2008 BASELINE RURAL BANGLADESH SMILING SUN FRANCHISE PROGRAM (BSSFP) EVALUATION SURVEY

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AUTHORS OF THIS REPORT

Dr. Peter Lance, MEASURE Evaluation, University of North Carolina at Chapel Hill
Dr. Gustavo Angeles, MEASURE Evaluation, University of North Carolina at Chapel Hill
Dr. M. Sekander Hayat Khan, ACPR and University of Dhaka

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SUMMARY

The *2008 Baseline Rural Bangladesh Smiling Sun Franchise Program (BSSFP) Evaluation Survey* is the first installment in a series of two surveys intended to assess the efficacy of the rural component of the BSSFP program in terms of its ability to deliver an essential services package (ESP) of family planning and maternal and child health services to under-served populations across Bangladesh. The baseline survey is designed to provide a picture of circumstances at the population level in BSSFP catchment areas and similar, nearby non-project areas where the BSSFP is not operating but the government is. Useful in its own right as a source of information as critical programmatic decisions are made in the early phase of the BSSFP project, the baseline survey also provides information regarding circumstances on the eve of conversion from the operational model of the National Service Delivery Program (NSDP, which the BSSFP succeeds) to that of the BSSFP. This is critical information which, when combined with that from a follow-up wave to be conducted three years hence, will allow for tracking performance of the program over time.

The 2008 baseline survey collected information pertaining to the knowledge and use of family planning and maternal and child health services provided by the BSSFP program and competitor organizations. The BSSFP is a continuation of the NGO Service Delivery Program (NSDP), which had been in place in various forms since the late 1990's, and emphasized static and satellite clinics in lieu of home visits from service providers as the main delivery method for contraceptives and reproductive health services. The central change introduced with the BSSFP is an emphasis on cost-recovery and sustainability.

The baseline evaluation of the rural component of the BSSFP survey was conducted by Associates for Community and Population Research (ACPR), with technical assistance from the MEASURE Evaluation Project at the University of North Carolina at Chapel Hill. Data were collected from 6,330 women in project areas served by the BSSFP, and from 6,789 women from households in non-project areas.

Main findings:

- Smiling Sun clinics experienced a decline in market share for modern contraceptive services and antenatal care between 2005 and 2008. This was led by satellite clinics. Over the same interval the private sector became a more important supplier of antenatal care.
- Childhood vaccination rates increased substantially over the 2005-2008 period. This increase was somewhat more pronounced in project areas. However, the percentage of children receiving vaccines from Smiling Sun facilities declined significantly.
- Vitamin A supplementation rates increased substantially over the period in both project and non-project areas. This increase was largest in project areas, where supplementation rates for children age 9-59 months rose by approximately 10 full percentage points, or over 15.9 percent. However, Smiling Sun market share for Vitamin A provision actually fell.

- Recognition of Smiling Sun services declined over the 2005-2008 period, especially with respect to the proportion of women who could name maternal and child health services offered by Smiling Sun clinics.

Contraceptive Use: Following steady increases in contraceptive use between 1998 and 2005, usage rates essentially stabilized between 2005 and 2008. Of women surveyed in 2008, 49.7 and 49.4 percent used modern contraceptive methods in project and non-project areas, respectively (see Figure S.1). There was a slight increase in the use of oral contraceptives during this time period (from 25.1 to 26.4 percent in project areas, and from 26.7 to 27.9 percent in non-project areas), and a continuation of the decrease in sterilization that had been observed in previous years. Trends among currently married adolescents differed slightly across project and non-project areas: in project areas prevalence rates among 10-14 year olds dropped slightly (from 26.6 to 24.0), while usage among this age group in non-project areas actually increased (from 16.2 to 19.8 percent). Usage also increased from 34.0 to 40.0 percent among the 15-19 year old age group in non-project areas, while remaining at 40.2 percent in project areas over the three year period.

The uneven pattern of modern contraceptive use across socioeconomic strata evident in the 2005 sample emerged again with the 2008 survey. (Direct comparison of contraceptive prevalence by household asset quintile between the two surveys is problematic because the quintiles in the two surveys were crafted separately, and not with the goal of establishing a common standard of socioeconomic status.) Modern contraceptive ranged from 45 percent in the wealthiest quintile to 54.3 percent in the second poorest one before falling back to 49.6 in the poorest quintile.

As can be seen in Figure S.2, Smiling Sun facilities lost considerable market share in project areas to the private sector, slipping from the dominant position in the market in 2005 (with a 46.3 percent market share) to second after the private sector as a whole (by 2008, Smiling Sun's share had slipped to 35.4 percent, just behind the 38.4 percent share for the private sector). This decline was driven primarily by Smiling Sun satellite clinics, which saw their market share fall from 26.3 percent in 2005 to 16.3 percent by 2008 (the market shares for Smiling Sun static clinics and depotholders/CSP's remained far steadier). The share for the public sector remained fairly steady (at around 24.5 percent), while that for pharmacies jumped from 17.6 to 26.1 percent.

A number of explanations have been advanced for this loss of market share for Smiling Sun satellite clinics. Many of these factors likely also played a role in Smiling Sun's declining market share for antenatal care (to be discussed below). Some of them emerged from a root cause analysis that Smiling Sun personnel performed to understand the reasons for declining market share for pneumonia treatment.

To begin with, satellite clinic personnel, as well as other employees crucial for community mobilization for satellite clinics (such as community service providers), have experienced a tremendous degree of turnover. The loss of experienced, trained provides would have obvious implications for the quality of care provided. It would also introduce turbulence to the relationship between a caregiver and their clients. Turnover of satellite clinic personnel is probably particularly problematic, since clients likely primarily make psychological reference to a facility in the case of static clinics but to individual providers in the case of satellite clinics. The turnover has also probably undercut enthusiastic promotion of satellite clinics.

The obvious remedy for this is to be found at the human resource policy level. Toward that end, the Smiling Sun project had, as of this writing, recently introduced a more competitive compensation package designed to reduce turnover.

The second challenge identified by the root cause analysis was a lack of sustained promotional efforts. To be sure, promotional activities suffered in the course of the transition from the NSDP to the BSSFP program. This is a general problem, the consequences of which are evident when one considers indicators such as brand recognition, awareness of static and satellite clinics, etc. One area that suffered particularly was promotional activities specifically aimed at community mobilization for satellite clinics. The clear remedy is to re-start promotional activities, and steps will be taken in that direction. One recent move in this vein was the introduction of signboards identifying satellite clinics.

