	0.957
At least basic drinking water service	0.962	0.014	9,817	10,677	2.612	0.015	0.934	0.990
Water available when needed	0.599	0.028	9,817	10,677	2.196	0.048	0.542	0.655
At least basic sanitation service	0.964	0.009	9,817	10,677	1.797	0.009	0.947	0.981
Using open defecation	0.000	0.000	9,817	10,677	na	na	0.000	0.000
Using a handwashing facility with soap and water	0.837	0.022	9,797	10,659	2.221	0.027	0.792	0.881
WOMEN								
No education	0.018	0.004	2,277	2,356	1.256	0.193	0.011	0.025
Secondary education or higher	0.942	0.007	2,277	2,356	1.377	0.007	0.928	0.955
Literacy	0.961	0.006	2,277	2,356	1.456	0.006	0.950	0.973
Use of the internet in last 12 months	0.378	0.020	2,277	2,356	1.990	0.054	0.337	0.418
Current tobacco use	0.030	0.005	2,277	2,356	1.450	0.174	0.019	0.040
Total fertility rate (3 years)	3.512	0.148	6,392	6,614	1.409	0.042	3.217	3.807
Total abortion rate (3 years)	0.211	0.039	6,392	6,614	1.171	0.184	0.133	0.289
Currently pregnant	0.069	0.006	2,277	2,356	1.132	0.087	0.057	0.081
Mean number of children ever born to women age 40–49	3.473	0.128	509	525	1.585	0.037	3.218	3.729
Median birth interval	32.472	1.061	865	893	1.053	0.033	30.351	34.594
Want no more children	0.310	0.019	1,709	1,782	1.670	0.060	0.273	0.347
Ideal number of children	3.465	0.053	2,228	2,307	1.716	0.015	3.359	3.571
Total wanted fertility rate (3 years)	3.242	0.139	6,392	6,614	1.387	0.043	2.964	3.520
Currently using any contraceptive method	0.233	0.019	1,709	1,782	1.893	0.083	0.194	0.272
Currently using any modern method	0.219	0.018	1,709	1,782	1.808	0.083	0.182	0.255
Currently using pill	0.020	0.004	1,709	1,782	1.128	0.191	0.012	0.028
Currently using injectables	0.009	0.003	1,709	1,782	1.318	0.334	0.003	0.015
Currently using male condom	0.023	0.004	1,709	1,782	1.186	0.187	0.014	0.032
Currently using any traditional method	0.015	0.004	1,709	1,782	1.243	0.246	0.007	0.022
Unmet need for spacing	0.180	0.012	1,709	1,782	1.300	0.067	0.156	0.204
Unmet need for limiting	0.078	0.007	1,709	1,782	1.109	0.092	0.064	0.092
Unmet need total	0.258	0.011	1,709	1,782	1.021	0.042	0.236	0.279
Demand satisfied by modern methods (married women)	0.445	0.025	843	875	1.478	0.057	0.394	0.496
Demand satisfied by modern methods (all women)	0.447	0.025	848	879	1.484	0.057	0.396	0.498
Participation in decision making about family planning	0.764	0.019	1,709	1,782	1.852	0.025	0.726	0.802
Not exposed to any of the eight media sources	0.687	0.023	2,277	2,356	2.409	0.034	0.640	0.734
Neonatal mortality (0–9 years)	10.631	2.500	2,545	2,640	1.159	0.235	5.631	15.631
Postneonatal mortality (0–9 years)	13.068	2.163	2,552	2,644	0.943	0.166	8.742	17.394
Infant mortality (0–9 years)	23.699	3.167	2,546	2,641	0.993	0.134	17.365	30.032
Child mortality (0–9 years)	5.773	1.601	2,535	2,625	1.052	0.277	2.571	8.975
Under-5 mortality (0–9 years)	29.335	3.613	2,547	2,642	0.991	0.123	22.109	36.561
Perinatal mortality rate	11.132	3.592	1,207	1,249	1.200	0.323	3.949	18.316
Stillbirth rate	4.411	1.754	1,207	1,249	0.922	0.398	0.902	7.920
Early neonatal mortality rate	6.751	2.558	1,201	1,244	1.090	0.379	1.635	11.867
Received ANC from a skilled provider	0.819	0.023	455	472	1.262	0.028	0.773	0.865
4+ ANC visits	0.594	0.028	455	472	1.218	0.047	0.538	0.651
8+ ANC visits	0.066	0.013	455	472	1.126	0.200	0.039	0.092
Took any iron-containing supplements	0.738	0.022	455	472	1.073	0.030	0.693	0.782
Delivered in a health facility (live births)	0.874	0.020	484	501	1.315	0.023	0.834	0.914
Delivered by C-section (live births)	0.099	0.016	484	501	1.132	0.159	0.067	0.130
Delivered by a skilled provider (live births)	0.934	0.014	484	501	1.245	0.015	0.906	0.962
Women with postnatal check during first 2 days	0.886	0.015	455	472	1.040	0.017	0.855	0.917
Newborns with postnatal check during first 2 days	0.860	0.019	455	472	1.166	0.022	0.822	0.898
Any problem accessing health care	0.151	0.014	2,277	2,356	1.834	0.091	0.124	0.179
Ever had vaccination card	0.950	0.015	228	234	1.060	0.016	0.919	0.981
Received BCG vaccination	0.913	0.021	228	234	1.124	0.023	0.871	0.955
Received DPT-HepB-Hib vaccination (3 doses)	0.656	0.042	228	234	1.326	0.064	0.572	0.740
Received pneumococcal vaccination (2 doses)	0.212	0.035	228	234	1.301	0.167	0.141	0.283
Received 12 vaccinations according to national schedule (12–23 months)	0.569	0.047	228	234	1.419	0.083	0.475	0.663
Received MR/MMR-1 vaccination (24–35 months)	0.675	0.043	228	239	1.373	0.064	0.590	0.761
Received all basic vaccinations (24–35 months)	0.513	0.048	228	239	1.437	0.093	0.417	0.609
Received 15 vaccinations according to national schedule (24–35 months)	0.435	0.051	228	239	1.541	0.117	0.333	0.536
Sought treatment for diarrhea	0.578	0.040	158	166	0.940	0.069	0.498	0.658
Treated with ORS	0.489	0.047	158	166	1.117	0.096	0.395	0.583
Height-for-age (−3 SD)	0.038	0.007	1,141	1,239	1.220	0.182	0.024	0.052
Height-for-age (−2 SD)	0.139	0.015	1,141	1,239	1.367	0.105	0.110	0.169
Weight-for-height (−2 SD)	0.046	0.008	1,144	1,243	1.096	0.166	0.031	0.061
Weight-for-height (+2 SD)	0.034	0.007	1,144	1,243	1.208	0.193	0.021	0.047
Weight-for-age (−2 SD)	0.058	0.009	1,152	1,252	1.214	0.148	0.041	0.075
Exclusive breastfeeding	0.385	0.048	126	130	1.108	0.125	0.288	0.481
Minimum dietary diversity (children 6–23 months)	0.230	0.025	322	334	1.062	0.108	0.180	0.280

Continued...

Table B.8—*Continued*

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
Prevalence of anemia (children 6–59 months) (hemoglobin <11.0 g/dl)	0.415	0.022	1,002	1,092	1.316	0.053	0.370	0.459
Body mass index (BMI) <18.5	0.027	0.005	1,678	1,742	1.142	0.168	0.018	0.036
Body mass index (BMI) ≥25	0.547	0.014	1,678	1,742	1.152	0.026	0.519	0.575
Body mass index-for-age (−2 SD)	0.016	0.007	372	385	1.008	0.408	0.003	0.029
Body mass index-for-age (+1 SD)	0.117	0.019	372	385	1.126	0.160	0.080	0.155
Minimum dietary diversity (women 15–49)	0.845	0.014	2,277	2,356	1.798	0.016	0.818	0.872
Prevalence of any anemia (women 15–49)	0.408	0.015	2,242	2,328	1.487	0.038	0.377	0.439
Child had fever in last 2 weeks	0.078	0.011	1,173	1,215	1.328	0.143	0.056	0.101
Child had blood taken from finger/heel	0.061	0.026	91	95	1.039	0.427	0.009	0.114
Discriminatory attitudes towards people with HIV	0.771	0.018	1,434	1,463	1.586	0.023	0.736	0.807
Condom use at last sex	0.000	0.000	2	2	na	na	0.000	0.000
Ever tested for HIV and received results of last test	0.147	0.015	2,277	2,356	1.983	0.100	0.117	0.176
Mobile phone ownership	0.574	0.019	2,277	2,356	1.822	0.033	0.537	0.612
Have and use a bank account or mobile phone for financial transactions	0.132	0.015	2,277	2,356	2.165	0.117	0.101	0.163
Participate in decision making (all three decisions)	0.515	0.031	1,709	1,782	2.600	0.061	0.452	0.578
Agree with at least one specified reason a husband is justified in wife beating	0.290	0.015	2,277	2,356	1.574	0.052	0.260	0.320
Make own decisions about sexual relations, contraceptive use, and reproductive care	0.318	0.025	1,709	1,782	2.254	0.080	0.267	0.369
Experienced physical violence since age 15 by any perpetrator	0.083	0.008	1,421	1,533	1.095	0.096	0.067	0.099
Experienced sexual violence by any perpetrator ever	0.013	0.004	1,421	1,533	1.280	0.291	0.006	0.021
Experienced sexual violence by any non-intimate partner	0.000	0.000	1,421	1,533	na	na	0.000	0.000
Experienced physical/sexual/emotional violence by current or most recent husband or intimate partner ever	0.100	0.009	1,239	1,259	1.085	0.093	0.081	0.118
Experienced physical/sexual violence by current or most recent husband or intimate partner ever	0.083	0.009	1,239	1,259	1.177	0.111	0.065	0.102
Experienced physical/sexual/emotional violence by any husband or intimate partner in the last 12 months	0.081	0.009	1,239	1,259	1.128	0.108	0.063	0.098

na = not applicable

Table B.9 Sampling errors: Khatlon sample, Tajikistan DHS 2023

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
HOUSEHOLDS AND POPULATION								
Primary reliance on clean fuels and technology	0.087	0.012	11,857	16,596	2.021	0.141	0.063	0.112
Births registered with civil authority	0.974	0.006	1,412	2,022	1.110	0.006	0.962	0.985
At least basic drinking water service	0.874	0.030	11,857	16,596	3.795	0.034	0.815	0.933
Water available when needed	0.478	0.028	11,857	16,596	2.352	0.059	0.421	0.534
At least basic sanitation service	0.982	0.005	11,857	16,596	1.589	0.005	0.973	0.992
Using open defecation	0.000	0.000	11,857	16,596	na	na	0.000	0.000
Using a handwashing facility with soap and water	0.773	0.028	11,817	16,529	2.784	0.036	0.718	0.828
WOMEN								
No education	0.014	0.003	2,664	3,509	1.248	0.200	0.009	0.020
Secondary education or higher	0.949	0.006	2,664	3,509	1.396	0.006	0.937	0.961
Literacy	0.959	0.005	2,664	3,509	1.392	0.006	0.948	0.970
Use of the internet in last 12 months	0.340	0.022	2,664	3,509	2.366	0.064	0.296	0.383
Current tobacco use	0.023	0.004	2,664	3,509	1.487	0.190	0.014	0.031
Total fertility rate (3 years)	3.560	0.151	7,526	9,893	1.516	0.042	3.258	3.862
Total abortion rate (3 years)	0.183	0.040	7,526	9,893	1.398	0.215	0.104	0.263
Currently pregnant	0.089	0.007	2,664	3,509	1.183	0.073	0.076	0.103
Mean number of children ever born to women age 40–49	3.362	0.082	505	655	1.181	0.024	3.198	3.526
Median birth interval	30.916	0.953	1,042	1,430	1.316	0.031	29.011	32.822
Want no more children	0.327	0.014	1,982	2,634	1.325	0.043	0.299	0.355
Ideal number of children	3.459	0.039	2,590	3,420	1.562	0.011	3.380	3.537
Total wanted fertility rate (3 years)	3.209	0.128	7,526	9,893	1.400	0.040	2.954	3.464
Currently using any contraceptive method	0.266	0.016	1,982	2,634	1.589	0.059	0.235	0.298
Currently using any modern method	0.252	0.015	1,982	2,634	1.564	0.061	0.221	0.282
Currently using pill	0.016	0.004	1,982	2,634	1.426	0.252	0.008	0.024
Currently using injectables	0.011	0.004	1,982	2,634	1.634	0.345	0.003	0.019
Currently using male condom	0.023	0.004	1,982	2,634	1.152	0.169	0.015	0.030
Currently using any traditional method	0.015	0.003	1,982	2,634	1.043	0.191	0.009	0.020
Unmet need for spacing	0.124	0.010	1,982	2,634	1.342	0.080	0.104	0.144
Unmet need for limiting	0.080	0.008	1,982	2,634	1.291	0.098	0.064	0.096
Unmet need total	0.204	0.013	1,982	2,634	1.384	0.061	0.179	0.229
Demand satisfied by modern methods (married women)	0.535	0.025	917	1,239	1.551	0.047	0.484	0.586
Demand satisfied by modern methods (all women)	0.532	0.026	927	1,249	1.577	0.048	0.481	0.583
Participation in decision making about family planning	0.509	0.019	1,982	2,634	1.708	0.038	0.471	0.548
Not exposed to any of the eight media sources	0.629	0.030	2,664	3,509	3.176	0.047	0.570	0.689
Neonatal mortality (0–9 years)	4.269	1.201	2,992	4,076	1.025	0.281	1.868	6.670
Postneonatal mortality (0–9 years)	10.273	2.334	3,000	4,085	1.293	0.227	5.605	14.941
Infant mortality (0–9 years)	14.542	2.742	2,993	4,078	1.230	0.189	9.059	20.026
Child mortality (0–9 years)	4.982	1.469	2,890	3,949	1.138	0.295	2.045	7.920
Under-5 mortality (0–9 years)	19.452	3.381	2,995	4,080	1.333	0.174	12.689	26.215
Perinatal mortality rate	8.539	2.796	1,471	1,995	1.187	0.327	2.946	14.131
Stillbirth rate	5.906	2.459	1,471	1,995	1.253	0.416	0.988	10.825
Early neonatal mortality rate	2.648	1.356	1,462	1,983	1.025	0.512	0.000	5.360
Received ANC from a skilled provider	0.713	0.030	592	785	1.630	0.043	0.652	0.774
4+ ANC visits	0.426	0.035	592	785	1.722	0.082	0.356	0.496
8+ ANC visits	0.037	0.011	592	785	1.356	0.284	0.016	0.058
Took any iron-containing supplements	0.720	0.021	592	785	1.115	0.029	0.679	0.762
Delivered in a health facility (live births)	0.954	0.014	633	844	1.660	0.014	0.927	0.982
Delivered by C-section (live births)	0.119	0.016	633	844	1.178	0.133	0.088	0.151
Delivered by a skilled provider (live births)	0.985	0.006	633	844	1.337	0.007	0.972	0.998
Women with postnatal check during first 2 days	0.879	0.015	592	785	1.130	0.017	0.848	0.909
Newborns with postnatal check during first 2 days	0.884	0.016	592	785	1.209	0.018	0.852	0.916
Any problem accessing health care	0.126	0.018	2,664	3,509	2.739	0.140	0.090	0.161
Ever had vaccination card	0.962	0.013	280	382	1.162	0.014	0.936	0.988
Received BCG vaccination	0.897	0.023	280	382	1.290	0.026	0.851	0.943
Received DPT-HepB-Hib vaccination (3 doses)	0.830	0.028	280	382	1.249	0.034	0.775	0.886
Received pneumococcal vaccination (2 doses)	0.312	0.046	280	382	1.666	0.146	0.221	0.403
Received 12 vaccinations according to national schedule (12–23 months)	0.781	0.032	280	382	1.286	0.040	0.718	0.844
Received MR/MMR-1 vaccination (24–35 months)	0.790	0.038	260	357	1.530	0.048	0.714	0.866
Received all basic vaccinations (24–35 months)	0.751	0.043	260	357	1.621	0.057	0.666	0.836
Received 15 vaccinations according to national schedule (24–35 months)	0.672	0.045	260	357	1.597	0.068	0.581	0.763
Sought treatment for diarrhea	0.652	0.041	201	272	1.190	0.063	0.570	0.735
Treated with ORS	0.527	0.043	201	272	1.178	0.082	0.441	0.614
Height-for-age (−3 SD)	0.054	0.009	1,409	2,004	1.391	0.165	0.036	0.072
Height-for-age (−2 SD)	0.147	0.014	1,409	2,004	1.462	0.097	0.118	0.175
Weight-for-height (−2 SD)	0.111	0.014	1,407	2,000	1.550	0.123	0.084	0.139
Weight-for-height (+2 SD)	0.047	0.008	1,407	2,000	1.256	0.162	0.032	0.063
Weight-for-age (−2 SD)	0.061	0.009	1,430	2,035	1.375	0.150	0.043	0.080
Exclusive breastfeeding	0.377	0.043	168	225	1.153	0.115	0.290	0.463
Minimum dietary diversity (children 6–23 months)	0.182	0.022	420	555	1.181	0.123	0.137	0.226

Continued...

Table B.9—*Continued*

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
Prevalence of anemia (children 6–59 months) (hemoglobin <11.0 g/dl)	0.339	0.022	1,237	1,771	1.601	0.064	0.296	0.382
Body mass index (BMI) <18.5	0.043	0.006	1,947	2,547	1.330	0.142	0.031	0.055
Body mass index (BMI) ≥25	0.465	0.015	1,947	2,547	1.344	0.033	0.435	0.496
Body mass index-for-age (−2 SD)	0.010	0.005	410	555	0.975	0.491	0.000	0.019
Body mass index-for-age (+1 SD)	0.099	0.016	410	555	1.111	0.166	0.066	0.132
Minimum dietary diversity (women 15–49)	0.824	0.017	2,664	3,509	2.298	0.021	0.790	0.858
Prevalence of any anemia (women 15–49)	0.340	0.016	2,629	3,469	1.712	0.047	0.308	0.371
Child had fever in last 2 weeks	0.078	0.010	1,435	1,946	1.408	0.131	0.058	0.098
Child had blood taken from finger/heel	0.332	0.047	118	152	1.071	0.141	0.238	0.425
Discriminatory attitudes towards people with HIV	0.736	0.023	2,056	2,707	2.331	0.031	0.691	0.782
Condom use at last sex	0.000	0.000	5	4	na	na	0.000	0.000
Ever tested for HIV and received results of last test	0.164	0.019	2,664	3,509	2.616	0.114	0.127	0.202
Mobile phone ownership	0.579	0.018	2,664	3,509	1.866	0.031	0.543	0.615
Have and use a bank account or mobile phone for financial transactions	0.076	0.008	2,664	3,509	1.600	0.108	0.059	0.092
Participate in decision making (all three decisions)	0.304	0.015	1,982	2,634	1.454	0.049	0.274	0.334
Agree with at least one specified reason a husband is justified in wife beating	0.635	0.024	2,664	3,509	2.520	0.037	0.588	0.682
Make own decisions about sexual relations, contraceptive use, and reproductive care	0.231	0.015	1,982	2,634	1.547	0.063	0.202	0.261
Experienced physical violence since age 15 by any perpetrator	0.180	0.023	1,652	2,301	2.452	0.129	0.133	0.226
Experienced sexual violence by any perpetrator ever	0.022	0.006	1,652	2,301	1.543	0.254	0.011	0.033
Experienced sexual violence by any non-intimate partner	0.000	0.000	1,652	2,301	na	na	0.000	0.000
Experienced physical/sexual/emotional violence by current or most recent husband or intimate partner ever	0.241	0.030	1,444	1,884	2.645	0.124	0.181	0.301
Experienced physical/sexual violence by current or most recent husband or intimate partner ever	0.217	0.027	1,444	1,884	2.520	0.126	0.163	0.272
Experienced physical/sexual/emotional violence by any husband or intimate partner in the last 12 months	0.222	0.029	1,444	1,884	2.689	0.133	0.163	0.280

na = not applicable

Table B.10 Sampling errors: FTF sample, Tajikistan DHS 2023

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
HOUSEHOLDS AND POPULATION								
Primary reliance on clean fuels and technology	0.038	0.010	6,093	9,209	1.752	0.266	0.018	0.059
Births registered with civil authority	0.979	0.006	823	1,268	1.081	0.006	0.967	0.991
At least basic drinking water service	0.791	0.048	6,093	9,209	3.527	0.061	0.696	0.887
Water available when needed	0.556	0.038	6,093	9,209	2.218	0.067	0.481	0.631
At least basic sanitation service	0.988	0.005	6,093	9,209	1.446	0.005	0.979	0.998
Using open defecation	0.000	0.000	6,093	9,209	na	na	0.000	0.000
Using a handwashing facility with soap and water	0.699	0.039	6,059	9,153	2.525	0.056	0.620	0.777
WOMEN								
No education	0.018	0.004	1,354	1,937	1.204	0.239	0.010	0.027
Secondary education or higher	0.940	0.008	1,354	1,937	1.306	0.009	0.924	0.957
Literacy	0.949	0.008	1,354	1,937	1.356	0.009	0.933	0.965
Use of the internet in last 12 months	0.345	0.025	1,354	1,937	1.960	0.073	0.294	0.396
Current tobacco use	0.017	0.005	1,354	1,937	1.316	0.270	0.008	0.027
Total fertility rate (3 years)	3.820	0.192	3,809	5,431	1.442	0.050	3.436	4.205
Total abortion rate (3 years)	0.139	0.044	3,809	5,431	1.320	0.318	0.051	0.228
Currently pregnant	0.083	0.007	1,354	1,937	0.920	0.083	0.069	0.097
Mean number of children ever born to women age 40–49	3.530	0.121	241	338	1.176	0.034	3.288	3.773
Median birth interval	30.636	1.188	603	890	1.340	0.039	28.261	33.012
Want no more children	0.292	0.016	1,032	1,482	1.132	0.055	0.260	0.324
Ideal number of children	3.309	0.049	1,323	1,889	1.363	0.015	3.212	3.407
Total wanted fertility rate (3 years)	3.412	0.155	3,809	5,431	1.291	0.046	3.101	3.723
Currently using any contraceptive method	0.260	0.020	1,032	1,482	1.493	0.078	0.220	0.301
Currently using any modern method	0.242	0.019	1,032	1,482	1.405	0.077	0.205	0.280
Currently using pill	0.024	0.007	1,032	1,482	1.357	0.268	0.011	0.037
Currently using injectables	0.011	0.004	1,032	1,482	1.301	0.386	0.002	0.019
Currently using male condom	0.013	0.004	1,032	1,482	1.138	0.305	0.005	0.021
Currently using any traditional method	0.018	0.004	1,032	1,482	1.054	0.241	0.009	0.027
Unmet need for spacing	0.134	0.012	1,032	1,482	1.175	0.093	0.109	0.159
Unmet need for limiting	0.079	0.010	1,032	1,482	1.162	0.124	0.059	0.098
Unmet need total	0.213	0.016	1,032	1,482	1.278	0.077	0.180	0.245
Demand satisfied by modern methods (married women)	0.512	0.031	474	701	1.364	0.060	0.450	0.574
Demand satisfied by modern methods (all women)	0.512	0.031	477	704	1.382	0.061	0.449	0.574
Participation in decision making about family planning	0.531	0.027	1,032	1,482	1.743	0.051	0.477	0.585
Not exposed to any of the eight media sources	0.727	0.021	1,354	1,937	1.727	0.029	0.686	0.769
Neonatal mortality (0–9 years)	3.314	1.412	1,642	2,394	1.009	0.426	0.490	6.137
Postneonatal mortality (0–9 years)	11.060	3.190	1,645	2,398	1.246	0.288	4.681	17.439
Infant mortality (0–9 years)	14.374	3.730	1,643	2,396	1.285	0.259	6.915	21.833
Child mortality (0–9 years)	3.774	1.903	1,573	2,292	1.173	0.504	0.000	7.580
Under-5 mortality (0–9 years)	18.094	4.360	1,643	2,396	1.324	0.241	9.374	26.814
Perinatal mortality rate	2.420	1.712	838	1,226	1.024	0.707	0.000	5.843
Stillbirth rate	1.293	1.290	838	1,226	1.054	0.998	0.000	3.873
Early neonatal mortality rate	1.129	1.129	837	1,225	0.984	1.000	0.000	3.386
Received ANC from a skilled provider	0.797	0.037	326	471	1.656	0.047	0.722	0.871
4+ ANC visits	0.469	0.047	326	471	1.691	0.100	0.375	0.563
8+ ANC visits	0.051	0.016	326	471	1.344	0.323	0.018	0.083
Took any iron-containing supplements	0.740	0.028	326	471	1.148	0.038	0.684	0.796
Delivered in a health facility (live births)	0.981	0.009	349	507	1.208	0.009	0.963	0.999
Delivered by C-section (live births)	0.106	0.021	349	507	1.230	0.194	0.065	0.147
Delivered by a skilled provider (live births)	0.988	0.008	349	507	1.340	0.008	0.972	1.000
Women with postnatal check during first 2 days	0.864	0.021	326	471	1.087	0.024	0.822	0.905
Newborns with postnatal check during first 2 days	0.877	0.021	326	471	1.130	0.023	0.836	0.919
Any problem accessing health care	0.170	0.023	1,354	1,937	2.208	0.133	0.124	0.215
Ever had vaccination card	0.950	0.020	151	225	1.160	0.021	0.909	0.990
Received BCG vaccination	0.907	0.030	151	225	1.272	0.033	0.847	0.966
Received DPT-HepB-Hib vaccination (3 doses)	0.849	0.033	151	225	1.161	0.039	0.782	0.915
Received pneumococcal vaccination (2 doses)	0.455	0.059	151	225	1.466	0.130	0.337	0.573
Received 12 vaccinations according to national schedule (12–23 months)	0.811	0.037	151	225	1.192	0.046	0.736	0.885
Received MR/MMR-1 vaccination (24–35 months)	0.819	0.047	144	211	1.493	0.058	0.725	0.913
Received all basic vaccinations (24–35 months)	0.790	0.053	144	211	1.603	0.068	0.683	0.897
Received 15 vaccinations according to national schedule (24–35 months)	0.699	0.063	144	211	1.677	0.090	0.573	0.825
Sought treatment for diarrhea	0.740	0.046	97	139	1.036	0.062	0.648	0.832
Treated with ORS	0.583	0.060	97	139	1.152	0.103	0.463	0.703
Height-for-age (−3 SD)	0.061	0.012	811	1,244	1.427	0.204	0.036	0.086
Height-for-age (−2 SD)	0.144	0.018	811	1,244	1.424	0.123	0.109	0.180
Weight-for-height (−2 SD)	0.138	0.021	810	1,241	1.588	0.149	0.096	0.179
Weight-for-height (+2 SD)	0.047	0.011	810	1,241	1.376	0.225	0.026	0.068
Weight-for-age (−2 SD)	0.067	0.013	827	1,270	1.437	0.196	0.041	0.093
Exclusive breastfeeding	0.435	0.056	98	143	1.111	0.129	0.323	0.547
Minimum dietary diversity (children 6–23 months)	0.202	0.032	228	328	1.204	0.159	0.138	0.266

Continued...

Table B.10—*Continued*

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: Lower (R-2SE)	Confidence limits: Upper (R+2SE)
Prevalence of anemia (children 6–59 months) (hemoglobin <11.0 g/dl)	0.329	0.025	721	1,111	1.419	0.075	0.280	0.379
Body mass index (BMI) <18.5	0.034	0.008	999	1,416	1.368	0.231	0.018	0.050
Body mass index (BMI) ≥25	0.451	0.021	999	1,416	1.343	0.047	0.409	0.493
Body mass index-for-age (−2 SD)	0.005	0.005	213	315	1.059	1.014	0.000	0.015
Body mass index-for-age (+1 SD)	0.103	0.023	213	315	1.120	0.227	0.057	0.150
Minimum dietary diversity (women 15–49)	0.830	0.022	1,354	1,937	2.122	0.026	0.786	0.873
Prevalence of any anemia (women 15–49)	0.294	0.022	1,347	1,931	1.756	0.074	0.251	0.338
Child had fever in last 2 weeks	0.058	0.009	824	1,206	1.161	0.162	0.039	0.076
Child had blood taken from finger/heel	0.416	0.085	51	69	1.195	0.203	0.247	0.586
Discriminatory attitudes towards people with HIV	0.760	0.021	1,035	1,466	1.550	0.027	0.719	0.801
Condom use at last sex	0.000	na	1	1	na	na	0.000	na
Ever tested for HIV and received results of last test	0.124	0.022	1,354	1,937	2.431	0.176	0.081	0.168
Mobile phone ownership	0.517	0.022	1,354	1,937	1.607	0.042	0.473	0.560
Have and use a bank account or mobile phone for financial transactions	0.072	0.009	1,354	1,937	1.250	0.122	0.054	0.090
Participate in decision making (all three decisions)	0.279	0.018	1,032	1,482	1.311	0.066	0.242	0.315
Agree with at least one specified reason a husband is justified in wife beating	0.609	0.026	1,354	1,937	1.991	0.043	0.556	0.662
Make own decisions about sexual relations, contraceptive use, and reproductive care	0.190	0.016	1,032	1,482	1.291	0.083	0.159	0.222
Experienced physical violence since age 15 by any perpetrator	0.122	0.021	869	1,293	1.866	0.170	0.080	0.163
Experienced sexual violence by any perpetrator ever	0.003	0.002	869	1,293	1.096	0.729	0.000	0.006
Experienced sexual violence by any non-intimate partner	0.000	0.000	869	1,293	na	na	0.000	0.000
Experienced physical/sexual/emotional violence by current or most recent husband or intimate partner ever	0.160	0.025	768	1,072	1.864	0.155	0.110	0.209
Experienced physical/sexual violence by current or most recent husband or intimate partner ever	0.149	0.025	768	1,072	1.915	0.166	0.099	0.198
Experienced physical/sexual/emotional violence by any husband or intimate partner in the last 12 months	0.142	0.026	768	1,072	2.022	0.180	0.091	0.194

na = not applicable

DATA QUALITY TABLES

Appendix C

Table C.1 Household age distribution

Single-year age distribution of the de facto household population by sex (weighted), Tajikistan DHS 2023

	Male		Female			Male		Female	
Age	Number	Percent	Number	Percent	Age	Number	Percent	Number	Percent
0	643	3.3	568	2.5	42	149	0.8	252	1.1
1	518	2.6	529	2.4	43	180	0.9	227	1.0
2	572	2.9	459	2.0	44	140	0.7	235	1.0
3	561	2.8	496	2.2	45	173	0.9	221	1.0
4	530	2.7	529	2.4	46	157	0.8	142	0.6
5	581	2.9	526	2.3	47	160	0.8	192	0.9
6	575	2.9	557	2.5	48	179	0.9	207	0.9
7	602	3.0	556	2.5	49	142	0.7	192	0.9
8	632	3.2	661	2.9	50	151	0.8	306	1.4
9	611	3.1	561	2.5	51	177	0.9	242	1.1
10	572	2.9	446	2.0	52	165	0.8	216	1.0
11	551	2.8	504	2.2	53	204	1.0	244	1.1
12	524	2.6	486	2.2	54	164	0.8	195	0.9
13	557	2.8	523	2.3	55	177	0.9	190	0.8
14	469	2.4	488	2.2	56	164	0.8	168	0.8
15	469	2.4	421	1.9	57	141	0.7	226	1.0
16	412	2.1	367	1.6	58	161	0.8	211	0.9
17	395	2.0	347	1.5	59	167	0.8	203	0.9
18	267	1.3	329	1.5	60	190	1.0	197	0.9
19	197	1.0	347	1.5	61	146	0.7	171	0.8
20	206	1.0	339	1.5	62	152	0.8	177	0.8
21	218	1.1	288	1.3	63	168	0.8	157	0.7
22	192	1.0	369	1.6	64	138	0.7	148	0.7
23	211	1.1	374	1.7	65	97	0.5	171	0.8
24	197	1.0	339	1.5	66	104	0.5	107	0.5
25	183	0.9	326	1.5	67	106	0.5	92	0.4
26	206	1.0	305	1.4	68	81	0.4	97	0.4
27	246	1.2	316	1.4	69	91	0.5	77	0.3
28	243	1.2	337	1.5	70	72	0.4	79	0.4
29	239	1.2	348	1.5	71	72	0.4	95	0.4
30	231	1.2	330	1.5	72	79	0.4	60	0.3
31	238	1.2	317	1.4	73	76	0.4	53	0.2
32	238	1.2	328	1.5	74	41	0.2	31	0.1
33	217	1.1	331	1.5	75	29	0.1	28	0.1
34	234	1.2	334	1.5	76	32	0.2	40	0.2
35	222	1.1	277	1.2	77	28	0.1	20	0.1
36	220	1.1	304	1.4	78	11	0.1	18	0.1
37	237	1.2	304	1.4	79	12	0.1	10	0.0
38	213	1.1	299	1.3	80+	138	0.7	136	0.6
39	176	0.9	315	1.4	Don't know	0	0.0	2	0.0
40	166	0.8	226	1.0					
41	184	0.9	212	0.9	Total	19,771	100.0	22,449	100.0

Note: The de facto population includes all residents and nonresidents who stayed in the household the night before the interview.

Figure C.1 Population pyramid

Percent distribution of the household population

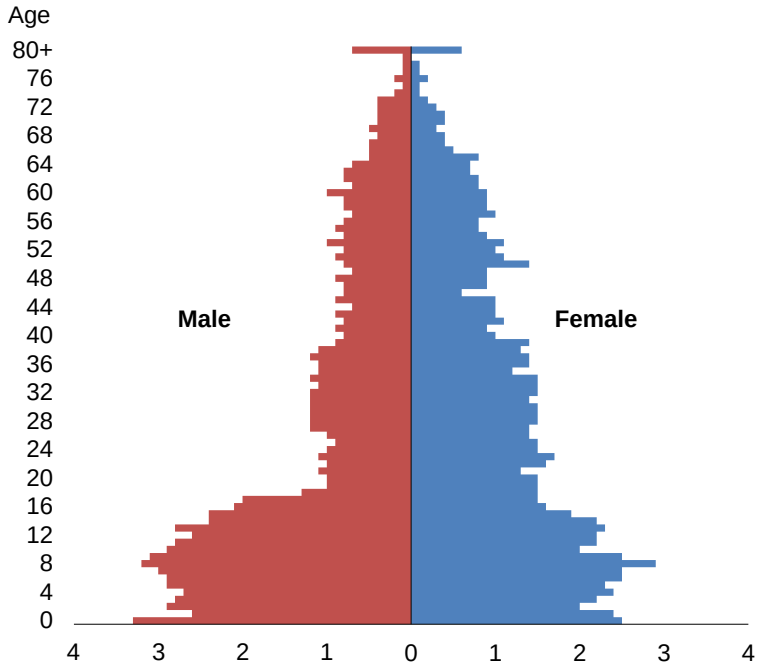


Table C.2 Age distribution of eligible and interviewed women

De facto household population of women age 10–54, number and percent distribution of interviewed women age 15–49, and percentage of eligible women who were interviewed (weighted), by 5-year age groups, Tajikistan DHS 2023

Age group	Household population of women age 10–54	Interviewed women age 15–49		Percentage of eligible women interviewed
		Number	Percentage	
10–14	2,447	na	na	na
15–19	1,810	1,798	17.4	99.4
20–24	1,709	1,694	16.4	99.2
25–29	1,631	1,624	15.7	99.5
30–34	1,639	1,634	15.8	99.7
35–39	1,499	1,492	14.4	99.6
40–44	1,152	1,151	11.1	99.9
45–49	953	951	9.2	99.9
50–54	1,204	na	na	na
15–49	10,393	10,345	100.0	99.5
Ratios				
10–14 to 15–19	135	na	na	na
50–54 to 45–49	126	na	na	na

Note: The de facto population includes all residents and nonresidents who stayed in the household the night before the interview. Weights for both the household population of women and interviewed women are household weights. Age is based on the Household Questionnaire.
na = not applicable

Table C.3 Age displacement at age 14/15

Number of women age 12–18 listed in the household schedule by single-year age and age ratio 15/14, according to region (weighted), Tajikistan DHS 2023

	Age							Total age	Age ratio (age 15/
Region	12	13	14	15	16	17	18	12–18	age 14)
Dushanbe	113	104	105	84	77	82	74	639	80.7
GBAO	18	14	18	14	14	12	6	97	79.3
Sughd	278	267	239	243	187	187	179	1,580	101.7
DRS	231	288	235	235	217	201	190	1,597	99.8
Khatlon	387	417	369	322	308	306	233	2,343	87.2
Total	1,026	1,091	966	899	803	789	683	6,256	93.0

Table C.4 Age displacement at age 49/50

Number of women age 47–53 listed in the household schedule by single-year age and age ratio 50/49, according to region (weighted), Tajikistan DHS 2023

	Age							Total age	Age ratio (age 50/
Region	47	48	49	50	51	52	53	47–53	age 49)
Dushanbe	40	36	32	46	52	50	43	298	145.6
GBAO	10	9	7	10	13	12	12	72	143.1
Sughd	108	140	122	130	136	133	149	917	106.9
DRS	106	116	96	146	92	82	105	743	152.7
Khatlon	140	123	111	180	164	141	177	1,035	162.6
Total	404	424	367	512	455	417	486	3,066	139.7

Table C.5 Pregnancy outcomes by years preceding the survey

Number of pregnancy outcomes, percentage with year and month of birth given or end of pregnancy given, sex ratio at birth of live births, and ratio by years preceding the survey, according to living children, dead children, stillbirths, miscarriages/abortions, and total pregnancy outcomes (weighted), Tajikistan DHS 2023

	Number of pregnancy outcomes					Percentage with year and month of birth given or end of pregnancy given					Sex ratio at birth of live births[1]			Ratio of years preceding survey[2]				
Years preceding survey	Living children	Dead children	Stillbirths	Miscar-riages/ abortions	Total	Living children	Dead children	Stillbirths	Miscar-riages/ abortions	Total	Living children	Dead children	Total	Living children	Dead children	Stillbirths	Miscar-riages/ abortions	Total
0	1,170	10	7	275	1,461	100.0	100.0	100.0	99.0	99.8	112.0	1,405.2	113.6	na	na	na	na	na
1	1,006	27	4	191	1,228	100.0	100.0	100.0	96.9	99.5	103.9	47.7	101.9	94.6	179.2	51.2	88.7	94.3
2	958	20	8	157	1,143	100.0	100.0	100.0	96.6	99.5	124.0	170.5	124.8	95.6	72.1	164.7	91.2	94.7
3	998	29	6	152	1,185	100.0	98.0	100.0	98.0	99.7	108.5	116.2	108.7	102.0	121.6	85.7	97.8	101.7
4	1,000	28	6	155	1,188	100.0	100.0	100.0	95.9	99.5	102.4	124.7	103.0	96.9	121.8	72.4	95.7	97.1
5	1,065	16	10	171	1,263	100.0	100.0	100.0	90.3	98.7	109.1	52.4	107.9	105.2	66.9	94.8	101.7	103.9
6	1,025	21	16	181	1,243	99.7	99.1	100.0	90.0	98.3	102.7	145.9	103.4	96.4	101.1	169.3	119.1	99.8
7	1,062	26	8	133	1,229	99.9	95.7	77.6	91.0	98.7	109.3	255.5	111.4	95.5	88.9	70.7	89.3	94.4
8	1,199	36	8	117	1,360	99.7	94.8	100.0	90.9	98.8	94.8	291.4	97.7	112.5	147.1	136.7	89.1	110.8
9	1,070	24	3	130	1,227	99.7	100.0	100.0	88.3	98.5	111.6	119.6	111.8	102.5	73.6	47.8	110.6	102.2
0–4	5,132	114	30	929	6,206	100.0	99.5	100.0	97.5	99.6	109.8	118.2	110.0	na	na	na	na	na
5–9	5,420	124	45	733	6,322	99.8	97.4	95.9	90.1	98.6	105.0	164.0	106.1	na	na	na	na	na
10–14	4,417	129	36	420	5,003	99.9	92.5	96.0	89.4	98.8	110.4	128.5	110.8	na	na	na	na	na
15–19	2,821	98	20	219	3,158	99.7	95.8	91.0	86.5	98.6	114.4	132.4	115.0	na	na	na	na	na
20+	2,470	165	10	128	2,772	99.7	94.7	100.0	88.5	98.9	122.9	148.8	124.4	na	na	na	na	na
All	20,260	630	141	2,429	23,461	99.9	95.8	96.4	92.4	99.0	110.8	138.5	111.5	na	na	na	na	na

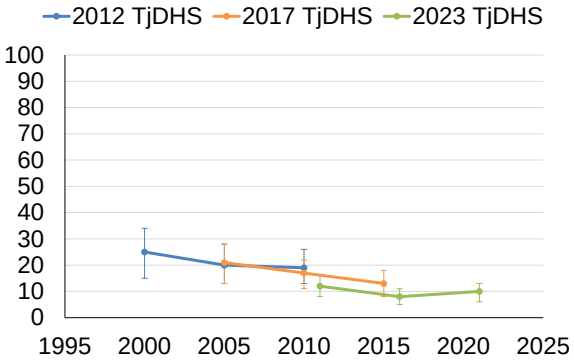
na = not applicable

[1] $(B_m/B_f)x100$, where B_m and B_f are the numbers of male and female births, respectively

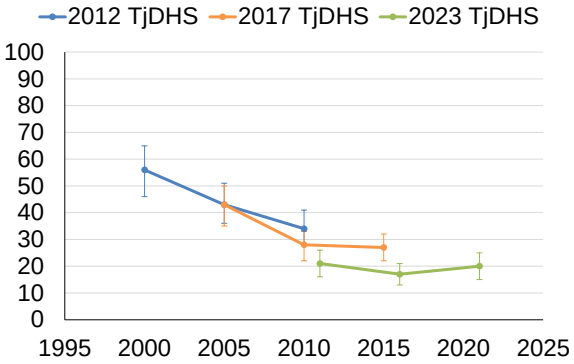
[2] $[2P_x/(P_{x-1}+P_{x+1})]x100$, where P_x is the number of pregnancy outcomes in year x preceding the survey

Figure C.2 Five-year mortality rates

Neonatal mortality rates for the 5-year periods preceding the 2023, 2017, and 2012 TjDHS



Infant mortality rates for the 5-year periods preceding the 2023, 2017, and 2012 TjDHS



Under-5 mortality rates for the 5-year periods preceding the 2023, 2017, and 2012 TjDHS

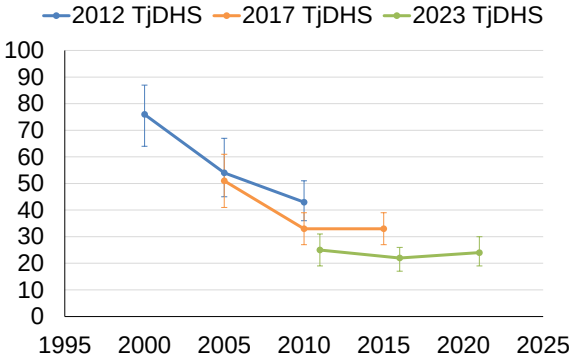


Table C.6 Completeness of reporting

Percentage of observations missing information for selected demographic and health questions (weighted), Tajikistan DHS 2023

Subject	Percentage with information missing	Number of cases
Date of live birth or stillbirth (past 15 years)		
Missing day only	0.21	15,448
Missing month but year reported	0.20	15,448
Missing year	0.01	15,448
Date of live birth or stillbirth (past 5 years)		
Missing day only	0.07	5,276
Missing month but year reported	0.01	5,276
Date of birth of women		
Missing month but year reported	0.00	9,879
Diarrhea in past 2 weeks	0.19	5,107
Anthropometry of children		
Height	1.59	5,437
Weight	1.59	5,437
Height or weight	1.59	5,437
Anthropometry of women		
Height	1.01	10,391
Weight	1.01	10,391
Height or weight	1.01	10.391
Anemia		
Children	3.93	4,813
Women	3.52	10,391

Table C.7 Standardization exercise results from anthropometry training

Trainees' precision and accuracy for height measurements taken during the standardization exercise for anthropometry, Tajikistan DHS 2023

	Standardization exercise[1]		Restandardization exercise[1]	
Measurer	Trainees' precision[2]	Trainees' accuracy[2]	Trainees' precision[2]	Trainees' accuracy[2]
Trainee 1	0.34	0.58		
Trainee 2	0.23	0.35		
Trainee 3	0.28	0.52		
Trainee 4	0.41	0.34		
Trainee 5	0.32	0.25		
Trainee 6	0.32	0.51		
Trainee 7	0.16	0.53		
Trainee 8	0.66	0.47	0.40	0.48
Trainee 9	0.46	0.40		
Trainee 10	0.37	0.35		
Trainee 11	0.64	0.32	0.51	0.34
Trainee 12	0.51	0.50		
Trainee 13	0.22	0.35		
Trainee 14	0.25	0.27		
Trainee 15	0.65	0.49	0.26	0.42
Trainee 16	0.43	0.21		
Trainee 17	0.37	0.28		
Trainee 18	0.31	0.29		
Trainee 19	0.67	0.46	0.26	0.38
Trainee 20	0.63	0.36	0.30	1.18
Trainee 21	2.03	1.05	0.48	0.43
Trainee 22	0.53	0.48		
Trainee 23	1.31	0.84	0.17	0.37
Trainee 24	0.64	0.40	0.32	0.33
Trainee 25	1.24	0.35	0.37	0.62
Trainee 26	0.60	0.58		
Trainee 27	0.45	0.33		
Trainee 28	0.26	0.32		
Trainee 29	0.37	0.58		
Trainee 30	2.48	0.90	0.39	0.39
Trainee 31	0.41	0.40		
Trainee 32	0.40	0.36		
Trainee 33	0.57	0.73		
Trainee 34	0.52	0.55		
Trainee 35	0.54	0.30		
Average	0.59	0.46	0.35	0.49

na = not applicable

[1] Ten children were measured twice for each of the four standardization/restandardization exercises.