Finally, the root cause analysis identified uneven monitoring and supervision of clinics as a factor behind decreased utilization. In the transition from the NSDP to the Smiling Sun, a quality monitoring framework that had served the former project well largely disintegrated. Under it, there were essentially two layers of supervision. First, NGOs participating in the NSDP project supervised quality at the clinics they ran. Second, the NSDP program oversaw the NGOs. Under this system, reductions in utilization were fairly quickly identified, assessed and remedied. The breakdown occurred at the second level, as the regional project staff that directly monitored the NGOs was lost. Without the critical impetus for quality control provided through this link, monitoring of clinics by NGOs deteriorated. This loss of quality control likely degraded the clients' care experience, with unsurprising implications for utilization.

A new quality monitoring system is now being constructed. The Smiling Program is now building reporting capacity at the NGO level that will allow fast, direct and nearly real time transmission of quality control reports from clinics to Smiling Sun headquarters, permitting the program to identify quickly and address promptly problems with utilization patterns. By reducing the intermediary role that NGOs played between clinics and program headquarters under the NSDP, this will likely prove to be an even more effective quality management system. Another critical innovation will be the integration of service provision and financial reporting, allowing each to serve as a cross-check on the other, identifying inconsistencies which can then be addressed with the result that clinic reports will likely be more reliable than under the NSDP quality-management system. One area where this quicker, higher quality reporting will likely make a significant difference for contraceptive service provision is the capacity to better anticipate, and hence prevent, stock-outs. More generally, the availability of such timely, detailed, reliable and easily disaggregated data will surely help identify performance problems quickly, to the benefit of the patient care experience.

In non-project areas, government facilities continued to be (by far) the largest supplier of family planning services, though their share fell slightly (from 63.4 to 56.2 percent). On the other hand, as in project areas, that of the private sector grew, from 29 to 37.7 percent. Within the private sector, the shares for pharmacies (20 to 25.7 percent) and shops (6.7 to 9.1 percent) grew the most.

Antenatal Care: 52.1 percent of women in project areas with a birth in the three years preceding interview visited an antenatal care provider at least once during their pregnancy, a small decrease from the 2005 estimate of 54.3 percent. This represents a reversal of the previous trend, under

which antenatal care use had risen from 42.9 percent in 2001 to 51.1 percent in 2003 to the 2005 figure. Antenatal care use appeared essentially to plateau in non-project areas, rising by only 0.2 percentage points from 2005 to 2008. Increases in previous years were much larger, from an initial level of 38.1 percent in 2001, to 46.1 percent in 2003 and 50.2 percent in 2005. Only 34.9 percent of women from the poorest households received any type of ANC in project areas. The figure was 30.8 percent in non-project areas.

Similar patterns were also evident when examining the percentage of women who received ANC from a trained provider. For women in project areas, 46.2 percent received antenatal care from a medically trained provider, a slight decrease from the 2005 figure of 47.4 percent. In non-project areas the increasing trend continued, though at a slower rate, with the percentages visiting a medically trained provider rising from 40.6 percent in 2005 to 41.3 percent in 2008.

As can be seen graphically in Figure S.3, Smiling Sun facilities witnessed a significant decline in their market share for antenatal care in project areas between the 2005 and 2008 surveys: overall market share fell from 47.7 percent in 2005 to 36 percent in 2008. This decline was largely driven by Smiling Sun satellite clinics, which saw their share fall from 34.6 to 21.3 percent (that for static clinics fell much more modestly, about one percentage point). The big gainer appears to have been the private sector, which saw its share rise from 13.7 to 21.9 percent (though the public sector's share also rose slightly, from 29.9 to 31.9 percent). This increase in the private sector's share appears to have been driven by private clinics and qualified doctors, who saw their presence increase from 13.4 to 21.2 percent of the market.

The decline in Smiling Sun's antenatal care market share in project areas is likely related to many of the factors addressed in the discussion of the loss of market share for modern contraception. However, a few additional explanations, and hence remedies, have been offered in the case of antenatal care.

First, it is clear that the huge increase in the private sector's share of the antenatal care market has been driven by private clinics and qualified doctors. Their increasing presence in part represents a growth in the supply of new doctors, many of whom have some difficulty establishing a clientele base in the more competitive environment of cities. With improvements in communication, these doctors are able to coordinate visits to rural areas where they see patients. At present, the Smiling Sun program is considering strategies for building partnerships with these doctors. Involving them with static clinics will likely establish a degree of credibility for Smiling Sun operations that, with appropriate promotional efforts, should raise the profile and reputation of satellite clinics.

Second, during the transition from the NSDP program a system whereby service providers and community service providers visited pregnant women to encourage them to seek antenatal care (preferably at Smiling Sun facilities) deteriorated. (Once they visited a Smiling Sun clinic, efforts were made to insure follow-up visits.) This system is now being re-established.

Finally, service providers lacked job aids and materials for patients (such as emergency obstetric care cards). These probably made them seem an increasingly unattractive alternative for antenatal care as compared with, for instance, doctors. Job aids, such as flip charts designed to inform the

patient session and thus guarantee high and consistent standards of care, are now being developed and will be supported by a culture of training and quality. Similarly, popular patient tools (such as emergency obstetric cards, which offer clients quick references for birth planning, troubling symptoms, diet, etc.) are now being introduced.

In non-project areas, Smiling Sun's market share for antenatal care services also fell, from 17.1 to 9.8 percent, led this time by static clinics (the shares of which fell from 15.8 to 6.8 percent). Though the share of the private sector rose in non-project areas as well, the increase was far more modest (from 23.1 to 25.8 percent). The share of the public sector rose from 47.4 to 52.2 percent.

Childhood Vaccinations: The proportion of children aged 12-23 months in project areas receiving critical vaccinations rose between the 2005 and 2008 surveys (see Table S.1). For example, 89.4 percent had received the third dose of the DPT vaccine, against only 76.3 percent reporting having done so in 2005. Smaller increases were observed for Measles (from 79.6 to 83.6 percent) and Polio3 inoculations (from 86.4 to 89.3 percent). Coverage rates for BCG vaccination, the most common vaccination, remained essentially steady at around 93.4–93.5 percent.

Table S.1. Percent of children 12-23 months vaccinated at any time before the survey

Antigen	Rural NSDP/BSSFP Project Areas		Rural NSDP/BSSFP Non-Project Areas	
	2005	2008	2005	2008
BCG	93.5	93.4	96.2	95.0
DPT3	76.3	89.4	83.3	89.2
Polio3	86.4	89.3	90.5	90.5
Measles	79.6	83.6	82.6	83.3
All Antigens	68.6	81.4	74.3	80.6

Generally increasing trends in coverage were also observed in non-project areas, though to a more modest extent. However, BCG vaccination did decline slightly (from 96.2 to 95.0 percent) in these areas. Overall, complete vaccination increased by approximately 12.8 percentage points, or about 19 percent over 2005 levels, in project areas, and by 6.3 percentage points, or around 8 percent, in non-project areas.

Despite the increases in vaccination rates in project areas, the percentage of project area children receiving vaccinations from NSDP or Smiling Sun facilities declined substantially from 2005 to 2008 (Table S.2). Declining Smiling Sun market share occurred with most inoculations. Smiling Sun market share in project areas typically declined 14-16 percentage points. Smiling Sun market share in non-project areas typically fell 5-7 percentage points.

In Figure S.4 we consider one particular vaccination, DPT3. As is graphically clear, the Smiling Sun program experienced a substantial fall in market share in project areas from 61.2 to 45.9 percent (the drop in non-project areas was from 8.2 to 1.2 percent). Considering the various pathways by which the Smiling Sun program delivers vaccinations, a clear culprit emerges in project areas: a decline in the share of Joint Smiling Sun/EPI from 24.3 to 12.4 percent (the share for satellite clinics fell more modestly, from 30.5 to 26.8 percent, while that for static clinics was essentially

unchanged). The government's market share in project areas increased substantially (from 17 to 48.3 percent), a margin larger than the decline in the share of the Joint Smiling Sun/EPI provision mechanism. The difference came in a reduction of market share for other sources, from 21.8 to 5.8 percent (unfortunately, we do not have further information regarding what constituted the "Other" category in 2005).

These declines may be of some strategic significance. The vaccination market may serve as an important gateway for drawing in clientele for other components of Smiling Sun's essential services package. Essentially, when women (or, more generally, parents) bring their children in for vaccines the Smiling Sun program uses the visit as an important opportunity to promote their other services (family planning, antenatal care, etc.). The loss of vaccine market share, therefore, may have had (or perhaps will have) negative consequences in other areas. This is perhaps one reason for Smiling Sun's loss of market share for modern contraception and antenatal care.

The loss of vaccine market share in rural areas perhaps has the most straightforward explanation of any of the reductions in market share that Smiling Sun has experienced: the loss has been due to the decline in the share of Joint Smiling Sun/EPI vaccination activities. This has been the result mainly of friction related to Smiling Sun's policy of charging fees for vaccines. However, this problem has been resolved in the interval since fieldwork, and program officials anticipate a full and vigorous return to these sessions.

Table S.2. Percent of immunized children receiving vaccinations from rural NSDP facilities

Antigen	Rural NSDP/BSSFP Project Areas		Rural NSDP/BSSFP Non-Project Areas	
	2005	2008	2005	2008
BCG	59.6	45.6	8.9	2.3
DPT3	61.2	45.9	8.2	1.2
Polio3	61.3	45.3	7.8	1.5
Measles	62.0	47.0	7.1	1.8

Other Elements of the Essential Services Package

The percentage of pregnant women receiving iron supplementation in project areas rose slightly, from 48.2 to 51.2 percent over the 2005-2008 period. In non-project areas, the increase was more substantial: from 44.9 to 53.4 percent. Unfortunately, the trends for tetanus toxoid injections were less encouraging, with increases in the percentage with no vaccines from 19.0 to 27.8 and from 19.3 to 26.2 between 2005 and 2008 in project and non-project areas, respectively.

The fraction of children aged 9-59 months who received vitamin A capsules in the past six months increased substantially, from 67.5 to 75.7 percent in project areas, and from 70.8 to 78.1 percent in non-project areas. There was some decline in Smiling Sun's market share for Vitamin A provision in project areas, from 59.5 in 2005 to 43 percent in 2008. This decline was led by satellite clinics (33.6 to 24.7 percent) and Joint Smiling Sun-Government EPI sessions (from 21.1 to 14.4 percent). The big gainer was the government, which saw the share of its clinics and hospitals grow from 26.7 to 48.6 percent (the big increases for the government were in the area of satellite clinics, which saw their share jump from 20.7 to 43.3 percent).

General Child Health: In project areas, approximately 4.4 percent of children were reported to have had diarrhea in the two weeks preceding interview (a small decline from 5.7 percent in 2005), and 85.5 percent of these cases were treated with some type of oral rehydration therapy (either packet ORS or a homemade solution known as *laban gur*). This is a small improvement over the 2005 figure of 81.2 percent. The diarrhea rate was slightly lower in non-project areas at 4.0 percent (down from 4.7 percent in 2005) as was a fraction of treated children (at 81.8 percent, down from 84.8 percent in 2005).

Approximately 5.5 percent of children in both project and non-project areas experienced symptoms of acute respiratory infection (ARI) in the two weeks preceding interview, a small decrease in project areas from the 2005 level of 6 percent. Of ARI cases in project areas, 32.6 percent were treated by a health facility or provider, the number was 36.5 percent of cases in non-project areas, a slight increase from the 2005 levels of 31.3 and 31.4 percent, respectively. Smiling Sun's market share for ARI treatment remained very small.

Breastfeeding initiation occurred slightly more quickly in 2008 than in 2005, with 35.5 percent of mothers in project areas and 36.4 percent of mothers in non-project areas breastfeeding their child within one hour of birth (as compared to 2005 figures of 33.1 and 31.8 percent, respectively). The percentage breastfed within one day of birth increased from 78.7 to 84.8 percent in project areas, and from 80.0 to 86.7 percent in non-project areas.

Awareness and Use of Smiling Sun Services and Clinics: In general, the rate of recognition of Smiling Sun clinics and awareness of them fell between the 2005 and 2008 surveys. The percentage of women who reported seeing the Smiling Sun logo declined from 71.4 to 36.1 percent in project areas and from 45.8 to 33.7 percent in non-project areas. Only 83.0 percent of women in project areas were aware of a hospital or clinic in their area from which they could obtain health or family planning services, a decline from the 2005 figure of 94.6. Similar trends were observed for the awareness of temporary or satellite clinics, which declined from 90.4 to 82.3 percent and from 85.7 to 81.2 percent in project and non-project areas, respectively. On a positive note, among women who had reported seeing the Smiling Sun symbol in their communities, 83.1 and 85.1 percent in project and non-project areas reported a positive perception of the Smiling Sun Symbol, associating them with a high quality of service.

Early Childhood Mortality: It is encouraging to observe that child mortality continued to drop over the period in all age groups and area types. The infant mortality rate in project areas for the four year period preceding the survey was 45 deaths per 1,000 live births, down from 57 deaths in 2005. The infant mortality rate for the four years preceding survey was still lower in non-project areas, at 39 deaths per 1,000 live births. The overall child mortality rate in project areas for the four years preceding the survey was 15.3, against 14.4 in non-project areas.