[2] Trainees' precision and accuracy are defined in terms of a technical error of measurement (TEM), which is calculated as $\sqrt{\sum(D2)/(2N)}$, where D is the difference in height and N is the number of repeat measurements. An acceptable TEM according to WHO-UNICEF is a TEM of <0.6 cm for precision and <0.8 cm for accuracy.

Table C.8 Height and weight data completeness and quality for children

Among children under age 5 who were eligible for anthropometry, percentage with incomplete or missing data for height and weight; among children with complete data on height and age, percentage with implausible data for height-for-age; among children with complete data on weight and height, percentage with implausible data for weight-for-height; among children with complete data on weight and age, percentage with implausible data for weight-for-age; and among all children under age 5 who were eligible for anthropometry, percentage with valid data for height-for-age, weight-for-height, and weight-for-age, according to background characteristics (unweighted), Tajikistan DHS 2023

	Percentage with data incomplete or missing for:			Percentage with implausible data for:					Percentage with valid data for[7]:			
Background characteristic	Height[1]	Weight[2]	Number of children	Height-for-age[3]	Number of children with complete height and age[4]	Weight-for-height[5]	Number of children with complete weight and height	Weight-for-age[6]	Number of children with complete weight and age[4]	Height-for-age	Weight-for-height	Weight-for-age	Number of children
Age in months													
<6	2.7	2.7	595	2.1	579	1.2	579	0.3	579	95.3	96.1	97.0	595
6–11	2.6	2.6	544	0.6	530	0.8	530	0.2	530	96.9	96.7	97.2	544
12–23	1.8	1.8	981	1.0	963	0.4	963	0.0	963	97.1	97.8	98.2	981
24–35	1.7	1.7	942	0.9	926	0.8	926	0.1	926	97.5	97.6	98.2	942
36–47	0.5	0.5	1,000	0.3	995	0.6	995	0.0	995	99.2	98.9	99.5	1,000
48–59	1.4	1.4	978	0.7	964	1.6	964	0.0	964	97.9	97.0	98.6	978
0–23	2.3	2.3	2,120	1.2	2,072	0.7	2,072	0.1	2,072	96.6	97.0	97.6	2,120
24–59	1.2	1.2	2,920	0.6	2,885	1.0	2,885	0.0	2,885	98.2	97.8	98.8	2,920
Sex													
Male	1.6	1.6	2,634	0.6	2,593	0.8	2,593	0.1	2,593	97.8	97.6	98.3	2,634
Female	1.7	1.7	2,406	1.1	2,364	0.9	2,364	0.0	2,364	97.1	97.4	98.2	2,406
Mother's interview status													
Interviewed	1.4	1.4	4,922	0.9	4,854	0.9	4,854	0.1	4,854	97.7	97.8	98.5	4,922
Not interviewed but in household	19.6	19.6	56	0.0	45	2.2	45	0.0	45	80.4	78.6	80.4	56
Not interviewed and not in the household[8]	6.5	6.5	62	0.0	58	0.0	58	0.0	58	93.5	93.5	93.5	62
Residence													
Urban	2.4	2.4	2,007	0.5	1,959	0.4	1,959	0.0	1,959	97.1	97.2	97.6	2,007
Rural	1.2	1.2	3,033	1.1	2,998	1.2	2,998	0.1	2,998	97.8	97.7	98.7	3,033
Region													
Dushanbe	1.7	1.7	974	0.2	957	0.1	957	0.0	957	98.0	98.2	98.3	974
GBAO	0.5	0.5	375	1.1	373	0.8	373	0.0	373	98.4	98.7	99.5	375
Sughd	1.2	1.2	1,054	0.1	1,041	0.4	1,041	0.0	1,041	98.7	98.4	98.8	1,054
DRS	2.8	2.8	1,187	1.1	1,154	0.9	1,154	0.2	1,154	96.1	96.4	97.1	1,187
Khatlon	1.2	1.2	1,450	1.6	1,432	1.7	1,432	0.1	1,432	97.2	97.0	98.6	1,450
FTF districts	0.2	0.2	826	2.2	824	2.3	824	0.2	824	97.6	97.5	99.5	826
Mother's education[9]													
None/primary	1.5	1.5	1,706	0.9	1,681	0.9	1,681	0.1	1,681	97.7	97.7	98.5	1,706
General basic	1.4	1.4	2,042	0.9	2,013	0.9	2,013	0.1	2,013	97.7	97.6	98.5	2,042
General secondary	1.3	1.3	463	0.2	457	1.3	457	0.0	457	98.5	97.4	98.7	463
Professional primary/middle	2.4	2.4	760	1.2	742	0.4	742	0.1	742	96.4	97.2	97.5	760
Higher	14.3	14.3	7	0.0	6	0.0	6	0.0	6	85.7	85.7	85.7	7
Measurer													
Measurer 1, team 1	1.9	1.9	107	0.0	105	1.9	105	0.0	105	98.1	96.3	98.1	107
Measurer 2, team 1	0.0	0.0	67	4.5	67	1.5	67	0.0	67	95.5	98.5	100.0	67
Measurer 1, team 2	0.0	0.0	108	0.9	108	0.0	108	0.0	108	99.1	100.0	100.0	108
Measurer 2, team 2	0.0	0.0	93	0.0	93	0.0	93	0.0	93	100.0	100.0	100.0	93
Measurer 1, team 3	0.5	0.5	194	0.0	193	0.0	193	0.0	193	99.5	99.5	99.5	194
Measurer 2, team 3	0.0	0.0	111	0.0	111	0.9	111	0.0	111	100.0	99.1	100.0	111
Measurer 1, team 4	0.8	0.8	247	0.4	245	0.0	245	0.0	245	98.8	99.2	99.2	247
Measurer 2, team 4	0.0	0.0	27	0.0	27	0.0	27	0.0	27	100.0	100.0	100.0	27
Measurer 1, team 5	5.3	5.3	247	0.4	234	0.0	234	0.0	234	94.3	94.7	94.7	247
Measurer 2, team 5	0.7	0.7	148	0.0	147	0.0	147	0.0	147	99.3	99.3	99.3	148
Measurer 1, team 6	1.7	1.7	412	0.0	405	0.2	405	0.0	405	98.3	98.1	98.3	412
Measurer 2, team 6	0.0	0.0	106	0.0	106	0.0	106	0.0	106	100.0	100.0	100.0	106
Measurer 1, team 7	1.8	1.8	327	1.9	321	2.2	321	0.3	321	96.3	96.0	97.9	327
Measurer 2, team 7	0.0	0.0	3	0.0	3	0.0	3	0.0	3	100.0	100.0	100.0	3
Measurer 1, team 8	1.1	1.1	280	2.2	277	2.2	277	0.4	277	96.8	96.8	98.6	280
Measurer 2, team 8	0.6	0.6	167	4.8	166	6.0	166	0.0	166	94.6	93.4	99.4	167
Measurer 1, team 9	0.0	0.0	100	2.0	100	1.0	100	0.0	100	98.0	99.0	100.0	100
Measurer 2, team 9	0.0	0.0	54	1.9	54	0.0	54	0.0	54	98.1	100.0	100.0	54

Continued…

Table C.8—*Continued*

Background characteristic	Percentage with data incomplete or missing for:			Percentage with implausible data for:						Percentage with valid data for[7]:			
	Height[1]	Weight[2]	Number of children	Height-for-age[3]	Number of children with complete height and age[4]	Weight-for-height[5]	Number of children with complete weight and height	Weight-for-age[6]	Number of children with complete weight and age[4]	Height-for-age	Weight-for-height	Weight-for-age	Number of children
Measurer 1, team 10	1.3	1.3	223	0.9	220	0.5	220	0.0	220	97.8	98.2	98.7	223
Measurer 2, team 10	2.4	2.4	253	0.8	247	0.8	247	0.0	247	96.8	96.8	97.6	253
Measurer 1, team 11	7.6	7.6	145	4.5	134	3.0	134	0.0	134	88.3	89.7	92.4	145
Measurer 2, team 11	2.1	2.1	47	4.3	46	2.2	46	2.2	46	93.6	95.7	95.7	47
Measurer 1, team 12	2.1	2.1	341	0.0	334	0.3	334	0.3	334	97.9	97.7	97.7	341
Measurer 2, team 12	0.0	0.0	173	0.6	173	0.6	173	0.0	173	99.4	99.4	100.0	173
Measurer 1, team 13	2.2	2.2	267	0.4	261	0.4	261	0.0	261	97.4	97.4	97.8	267
Measurer 2, team 13	1.6	1.6	62	0.0	61	1.6	61	0.0	61	98.4	96.8	98.4	62
Measurer 1, team 14	0.5	0.5	193	0.0	192	0.0	192	0.0	192	99.5	99.5	99.5	193
Measurer 2, team 14	2.0	2.0	150	0.0	147	0.7	147	0.0	147	98.0	97.3	98.0	150
Measurer 1, team 15	0.9	0.9	230	0.0	228	0.0	228	0.0	228	99.1	99.1	99.1	230
Measurer 2, team 15	0.0	0.0	152	0.0	152	0.7	152	0.0	152	100.0	99.3	100.0	152
Missing	100.0	100.0	6	-	0	-	0	-	0	0.0	0.0	0.0	6
Total	1.6	1.6	5,040	0.9	4,957	0.9	4,957	0.1	4,957	97.5	97.5	98.3	5,040

[1] Child's height in centimeters is missing, child was not present, measurement of child was refused, and "other" result codes
[2] Child's weight in kilograms is missing, child was not present, measurement of child was refused, and "other" result codes
[3] Implausible cases for height-for-age are defined as more than 6 standard deviations (SD) above or below the standard population median (*z* scores) based on the WHO Child Growth Standards among children with complete height and month/year of birth data.
[4] Complete age is calculated from month and year of birth.
[5] Implausible cases for weight-for-height are defined as more than 5 SD above or below the standard population median (*z* scores) based on the WHO Child Growth Standards among children with complete weight and height data.
[6] Implausible cases for weight-for-age are defined as more than 5 SD above or 6 SD below the standard population median (*z* scores) based on the WHO Child Growth Standards among children with complete weight and month/year of birth data.
[7] No missing data, incomplete data, or implausible data
[8] Includes children whose mothers are deceased
[9] For women who are not interviewed, information is taken from the Household Questionnaire. Excludes children whose mothers are not listed in the Household Questionnaire

Table C.9 Height measurements from random subsample of measured children

Differences in first height measurement and second height measurement among children under age 5 randomly selected and remeasured, according to region and measurer (unweighted), Tajikistan DHS 2023

Region and measurer	Median difference in height measure-ments[1]	Percentage of height measure-ments with a difference >1 cm	Number of children randomly selected and remeasured
Region			
Dushanbe	0.154	4.2	144
GBAO	0.116	2.5	79
Sughd	0.119	4.0	151
DRS	0.198	18.3	142
Khatlon	0.131	18.7	171
FTF districts	0.119	14.3	84
Measurer			
Measurer 1, team 1	0.063	5.3	19
Measurer 2, team 1	0.100	5.3	19
Measurer 1, team 2	0.075	0.0	24
Measurer 2, team 2	0.191	0.0	17
Measurer 1, team 3	0.192	6.5	31
Measurer 2, team 3	0.250	16.7	18
Measurer 1, team 4	0.105	2.4	42
Measurer 2, team 4	*	*	3
Measurer 1, team 5	0.168	0.0	32
Measurer 2, team 5	0.170	0.0	18
Measurer 1, team 6	0.090	15.8	38
Measurer 2, team 6	0.000	10.0	10
Measurer 1, team 7	0.092	16.7	42
Measurer 2, team 7	*	*	2
Measurer 1, team 8	0.225	25.8	31
Measurer 2, team 8	0.100	6.3	16
Measurer 1, team 9	0.188	28.0	25
Measurer 2, team 9	*	*	7
Measurer 1, team 10	0.129	26.1	23
Measurer 2, team 10	0.000	22.7	22
Measurer 1, team 11	0.217	16.7	36
Measurer 2, team 11	*	*	9
Measurer 1, team 12	0.221	14.7	34
Measurer 2, team 12	0.264	16.7	18
Measurer 1, team 13	0.115	2.4	42
Measurer 2, team 13	*	*	9
Measurer 1, team 14	0.000	0.0	24
Measurer 2, team 14	0.000	0.0	24
Measurer 1, team 15	0.313	12.9	31
Measurer 2, team 15	0.243	4.8	21
Total	0.144	10.5	687

Note: An asterisk indicates that a figure is based on fewer than 10 children, which is the minimum number of children needed to calculate the technical error of measurement.

[1] Median absolute difference between measurers' first and second height measurements in centimeters

Table C.10 Interference in height and weight measurements of children

Among children under age 5 measured for height or weight, percentage for whom hairstyle or ornamentation interfered with height measurement and percentage who were not minimally dressed or who wore heavy permanent ornaments during weight measurement, according to background characteristics (unweighted), Tajikistan DHS 2023

Background characteristic	Percentage of children for whom hairstyle or ornamentation interfered with height measurement	Percentage of children who were not minimally dressed or who wore heavy permanent ornaments during weight measurement	Number of children
Age in months			
<6	1.8	5.9	595
6–11	3.5	6.1	544
12–23	3.2	5.0	981
24–35	3.4	5.3	942
36–47	2.8	3.7	1,000
48–59	3.1	4.4	978
0–23	2.9	5.5	2,120
24–59	3.1	4.5	2,920
Sex			
Male	2.6	4.9	2,634
Female	3.4	4.9	2,406
Residence			
Urban	1.7	5.6	2,007
Rural	3.8	4.4	3,033
Region			
Dushanbe	1.2	5.6	974
GBAO	0.8	1.9	375
Sughd	1.3	11.5	1,054
DRS	7.0	4.4	1,187
Khatlon	2.7	0.8	1,450
FTF districts	3.1	0.8	826
Measurer			
Measurer 1, team 1	0.9	2.8	107
Measurer 2, team 1	1.5	4.5	67
Measurer 1, team 2	0.9	0.0	108
Measurer 2, team 2	0.0	1.1	93
Measurer 1, team 3	1.0	0.0	194
Measurer 2, team 3	0.0	0.9	111
Measurer 1, team 4	0.8	0.0	247
Measurer 2, team 4	7.4	0.0	27
Measurer 1, team 5	2.4	13.0	247
Measurer 2, team 5	0.0	14.9	148
Measurer 1, team 6	1.2	0.2	412
Measurer 2, team 6	0.9	0.0	106
Measurer 1, team 7	8.0	1.5	327
Measurer 2, team 7	33.3	0.0	3
Measurer 1, team 8	1.1	0.4	280
Measurer 2, team 8	0.6	0.6	167
Measurer 1, team 9	2.0	3.0	100
Measurer 2, team 9	0.0	1.9	54
Measurer 1, team 10	1.3	0.0	223
Measurer 2, team 10	2.4	0.8	253
Measurer 1, team 11	18.6	0.0	145
Measurer 2, team 11	29.8	2.1	47
Measurer 1, team 12	7.0	9.7	341
Measurer 2, team 12	5.2	9.2	173
Measurer 1, team 13	0.7	0.7	267
Measurer 2, team 13	3.2	4.8	62
Measurer 1, team 14	3.1	0.0	193
Measurer 2, team 14	1.3	0.0	150
Measurer 1, team 15	0.4	25.7	230
Measurer 2, team 15	0.7	37.5	152
Missing	0.0	0.0	6
Total	3.0	4.9	5,040

Table C.11 Interference in height and weight measurements of women

Among women age 15–49 measured for height or weight, percentage for whom hairstyle or ornamentation interfered with height measurement and percentage who were not wearing lightweight clothing or who wore heavy permanent ornaments during weight measurement, according to background characteristics (unweighted), Tajikistan DHS 2023

Background characteristic	Percentage of women for whom hairstyle or ornamentation interfered with height measurement	Percentage of women who were not wearing lightweight clothing or who wore heavy permanent ornaments during weight measurement	Number of women
Age			
15–19	22.6	8.4	1,713
20–29	18.4	6.9	3,075
30–39	15.0	6.4	2,982
40–49	14.5	5.4	2,109
Residence			
Urban	12.5	7.5	4,218
Rural	20.8	6.1	5,661
Region			
Dushanbe	8.7	6.9	2,006
GBAO	3.4	1.6	815
Sughd	6.5	13.7	2,117
DRS	39.2	6.5	2,277
Khatlon	17.8	2.7	2,664
FTF districts	19.5	1.9	1,353
Measurer			
Measurer 1, team 1	3.4	1.5	263
Measurer 2, team 1	0.0	1.2	173
Measurer 1, team 2	5.0	2.7	220
Measurer 2, team 2	6.7	0.6	164
Measurer 1, team 3	7.4	1.2	420
Measurer 2, team 3	5.4	1.1	280
Measurer 1, team 4	3.8	0.9	584
Measurer 2, team 4	3.6	0.0	55
Measurer 1, team 5	16.2	17.1	432
Measurer 2, team 5	14.5	22.2	234
Measurer 1, team 6	2.7	0.5	560
Measurer 2, team 6	4.9	0.0	225
Measurer 1, team 7	45.9	4.7	678
Measurer 2, team 7	66.7	0.0	6
Measurer 1, team 8	4.3	0.3	395
Measurer 2, team 8	2.8	0.0	289
Measurer 1, team 9	18.2	6.2	340
Measurer 2, team 9	26.5	8.8	170
Measurer 1, team 10	4.9	3.1	389
Measurer 2, team 10	9.8	3.9	408
Measurer 1, team 11	90.0	3.8	450
Measurer 2, team 11	89.9	12.4	178
Measurer 1, team 12	31.5	12.1	537
Measurer 2, team 12	31.6	5.2	310
Measurer 1, team 13	15.5	2.1	573
Measurer 2, team 13	13.3	3.3	150
Measurer 1, team 14	2.0	0.6	358
Measurer 2, team 14	3.5	0.6	318
Measurer 1, team 15	0.9	28.1	452
Measurer 2, team 15	2.3	53.0	266
Missing	0.0	0.0	2
Total	17.3	6.7	9,879

Table C.12 Heaping in anthropometric measurements for children (digit preference)

Distribution of weight and height/length measurements by decimal digit recorded (unweighted), Tajikistan DHS 2023

	Weight		Height or length	
Digit	Number	Percent	Number	Percent
0	479	9.6	457	9.1
1	568	11.3	464	9.3
2	549	11.0	667	13.3
3	507	10.1	630	12.6
4	539	10.8	620	12.4
5	583	11.6	606	12.1
6	436	8.7	490	9.8
7	401	8.0	431	8.6
8	497	9.9	378	7.5
9	452	9.0	268	5.3
Total	5,011	100.0	5,011	100.0
Index of dissimilarity[1]	na	4.8	na	10.3

Note: Table includes all children with weight and height/length measurements, regardless of the completeness of date of birth information and cases with implausible data. Both weight and length/height measurements were recorded with one decimal digit.
na = not applicable
[1] The index of dissimilarity is a measure of digit preference calculated as one-half of the sum of absolute differences between the observed and expected percentage. It can be interpreted as the percentage of values that would need to be redistributed in order to achieve a uniform distribution.

Table C.13 Observation of handwashing facility

Percent distribution of handwashing facilities in all households by whether or not they were observed by the interviewers, according to background characteristics (weighted), Tajikistan DHS 2023

	Handwashing facility observed		Handwashing facility not observed				
Background characteristic	Fixed place	Mobile	Not in dwelling, yard, or plot	No permission to see	Other reason	Total	Number of house-holds
Residence							
Urban	95.4	2.4	2.0	0.1	0.1	100.0	2,393
Rural	85.4	9.5	4.8	0.2	0.1	100.0	5,642
Region							
Dushanbe	98.0	1.7	0.0	0.1	0.2	100.0	911
GBAO	99.9	0.1	0.0	0.0	0.0	100.0	180
Sughd	66.2	23.9	9.4	0.2	0.2	100.0	2,322
DRS	99.1	0.8	0.0	0.1	0.1	100.0	1,849
Khatlon	95.9	0.2	3.5	0.3	0.1	100.0	2,773
FTF districts	95.3	0.0	4.0	0.5	0.2	100.0	1,508
Wealth quintile							
Lowest	82.1	10.8	6.3	0.5	0.3	100.0	1,521
Second	85.1	10.0	4.6	0.3	0.0	100.0	1,525
Middle	86.6	8.0	4.9	0.1	0.3	100.0	1,540
Fourth	88.4	7.3	4.3	0.1	0.0	100.0	1,572
Highest	97.5	1.9	0.4	0.0	0.1	100.0	1,876
Total	88.4	7.4	3.9	0.2	0.1	100.0	8,035

Table C.14 School attendance by single year of age

Percent distribution of the de jure population age 4–24 by educational level and grade attended in the current school year (weighted), Tajikistan DHS 2023

Age in years at beginning of school year	Not attending school	Early child-hood educa-tion program	Primary school grade				Lower secondary school (general basic)					Upper secondary school (general secondary)		Profes-sional primary and middle	Univer-sity	Don't know	Total	Number of persons age 4–24
			1	2	3	4	1	2	3	4	5	6	7					
4	94.7	5.0	0.0	0.0	0.0	0.1	0.1	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	1,082
5	93.7	5.0	1.1	0.1	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	1,115
6	77.2	4.2	17.6	0.7	0.0	0.1	0.0	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.1	0.0	100.0	1,107
7	16.1	0.8	66.5	15.8	0.3	0.0	0.2	0.1	0.0	0.2	0.0	0.0	0.0	0.0	0.0	0.0	100.0	1,307
8	2.3	0.1	12.0	66.1	16.8	0.9	0.1	0.1	0.0	0.1	0.0	0.1	0.0	1.4	0.0	0.0	100.0	1,206
9	2.2	0.0	0.4	13.6	66.2	14.7	0.5	0.7	0.2	0.1	0.0	0.3	0.0	1.0	0.1	0.0	100.0	1,087
10	1.6	0.0	0.0	0.8	12.0	64.8	18.7	0.9	0.1	0.0	0.0	0.1	0.4	0.1	0.6	0.0	100.0	1,018
11	2.1	0.0	0.1	0.1	0.9	14.8	64.1	16.2	1.2	0.2	0.1	0.0	0.1	0.0	0.3	0.0	100.0	1,018
12	1.5	0.0	0.1	0.0	0.5	1.2	14.5	65.8	15.5	0.7	0.1	0.1	0.1	0.0	0.0	0.0	100.0	1,046
13	2.0	0.0	0.0	0.1	0.0	0.0	0.6	14.4	64.8	15.9	1.5	0.4	0.1	0.0	0.0	0.1	100.0	1,014
14	1.7	0.0	0.1	0.0	0.0	0.0	0.2	0.7	16.8	61.6	15.7	1.2	0.4	0.0	0.0	1.6	100.0	937
15	3.6	0.0	0.1	0.0	0.0	0.0	0.2	0.2	1.2	14.9	64.4	12.4	1.9	0.8	0.1	0.1	100.0	815
16	10.3	0.0	0.0	0.0	0.0	0.0	0.1	0.2	0.0	1.7	16.8	53.1	12.6	4.2	0.6	0.4	100.0	786
17	34.0	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.3	2.5	13.0	35.8	8.1	5.6	0.0	99.4	709
18	48.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.3	1.0	17.7	9.8	21.3	0.0	100.0	639
19	59.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.0	0.0	5.7	7.8	25.3	0.0	100.0	665
20	65.8	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0	1.7	0.0	4.9	6.3	21.2	0.0	100.0	591
21	67.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	1.2	0.2	6.2	4.9	19.7	0.0	100.0	617
22	77.0	0.1	0.0	0.0	0.0	0.3	0.2	0.0	0.0	0.1	1.7	0.0	6.3	2.3	12.0	0.0	100.0	703
23	82.3	0.0	0.0	0.0	0.0	0.3	0.0	0.1	0.3	0.0	2.5	0.0	6.8	1.9	5.8	0.0	100.0	645
24[a]	83.8	0.0	0.0	0.0	0.0	0.6	0.0	0.0	0.0	0.0	1.9	0.0	4.7	0.8	8.2	0.0	100.0	292

Note: Age at the beginning of the school year is calculated from dates of birth of household members or by rejuvenating household members based on the date of the survey, the date after the start of the school year, and completed age at the time of the survey. Levels and grades refer to the current school year or the most recent school year if data collection was completed between school years.

[a] Those age 25 at the time of the interview who were age 24 at the beginning of the school year are excluded from the table since data on current attendance were collected only for those age 4–24 at the time of the interview.

Table C.15 Vaccination cards photographed

Percentage of children under age 3 reported to have a vaccination card kept at a health facility or a home-based vaccination passport, percentage whose vaccination card was seen by the interviewer, percentage whose vaccination card was photographed or was not photographed by reason, and among children with a vaccination card seen, percentage of cards photographed, according to background characteristics (weighted) Tajikistan DHS 2023

Background characteristic	Percentage of children reported to have a vaccination card	Percentage of children whose vaccination card was seen by interviewer	Percentage of children whose vaccination card was photo-graphed	Percentage of children whose vaccination card was not photo-graphed as permission was not received	Percentage of children whose vaccination card was not photographed for other reasons	Number of children	Among children with a vaccination card seen	
							Percentage of vaccination cards photo-graphed	Number of children
Age in months								
0–11	82.4	75.7	29.9	2.6	1.1	1,170	39.4	886
12–23	88.5	81.9	26.6	2.6	0.6	1,006	32.5	824
24–35	86.3	78.7	22.6	2.2	0.8	958	28.8	754
Residence								
Urban	85.0	78.4	30.5	3.2	1.2	792	38.8	621
Rural	85.7	78.7	25.3	2.2	0.7	2,342	32.2	1,843
Region								
Dushanbe	82.2	76.8	27.6	3.3	1.2	321	35.9	246
GBAO	91.9	89.2	42.2	4.1	0.5	40	47.3	36
Sughd	88.4	83.5	35.3	1.2	0.6	850	42.2	710
DRS	77.6	67.3	27.5	1.2	0.4	732	40.9	493
Khatlon	89.1	82.2	19.1	3.9	1.2	1,192	23.2	980
FTF districts	87.5	81.8	13.7	3.0	0.6	713	16.7	584
Wealth quintile								
Lowest	84.8	79.6	21.7	3.0	1.9	612	27.2	487
Second	87.5	82.3	27.0	2.6	0.8	611	32.8	503
Middle	86.9	77.3	25.2	1.5	0.4	647	32.6	501
Fourth	84.6	76.9	28.3	2.6	0.4	655	36.8	504
Highest	83.9	77.1	30.9	2.8	0.8	608	40.0	469
Total	85.5	78.6	26.6	2.5	0.8	3,134	33.9	2,464

Note: Vaccination cards include cards or records from a health facility, child development cards from a health facility, and home-based vaccination passports, booklets, or other home-based records.

Table C.16 Prevalence of anemia in children based on 2011 WHO guidelines

Percentage of children age 6–59 months classified as having anemia, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Anemia status by hemoglobin level				Number of children age 6–59 months
	Any (<11.0 g/dl)	Mild (10.0–10.9 g/dl)	Moderate (7.0–9.9 g/dl)	Severe (<7.0 g/dl)	
Age in months					
6–11	39.2	25.7	13.5	0.0	545
12–23	42.3	27.5	14.8	0.1	1,025
24–35	33.4	24.3	8.7	0.4	978
36–47	19.7	15.0	4.4	0.2	1,044
48–59	17.1	12.9	4.2	0.0	1,033
6–23	41.3	26.9	14.3	0.0	1,570
24–59	23.2	17.3	5.7	0.2	3,054
Sex					
Male	30.4	20.4	9.7	0.2	2,411
Female	28.2	20.6	7.4	0.1	2,214
Mother's interview status					
Interviewed	29.4	20.6	8.7	0.1	4,545
Not interviewed but in household	(29.4)	(23.3)	(6.2)	(0.0)	34
Not interviewed and not in the household[1]	17.9	7.6	10.2	0.0	46
Residence					
Urban	24.7	16.9	7.8	0.1	1,131
Rural	30.8	21.7	8.9	0.2	3,493
Region					
Dushanbe	19.7	13.5	6.2	0.0	468
GBAO	47.7	22.2	24.2	1.4	69
Sughd	27.3	18.9	8.2	0.1	1,225
DRS	31.5	22.6	8.6	0.3	1,092
Khatlon	31.3	22.2	9.0	0.0	1,771
FTF districts	30.5	22.4	8.1	0.0	1,111
Mother's education[2]					
None/primary	28.8	16.7	12.1	0.0	214
General basic	27.2	18.3	8.7	0.2	1,445
General secondary	31.2	23.5	7.5	0.2	2,049
Professional primary/middle	30.4	19.3	11.1	0.0	393
Higher	27.4	17.6	9.8	0.0	523
Wealth quintile					
Lowest	34.7	22.9	11.6	0.2	935
Second	30.7	22.3	8.2	0.3	966
Middle	31.3	21.6	9.7	0.0	936
Fourth	28.7	22.0	6.5	0.1	919
Highest	20.5	13.3	7.1	0.1	869
Total	29.3	20.5	8.6	0.1	4,624

Note: Table is based on children who stayed in the household on the night before the interview and who were tested for anemia. Prevalence of anemia, based on hemoglobin levels, is adjusted for altitude using formulas in CDC 1998 and cutoffs defined in WHO 2011c. Hemoglobin is measured in grams per deciliter (g/dl) using the HemoCue 201+ device. Figures in parentheses are based on 25–49 unweighted cases.

[1] Includes children whose mothers are deceased

[2] For women who are not interviewed, information is taken from the Household Questionnaire. Excludes children whose mothers are not listed in the Household Questionnaire.

Table C.17 Prevalence of anemia in women based on 2011 WHO guidelines

Percentage of women age 15–49 classified as having anemia, according to background characteristics, Tajikistan DHS 2023

Background characteristic	Anemia status by hemoglobin level				Number of women
	Any (NP <12.0 g/dl/ P <11.0 g/dl)	Mild (NP 11.0–11.9 g/dl/ P 10.0–10.9 g/dl)	Moderate (NP 8.0–10.9 g/dl/ P 7.0–9.9 g/dl)	Severe (NP < 8.0 g/dl/ P < 7.0 g/dl)	
Age					
15–19	24.2	15.1	8.6	0.6	1,684
20–29	23.0	13.5	9.3	0.2	3,126
30–39	25.4	14.6	10.0	0.7	2,944
40–49	25.7	13.9	10.9	0.9	1,992
Number of children ever born					
0	23.7	14.4	8.7	0.5	2,664
1	22.8	12.8	9.6	0.4	1,071
2–3	24.5	13.7	10.2	0.6	3,799
4–5	26.1	15.2	10.3	0.6	2,011
6+	27.2	16.9	8.5	1.8	201
Maternity status					
Pregnant	23.5	15.4	8.1	0.0	744
Not pregnant[1]	24.6	14.1	9.8	0.6	9,002
Using IUD					
Yes	24.6	13.4	10.4	0.8	1,326
No	24.5	14.3	9.6	0.5	8,420
Residence					
Urban	22.1	13.0	8.6	0.6	2,645
Rural	25.3	14.6	10.1	0.6	7,101
Region					
Dushanbe	16.0	8.7	6.8	0.5	1,056
GBAO	33.6	17.0	14.8	1.8	156
Sughd	27.2	15.3	11.0	0.9	2,737
DRS	24.2	13.9	9.6	0.7	2,328
Khatlon	24.7	15.0	9.5	0.2	3,469
FTF districts	21.9	13.6	8.2	0.2	1,931
Mother's education					
None/primary	25.7	15.6	10.1	0.1	431
General basic	24.7	14.7	9.2	0.8	3,235
General secondary	24.4	13.7	10.2	0.5	4,173
Professional primary/middle	23.4	12.8	10.3	0.4	768
Higher	24.2	14.8	8.8	0.5	1,139
Wealth quintile					
Lowest	27.0	15.9	10.1	1.0	1,816
Second	26.0	15.1	10.4	0.5	1,949
Middle	24.9	14.6	9.9	0.5	1,946
Fourth	23.1	12.7	10.0	0.4	1,934
Highest	21.8	12.9	8.3	0.6	2,100
Total	24.5	14.2	9.7	0.6	9,746

Note: Prevalence of anemia, based on hemoglobin levels, is adjusted for altitude and for cigarette smoking, if known, using formulas in CDC 1998 and cutoffs defined in WHO 2017b. Hemoglobin is measured in grams per deciliter (g/dl) using the HemoCue 201+ device.
NP = nonpregnant
P = pregnant
[1] Includes women who do not know if they are pregnant

PERSONS INVOLVED IN THE 2023 TAJIKISTAN DEMOGRAPHIC AND HEALTH SURVEY

Appendix D

NATIONAL COORDINATOR

Nurmahmadzoda Jamshed, Director, Agency on Statistics under the President of the Republic of Tajikistan

DEPUTY NATIONAL COORDINATOR FOR MEDICAL AFFAIRS

Muhsinzoda Gafur Mukhsin, First Deputy Minister of Health and Social Protection of the Population of the Republic of Tajikistan

DEPUTY NATIONAL COORDINATOR FOR FIELD IMPLEMENTATION

Aso Nurullo Asvat, First Deputy Director, Agency on Statistics under the President of the Republic of Tajikistan

AGENCY ON STATISTICS UNDER THE PRESIDENT OF THE REPUBLIC OF TAJIKISTAN

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Azizzoda Ilhom, 2023 Tajikistan DHS Deputy Technical Director
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Nemonov Mahmadi, Administrative and Legal Support
Qamarzoda Hukmiddin, Administrative Support
Safarbek Khabibullozoda, Financial Support
Furkat Mirpochchoev, Chief Programmer/Data Entry Coordinator
Rustamov Ravshan, IT and CAPI Specialist
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Yusuf Siddikov, IT and CAPI Specialist
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Nachibullo Nazarov, IT and CAPI Specialist
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Zainullo Aliyev, Technical Editor

MINISTRY OF HEALTH AND SOCIAL PROTECTION OF THE POPULATION

Zulfiya Abdusamatzoda, Deputy Minister
Abdukholiq Amirzoda, Deputy Minister
Zohir Nabiev, Head of the Department of Organization of Medical Services for Mothers, Children and Family Planning
Navruz Jafarov, Head of the Department of Sanitary and Epidemiological Safety, Emergencies and Emergency Medical Care
Dilorom Yunusova, Head, Division of Safe Motherhood and Family Planning
Gulrukhsor Safarova, Director, Republican Center for Medical Statistics and Information
Hafiza Saidova, Director, National Center for Reproductive Health
Inom Haqnazarov, Director, Republican Nutrition Center
Mohtob Bobokhonova, Deputy Director, Republican Center for Immunoprophylaxis
Furqat Mahmudov, Deputy Director, Republican Center for Medical Statistics and Information
Alijon Soliev, Deputy Director, Republican Center for the Prevention and Control of AIDS

Household Listing and Mapping

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Safaralizoda Davron
Hakimzoda Qurbon
Nakhatzoda Hokimbek
Asmatbekzoda Firdavs
Qurbonov Saidakbar

Listers

Sharifov Sairakhim
Davlatov Lutfullo
Sunatulloi Isuf
Mazbutov Nizomchon
Makhmadaliev Oyatullo
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Mirzoev Akhmad
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Elnazarov Husayn
Azimov Sunatullo
Kayumov Alichon
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Kharchenko Alexander
Nizomudinzoda Abdurasul Nizomudin
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Saidov Olimjon

Mappers

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Kurbonov Mirzoali
Mahmadzoda Jumakhon
Kosimov Yusuf
Murodov Zoir
Sharifov Salimboy
Khojaev Attokhonbek
Abdulloev Narzullo
Qamarzoda Hukmiddin Qamar
Shonusayriev Najib
Zanjirbekov Dildorbek
Nazarshoev Orifsho
Khochamberdiev Nuriddin
Khusinov Saidkodir
Abdualimov Saidasror
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Sunatulloi Yusuf
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Sidikova Farzona
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Dustova Nargis
Sharipova Matluba
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Rajabova Marchona
Hikmatova Mehrangez
Muqaddasi Latifi
Rakhimova Marvorid
Abdulloeva Zebo
Abdulloeva Sayyora
Gaforova Zarrina
Dadojonova Gulnora
Ismatova Mehrona
Kurbonova Zarrina
Komilova Gulchehra
Mirrachabova Farzona
Shodieva Fasolate
Machidova Dilbar
Tolibzoda Volida
Majidova Maftuna
Zokirova Ozoda
Alifova Rahima
Vafodorova Malika
Gazalova Nigina
Mavlonazarova Diloro
Muborakshoeva Nozigul
Murodalieva Mahingul
Oshurbekova Shakhlo
Shonkulieva Farzona
Nurova Marhabo
Davlatbekova Manizha
Davlatzoda Mohliko
Rahimova Zulaiho
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Nurmakhmadova Nargis
Zokirova Sayohat
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QUESTIONNAIRES

Appendix **E**

FORMATTING DATE: 18 July 2023
ENGLISH LANGUAGE: 18 July 2023

2023 DEMOGRAPHIC AND HEALTH SURVEY
HOUSEHOLD QUESTIONNAIRE

TAJIKISTAN
AGENCY ON STATISTICS UNDER THE PRESIDENT OF THE REPUBLIC OF TAJIKISTAN
MINISTRY OF HEALTH AND SOCIAL PROTECTION OF THE POPULATION OF THE REPUBLIC OF TAJIKISTAN

IDENTIFICATION

PLACE NAME _____

NAME OF HOUSEHOLD HEAD _____

CLUSTER NUMBER . . . . . | | | | |

HOUSEHOLD NUMBER . . . . . | | | | |

INTERVIEWER VISITS

	1	2	3	FINAL VISIT
DATE				DAY / MONTH / YEAR
INTERVIEWER'S NAME				INT. NO.
RESULT*				RESULT*
NEXT VISIT: DATE				TOTAL NUMBER OF VISITS
TIME				

*RESULT CODES:

1 COMPLETED
2 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT
3 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME
4 POSTPONED
5 REFUSED
6 DWELLING VACANT OR ADDRESS NOT A DWELLING
7 DWELLING DESTROYED
8 DWELLING NOT FOUND
9 OTHER _____ (SPECIFY)

TOTAL PERSONS IN HOUSEHOLD

TOTAL ELIGIBLE WOMEN

LINE NO. OF RESPONDENT TO HOUSEHOLD QUESTIONNAIRE

LANGUAGE OF QUESTIONNAIRE** 0 1 | LANGUAGE OF INTERVIEW** | | NATIVE LANGUAGE OF RESPONDENT** | | TRANSLATOR USED (YES = 1, NO = 2)

LANGUAGE OF QUESTIONNAIRE** ENGLISH

**LANGUAGE CODES:
01 ENGLISH 02 RUSSIAN 03 TAJIK
04 KYRGYZ 05 UZBEK 06 OTHER

TEAM	TEAM SUPERVISOR		CAPI SUPERVISOR	
NUMBER	NAME	NUMBER	NAME	NUMBER

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INTRODUCTION AND CONSENT

Hello. My name is _____. I am working with Agency on Statistics under the President of the Republic of Tajikistan. We are conducting a survey about health and other topics all over Tajikistan. The information we collect will help the government to plan health services. Your household was selected for the survey. I would like to ask you some questions about your household. The questions usually take about 15 to 20 minutes. All of the answers you give will be confidential and will not be shared with anyone other than members of our survey team. You don't have to be in the survey, but we hope you will agree to answer the questions since your views are important. If I ask you any question you don't want to answer, just let me know and I will go on to the next question or you can stop the interview at any time. In case you need more information about the survey, you may contact the person listed on this card.