Fertility: The total fertility rate in project areas for the three years preceding the survey was just under 3.0 births per women, down from 3.1 in 2005, 3.3 in 2003, and 3.6 in 2001. This decreasing trend was paralleled in non-project areas, where fertility remained slightly lower (with a 2008 level of 2.81).

Figure S.1. Modern Contraceptive Prevalence, Rural Project and Non-Project Areas, NSDP 2005 and BSSFP 2008.

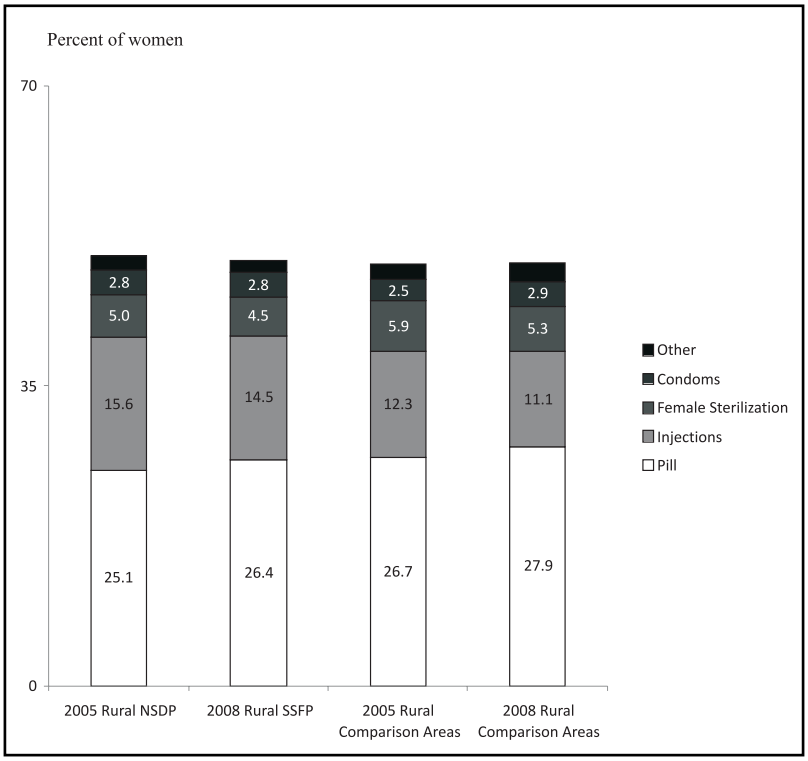

Figure S.2. Market Share for Modern Contraception, Rural Project and Non-Project Areas, NSDP 2005 and BSSFP 2008.

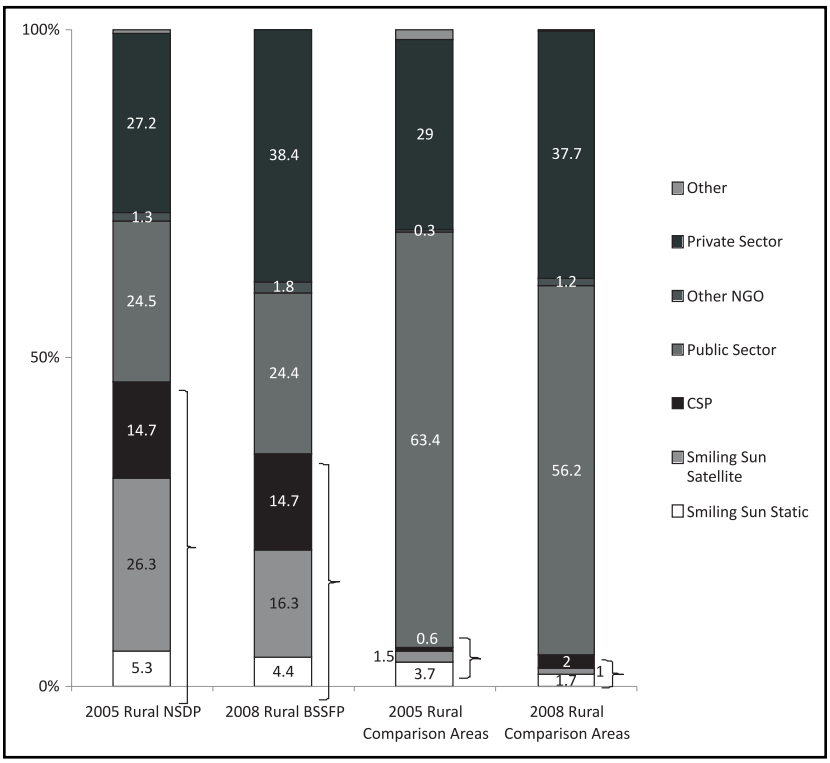

Figure S.3. Source of Antenatal Care among Women Who Obtained ANC in the Last Three Years, Rural Project and Non-Project Areas, NSDP 2005 and BSSFP 2008.

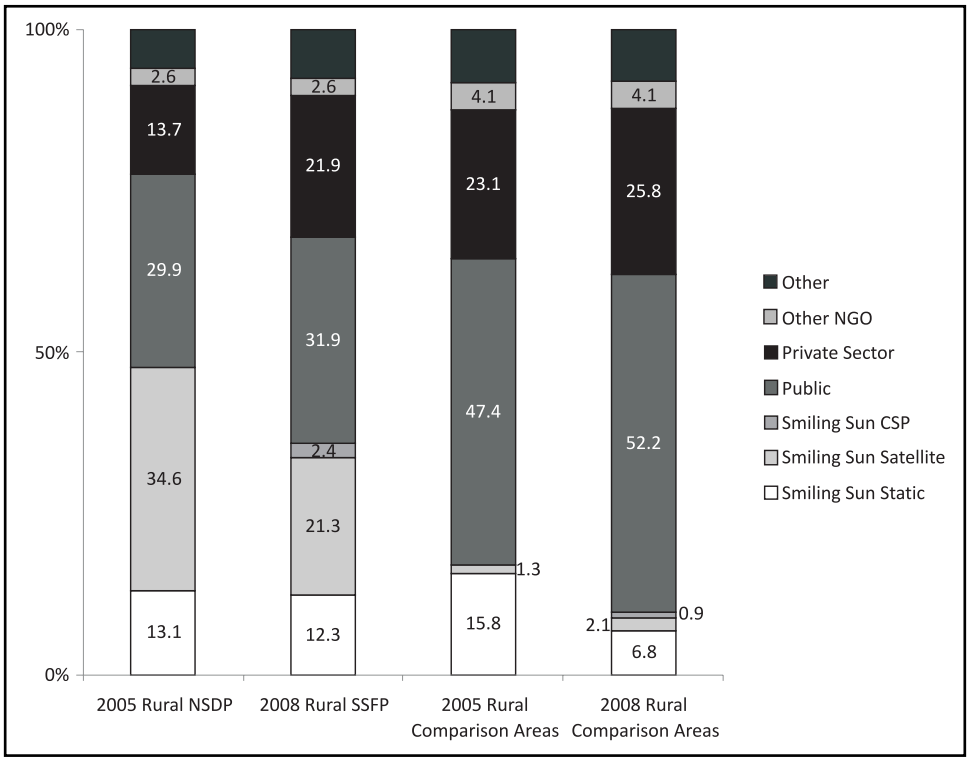

Figure S.4. Market Share for DPT-3 Vaccine, Rural Project and Non-Project Areas, NSDP 2005 and BSSFP 2008.

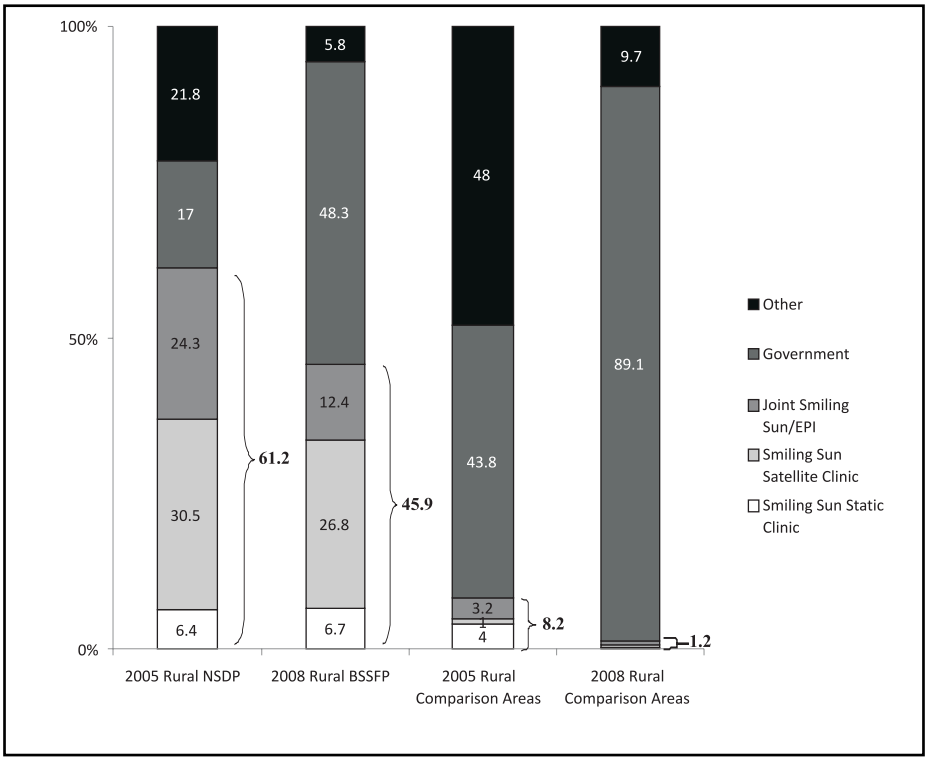

Table S.3. Summary table of rural BSSFP results for key indicators; 2008 rural project and non-project areas and 2005 rural NSDP and non-project areas

	Project Areas		Non-Project Areas	
	Rural NSDP Survey 2005	Rural BSSFP Survey 2008	Rural NSDP Survey 2005	Rural BSSFP Survey 2008
SO: Fertility reduced; family health improved				
Total Fertility Rate 15-49 (3 year recall)	3.1	3.0	3.0	2.8
Infant Mortality Rate	56.9	45.2	62.2	38.5
Child Mortality Rate	18.7	15.3	18.4	14.4
Under 5 Mortality Rate	74.5	59.8	79.5	52.4
IR1: Increased use of high-impact elements of an "Essential Services Package" among target populations, especially in low-performing areas.				
Contraceptive prevalence rate (modern methods) among currently married women				
Any method	56.9	56.5	57.8	56.5
Any modern method	50.2	49.7	49.3	49.4
Pill	25.1	26.4	26.7	27.9
IUD	0.6	0.5	0.9	1.0
Injection	15.6	14.5	12.3	11.1
Condom	2.8	2.8	2.5	2.9
Female Sterilization	5.0	4.5	5.9	5.3
Male Sterilization	0.4	0.3	0.4	0.4
Norplant	0.8	0.7	0.6	0.7
Any traditional	6.4	6.9	8.1	7.1
Not using any method	43.1	43.5	42.2	43.5
Contraceptive prevalence rate (modern methods) among currently married adolescents				
Age 10-14	26.6	24.0	16.2	19.8
Age 15-19	40.2	40.2	34.0	40.0
Percent of children aged 12-23 months who received specific vaccines at any time before the survey (source is either vaccination card or mother's report)				
BCG	93.5	93.4	96.2	95.0
DPT3	76.3	89.4	83.3	89.2
Polio3	86.4	89.3	90.5	90.5
Measles	79.6	83.6	82.6	83.3
All	68.6	81.4	74.3	80.6
Percent of children (9-59 months) receiving vitamin-A capsules in the last six months	67.5	75.7	70.8	78.1
Percent of child diarrheal episodes treated with ORT in target populations				
Packet ORS	76.3	78.3	80.6	77.1
Laban gur saline (RHF)	15.8	16.6	8.9	20.8
Oral Rehydration Therapy (ORS or *laban gur*)	81.2	85.5	84.8	81.8
Percent of child ARI cases treated in target populations				
Health facility or provider	31.3	32.6	31.4	36.5