GIVE CARD WITH CONTACT INFORMATION

Do you have any questions?
May I begin the interview now?

SIGNATURE OF INTERVIEWER _____ DATE _____

RESPONDENT AGREES TO BE INTERVIEWED . . 1 ↓

RESPONDENT DOES NOT AGREE TO BE INTERVIEWED . . 2 → END

100	RECORD THE TIME.	HOURS . . . . . ☐☐ MINUTES . . . . . ☐☐

HOUSEHOLD SCHEDULE

								IF AGE 15 OR OLDER			IF AGE 0-17 YEARS			
LINE NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX	RESIDENCE		AGE	MORE PEOPLE	MARITAL STATUS	ELIGIBILITY		SURVIVORSHIP AND RESIDENCE OF BIOLOGICAL PARENTS			
1	2	3	4	5	6	7	7-1	8	9	11	12	13	14	15
	Please give me the names of the persons who usually live in your household and guests of the household who stayed here last night, starting with the head of the household. RECORD THE FIRST NAME OF THE HEAD OF THE HOUSEHOLD AFTER LISTING THE NAMES AND RECORDING THE RELATIONSHIP, SEX, RESIDENCE, AND AGE FOR EACH PERSON, ASK QUESTIONS 7A-7C TO BE SURE THAT THE LISTING IS COMPLETE. THEN ASK APPROPRIATE QUESTIONS IN COLUMNS 8-20 FOR EACH PERSON.	What is the relationship of (FULL NAME) to the head of the household? SEE CODES BELOW.	Is (FULL NAME) male or female?	Does (FULL NAME) usually live here?	Did (FULL NAME) stay here last night?	How old is (FULL NAME)? IF 95 OR MORE, RECORD '95'	Are there any other persons living in this household?	What is (FULL NAME)'s current marital status? 1 = MARRIED OR LIVING TOGETHER 2 = DIVORCED/ SEPARATED 3 = WIDOWED 4 = NEVER-MARRIED AND NEVER LIVED TOGETHER	CIRCLE LINE NUMBER OF ALL WOMEN AGE 15-49	CIRCLE LINE NUMBER OF ALL CHILDREN AGE 0-5	Is (FULL NAME)'s biological mother alive?	Does (FULL NAME)'s biological mother usually live in this household or was she a guest last night? IF YES: What is her name? RECORD MOTHER'S LINE NUMBER IF NO: RECORD '00'	Is (FULL NAME)'s biological father alive?	Does (FULL NAME)'s biological father usually live in this household or was he a guest last night? IF YES: What is his name? RECORD FATHER'S LINE NUMBER IF NO: RECORD '00'
01			M F 1 2	Y N 1 2	Y N 1 2	IN YEARS	Y N 1 → GO TO NEXT LINE 2 GO TO 7A ←		01	01	Y N DK 1 2 8 GO TO 14		Y N DK 1 2 8 GO TO 16	
02			1 2	1 2	1 2		1 → GO TO NEXT LINE 2 GO TO 7A ←		02	02	1 2 8 GO TO 14		1 2 8 GO TO 16	
03			1 2	1 2	1 2		1 → GO TO NEXT LINE 2 GO TO 7A ←		03	03	1 2 8 GO TO 14		1 2 8 GO TO 16	
04			1 2	1 2	1 2		1 → GO TO NEXT LINE 2 GO TO 7A ←		04	04	1 2 8 GO TO 14		1 2 8 GO TO 16	
05			1 2	1 2	1 2		1 → GO TO NEXT LINE 2 GO TO 7A ←		05	05	1 2 8 GO TO 14		1 2 8 GO TO 16	

7A)	Just to make sure that I have a complete listing: are there any other people such as small children or infants that we have not listed?	YES →	ADD TO TABLE	NO
7B)	Are there any other people who may not be members of your family, such as domestic servants, lodgers, or friends who usually live here?	YES →	ADD TO TABLE	NO
7C)	Are there any guests or temporary visitors staying here, or anyone else who stayed here last night, who have not been listed?	YES →	ADD TO TABLE	NO

CODES FOR Q. 3: RELATIONSHIP TO HEAD OF HOUSEHOLD

01 = HEAD
02 = WIFE OR HUSBAND
03 = SON OR DAUGHTER
04 = SON-IN-LAW OR DAUGHTER-IN-LAW
05 = GRANDCHILD
06 = PARENT
07 = PARENT-IN-LAW
08 = BROTHER OR SISTER
09 = OTHER RELATIVE
10 = ADOPTED/FOSTER/ STEPCHILD
11 = NOT RELATED
98 = DON'T KNOW

HOUSEHOLD SCHEDULE

	IF AGE 3 YEARS OR OLDER						IF AGE 3-24 YEARS		IF AGE 0-4 YEARS
LINE NO.	EVER ATTENDED SCHOOL						CURRENT/RECENT SCHOOL ATTENDANCE		BIRTH REGISTRATION
	16	16A	**17A**	**17B**	17C	17D	**18**	**19**	**20**
	Has (FIRST NAME) ever attended school or any early childhood education program?	What is the total number of completed years of schooling (FIRST NAME) has had, including school and other institutions?	What is the highest level of school (FIRST NAME) has attended? SEE CODES BELOW.	What is the highest grade (FIRST NAME) completed at that level? SEE CODES BELOW.	IF 17A: LEVEL "2" OR"3" PROFESSIONAL PRIMARY OR PROFESSIONAL MIDDLE: How many classes did (FIRST NAME) completed in general school before (FIRST NAME) enrolled in uchilishe, colledge or technikum?	IF 17A: LEVEL '1' AND 17B CLASS 10 OR CLASS 11, OR IN 17A LEVEL '2' PROF. PRIMARY OR LEVEL '3' PROF. MIDDLE: Did (FIRST NAME) receive attestat for completing general school?	Did (FIRST NAME) attend school or any early childhood education program at any time during the 2022-2023 school year?	During [this/that] school year, what level and class/course [is/was] (FIRST NAME) attending? SEE CODES BELOW.	Does (FIRST NAME) have a birth certificate? IF NO, PROBE: Has (FIRST NAME)'s birth ever been registered with the civil authority? 1 = HAS CERTIFICATE 2 = REGISTERED 3 = NEITHER 8 = DON'T KNOW
01	Y N 1 2 ↓ GO TO 20		LEVEL	CLASS/COURSE		Y N 1 2	Y N 1 2 ↓ GO TO 20	LEVEL CLASS/COU	
02	1 2 ↓ GO TO 20					1 2	1 2 ↓ GO TO 20		
03	1 2 ↓ GO TO 20					1 2	1 2 ↓ GO TO 20		
04	1 2 ↓ GO TO 20					1 2	1 2 ↓ GO TO 20		
05	1 2 ↓ GO TO 20					1 2	1 2 ↓ GO TO 20		

CODES FOR Qs. 17 AND 19: EDUCATION

LEVEL
0 = EARLY CHILDHOOD EDUCATION PROGRAM
1 = GENERAL SCHOOL(1-11)
2 = PROFESSIONAL PRIMARY
3 = PROFESSIONAL MIDDLE
4 = HIGHER
8 = DON'T KNOW

CLASS/COURSE
00 = LESS THAN 1 YEAR COMPLETED (USE '00' FOR Q. 17 ONLY. THIS CODE IS NOT ALLOWED FOR Q. 19.)
98 = DON'T KNOW

SELECTION OF ONE CHILD FOR CHILD DISCIPLINE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES
31	CHECK COL. 7 IN THE LIST OF HOUSEHOLD MEMBERS AND WRITE THE TOTAL NUMBER OF CHILDREN AGE 1-14 YEARS.	TOTAL NUMBER . . . . .
32	CHECK THE NUMBER OF CHILDREN AGE 1-14 YEARS IN 31: ZERO → SKIP TO 51 DOMESTIC VIOLENCE MODULE SELECTION TWO OR MORE ONE → SKIP TO 39 AND RECORD THE RANK NUMBER AS '1', ENTER THE LINE NUMBER, CHILD'S NAME AND AGE	

32A LIST EACH OF THE CHILDREN AGE 1-14 YEARS BELOW IN THE ORDER THEY APPEAR IN THE LIST OF HOUSEHOLD MEMBERS. DO NOT INCLUDE OTHER HOUSEHOLD MEMBERS OUTSIDE OF THE AGE RANGE 1-14 YEARS. RECORD THE LINE NUMBER, NAME, SEX, AND AGE FOR EACH CHILD.

33 RANK NUMBER	34 HH LINE NUMBER	35 NAME FROM COL. 2	36 SEX FROM COL. 4		37 AGE FROM COL. 7
RANK	LINE	NAME	M	F	AGE
1			1	2	
2			1	2	
3			1	2	
4			1	2	
5			1	2	
6			1	2	
7			1	2	
8			1	2	
9			1	2	

SELECTION OF ONE CHILD FOR CHILD DISCIPLINE

38 LOOK AT THE LAST DIGIT OF THE HOUSEHOLD NUMBER ON THE COVER PAGE. THIS IS THE ROW NUMBER YOU SHOULD GO TO. CHECK THE TOTAL NUMBER OF ELIGIBLE CHILDREN **31** ON THE PREVIOUS PAGE. THIS IS THE COLUMN NUMBER YOU SHOULD GO TO. FOLLOW THE SELECTED ROW AND COLUMN TO THE CELL WHERE THEY MEET AND CIRCLE THE NUMBER IN THE CELL. THIS IS THE RANK NUMBER OF THE CHILD SELECTED FOR THE CHILD LABOUR/CHILD DISCIPLINE QUESTIONS FROM THE BOX OF ELIGIBLE CHILDREN IN **SL3**. WRITE THE NAME, LINE NUMBER, AND RANK NUMBER OF THE SELECTED CHILD IN THE SPACE BELOW THE TABLE.

EXAMPLE: THE HOUSEHOLD NUMBER IS '716' AND **31** SHOWS THAT THERE ARE THREE ELIGIBLE CHILDREN AGE 1-14 IN THE HOUSEHOLD. SINCE THE LAST DIGIT OF THE HOUSEHOLD NUMBER IS '6' GO TO ROW '6' AND SINCE THERE ARE THREE ELIGIBLE CHILDREN IN THE HOUSEHOLD, GO TO COLUMN '3'. FOLLOW THE ROW AND COLUMN AND FIND THE NUMBER IN THE CELL WHERE THEY MEET ('2') AND CIRCLE THE NUMBER. NOW GO TO **33** AND FIND THE SECOND CHILD. WRITE THE NAME, LINE NUMBER, AND RANK NUMBER OF THE CHILD IN THE SPACE BELOW THE TABLE.

LAST DIGIT OF THE HOUSE-HOLD NUMBER	TOTAL NUMBER OF ELIGIBLE CHILDREN AGE 1-14 IN HOUSEHOLD FROM **31**							
	1	2	3	4	5	6	7	8+
0	1	2	2	4	3	6	5	4
1	1	1	3	1	4	1	6	5
2	1	2	1	2	5	2	7	6
3	1	1	2	3	1	3	1	7
4	1	2	3	4	2	4	2	8
5	1	1	1	1	3	5	3	1
6	1	2	2	2	4	6	4	2
7	1	1	3	3	5	1	5	3
8	1	2	1	4	1	2	6	4
9	1	1	2	1	2	3	7	5

39 NAME OF SELECTED CHILD _____ HH LINE NUMBER OF SELECTED CHILD ☐☐

M F
CHILD'S SEX . . . . . 1 2 RANK NUMBER OF SELECTED CHILD ☐☐

CHILD DISCIPLINE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
41	CHECK THE SELECTED CHILD'S AGE FROM 7: 1-14 YEARS ☐ ↓ 15-17 YEARS ☐ → 51		
42	WRITE DOWN THE LINE NUMBER, NAME, AND SEX OF THE CHILD FROM 39.	LINE NUMBER . . . . . ☐☐ NAME _____ M F CHILD'S SEX 1 2	
43	Adults use certain ways to teach children the right behaviour or to address a behaviour problem. I will read various methods that are used. Please tell me if you or anyone other adult in the household has used this method with (CHILD NAME) in the past month. CHECK 42: MALE ☐ ↓ / FEMALE ☐ ↓	YES NO	
	a1) Took away privileges, forbade something (CHILD NAME) liked or did not allow him to leave the house. / a2 Took away privileges, forbade something (CHILD NAME) liked or did not allow her to leave the house.	a) TOOK AWAY PRIVILEGES 1 2	
	b) Explained why (CHILD NAME)'s behaviour was wrong. / b) Explained why (CHILD NAME)'s behaviour was wrong.	b) EXPLAINED WRONG BEHAVIOUR . . 1 2	
	c1) Shook him. / c2 Shook her.	c) SHOOK HIM/HER 1 2	
	d1) Shouted, yelled at or screamed at him. / d2 Shouted, yelled at or screamed at her.	d) SHOUTED, YELLED, SCREAMED . . 1 2	
	e1) Gave him something else to do. / e2 Gave her something else to do.	e) GAVE SOMETHING ELSE TO DO 1 2	
	f1) Spanked, hit or slapped him on the bottom with bare hand. / f2) Spanked, hit or slapped her on the bottom with bare hand.	f) HIT ON BOTTOM WITH BARE HAND . . 1 2	
	g1) Hit him on the bottom or elsewhere on the body with something like a belt, hairbrush, stick, or other hard object. / g2 Hit her on the bottom or elsewhere on the body with something like a belt, hairbrush, stick, or other hard object.	g) HIT WITH HARD OBJECT 1 2	
	h1) Called him dumb, lazy, or another name like that. / h2 Called her dumb, lazy, or another name like that.	h) CALLED NAME 1 2	
	i1) Hit or slapped him on the face, head, or ears. / i2) Hit or slapped her on the face, head, or ears.	i) HIT ON HEAD/FACE/EARS 1 2	
	j1) Hit or slapped him on the hand, arm, or leg. / j2) Hit or slapped her on the hand, arm, or leg.	j) HIT ON HAND/ARM/LEG 1 2	
	k1 Beat him up, that is hit him over and over as hard as one could. / k2 Beat her up, that is hit her over and over as hard as one could.	k) BEAT HIM/HER UP 1 2	
44	Do you believe that in order to bring up, raise or educate a child properly, the child needs to be physically punished?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW / NO OPINION 8	

SELECTION OF WOMAN FOR THE DOMESTIC VIOLENCE QUESTIONS (PAPER OPTION)

No	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIPS
51	CHECK COLUMNS 4, 7 И 9 IN HOUSEHOLD SCHEDULE AND RECORD TOTAL NUMBER OF WOMEN AGE 15-49.	TOTAL WOMEN AGE 15-49 . . . . . ☐☐	
52	CHECK 51 FOR TOTAL NUMBER OF WOMEN AGE 15-49 TWO OR MORE ☐	ZERO . . . . . ☐ → 101 ONE . . . . . ☐ → 53	

LOOK AT THE LAST DIGIT OF THE HOUSEHOLD QUESTIONNAIRE SERIAL NUMBER ON THE COVER PAGE. THIS IS THE ROW NUMBER YOU SHOULD GO TO. CHECK THE TOTAL NUMBER OF ELIGIBLE WOMEN (COLUMN 9) IN THE HOUSEHOLD SCHEDULE. THIS IS THE COLUMN NUMBER YOU SHOULD GO TO. FOLLOW THE SELECTED ROW AND COLUMN TO THE CELL WHERE THEY MEET AND CIRCLE THE NUMBER IN THE CELL. THIS IS THE NUMBER OF THE WOMAN SELECTED FOR THE DOMESTIC VIOLENCE QUESTIONS FROM THE LIST OF ELIGIBLE WOMEN IN COLUMN 9 OF THE HOUSEHOLD SCHEDULE. WRITE THE NAME AND LINE NUMBER OF THE SELECTED WOMAN IN THE SPACE BELOW THE TABLE.

EXAMPLE: THE HOUSEHOLD QUESTIONNAIRE SERIAL NUMBER IS '716' AND THE HOUSEHOLD SCHEDULE COLUMN 9 SHOWS THAT THERE ARE THREE ELIGIBLE WOMEN AGE 15-49 IN THE HOUSEHOLD (LINE NUMBERS 02, 04, AND 05). SINCE THE LAST DIGIT OF THE HOUSEHOLD SERIAL NUMBER IS '6' GO TO ROW '6' AND SINCE THERE ARE THREE ELIGIBLE WOMEN IN THE HOUSEHOLD, GO TO COLUMN '3'. FOLLOW THE ROW AND COLUMN AND FIND THE NUMBER IN THE CELL WHERE THEY MEET ('2') AND CIRCLE THE NUMBER. NOW GO TO THE HOUSEHOLD SCHEDULE AND FIND THE SECOND WOMAN WHO IS ELIGIBLE FOR THE WOMAN'S INTERVIEW (LINE NUMBER '04' IN THIS EXAMPLE). WRITE HER NAME AND LINE NUMBER IN THE SPACE BELOW

LAST DIGIT OF THE HOUSE-HOLD QUESTION-NAIRE SERIAL NUMBER	TOTAL NUMBER OF ELIGIBLE WOMEN AGE 15-49 IN HOUSEHOLD SCHEDULE COLUMN 9							
	1	2	3	4	5	6	7	8+
0	1	2	2	4	3	6	5	4
1	1	1	3	1	4	1	6	5
2	1	2	1	2	5	2	7	6
3	1	1	2	3	1	3	1	7
4	1	2	3	4	2	4	2	8
5	1	1	1	1	3	5	3	1
6	1	2	2	2	4	6	4	2
7	1	1	3	3	5	1	5	3
8	1	2	1	4	1	2	6	4
9	1	1	2	1	2	3	7	5

53 NAME OF SELECTED WOMAN _____ HH LINE NUMBER OF SELECTED WOMAN ☐☐

HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101	What is the main source of drinking water for members of your household?	**PIPED WATER** PIPED INTO DWELLING . . . . . 11 PIPED TO YARD/PLOT . . . . . 12 PIPED TO NEIGHBOR . . . . . 13 PUBLIC TAP/STANDPIPE . . . . . 14 TUBE WELL OR BOREHOLE . . . . . 21 **DUG WELL** PROTECTED WELL . . . . . 31 UNPROTECTED WELL . . . . . 32 **WATER FROM SPRING** PROTECTED SPRING . . . . . 41 UNPROTECTED SPRING . . . . . 42 RAINWATER . . . . . 51 TANKER TRUCK . . . . . 61 CART WITH SMALL TANK . . . . . 71 SURFACE WATER (RIVER/DAM/ LAKE/POND/STREAM/CANAL/ IRRIGATION CHANNEL) . . . . . 81 BOTTLED WATER . . . . . 91 OTHER _____ 96 (SPECIFY)	→ 106 → 103 → 103
102	What is the main source of water used by your household for other purposes such as cooking and handwashing?	**PIPED WATER** PIPED INTO DWELLING . . . . . 11 PIPED TO YARD/PLOT . . . . . 12 PIPED TO NEIGHBOR . . . . . 13 PUBLIC TAP/STANDPIPE . . . . . 14 TUBE WELL OR BOREHOLE . . . . . 21 **DUG WELL** PROTECTED WELL . . . . . 31 UNPROTECTED WELL . . . . . 32 **WATER FROM SPRING** PROTECTED SPRING . . . . . 41 UNPROTECTED SPRING . . . . . 42 RAINWATER . . . . . 51 TANKER TRUCK . . . . . 61 CART WITH SMALL TANK . . . . . 71 SURFACE WATER (RIVER/DAM/ LAKE/POND/STREAM/CANAL/ IRRIGATION CHANNEL) . . . . . 81 OTHER _____ 96 (SPECIFY)	→ 106
103	Where is that water source located?	IN OWN DWELLING . . . . . 1 IN OWN YARD/PLOT . . . . . 2 ELSEWHERE 3	→ 106
104	How long does it take to go there, get water, and come back?	MINUTES . . . . . ☐☐☐ DON'T KNOW 998	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
105	Who usually goes to this source to collect the water for your household? RECORD THE PERSON'S NAME AND LINE NUMBER FROM THE HOUSEHOLD SCHEDULE. IF THE PERSON IS NOT LISTED IN THE HOUSEHOLD ROSTER, RECORD '00'	NAME _____ LINE NUMBER	
106	In the last month, has there been any time when your household did not have sufficient quantities of drinking water when needed?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
107	Do you do anything to the water to make it safer to drink?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 109
108	What do you usually do to make the water safer to drink? Anything else? RECORD ALL MENTIONED.	BOIL . . . . . A STRAIN THROUGH A CLOTH . . . . . C USE WATER FILTER (CERAMIC/ SAND/COMPOSITE/ETC) . . . . . D LET IT STAND AND SETTLE . . . . . F OTHER _____ X (SPECIFY) DON'T KNOW . . . . . Z	
109	What kind of toilet facility do members of your household usually use? IF NOT POSSIBLE TO DETERMINE, ASK PERMISSION TO OBSERVE THE FACILITY.	**FLUSH OR POUR FLUSH TOILET** FLUSH TO PIPED SEWER SYSTEM . . . . . 11 FLUSH TO SEPTIC TANK . . . . . 12 FLUSH TO PIT LATRINE . . . . . 13 FLUSH TO SOMEWHERE ELSE . . . . . 14 FLUSH, DON'T KNOW WHERE . . . . . 15 **PIT LATRINE** VENTILATED IMPROVED PIT LATRINE . . . . . 21 PIT LATRINE WITH SLAB . . . . . 22 PIT LATRINE WITHOUT SLAB/OPEN PIT . . 23 COMPOSTING TOILET . . . . . 31 BUCKET TOILET . . . . . 41 NO FACILITY/BUSH/FIELD . . . . . 61 OTHER _____ 96 (SPECIFY)	→ 117
110	Do you share this toilet facility with other households?	YES . . . . . 1 NO 2	→ 112
111	Including your own household, how many households use this toilet facility?	NO. OF HOUSEHOLDS IF LESS THAN 10 . . . . . 0 10 OR MORE HOUSEHOLDS . . . . . 95 DON'T KNOW 98	
112	Where is this toilet facility located?	IN OWN DWELLING . . . . . 1 IN OWN YARD/PLOT . . . . . 2 ELSEWHERE 3	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
113	CHECK 109: CODES 12, 13, 21, 22, 23, OR 31 CIRCLED ☐ ↓ OTHER ☐		→ 117
114	CHECK 109: CODE 12 ☐ ↓ / CODE 13, 21, 22, OR 23 ☐ ↓ / CODE 31 ☐ ↓ a) Has your septic tank ever been emptied? b) Has your pit latrine ever been emptied? c) Has your composting toilet ever been emptied?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 117
115	CHECK 109: CODE 12 ☐ ↓ / CODE 13, 21, 22, OR 23 ☐ ↓ / CODE 31 ☐ ↓ a) The last time the septic tank was emptied, was it emptied by a service provider? b) The last time the pit latrine was emptied, was it emptied by a service provider? c) The last time the composting toilet was emptied, was it emptied by a service provider?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
116	Where were the contents emptied to?	A TREATMENT PLANT . . . . . 1 BURIED IN A COVERED PIT . . . . . 2 UNCOVERED PIT/BUSH/FIELD/ OPEN GROUND . . . . . 3 SURFACE WATER (RIVER/DAM/ LAKE/POND/STREAM/CANAL/ IRRIGATION CHANNEL) . . . . . 4 OTHER _____ 6 (SPECIFY) DON'T KNOW 8	
117	In your household, what type of cookstove is mainly used for cooking?	ELECTRIC STOVE . . . . . 01 LIQUEFIED PETROLEUM GAS (LPG)/ COOKING GAS STOVE . . . . . 03 PIPED NATURAL GAS STOVE . . . . . 04 BIOGAS STOVE . . . . . 05 LIQUID FUEL STOVE . . . . . 06 MANUFACTURED SOLID FUEL STOVE . . . . . 07 TRADITIONAL SOLID FUEL STOVE . . . . . 08 THREE STONE STOVE/OPEN FIRE . . . . . 09 MICROWAVE STOVE . . . . . 10 NO FOOD COOKED IN HOUSEHOLD . . . . . 95 OTHER _____ 96 (SPECIFY)	→ 121 → 120 → 120 → 121 → 123 → 120
118	Does the stove have a chimney?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
120	What type of fuel or energy source is used in this cookstove?	GASOLINE/DIESEL . . . . . 02 KEROSENE . . . . . 03 COAL/LIGNITE . . . . . 04 CHARCOAL . . . . . 05 WOOD . . . . . 06 STRAW/SHRUBS/GRASS . . . . . 07 AGRICULTURAL CROP . . . . . 08 ANIMAL DUNG/WASTE . . . . . 09 PROCESSED BIOMASS (PELLETS) OR WOODCHIPS . . . . . 10 GARBAGE/PLASTIC . . . . . 11 SAWDUST . . . . . 12 OTHER _____ 96 (SPECIFY)	
121	Is the cooking usually done in the house, in a separate building, or outdoors?	IN THE HOUSE . . . . . 1 IN A SEPARATE BUILDING . . . . . 2 OUTDOORS . . . . . 3 OTHER _____ 6 (SPECIFY)	→ 123
122	Do you have a separate room which is used as a kitchen?	YES . . . . . 1 NO 2	
123	What does this household use to heat the home when needed? IF THE RESPONDENT SAYS ELECTRICITY OR GAS, ASK: What type of heater is the (electricity/gas) used in?	CENTRAL HEATING . . . . . 01 MANUFACTURED SPACE HEATER . . . . . 02 TRADITIONAL SPACE HEATER . . . . . 03 MANUFACTURED COOKSTOVE . . . . . 04 TRADITIONAL COOKSTOVE . . . . . 05 THREE STONE STOVE/OPEN FIRE . . . . . 06 AIRCONDITIONER WINTER-SUMME . . . . . 07 NO SPACE HEATING IN HOUSEHOLD/NO NEED . . . . . 95 OTHER _____ 96 (SPECIFY)	→ 125 → 125 → 125 → 126 → 125
124	Does it have a chimney?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
125	What type of fuel or energy source is used in this heater?	ELECTRICITY . . . . . 01 PIPED NATURAL GAS . . . . . 02 LIQUEFIED PETROLEUM GAS (LPG)/ COOKING GAS . . . . . 04 BIOGAS . . . . . 05 GASOLINE/DIESEL . . . . . 07 KEROSENE . . . . . 08 COAL/LIGNITE . . . . . 09 CHARCOAL . . . . . 10 WOOD . . . . . 11 STRAW/SHRUBS/GRASS . . . . . 12 AGRICULTURAL CROP . . . . . 13 ANIMAL DUNG/WASTE . . . . . 14 PROCESSED BIOMASS (PELLETS) OR WOODCHIPS . . . . . 15 GARBAGE/PLASTIC . . . . . 16 SAWDUST . . . . . 17 THERMO ELECTRO CENTRAL (TEC) . . . . . 18 OTHER _____ 96 (SPECIFY)	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
126	At night, what does your household mainly use to light the home?	ELECTRICITY . . . . . 01 SOLAR LANTERN . . . . . 02 RECHARGEABLE FLASHLIGHT, TORCH OR LANTERN . . . . . 03 BATTERY POWERED FLASHLIGHT, TORCH OR LANTERN . . . . . 04 BIOGAS LAMP . . . . . 05 GASOLINE LAMP . . . . . 06 KEROSENE LAMP . . . . . 07 CHARCOAL . . . . . 08 WOOD . . . . . 09 STRAW/SHRUBS/GRASS . . . . . 10 AGRICULTURAL CROP . . . . . 11 ANIMAL DUNG/WASTE . . . . . 12 OIL LAMP . . . . . 13 CANDLE . . . . . 14 NO LIGHTING IN HOUSEHOLD . . . . . 95 OTHER _____ 96 (SPECIFY)	
127	How many rooms in this household are used for sleeping?	ROOMS	
128	Does this household own any livestock, herds, other farm animals, or poultry?	YES . . . . . 1 NO 2	→ 130
129	How many of the following animals does this household own? IF NONE, RECORD '00'. IF MORE THAN 95, RECORD '95'. IF UNKNOWN, RECORD '98'. a) Milk cows or bulls? b) Other cattle? c) Horses, donkeys, or mules? d) Goats? e) Sheep? f) Chickens or other poultry? g) Rabbits? h) Animals for fur? i) Beehives?	a) COWS/BULLS . . . . . b) OTHER CATTLE . . . . . c) HORSES/DONKEYS/MULES . . . . . d) GOATS . . . . . e) SHEEP . . . . . f) CHICKENS/POULTRY . . . . . g) RABBITS . . . . . h) FUR ANIMALS . . . . . i) BEES	
130	Does any member of this household using any agricultural land?	YES . . . . . 1 NO 2	→ 132
131	How many ares of agricultural land do members of this household use? IF 9500 OR MORE, RECORD '9950'.	ARES . . . . . 9500 OR MORE ARES . . . . . 9995 DON'T KNOW 9998	

HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
132	Does your household have:	YES NO	
	a) Electricity?	a) ELECTRICITY 1 2	
	b) A radio?	b) RADIO 1 2	
	c) A television?	c) TELEVISION 1 2	
	d) A non-mobile telephone?	d) NON-MOBILE TELEPHONE . . 1 2	
	e) A computer?	e) COMPUTER 1 2	
	f) A refrigerator?	f) REFRIGERATOR 1 2	
	g) A washing machine?	g) WASHING MACHINE 1 2	
	h) A vacuum cleaner?	h) VACUUM 1 2	
	i) A microwave?	i) MICROWAVE 1 2	
	j) A video camera?	j) VIDEOCAMERA 1 2	
	k) A table or a hon-tohta?	k) TABLE/HON TOHTA 1 2	
	l) A chair?	l) CHAIR 1 2	
	m) A sofa?	m) SOFA 1 2	
	n) A bed?	n) BED 1 2	
	o) A wall unit, or a buffet, or a curio cabinet?	o) BUFFET/ CURIO/ WALL UNIT . . 1 2	
	p) An air conditioner?	p) AIR CONDITIONER 1 2	
	q) A DVD player?	q) DVD PLAYER . . 1 2	
	r) A satellite antenna or a cable TV channels?	r) SATELITE ANTENNA/DISH/CABLI 1 2	
	s) A freezer?	s) FREEZER 1 2	
	t) An electric fan?	t) FAN ELECTRIC 1 2	
	u) A sewing machine?	u) SEWING MACHINE 1 2	
	v) In-door heater?	v) INDOOR HEATE 1 2	
	w) A mini-generator like "dvizhok"?	w) GENERATOR 1 2	
	x) A fuel or wood stock?	x) WOOD 1 2	
	y) A carpet?	y) CARPET 1 2	
	z) A connection to the Internet?	z) INTERNET CONNECTION 1 2	
	tt) A dishwashing machine?	tt) DISHWASHING MACHINE 1 2	
	uu) A clothes dryer machine?	uu) DRYER FOR CLOTHES 1 2	
	vv) Electric water heater like a Termix?	vv) WATER HEATER TERMIX 1 2	
133	Does any member of this household own:	YES NO	
	a) A watch?	a) WATCH 1 2	
	b) A mobile phone?	b) MOBILE PHONE 1 2	
	c) A bicycle?	c) BICYCLE 1 2	
	d) A motorcycle or motor scooter?	d) MOTORCYCLE/SCOOTER . . 1 2	
	e) An animal-drawn cart?	e) ANIMAL-DRAWN CART 1 2	
	f) A car?	f) CAR 1 2	
	g) A boat with a motor?	g) BOAT WITH MOTOR 1 2	
	h) A truck?	h) TRUCK 1 2	
	i) A tractor?	i) TRACTOR 1 2	
	j) A combine-harvester?	j) COMBINE- HARVERSTER 1 2	
	k) Any agricultural equipment, such as a plow, a trailer, a mower or similar?	k) ANY AGRYCULT. EQUIPMENT/ PLOW/ TRAILER/ MOWER 1 2	
134	Does any member of this household have an account in a bank or other financial institution?	YES . . . . . 1 NO 2	→ 135
134A	How many of them are women and how many are men?	WOMEN TOTAL . . . . . [ ][ ] MEN TOTAL . . . . . [ ][ ] DON'T KNOW 98	
135	Does any member of this household use a mobile phone to make financial transactions such as sending or receiving money, paying bills, purchasing goods or services, or receiving wages?	YES . . . . . 1 NO 2	

HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
136	How often does anyone smoke inside your house? Would you say daily, weekly, monthly, less often than once a month, or never?	DAILY . . . . . 1 WEEKLY . . . . . 2 MONTHLY . . . . . 3 LESS OFTEN THAN ONCE A MONTH . . . . . 4 NEVER 5	
136A	In the past 12 month, has any member of the household worked abroad for three or more months at a time, including those currently working abroad?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 136D
136B	How many of them are women and how many are men?	WOMEN TOTAL . . . . . ☐☐ MEN TOTAL . . . . . ☐☐ DON'T KNOW 98	
136C	During the last time, when the household member worked abroad for three or more months, in which country did this person work, or still working?	RUSSIA . . . . . 1 KAZAKHSTAN . . . . . 2 OTHER FORMER USSR . . . . . 3 MIDDLE EAST/DUBAI . . . . . 4 EUROPE . . . . . 5 OTHER FARAWAY ABROAD . . . . . 6 DON'T KNOW 8	
136D	Over the past 12 months, have you or any member of your household received money and/or parcels from abroad?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 149
136E	From which country did you or your household receive money and, or parcels at the most recent time?	RUSSIA . . . . . 1 KAZAKHSTAN . . . . . 2 OTHER FORMER USSR . . . . . 3 MIDDLE EAST/DUBAI . . . . . 4 EUROPE . . . . . 5 OTHER FARAWAY ABROAD . . . . . 6 DON'T KNOW 8	
136F	In your opinion, over the past 12 months, how have remittances from abroad affected your family's financial situation, would you say substantially improved, slightly improved or has no effect?	SUBSTANTIALLY IMPROVED . . . . . 1 SLIGHTLY IMPROVED . . . . . 2 HAS NO EFFECT . . . . . 3 DON'T KNOW 8	

ADDITIONAL HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
149	We would like to learn about the places that households use to wash their hands. Can you please show me where members of your household most often wash their hands?	OBSERVED, FIXED PLACE . . . . . 1 OBSERVED, MOBILE . . . . . 2 NOT OBSERVED, NOT IN DWELLING/YARD/PLOT . . . . . 3 NOT OBSERVED, NO PERMISSION TO SEE . . 4 NOT OBSERVED, OTHER REASON 5	→ 152
150	OBSERVE PRESENCE OF WATER AT THE PLACE FOR HANDWASHING. RECORD OBSERVATION.	WATER IS AVAILABLE . . . . . 1 WATER IS NOT AVAILABLE 2	
151	OBSERVE PRESENCE OF SOAP, DETERGENT, OR OTHER CLEANSING AGENT AT THE PLACE FOR HANDWASHING. RECORD OBSERVATION.	SOAP OR DETERGENT (BAR, LIQUID, POWDER, PASTE) . . . . . A ASH, MUD, SAND . . . . . B NONE . . . . . Y	
152	OBSERVE MAIN MATERIAL OF THE FLOOR OF THE DWELLING. RECORD OBSERVATION.	**NATURAL FLOOR** EARTH/SAND/MUD . . . . . 11 **RUDIMENTARY FLOOR** WOOD PLANKS . . . . . 21 **FINISHED FLOOR** PARQUET OR POLISHED WOOD . . . . . 31 VINYL/ LINOLEUM . . . . . 32 CERAMIC TILES . . . . . 33 CEMENT . . . . . 34 CARPET . . . . . 35 OTHER _____ 96 (SPECIFY)	
153	OBSERVE MAIN MATERIAL OF THE ROOF OF THE DWELLING. RECORD OBSERVATION.	**NATURAL ROOFING** NO ROOF . . . . . 11 STRAW . . . . . 12 SOD . . . . . 13 EARTH/ MUD . . . . . 14 **RUDIMENTARY ROOFING** WOOD PLANKS . . . . . 23 CARDBOARD . . . . . 24 **FINISHED ROOFING** METAL . . . . . 31 WOOD . . . . . 32 SHIFFER /CEMENT FIBER/ASBES . . . . . 33 CERAMIC TILES . . . . . 34 CEMENT . . . . . 35 ROOFING SHINGLES . . . . . 36 TOL/ RUBEROID . . . . . 37 OTHER _____ 96 (SPECIFY)	

ADDITIONAL HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
154	OBSERVE MAIN MATERIAL OF THE EXTERIOR WALLS OF THE DWELLING. RECORD OBSERVATION.	**NATURAL WALLS** NO WALLS . . . . . 11 TRUNKS . . . . . 12 DIRT . . . . . 13 **RUDIMENTARY WALLS** STONE WITH MUD . . . . . 22 UNCOVERED ADOBE . . . . . 23 PLYWOOD . . . . . 24 CARDBOARD . . . . . 25 REUSED WOOD . . . . . 26 **FINISHED WALLS** CEMENT . . . . . 31 STONE WITH LIME/CEMENT . . . . . 32 BRICKS . . . . . 33 CEMENT BLOCKS . . . . . 34 COVERED ADOBE . . . . . 35 WOOD PLANKS/SHINGLES . . . . . 36 OTHER _____ 96 (SPECIFY)	
155	I would like to check whether the salt used in your household is iodized. May I have a sample of the salt used to cook meals in your household? TEST SALT FOR IODINE.	**SALT TESTED** IODINE PRESENT . . . . . 1 NO IODINE . . . . . 2 **SALT NOT TESTED** HOUSEHOLD USES SALT BUT THERE IS NO SALT IN THE HOUSEHOLD . . . . . 3 HOUSEHOLD DOES NOT USE SALT . . . . . 4 SALT NOT TESTED _____ 6 (SPECIFY REASON)	
156	RECORD THE TIME.	HOURS . . . . . [ ][ ] MINUTES . . . . . [ ][ ]	

INTERVIEWER'S OBSERVATIONS

TO BE FILLED IN AFTER COMPLETING INTERVIEW

COMMENTS ABOUT INTERVIEW:

COMMENTS ON SPECIFIC QUESTIONS:

ANY OTHER COMMENTS:

SUPERVISOR'S OBSERVATIONS

FORMATTING DATE: 18 July 2023
ENGLISH LANGUAGE: 18 July 2023

2023 DEMOGRAPHIC AND HEALTH SURVEY
WOMAN'S QUESTIONNAIRE

REPUBLIC OF TAJIKISTAN
AGENCY ON STATISTICS UNDER THE PRESIDENT OF THE REPUBLIC OF TAJIKISTAN
MINISTRY OF HEALTH AND SOCIAL PROTECTION OF THE POPULATION OF THE REPUBLIC OF TAJIKISTAN

IDENTIFICATION

PLACE NAME _____

NAME OF HOUSEHOLD HEAD _____

CLUSTER NUMBER . . . . . [ ][ ][ ][ ]

HOUSEHOLD NUMBER . . . . . [ ][ ][ ][ ]

NAME AND LINE NUMBER OF WOMAN _____ [ ][ ]

CHECK Q. 53 IN THE HOUSEHOLD QUESTIONNAIRE: WOMAN SELECTED FOR DV MODULE? (1=YES, 2=NO) [ ]

INTERVIEWER VISITS

	1	2	3	FINAL VISIT
DATE	_____	_____	_____	DAY [ ][ ]
				MONTH [ ][ ]
				YEAR [ ][ ][ ][ ]
INTERVIEWER'S NAME	_____	_____	_____	INT. NO. [ ][ ][ ][ ]
RESULT*	_____	_____	_____	RESULT* [ ]
NEXT VISIT: DATE	_____	_____		TOTAL NUMBER OF VISITS [ ]
TIME	_____	_____		

*RESULT CODES: 1 COMPLETED; 2 NOT AT HOME; 3 POSTPONED; 4 REFUSED; 5 PARTLY COMPLETED; 6 INCAPACITATED; 7 OTHER _____ (SPECIFY)

LANGUAGE OF QUESTIONNAIRE** [0][1] LANGUAGE OF INTERVIEW** [ ][ ] NATIVE LANGUAGE OF RESPONDENT** [ ][ ] TRANSLATOR USED (YES = 1, NO = 2) [ ]

LANGUAGE OF QUESTIONNAIRE** **ENGLISH**

**LANGUAGE CODES:
01 ENGLISH; 02 RUSSIAN; 03 TAJIK; 04 KYRGYZ; 05 UZBEK; 06 OTHER

TEAM	TEAM SUPERVISOR		CAPI SUPERVISOR	
[ ][ ]	_____	[ ][ ][ ][ ]	_____	[ ][ ][ ][ ]
NUMBER	NAME	NUMBER	NAME	NUMBER

INTRODUCTION AND CONSENT

Hello. My name is _____. I am working with the Agency on Statistics under the President of the Republic of Tajikistan. We are conducting a survey about health and other topics all over Tajikistan. The information we collect will help the government to plan health services. Your household was selected for the survey. The questions usually take about 30 to 60 minutes. All of the answers you give will be confidential and will not be shared with anyone other than members of our survey team. You don't have to be in the survey, but we hope you will agree to answer the questions since your views are important. If I ask you any question you don't want to answer, just let me know and I will go on to the next question or you can stop the interview at any time.

In case you need more information about the survey, you may contact the person listed on the card that has already been given to your household.

Do you have any questions?
May I begin the interview now?

SIGNATURE OF INTERVIEWER _____ DATE _____

RESPONDENT AGREES TO BE INTERVIEWED . . 1 ↓

RESPONDENT DOES NOT AGREE TO BE INTERVIEWED . . 2 → END

SECTION 1. RESPONDENT'S BACKGROUND

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101	RECORD THE TIME.	HOURS . . . . . ☐☐ MINUTES . . . . . ☐☐	
102	What oblast were you born in?	DUSHANBE . . . . . 01 GBAO . . . . . 02 SUGHD . . . . . 03 DRS . . . . . 04 KHATLON . . . . . 05 OUTSIDE OF TAJIKISTAN 96	→ 104
103	What country were you born in?	COUNTRY _____ ☐☐	
104	How long have you been living continuously in (NAME OF CURRENT CITY, TOWN OR VILLAGE OF RESIDENCE)? IF LESS THAN ONE YEAR, RECORD '00' YEARS.	YEARS . . . . . ☐☐ ALWAYS . . . . . 95 VISITOR 96	→ 110
105	CHECK 104: 00 - 04 YEARS ☐ ↓ 05 YEARS OR MORE ☐ →		107
106	In what month and year did you move here?	MONTH . . . . . ☐☐ DON'T KNOW MONTH . . . . . 98 YEAR . . . . . ☐☐☐☐ DON'T KNOW YEAR 9998	
107	Just before you moved here, which oblast did you live in?	DUSHANBE . . . . . 01 GBAO . . . . . 02 SUGHD . . . . . 03 DRS . . . . . 04 KHATLON . . . . . 05 OUTSIDE OF TAJIKISTAN 96	

SECTION 1. RESPONDENT'S BACKGROUND

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
108	Just before you moved here, did you live in a city, in a town, or in a rural area?	CITY . . . . . 1 TOWN . . . . . 2 RURAL AREA 3	
109	Why did you move to this place?	EMPLOYMENT . . . . . 01 EDUCATION/TRAINING . . . . . 02 MARRIAGE FORMATION . . . . . 03 FAMILY REUNIFICATION/OTHER FAMILY-RELATED REASON . . . . . 04 FORCED DISPLACEMENT . . . . . 05 OTHER _____ 96 (SPECIFY)	
110	In what month and year were you born?	MONTH . . . . . [ ][ ] DON'T KNOW MONTH . . . . . 98 YEAR . . . . . [ ][ ][ ][ ] DON'T KNOW YEAR 9998	
111	How old were you at your last birthday? COMPARE AND CORRECT 110 AND/OR 111 IF INCONSISTENT.	AGE IN COMPLETED YEARS . . . . . [ ][ ]	
112	In general, would you say your health is very good, good, moderate, bad, or very bad?	VERY GOOD . . . . . 1 GOOD . . . . . 2 MODERATE . . . . . 3 BAD . . . . . 4 VERY BAD 5	
113	Have you ever attended school?	YES . . . . . 1 NO 2	→ 117
114	What is the highest level of school you attended: general education school, professional primary (uchiliche), professional middle (teknikum, uchiliche, college), higher or postgraduate?	GENERAL EDUCATION SCHOOL . . . . . 1 PROFESSIONAL PRIMARY . . . . . 2 PROFESSIONAL MIDDLE . . . . . 3 HIGHER . . . . . 4 POSTGRAGUATE 5	
115	What is the highest [CLASS/COURSE/YEAR] you completed at that level? IF COMPLETED LESS THAN ONE YEAR AT THAT LEVEL, RECORD '00'.	CLASS/COURSE/YEAR . . . . . [ ][ ]	
115A	What is the total number of years of schooling you had? Please provide total numer of completed years of education, including in general school plus in any other educational insititution. IF COMPLETED LESS THAN ONE YEAR, RECORD '00'.	YEARS . . . . . [ ][ ]	
115B	CHECK 114 AND 115:PROFESSIONAL PRIMARY CODE '2' OR PROFESSIONAL MIDDLE CODE '3', OR GENERAL EDUCATION SCHOOL AND CLASS 10 OR 11 CODE '1' AND CLASS 10 OR 11, OR CODE '2' OR '3' CIRCLED [ ] ↓ CODE '1' AND CLASS 1-9, OR CODE '4' OR '5' CIRCLED [ ] → 116		
115C	Do you have an attestat for completing general school?	YES . . . . . 1 NO 2	

SECTION 1. RESPONDENT'S BACKGROUND

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
115D	CHECK 114: PROFESSIONAL PRIMARY CODE '2' OR PROFESSIONAL MIDDLE CODE '3' CIRCLED? YES, CODE '2' OR CODE '3' CIRCLED ☐ OTHER ☐		→ 116
115E	How many classes you completed in general school before you were enrolled in uchilishe, college or technikum?	CLASSES . . . . . ☐☐	
116	CHECK 114: GENERAL SCHOOL ☐ HIGHER ☐		→ 119
117	Now I would like you to read this sentence to me. SHOW CARD TO RESPONDENT. IF RESPONDENT CANNOT READ WHOLE SENTENCE, PROBE: Can you read any part of the sentence to me?	CANNOT READ AT ALL . . . . . 1 ABLE TO READ ONLY PART OF THE SENTENCE . . . . . 2 ABLE TO READ WHOLE SENTENCE . . . . . 3 NO CARD WITH REQUIRED LANGUAGE _____ 4 (SPECIFY LANGUAGE) BLIND/VISUALLY IMPAIRED 5	
118	CHECK 117: CODE '2', '3' OR '4' CIRCLED ☐ CODE '1' OR '5' CIRCLED ☐		→ 120
119	Do you read a newspaper or magazine at least once a week, less than once a week or not at all?	AT LEAST ONCE A WEEK . . . . . 1 LESS THAN ONCE A WEEK . . . . . 2 NOT AT ALL 3	
120	Do you listen to the radio at least once a week, less than once a week or not at all?	AT LEAST ONCE A WEEK . . . . . 1 LESS THAN ONCE A WEEK . . . . . 2 NOT AT ALL 3	
121	Do you watch television at least once a week, less than once a week or not at all?	AT LEAST ONCE A WEEK . . . . . 1 LESS THAN ONCE A WEEK . . . . . 2 NOT AT ALL 3	
122	Do you own a mobile phone?	YES . . . . . 1 NO 2	→ 127
123	Is your mobile phone a smart phone?	YES . . . . . 1 NO 2	
127	Have you ever used the Internet from any location on any device?	YES . . . . . 1 NO 2	→ 131
128	In the last 12 months, have you used the Internet? IF NECESSARY, PROBE FOR USE FROM ANY LOCATION, WITH ANY DEVICE.	YES . . . . . 1 NO 2	→ 131
129	During the last one month, how often did you use the Internet: almost every day, at least once a week, less than once a week, or not at all?	ALMOST EVERY DAY . . . . . 1 AT LEAST ONCE A WEEK . . . . . 2 LESS THAN ONCE A WEEK . . . . . 3 NOT AT ALL 4	
131	What is your ethnic group?	TAJIKS . . . . . 01 RUSSIANS . . . . . 02 UZBEKS . . . . . 03 KYRGYZ . . . . . 04 OTHER _____ 96 (SPECIFY)	

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?	YES . . . . . 1 NO 2	→ 206
202	Do you have any sons or daughters to whom you have given birth who are now living with you?	YES . . . . . 1 NO 2	→ 204
203	a) How many sons live with you? IF NONE, RECORD '00'. b) And how many daughters live with you? IF NONE, RECORD '00'.	a) SONS AT HOME . . . . . [ ][ ] b) DAUGHTERS 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 . . . . . 1 NO 2	→ 206
205	a) How many sons are alive but do not live with you? IF NONE, RECORD '00'. b) And how many daughters are alive but do not live with you? IF NONE, RECORD '00'.	a) SONS ELSEWHERE . . . . . [ ][ ] b) DAUGHTERS ELSEWHERE . . . . . [ ][ ]	
206	Have you ever given birth to a boy or girl who was born alive but later died? IF NO, PROBE: Any baby who cried, who made any movement, sound, or effort to breathe, or who showed any other signs of life even if for a very short time?	YES . . . . . 1 NO 2	→ 208
207	a) How many boys have died? IF NONE, RECORD '00'. b) How many boys have died? IF NONE, RECORD '00'.	a) BOYS DEAD . . . . . [ ][ ] b) GIRLS DEAD . . . . . [ ][ ]	
208	SUM ANSWERS TO 203, 205, AND 207, AND ENTER TOTAL. IF NONE, RECORD '00'.	TOTAL LIVE BIRTHS . . . . . [ ][ ]	
209	CHECK 208: Just to make sure that I have this right: you have had in total (NUMBER OF BIRTHS) births during your life. Is that correct? YES ☐ ↓ NO ☐ → PROBE AND CORRECT 201-208 AS NECESSARY.		
210	Women sometimes have a pregnancy that does not result in a live birth. For example, a pregnancy can end in a miscarriage, an abortion, or the child can be born dead. Have you ever had a pregnancy that did not end in a live birth?	YES . . . . . 1 NO 2	→ 212
211	How many miscarriages, abortions, and stillbirths have you had?	PREGNANCY LOSSES . . . . . [ ][ ]	
212	SUM ANSWERS TO 208 AND 211 AND ENTER TOTAL. IF NONE, RECORD '00'.	TOTAL PREGNANCY OUTCOMES . . [ ][ ]	
213	CHECK 212: ONE OR MORE PAST PREGNANCIES ☐ ↓ NO PAST PREGNANCIES ☐ →		→ 232

214 Now I would like to record all your pregnancies including live births, stillbirths, miscarriages, and abortions, starting with your first pregnancy.

RECORD ALL PREGNANCIES. RECORD TWINS AND TRIPLETS ON SEPARATE LINES.

PREGNANCY HISTORY LINE NUMBER	215	216	217	218	219	220	221	222
	IF ROW=01: Think back to your first pregnancy. Was that a single pregnancy, twins, or triplets? IF ROW>01: Think back to your next pregnancy. Was that a single pregnancy, twins, or triplets?	IF 215=SING: Was the baby born alive, born dead, or did you have a miscarriage or abortion? IF 215>1: FIRST OF MULT. Was the first baby in this pregnancy born alive or born dead? NEXT MULT. Was the next baby in this pregnancy born alive or born dead?	Did the baby cry, move, or breathe?	What name was given to the baby? RECORD NAME.	Is (NAME IN 218) a boy or a girl?	CHECK 216 AND 217: TYPE OF PREGNANCY OUTCOME. NOTE: IF 217=1, THEN PREGNANCY OUTCOME. IF BORN ALIVE: On what day, month, and year was (NAME IN 218) born? IF BORN DEAD, MISCARRIAGE, OR ABORTION: On what day, month, and year did this pregnancy end?	How long did this pregnancy last in weeks or months? RECORD IN COMPLETED WEEKS OR MONTHS.	IF ROW=01: Were there any other pregnancies before this pregnancy? IF ROW>01: Were there any other pregnancies between the previous pregnancy and this pregnancy? IF 215>1 AND THIS IS NOT THE FIRST BIRTH OF THE PREGNANCY, SKIP TO 216 IN NEXT ROW.
01	SING ... 1 TWINS 2 TRIP .... 3 QUAD . 4 QUIN ... 5	BORN ALIVE .. 1 (SKIP TO 218) BORN DEAD .. 2 MISCARRIAGE 3 (SKIP TO 220) ABORTION 4	YES ..... 1 NO ..... 2 (SKIP TO 220)	NAME	BOY .... 1 GIRL ... 2	DAY ☐☐ MONTH ☐☐ ☐☐☐☐ YEAR	WEEKS 1 ☐☐ MONTHS 2 ☐☐	YES ..... 1 (ADD PREGNANCY) NO ..... 2 (NEXT ROW)
02	SING ... 1 TWINS 2 TRIP .... 3 QUAD . 4 QUIN ... 5	BORN ALIVE .. 1 (SKIP TO 218) BORN DEAD .. 2 MISCARRIAGE 3 (SKIP TO 220) ABORTION 4	YES ..... 1 NO ..... 2 (SKIP TO 220)	NAME	BOY .... 1 GIRL ... 2	DAY ☐☐ MONTH ☐☐ ☐☐☐☐ YEAR	WEEKS 1 ☐☐ MONTHS 2 ☐☐	YES ..... 1 (ADD PREGNANCY) NO ..... 2 (NEXT ROW)
03	SING ... 1 TWINS 2 TRIP .... 3 QUAD . 4 QUIN ... 5	BORN ALIVE .. 1 (SKIP TO 218) BORN DEAD .. 2 MISCARRIAGE 3 (SKIP TO 220) ABORTION 4	YES ..... 1 NO ..... 2 (SKIP TO 220)	NAME	BOY .... 1 GIRL ... 2	DAY ☐☐ MONTH ☐☐ ☐☐☐☐ YEAR	WEEKS 1 ☐☐ MONTHS 2 ☐☐	YES ..... 1 (ADD PREGNANCY) NO ..... 2 (NEXT ROW)

222A	Have you had any pregnancies that ended since the last pregnancy	YES ..... 1 → ADD TO TABLE NO 2
222B	READ THE LIST OF PREGNANCY OUTCOMES IN ORDER TO THE RESPONDENT AND ASK IF THEY ARE ALL THAT SHE HAS EVER HAD, AND IF THEY ARE LISTED IN ORDER STARTING FROM THE FIRST ONE. DOES THE RESPONDENT AGREE? IF NOT, PROBE FOR THE CORRECT INFORMATION AND REVISE THE PREGNANCY HISTORY ACCORDINGLY.	

PREGNANCY HISTORY LINE NUMBER	223	224	225	226	227	228	228A	228B
			IF BORN ALIVE AND STILL LIVING:			IF BORN ALIVE AND NOW DEAD:		IF ABORTION
	CHECK 216, 217 AND 221: IF 216=1 OR 217=1, THEN PREGNANCY OUTCOME = BORN ALIVE. IF 216=2 OR 3, THEN CHECK 221. IF 221 ≥ 7 MONTHS OR 28 WEEKS, THEN PREGNANCY OUTCOME = BORN DEAD. IF 221 < 7 MONTHS OR 28 WEEKS, FINAL PREGNANCY OUTCOME = MISCARRIAGE. IF 216=4, THEN PREGNANCY OUTCOME =	Is (NAME IN 218) still alive?	IF 219=BOY: How old was (NAME IN 218) at his last birthday? RECORD AGE IN COMPLETE IF 219=GIRL How old was (NAME IN 218) at her last birthday? RECORD AGE IN COMPLETED YEARS.	Is (NAME IN 218) living with you?	RECORD HOUSEHOLD LINE NUMBER OF CHILD. RECORD '00' IF CHILD NOT LISTED IN HOUSEHOLD.	IF 219=BOY: How old was (NAME IN 218) when he died? IF '12 MONTHS' OR '1 YR', ASK: Did (NAME IN 218) have his first birthday? THEN ASK: Exactly how many months old was (NAME IN 218) when he died? RECORD DAYS IF LESS THAN 1 MONTH; MONTHS IF LESS THAN TWO YEARS; OR YEARS. IF 219=GIRL: How old was (NAME IN 218) when she died? IF '12 MONTHS' OR '1 YR', ASK: Did (NAME IN 218) have her first birthday? THEN ASK: Exactly how many months old was (NAME IN 218) when she died? RECORD DAYS IF LESS THAN 1 MONTH; MONTHS IF LESS THAN TWO YEARS; OR YEARS	Does (NAME IN 218) have a death certificate? IF NO, PROBE: Has (NAME IN 218)'s death ever been registered in ZAGS? 1 = CERTIFICATE 2 =REGISTERED 3 = NEITHER 8 = DON'T KNOW	What was the main reason you decided to have this abortion? 1 = HER HEALTH 2 = INBORN DEFECTS 3 = SEX SELECTION 4 =POVERTY 5 = UNWANTED CHILD 6=UNMARRIED 7 =COVID 8 = DON'T REMEMBER 9 = OTHER
01	BORN ALIVE ..... 1 1 BORN DEAD ..... 2 MISCARRIAGE . 3 NEXT PREGN. ABORTION ..... 4 SKIP TO 228B	YES ..... 1 NO ..... 2 (SKIP TO 228)	AGE IN YEARS	YES ..... 1 NO 2	HOUSEHOLD LINE NUMBER (SKIP TO 223 IN NEXT ROW)	DAYS 1 MONTHS 2 YEARS 3	NEXT PREGNANCY	NEXT PREGNANCY
02	BORN ALIVE ..... 1 BORN DEAD ..... 2 MISCARRIAGE . 3 NEXT PREGN. ABORTION ..... 4 SKIP TO 228B	YES ..... 1 NO ..... 2 (SKIP TO 228)	AGE IN YEARS	YES ..... 1 NO 2	HOUSEHOLD LINE NUMBER (SKIP TO 223 IN NEXT ROW)	DAYS 1 MONTHS 2 YEARS 3	NEXT PREGNANCY	NEXT PREGNANCY
03	BORN ALIVE ..... 1 BORN DEAD ..... 2 MISCARRIAGE . 3 NEXT PREGN. ABORTION ..... 4 SKIP TO 228B	YES ..... 1 NO ..... 2 (SKIP TO 228)	AGE IN YEARS	YES ..... 1 NO 2	HOUSEHOLD LINE NUMBER (SKIP TO 223 IN NEXT ROW)	DAYS 1 MONTHS 2 YEARS 3	NEXT PREGNANCY	NEXT PREGNANCY

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
230	COMPARE 212 WITH NUMBER OF PREGNANCY OUTCOMES IN PREGNANCY HISTORY NUMBER IN PREGNANCY HISTORY IS GREATER THAN OR EQUAL TO 212 ☐ NUMBER IN PREGNANCY HISTORY IS LESS THAN 212 ☐ (PROBE AND RECONCILE)		
231	**C** FOR EACH LIVE BIRTH IN 2018-2023, ENTER 'B' IN THE MONTH OF BIRTH IN THE CALENDAR. WRITE THE NAME OF THE CHILD TO THE LEFT OF THE 'B' CODE. FOR EACH LIVE BIRTH, RECORD 'P' IN EACH OF THE PRECEDING MONTHS ACCORDING TO THE DURATION OF PREGNANCY. (NOTE: THE NUMBER OF 'P's MUST BE ONE LESS THAN THE NUMBER OF MONTHS THAT THE PREGNANCY LASTED.) FOR EACH PREGNANCY THAT DID NOT END IN A LIVE BIRTH IN 2018-2023, ENTER 'T' IN THE CALENDAR IN THE MONTH THAT THE PREGNANCY TERMINATED AND 'P' FOR THE REMAINING NUMBER OF COMPLETED MONTHS OF PREGNANCY. IF DURATION OF PREGNANCY WAS REPORTED IN WEEKS, MULTIPLY THE NUMBER OF WEEKS BY 0.23 TO CONVERT TO THE NUMBER OF MONTHS. ROUND DOWN TO THE NEAREST WHOLE NUMBER TO GET THE NUMBER OF COMPLETED MONTHS.		
232	Are you pregnant now?	YES . . . . . 1 NO . . . . . 2 UNSURE 8	→ 236
233	How many weeks or months pregnant are you? RECORD NUMBER OF COMPLETED WEEKS OR MONTHS. **C** ENTER 'P's IN THE CALENDAR, BEGINNING WITH THE MONTH OF INTERVIEW AND FOR THE TOTAL NUMBER OF COMPLETED MONTHS. IF DURATION OF PREGNANCY WAS REPORTED IN WEEKS, MULTIPLY THE NUMBER OF WEEKS BY 0.23 TO CONVERT TO THE NUMBER OF MONTHS. ROUND DOWN TO THE NEAREST WHOLE NUMBER TO GET THE NUMBER OF COMPLETED MONTHS.	WEEKS . . . . . 1 ☐☐ MONTHS . . . . . 2 ☐☐	
234	When you got pregnant, did you want to get pregnant at that time?	YES . . . . . 1 NO 2	→ 236
235	CHECK 208: TOTAL NUMBER OF LIVE BIRTHS ONE OR MORE ☐ → a) Did you want to have a baby later on or did you not want any more children? NONE ☐ → b) Did you want to have a baby later on or did you not want any children?	LATER . . . . . 1 NO MORE/NONE 2	

SECTION 2. REPRODUCTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
236	When did your last menstrual period start? _____ (DATE, IF GIVEN)	DAYS AGO . . . . . 1 [ ][ ] WEEKS AGO . . . . . 2 [ ][ ] MONTHS AGO . . . . . 3 [ ][ ] YEARS AGO . . . . . 4 [ ][ ] IN MENOPAUSE/ HAS HAD HYSTERECTOMY . . . . . 994 → 240 BEFORE LAST PREGNANCY . . . . . 995 NEVER MENSTRUATED . . . . . 996 → 241	
237	CHECK 236: WAS THE LAST MENSTRUAL PERIOD WITHIN THE LAST YEAR? YES, WITHIN LAST YEAR ↓ ☐ NO, ONE YEAR OR MORE ☐ → 240		
238	During your last menstrual period, what did you use to collect or absorb your menstrual blood? Anything else?	REUSABLE SANITARY PADS . . . . . A DISPOSABLE SANITARY PADS . . . . . B TAMPONS . . . . . C CLOTH . . . . . E TOILET PAPER . . . . . F COTTON WOOL . . . . . G UNDERWEAR ONLY . . . . . H OTHER _____ X (SPECIFY) NOTHING . . . . . Y	
239	During your last menstrual period, were you able to wash and change in privacy while at home?	YES . . . . . 1 NO . . . . . 2 AWAY FROM HOME DURING LAST MENSTRUAL PERIOD 3	
240	How old were you when you had your first menstrual period?	AGE . . . . . [ ][ ] DON'T KNOW 98	
241	From one menstrual period to the next, are there certain days when a woman is more likely to become pregnant?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW . . . . . 8 → 243	
242	Is this time just before her period begins, during her period, right after her period has ended, or halfway between two periods?	JUST BEFORE HER PERIOD BEGINS . . . . . 1 DURING HER PERIOD . . . . . 2 RIGHT AFTER HER PERIOD HAS ENDED . . . . . 3 HALFWAY BETWEEN TWO PERIODS . . . . . 4 OTHER _____ 6 (SPECIFY) DON'T KNOW 8	
243	After the birth of a child, can a woman become pregnant before her menstrual period has returned?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	

SECTION 3. CONTRACEPTION

301	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. Have you ever heard of (METHOD)?	
01	Female Sterilization. PROBE: Women can have an operation to avoid having any more children.	YES . . . . . 1 NO 2
02	Male Sterilization. PROBE: Men can have an operation to avoid having any more children.	YES . . . . . 1 NO 2
03	IUD. PROBE: Women can have a loop or coil placed inside them by a doctor or a nurse which can prevent pregnancy for one or more years.	YES . . . . . 1 NO 2
04	Injectables. PROBE: Women can have an injection by a health provider that stops them from becoming pregnant for one or more months.	YES . . . . . 1 NO 2
05	Implants. PROBE: Women can have one or more small rods placed in their upper arm by a doctor or nurse which can prevent pregnancy for one or more years.	YES . . . . . 1 NO 2
06	Pill. PROBE: Women can take a pill every day to avoid becoming pregnant.	YES . . . . . 1 NO 2
07	Condom. PROBE: Men can put a rubber sheath on their penis before sexual intercourse.	YES . . . . . 1 NO 2
08	Female Condom. PROBE: Women can place a sheath in their vagina before sexual intercourse.	YES . . . . . 1 NO 2
09	Emergency Contraception. PROBE: As an emergency measure, within 3 days after they have unprotected sexual intercourse, women can take special pills to prevent pregnancy.	YES . . . . . 1 NO 2
11	Lactational Amenorrhea Method (LAM). PROBE: Up to 6 months after childbirth, before the menstrual period has returned, women use a method requiring frequent breastfeeding day and night.	YES . . . . . 1 NO 2
12	Rhythm Method. PROBE: To avoid pregnancy, women do not have sexual intercourse on the days of the month they think they can get pregnant.	YES . . . . . 1 NO 2
13	Withdrawal. PROBE: Men can be careful and pull out before climax.	YES . . . . . 1 NO 2
14	Have you heard of any other ways or methods that women or men can use to avoid pregnancy?	YES, MODERN METHOD _____ A (SPECIFY) YES, TRADITIONAL METHOD _____ B (SPECIFY) NO . . . . . Y

SECTION 3. CONTRACEPTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
302	CHECK 232: NOT PREGNANT OR UNSURE ☐↓ PREGNANT ☐ → 317		
303	Are you or your partner currently doing something or using any method to delay or avoid getting pregnant?	YES . . . . . 1 NO 2	→ 307
304	Are you or your partner sterilized? IF YES: Who is sterilized, you or your partner?	YES, RESPONDENT STERILIZED ONLY . . . . . 1 YES, PARTNER STERILIZED ONLY . . . . . 2 YES, BOTH STERILIZED . . . . . 3 NO, NEITHER STERILIZED 4	→ 306
305	CHECK 304: RESPONDENT STERILIZED ONLY ☐↓ — PROCEED TO 307. CIRCLE CODE 'A' AND FOLLOW THE SKIP INSTRUCTION. PARTNER STERILIZED ONLY ☐↓ — PROCEED TO 307. CIRCLE CODE 'B' AND FOLLOW THE SKIP INSTRUCTION. BOTH STERILIZED ☐↓ — PROCEED TO 307. CIRCLE CODE 'A' AND CODE 'B' AND FOLLOW THE SKIP INSTRUCTION.		
306	Just to check, are you or your partner doing any of the following to avoid pregnancy: deliberately avoiding sex on certain days, using a condom, using withdrawal or using emergency contraception?	YES . . . . . 1 NO 2	→ 317
307	Which method are you using? RECORD ALL MENTIONED.	FEMALE STERILIZATION . . . . . A MALE STERILIZATION . . . . . B IUD . . . . . C INJECTABLES . . . . . D IMPLANTS . . . . . E PILL . . . . . F CONDOM . . . . . G FEMALE CONDOM . . . . . H EMERGENCY CONTRACEPTION . . . . . I LACTATIONAL AMENORRHEA METHOD . . . . . K RHYTHM METHOD . . . . . L WITHDRAWAL . . . . . M OTHER MODERN METHOD . . . . . X OTHER TRADITIONAL METHOD . . . . . Y	A → 312 B → 312 C–I → 314 K–Y → 314

SECTION 3. CONTRACEPTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
312	In what facility did the sterilization take place? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD '96' AND WRITE THE NAME OF THE PLACE.	**PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . 11 MATERNITY HOME . . . . . 12 URBAN/RAYON/RURAL HEALTH CENTE . . . . . 13 REPRODUCTIVE HEALTH CENTE . . . . . 14 HEALTH HOUSE . . . . . 15 INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS CENTER . . . . . 16 IMMUNOPROPHYLAXIS CENTER . . . . . 17 AIDS CENTER . . . . . 18 MOBILE CLINIC OF AIDS CENTER . . . . . 19 HEALTHY LIFESTYLE CENTER . . . . . 20 FAMILY MEDICINE CENTER . . . . . 21 OTHER PUBLIC SECTOR _____ 26 (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . 31 PRIVATE CLINIC . . . . . 32 PRIVATE DOCTOR'S OFFICE . . . . . 33 PRIVATE LABORATORY . . . . . 34 PHARMACY . . . . . 35 OTHER PRIVATE MEDICAL SECTOR _____ 36 (SPECIFY) OTHER _____ 96 (SPECIFY) DON'T KNOW 98	
313	In what month and year was the sterilization performed?	MONTH . . . . . ☐☐ YEAR . . . . . ☐☐☐☐	→ 315
314	Since what month and year have you been using (METHOD) without stopping? PROBE: For how long have you been using (METHOD) now without stopping?	MONTH . . . . . ☐☐ YEAR . . . . . ☐☐☐☐	
315	CHECK 313 AND 314, AND 220: ANY LIVE BIRTH, STILLBIRTH, MISSCARRIAGE OR ABORTION AFTER MONTH AND YEAR OF START OF USE OF CONTRACEPTION IN 313 OR 314? NO ☐ ↓ YES ☐ → GO BACK TO 313 OR 314, PROBE AND RECORD MONTH AND YEAR AT START OF CONTINUOUS USE OF CURRENT METHOD (MUST BE AFTER LAST BIRTH OR PREGNANCY TERMINATION).		

SECTION 3. CONTRACEPTION (CAPI OPTION)

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
316	CHECK 313 AND 314: YEAR IS 2018-2023 **C** ENTER CODE FOR METHOD USED IN MONTH OF INTERVIEW IN THE CALENDAR AND IN EACH MONTH BACK TO THE DATE STARTED USING. THEN CONTINUE YEAR IS 2017 OR EARLIER **C** ENTER CODE FOR METHOD USED IN MONTH OF INTERVIEW IN THE CALENDAR AND EACH MONTH BACK TO JANUARY 2018 . THEN (SKIP TO 329)		
317	I would like to ask you some questions about the times you or your partner may have used a method to avoid getting pregnant during the last few years. USE CALENDAR TO PROBE FOR EARLIER PERIODS OF USE AND NONUSE, STARTING WITH MOST RECENT USE, BACK TO JANUARY 2018. USE NAMES OF CHILDREN, DATES OF BIRTH, AND PERIODS OF PREGNANCY AS REFERENCE POINTS.		**C**
317A	MONTH AND YEAR OF START OF INTERVAL OF USE OR NON-USE.	MONTH . . . . . [ ][ ] YEAR . . . . . [ ][ ][ ][ ]	
317B	Between (EVENT ONE) in (MONTH/YEAR ONE) and (EVENT TWO) in (MONTH/YEAR TWO), did you or your partner use any method of contraception?	YES . . . . . 1 NO 2	→ 317I
317C	Which method was that?	METHOD CODE . . . . . [ ]	
317D	How many months after (EVENT ONE) in (MONTH/YEAR ONE) did you start to use the (METHOD)? RECORD '95' IF THE RESPONDENT SAYS THE DATE OF STARTING TO USE THE METHOD.	IMMEDIATELY . . . . . 00 MONTHS . . . . . [ ][ ] DATE GIVEN 95	→ 317F
317E	RECORD MONTH AND YEAR RESPONDENT STARTED USING METHOD.	MONTH . . . . . [ ][ ] YEAR . . . . . [ ][ ][ ][ ]	
317F	For how many months did you use the (METHOD) continuously? RECORD '95' IF RESPONDENT GAVE THE DATE OF TERMINATION OF USE	MONTHS . . . . . [ ][ ] DATE GIVEN 95	→ 317H
317G	RECORD MONTH AND YEAR RESPONDENT STOPPED USING METHOD.	MONTH . . . . . [ ][ ] YEAR . . . . . [ ][ ][ ][ ]	
317H	Why did you stop using (METHOD)?	REASON STOPPED . . . . . [ ]	
317I	GO BACK TO 317A FOR NEXT GAP; OR, IF NO MORE GAPS, GO TO 318.		