	Project Areas		Non-Project Areas	
	Rural NSDP Survey 2005	Rural BSSFP Survey 2008	Rural NSDP Survey 2005	Rural BSSFP Survey 2008
Percent of live births for which women in target populations made one or more ANC visits, by age				
Women with a live birth in the last year	56.0	x	48.0	x
Women with a live birth in the last 3 years	54.3	52.1	50.2	50.4
Percent of women receiving antenatal care from a medically trained provider, live births in the last 3 years	47.4	46.2	40.6	41.3
Percent of pregnant women taking iron supplementation				
Women with a live birth in the last year	51.0	x	43.7	x
Women with a live birth in the last 3 years	48.2	51.2	44.9	53.4
IR2: Increased knowledge and changed behaviors related to high-priority health problems, especially in low-performing areas.				
Percent of married women in catchment populations that can name available ESP services related to maternal health, reproductive health, child health.				
Static Clinic				
Clinical FP method	66.3	47.6	59.1	46.8
Non-clinical FP method	61.6	45.3	51.0	36.9
Advice for side effects	11.4	4.1	3.2	1.5
ANC	66.7	68.8	71.4	75.8
PNC	13.2	13.7	51.2	14.2
EPI	53.1	33.1	47.0	32.6
Oral saline	13.7	7.4	22.7	5.2
Satellite Clinic				
Clinical FP method	50.1	41.8	x	x
Non-clinical FP method	62.2	50.7	x	x
Advice for side effects	6.8	2.1	x	x
ANC	55.9	64.3	x	x
PNC	8.7	8.6	x	x
EPI	60.2	42.9	x	x
Oral saline (ORS/diarrhea treatment)	8.2	5.4	x	x
Percent of mothers who know when their child's next immunization is due; danger signs of pregnancy				
When child's next immunization is due				
DPT3	35.3	x	34.7	x
Polio3	36.2	x	35.4	x
Both	35.6	x	34.7	x
Know danger signs for pregnancy and how to react				
Tetanus	56.6	49.1	56.7	49.2
Obstructed labor	23.9	23.1	25.6	25.3
Convulsions/Eclampsia	31.3	29.6	29.8	30.1
Retained placenta	38.8	42.2	42.0	42.0
Poor positioning of fetus	33.5	29.4	35.5	26.6
Excessive vaginal bleeding	17.2	21.1	18.0	21.1
Don't know	2.8	2.0	2.5	2.8

	Project Areas		Non-Project Areas	
	Rural NSDP Survey 2005	Rural BSSFP Survey 2008	Rural NSDP Survey 2005	Rural BSSFP Survey 2008
Percent distribution of tetanus toxoid injections received during the last pregnancy, among mothers with a live birth in the 3 years preceding the survey				
None	19.0	27.8	19.3	26.2
One	22.9	20.2	24.3	21.0
Two or more injections	58.1	51.9	56.4	52.9
Don't know/missing	0.1	0.1	0.0	0.0
Percentage of last born children who were ever breastfed	98.5	98.8	98.2	98.4
Breastfeeding initiation for the last born child				
Percentage breastfed within one hour of birth	33.1	35.5	31.8	36.4
Percentage breastfed within one day of birth	78.7	84.8	80.0	86.7
IR3: Improved quality of services at NSDP/BSSFP facilities				
Drop-out rates for EPI				
DPT3	17.0	4.3	13.1	6.1
Polio3	7.2	3.1	5.4	4.9
Awareness and utilization of Smiling Sun services and clinics				
Percent of women reporting having seen the Smiling Sun logo	71.4	58.6	45.8	37.7
Percent of women who are aware of a temporary or satellite clinic in their area	90.4	82.3	85.7	81.2
Percent of women who are aware of a hospital/clinic in the area from which they can obtain health or family planning services	94.6	83.0	97.8	87.2

Note: An "x" indicates that the indicator was not available for the survey at that time.

CHAPTER 1. INTRODUCTION

1.1. Background

The Bangladesh Smiling Sun Franchise Program (BSSFP) is a USAID-funded program that aims to deliver family planning and a broad package of maternal and child health-focused interventions through clinics administered by a network of NGOs. It is the most recent incarnation of an evolving series of interventions that began with separate urban and rural components (called, respectively, the Urban Family Health Partnership (UFHP) and Rural Service Delivery Partnership (RSDP) before being consolidated into the NGO Service Delivery Program (NSDP).

This family of programs was motivated by an apparent "plateau" of around 3.4 to the total fertility rate evident from the early 1990s. This plateau came after nearly two decades of steady declines in the total fertility rate under a family planning delivery model, the cornerstone of which is the door-to-door delivery of family planning services. However, the fertility plateau led to speculation that further progress lowering fertility might require addressing broader family health, which remained poor. USAID/Bangladesh thus conceived the UFHP and RSDP programs to deliver family planning and a broad package of maternal and child health services through a facility-based (as opposed to door-to-door) model. The programs offered, in essence, a "one-stop shopping" approach that sought to address fertility both directly (through provision of family planning services) and indirectly (by addressing broader family health). The successor program, the NSDP, offered some adjustments to these earlier efforts, but mainly served to consolidate the urban (UFHP) and rural (RSDP) components under one administrative umbrella.

The BSSFP program is the successor to the NSDP program. It retains much of the basic delivery model and set of interventions (i.e., the range of family planning and health services) of the NSDP. The most important new feature of the BSSFP is a shift toward a franchise model with a more explicit self-sustainability/cost-recovery mandate. Specifically, user fees for services will play a more central role in the financing of the BSSFP than had been the case with the NSDP. Furthermore, while the NSDP program involved branding efforts (with an emphasis on the program symbol, referred to as the "Smiling Sun"), the BSSFP will involve more intense health communications activities designed to establish the "Smiling Sun" brand as associated with clean, courteous, and reliable delivery of effective health care, thus rendering it a vehicle for a franchise model of health care delivery.

MEASURE Evaluation at the Carolina Population Center of the University of North Carolina at Chapel Hill has directed the monitoring of each of these earlier programs with monitoring surveys (2001, 2003, and 2005) on behalf of the United States Agency for International Development (USAID). MEASURE Evaluation now has the responsibility of monitoring the BSSFP program. To establish benchmarks for monitoring the progress of the program, a baseline survey was conducted in 2008. This report presents main results of the rural component of the 2008 BSSFP baseline survey.

1.2. Project Population

The rural component of the BSSFP covered a population of approximately 8.99 million, residing in all six divisions of Bangladesh. The 2008 distribution of the project population by division is given in Table 1.1. About 36 percent of the population resided in the Dhaka division, 26.3 percent in the Chittagong division, and 23.3 percent in the Rajshahi division, with small proportions of the population located in Barisal (1.8 percent), Khulna (8.6 percent), and Sylhet (4.1 percent). For estimation purposes in this report, the population of Barisal is combined with that of Khulna to form a single statistical domain, while the population of Sylhet is combined with that of Chittagong in a similar manner.