SECTION 3. CONTRACEPTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
318	Have you used emergency contraception in the last 12 months? That is, have you taken special pills within 3 days after having unprotected sexual intercourse to prevent pregnancy?	YES . . . . . 1 NO 2	
319	CHECK THE CALENDAR FOR USE OF ANY CONTRACEPTIVE METHOD IN ANY MONTH NO METHOD USED ☐ ↓ ANY METHOD USED ☐		→ 321
320	Have you ever used anything or tried in any way to delay or avoid getting pregnant?	YES . . . . . 1 NO 2	→ 331
321	CHECK 307: CIRCLE METHOD CODE: IF MORE THAN ONE METHOD CODE CIRCLED IN 307, CIRCLE CODE FOR HIGHEST METHOD IN LIST.	NO CODE CIRCLED . . . . . 00 FEMALE STERILIZATION . . . . . 01 MALE STERILIZATION . . . . . 02 IUD . . . . . 03 INJECTABLES . . . . . 04 IMPLANTS . . . . . 05 PILL . . . . . 06 CONDOM . . . . . 07 FEMALE CONDOM . . . . . 08 EMERGENCY CONTRACEPTION . . . . . 09 LACTATIONAL AMENORRHEA METHOD . . . . . 11 RHYTHM METHOD . . . . . 12 WITHDRAWAL . . . . . 13 OTHER MODERN METHOD . . . . . 95 OTHER TRADITIONAL METHOD 96	→ 331 → 324 → 332 → 332 → 332

SECTION 3. CONTRACEPTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
322	You first started using (METHOD) in (DATE FROM 314). Where did you get it at that time? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD '96' AND WRITE THE NAME OF THE PLACE.	**PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . 11 MATERNITY HOME . . . . . 12 URBAN/RAYON/RURAL HEALTH CENTE . . . . . 13 REPRODUCTIVE HEALTH CENTE . . . . . 14 HEALTH HOUSE . . . . . 15 INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS CENTER . . . . . 16 IMMUNOPROPHYLAXIS CENTER . . . . . 17 AIDS CENTER . . . . . 18 MOBILE CLINIC OF AIDS CENTER . . . . . 19 HEALTHY LIFESTYLE CENTER . . . . . 20 FAMILY MEDICINE CENTER . . . . . 21 PATRONAGE MEDICAL WORKER . . . . . 22 OTHER PUBLIC SECTOR _____ 26 (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . 31 PRIVATE CLINIC . . . . . 32 PRIVATE DOCTOR . . . . . 33 PRIVATE LABORATORY . . . . . 34 PHARMACY . . . . . 35 PATRONAGE MEDICAL WORKER . . . . . 36 OTHER PRIVATE MEDICAL SECTOR _____ 37 (SPECIFY) **OTHER SOURCE** SHOP . . . . . 41 FRIEND/RELATIVE . . . . . 43 OTHER _____ 96 (SPECIFY)	
323	At that time, were you told about side effects or problems you might have with the method?	YES . . . . . 1 NO 2	→ 325
324	When you got sterilized, were you told about side effects or problems you might have with the method?	YES . . . . . 1 NO 2	
325	Were you told what to do if you experienced side effects or problems?	YES . . . . . 1 NO 2	
326	At that time, were you told about other methods of family planning that you could use?	YES . . . . . 1 NO 2	
327	CHECK 307: CIRCLE METHOD CODE: IF MORE THAN ONE METHOD CODE CIRCLED IN 307, CIRCLE CODE FOR HIGHEST METHOD IN LIST.	FEMALE STERILIZATION . . . . . 01 IUD . . . . . 03 INJECTABLES . . . . . 04 IMPLANTS . . . . . 05 PILL . . . . . 06 CONDOM . . . . . 07 FEMALE CONDOM . . . . . 08 EMERGENCY CONTRACEPTION . . . . . 09 OTHER MODERN METHOD 95	→ 332
328	At that time, were you told that you could switch to another method if you wanted to or needed to?	YES . . . . . 1 NO 2	→ 330

SECTION 3. CONTRACEPTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
329	CHECK 307: CIRCLE METHOD CODE: IF MORE THAN ONE METHOD CODE CIRCLED IN 307, CIRCLE CODE FOR HIGHEST METHOD IN LIST.	FEMALE STERILIZATION . . . . . 01 MALE STERILIZATION . . . . . 02 IUD . . . . . 03 INJECTABLES . . . . . 04 IMPLANTS . . . . . 05 PILL . . . . . 06 CONDOM . . . . . 07 FEMALE CONDOM . . . . . 08 EMERGENCY CONTRACEPTION . . . . . 09 LACTATIONAL AMENORRHEA METHOD . . . . . 11 RHYTHM METHOD . . . . . 12 WITHDRAWAL . . . . . 13 OTHER MODERN METHOD . . . . . 95 OTHER TRADITIONAL METHOD 96	→ 332 → 332 → 332
330	Where did you obtain (METHOD) the last time? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD '96' AND WRITE THE NAME OF THE PLACE.	**PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . 11 MATERNITY HOME . . . . . 12 URBAN/RAYON/RURAL HEALTH CENTE . . . . . 13 REPRODUCTIVE HEALTH CENTE . . . . . 14 HEALTH HOUSE . . . . . 15 INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS CENTER . . . . . 16 IMMUNOPROPHYLAXIS CENTER . . . . . 17 AIDS CENTER . . . . . 18 MOBILE CLINIC OF AIDS CENTER . . . . . 19 HEALTHY LIFESTYLE CENTER . . . . . 20 FAMILY MEDICINE CENTER . . . . . 21 PATRONAGE MEDICAL WORKER . . . . . 22 OTHER PUBLIC SECTOR _____ 26 (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . 31 PRIVATE CLINIC . . . . . 32 PRIVATE DOCTOR . . . . . 33 PRIVATE LABORATORY . . . . . 34 PHARMACY . . . . . 35 PATRONAGE MEDICAL WORKER . . . . . 36 OTHER PRIVATE MEDICAL SECTOR _____ 37 (SPECIFY) **OTHER SOURCE** SHOP . . . . . 41 FRIEND/RELATIVE . . . . . 43 SAME SOURCE AS FIRST SOURCE USED 95 OTHER _____ 96 (SPECIFY)	→ 332

SECTION 3. CONTRACEPTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
331	Do you know of a place where you can obtain a method of family planning?	YES . . . . . 1 NO 2	
332	In the last 12 months, were you visited by a medical worker?	YES . . . . . 1 NO 2	→ 334
333	Did the medical worker talk to you about family planning?	YES . . . . . 1 NO 2	
334	CHECK 202: CHILDREN LIVING WITH YES ↓ a) In the last 12 months, have you visited a health facility for care for yourself or your children? NO ↓ b) In the last 12 months, have you visited a health facility for care for yourself?	YES . . . . . 1 NO 2	→ 401
335	Did any staff member at the health facility speak to you about family planning methods?	YES . . . . . 1 NO 2	

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
401	CHECK 220 AND 225: ONE OR MORE PREGNANCY OUTCOMES 0-35 MONTHS BEFORE THE SURVEY ☐ NO PREGNANCY OUTCOMES 0-35 MONTHS BEFORE THE SURVEY ☐ → 601		601
402	CHECK 220. LIST THE PREGNANCY HISTORY NUMBER IN 215 FOR EACH PREGNANCY OUTCOME 0-35 MONTHS BEFORE THE SURVEY, STARTING FROM THE LAST ONE. CLASSIFY EACH PREGNANCY OUTCOME BY TYPE USING 223 AND THE ORDER OF OUTCOMES IN THE PREGNANCY HISTORY. **PREGNANCY OUTCOME TYPE** MOST RECENT LIVE BIRTH 1 PRIOR LIVE BIRTH 2 MOST RECENT STILLBIRTH 3 PRIOR STILLBIRTH 4 ABORTION OR MISCARRIAGE 5 PREGNANCY HISTORY NUMBER . . ☐☐ PREGNANCY OUTCOME TYPE . . . . ☐ PREGNANCY HISTORY NUMBER . . ☐☐ PREGNANCY OUTCOME TYPE . . . . ☐ PREGNANCY HISTORY NUMBER . . ☐☐ PREGNANCY OUTCOME TYPE . . . . ☐ PREGNANCY HISTORY NUMBER . . ☐☐ PREGNANCY OUTCOME TYPE . . . . ☐ PREGNANCY HISTORY NUMBER . . ☐☐ PREGNANCY OUTCOME TYPE . . . . ☐ PREGNANCY HISTORY NUMBER . . ☐☐ PREGNANCY OUTCOME TYPE . . . . ☐		
403	Now I would like to ask some questions about your pregnancies in the last 3 years. We will talk about each separately, starting with the last one you had.		
404	PREGNANCY HISTORY NUMBER FROM 402.	PREGNANCY HISTORY NUMBER . . . . ☐☐	
404A	During this pregnancy, did you get sick with the COVID-19?	YES . . . . 1 NO . . . . 2 DON'T KNOW 8	
405	PREGNANCY OUTCOME TYPE FROM 402.	MOST RECENT LIVE BIRTH . . . . 1 PRIOR LIVE BIRTH . . . . 2 MOST RECENT STILLBIRTH . . . . 3 PRIOR STILLBIRTH . . . . 4 MISCARRIAGE/ABORTION 5	1, 2 → 407
406	RECORD DATE PREGNANCY ENDED FROM 220.	DAY . . . . ☐☐ MONTH . . . . ☐☐ YEAR . . . . ☐☐☐☐	→ 408

407	RECORD NAME FROM 218. NAME_____		
408	CHECK 405: PREGNANCY TYPE 1 OR 2 ☐ → a) When you got pregnant with (NAME IN 407), did you want to get pregnant at that time? PREGNANCY TYPE 3, 4, OR 5 ☐ → b) When you got pregnant with the pregnancy that ended in (DATE FROM 406), did you want to get pregnant at that time?	YES . . . . . 1 NO 2	→ 411

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
NO.	NAME OR DATE_____	PREGNANCY HISTORY NUMBER . . ☐☐	
409	Did you want to have a baby later on, or not at all?	LATER . . . . . 1 NOT AT ALL 2	→ 411
410	How much longer did you want to wait?	MONTHS . . . . . 1 ☐☐ YEARS . . . . . 2 ☐☐ DON'T KNOW 998	
411	CHECK 405: PREGNANCY OUTCOME TYPE	MOST RECENT LIVE BIRTH . . . . . 1 PRIOR LIVE BIRTH . . . . . 2 MOST RECENT STILLBIRTH . . . . . 3 PRIOR STILLBIRTH . . . . . 4 ABORTION/MISCARRIAGE 5	→ 434 → 434 → 475
412	Did you see anyone for antenatal care for this pregnancy?	YES . . . . . 1 NO 2	→ 414
413	CHECK 405: PREGNANCY OUTCOME TYPE MOST RECENT LIVE BIRTH (SKIP TO 426A) ☐ ←	MOST RECENT STILLBIRTH ☐	→ 426A
414	Whom did you see? Anyone else? PROBE TO IDENTIFY EACH TYPE OF PERSON AND RECORD ALL MENTIONED.	**HEALTH PERSONNEL** FAMILY DOCTOR . . . . . A OBSTETRICIAN-GYNECOLOGIST . . . . . B OTHER DOCTOR . . . . . C NURSE/MALE NURSE . . . . . D MIDWIFE . . . . . E **OTHER PERSON** TRADITIONAL BIRTH ATTENDANT . . . . . F OTHER _____ X (SPECIFY)	

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
415	Where did you receive antenatal care for this pregnancy? Anywhere else? PROBE TO IDENTIFY TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD 'X' AND WRITE THE NAME OF THE PLACE(S).	**HOME** HER HOME . . . . . A OTHER HOME . . . . . B **PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . C MATERNITY HOME . . . . . D URBAN/RAYON/RURAL HEALTH CENTE . . . . . E REPRODUCTIVE HEALTH CENTE . . . . . F HEALTH HOUSE . . . . . G FAMILY MEDICINE CENTE . . . . . H OTHER PUBLIC SECTOR _____ I (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . J PRIVATE CLINIC . . . . . K OTHER PRIVATE MEDICAL SECTOR _____ L (SPECIFY) OTHER _____ X (SPECIFY)	
416	How many weeks or months pregnant were you when you first received antenatal care for this pregnancy?	WEEKS . . . . . 1 ☐☐ MONTHS . . . . . 2 ☐☐ DON'T KNOW 998	
417	How many times did you receive antenatal care during this pregnancy?	NUMBER OF TIMES . . . . . ☐☐ DON'T KNOW 98	
418	As part of your antenatal care during this pregnancy, did a healthcare provider do any of the following: a) Measure your blood pressure? b) Take a urine sample? c) Take a blood sample? d) Listen to the baby's heartbeat? e) Talk with you about which foods or how much food you should eat? f) Talk with you about breastfeeding? g) Ask you if you had vaginal bleeding?	YES NO DK a) BLOOD PRESSURE . . . . . 1 2 8 b) URINE . . . . . 1 2 8 c) BLOOD . . . . . 1 2 8 d) HEARTBEAT . . . . . 1 2 8 e) FOODS . . . . . 1 2 8 f) BREASTFEED . . . . . 1 2 8 g) BLEEDING 1 2 8	
426A	Immediatelly before this pregnancy, did you take the folic acid tablets to prevent some birth defects? SHOW THE PILLS	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
426B	During the first 3 months of this pregnancy, did you take the folic acid tablets to prevent some birth defects? SHOW THE PILLS	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
426	During this pregnancy, were you given or did you buy any iron tablets or iron syrup? SHOW TABLETS/SYRUP/MULTIPLE MICRONUTRIENT SUPPLEMENT.	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 430A
427	Where did you get the iron tablets or syrup? Anywhere else? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD 'X' AND WRITE THE NAME OF THE PLACE(S).	**PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . A MATERNITY HOME . . . . . B URBAN/RAYON/RURAL HEALTH CENTE . . . . . C REPRODUCTIVE HEALTH CENTE . . . . . D HEALTH HOUSE . . . . . E INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS CENTER . . . . . F IMMUNOPROPHYLAXIS CENTER . . . . . G HEALTHY LIFESTYLE CENTER . . . . . H FAMILY MEDICINE CENTER . . . . . I PATRONAGE MEDICAL WORKEF . . . . . J OTHER PUBLIC SECTOR _____ K (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . L PRIVATE CLINIC . . . . . M PRIVATE DOCTOR . . . . . N PRIVATE LABORATORY . . . . . O PHARMACY . . . . . P PATRONAGE MEDICAL WORKEF . . . . . Q OTHER PRIVATE MEDICAL SECTOR _____ R (SPECIFY) **OTHER SOURCE** SHOP . . . . . S MARKET . . . . . T OTHER _____ X (SPECIFY)	
428	During the whole pregnancy, for how many days did you take the iron tablets or syrup? IF ANSWER IS NOT NUMERIC, PROBE FOR APPROXIMATE NUMBER OF DAYS.	DAYS . . . . . [ ][ ][ ] DON'T KNOW 998	
430A	Are you eligible to receive food or cash assistance through the Addressnaya Socialnaya Pomosh program?	YES . . . . . 1 NO . . . . . 2 НЕ ЗНАЮ 8	
430	During this pregnancy, did you receive food or cash assistance through the Addressnaya Socialnaya Pomosh program?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
434	CHECK 405: PREGNANCY TYPE 1 OR 2 → a) Who assisted with the delivery of (NAME IN 407)? Anyone else? PROBE FOR THE TYPE(S) OF PERSON(S) AND RECORD ALL MENTIONED. IF RESPONDENT SAYS NO ONE ASSISTED, PROBE TO DETERMINE WHETHER ANY ADULTS WERE PREGNANCY TYPE 3 OR 4 → b) Who assisted with the delivery of the stillbirth you had in (DATE FROM 406)? Anyone else? PROBE FOR THE TYPE(S) OF PERSON(S) AND RECORD ALL MENTIONED. IF RESPONDENT SAYS NO ONE ASSISTED, PROBE TO DETERMINE WHETHER ANY	**HEALTH PERSONNEL** FAMILY DOCTOR . . . . . A OBSTETRICIAN-GYNECOLOGIST . . . . . B OTHER DOCTOR . . . . . C NURSE/MALE NURSE . . . . . D MIDWIFE . . . . . E **OTHER PERSON** TRADITIONAL BIRTH ATTENDANT . . . . . F RELATIVE/FRIEND . . . . . G OTHER _____ X (SPECIFY) NO ONE ASSISTED . . . . . Y	
435	CHECK 405: PREGNANCY TYPE 1 OR 2 → a) Where did you give birth to (NAME IN 407)? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD '96' AND WRITE THE NAME OF THE PLACE. PREGNANCY TYPE 3 OR 4 → b) Where did you deliver this stillbirth? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD '96' AND WRITE THE NAME OF THE PLACE.	**HOME** HER HOME . . . . . 11 OTHER HOME . . . . . 12 **PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . 21 MATERNITY HOME . . . . . 22 URBAN/RAYON/RURAL HEALTH CENTER 23 HEALTH HOUSE . . . . . 24 FAMILY MEDICINE CENTER . . . . . 25 OTHER PUBLIC SECTOR _____ 26 (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . 31 PRIVATE CLINIC . . . . . 32 OTHER PRIVATE MEDICAL SECTOR _____ 36 (SPECIFY) OTHER _____ 96 (SPECIFY)	11, 12 → 437 96 → 437
436	CHECK 405: PREGNANCY TYPE 1 OR 2 → a) Was (NAME IN 407) delivered by caesarean, that is, did they cut your belly open to take the baby out? PREGNANCY TYPE 3 OR 4 → b) Was this stillbirth delivered by caesarean, that is, did they cut your belly open to take the baby out?	YES . . . . . 1 NO 2	

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
437	CHECK 405: PREGNANCY OUTCOME TYPE	MOST RECENT LIVE BIRTH . . . . . 1 PRIOR LIVE BIRTH . . . . . 2 MOST RECENT STILLBIRTH . . . . . 3 PRIOR STILLBIRTH 4	→ 441 → 445 → 487
438	After the birth, was (NAME IN 407) put on your chest/abdomen?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 441
439	Was (NAME IN 407)'s bare skin touching your bare skin?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 441
440	How long after birth was (NAME IN 407) put on the bare skin of your chest? PROBE FOR A NUMERIC RESPONSE. IF LESS THAN 1 HOUR, RECORD '00' HOURS; IF 24 HOURS OR MORE, RECORD 24.	IMMEDIATELY . . . . . 000 HOURS . . . . . ☐☐	
441	When (NAME IN 407) was born, was (NAME IN 407) very large, larger than average, average, smaller than average, or very small?	VERY LARGE . . . . . 1 LARGER THAN AVERAGE . . . . . 2 AVERAGE . . . . . 3 SMALLER THAN AVERAGE . . . . . 4 VERY SMALL . . . . . 5 DON'T KNOW 8	
442	Was (NAME IN 407) weighed at birth?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 444
443	How much did (NAME IN 407) weigh? RECORD WEIGHT IN KILOGRAMS FROM HEALTH CARD, IF AVAILABLE.	KG FROM CARD 1 ☐.☐☐☐ KG FROM RECALL 2 ☐.☐☐☐ DON'T KNOW 99998	
444	CHECK 405: PREGNANCY OUTCOME TYPE MOST RECENT LIVE BIRTH ☐	PRIOR LIVE BIRTH ☐	→ 480
445	CHECK 435: PLACE OF DELIVERY FACILITY BIRTH: ANY CODE 21 THROUGH 46 CIRCLED ☐	CODE 11, 12, OR 96 CIRCLED ☐	→ 464
447	CHECK 405: PREGNANCY TYPE 1 ☐ a) How long after (NAME IN 407) was delivered did you stay in (FACILITY IN 435)? PREGNANCY TYPE 3 ☐ b) For the stillbirth you had in (DATE FROM 406), how long after the baby was born did you stay in (FACILITY IN 435)? IF LESS THAN ONE DAY, RECORD HOURS; IF LESS THAN ONE WEEK, RECORD DAYS.	HOURS . . . . . 1 ☐☐ DAYS . . . . . 2 ☐☐ WEEKS . . . . . 3 ☐☐ DON'T KNOW 998	

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
448	I would like to talk to you about checks on your health after delivery, for example, someone asking you questions about your health or examining you. Before you left the facility, did anyone check on your health?	YES . . . . . 1 NO 2	→ 451
449	How long after delivery did the first check take place? IF LESS THAN ONE DAY, RECORD HOURS; IF LESS THAN ONE WEEK, RECORD DAYS.	HOURS . . . . . 1 ☐☐ DAYS . . . . . 2 ☐☐ WEEKS . . . . . 3 ☐☐ DON'T KNOW 998	
450	Who checked on your health at that time? PROBE FOR MOST QUALIFIED PERSON.	**HEALTH PERSONNEL** FAMILY DOCTOR . . . . . 11 OBSTETRICIAN-GYNECOLOGIST . . . . . 12 OTHER DOCTOR . . . . . 13 NURSE/MALE NURSE . . . . . 14 MIDWIFE . . . . . 15 **OTHER PERSON** TRADITIONAL BIRTH ATTENDANT . . . . . 21 OTHER _____ 96 (SPECIFY)	
451	CHECK 405: PREGNANCY OUTCOME TYPE MOST RECENT LIVE BIRTH ☐↓	MOST RECENT STILLBIRTH ☐	→ 455
452	Now I would like to talk to you about checks on (NAME'S) health -- for example, someone examining (NAME IN 407), checking the cord, or talking to you about how to care for (NAME IN 407). Before (NAME IN 407) left the facility, did anyone check on (NAME'S) health?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 455
453	How long after delivery was (NAME IN 407)'s health first checked? IF LESS THAN ONE DAY, RECORD HOURS; IF LESS THAN ONE WEEK, RECORD DAYS.	HOURS . . . . . 1 ☐☐ DAYS . . . . . 2 ☐☐ WEEKS . . . . . 3 ☐☐ DON'T KNOW 998	
454	Who checked on (NAME IN 407)'s health at that time? PROBE FOR MOST QUALIFIED PERSON.	**HEALTH PERSONNEL** FAMILY DOCTOR . . . . . 11 OBSTETRICIAN-GYNECOLOGIST . . . . . 12 OTHER DOCTOR . . . . . 13 NURSE/MALE NURSE . . . . . 14 MIDWIFE . . . . . 15 **OTHER PERSON** TRADITIONAL BIRTH ATTENDANT . . . . . 21 OTHER _____ 96 (SPECIFY)	

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
455	Now I would like to talk to you about what happened after you left the facility. Did anyone check on your health after you left the facility?	YES . . . . . 1 NO 2	→ 459
456	How long after delivery did that check take place? IF LESS THAN ONE DAY, RECORD HOURS; IF LESS THAN ONE WEEK, RECORD DAYS.	HOURS . . . . . 1 ☐☐ DAYS . . . . . 2 ☐☐ WEEKS . . . . . 3 ☐☐ DON'T KNOW 998	
457	Who checked on your health at that time? PROBE FOR MOST QUALIFIED PERSON.	**HEALTH PERSONNEL** FAMILY DOCTOR . . . . . 11 OBSTETRICIAN-GYNECOLOGIST . . . . . 12 OTHER DOCTOR . . . . . 13 NURSE/MALE NURSE . . . . . 14 MIDWIFE . . . . . 15 **OTHER PERSON** TRADITIONAL BIRTH ATTENDANT . . . . . 21 OTHER _____ 96 (SPECIFY)	
458	Where did the check take place? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD '96' AND WRITE THE NAME OF THE PLACE.	**HOME** HER HOME . . . . . 11 OTHER HOME . . . . . 12 **PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . 21 MATERNITY HOME . . . . . 22 URBAN/RAYON/RURAL HEALTH CENTER 23 HEALTH HOUSE . . . . . 24 FAMILY MEDICINE CENTER . . . . . 25 OTHER PUBLIC SECTOR _____ 26 (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . 31 PRIVATE CLINIC . . . . . 32 OTHER PRIVATE MEDICAL SECTOR _____ 36 (SPECIFY) OTHER _____ 96 (SPECIFY)	
459	CHECK 405: PREGNANCY OUTCOME TYPE MOST RECENT LIVE BIRTH ☐↓	MOST RECENT STILLBIRTH ☐	→ 474
460	After (NAME IN 407) left (FACILITY IN 435) did any health care provider or a traditional birth attendant check on (NAME IN 407)'s health?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 473

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
461	How long after the birth of (NAME IN 407) did that check take place? IF LESS THAN ONE DAY, RECORD HOURS; IF LESS THAN ONE WEEK, RECORD DAYS.	HOURS . . . . . 1 [ ][ ] DAYS . . . . . 2 [ ][ ] WEEKS . . . . . 3 [ ][ ] DON'T KNOW 998	
462	Who checked on (NAME IN 407)'s health at that time? PROBE FOR MOST QUALIFIED PERSON.	**HEALTH PERSONNEL** FAMILY DOCTOR . . . . . 11 OBSTETRICIAN-GYNECOLOGIST . . . . . 12 OTHER DOCTOR . . . . . 13 NURSE/MALE NURSE . . . . . 14 MIDWIFE . . . . . 15 PATRONAGE FAMILY DOCTOR . . . . . 16 PATRONAGE NURSE/MALE NUR . . . . . 17 **OTHER PERSON** TRADITIONAL BIRTH ATTENDANT . . . . . 21 OTHER _____ 96 (SPECIFY)	
463	Where did this check of (NAME IN 407) take place? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD '96' AND WRITE THE NAME OF THE PLACE.	**HOME** HER HOME . . . . . 11 OTHER HOME . . . . . 12 **PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . 21 MATERNITY HOME . . . . . 22 URBAN/RAYON/RURAL HEALTH CENTER 23 HEALTH HOUSE . . . . . 24 FAMILY MEDICINE CENTER . . . . . 25 INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS CENTER . . . . . 26 OTHER PUBLIC SECTOR _____ 27 (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . 31 PRIVATE CLINIC . . . . . 32 OTHER PRIVATE MEDICAL SECTOR _____ 36 (SPECIFY) OTHER _____ 96 (SPECIFY)	→ 473

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
464	CHECK 405: PREGNANCY TYPE 1 → a) I would like to talk to you about checks on your health after delivery, for example, someone asking you questions about your health or examining you. Did anyone check on your health after you gave birth to (NAME IN 407)? PREGNANCY TYPE 3 → b) I would like to talk to you about checks on your health after delivery, for example, someone asking you questions about your health or examining you. Did anyone check on your health after you delivered the stillbirth you had in (DATE FROM 406)?	YES . . . . . 1 NO 2	→ 468
465	How long after delivery did the first check take place? IF LESS THAN ONE DAY, RECORD HOURS; IF LESS THAN ONE WEEK, RECORD DAYS.	HOURS . . . . . 1 DAYS . . . . . 2 WEEKS . . . . . 3 DON'T KNOW 998	
466	Who checked on your health at that time? PROBE FOR MOST QUALIFIED PERSON.	**HEALTH PERSONNEL** FAMILY DOCTOR . . . . . 11 OBSTETRICIAN-GYNECOLOGIST . . . . . 12 OTHER DOCTOR . . . . . 13 NURSE/MALE NURSE . . . . . 14 MIDWIFE . . . . . 15 **OTHER PERSON** TRADITIONAL BIRTH ATTENDANT . . . . . 21 OTHER _____ 96 (SPECIFY)	
467	Where did this first check take place? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD '96' AND WRITE THE NAME OF THE PLACE.	**HOME** HER HOME . . . . . 11 OTHER HOME . . . . . 12 **PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . 21 MATERNITY HOME . . . . . 22 URBAN/RAYON/RURAL HEALTH CENTER 23 HEALTH HOUSE . . . . . 24 FAMILY MEDICINE CENTER . . . . . 25 OTHER PUBLIC SECTOR _____ 26 (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . 31 PRIVATE CLINIC . . . . . 32 OTHER PRIVATE MEDICAL SECTOR _____ 36 (SPECIFY) OTHER _____ 96 (SPECIFY)	

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
468	CHECK 405: PREGNANCY OUTCOME TYPE MOST RECENT LIVE BIRTH ☐ MOST RECENT STILLBIRTH ☐ → 474		
469	I would like to talk to you about checks on (NAME's) health -- for example, someone examining (NAME IN 407), checking the cord, or talking to you about how to care for (NAME IN 407). After (NAME IN 407) was born, did any health care provider or a traditional birth attendant check on (NAME's) health?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 473
470	How long after the birth of (NAME IN 407) did that check take place? IF LESS THAN ONE DAY, RECORD HOURS; IF LESS THAN ONE WEEK, RECORD DAYS.	HOURS . . . . . 1 ☐☐ DAYS . . . . . 2 ☐☐ WEEKS . . . . . 3 ☐☐ DON'T KNOW 998	
471	Who checked on (NAME IN 407)'s health at that time? PROBE FOR MOST QUALIFIED PERSON.	**HEALTH PERSONNEL** FAMILY DOCTOR . . . . . 11 OBSTETRICIAN-GYNECOLOGIST . . . . . 12 OTHER DOCTOR . . . . . 13 NURSE/MALE NURSE . . . . . 14 MIDWIFE . . . . . 15 PATRONAGE FAMILY DOCTOR . . . . . 16 PATRONAGE NURSE/MALE NUR . . . . . 17 **OTHER PERSON** TRADITIONAL BIRTH ATTENDANT . . . . . 21 OTHER _____ 96 (SPECIFY)	
472	Where did this first check of (NAME IN 407) take place? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD '96' AND WRITE THE NAME OF THE PLACE.	**HOME** HER HOME . . . . . 11 OTHER HOME . . . . . 12 **PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . 21 MATERNITY HOME . . . . . 22 URBAN/RAYON/RURAL HEALTH CENTER 23 HEALTH HOUSE . . . . . 24 FAMILY MEDICINE CENTER . . . . . 25 INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS CENTER . . . . . 26 OTHER PUBLIC SECTOR _____ 27 (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . 31 PRIVATE CLINIC . . . . . 32 OTHER PRIVATE MEDICAL SECTOR _____ 36 (SPECIFY) OTHER _____ 96 (SPECIFY)	

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
473	During the first 2 days after (NAME IN 407)'s birth, did any health care provider do the following: a) Examine the cord? b) Measure (NAME IN 407)'s temperature? c) Tell you how to recognize if your baby needs immediate medical attention? d) Talk with you about breastfeeding? e) Observe (NAME IN 407) breastfeeding to see if you are doing it correctly?	YES NO DK a) CORD . . . . . 1 2 8 b) TEMPERATURE . . . . . 1 2 8 c) MEDICAL ATTENTION . . . . . 1 2 8 d) TALK ABOUT BREASTFEEDING 1 2 8 e) OBSERVE BREASTFEEDING . . 1 2 8	
474	During the first 2 days after the birth, did any healthcare provider do the following to you: a) Measure your blood pressure? b) Discuss your vaginal bleeding with you? c) Discuss family planning with you?	YES NO DK a) BLOOD PRESSURE . . . . . 1 2 8 b) BLEEDING . . . . . 1 2 8 c) FAMILY PLANNING 1 2 8	
475	CHECK 215: IS THIS PREGNANCY THE WOMAN'S LAST PREGNANCY? YES NO		→ 479
476	CHECK 405: PREGNANCY TYPE 1 a) Has your menstrual period returned since the birth of (NAME IN 407)? PREGNANCY TYPE 3 OR 5 b) Has your menstrual period returned since the pregnancy that ended in (DATE FROM 406)?	YES . . . . . 1 NO 2	
477	CHECK 232: IS RESPONDENT PREGNANT? NOT PREGNANT PREGNANT OR UNSURE		→ 479
478	CHECK 405: PREGNANCY TYPE 1 a) Have you had sexual intercourse since the birth of (NAME IN 407)? PREGNANCY TYPE 3 OR 5 b) Have you had sexual intercourse since the pregnancy that ended in (DATE FROM 406)?	YES . . . . . 1 NO 2	
479	CHECK 405: PREGNANCY OUTCOME TYPE	MOST RECENT LIVE BIRTH . . . . . 1 MOST RECENT STILLBIRTH . . . . . 3 MISCARRIAGE/ABORTION 5	→ 487
480	Did you ever breastfeed (NAME IN 407)?	YES . . . . . 1 NO 2	→ 482
481	CHECK 224 FOR CHILD:	LIVING → 486 DEAD → 487	

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
482	How long after birth did you first put (NAME IN 407) to the breast? IF LESS THAN 1 HOUR, RECORD '00' HOURS; IF LESS THAN 24 HOURS, RECORD HOURS; OTHERWISE, RECORD DAYS.	IMMEDIATELY . . . . . 000 HOURS . . . . . 1 ☐☐ DAYS . . . . . 2 ☐☐	
483	In the first 2 days after delivery, was (NAME IN 407) given anything other than breast milk to eat or drink – anything at all like water, infant formula, or tea?	YES . . . . . 1 NO 2	
484	CHECK 224 FOR CHILD: LIVING ☐ (↓) DEAD ☐ → 487		
485	Are you still breastfeeding (NAME IN 407)?	YES . . . . . 1 NO 2	
486	Did (NAME IN 407) drink anything from a bottle with a nipple yesterday during the day or at night?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
487	CHECK 402: ANY MORE PREGNANCY OUTCOMES 0-35 MONTHS BEFORE THE SURVEY? MORE PREGNANCY OUTCOMES 0-35 MONTHS BEFORE THE SURVEY ☐ (↓) (GO TO 404 FOR THE NEXT PREGNANCY OUTCOME) NO MORE PREGNANCY OUTCOMES 0-35 MONTHS BEFORE THE SURVEY ☐ → 501		

SECTION 5. CHILD IMMUNIZATION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
501	CHECK 220, 224 AND 225 IN THE PREGNANCY HISTORY: ANY SURVIVING CHILDREN BORN 0-35 MONTHS BEFORE THE SURVEY? ONE OR MORE SURVIVING CHILDREN BORN 0-35 MONTHS BEFORE THE SURVEY ☐ NO SURVIVING CHILDREN BORN 0-35 MONTHS BEFORE THE SURVEY ☐		→ 601
502	Now I would like to ask some questions about vaccinations received by your children born in the last 3 years. We will talk about each separately, starting with the youngest.		
503	RECORD THE NAME AND PREGNANCY HISTORY NUMBER FROM 215 AND 218 OF THE SURVIVING CHILDREN BORN 0-35 MONTHS BEFORE THE SURVEY, STARTING WITH THE LAST ONE. NAME OF CHILD _____	PREGNANCY HISTORY NUMBER . . ☐☐	
504	Do you have a vaccination passport or other document where (NAME IN 503)'s vaccinations are written down?	YES, HAS ONLY A VACCINATION PASSPORT . . 1 YES, HAS ONLY ANOTHER DOCUMENT . . . . . 2 YES, HAS PASSPORT AND OTHER DOCUMENT . . 3 NO, NO PASSPORT AND NO OTHER DOCUMENT . . 4	→ 507 → 507
505	Did you ever have a vaccination passport for (NAME IN 503)?	YES . . . . . 1 NO 2	
506	CHECK 504: CODE '2' CIRCLED ☐ CODE '4' CIRCLED ☐		→ 513
507	May I see the vaccination passport or other document where (NAME IN 503)'s vaccinations are written down?	YES, ONLY VACCINATION PASSPORT SEEN . . . . . 1 YES, ONLY OTHER DOCUMENT SEEN . . . . . 2 YES, PASSPORT AND OTHER DOCUMENT SEEN . . . . . 3 NO PASSPORT AND NO OTHER DOCUMENT SEEN 4	 → 513
508	RECORD (NAME'S) DATE OF BIRTH FROM THE VACCINATION PASSPORT OR OTHER DOCUMENT.	DAY . . . . . ☐☐ MONTH . . . . . ☐☐ YEAR . . . . . ☐☐☐☐ DATE OF BIRTH NOT ON CARD 95	

SECTION 5. CHILD IMMUNIZATION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	NAME OF LIVE BIRTH _____ PREGNANCY HISTORY NUMBER . .		
509	COPY VACCINATION DATES FROM THE VACCINATION PASSPORT FOR (NAME). RECORD '44' IN 'DAY' COLUMN IF PASSPORT SHOWS THAT A DOSE WAS GIVEN, BUT NO DATE IS RECORDED. RECORD '00' IN 'DAY' COLUMN IF PASSPORT IS BLANK FOR THE DOSE.		
510	ASK THE RESPONDENT FOR PERMISSION TO PHOTOGRAPH VACCINATION PASSPORT OR OTHER DOCUMENT WHERE VACCINATIONS ARE WRITTEN. IF PERMISSION IS GRANTED, PHOTOGRAPH VACCINATION PASSPORT.	PHOTOGRAPH TAKEN . . . . . 1 PHOTOGRAPH NOT TAKEN, PERMISSION NOT RECEIVED . . . . . 2 PHOTOGRAPH NOT TAKEN, OTHER REASON _____ 6 (SPECIFY)	
511	CHECK 509: 'BCG' TO 'DPT-4' ALL HAVE A DATE RECORDED OR '44' RECORDED IN THE 'DAY' COLUMN NO ☐ YES ☐ → 529		

	DAY		MONTH		YEAR			
BCG								
HEPATITIS B WITHIN THE FIRST 24 HOURS OF BIRTH (HEP B-1)								
ORAL OLIO VACCINE (OPV) 0 (WITHIN THE FIRST 24 HOURS OF BIRTH)								
ORAL POLIO VACCINE (OPV) 1								
ORAL POLIO VACCINE (OPV) 2								
ORAL POLIO VACCINE (OPV) 3								
ORAL POLIO VACCINE (OPV) 4								
DPT 1-HEP.B 1-HIB 1 (PENTAVALENT) 1								
DPT 2-HEP.B 2-HIB 2 (PENTAVALENT) 2								
DPT 3-HEP.B 3-HIB 3 (PENTAVALENT) 3								
ROTAVIRUS 1								
ROTAVIRUS 2								
INACTIVATED POLIO VACCINE (IPV) 1								
INACTIVATED POLIO VACCINE (IPV) 2								
PNEUMOCOCCAL 1								
PNEUMOCOCCAL 2								
PNEUMOCOCCAL 3								
MEASLES, MUMPS AND RUBELLA VACCINE (MM OR MMR)1								
DPT 4								
VITAMIN A (MOST RECENT)								

SECTION 5. CHILD IMMUNIZATION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	NAME OF LIVE BIRTH _____	PREGNANCY HISTORY NUMBER . . ☐☐	
512	In addition to what is recorded on (this document/these documents), did (NAME IN 503) receive any other vaccinations, including vaccinations received in campaigns or immunization days? RECORD 'YES' ONLY IF THE RESPONDENT MENTIONS AT LEAST ONE OF THE VACCINATIONS IN 509 THAT ARE NOT RECORDED AS HAVING BEEN GIVEN.	YES . . . . . 1 (USE THE LIST SHOWN IN CAPI TO SELECT THE OTHER VACCINATIONS GIVEN. NOTE THAT CAPI WILL CHANGE THE ANSWER IN 509 IN THE 'DAY' COLUMN FROM '00' TO '66' FOR THE SELECTED VACCINATIONS.) (THEN SKIP TO 529) NO . . . . . 2 DON'T KNOW 8	
512A	CHECK 509: ANY VACCINATIONS RECORDED ON THE VACCINATION PASSPORT? YES ☐ → SKIP TO 529	NO ☐	→ FA01
513	Did (NAME IN 503) ever receive any vaccinations to prevent (NAME IN 503) from getting diseases, including vaccinations received in campaigns or immunization days?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ FA01
514	Has (NAME IN 503) ever received a BCG vaccination against tuberculosis, that is, an injection in the arm or shoulder that usually causes a scar?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
515	At or soon after birth, did (NAME IN 503) receive a Hepatitis B vaccination, that is, an injection in the thigh to prevent Hepatitis B?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 517
516	Did (NAME IN 503) receive it within 24 hours of birth?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
517	Has (NAME IN 503) ever received oral polio vaccine, that is, about two drops in the mouth to prevent polio?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 520
518	Did (NAME IN 503) receive the first oral polio vaccine in the first 2 weeks after birth or later?	FIRST TWO WEEKS . . . . . 1 LATER 2	
519	How many times did (NAME IN 503) receive the oral polio vaccine?	NUMBER OF TIMES . . . . . ☐	
520	Did (NAME IN 503) get an IPV injection in the thigh to protect against polio?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 521
520A	How many times did (NAME IN 503) receive an injection of the IPV polio vaccine?	NUMBER OF TIMES . . . . . ☐	
521	Has (NAME IN 503) ever received a pentavalent vaccination, that is, an injection given in the thigh sometimes at the same time as polio drops?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 522A
522	How many times did (NAME IN 503) receive the pentavalent vaccine?	NUMBER OF TIMES . . . . . ☐	
522A	Has (NAME IN 503) ever received the DPT-4 vaccination dose, that is, an injection given in the thigh at the age of 16 months or older to prevent diphtheria, tetanus, and pertussis?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
523	Has (NAME IN 503) ever received a pneumococcal vaccination, that is, an injection in the thigh to prevent pneumonia?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 525

SECTION 5. CHILD IMMUNIZATION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	NAME OF LIVE BIRTH _____	PREGNANCY HISTORY NUMBER . . [ ][ ]	
524	How many times did (NAME IN 503) receive the pneumococcal vaccine?	NUMBER OF TIMES . . . . . [ ]	
525	Has (NAME IN 503) ever received a rotavirus vaccination or ROTA, that is, a sweet liquid in the mouth to prevent diarrhea?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 527
526	How many times did (NAME IN 503) receive the rotavirus vaccine?	NUMBER OF TIMES . . . . . [ ]	
527	Has (NAME IN 503) ever received a MR or MMR vaccination, that is, an injection in the arm to prevent measles and rubella or measles, mumps and rubella?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
529	Where did (NAME IN 503) receive most of his/her vaccinations? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD '96' AND WRITE THE NAME OF THE PLACE.	**PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . 11 MATERNITY HOME . . . . . 12 URBAN/RAYON/RURAL HEALTH CENTER 13 REPRODUCTIVE HEALTH CENTER . . . . . 14 HEALTH HOUSE . . . . . 15 INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS CENTER . . . . . 16 IMMUNOPROPHYLAXIS CENTER . . . . . 17 AIDS CENTER . . . . . 18 MOBILE CLINIC OF AIDS CENTER . . . . . 19 HEALTHY LIFESTYLE CENTER . . . . . 20 FAMILY MEDICINE CENTER . . . . . 21 PATRONAGE MEDICAL WORKER . . . . . 22 OTHER PUBLIC SECTOR _____ 26 (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . 31 PRIVATE CLINIC . . . . . 32 PRIVATE DOCTOR . . . . . 33 PRIVATE LABORATORY . . . . . 34 PHARMACY . . . . . 35 PATRONAGE MEDICAL WORKER . . . . . 36 OTHER PRIVATE MEDICAL SECTOR _____ 37 (SPECIFY) **OTHER SOURCE** VACCINATION CAMPAIGN 2023 PNEUMOCOCCAL / 2022 MEASLES-MUMPS/ 2021 POLIO IPV/ 2021 POLIO OPV 3 TIMES . . . . . 41 OTHER _____ 96 (SPECIFY)	

SECTION 5. CHILD IMMUNIZATION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	NAME OF LIVE BIRTH _____	PREGNANCY HISTORY NUMBER . . ☐☐	
FA01	As part of this survey, we would like to visit the health facility in which (NAME IN 503) got vaccinated. We would like to have your permission to copy the vaccination dates from (NAME IN 503) child 's development card, the child's vaccination card, or immunization register kept in a health facility. With your permission, our team supervisor will visit the health facility and copy the vaccination dates of (NAME IN 503) from these cards directly to the same questionnaire I am using right now for our interview. The information will be kept confidential and will not be shared with anyone other than members of our survey team. We hope you will allow access to the child's development card, vaccination card, and immunization register because information about (NAME IN 503) vaccinations is very important. The information will complement the information that we obtained from you in this interview. Many dangerous childhood illnesses such as measles or tetanus can be prevented through timely and effective vaccination. The information from the child development card, vaccination card and immunization register will assist the government to develop programs to protect children from vaccine preventable diseases and reduce childhood mortality and morbidity in Tajikistan. Do you have any questions? Will you allow us to copy vaccination records from (NAME IN 503) child development card, vaccination card and immunization register kept at the health facility? CIRCLE THE CODE AND SIGN YOUR NAME.	GRANTED . . . . . 1 _____ INTERVIEWER'S SIGNATURE REFUSED . . . . . 2 NOT PRESENT/ OTHER 3	→ 530
FA02	Would you give us your permission to take a photo of the vaccination records (NAME IN 503)for further verification in case of inaccuracies? CIRCLE THE CODE AND SIGN YOUR NAME.	GRANTED . . . . . 1 _____ INTERVIEWER'S SIGNATURE REFUSED 2	
FA03	Please tell me the exact name and surname (NAME IN 503).	CHILD'S FIRST NAME _____ CHILD'S LAST NAME _____	
FA04	Please tell me the exact name and surname of the mother (NAME IN 503), to clarify the records (NAME IN 503) in case of coincidence with the names of other children.	MOTHER'S FIRST NAME _____ MOTHER'S LAST NAME _____	
FA05	Please provide the home address of (NAME IN 503) that is on the records of the health facility where (NAME IN 503) receives vaccinations.	_____ (STREET NAME, HOUSE NUMBER AND FLAT NUMBER) _____ (CITY, TOWN, VILLAGE, ZIP CODE)	

SECTION 5. CHILD IMMUNIZATION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	NAME OF LIVE BIRTH _____	PREGNANCY HISTORY NUMBER . . ☐☐	
FA06	Please provide the name, address, and telephone number of the health facility where records of vaccinations (NAME IN 503) are kept.	_____ (NAME OF THE MEDICAL FACILITY) _____ (STREET NAME, HOUSE NUMBER OF MEDICAL FACILITY) _____ TELEPHONE NUMBER	
FA07	Please provide the first and last name of the doctor in this health facility assigned to provide health care and vaccinations for (NAME IN 503).	DOCTOR'S FIRST NAME _____ DOCTOR'S LAST NAME _____	
FA08	Please provide the health facility uchastok number to which (NAME IN 503) is assigned for vaccinations and health care.	UCHASTOK NUMBER ☐☐	
530	CHECK 220 AND 224 IN PREGNANCY HISTORY: ANY MORE SURVIVING CHILDREN BORN 0-35 MONTHS BEFORE THE SURVEY? MORE SURVIVING CHILDREN BORN 0-35 MONTHS BEFORE THE SURVEY ☐ (GO TO 503 FOR THE NEXT SURVIVING CHILD) NO MORE SURVIVING CHILDREN BORN 0-35 MONTHS BEFORE THE SURVEY ☐		601

SECTION 6. CHILD HEALTH AND NUTRITION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
601	CHECK 220, 224, AND 225 IN THE PREGNANCY HISTORY: ANY SURVIVING CHILDREN BORN 0-59 MONTHS BEFORE THE SURVEY? ONE OR MORE SURVIVING CHILDREN BORN 0-59 MONTHS BEFORE THE SURVEY ☐ ↓ NO SURVIVING CHILDREN BORN 0-59 MONTHS BEFORE THE SURVEY ☐ → 643		
602	Now I would like to ask some questions about the health of your children born in the last 5 years. We will talk about each separately, starting with the youngest.		
603	RECORD THE NAME FROM 218 AND PREGNANCY HISTORY NUMBER FROM 215 OF THE SURVIVING CHILDREN BORN 0-59 MONTHS BEFORE THE SURVEY, STARTING WITH THE LAST ONE. NAME OF CHILD _____ PREGNANCY HISTORY NUMBER . . ☐☐		
604	In the last 12 months, was (NAME IN 603) given any of the following: a) Iron tablets or syrup? SHOW COMMON TYPES OF TABLETS/SYRUPS.	YES NO DK a) TABLETS/SYRUP 1 2 8	
605	In the last 6 months, was (NAME IN 603) given a vitamin A dose like [this/any of these]? SHOW COMMON TYPES OF AMPULES/CAPSULES/SYRUPS.	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
607	In the last 3 months, has any healthcare provider or community health worker measured: a) (NAME IN 603)'s weight? b) (NAME IN 603)'s length or height? c) Around (NAME IN 603)'s upper arm? SHOW IMAGE OF MUAC TAPE.	YES NO DK a) WEIGHT . . . . . 1 2 8 b) LENGTH/HEIGHT . . . . . 1 2 8 c) UPPER ARM 1 2 8	
608	Has (NAME IN 603) had diarrhea in the last 2 weeks?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 618

SECTION 6. CHILD HEALTH AND NUTRITION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
NO.	NAME OF LIVE BIRTH _____	PREGNANCY HISTORY NUMBER . . ☐☐	
609	CHECK 485: CURRENTLY BREASTFEEDING? YES ☐↓ NO/ NOT ASKED ☐↓ a) Now I would like to know how much (NAME IN 603) was given to drink during the diarrhea, including breast milk. Was (NAME IN 603) given less than usual to drink, about the same amount, or more than usual to drink? IF LESS, PROBE: Was (NAME IN 603) given much less than usual to drink or somewhat b) Now I would like to know how much (NAME IN 603) was given to drink during the diarrhea. Was (NAME IN 603) given less than usual to drink, about the same amount, or more than usual to drink? IF LESS, PROBE: Was (NAME IN 603) given much less than usual to drink or somewhat less?	MUCH LESS . . . . . 1 SOMEWHAT LESS . . . . . 2 ABOUT THE SAME . . . . . 3 MORE . . . . . 4 NOTHING TO DRINK . . . . . 5 DON'T KNOW 8	
610	When (NAME IN 603) had diarrhea, was (NAME IN 603) given less than usual to eat, about the same amount, more than usual, or nothing to eat? IF LESS, PROBE: Was (NAME IN 603) given much less than usual to eat or somewhat less?	MUCH LESS . . . . . 1 SOMEWHAT LESS . . . . . 2 ABOUT THE SAME . . . . . 3 MORE . . . . . 4 STOPPED FOOD . . . . . 5 NEVER GAVE FOOD . . . . . 6 DON'T KNOW 8	
611	Did you seek advice or treatment for the diarrhea from any source?	YES . . . . . 1 NO 2	→ 615

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
NO.	NAME OF LIVE BIRTH _____	PREGNANCY HISTORY NUMBER . . ☐☐	
612	Where did you seek advice or treatment? Anywhere else? PROBE TO IDENTIFY EACH TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD 'X' AND WRITE THE NAME OF THE PLACE(S).	**PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . A MATERNITY HOME . . . . . B URBAN/RAYON/RURAL HEALTH CENTER C REPRODUCTIVE HEALTH CENTER . . . . . D HEALTH HOUSE . . . . . E INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS CENTER . . . . . F IMMUNOPROPHYLAXIS CENTER . . . . . G AIDS CENTER . . . . . H MOBILE CLINIC OF AIDS CENTER . . . . . I HEALTHY LIFESTYLE CENTER . . . . . J FAMILY MEDICINE CENTER . . . . . K PATRONAGE MEDICAL WORKER . . . . . L OTHER PUBLIC SECTOR SECTOR _____ M (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . N PRIVATE CLINIC . . . . . O PRIVATE DOCTOR . . . . . P PRIVATE LABORATORY . . . . . Q PHARMACY . . . . . R PATRONAGE MEDICAL WORKER . . . . . S OTHER PRIVATE MEDICAL SECTOR _____ T (SPECIFY) **OTHER SOURCE** SHOP . . . . . U TRADITIONAL PRACTITIONER . . . . . V MARKET . . . . . W OTHER _____ X (SPECIFY)	
613	CHECK 612: TWO OR MORE CODES CIRCLED ☐	ONLY ONE CODE CIRCLED ☐ → 615	
614	Where did you first seek advice or treatment? USE LETTER CODE FROM 612.	FIRST PLACE . . . . . ☐	
615	Was (NAME IN 603) given any of the following at any time since (NAME IN 603) started having the diarrhea: a) A fluid made from a special packet called [LOCAL NAME FOR ORS PACKET]? c) Zinc tablets or syrup? d) Homemade fluid?	YES NO DK a) REHYDRON . . 1 2 8 c) ZINC . . . . . 1 2 8 d) HOMEMADE FLUID 1 2 8	
616	CHECK 615: ANY 'YES' ☐ → a) Was anything else given to treat the diarrhea? ALL 'NO' OR 'DK' ☐ → b) Was anything given to treat the diarrhea?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW . . . . . 8 → 618	

SECTION 6. CHILD HEALTH AND NUTRITION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
NO.	NAME OF LIVE BIRTH _____	PREGNANCY HISTORY NUMBER . . ☐☐	
617	CHECK 615: ANY 'YES' ☐ → a) What else was given to treat the diarrhea? Anything else? RECORD ALL TREATMENTS GIVEN. ALL 'NO' OR 'DK' ☐ → b) What was given to treat the diarrhea? Anything else? RECORD ALL TREATMENTS GIVEN.	**PILL OR SYRUP** ANTIBIOTIC . . . . . A ANTIMOTILITY . . . . . B OTHER (NOT ANTIBIOTIC OR ANTIMOTILITY) . . . . . C UNKNOWN PILL OR SYRUP . . . . . D **INJECTION** ANTIBIOTIC . . . . . E NON-ANTIBIOTIC . . . . . F UNKNOWN INJECTION . . . . . G (IV) INTRAVENOUS . . . . . H HOME REMEDY/HERBAL MEDICINE . . . . . I OTHER _____ (SPECIFY) X	
618	Has (NAME IN 603) been ill with a fever at any time in the last 2 weeks?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 621
619	At any time during the illness, did (NAME IN 603) have blood taken from (NAME IN 603)'s finger or heel for testing?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
620	Were you told by a healthcare provider that (NAME IN 603) had malaria?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
621	Has (NAME IN 603) had an illness with a cough at any time in the last 2 weeks?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
622	Has (NAME IN 603) had fast, short, rapid breaths or difficulty breathing at any time in the last 2 weeks?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 624
623	Was the fast or difficult breathing due to a problem in the chest or to a blocked or runny nose?	CHEST ONLY . . . . . 1 NOSE ONLY . . . . . 2 BOTH . . . . . 3 OTHER _____ (SPECIFY) 6 DON'T KNOW 8	→ 625
624	CHECK 618: HAD FEVER? YES ☐	NO OR DON'T KNOW ☐	→ 634
625	Did you seek advice or treatment for the illness from any source?	YES . . . . . 1 NO 2	→ 630

SECTION 6. CHILD HEALTH AND NUTRITION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
NO.	NAME OF LIVE BIRTH _____	PREGNANCY HISTORY NUMBER . . ☐☐	
626	Where did you seek advice or treatment? Anywhere else? PROBE TO IDENTIFY EACH TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD 'X' AND WRITE THE NAME OF THE PLACE(S).	**PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . A MATERNITY HOME . . . . . B URBAN/RAYON/RURAL HEALTH CENTER C REPRODUCTIVE HEALTH CENTER . . . . . D HEALTH HOUSE . . . . . E INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS CENTER . . . . . F IMMUNOPROPHYLAXIS CENTER . . . . . G AIDS CENTER . . . . . H MOBILE CLINIC OF AIDS CENTER . . . . . I HEALTHY LIFESTYLE CENTER . . . . . J FAMILY MEDICINE CENTER . . . . . K PATRONAGE MEDICAL WORKER . . . . . L OTHER PUBLIC SECTOR SECTOR _____ M (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . N PRIVATE CLINIC . . . . . O PRIVATE DOCTOR . . . . . P PRIVATE LABORATORY . . . . . Q PHARMACY . . . . . R PATRONAGE MEDICAL WORKER . . . . . S OTHER PRIVATE MEDICAL SECTOR _____ T (SPECIFY) **OTHER SOURCE** SHOP . . . . . U TRADITIONAL PRACTITIONER . . . . . V MARKET . . . . . W OTHER _____ X (SPECIFY)	
627	CHECK 626: TWO OR MORE CODES CIRCLED ☐	ONLY ONE CODE CIRCLED ☐ → 629	
628	Where did you first seek advice or treatment? USE LETTER CODE FROM 626.	FIRST PLACE . . . . . ☐	
629	How many days after the illness began did you first seek advice or treatment for (NAME IN 603)? IF SAME DAY, RECORD '00'.	DAYS . . . . . ☐☐	
630	At any time during the illness, did (NAME IN 603) take any medicine for the illness?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW . . . . . 8 → 634	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
NO.	NAME OF LIVE BIRTH _____	PREGNANCY HISTORY NUMBER . . ☐☐	
631	What medicine did (NAME IN 603) take? Any other medicine? RECORD ALL MENTIONED. IF MEDICINE NOT KNOWN, ASK TO SEE THE PACKAGE OR PRESCRIPTION	**ANTIBIOTIC MEDICINE** AMOXICILLIN . . . . . J COTRIMOXAZOLE . . . . . K OTHER PILL/SYRUP . . . . . L OTHER INJECTION/IV . . . . . M **OTHER MEDICINE** ASPIRIN . . . . . N PARACETAMOL/PANADOL/ ACETAMINOPHEN . . . . . O IBUPROFEN . . . . . P OTHER _____ X (SPECIFY) DON'T KNOW . . . . . Z	
634	CHECK 220, 224, AND 225 IN PREGNANCY HISTORY: ANY MORE SURVIVING CHILDREN BORN 0-59 MONTHS BEFORE THE SURVEY? MORE SURVIVING CHILDREN BORN 0-59 MONTHS BEFORE THE SURVEY ☐ → (GO TO 603 FOR THE NEXT SURVIVING CHILD) NO MORE SURVIVING CHILDREN BORN 0-59 MONTHS BEFORE THE SURVEY ☐ →		635

SECTION 6. CHILD HEALTH AND NUTRITION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
635	CHECK 220, 225 AND 226, ALL ROWS: NUMBER OF CHILDREN BORN 0-23 MONTHS BEFORE THE SURVEY LIVING WITH THE RESPONDENT ONE OR MORE ☐ ↓ (NAME OF YOUNGEST CHILD LIVING WITH HER) ↓	NONE ☐ → 643	
636	Now I would like to ask you about liquids that (NAME IN 635) had yesterday during the day or at night. Please tell me about all drinks, whether (NAME IN 635) had them at home, or somewhere else. Yesterday during the day or at night, did (NAME IN 635) drink:	YES NO DK	
	a) Plain water?	a) 1 2 8	
	b) Infant formula such as NAN, Nutrilac, Malysh, Malutka? IF YES: b1) How many times did (NAME IN 635) drink infant formula? IF 7 OR MORE TIMES, RECORD '7'.	b) . . . . . 1 2 8 NUMBER OF TIMES DRANK ☐ 8	
	c) Milk of animal origin, including, fresh, or powdered? IF YES: c1) How many times did (NAME IN 635) drink milk? IF 7 OR MORE TIMES, RECORD '7'. c2) Was the milk a sweet or flavored type of milk?	c) . . . . . 1 2 8 NUMBER OF TIMES DRANK ☐ 8 SWEET/ FLAVORED . . 1 2 8	
	f) Cocoa?	f) 1 2 8	
	g) Fruit juice, fruit drinks, kompot, or mors?	g) 1 2 8	
	h) Sweet carbonated drinks such as Coca-Cola, RC Cola, Fanta, lemonade, or energy drinks?	h) 1 2 8	
	i) Tea, coffee, or herbal drinks? IF YES: i1) Was the drink sweetened?	i) . . . . . 1 2 8 SWEETENED . . 1 2 8	
	j) Clear broth or clear soup?	j) 1 2 8	

SECTION 6. CHILD HEALTH AND NUTRITION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIP
			YES	NO	DK	
	k) Any other liquids? IF YES: k1) What was the drink? MARK THE APPROPRIATE GROUP FOR EACH ADDITIONAL DRINK, IF THE GROUP IS NOT YET CODED 'YES'. IF UNABLE TO DETERMINE WHICH GROUP THE ADDITIONAL DRINK BELONGS TO, SELECT OPTION "Z" AND A SCREEN WILL BE DISPLAYED TO REGISTER THE NAME OF THE	k)	1	2	8	
		OTHER DRINK(S) _____ (SPECIFY)				
	k2) Was the drink sweetened?	SWEETENED . .	1	2	8	
637 (10)	Now I would like to ask you about foods that (NAME IN 635) had yesterday during the day or at night. I am interested in foods your child ate whether at home or somewhere else. Please think about snacks and small meals as well as main meals. I will ask you about different foods, and I would like to know whether your child ate the food even if it was combined with other foods. Please do not answer 'yes' for any food or ingredient only used in a small amount to add flavor to a dish. Yesterday during the day or at night, did (NAME IN 635) have:		YES	NO	DK	
	a) Yogurt, kefir, dugob, jurgot, or chaka? IF YES: a1) How many times did (NAME IN 635) have yogurt, kefir, dugob, jurgot, or chaka? IF 7 OR MORE TIMES, RECORD '7'. a2) Did (NAME IN 635) have any drinkable yogurt, kefir, dugob, or chaka to drink? IF YES: a3) Was it a sweet or flavored type of drink?	a)	1	2	8	
		NUMBER OF TIMES ATE [ ]			8	
		HAD YOGURT AS A DRINK . .	1	2	8	
		SWEETENED . .	1	2	8	
	b) Bread, flatbread, lapsha, macaroni products, rice, buckwheat, or porridge?	b)	1	2	8	
	c) Carrots, pumpkin, or red bulgarian pepper?	c)	1	2	8	
	d) Potato or turnip?	d)	1	2	8	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIP
			YES	NO	DK	
	e) Any dark green leafy vegetables, such as spinach, broccoli, sorrel, seyoalaf, sambysai alafi, or other dark green leafy vegetables?	e)	1	2	8	
	f) Any other vegetables, such as tomatoes, cabbage, cucumber, beet, zucchini, or other vegetables?	f)	1	2	8	
	g) Persimmon, apricots or dried apricots?	g)	1	2	8	
	h) Any other fruits, such as apple, cherries, grapes, berries, orange, or other fruits?	h)	1	2	8	
	i) Fish, smoked fish, or canned fish?	i)	1	2	8	
	j) Liver, heart, or kidney?	j)	1	2	8	
	k) Cold cuts, sosiski, sardelki, hot dogs, or meat conserves?	k)	1	2	8	
	l) Any other meat, such as beef, lamb, goat, chicken, turkey?	l)	1	2	8	
	m) Eggs?	m)	1	2	8	
	n) Beans, peas, lentils, chickpeas, or mung beans?	n)	1	2	8	
	o) Sunflower or pumpkin seeds, walnuts, peanuts, almonds, or pistachios?	o)	1	2	8	
	p) Cheese, kooroot, or tvorog?	p)	1	2	8	
	r) Cakes, cookies, wafers, pastries, sweet rolls, or chak chak?	r)	1	2	8	
	s) Candy, chocolates, ice cream, or halva?	s)	1	2	8	

SECTION 6. CHILD HEALTH AND NUTRITION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
		YES NO DK	
	t) Chips, suhariki, Instant noodles such as Rolton or Doshirak, French fries, piroshki, chebureki, or belyashi?	t) 1 2 8	
	v) Any other solid, semi-solid, or soft food? IF YES: v1) What was the food? MARK THE APPROPRIATE FOOD GROUP FOR EACH ADDITIONAL FOOD, IF THE GROUP IS NOT YET CODED 'YES'. IF UNABLE TO DETERMINE WHICH GROUP THE ADDITIONAL FOOD BELONGS TO, SELECT OPTION "Z" AND A SCREEN WILL BE DISPLAYED TO REGISTER THE NAME OF THE	v) . . . . . 1 2 8 OTHER FOOD(S) _____ (SPECIFY)	
638	CHECK 637 (CATEGORIES 'a' THROUGH 'v'): NOT A SINGLE 'YES' ☐ AT LEAST ONE 'YES' ☐ →		640
639	Did (NAME IN 635) eat any solid, semi-solid, or soft foods yesterday during the day or at night? IF 'YES' PROBE: What kind of solid, semi-solid or soft foods did (NAME IN 635) eat?	YES . . . . . 1 (GO BACK TO 637 TO RECORD FOOD EATEN YESTERDAY) (THEN CONTINUE TO 640) NO 2	→ 641
640	How many times did (NAME IN 635) eat solid, semi-solid, or soft foods yesterday during the day or at night? IF 7 OR MORE TIMES, RECORD '7'.	NUMBER OF TIMES . . . . . ☐☐ DON'T KNOW 8	
641	In the last 6 months, did any healthcare provider or community health worker talk with you about how or what to feed (NAME IN 635)?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
642	The last time (NAME IN 635) passed stools, what was done to dispose of the stools?	CHILD USED TOILET OR LATRINE . . . . . 01 PUT/RINSED INTO TOILET OR LATRINE . . . . . 02 PUT/RINSED INTO DRAIN OR DITCH . . . . . 03 THROWN INTO GARBAGE . . . . . 04 BURIED . . . . . 05 LEFT IN THE OPEN . . . . . 06 BURNED . . . . . 07 OTHER _____ 96 (SPECIFY)	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIP
643	Now I'd like to ask you about foods and drinks that you consumed yesterday during the day or night, whether you ate or drank it at home or somewhere else. Please think about snacks and small meals as well as main meals. I will ask you about different foods and drinks, and I would like to know whether you ate the food even if it was combined with other foods. Please do not answer 'yes' for any food or ingredient only used in a small amount to add flavor to a dish. Yesterday during the day or at night, did you eat or drink:		YES	NO	DK	
	a) Bread, flatbread, lapsha, macaroni products, rice, buckwheat, or porridge?	a)	1	2	8	
	b) Carrots, pumpkin, or red Bulgarian pepper?	b)	1	2	8	
	c) Potato or turnip?	c)	1	2	8	
	d) Any dark green leafy vegetables, such as spinach, broccoli, sorrel, seyoalaf, sambysai alafi or other dark green leafy vegetables?	d)	1	2	8	
	e) Any other vegetables, such as tomatoes, cabbage, cucumber, beet, zucchini or other vegetables?	e)	1	2	8	
	f) Persimmon, apricots or dried apricots?	f)	1	2	8	
	g) Any other fruits, such as apple, cherries, grapes, berries,orange, or other fruits?	g)	1	2	8	
	h) Fish, smoked fish, or canned fish?	h)	1	2	8	
	i) Liver, heart, or kidney?	i)	1	2	8	
	j) Cold cuts, sosiski, sardelki, or, or meat conserves?	j)	1	2	8	
	k) Any other meat, such as beef, lamb, goat, chicken, turkey?	k)	1	2	8	
	l) Eggs?	l)	1	2	8	

SECTION 6. CHILD HEALTH AND NUTRITION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
		YES NO DK	
	m) Beans, peas, lentils, chickpeas, or mung beans?	m) 1 2 8	
	n) Sunflower or pumpkin seeds, walnuts, peanuts, almonds, or pistachios?	n) 1 2 8	
	o) Milk or powdered milk, cheese, tvorog, chaka, yogurt, jurgot, or kefir?	o) 1 2 8	
	q) Cakes, cookies, wafers, pastries, sweet rolls, or chak chak?	q) 1 2 8	
	r) Candy, chocolates, ice cream, or halva?	r) 1 2 8	
	s) Chips, suhariki, Instant noodles such as Rolton or Doshirak, French fries, piroshki, chebureki, or belyashi??	s) 1 2 8	
	t) Fruit juice, fruit drinks, kompot, or mors?	t) 1 2 8	
	u) Sweet carbonated drinks such as Coca-Cola, RC Cola, Fanta, lemonade, or energy drinks?	u) 1 2 8	
	v) Tea with sugar, coffee with sugar, cocoa, or milk cocktails?	v) 1 2 8	
	x) Any other liquids? IF YES: x1) What was the drink? x2) Was the drink sweetened?	x) . . . . . 1 2 8 OTHER DRINK(S) _____ (SPECIFY) SWEETENE[. . 1 2 8	
	y) Any other food? IF YES: y1) What was the food? MARK THE APPROPRIATE FOOD GROUP FOR EACH ADDITIONAL FOOD, IF THE GROUP IS NOT YET CODED 'YES'. IF UNABLE TO DETERMINE WHICH GROUP THE ADDITIONAL FOOD BELONGS TO, SELECT OPTION "Z" AND A SCREEN WILL BE DISPLAYED TO RECORD THE NAME OF THE	y) . . . . . 1 2 8 OTHER FOOD(S) _____ (SPECIFY)	

SECTION 7. MARRIAGE AND SEXUAL ACTIVITY

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
701	Are you currently married or living together with a man as if married?	YES, CURRENTLY MARRIED . . . . . 1 YES, LIVING WITH A MAN . . . . . 2 NO, NOT IN UNION 3	→ 706A
702	Have you ever been married or lived together with a man as if married?	YES, FORMERLY MARRIED . . . . . 1 YES, LIVED WITH A MAN . . . . . 2 NO 3	→ 721
703	What is your marital status now: are you widowed, divorced, or separated?	WIDOWED . . . . . 1 DIVORCED . . . . . 2 SEPARATED 3	→ 714
706A	Do you have a marriage certificate or other document recognizing this (marriage/union)?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 707
706B	What document or documents do you have? Any other document? RECORD ALL MENTIONED.	MARRIAGE CERTIFICATE FROM A CHURCH, MOSQUE OR OTHER RELIGIOUS INSTITUTION . . . . . A MARRIAGE CERTIFICATE FROM A CIVIL AUTHORITY . . . . . B OTHER DOCUMENT FROM A RELIGIOUS INSTITUTION . . . . . C OTHER DOCUMENT FROM A CIVIL AUTHORITY . . . . . D OTHER _____ X (SPECIFY)	→ 709
707	Was this marriage ever registered with the civil authority?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
709	Is your (husband/partner) living with you now or is he staying elsewhere?	LIVING WITH HER . . . . . 1 STAYING ELSEWHERE 2	
710	RECORD THE HUSBAND'S/PARTNER'S NAME AND LINE NUMBER FROM THE HOUSEHOLD QUESTIONNAIRE. IF HE IS NOT LISTED IN THE HOUSEHOLD, RECORD '00'.	NAME _____ LINE NO.	
711	Does your (husband/partner) have other wives or does he live with other women as if married?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 714
712	Including yourself, in total, how many wives or live-in partners does he have?	TOTAL NUMBER OF WIVES AND LIVE-IN PARTNERS . . . . . DON'T KNOW 98	
713	Are you the first, second, ... wife?	RANK . . . . . DON'T KNOW 98	
714	Have you been married or lived with a man only once or more than once?	ONLY ONCE . . . . . 1 MORE THAN ONCE 2	

SECTION 7. MARRIAGE AND SEXUAL ACTIVITY

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
715	CHECK 714: MARRIED/ LIVED WITH A MAN ONLY ONCE → a) In what month and year did you start living with your (husband/partner)? MARRIED/ LIVED WITH A MAN MORE THAN ONCE → b) Now I would like to ask about your first husband or partner. In what month and year did you start living with him?	MONTH . . . . . ☐☐ DON'T KNOW MONTH . . . . . 98 YEAR . . . . . ☐☐☐☐ DON'T KNOW YEAR 9998	→ 717
716	How old were you when you first started living with him?	AGE . . . . . ☐☐	
717	CHECK 714: MARRIED/LIVED WITH A MAN MORE THAN ONCE MARRIED/LIVED WITH A MAN ONLY ONCE →		→ 721
718	CHECK 701: YES, CURRENTLY MARRIED YES, LIVING WITH A MAN NO, NOT IN A UNION →		→ 721
719	Now I'd like to ask you about your current (husband/partner). In what month and year did you start living with him?	MONTH . . . . . ☐☐ DON'T KNOW MONTH . . . . . 98 YEAR . . . . . ☐☐☐☐ DON'T KNOW YEAR 9998	→ 721
720	How old were you when you first started living with your current (husband/partner)?	AGE . . . . . ☐☐	
721	**CHECK FOR PRESENCE OF OTHERS. BEFORE CONTINUING, MAKE EVERY EFFORT TO ENSURE PRIVACY.**		
722	Now I would like to ask some questions about sexual activity in order to gain a better understanding of some important life issues. Let me assure you again that your answers are completely confidential and will not be told to anyone. If we should come to any question that you don't want to answer, just let me know and we will go to the next question. How old were you when you had sexual intercourse for the very first time?	NEVER HAD SEXUAL INTERCOURSE . . . . . 00 AGE IN YEARS . . . . . ☐☐	→ 738
723	I would like to ask you about your recent sexual activity. When was the last time you had sexual intercourse? IF LESS THAN 12 MONTHS, ANSWER MUST BE RECORDED IN DAYS, WEEKS OR MONTHS. IF 12 MONTHS (ONE YEAR) OR MORE, ANSWER MUST BE RECORDED IN YEARS.	DAYS AGO . . . . . 1 ☐☐ WEEKS AGO . . . . . 2 ☐☐ MONTHS AGO . . . . . 3 ☐☐ YEARS AGO . . . . . 4 ☐☐	→ 737

SECTION 7. MARRIAGE AND SEXUAL ACTIVITY

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
724	CHECK 232: NOT PREGNANT OR UNSURE ↓	PREGNANT →	→ 727
725	The last time you had sexual intercourse, did you or your partner do something or use any method to delay or avoid getting pregnant?	YES . . . . . 1 NO 2	→ 727
726	Which method did you use? RECORD ALL MENTIONED. IF CODES 'G' OR 'H' ARE CIRCLED, SKIP TO 729 EVEN IF ANOTHER METHOD WAS ALSO USED.	FEMALE STERILIZATION . . . . . A MALE STERILIZATION . . . . . B IUD . . . . . C INJECTABLES . . . . . D IMPLANTS . . . . . E PILL . . . . . F CONDOM . . . . . G FEMALE CONDOM . . . . . H EMERGENCY CONTRACEPTION . . . . . I LACTATIONAL AMENORRHEA METHOD . . . . . K RHYTHM METHOD . . . . . L WITHDRAWAL . . . . . M OTHER MODERN METHOD . . . . . X OTHER TRADITIONAL METHOD . . . . . Y	→ 729
727	The last time you had sexual intercourse, was a condom used?	YES . . . . . 1 NO 2	→ 730

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
729	From where did you obtain the condom the last time? PROBE TO IDENTIFY TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD '96' AND WRITE THE NAME OF THE PLACE.	**PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . 11 MATERNITY HOME . . . . . 12 URBAN/RAYON/RURAL HEALTH CENTER 13 REPRODUCTIVE HEALTH CENTER . . . . . 14 HEALTH HOUSE . . . . . 15 INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS CENTER . . . . . 16 IMMUNOPROPHYLAXIS CENTER . . . . . 17 AIDS CENTER . . . . . 18 MOBILE CLINIC OF AIDS CENTER . . . . . 19 HEALTHY LIFESTYLE CENTER . . . . . 20 FAMILY MEDICINE CENTER . . . . . 21 PATRONAGE MEDICAL WORKEF . . . . . 22 OTHER PUBLIC SECTOR _____ 26 (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . 31 PRIVATE CLINIC . . . . . 32 PRIVATE DOCTOR'S OFFICE . . . . . 33 PRIVATE LABORATORY . . . . . 34 PHARMACY . . . . . 35 PATRONAGE MEDICAL WORKEF . . . . . 36 OTHER PRIVATE MEDICAL SECTOR _____ 37 (SPECIFY) **OTHER SOURCE** SHOP . . . . . 41 FRIEND/RELATIVE . . . . . 43 OTHER _____ 96 (SPECIFY) DON'T KNOW 98	
730	What was your relationship to this person with whom you had sexual intercourse? IF BOYFRIEND: Were you living together as if married? IF YES, RECORD '2'. IF NO, RECORD '3'.	HUSBAND . . . . . 1 LIVE-IN PARTNER . . . . . 2 BOYFRIEND NOT LIVING WITH RESPONDENT . . . . . 3 CASUAL ACQUAINTANCE . . . . . 4 CLIENT/SEX WORKER . . . . . 5 OTHER _____ 6 (SPECIFY)	
731	Apart from this person, have you had sexual intercourse with any other person in the last 12 months?	YES . . . . . 1 NO 2	→ 737
732	The last time you had sexual intercourse with this second person, was a condom used?	YES . . . . . 1 NO 2	

SECTION 7. MARRIAGE AND SEXUAL ACTIVITY

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
733	What was your relationship to this second person with whom you had sexual intercourse? IF BOYFRIEND: Were you living together as if married? IF YES, RECORD '2'. IF NO, RECORD '3'.	HUSBAND . . . . . 1 LIVE-IN PARTNER . . . . . 2 BOYFRIEND NOT LIVING WITH RESPONDENT . . . . . 3 CASUAL ACQUAINTANCE . . . . . 4 CLIENT/SEX WORKER . . . . . 5 OTHER _____ 6 (SPECIFY)	
734	Apart from these two people, have you had sexual intercourse with any other person in the last 12 months?	YES . . . . . 1 NO 2	→ 737
735	The last time you had sexual intercourse with this third person, was a condom used?	YES . . . . . 1 NO 2	
736	What was your relationship to this third person with whom you had sexual intercourse? IF BOYFRIEND: Were you living together as if married? IF YES, RECORD '2'. IF NO, RECORD '3'.	HUSBAND . . . . . 1 LIVE-IN PARTNER . . . . . 2 BOYFRIEND NOT LIVING WITH RESPONDENT . . . . . 3 CASUAL ACQUAINTANCE . . . . . 4 CLIENT/SEX WORKER . . . . . 5 OTHER _____ 6 (SPECIFY)	
737	In total, with how many different people have you had sexual intercourse in your lifetime? IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE. IF NUMBER OF PARTNERS IS 95 OR MORE, RECORD '95'.	NUMBER OF PARTNERS IN LIFETIME . . . . . [ ][ ] DON'T KNOW 98	
738	PRESENCE OF OTHERS DURING THIS SECTION.	YES NO CHILDREN <10 . . . . . 1 2 MALE ADULTS . . . . . 1 2 FEMALE ADULTS 1 2	

SECTION 8. FERTILITY PREFERENCES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
801	CHECK 307: NOT ASKED ☐ ↓ NEITHER ARE STERILIZED ☐ ↓ HE OR SHE STERILIZED ☐ →		813
802	CHECK 232: PREGNANT ☐ ↓ NOT PREGNANT OR UNSURE ☐ →		804
803	Now I have some questions about the future. After the child you are expecting now, would you like to have another child, or would you prefer not to have any more children?	HAVE ANOTHER CHILD . . . . . 1 NO MORE . . . . . 2 UNDECIDED/DON'T KNOW 8	→ 805 → 812
804	CHECK 208: HAS HAD A CHILD ☐ ↓ a) Now I have some questions about the future. Would you like to have another child, or would you prefer not to have any more children? HAS NOT HAD A CHILD ☐ ↓ b) Now I have some questions about the future. Would you like to have a child, or would you prefer not to have any children?	HAVE (A/ANOTHER) CHILD . . . . . 1 NO MORE/NONE . . . . . 2 SAYS SHE CAN'T GET PREGNANT . . . . . 3 UNDECIDED/DON'T KNOW 8	→ 807 → 813 → 811
805	CHECK 208 AND 232: NOT PREG. OR UNSURE AND HAS HAD A CHILD ☐ ↓ a) How long would you like to wait from now before the birth of another child? NOT PREG. OR UNSURE AND HAS NOT HAD A CHILD ☐ ↓ b) How long would you like to wait from now before the birth of a child? PREGNANT ☐ ↓ c) After the birth of the child you are expecting now, how long would you like to wait before the birth of another child?	MONTHS . . . . . 1 ☐☐ YEARS . . . . . 2 ☐☐ SOON/NOW . . . . . 993 SAYS SHE CAN'T GET PREGNANT . . . . . 994 AFTER MARRIAGE . . . . . 995 OTHER _____ (SPECIFY) 996 DON'T KNOW 998	→ 811 → 813 → 811
806	CHECK 232: NOT PREGNANT OR UNSURE ☐ ↓ PREGNANT ☐ →		812
807	CHECK 307: USING A CONTRACEPTIVE METHOD? NOT ASKED ☐ ↓ CURRENTLY USING ☐ →		813
808	CHECK 805: '24' OR MORE MONTHS OR '02' OR MORE YEARS ☐ ↓ NOT ASKED ☐ ↓ '00-23' MONTHS OR '00-01' YEAR ☐ →		812
809	CHECK 723: DAYS, WEEKS OR MONTHS AGO ☐ ↓ YEARS AGO ☐ → NOT ASKED ☐ →		811 811

SECTION 8. FERTILITY PREFERENCES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
810	CHECK 208 AND 804: HAS HAD A CHILD AND WANTS TO HAVE ANOTHER CHILD ☐↓ a) You have said that you do not want another child soon. Can you tell me why you are not using a method to prevent pregnancy? Any other reason? RECORD ALL REASONS MENTIONED. HAS HAD A CHILD AND WANTS NO MORE ☐↓ b) You have said that you do not want any more children. Can you tell me why you are not using a method to prevent pregnancy? Any other reason? RECORD ALL REASONS MENTIONED. HAS NOT HAD A CHILD AND WANTS TO HAVE A CHILD ☐↓ c) You have said that you do not want a child soon. Can you tell me why you are not using a method to prevent pregnancy? Any other reason? RECORD ALL REASONS MENTIONED. HAS NOT HAD A CHILD AND WANTS NO CHILDREN ☐↓ d) You have said that you do not want any children. Can you tell me why you are not using a method to prevent pregnancy? Any other reason? RECORD ALL REASONS MENTIONED.	NOT MARRIED . . . . . A **FERTILITY-RELATED REASONS** NOT HAVING SEX . . . . . B INFREQUENT SEX . . . . . C MENOPAUSAL/HYSTERECTOMY . . . . . D CAN'T GET PREGNANT . . . . . E NOT MENSTRUATED SINCE LAST BIRTH . . . . . F BREASTFEEDING . . . . . G UP TO GOD/FATALISTIC . . . . . H **OPPOSITION TO USE** RESPONDENT OPPOSED . . . . . I HUSBAND/PARTNER OPPOSED . . . . . J OTHERS OPPOSED . . . . . K RELIGIOUS PROHIBITION . . . . . L **LACK OF KNOWLEDGE** KNOWS NO METHOD . . . . . M KNOWS NO SOURCE . . . . . N **METHOD-RELATED REASONS** INCONVENIENT TO USE . . . . . O CHANGES IN MENSTRUAL BLEEDING . . . . . P METHODS COULD CAUSE INFERTILITY . . Q INTERFERES WITH BODY'S NORMAL PROCESSES . . . . . R OTHER SIDE EFFECTS . . . . . S **COST/ACCESS/AVAILABILITY** LACK OF ACCESS/TOO FAR . . . . . T COSTS TOO MUCH . . . . . U PREFERRED METHOD NOT AVAILABLE . . . . . V NO METHOD AVAILABLE . . . . . W OTHER _____ X (SPECIFY) DON'T KNOW . . . . . Z	
811	CHECK 307: USING A CONTRACEPTIVE METHOD? NOT ASKED ☐↓ YES, CURRENTLY USING ☐ →		813
812	Do you think you will use a contraceptive method to delay or avoid pregnancy at any time in the future?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
813	CHECK 224: HAS LIVING CHILDREN ☐↓ a) If you could go back to the time 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? PROBE FOR A NUMERIC RESPONSE. NO LIVING CHILDREN ☐↓ b) If you could choose exactly the number of children to have in your whole life, how many would that be? PROBE FOR A NUMERIC RESPONSE.	NONE . . . . . 00 → 815 NUMBER . . . . . ☐☐ OTHER _____ 96 → 815 (SPECIFY)	
814	How many of these children would you like to be boys, how many would you like to be girls and for how many would it not matter if it's a boy or a girl?	BOYS GIRLS EITHER NUMBER . . ☐☐ ☐☐ ☐☐ OTHER _____ 96 (SPECIFY)	

SECTION 8. FERTILITY PREFERENCES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
815	In the last 12 months have you:	YES NO	
	a) Heard about family planning on the radio?	a) RADIO 1 2	
	b) Seen anything about family planning on the television?	b) TELEVISION 1 2	
	c) Read about family planning in a newspaper or magazine?	c) NEWSPAPER OR MAGAZINE 1 2	
	d) Received a voice or text message about family planning on a mobile phone?	d) MOBILE PHONE 1 2	
	e) Seen anything about family planning on social media such as Facebook, Twitter, or Instagram?	e) FACEBOOK/TWITTER/ INSTAGRAM 1 2	
	f) Seen anything about family planning on a poster, leaflet or brochure?	f) POSTER/LEAFLET/BROCHURE 1 2	
	g) Seen anything about family planning on an outdoor sign or billboard?	g) OUTDOOR SIGN/BILLBOARD 1 2	
	h) Heard anything about family planning at community meetings or events?	h) COMMUNITY MEETINGS/EVENTS . . 1 2	
817	CHECK 701: YES, CURRENTLY MARRIED ☐ ↓ / YES, LIVING WITH A MAN ☐ ↓ / NO, NOT IN A UNION ☐ →		901
818	Who usually makes the decision on whether or not you should use contraception, you, your (husband/partner), you and your (husband/partner) jointly, or someone else?	RESPONDENT . . . . . 1 HUSBAND/PARTNER . . . . . 2 RESPONDENT AND HUSBAND/PARTNER JOINTLY . . . . . 3 SOMEONE ELSE . . . . . 4 OTHER _____ 6 (SPECIFY)	→ 820 → 820
819	When making this decision with your (husband/partner), would you say that your opinion is more important, equally important, or less important than your (husband's/partner's) opinion?	MORE IMPORTANT . . . . . 1 EQUALLY IMPORTANT . . . . . 2 LESS IMPORTANT 3	
820	Has your (husband/partner) or any other family member ever tried to force or pressure you to become pregnant when you did not want to become pregnant?	YES . . . . . 1 NO 2	
821	CHECK 307: NOT ASKED ☐ ↓ / NEITHER ARE STERILIZED ☐ ↓ / HE OR SHE ARE STERILIZED ☐ →		901
822	Does your (husband/partner) want the same number of children that you want, or does he want more or fewer than you want?	SAME NUMBER . . . . . 1 MORE CHILDREN . . . . . 2 FEWER CHILDREN . . . . . 3 DON'T KNOW 8	

SECTION 9. HUSBAND'S BACKGROUND AND WOMAN'S WORK

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
901	CHECK 701: CURRENTLY MARRIED/ LIVING WITH A MAN ☐ ↓ NOT IN UNION ☐ →		909
902	How old was your (husband/partner) on his last birthday?	AGE IN COMPLETED YEARS . . . . . ☐☐	
903	Did your (husband/partner) ever attend school?	YES . . . . . 1 NO 2	→ 906
904	What was the highest level of school he attended: general education school, professional primary(uchiliche), professional middle(technikum, college), higher or postgraduate?	GENERAL EDUCATION SCHOOL . . . . . 1 PROFESSIONAL PRIMARY . . . . . 2 PROFESSIONAL MIDDLE . . . . . 3 HIGHER . . . . . 4 POSTGRAGUATE . . . . . 5 DON'T KNOW 8	→ 906
905	What was the highest CLASS/COURSE/YEAR] he completed at that level? IF COMPLETED LESS THAN ONE YEAR AT THAT LEVEL, RECORD '00'.	CLASS/COURSE/YEAR . . . . . ☐☐ DON'T KNOW 98	
906	Has your (husband/partner) done any work in the last 7 days?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 908
907	Has your (husband/partner) done any work in the last 12 months?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 909
908	What is your (husband's/partner's) occupation? That is, what kind of work does he mainly do?	_____ _____ ☐☐ _____	
909	Aside from your own housework, have you done any work in the last 7 days?	YES . . . . . 1 NO 2	→ 913
910	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. In the last 7 days, have you done any of these things or any other work?	YES . . . . . 1 NO 2	→ 913
911	Although you did not work in the last 7 days, do you have any job or business from which you were absent for leave, illness, vacation, maternity leave, or any other such reason?	YES . . . . . 1 NO 2	→ 913
912	Have you done any work in the last 12 months?	YES . . . . . 1 NO 2	→ 917
913	What is your occupation? That is, what kind of work do you mainly do?	_____ _____ ☐☐ _____	
914	Do you do this work for a member of your family, for someone else, or are you self-employed?	FOR FAMILY MEMBER . . . . . 1 FOR SOMEONE ELSE . . . . . 2 SELF-EMPLOYED 3	