Table 1.1. Distribution of the project population by division, rural areas, BSSFP 2008

Division	Population	Percentage
Barisal	164,164	1.8
Khulna	770,170	8.6
Chittagong	2,360,724	26.3
Sylhet	364,667	4.1
Dhaka	3,235,338	36.0
Rajshahi	2,095,117	23.3
Total	8,990,150	100.0

1.3. Survey Objectives

The main objective of the 2008 BSSFP baseline survey was to capture levels of key health and family planning-related indicators that the program seeks to influence in program intervention areas and similar comparison areas (where the program is not operating). The information from the comparison areas provides a crucial counterfactual for assessing the program's performance at the population level in its own operational areas. The survey captured a wide range of indicators associated with the use of family planning, child health, and the use of maternal and child health services (particularly related to pregnancy and early life), as well as individual, household, and neighborhood-level factors associated with health outcomes and health behaviors.

1.4. Sample Design

The rural component of the 2008 BSSFP baseline survey used a representative sample of households in program areas. In addition, a sample was drawn from rural non-program areas (areas outside of BSSFP catchment locations). The purpose of including a sample of comparison areas was to distinguish the effects of the BSSFP from other forces acting simultaneously within rural areas. The comparison areas were chosen for their similarity to BSSFP operational areas. Specifically, they were adjacent to the BSSFP project areas but outside the operational scope of the BSSFP.

The rural component of the 2008 BSSFP baseline survey was intended to provide estimates for six sample domains: the four divisions in which the project operates,[1] the rural BSSFP project as

[1] While the project supports NGOs in all six divisions, it operates in only a few areas in Barisal and Sylhet. As a result, Khulna and Barisal divisions were treated as a single domain, as were Chittagong and Sylhet.

a whole, and rural non-project comparison areas. The domains (representing Sylhet/Chittagong, Barisal/Khulna, Dhaka and Rajshahi) roughly correspond to rural areas of the six divisions of the country.

Representative samples of project and comparable non-project populations were drawn using a stratified two-stage cluster sampling method. In the first stage, a total of 190 clusters were selected from BSSFP areas with probability proportional to size (PPS). In the second stage, households within those clusters were selected to yield a sample of representative ever-married women aged 10-49 in project areas. A cluster was defined as the area covered by a BSSFP satellite or static clinic. Of the chosen project clusters, 29 were selected from the Barisal and Khulna divisions, 49 from Dhaka, 29 from Rajshahi, and 83 from Chittagong and Sylhet.

A total of 212 non-project comparison clusters were selected from areas adjoining BSSFP areas using a similar sampling strategy. Of the non-project clusters, 55 were selected from Dhaka, 32 from Khulna and Barisal, 32 from Rajshahi and 93 from the Chittagong and Sylhet divisions. For selecting a non-project cluster corresponding to a selected project cluster, a village was randomly selected from adjoining villages (where BSSFP is absent), and then a randomly chosen segment of that village was chosen as a non-project cluster.

For every selected cluster from BSSFP project and non-project comparison areas, 200 to 250 households were listed, proceeding from the Northwest corner of the area. From each project cluster, 36 households were systematically selected with the expectation that at least 32 eligible women (ever-married and aged 10-49 years) would be found for interviews. Similarly, from each comparison cluster, 34 households were systematically selected with the expectation that at least 30 eligible women would be found for interviews. Ultimately, 6,330 women were interviewed from BSSFP areas and 6,789 were interviewed from non-project areas.

1.5. Implementation of the Survey

The 2008 rural component of BSSFP survey was implemented by Associates for Community and Population Research (ACPR), a research firm located in Dhaka. A three member research team from ACPR, headed by Professor M. Sekander Hayat Khan, was responsible for implementing the survey. The other members of the team were A. P. M. Shafiur Rahman and Ms. Tauhida Nasrin. Technical assistance was provided by MEASURE Evaluation, a USAID-funded project implemented by the Carolina Population Center at the University of North Carolina at Chapel Hill.

1.6. Survey Instruments

The BSSFP baseline survey was a multi-level study designed to illustrate circumstances at the community, household, and individual level. Three instruments were used for the survey:

- Household listing schedule;
- Household and women's questionnaire; and
- Community questionnaire.

These survey instruments were initially developed by MEASURE Evaluation before being reviewed by USAID/Dhaka and translated and pretested by ACPR. The questionnaires were initially developed in English and then translated into Bangla.

Household Listing Schedule

The household listing schedule was used to conduct household listing operations in each cluster area in order to systematically select the required number of households from each.

Household and Women's Questionnaire

The household and women's questionnaire was divided into two parts, each including questions pertaining exclusively to the household and the ever-married individual women aged 10-49 within that household, respectively. The household portion of the questionnaire was usually administered to the female household head, and where necessary, the women's portion of the questionnaire was administered to other qualified household members who served as proxy.

The household part of the questionnaire was used to list all usual members and visitors in the selected households. Some basic information was collected on the characteristics of each person, including age, sex, marital status, education, and the individual's relationship to the household head. The main purpose of the household part of the questionnaire was to identify ever-married women aged 10 to 49 years for individual interview. In addition, information was collected about the dwelling itself, such as the source of water, type of toilet facilities, materials used to construct the house, and ownership of various consumer goods.

The women's questionnaire was administered to all ever married women age 10-49 in the sample households selected for individual interview. The women's portion of the survey instrument collected information from ever-married women aged 10 to 49 years on the following topics:

- Background characteristics (age, current marital status, education, occupation, religion, exposure to mass media, and NGO membership)
- Reproductive history
- Knowledge and use of contraceptive methods
- Pregnancy, delivery and postnatal care, and breastfeeding practices
- Immunization and health
- Knowledge about health service providers
- Bidding games for assessing the extent to which households would be willing to pay for different health services

Community Questionnaire

The community questionnaire was administered to several knowledgeable community leaders within each selected sample cluster. It had the objective of collecting information about important community characteristics, existing health facilities, health and family planning workers, depotholders/community service providers (CSP), the availability of doctors and pharmacies, and the existence of other programs provided by NGOs in the survey cluster/village/mahallas of BSSFP project and non-project comparison areas.

1.7. Training and Fieldwork

Training and Fieldwork for Household Listing and Community Survey

Field staff for the household listing phase of the survey was recruited in the first week of June, 2008 and were trained at ACPR from June 15 to June 18, 2008. Listing operations and community surveys were conducted from June 19 to August, 2008. Thirteen teams, each consisting of one supervisor and two listers, were deployed for the listing operation and community survey.

Pretesting

The women's questionnaire was pre-tested three times: first on June 18, and then on June 27 and June 28, 2008. For the pretest, male and female interviewers were trained at ACPR. Interviews were then conducted in the Gazipur areas of Dhaka under the observation of ACPR's research team members, MEASURE Evaluation, USAID/Dhaka, and BSSFP staff. Altogether, 30 questionnaires were completed. Based on the experience in the field and suggestions made by pretest staff, modifications were made in the wording and translations of the questionnaire.