SECTION 9. HUSBAND'S BACKGROUND AND WOMAN'S WORK

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
915	Do you usually work throughout the year, or do you work seasonally, or only once in a while?	THROUGHOUT THE YEAR . . . . . 1 SEASONALLY/PART OF THE YEAR . . . . . 2 ONCE IN A WHILE 3	
916	Are you paid in cash or kind for this work or are you not paid at all?	CASH ONLY . . . . . 1 CASH AND KIND . . . . . 2 IN KIND ONLY . . . . . 3 NOT PAID 4	
917	CHECK 701: CURRENTLY MARRIED/LIVING WITH A MAN ☐	NOT IN UNION ☐	→ 925
918	CHECK 916: CODE '1' OR '2' CIRCLED ☐	OTHER ☐	→ 921
919	Who usually decides how the money you earn will be used: you, your (husband/partner), or you and your (husband/partner) jointly?	RESPONDENT . . . . . 1 HUSBAND/PARTNER . . . . . 2 RESPONDENT AND HUSBAND/PARTNER JOINTLY . . . . . 3 OTHER _____ 6 (SPECIFY)	
920	Would you say that the money that you earn is more than what your (husband/partner) earns, less than what he earns, or about the same?	MORE THAN HIM . . . . . 1 LESS THAN HIM . . . . . 2 ABOUT THE SAME . . . . . 3 HUSBAND/PARTNER HAS NO EARNINGS . . . . . 4 DON'T KNOW 8	→ 922
921	Who usually decides how your (husband's/partner's) earnings will be used: you, your (husband/partner), or you and your (husband/partner) jointly?	RESPONDENT . . . . . 1 HUSBAND/PARTNER . . . . . 2 RESPONDENT AND HUSBAND/PARTNER JOINTLY . . . . . 3 HUSBAND/PARTNER HAS NO EARNINGS . . . . . 4 OTHER _____ 6 (SPECIFY)	
922	Who usually makes decisions about health care for yourself: you, your (husband/partner), you and your (husband/partner) jointly, or someone else?	RESPONDENT . . . . . 1 HUSBAND/PARTNER . . . . . 2 RESPONDENT AND HUSBAND/PARTNER JOINTLY . . . . . 3 SOMEONE ELSE . . . . . 4 OTHER 6	
923	Who usually makes decisions about making major household purchases?	RESPONDENT . . . . . 1 HUSBAND/PARTNER . . . . . 2 RESPONDENT AND HUSBAND/PARTNER JOINTLY . . . . . 3 SOMEONE ELSE . . . . . 4 OTHER 6	
924	Who usually makes decisions about visits to your family or relatives?	RESPONDENT . . . . . 1 HUSBAND/PARTNER . . . . . 2 RESPONDENT AND HUSBAND/PARTNER JOINTLY . . . . . 3 SOMEONE ELSE . . . . . 4 OTHER 6	

SECTION 9. HUSBAND'S BACKGROUND AND WOMAN'S WORK

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
925	Do you own this or any other house either alone or jointly with someone else?	ALONE ONLY . . . . . 01 JOINTLY WITH HUSBAND/PARTNER ONLY . . 02 JOINTLY WITH SOMEONE ELSE ONLY . . . . . 03 JOINTLY WITH HUSBAND/PARTNER AND SOMEONE ELSE . . . . . 04 BOTH ALONE AND JOINTLY . . . . . 05 DOES NOT OWN 06	→ 930A
926	Do you have a title deed or other government recognized document for any house you own?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 930A
927	Is your name on this document?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
930A	Do you have an account in a bank or other financial institution that you yourself use?	YES . . . . . 1 NO 2	→ 930C
930B	Did you yourself put money in or take money out of this account in the last 12 months?	YES . . . . . 1 NO 2	
930C	In the last 12 months, have you used a mobile phone to make financial transactions such as sending or receiving money, paying bills, purchasing goods or services, or receiving wages?	YES . . . . . 1 NO 2	
931	PRESENCE OF OTHERS AT THIS POINT (PRESENT AND LISTENING, PRESENT BUT NOT LISTENING, OR NOT PRESENT)	PRES./ LISTEN. / PRES./ NOT LISTEN. / NOT PRES. CHILDREN < 10 . . . . . 1 2 3 HUSBAND . . . . . 1 2 3 OTHER MALES . . . . . 1 2 3 OTHER FEMALES 1 2 3	
932	In your opinion, is a husband justified in hitting or beating his wife in the following situations: a) If she goes out without telling him? b) If she neglects the children? c) If she argues with him? d) If she refuses to have sex with him? e) If she burns the food?	YES / NO / DK a) GOES OUT . . . . . 1 2 8 b) NEGLECTS CHILDREN . . 1 2 8 c) ARGUES . . . . . 1 2 8 d) REFUSES SEX . . . . . 1 2 8 e) BURNS FOOD 1 2 8	

SECTION 10. HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1000	Now I would like to talk about HIV and AIDS.		
1001	Have you ever heard of HIV or AIDS?	YES . . . . . 1 NO 2	→ 1040
1002	CHECK 111: AGE 15-24 YEARS ☐ ↓ 25 YEARS OR OLDER ☐ → 1008		
1003	HIV is the virus that can lead to AIDS. Can people reduce their chance of getting HIV by having just one uninfected sex partner who has no other sex partners?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
1004	Can people get HIV from mosquito bites?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
1005	Can people reduce their chance of getting HIV by using a condom every time they have sex?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
1006	Can people get HIV by sharing food with a person who has HIV?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
1007	Is it possible for a healthy-looking person to have HIV?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
1008	Have you heard of ARVs, that is, antiretroviral medicines that treat HIV?	YES . . . . . 1 NO 2	
1009	Are there any special medicines that a doctor or a nurse can give to a woman infected with HIV to reduce the risk of transmission to the baby?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
1010	Have you heard of PrEP, a medicine taken daily that can prevent a person from getting HIV?	YES . . . . . 1 NO 2	→ 1012
1011	Do you approve of people who take a pill every day to prevent getting HIV?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW/NOT SURE/DEPENDS 8	
1012	CHECK 220 AND 223: NO LIVE BIRTHS ☐ → 1024 LAST LIVE BIRTH 0-23 MONTHS BEFORE THE SURVEY ☐ ↓ LAST LIVE BIRTH 24 MONTHS OR MORE BEFORE THE SURVEY ☐ → 1024		
1013	CHECK 412 FOR LAST LIVE BIRTH ('TYPE 1'): HAD ANTENATAL CARE ☐ ↓ NO ANTENATAL CARE ☐ → 1018		
1014	**CHECK FOR PRESENCE OF OTHERS. BEFORE CONTINUING, MAKE EVERY EFFORT TO ENSURE PRIVACY.**		
1015	Were you tested for HIV as part of your antenatal care while you were pregnant with (CHILD NAME)?	YES . . . . . 1 NO 2	→ 1018

SECTION 10. HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1016	Where was the test done? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD '96' AND WRITE THE NAME OF THE PLACE.	**PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . 11 MATERNITY HOME . . . . . 12 URBAN/RAYON/RURAL HEALTH CENTER 13 REPRODUCTIVE HEALTH CENTER . . . . . 14 HEALTH HOUSE . . . . . 15 INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS CENTER . . . . . 16 IMMUNOPROPHYLAXIS CENTER . . . . . 17 AIDS CENTER . . . . . 18 MOBILE CLINIC OF AIDS CENTER . . . . . 19 HEALTHY LIFESTYLE CENTER . . . . . 20 FAMILY MEDICINE CENTER . . . . . 21 PATRONAGE MEDICAL WORKER . . . . . 22 OTHER PUBLIC SECTOR _____ 26 (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . 31 PRIVATE CLINIC . . . . . 32 PRIVATE DOCTOR . . . . . 33 PRIVATE LABORATORY . . . . . 34 PHARMACY . . . . . 35 PATRONAGE MEDICAL WORKER . . . . . 36 OTHER PRIVATE MEDICAL SECTOR _____ 37 (SPECIFY) **OTHER SOURCE** HOME . . . . . 41 WORKPLACE . . . . . 42 CORRECTIONAL FACILITY . . . . . 43 OTHER _____ 96 (SPECIFY)	
1017	Did you get the results of the test?	YES . . . . . 1 NO 2	
1018	CHECK 435 FOR LAST LIVE BIRTH ('TYPE 1'): ANY CODE '21-46' CIRCLED ☐ ↓ OTHER ☐		→ 1021
1019	Between the time you went for delivery but before the baby was born, were you tested for HIV?	YES . . . . . 1 NO 2	→ 1021
1020	Did you get the results of the test?	YES . . . . . 1 NO 2	→ 1022
1021	CHECK 1015: YES ☐ ↓ NO OR NOT ASKED ☐		→ 1024
1022	Have you been tested for HIV since that time you were tested during your pregnancy?	YES . . . . . 1 NO 2	→ 1025

SECTION 10. HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1023	In what month and year was your most recent HIV test?	MONTH . . . . . ☐☐ DON'T KNOW MONTH . . . . . 98 YEAR . . . . . ☐☐☐☐ DON'T KNOW YEAR 9998	→ 1028
1024	Have you ever been tested for HIV?	YES . . . . . 1 NO 2	→ 1032
1025	In what month and year was your most recent HIV test?	MONTH . . . . . ☐☐ DON'T KNOW MONTH . . . . . 98 YEAR . . . . . ☐☐☐☐ DON'T KNOW YEAR 9998	
1026	Where was the test done? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC, PRIVATE, OR NGO SECTOR, RECORD '96' AND WRITE THE NAME OF THE PLACE.	**PUBLIC SECTOR** GOVERNMENT HOSPITAL . . . . . 11 MATERNITY HOME . . . . . 12 URBAN/RAYON/RURAL HEALTH CENTER 13 REPRODUCTIVE HEALTH CENTER . . . . . 14 HEALTH HOUSE . . . . . 15 INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS CENTER . . . . . 16 IMMUNOPROPHYLAXIS CENTER . . . . . 17 AIDS CENTER . . . . . 18 MOBILE CLINIC OF AIDS CENTER . . . . . 19 HEALTHY LIFESTYLE CENTER . . . . . 20 FAMILY MEDICINE CENTER . . . . . 21 PATRONAGE MEDICAL WORKER . . . . . 22 OTHER PUBLIC SECTOR _____ 26 (SPECIFY) **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL . . . . . 31 PRIVATE CLINIC . . . . . 32 PRIVATE DOCTOR . . . . . 33 PRIVATE LABORATORY . . . . . 34 PHARMACY . . . . . 35 PATRONAGE MEDICAL WORKER . . . . . 36 OTHER PRIVATE MEDICAL SECTOR _____ 37 (SPECIFY) **OTHER SOURCE** HOME . . . . . 41 WORKPLACE . . . . . 42 CORRECTIONAL FACILITY . . . . . 43 OTHER _____ 96 (SPECIFY)	
1027	Did you get the results of the test?	YES . . . . . 1 NO 2	→ 1031

SECTION 10. HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1028	What was the result of the test?	POSITIVE . . . . . 1 NEGATIVE . . . . . 2 INDETERMINATE . . . . . 3 DECLINED TO ANSWER . . . . . 4 DID NOT RECEIVE TEST RESULT 5	→ 1031
1029	In what month and year did you receive your first HIV-positive test result?	MONTH . . . . . ☐☐ DON'T KNOW MONTH . . . . . 98 YEAR . . . . . ☐☐☐☐ DON'T KNOW YEAR . . . . . 9998 SAME DATE AS LAST HIV TEST 95	
1030	Are you currently taking ARVs, that is antiretroviral medicines? By currently, I mean that you may have missed some doses but you are still taking ARVs.	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
1031	How many times have you been tested for HIV in your lifetime? IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE, IF NUMBER OF TESTS IS 95 OR MORE, RECORD '95'	NUMBER OF HIV TESTS . . . . . ☐☐	
1032	Have you heard of test kits people can use to test themselves for HIV?	YES . . . . . 1 NO 2	→ 1034
1033	Have you ever tested yourself for HIV using a self-test kit?	YES . . . . . 1 NO 2	
1034	Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW/NOT SURE/DEPENDS 8	
1035	Do you think children living with HIV should be allowed to attend school with children who do not have HIV?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW/NOT SURE/DEPENDS 8	
1040	CHECK 1001: HEARD ABOUT HIV OR AIDS ☐ ↓ a) Apart from HIV, have you heard about other infections that can be transmitted through sexual contact? NOT HEARD ABOUT HIV OR AIDS ☐ ↓ b) Have you heard about infections that can be transmitted through sexual contact?	YES . . . . . 1 NO 2	
1041	CHECK 722: HAS HAD SEXUAL INTERCOURSE ☐ ↓ NEVER HAD SEXUAL INTERCOURSE ☐ →		→ 1046
1042	CHECK 1040: HEARD ABOUT OTHER SEXUALLY TRANSMITTED INFECTIONS? YES ☐ ↓ NO ☐ →		→ 1044

SECTION 10. HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1043	Now I would like to ask you some questions about your health in the last 12 months. During the last 12 months, have you had a disease which you got through sexual contact?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
1044	Sometimes women experience a bad-smelling abnormal genital discharge. During the last 12 months, have you had a bad-smelling abnormal genital discharge?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
1045	Sometimes women have a genital sore or ulcer. During the last 12 months, have you had a genital sore or ulcer?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
1046	If a wife knows her husband has a disease that she can get during sexual intercourse, is she justified in asking that they use a condom when they have sex?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
1047	Is a wife justified in refusing to have sex with her husband when she knows he has sex with other women?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
1048	CHECK 701: CURRENTLY MARRIED/ LIVING WITH A MAN ☐ ↓ NOT IN UNION ☐ →		1101
1049	Can you say no to your (husband/partner) if you do not want to have sexual intercourse?	YES . . . . . 1 NO . . . . . 2 DEPENDS/NOT SURE 8	
1050	Could you ask your (husband/partner) to use a condom if you wanted him to?	YES . . . . . 1 NO . . . . . 2 DEPENDS/NOT SURE 8	

SECTION 11. OTHER HEALTH ISSUES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1101	How long does it take in minutes to go from your home to the nearest healthcare facility, which could be a hospital, a health clinic, a medical doctor, or a health post?	MINUTES . . . . . [ ][ ][ ]	
1102	How do you travel to this healthcare facility from your home? IF MORE THAN ONE WAY OF TRAVEL IS MENTIONED, RECORD THE ONE HIGHEST ON THE LIST.	**MOTORIZED** CAR/TRUCK . . . . . 01 PUBLIC BUS . . . . . 02 MOTORCYCLE/SCOOTER . . . . . 03 BOAT WITH MOTOR . . . . . 04 **NOT MOTORIZED** ANIMAL-DRAWN CART . . . . . 05 BICYCLE . . . . . 06 BOAT WITHOUT MOTOR . . . . . 07 WALKING . . . . . 08 OTHER _____ 96 (SPECIFY)	
CD01	Have you ever had your blood pressure measured by a doctor or other healthcare worker?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
CD02	Have you ever been told by a doctor or other healthcare worker that you have high blood pressure or hypertension?	YES . . . . . 1 NO 2	→ CD06
CD03	In the past 3 years, have you been told by a doctor or other healthcare worker that you have high blood pressure or hypertension?	YES . . . . . 1 NO 2	
CD06	Have you ever had your blood sugar measured by a doctor or other healthcare worker?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
CD07	Have you ever been told by a doctor or other healthcare worker that you have high blood sugar or diabetes?	YES . . . . . 1 NO 2	→ 1103
CD08	In the past 3 years, have you been told by a doctor or other healthcare worker that you have high blood sugar or diabetes?	YES . . . . . 1 NO 2	
1103	Has a doctor or other healthcare provider examined your breasts to check for breast cancer?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
1104	Now I'm going to ask you about tests a healthcare worker can do to check for cervical cancer, which is cancer in the cervix. The cervix connects the womb to the vagina. To be checked for cervical cancer, a woman is asked to lie on her back with her legs apart. Then the healthcare worker will use a brush or swab to collect a sample from inside her. The sample is sent to a laboratory for testing. This test is called a Pap smear or HPV test. Another method is called a VIA or Visual Inspection with Acetic Acid. In this test, the healthcare worker puts vinegar on the cervix to see if there is a reaction.		
1105	Has a doctor or other healthcare worker ever tested you for cervical cancer?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
1106	Now I would like to ask you some questions on smoking and tobacco use. Do you currently smoke cigarettes every day, some days, or not at all?	EVERY DAY . . . . . 1 SOME DAYS . . . . . 2 NOT AT ALL 3	→ 1108

SECTION 11. OTHER HEALTH ISSUES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1107	On average, how many cigarettes do you currently smoke each day?	NUMBER OF CIGARETTES . . . . . [ ][ ]	
1108	Do you currently smoke or use any other type of tobacco every day, some days, or not at all?	EVERY DAY . . . . . 1 SOME DAYS . . . . . 2 NOT AT ALL 3	→ 1110
1109	What other type of tobacco do you currently smoke or use? RECORD ALL MENTIONED.	PIPES FULL OF TOBACCO . . . . . B CIGARS, CHEROOTS, OR CIGARILLOS . . . . . C WATER PIPE . . . . . D NAS BY MOUTH . . . . . E NAS BY NOSE . . . . . F CHEWING TOBACCO . . . . . G OTHER _____ X (SPECIFY)	
1110	Now I would like to ask you some questions about drinking alcohol. Have you ever consumed any alcohol, such as beer, wine, spirits?	YES . . . . . 1 NO 2	→ 1113
1111	During the last one month, on how many days did you have an alcoholic drink? IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE. IF RESPONDENT ANSWERS 'EVERY DAY' OR 'ALMOST EVERY DAY,' CODE '95'.	DID NOT DRINK ALCOHOL . . . . . 00 NUMBER OF DAYS . . . . . [ ][ ] EVERY DAY/ALMOST EVERY DAY 95	→ 1113
1112	We count one drink of alcohol as one can or bottle of beer, one glass of wine, one shot of spirit. In the last one month, on the days that you drank alcohol, how many drinks did you usually have per day? SHOW PICTURES OF SIZES OF STANDARD DRINKS.	LESS THAN ONE STANDARD DRINK . . . . . 00 NUMBER OF DRINKS . . . . . [ ][ ]	
1113	Many different factors can prevent women from getting medical advice or treatment for themselves. When you are sick and want to get medical advice or treatment, is each of the following a big problem or not a big problem:	BIG PROBLEM / NOT A BIG PROBLEM	
	a) Getting permission to go to the doctor?	a) PERMISSION TO GO . . . . . 1 / 2	
	b) Getting money needed for advice or treatment?	b) GETTING MONEY . . . . . 1 / 2	
	c) The distance to the health facility?	c) DISTANCE . . . . . 1 / 2	
	d) Not wanting to go alone?	d) GO ALONE . . . . . 1 / 2	

DOMESTIC VIOLENCE MODULE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
DV00	CHECK COVER PAGE: WOMAN SELECTED FOR DV MODULE? WOMAN SELECTED FOR THIS SECTION ↓ WOMAN NOT SELECTED → DV38		
DV01	CHECK FOR PRESENCE OF OTHERS: DO NOT CONTINUE UNTIL PRIVACY IS ENSURED. PRIVACY OBTAINED . . . . . 1 ↓ PRIVACY NOT POSSIBLE . . . . . 2 → DV37		
DV02	Now I would like to ask you questions about some other important aspects of a woman's life. You may find some of these questions very personal. However, your answers are crucial for helping to understand the condition of women in [COUNTRY]. Let me assure you that your answers are completely confidential and will not be told to anyone and no one else in your household will know that you were asked these questions. If I ask you any question you don't want to answer, just let me know and I will go on to the next question.		
DV03	CHECK 701 AND 702: NEVER MARRIED/ NEVER LIVED WITH A MAN ↓ CURRENTLY MARRIED/ LIVING WITH A MAN → DV06 FORMERLY MARRIED/ LIVED WITH A MAN (READ IN PAST TENSE AND USE 'LAST' WITH 'HUSBAND/ MALE PARTNER') → DV06		
DV04	You have said that you are not married and are not living with a man as if married. Are you currently in an intimate relationship with a man even though you are not living with him?	YES . . . . . 1 NO 2	→ DV06
DV05	Have you ever been in an intimate relationship with a man even though you did not ever live with him?	YES . . . . . 1 NO 2	→ DV19
DV06	Now, I am going to ask you about some situations that can happen between some women and their (husband/male partner).		

	A. Please tell me if these descriptions apply to your relationship with your (last) (husband/male partner). EVER		B. How often did this happen during the last 12 months: often, only sometimes, or not at all? OFTEN	SOME-TIMES	NOT IN LAST 12 MONTHS
a)	He (is/was) jealous or angry if you (talk/talked) to other men?	YES 1 → / NO 2 ↓	1	2	3
b)	He wrongly (accuses/accused) you of being unfaithful?	YES 1 → / NO 2 ↓	1	2	3
c)	He (does/did) not permit you to meet your female friends?	YES 1 → / NO 2 ↓	1	2	3
d)	He (tries/tried) to limit your contact with your family?	YES 1 → / NO 2 ↓	1	2	3
e)	He (insists/insisted) on knowing where you (are/were) at all times?	YES 1 → / NO 2 ↓	1	2	3

DOMESTIC VIOLENCE MODULE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP

DV07 Now I need to ask some more questions about your relationship with your (last) (husband/male partner).

	A. Did your (last) (husband/male partner) ever:	EVER		B. How often did this happen during the last 12 months: often, only sometimes, or not at all? OFTEN	SOME-TIMES	NOT IN LAST 12 MONTHS
a)	say or do something to humiliate you in front of others?	YES	1 →	1	2	3
		NO	2 ↓			
b)	threaten to hurt or harm you or someone you care about?	YES	1 →	1	2	3
		NO	2 ↓			
c)	insult you or make you feel bad about yourself?	YES	1 →	1	2	3
		NO	2 ↓			

DV08 A. Did your (last) (husband/male partner) ever do any of the following things to you:

B. How often did this happen during the last 12 months: often, only sometimes, or not at all?

		EVER		OFTEN	SOME-TIMES	NOT IN LAST 12 MONTHS
a)	push you, shake you, or throw something at you?	YES	1 →	1	2	3
		NO	2 ↓			
b)	slap you?	YES	1 →	1	2	3
		NO	2 ↓			
c)	twist your arm or pull your hair?	YES	1 →	1	2	3
		NO	2 ↓			
d)	punch you with his fist or with something that could hurt you?	YES	1 →	1	2	3
		NO	2 ↓			
e)	kick you, drag you, or beat you up?	YES	1 →	1	2	3
		NO	2 ↓			
f)	try to choke you or burn you on purpose?	YES	1 →	1	2	3
		NO	2 ↓			
g)	attack you with a knife, gun, or other weapon?	YES	1 →	1	2	3
		NO	2 ↓			
h)	physically force you to have sexual intercourse with him when you did not want to?	YES	1 →	1	2	3
		NO	2 ↓			
i)	physically force you to perform any other sexual acts you did not want to?	YES	1 →	1	2	3
		NO	2 ↓			
j)	force you with threats or in any other way to perform sexual acts you did not want to?	YES	1 →	1	2	3
		NO	2 ↓			

DV09 CHECK DV08A (a-j):

AT LEAST ONE 'YES' ☐ ↓

NOT A SINGLE 'YES' ☐ → DV11

DOMESTIC VIOLENCE MODULE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
DV10	Did the following ever happen as a result of what your (last) (husband/male partner) did to you:		
	a) You had cuts, bruises, or aches?	YES . . . . . 1 NO 2	
	b) You had eye injuries, sprains, dislocations, or burns?	YES . . . . . 1 NO 2	
	c) You had deep wounds, broken bones, broken teeth, or any other serious injury?	YES . . . . . 1 NO 2	
DV11	Have you ever hit, slapped, kicked, or done anything else to physically hurt your (last) (husband/male partner) at times when he was not already beating or physically hurting you?	YES . . . . . 1 NO 2	→ DV13
DV12	In the last 12 months, how often have you done this to your (last) (husband/male partner): often, only sometimes, or not at all?	OFTEN . . . . . 1 SOMETIMES . . . . . 2 NOT AT ALL 3	
DV13	Did your (last) (husband/male partner) drink alcohol?	YES . . . . . 1 NO 2	→ DV15
DV14	How often did he get drunk: often, only sometimes, or never?	OFTEN . . . . . 1 SOMETIMES . . . . . 2 NEVER 3	
DV15	Were you afraid of your (last) (husband/male partner): most of the time, sometimes, or never?	MOST OF THE TIME AFRAID . . . . . 1 SOMETIMES AFRAID . . . . . 2 NEVER AFRAID 3	
DV16	A. So far we have been talking about the behavior of your (current/last) (husband/male partner). Now I want to ask you about the behavior of any previous husband or any other current or previous male partner that you may have ever had.	B. How long ago did this last happen?	

	EVER		0 - 11 MONTHS AGO	12+ MONTHS AGO	DON'T REMEMBER	
	HAS NEVER HAD ANOTHER HUSBAND/ MALE PARTNER 6					→ DV17
a) Did any previous husband or any other current or previous male partner ever hit, slap, kick, or do anything else to hurt you physically?	YES NO	1 2	→ 1	2	3	
b) Did any previous husband or any other current or previous male partner physically force you to have intercourse or perform any other sexual acts that you did not want to?	YES NO	1 2	→ 1	2	3	
c) Did any previous husband or any other current or previous male partner humiliate you in front of others, threaten to hurt you or someone you care about, or insult you or make you feel bad about yourself?	YES NO	1 2	→ 1	2	3	

DV17	CHECK DV08A (h-j) AND DV16A (b): AT LEAST ONE 'YES' ☐ ↓ NOT A SINGLE YES ☐ →		DV19

DOMESTIC VIOLENCE MODULE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
DV18	How old were you the first time you were forced to have sexual intercourse or perform any other sexual acts that you did not want to by any current or previous husband or male partner?	AGE IN COMPLETED YEARS . . . . . ☐☐ DON'T KNOW 98	
DV19	CHECK 212 AND 232: CURRENTLY PREGNANT 232=1 OR HAD ONE OR MORE PAST PREGNANCIES 212>0 ☐ ↓ NOT PREGNANT 232=2 AND NO PAST PREGNANCIES 212=0 ☐ →		DV22
DV20	Has any one ever hit, slapped, kicked, or done anything else to hurt you physically while you were pregnant?	YES . . . . . 1 NO 2	→ DV22
DV21	Who has done any of these things to physically hurt you while you were pregnant? Anyone else? RECORD ALL MENTIONED.	CURRENT HUSBAND/PARTNER . . . . . A MOTHER/STEP-MOTHER . . . . . B FATHER/STEP-FATHER . . . . . C SISTER/BROTHER . . . . . D DAUGHTER/SON . . . . . E OTHER RELATIVE . . . . . F FORMER HUSBAND/PARTNER . . . . . G CURRENT BOYFRIEND . . . . . H FORMER BOYFRIEND . . . . . I MOTHER-IN-LAW . . . . . J FATHER-IN-LAW . . . . . K OTHER IN-LAW . . . . . L TEACHER . . . . . M SCHOOLMATE/CLASSMATE . . . . . N EMPLOYER/SOMEONE AT WORK . . O POLICE/SOLDIER . . . . . P OTHER _____ X (SPECIFY)	
DV22	CHECK 701 AND 702 AND DV04 AND DV05: EVER MARRIED/EVER LIVED WITH A MAN/ EVER HAD A MALE PARTNER ☐ ↓ a) From the time you were 15 years old, has anyone other than a husband or male partner, hit you, slapped you, kicked you, or done anything else to hurt you physically? Remember, I do not want you to include any husband or any other male partner. NEVER MARRIED/ NEVER HAD A MALE PARTNER ☐ ↓ b) From the time you were 15 years old has anyone hit you, slapped you, kicked you, or done anything else to hurt you physically?	YES . . . . . 1 NO . . . . . 2 REFUSED TO ANSWER/ NO ANSWER 3	→ DV25

DOMESTIC VIOLENCE MODULE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
DV23	Who has hurt you in this way? Anyone else? RECORD ALL MENTIONED.	MOTHER/STEP-MOTHER . . . . . A FATHER/STEP-FATHER . . . . . B SISTER/BROTHER . . . . . C DAUGHTER/SON . . . . . D OTHER RELATIVE . . . . . E CURRENT BOYFRIEND . . . . . F FORMER BOYFRIEND . . . . . G MOTHER-IN-LAW . . . . . H FATHER-IN-LAW . . . . . I OTHER IN-LAW . . . . . J TEACHER . . . . . K SCHOOLMATE/CLASSMATE . . . . . L EMPLOYER/SOMEONE AT WORK . . M POLICE/SOLDIER . . . . . N OTHER _____ X (SPECIFY)	
DV24	In the last 12 months, how often (has this person/have these persons) physically hurt you: often, only sometimes, or not at all?	OFTEN . . . . . 1 SOMETIMES . . . . . 2 NOT AT ALL 3	
DV25	CHECK 701 AND 702 AND DV04 AND DV05: EVER MARRIED/ EVER LIVED WITH A MAN/ EVER HAD A MALE PARTNER ☐ ↓ NEVER MARRIED/ NEVER HAD A MALE PARTNER ☐ →		DV27
DV26	At any time in your life, as a child or as an adult, has anyone other than any previous husband or any other current or previous male partner ever forced you in any way to have sexual intercourse or perform any other sexual acts when you did not want to? Remember I do not want you to include any husband or male partner.	YES . . . . . 1 NO . . . . . 2 REFUSED TO ANSWER/ NO ANSWER 3	→ DV28 → DV31
DV27	At any time in your life, as a child or as an adult, has anyone ever forced you in any way to have sexual intercourse or perform any other sexual acts when you did not want to?	YES . . . . . 1 NO . . . . . 2 REFUSED TO ANSWER/ NO ANSWER 3	→ DV31
DV28	CHECK 701 AND 702 AND DV04 AND DV05: EVER MARRIED/EVER LIVED WITH A MAN/ EVER HAD A MALE PARTNER ☐ ↓ a) How old were you the first time you were forced to have sexual intercourse or perform any other sexual acts that you did not want to by anyone, not including any husband or any other male partner? NEVER MARRIED/ NEVER HAD A MALE PARTNER ☐ ↓ b) How old were you the first time you were forced to have sexual intercourse or perform any other sexual acts that you did not want to?	AGE IN COMPLETED YEARS . . . . . ☐☐ DON'T KNOW 98	

DOMESTIC VIOLENCE MODULE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
DV29	Who has forced you to have sexual intercourse or perform any other sexual acts that you did not want to? Anyone else? RECORD ALL MENTIONED.	FATHER/STEP-FATHER . . . . . A BROTHER/STEP-BROTHER . . . . . B OTHER RELATIVE . . . . . C CURRENT BOYFRIEND . . . . . D FORMER BOYFRIEND . . . . . E IN-LAW . . . . . F OWN FRIEND/ACQUAINTANCE . . . . . G FAMILY FRIEND . . . . . H TEACHER . . . . . I SCHOOLMATE/CLASSMATE . . . . . J EMPLOYER/SOMEONE AT WORK . . K POLICE/SOLDIER . . . . . L PRIEST/RELIGIOUS LEADER . . . . . M STRANGER . . . . . N OTHER _____ X (SPECIFY)	
DV30	CHECK 701 AND 702 AND DV04 AND DV05: EVER MARRIED/EVER LIVED WITH A MAN/ EVER HAD A MALE PARTNER ☐ a) In the last 12 months, has anyone other than any previous husband or any other current or previous male partner forced you to have sexual intercourse or perform any other sexual acts that you did not want to? NEVER MARRIED/ NEVER HAD A MALE PARTNER ☐ b) In the last 12 months, has anyone forced you to have sexual intercourse or perform any other sexual acts that you did not want to?	YES . . . . . 1 NO 2	
DV31	CHECK DV08A (a-j), DV16A (a,b), DV20, DV22, DV26, AND DV27: AT LEAST ONE 'YES' ☐ NOT A SINGLE 'YES' ☐ → DV35		
DV32	Thinking about what you yourself have experienced among the different things we have been talking about, have you ever tried to seek help?	YES . . . . . 1 NO . . . . . 2 → DV34	
DV33	From whom have you sought help? Anyone else? RECORD ALL MENTIONED.	OWN FAMILY . . . . . A HUSBAND'S/PARTNER'S FAMILY . . B CURRENT/FORMER HUSBAND/PARTNER . . . . . C CURRENT/FORMER BOYFRIEND . . D FRIEND . . . . . E NEIGHBOR . . . . . F RELIGIOUS LEADER . . . . . G DOCTOR/MEDICAL PERSONNEL . . . . . H POLICE . . . . . I LAWYER . . . . . J SOCIAL SERVICE ORGANIZATION . . K OTHER _____ X (SPECIFY)	→ DV35

DOMESTIC VIOLENCE MODULE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
DV34	Have you ever told any one about this?	YES . . . . . 1 NO 2	
DV35	As far as you know, did your father ever beat your mother?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
	THANK THE RESPONDENT FOR HER COOPERATION AND REASSURE HER ABOUT THE CONFIDENTIALITY OF HER ANSWERS. FILL OUT THE QUESTIONS BELOW WITH REFERENCE TO THE DOMESTIC VIOLENCE MODULE ONLY.		
DV36	DID YOU HAVE TO INTERRUPT THE INTERVIEW BECAUSE SOME ADULT WAS TRYING TO LISTEN, OR CAME INTO THE ROOM, OR INTERFERED IN ANY OTHER WAY?	YES, ONCE / YES, MORE THAN ONCE / NO HUSBAND . . . . . 1 / 2 / 3 OTHER MALE ADULT . . 1 / 2 / 3 FEMALE ADULT . . . . . 1 / 2 / 3	
DV37	INTERVIEWER'S COMMENTS/EXPLANATION FOR NOT COMPLETING THE DOMESTIC VIOLENCE MODULE. _____ _____ _____		
DV38	RECORD THE TIME.	HOURS . . . . . [ ][ ] MINUTI . . . . . [ ][ ]	

INSTRUCTIONS:

ONLY ONE CODE SHOULD APPEAR IN ANY BOX.
COLUMN 1 REQUIRES A CODE IN EVERY MONTH.

CODES FOR EACH COLUMN:

COLUMN 1: BIRTHS, PREGNANCIES, CONTRACEPTIVE USE

- B BIRTHS
- P PREGNANCIES
- T TERMINATIONS

- 0 NO METHOD
- 1 FEMALE STERILIZATION
- 2 MALE STERILIZATION
- 3 IUD
- 4 INJECTABLES
- 5 IMPLANTS
- 6 PILL
- 7 CONDOM
- 8 FEMALE CONDOM
- 9 EMERGENCY CONTRACEPTION

- K LACTATIONAL AMENORRHEA METHOD
- L RHYTHM METHOD

- M WITHDRAWAL
- X OTHER MODERN METHOD
- Y OTHER TRADITIONAL METHOD

COLUMN 2: DISCONTINUATION OF CONTRACEPTIVE USE

- 0 INFREQUENT SEX/HUSBAND AWAY
- 1 BECAME PREGNANT WHILE USING
- 2 WANTED TO BECOME PREGNANT
- 3 HUSBAND/PARTNER DISAPPROVED
- 4 WANTED MORE EFFECTIVE METHOD
- 5 CHANGES IN MENSTRUAL BLEEDING

- 6 OTHER SIDE EFFECTS/HEALTH CONCERNS

- 7 LACK OF ACCESS/TOO FAR
- 8 COSTS TOO MUCH
- N INCONVENIENT TO USE
- F UP TO GOD/FATALISTIC
- A DIFFICULT TO GET PREGNANT/MENOPAUSAL
- D MARITAL DISSOLUTION/SEPARATION
- X OTHER

_____
(SPECIFY)

- Z DON'T KNOW

				COL. 1	COL. 2	
	12	DEC	01			
	11	NOV	02			
	10	OCT	03			
2	09	SEP	04			2
	08	AUG	05			
0	07	JUL	06			0
2	06	JUN	07			2
	05	MAY	08			
3	04	APR	09			3
	03	MAR	10			
	02	FEB	11			
	01	JAN	12			
	12	DEC	13			
	11	NOV	14			
	10	OCT	15			
2	09	SEP	16			2
	08	AUG	17			
0	07	JUL	18			0
2	06	JUN	19			2
	05	MAY	20			
2	04	APR	21			2
	03	MAR	22			
	02	FEB	23			
	01	JAN	24			
	12	DEC	25			
	11	NOV	26			
	10	OCT	27			
	09	SEP	28			
2	08	AUG	29			2
0	07	JUL	30			0
2	06	JUN	31			2
	05	MAY	32			
1	04	APR	33			1
	03	MAR	34			
	02	FEB	35			
	01	JAN	36			
	12	DEC	37			
	11	NOV	38			
	10	OCT	39			
2	09	SEP	40			2
	08	AUG	41			
0	07	JUL	42			0
2	06	JUN	43			2
	05	MAY	44			
0	04	APR	45			0
	03	MAR	46			
	02	FEB	47			
	01	JAN	48			
	12	DEC	49			
	11	NOV	50			
	10	OCT	51			
2	09	SEP	52			2
	08	AUG	53			
0	07	JUL	54			0
1	06	JUN	55			1
	05	MAY	56			
9	04	APR	57			9
	03	MAR	58			
	02	FEB	59			
	01	JAN	60			
	12	DEC	61			
	11	NOV	62			
	10	OCT	63			
2	09	SEP	64			2
	08	AUG	65			
0	07	JUL	66			0
1	06	JUN	67			1
	05	MAY	68			
8	04	APR	69			8
	03	MAR	70			
	02	FEB	71			
	01	JAN	72			

INTERVIEWER'S OBSERVATIONS

TO BE FILLED IN AFTER COMPLETING INTERVIEW

COMMENTS ABOUT INTERVIEW:

COMMENTS ON SPECIFIC QUESTIONS:

ANY OTHER COMMENTS:

SUPERVISOR'S OBSERVATIONS

FORMATTING DATE: 07 June 2023
ENGLISH LANGUAGE: 10 Oct 2019

2023 DEMOGRAPHIC AND HEALTH SURVEY
BIOMARKER QUESTIONNAIRE

REPUBLIC OF TAJIKISTAN
AGENCY ON STATISTICS UNDER THE PRESIDENT OF THE REPUBLIC OF TAJIKISTAN
MINISTRY OF HEALTH AND SOCIAL PROTECTION OF THE POPULATION OF THE REPUBLIC OF TAJIKISTAN

IDENTIFICATION

PLACE NAME _____

NAME OF HOUSEHOLD HEAD _____

CLUSTER NUMBER . . . . . | | | | |

HOUSEHOLD NUMBER . . . . . | | | | |

BIOMARKER VISITS

	1	2	3	FINAL VISIT
DATE				DAY
BIOMARKER'S NAME				MONTH YEAR
NEXT VISIT: DATE				TOTAL NUMBER OF VISITS
TIME				

NOTES:

_____

_____

_____

_____

_____

TOTAL ELIGIBLE CHILDREN

TOTAL ELIGIBLE WOMEN

LANGUAGE OF QUESTIONNAIRE** 0 1

LANGUAGE OF INTERVIEW**

NATIVE LANGUAGE OF RESPONDENT**

TRANSLATOR (YES = 1, NO = 2)

LANGUAGE OF QUESTIONNAIRE** **ENGLISH**

**LANGUAGE CODES:

01 ENGLISH	03 TAJIK	05 UZBEK
02 RUSSIAN	04 KYRGYZ	06 OTHER

TEAM	TEAM SUPERVISOR		CAPI SUPERVISOR	
NUMBER	NAME	NUMBER	NAME	NUMBER

WEIGHT, HEIGHT, AND HEMOGLOBIN MEASUREMENT FOR CHILDREN AGE 0-4

101	CHECK CAPI OUTPUT FOR "LIST ELIGIBLE INDIVIDUALS/BIOMARKERS". RECORD THE LINE NUMBER AND NAME FOR ALL ELIGIBLE CHILDREN AGE 0-5 YEARS IN QUESTION 102 ON THIS PAGE AND SUBSEQUENT PAGES STARTING WITH THE FIRST ONE LISTED. IF MORE THAN THREE CHILDREN, USE ADDITIONAL QUESTIONNAIRE(S).		
	CHILD 1		SKIP
102	CHECK CAPI OUTPUT AND RECORD NAME AND LINE NUMBER OF CHILD.	NAME _____ LINE NUMBER . . . . . ☐☐	
103	IF MOTHER INTERVIEWED: COPY CHILD'S DATE OF BIRTH (DAY, MONTH, AND YEAR) FROM PREGNANCY HISTORY. IF MOTHER NOT INTERVIEWED ASK: What is (NAME)'s date of birth?	DAY . . . . . ☐☐ MONTH . . . . . ☐☐ YEAR . . . . . ☐☐☐☐	
104	IF MOTHER INTERVIEWED: COPY CHILD'S AGE FROM PREGNANCY HISTORY. IF MOTHER NOT INTERVIEWED ASK: How old was (NAME) at (NAME)'s last birthday? COMPARE AND CORRECT 103 AND/OR 104 IF INCONSISTENT.	AGE IN COMPLETED YEARS ☐☐	
105	CHECK 104: CHILD AGE 0-4 YEARS? YES ☐ NO ☐		→ 125
106	WEIGHT IN KILOGRAMS.	KG. . . . . ☐☐.☐☐ NOT PRESENT . . . . . 9994 REFUSED . . . . . 9995 OTHER 9996	→ 108
107	WAS THE CHILD MINIMALLY DRESSED?	YES . . . . . 1 NO 2	
108	HEIGHT IN CENTIMETERS. IF CHILD IS AGE 0-1 YEARS, MEASURE LYING DOWN. IF CHILD IS AGE 2, 3, OR 4 YEARS, MEASURE STANDING UP.	CM. . . . . ☐☐☐.☐ NOT PRESENT . . . . . 9994 REFUSED . . . . . 9995 OTHER 9996	→ 113
109	WAS THE CHILD MEASURED LYING DOWN OR STANDING UP?	LYING DOWN . . . . . 1 STANDING UP 2	
110	CHECK 104 AND 109: BASED ON CHILD'S AGE, WAS CORRECT MEASUREMENT PROCEDURE FOLLOWED?	YES . . . . . 1 NO 2	→ 112
111	IF CHILD IS AGE 0-1 YEARS: WHY WAS (NAME) MEASURED STANDING UP? IF CHILD IS AGE 2-4 YEARS: WHY WAS (NAME) MEASURED LYING DOWN? _____ _____		
112	WAS THE RECORDED MEASUREMENT INTERFERED WITH BY BRAIDED OR ORNAMENTED HAIR?	YES . . . . . 1 NO 2	
113	ENTER BIOMARKER NUMBER OF MEASURER.	☐☐☐☐ BIOMARKER NUMBER	
114	ENTER BIOMARKER NUMBER OF ASSISTANT MEASURER.	☐☐☐☐ BIOMARKER NUMBER	
115	TODAY'S DATE:	DAY . . . . . ☐☐ MONTH . . . . . ☐☐ YEAR . . . . . ☐☐☐☐	

	CHILD 1		SKIP
116	RECORD HEIGHT/LENGTH AND WEIGHT IN THE ANTHROPOMETRY AND ANEMIA PAMPHLET.		
117	CHECK 103: IS THE CHILD AGE 0-5 MONTHS OR IS THE CHILD OLDER?	OLDER ☐ ↓ AGE 0-5 MONTHS ☐ → 125	
118	RECORD NAME OF PARENT/RESPONSIBLE ADULT FOR THE CHILD.	NAME _____ LINE NUMBER . . . . . ☐☐	
119	ASK CONSENT FOR ANEMIA TEST FROM PARENT/RESPONSIBLE ADULT: As part of this survey, we are asking people all over the country to take an anemia test. Anemia is a serious health problem that usually results from poor nutrition, infection, or chronic disease. This survey will assist the government to develop programs to prevent and treat anemia. We ask that all children under age 5 take part in anemia testing. The anemia test requires a few drops of blood from a finger or heel. The equipment used to take the blood is clean and completely safe. It has never been used before and will be thrown away after each test. The blood will be tested for anemia immediately, and the result will be told to you right away. The result will be kept strictly confidential and will not be shared with anyone other than members of our survey team. Do you have any questions?		
120	CIRCLE THE CODE.	GRANTED . . . . . 1 REFUSED . . . . . 2 NOT PRESENT/OTHER 3	
121	SIGN NAME AND ENTER BIOMARKER NUMBER OF HEMOGLOBIN MEASURER.	_____ (SIGN) ☐☐☐☐ BIOMARKER NUMBER	
122	RECORD HEMOGLOBIN LEVEL HERE AND IN THE ANTHROPOMETRY AND ANEMIA PAMPHLET.	G/DL . . . . . ☐☐.☐ NOT PRESENT . . . . . 994 REFUSED . . . . . 995 → 125 OTHER 996	
123	CHECK 122: HEMOGLOBIN RESULT	BELOW 8.0 G/DL, SEVERE ANEMIA . . . . . 1 8.0 G/DL OR ABOVE . . . . . 2 → 125	
124	The anemia test shows that (NAME OF CHILD) has severe anemia. Your child is very ill and must be taken to a health facility immediately. RECORD THE RESULT OF THE ANEMIA TEST ON THE SEVERE ANEMIA REFERRAL FORM.		
125	IF ANOTHER CHILD, GO TO 102 ON THE NEXT PAGE; IF NO MORE CHILDREN, GO TO 201.		

WEIGHT, HEIGHT, AND HEMOGLOBIN MEASUREMENT FOR CHILDREN AGE 0-4

101	CHECK CAPI OUTPUT FOR "LIST ELIGIBLE INDIVIDUALS/BIOMARKERS". RECORD THE LINE NUMBER AND NAME FOR ALL ELIGIBLE CHILDREN AGE 0-5 YEARS IN QUESTION 102 ON THIS PAGE AND SUBSEQUENT PAGES STARTING WITH THE FIRST ONE LISTED. IF MORE THAN THREE CHILDREN, USE ADDITIONAL QUESTIONNAIRE(S).		
	CHILD 2		SKIP
102	CHECK CAPI OUTPUT AND RECORD NAME AND LINE NUMBER OF CHILD.	NAME _____ LINE NUMBER . . . . . ☐☐	
103	IF MOTHER INTERVIEWED: COPY CHILD'S DATE OF BIRTH (DAY, MONTH, AND YEAR) FROM PREGNANCY HISTORY. IF MOTHER NOT INTERVIEWED ASK: What is (NAME)'s date of birth?	DAY . . . . . ☐☐ MONTH . . . . . ☐☐ YEAR . . . . . ☐☐☐☐	
104	IF MOTHER INTERVIEWED: COPY CHILD'S AGE FROM PREGNANCY HISTORY. IF MOTHER NOT INTERVIEWED ASK: How old was (NAME) at (NAME)'s last birthday? COMPARE AND CORRECT 103 AND/OR 104 IF INCONSISTENT.	AGE IN COMPLETED YEARS ☐☐	
105	CHECK 104: CHILD AGE 0-4 YEARS? YES ☐ NO ☐		→ 125
106	WEIGHT IN KILOGRAMS.	KG. . . . . ☐☐.☐☐ NOT PRESENT . . . . . 9994 REFUSED . . . . . 9995 OTHER 9996	→ 108
107	WAS THE CHILD MINIMALLY DRESSED?	YES . . . . . 1 NO 2	
108	HEIGHT IN CENTIMETERS. IF CHILD IS AGE 0-1 YEARS, MEASURE LYING DOWN. IF CHILD IS AGE 2, 3, OR 4 YEARS, MEASURE STANDING UP.	CM. . . . . ☐☐☐.☐ NOT PRESENT . . . . . 9994 REFUSED . . . . . 9995 OTHER 9996	→ 113
109	WAS THE CHILD MEASURED LYING DOWN OR STANDING UP?	LYING DOWN . . . . . 1 STANDING UP 2	
110	CHECK 104 AND 109: BASED ON CHILD'S AGE, WAS CORRECT MEASUREMENT PROCEDURE FOLLOWED?	YES . . . . . 1 NO 2	→ 112
111	IF CHILD IS AGE 0-1 YEARS: WHY WAS (NAME) MEASURED STANDING UP? IF CHILD IS AGE 2-4 YEARS: WHY WAS (NAME) MEASURED LYING DOWN? _____ _____		
112	WAS THE RECORDED MEASUREMENT INTERFERED WITH BY BRAIDED OR ORNAMENTED HAIR?	YES . . . . . 1 NO 2	
113	ENTER BIOMARKER NUMBER OF MEASURER.	☐☐☐☐ BIOMARKER NUMBER	
114	ENTER BIOMARKER NUMBER OF ASSISTANT MEASURER.	☐☐☐☐ BIOMARKER NUMBER	
115	TODAY'S DATE:	DAY . . . . . ☐☐ MONTH . . . . . ☐☐ YEAR . . . . . ☐☐☐☐	

	CHILD 2		SKIP
116	RECORD HEIGHT/LENGTH AND WEIGHT IN THE [ANTHROPOMETRY AND ANEMIA PAMPHLET].		
117	CHECK 103: IS THE CHILD AGE 0-5 MONTHS OR IS THE CHILD OLDER?	OLDER ☐ ↓ AGE 0-5 MONTHS ☐ → 125	
118	RECORD NAME OF PARENT/RESPONSIBLE ADULT FOR THE CHILD.	NAME _____ LINE NUMBER . . . . . ☐☐	
119	ASK CONSENT FOR ANEMIA TEST FROM PARENT/RESPONSIBLE ADULT: As part of this survey, we are asking people all over the country to take an anemia test. Anemia is a serious health problem that usually results from poor nutrition, infection, or chronic disease. This survey will assist the government to develop programs to prevent and treat anemia. We ask that all children under age 5 take part in anemia testing. The anemia test requires a few drops of blood from a finger or heel. The equipment used to take the blood is clean and completely safe. It has never been used before and will be thrown away after each test. The blood will be tested for anemia immediately, and the result will be told to you right away. The result will be kept strictly confidential and will not be shared with anyone other than members of our survey team. Do you have any questions?		
120	CIRCLE THE CODE.	GRANTED . . . . . 1 REFUSED . . . . . 2 NOT PRESENT/OTHER 3	
121	SIGN NAME AND ENTER BIOMARKER NUMBER OF HEMOGLOBIN MEASURER.	_____ (SIGN) ☐☐☐☐ BIOMARKER NUMBER	
122	RECORD HEMOGLOBIN LEVEL HERE AND IN THE ANTHROPOMETRY AND ANEMIA PAMPHLET.	G/DL . . . . . ☐☐.☐ NOT PRESENT . . . . . 994 REFUSED . . . . . 995 → 125 OTHER 996	
123	CHECK 122: HEMOGLOBIN RESULT	BELOW 8.0 G/DL, SEVERE ANEMIA . . . . . 1 8.0 G/DL OR ABOVE . . . . . 2 → 125	
124	The anemia test shows that (NAME OF CHILD) has severe anemia. Your child is very ill and must be taken to a health facility immediately. RECORD THE RESULT OF THE ANEMIA TEST ON THE SEVERE ANEMIA REFERRAL FORM.		
125	IF ANOTHER CHILD, GO TO 102 ON THE NEXT PAGE; IF NO MORE CHILDREN, GO TO 201.		

WEIGHT, HEIGHT, AND HEMOGLOBIN MEASUREMENT FOR CHILDREN AGE 0-4

101	CHECK CAPI OUTPUT FOR "LIST ELIGIBLE INDIVIDUALS/BIOMARKERS". RECORD THE LINE NUMBER AND NAME FOR ALL ELIGIBLE CHILDREN AGE 0-5 YEARS IN QUESTION 102 ON THIS PAGE AND SUBSEQUENT PAGES STARTING WITH THE FIRST ONE LISTED. IF MORE THAN THREE CHILDREN, USE ADDITIONAL QUESTIONNAIRE(S).		
	CHILD 3		SKIP
102	CHECK CAPI OUTPUT AND RECORD NAME AND LINE NUMBER OF CHILD.	NAME _____ LINE NUMBER	
103	IF MOTHER INTERVIEWED: COPY CHILD'S DATE OF BIRTH (DAY, MONTH, AND YEAR) FROM PREGNANCY HISTORY. IF MOTHER NOT INTERVIEWED ASK: What is (NAME)'s date of birth?	DAY . . . . . . MONTH . . . . . . YEAR	
104	IF MOTHER INTERVIEWED: COPY CHILD'S AGE FROM PREGNANCY HISTORY. IF MOTHER NOT INTERVIEWED ASK: How old was (NAME) at (NAME)'s last birthday? COMPARE AND CORRECT 103 AND/OR 104 IF INCONSISTENT.	AGE IN COMPLETED YEARS	
105	CHECK 104: CHILD AGE 0-4 YEARS? YES ☐ NO ☐		→ 125
106	WEIGHT IN KILOGRAMS.	KG. . . . . . NOT PRESENT . . . . . 9994 REFUSED . . . . . 9995 OTHER 9996	→ 108
107	WAS THE CHILD MINIMALLY DRESSED?	YES . . . . . 1 NO 2	
108	HEIGHT IN CENTIMETERS. IF CHILD IS AGE 0-1 YEARS, MEASURE LYING DOWN. IF CHILD IS AGE 2, 3, OR 4 YEARS, MEASURE STANDING UP.	CM. . . . . . NOT PRESENT . . . . . 9994 REFUSED . . . . . 9995 OTHER 9996	→ 113
109	WAS THE CHILD MEASURED LYING DOWN OR STANDING UP?	LYING DOWN . . . . . 1 STANDING UP 2	
110	CHECK 104 AND 109: BASED ON CHILD'S AGE, WAS CORRECT MEASUREMENT PROCEDURE FOLLOWED?	YES . . . . . 1 NO 2	→ 112
111	IF CHILD IS AGE 0-1 YEARS: WHY WAS (NAME) MEASURED STANDING UP? IF CHILD IS AGE 2-4 YEARS: WHY WAS (NAME) MEASURED LYING DOWN? _____ _____		
112	WAS THE RECORDED MEASUREMENT INTERFERED WITH BY BRAIDED OR ORNAMENTED HAIR?	YES . . . . . 1 NO 2	
113	ENTER BIOMARKER NUMBER OF MEASURER.	BIOMARKER NUMBER	
114	ENTER BIOMARKER NUMBER OF ASSISTANT MEASURER.	BIOMARKER NUMBER	
115	TODAY'S DATE:	DAY . . . . . . MONTH . . . . . . YEAR	

	CHILD 3		SKIP
116	RECORD HEIGHT/LENGTH AND WEIGHT IN THE [ANTHROPOMETRY AND ANEMIA PAMPHLET].		
117	CHECK 103: IS THE CHILD AGE 0-5 MONTHS OR IS THE CHILD OLDER?	OLDER ☐ ↓ AGE 0-5 MONTHS ☐ → 125	
118	RECORD NAME OF PARENT/RESPONSIBLE ADULT FOR THE CHILD.	NAME _____ LINE NUMBER . . . . . ☐☐	
119	ASK CONSENT FOR ANEMIA TEST FROM PARENT/RESPONSIBLE ADULT: As part of this survey, we are asking people all over the country to take an anemia test. Anemia is a serious health problem that usually results from poor nutrition, infection, or chronic disease. This survey will assist the government to develop programs to prevent and treat anemia. We ask that all children under age 5 take part in anemia testing. The anemia test requires a few drops of blood from a finger or heel. The equipment used to take the blood is clean and completely safe. It has never been used before and will be thrown away after each test. The blood will be tested for anemia immediately, and the result will be told to you right away. The result will be kept strictly confidential and will not be shared with anyone other than members of our survey team. Do you have any questions? You can say yes or no. It is up to you to decide		
120	CIRCLE THE CODE.	GRANTED . . . . . 1 REFUSED . . . . . 2 NOT PRESENT/OTHER 3	
121	SIGN NAME AND ENTER BIOMARKER NUMBER OF HEMOGLOBIN MEASURER.	_____ (SIGN) ☐☐☐☐ BIOMARKER NUMBER	
122	RECORD HEMOGLOBIN LEVEL HERE AND IN THE ANTHROPOMETRY AND ANEMIA PAMPHLET.	G/DL . . . . . ☐☐.☐ NOT PRESENT . . . . . 994 REFUSED . . . . . 995 → 125 OTHER 996	
123	CHECK 122: HEMOGLOBIN RESULT	BELOW 8.0 G/DL, SEVERE ANEMIA . . . . . 1 8.0 G/DL OR ABOVE . . . . . 2 → 125	
124	The anemia test shows that (NAME OF CHILD) has severe anemia. Your child is very ill and must be taken to a health facility immediately. RECORD THE RESULT OF THE ANEMIA TEST ON THE SEVERE ANEMIA REFERRAL FORM.		
125	IF ANOTHER CHILD, GO TO 102 IN ADDITIONAL QUESTIONNAIRE; IF NO MORE CHILDREN, GO TO 201.		

WEIGHT, HEIGHT, AND HEMOGLOBIN MEASUREMENT FOR WOMEN AGE 15-49

201	CHECK CAPI OUTPUT FOR "LIST ELIGIBLE INDIVIDUALS/BIOMARKERS". RECORD THE LINE NUMBER, NAME, AGE, AND MARITAL STATUS FOR ALL ELIGIBLE WOMEN IN 202, 203, AND 204 ON THIS PAGE AND SUBSEQUENT PAGES STARTING WITH THE FIRST ONE LISTED. IF MORE THAN TWO WOMEN, USE ADDITIONAL QUESTIONNAIRE(S).		
	WOMAN 1		SKIP
202	CHECK CAPI OUTPUT AND RECORD NAME AND LINE NUMBER OF WOMAN.	NAME _____ LINE NUMBER . . . . . ☐☐	
203	CHECK CAPI OUTPUT FOR AGE:	15-17 YEARS . . . . . 1 18-49 YEARS 2	
204	CHECK CAPI OUTPUT FOR MARITAL STATUS:	NEVER IN UNION . . . . . 1 OTHER 2	
205	WEIGHT IN KILOGRAMS.	KG. . . . . ☐☐☐.☐☐ NOT PRESENT . . . . . 99994 REFUSED . . . . . 99995 OTHER 99996	→ 207
206	WAS THE WOMAN WEARING ONLY LIGHTWEIGHT CLOTHING?	YES . . . . . 1 NO 2	
207	HEIGHT IN CENTIMETERS.	CM. . . . . ☐☐☐.☐ NOT PRESENT . . . . . 9994 REFUSED . . . . . 9995 OTHER 9996	→ 209
208	WAS THE RECORDED MEASUREMENT INTERFERED WITH BY BRAIDED OR ORNAMENTED HAIR?	YES . . . . . 1 NO 2	
209	ENTER BIOMARKER NUMBER OF MEASURER.	☐☐☐☐ BIOMARKER NUMBER	
210	ENTER BIOMARKER NUMBER OF ASSISTANT MEASURER. IF NO ASSISTANT MEASURER, ENTER 9999.	☐☐☐☐ BIOMARKER NUMBER	
211	TODAY'S DATE:	DAY . . . . . ☐☐ MONTH . . . . . ☐☐ YEAR . . . . . ☐☐☐☐	
212	CHECK 203: AGE 15-17 YEARS ☐ ↓	AGE 18-49 YEARS ☐	→ 214
213	CHECK 204: OTHER ☐ ↓	NEVER IN UNION ☐	→ 217

	WOMAN 1	SKIP

ADULT RESPONDENT CONSENT FOR ANEMIA TEST

ADULT RESPONDENT CONSENT

214	ASK CONSENT FOR ANEMIA TEST: As part of this survey, we are asking people all over the country to take an anemia test. Anemia is a serious health problem that usually results from poor nutrition, infection, or chronic disease. This survey will assist the government to develop programs to prevent and treat anemia. For the anemia testing, we will need a few drops of blood from a finger. The equipment used to take the blood is clean and completely safe. It has never been used before and will be thrown away after we take your blood. The blood will be tested for anemia immediately, and the result will be told to you right away. The result will be kept strictly confidential and will not be shared with anyone other than members of our survey team. Do you have any questions? You can say yes or no. It is up to you to decide. Will you take the anemia test?		
# 215	CIRCLE THE CODE.	GRANTED . . . . . 1 REFUSED . . . . . 2 NOT PRESENT/OTHER 3	
216	SIGN NAME AND ENTER BIOMARKER NUMBER OF HEMOGLOBIN MEASURER.	_____ (SIGN) ☐☐☐☐ BIOMARKER NUMBER	→ 225

217	RECORD NAME OF PARENT/RESPONSIBLE ADULT FOR MINOR.	NAME _____ LINE NUMBER OF PARENT/ RESPONSIBLE ADULT ☐☐	

PARENT/RESPONSIBLE ADULT CONSENT FOR ANEMIA TEST

PARENT/RESPONSIBLE ADULT CONSENT

218	ASK CONSENT FOR ANEMIA TEST FROM PARENT/RESPONSIBLE ADULT: As part of this survey, we are asking people all over the country to take an anemia test. Anemia is a serious health problem that usually results from poor nutrition, infection, or chronic disease. This survey will assist the government to develop programs to prevent and treat anemia. For the anemia testing, we will need a few drops of blood from a finger. The equipment used to take the blood is clean and completely safe. It has never been used before and will be thrown away after each test. The blood will be tested for anemia immediately, and the result will be told to you and (NAME OF MINOR) right away. The result will be kept strictly confidential and will not be shared with anyone other than members of our survey team. Do you have any questions? You can say yes or no. It is up to you to decide. Will you allow (NAME OF MINOR) to take the anemia test?		
# 219	CIRCLE THE CODE.	GRANTED . . . . . 1 PARENT/RESPONSIBLE ADULT REFUSED . . . . . 2 NOT PRESENT/OTHER 3	→ 225
220	SIGN NAME AND ENTER BIOMARKER NUMBER OF HEMOGLOBIN MEASURER.	_____ (SIGN) ☐☐☐☐ BIOMARKER NUMBER	
221	CHECK 219:	CONSENT GRANTED ☐ CONSENT REFUSED OR NOT PRESENT/OTHER ☐	→ 225

		WOMAN 1	SKIP
MINOR RESPONDENT ASSENT		**MINOR RESPONDENT ASSENT FOR ANEMIA TEST**	
	222	ASK ASSENT FOR ANEMIA TEST FROM MINOR RESPONDENT: As part of this survey, we are asking people all over the country to take an anemia test. Anemia is a serious health problem that usually results from poor nutrition, infection, or chronic disease. This survey will assist the government to develop programs to prevent and treat anemia. For the anemia testing, we will need a few drops of blood from a finger. The equipment used to take the blood is clean and completely safe. It has never been used before and will be thrown away after we take your blood. The blood will be tested for anemia immediately, and the result will be told to you and (NAME OF PARENT/RESPONSIBLE ADULT) right away. The result will be kept strictly confidential and will not be shared with anyone other than members of our survey team. Do you have any questions? You can say yes or no. It is up to you to decide. Will you take the anemia test?	
	# 223	CIRCLE THE CODE.	GRANTED . . . . . 1 MINOR RESPONDENT REFUSED . . . . . 2 NOT PRESENT/OTHER 3	
	224	SIGN NAME AND ENTER BIOMARKER NUMBER OF HEMOGLOBIN MEASURER.	_____ (SIGN) ☐☐☐☐ BIOMARKER NUMBER	
	# 225	RECORD HEMOGLOBIN LEVEL HERE AND IN THE ANTHROPOMETRY AND ANEMIA PAMPHLET.	G/DL . . . . . ☐☐.☐ NOT PRESENT . . . . . 994 REFUSED . . . . . 995 OTHER 996	→ 228
	226	CHECK 225: HEMOGLOBIN RESULT	BELOW 8.0 G/DL, SEVERE ANEMIA . . . . . 1 8.0 G/DL OR ABOVE 2	→ 228
	227	The anemia test shows that you have severe anemia. You are very ill and must go to a health facility immediately. RECORD THE RESULT OF THE ANEMIA TEST ON THE SEVERE ANEMIA REFERRAL FORM.		
	228	IF ANOTHER WOMAN, GO TO 202 ON THE NEXT PAGE; IF NO MORE WOMEN, END INTERVIEW.		

WEIGHT, HEIGHT, AND HEMOGLOBIN MEASUREMENT FOR WOMEN AGE 15-49

201	CHECK CAPI OUTPUT FOR "LIST ELIGIBLE INDIVIDUALS/BIOMARKERS". RECORD THE LINE NUMBER, NAME, AGE, AND MARITAL STATUS FOR ALL ELIGIBLE WOMEN IN 202, 203, AND 204 ON THIS PAGE AND SUBSEQUENT PAGES STARTING WITH THE FIRST ONE LISTED. IF MORE THAN TWO WOMEN, USE ADDITIONAL QUESTIONNAIRE(S).		
	WOMAN 2		SKIP
202	CHECK CAPI OUTPUT AND RECORD NAME AND LINE NUMBER OF WOMAN.	NAME _____ LINE NUMBER	
203	CHECK CAPI OUTPUT FOR AGE:	15-17 YEARS . . . . . 1 18-49 YEARS 2	
204	CHECK CAPI OUTPUT FOR MARITAL STATUS:	NEVER IN UNION . . . . . 1 OTHER 2	
205	WEIGHT IN KILOGRAMS.	KG. . . . . . NOT PRESENT . . . . . 99994 REFUSED . . . . . 99995 OTHER 99996	→ 207
206	WAS THE WOMAN WEARING ONLY LIGHTWEIGHT CLOTHING?	YES . . . . . 1 NO 2	
207	HEIGHT IN CENTIMETERS.	CM. . . . . . NOT PRESENT . . . . . 9994 REFUSED . . . . . 9995 OTHER 9996	→ 209
208	WAS THE RECORDED MEASUREMENT INTERFERED WITH BY BRAIDED OR ORNAMENTED HAIR?	YES . . . . . 1 NO 2	
209	ENTER BIOMARKER NUMBER OF MEASURER.	BIOMARKER NUMBER	
210	ENTER BIOMARKER NUMBER OF ASSISTANT MEASURER. IF NO ASSISTANT MEASURER, ENTER 9999.	BIOMARKER NUMBER	
211	TODAY'S DATE:	DAY . . . . . . MONTH . . . . . . YEAR	
212	CHECK 203:	AGE 15-17 YEARS ↓ / AGE 18-49 YEARS → 214	
213	CHECK 204:	OTHER ↓ / NEVER IN UNION → 217	

	WOMAN 2	SKIP

ADULT RESPONDENT CONSENT FOR ANEMIA TEST

ADULT RESPONDENT CONSENT

214	ASK CONSENT FOR ANEMIA TEST: As part of this survey, we are asking people all over the country to take an anemia test. Anemia is a serious health problem that usually results from poor nutrition, infection, or chronic disease. This survey will assist the government to develop programs to prevent and treat anemia. For the anemia testing, we will need a few drops of blood from a finger. The equipment used to take the blood is clean and completely safe. It has never been used before and will be thrown away after we take your blood. The blood will be tested for anemia immediately, and the result will be told to you right away. The result will be kept strictly confidential and will not be shared with anyone other than members of our survey team. Do you have any questions? You can say yes or no. It is up to you to decide. Will you take the anemia test?		
# 215	CIRCLE THE CODE.	GRANTED . . . . . 1 REFUSED . . . . . 2 NOT PRESENT/OTHER 3	→ 225
216	SIGN NAME AND ENTER BIOMARKER NUMBER OF HEMOGLOBIN MEASURER.	_____ (SIGN) ☐☐☐☐ BIOMARKER NUMBER	→ 225

217	RECORD NAME OF PARENT/RESPONSIBLE ADULT FOR MINOR.	NAME _____ LINE NUMBER OF PARENT/ RESPONSIBLE ADULT ☐☐	

PARENT/RESPONSIBLE ADULT CONSENT FOR ANEMIA TEST

PARENT/RESPONSIBLE ADULT CONSENT

218	ASK CONSENT FOR ANEMIA TEST FROM PARENT/RESPONSIBLE ADULT: As part of this survey, we are asking people all over the country to take an anemia test. Anemia is a serious health problem that usually results from poor nutrition, infection, or chronic disease. This survey will assist the government to develop programs to prevent and treat anemia. For the anemia testing, we will need a few drops of blood from a finger. The equipment used to take the blood is clean and completely safe. It has never been used before and will be thrown away after each test. The blood will be tested for anemia immediately, and the result will be told to you and (NAME OF MINOR) right away. The result will be kept strictly confidential and will not be shared with anyone other than members of our survey team. Do you have any questions? You can say yes or no. It is up to you to decide. Will you allow (NAME OF MINOR) to take the anemia test?		
# 219	CIRCLE THE CODE.	GRANTED . . . . . 1 PARENT/RESPONSIBLE ADULT REFUSED . . . . . 2 NOT PRESENT/OTHER 3	→ 225
220	SIGN NAME AND ENTER BIOMARKER NUMBER OF HEMOGLOBIN MEASURER.	_____ (SIGN) ☐☐☐☐ BIOMARKER NUMBER	
221	CHECK 219:	CONSENT GRANTED ☐ ↓ CONSENT REFUSED OR NOT PRESENT/OTHER ☐	→ 225

		WOMAN 2		SKIP
MINOR RESPONDENT ASSENT		**MINOR RESPONDENT ASSENT FOR ANEMIA TEST**		
	222	ASK ASSENT FOR ANEMIA TEST FROM MINOR RESPONDENT: As part of this survey, we are asking people all over the country to take an anemia test. Anemia is a serious health problem that usually results from poor nutrition, infection, or chronic disease. This survey will assist the government to develop programs to prevent and treat anemia. For the anemia testing, we will need a few drops of blood from a finger. The equipment used to take the blood is clean and completely safe. It has never been used before and will be thrown away after we take your blood. The blood will be tested for anemia immediately, and the result will be told to you and (NAME OF PARENT/RESPONSIBLE ADULT) right away. The result will be kept strictly confidential and will not be shared with anyone other than members of our survey team. Do you have any questions? You can say yes or no. It is up to you to decide. Will you take the anemia test?		
	# 223	CIRCLE THE CODE.	GRANTED . . . . . 1 MINOR RESPONDENT REFUSED . . . . . 2 NOT PRESENT/OTHER 3	
	224	SIGN NAME AND ENTER BIOMARKER NUMBER OF HEMOGLOBIN MEASURER.	_____ (SIGN) ☐☐☐☐ BIOMARKER NUMBER	
	# 225	RECORD HEMOGLOBIN LEVEL HERE AND IN THE ANTHROPOMETRY AND ANEMIA PAMPHLET.	G/DL . . . . . ☐☐.☐ NOT PRESENT . . . . . 994 REFUSED . . . . . 995 OTHER 996	→ 228
	226	CHECK 225: HEMOGLOBIN RESULT	BELOW 8.0 G/DL, SEVERE ANEMIA . . . . . 1 8.0 G/DL OR ABOVE 2	→ 228
	227	The anemia test shows that you have severe anemia. You are very ill and must go to a health facility immediately. RECORD THE RESULT OF THE ANEMIA TEST ON THE SEVERE ANEMIA REFERRAL FORM.		
	228	IF ANOTHER WOMAN, GO TO 202 IN ADDITIONAL QUESTIONNAIRE; IF NO MORE WOMEN, END INTERVIEW.		

[FIELDWORKER'S] OBSERVATIONS

TO BE FILLED IN AFTER COMPLETING BIOMARKERS

SUPERVISOR'S OBSERVATIONS

FORMATTING DATE: 18 Jan 2023
ENGLISH LANGUAGE: 02 Jun 2020

2023TAJIKISTAN DEMOGRAPHIC AND HEALTH SURVEY
REMEASUREMENT QUESTIONNAIRE

REPUBLIC OF TAJIKISTAN
AGENCY ON STATISTICS UNDER THE PRESIDENT OF THE REPUBLIC OF TAJIKISTAN
MINISTRY OF HEALTH AND SOCIAL PROTECTION OF THE POPULATION OF THE REPUBLIC OF TAJIKISTAN

IDENTIFICATION

PLACE NAME _____

NAME OF HOUSEHOLD HEAD _____

CLUSTER NUMBER . . . . . [ ][ ][ ][ ]

HOUSEHOLD NUMBER . . . . . [ ][ ][ ][ ]

[COUNTRY-SPECIFIC QUESTION ON BIOMARKER SUBSAMPLING] . . . . . [ ]

[FIELDWORKER] VISITS (2)

	1	2	3	FINAL VISIT
DATE	_____	_____	_____	DAY [ ][ ]
BIOMARKER NAME	_____	_____	_____	MONTH [ ][ ] YEAR [ ][ ][ ][ ]
NEXT VISIT: DATE	_____	_____		TOTAL NUMBER OF VISITS [ ]
TIME	_____	_____		

BIOMARKER OBSERVATIONS

_____

_____

_____

_____

_____

_____

TOTAL CHILDREN TO REMEASURE [ ][ ]

LANGUAGE OF QUESTIONNAIRE** [0][1] LANGUAGE OF INTERVIEW** [ ][ ] NATIVE LANGUAGE OF RESPONDENT** [ ][ ] TRANSLATOR (YES = 1, NO = 2) [ ]

LANGUAGE OF QUESTIONNAIRE** **ENGLISH**

**LANGUAGE CODES:
01 ENGLISH
02 RUSSIAN
03 TAJIK
04 LANGUAGE 4
05 LANGUAGE 5
06 LANGUAGE 6

TEAM	TEAM SUPERVISOR		CAPI SUPERVISOR (3)	
[ ][ ]	_____	[ ][ ][ ][ ]	_____	[ ][ ][ ][ ]
NUMBER	NAME	NUMBER	NAME	NUMBER

Note: Brackets [ ] indicate items that should be adapted on a country-specific basis.

REMEASUREMENT OF WEIGHT AND HEIGHT FOR SELECTED CHILDREN AGE 0-4

101	CHECK CAPI REPORT FOR CHILDREN SELECTED FOR REMEASUREMENT. RECORD THE LINE NUMBER AND NAME FOR THE FIRST CHILD SELECTED FOR REMEASUREMENT IN QUESTION 102 ON THIS PAGE. IF MORE THAN ONE CHILD IS SELECTED IN A HOUSEHOLD, USE ADDITIONAL QUESTIONNAIRE(S).		
	CHILD TO REMEASURE		SKIP
102	CHECK CAPI REPORT AND RECORD NAME AND LINE NUMBER OF CHILD.	NAME _____ LINE NUMBER	
103	CHECK CAPI REPORT AND RECORD DATE OF BIRTH OF CHILD.	DAY . . . . . MONTH . . . . . YEAR	
104	CHECK CAPI REPORT AND RECORD CHILD'S AGE IN COMPLETED YEARS. COMPARE AND CORRECT 103 AND/OR 104 IF INCONSISTENT.	AGE IN COMPLETED YEARS	
105	CHECK 104: CHILD AGE 0-4 YEARS? YES ☐ NO ☐		→ 116
106	WEIGHT IN KILOGRAMS.	KG. . . . . . NOT PRESENT . . . . . 9994 REFUSED . . . . . 9995 OTHER 9996	→ 108
107	WAS THE CHILD MINIMALLY DRESSED?	YES . . . . . 1 NO 2	
108	HEIGHT IN CENTIMETERS. IF CHILD IS AGE 0-1 YEARS, MEASURE LYING DOWN. IF CHILD IS AGE 2, 3, OR 4 YEARS, MEASURE STANDING UP.	CM. . . . . . NOT PRESENT . . . . . 9994 REFUSED . . . . . 9995 OTHER 9996	→ 113
109	WAS THE CHILD MEASURED LYING DOWN OR STANDING UP?	LYING DOWN . . . . . 1 STANDING UP 2	
110	CHECK 104 AND 109: BASED ON CHILD'S AGE, WAS CORRECT MEASUREMENT PROCEDURE FOLLOWED?	YES . . . . . 1 NO 2	→ 112
111	IF CHILD IS AGE 0-1 YEARS: WHY WAS (NAME) MEASURED STANDING UP? IF CHILD IS AGE 2-4 YEARS: WHY WAS (NAME) MEASURED LYING DOWN? _____ _____		
112	WAS THE RECORDED MEASUREMENT INTERFERED WITH BY BRAIDED OR ORNAMENTED HAIR?	YES . . . . . 1 NO 2	
113	ENTER BIOMARKER NUMBER OF MEASURER.	BIOMARKER NUMBER	
114	ENTER BIOMARKER NUMBER OF ASSISTANT MEASURER.	BIOMARKER NUMBER	
115	TODAY'S DATE:	DAY . . . . . MONTH . . . . . YEAR	
116	IF ANOTHER CHILD, GO TO 102 IN ADDITIONAL QUESTIONNAIRE; IF NO MORE CHILDREN, END INTERVIEW.		

2023 DEMOGRAPHIC AND HEALTH SURVEY
FIELDWORKER QUESTIONNAIRE

REPUBLIC OF TAJIKISTAN
AGENCY ON STATISTICS UNDER THE PRESIDENT OF THE RT

LANGUAGE OF QUESTIONNAIRE ENGLISH

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
100	What is your name?	NAME _____	
101	RECORD FIELDWORKER NUMBER	NUMBER . . . . . [ ][ ][ ][ ]	

INSTRUCTIONS

Information on all TjDHS field workers is collected as part of the TjDHS survey. Please fill out the questions below. The information you provide will be part of the survey data file; however, your name will be removed and will not be part of the data file. Thank you for providing the information needed.

102	In what oblast do you live?	DUSHANBE . . . . . 01 GBAO . . . . . 02 SUGHD . . . . . 03 DRS . . . . . 04 KHATLON 05	
103	Do you live in a city, town, or rural area?	CITY . . . . . 1 TOWN . . . . . 2 RURAL 3	
104	How old are you? RECORD AGE IN COMPLETED YEARS.	AGE . . . . . [ ][ ]	
105	Are you male or female?	MALE . . . . . 1 FEMALE 2	
106	What is your current marital status?	CURRENTLY MARRIED . . . . . 1 LIVING WITH A MAN/WOMAN . . . . . 2 WIDOWED . . . . . 3 DIVORCED . . . . . 4 SEPARATED . . . . . 5 NEVER MARRIED OR LIVED WITH A MAN/WOMAN 6	
107	How many living children do you have? INCLUDE ONLY CHILDREN WHO ARE YOUR BIOLOGICAL CHILDREN.	LIVING CHILDREN . . . . . [ ][ ]	
108	Have you ever had a child who died?	YES . . . . . 1 NO 2	
109	What is the highest level of school you attended: general education school, professional primary (uchiliche), professional middle (teknikum, uchiliche, college), higher or postgraduate?	GENERAL EDUCATION SCHOOL . . . . . 1 PROFESSIONAL PRIMARY . . . . . 2 PROFESSIONAL MIDDLE . . . . . 3 HIGHER . . . . . 4 POSTGRAGUATE 5	
110	What is the highest [CLASS/COURSE/YEAR] you completed at that level? IF COMPLETED LESS THAN ONE YEAR AT THAT LEVEL, RECORD '00'.	CLASS/COURSE/YEAR . . . . . [ ][ ]	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
110A	Have you ever received clinical, medical, or laboratory training or worked in healthcare?	YES . . . . . 1 NO 2	→ 111
110B	What is your current occupational category or qualification? For example, are you a doctor, nurse, midwife or laborant?	MEDICAL DOCTOR . . . . . 01 NURSE/MALE NURSE . . . . . 02 MIDWIFE . . . . . 03 LABORANT . . . . . 04 NO TECHNICAL QUALIFICATION . . . . . 95 OTHER _____ 96 (SPECIFY)	
112	What is your ethnicity?	TAJIKS . . . . . 01 RUSSIANS . . . . . 02 UZBEKS . . . . . 03 KYRGYZ . . . . . 04 OTHER _____ (SPECIFY) 96	
113	What languages can you speak?	TAJIKS . . . . . A RUSSIANS . . . . . B UZBEKS . . . . . C KYRGYZ . . . . . D OTHER _____ X (SPECIFY)	
114	What is your mother tongue/native language (language spoken at home growing up)?	TAJIKS . . . . . 01 RUSSIANS . . . . . 02 UZBEKS . . . . . 03 KYRGYZ . . . . . 04 OTHER _____ 96 (SPECIFY)	
115	Have you ever worked on: a) a DHS prior to this survey? c) any other survey prior to this survey?	YES NO a) DHS . . . . . 1 2 c) OTHER SURVEY 1 2	
116	Were you already working for [AGENCY ON STATISTICS or MINISTRY OF HEALTH] at the time you were employed to work on this DHS?	YES, AGENCY ON STATISTICS . . . . . 1 YES, MINISTRY OF HEALTH . . . . . 2 NO 3	→ 118
117	Are you a permanent or temporary employee of [AGENCY ON STATISTICS or MINISTRY OF HEALTH]?	PERMANENT . . . . . 1 TEMPORARY 2	
118	If you have comments, please write them here.		