Training and Fieldwork for the Survey

In the second week of June, 2008, field staff for the main survey was recruited. Recruitment criteria included educational attainment, experience in other surveys, and the ability to spend three weeks in training and at least three months in the field. Training for the main survey was conducted at a rented venue for 19 days from June 28 to July 16, 2008, including two days for field practice. Training consisted of lectures on the objectives and methodology of the survey, interviewing techniques, how to complete the questionnaire, and detailed discussion on the different topics covered in the questionnaire. Group discussions and mock interviews between participants were used to gain practice in asking questions. Those with satisfactory performance in the course were selected for fieldwork. Those whose performance was considered superior were selected as supervisors.

Fieldwork commenced on July 19, 2008 and was completed on October 23, 2008. It was carried out by 15 interview teams. Each team consisted of one male supervisor and one female supervisor, four female interviewers, and one field assistant. Fieldwork was done in four phases. ACPR fielded five quality control teams of two people each to monitor the field activities of the interview teams. In addition, research team members from ACPR monitored the fieldwork by visiting teams in the field. Moreover, a survey expert from MEASURE Evaluation also visited teams in the field.

1.8. Data Processing

Data processing commenced at the ACPR office in Dhaka in mid-July of 2008, and was completed on November 3, 2008. All the completed questionnaires for the survey were returned to the data processing cell of ACPR. The data processing operations consisted of office editing, data entry, and editing inconsistencies found by computer programs. The data were processed on 11 microcomputers working in double shifts, carried out by 22 data entry operators and two data entry supervisors. The data entry and editing programs were written in the software program CSPro 2.6. To minimize error, a double data entry procedure was followed.

1.9. Response Rates

Table 1.2 shows response rates for the survey. A total of 6,909 households in project areas and 7,311 households in non-project areas were selected for the sample. Of these, 6,435 project and 6,769 non-project households were successfully interviewed. The reasons for the shortfall were that the dwellings were either vacant or the inhabitants were absent for an extended period during the time that they were visited by the interview teams. About 94 percent of households were successfully interviewed. In these households, 6,761 of project and 7,247 of non-project women were identified as eligible for the individual interviews (i.e. ever-married women aged 10 to 49 years), and interviews were completed for 6,330 project and 6,789 non-project women, or 94 percent of them. The main reason for non-response among eligible women was the failure to find them at home despite repeated visits to the households. Response rates were similar in BSSFP project and non-project areas in all geographic divisions.

Table 1.2. Results of household and individual interviews

Number of households, number of interviews, and response rates according domain, project and non-project areas, BSSFP 2008.

	Project areas					
	Dhaka division	Chittagong/ Sylhet division	Khulna/ Barisal division	Rajshahi division	Total project areas	**Non-project areas**
Household sampled	1766	3055	1044	1044	6909	7311
Household found	1755	3051	1039	1044	6889	7239
Household interviewed	1630	2841	992	972	6435	6769
Household response rate (%)	92.9	93.1	95.5	93.1	93.4	93.5
Eligible women found	1679	3073	1029	980	6761	7247
Eligible women interviewed	1557	2881	965	927	6330	6789
Eligible women response rate (%)	92.7	93.8	93.8	94.6	93.6	93.7

CHAPTER 2. HOUSEHOLD POPULATION AND HOUSING CHARACTERISTICS

This chapter provides information on households and general characteristics of the household population, as well as on selected features of dwellings of rural BSSFP project and non-project comparison areas. The purpose of this portion of the survey was to compare the population and housing features of households in BSSFP catchment areas with those in the non-project comparison areas. This would provide some background for interpreting the many results related to health and health-related behaviors and perceptions discussed in the following chapters.

This chapter explores household population characteristics (such as age-sex structure, household size, and marital status); physical characteristics of dwelling houses (including sanitation facilities); and household ownership of land and possession of assets and amenities.

2.1. Characteristics of Household Population

In the 2008 BSSFP baseline survey, a household is defined as a person or group of people who live together in the same dwelling unit(s), have common cooking and eating arrangements, and acknowledge one adult member as a household head. A member of the household is defined as any person who usually lives in the household, and/or a visitor who is not a usual member of the household but spent the night before the interview in the household. Thus, the tabulations/estimates presented in this chapter are for the *defacto* household population. They are based on information collected from 13,204 households (6,435 from project and 6,769 from non-project areas).

2.1.1. Age and Sex Composition

Table 2.1 provides the age and sex distribution of household populations across project and non-project areas by five-year age groups and sex. The population was roughly equally divided into males and females in both project and non-project areas. Overall, the proportion of household members in younger age groups was substantially larger than the proportion in older age groups for each sex and in both project and non-project areas.

The age distribution of the population was similar across project and non-project areas. About 37 percent of project and non-project populations were younger than 15 years of age, nearly 19 percent belonged to age range 15-24 years, and 13 percent were age 65 or older.

Table 2.1. Household population by age, sex, and residence

Percent distribution of the *de facto* household population by five-year age group, according to sex, project and non-project areas, BSSFP 2008.

	Project areas			Non-project areas		
Age group	Male	Female	Total	Male	Female	Total
0-4	11.8	11.2	11.5	11.9	10.9	11.4
5-9	14.0	13.3	13.6	13.7	12.5	13.1
10-14	12.3	11.6	12.0	12.3	11.7	12.0
15-19	9.4	11.6	10.5	10.2	11.7	11.0
20-24	7.2	9.6	8.4	6.9	9.9	8.4
25-29	6.9	8.2	7.5	6.7	8.2	7.5
30-34	5.9	6.7	6.3	6.0	6.7	6.4
35-39	6.6	6.0	6.3	6.1	6.2	6.2
40-44	5.3	5.0	5.2	5.3	4.8	5.1
45-49	4.4	3.9	4.2	4.9	4.2	4.6
50-54	3.5	3.5	3.5	3.5	3.3	3.4
55-59	2.8	2.9	2.8	2.9	2.7	2.8
60-64	3.1	2.4	2.7	2.6	2.5	2.6
65-69	1.8	1.4	1.6	1.8	1.3	1.5
70-74	1.9	1.2	1.5	2.1	1.2	1.7
75-79	1.2	.4	.8	1.0	.5	.8
80+	1.8	1.2	1.5	1.8	1.6	1.7
DK/Missing	.0	.0	.0	.0	.0	.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number	15050	15737	30787	16106	16552	32659

2.2. Household Composition

Table 2.2 provides the percent distribution of households according to sex of the household head, the number of usual household members, and the mean household size. Only 11.3 percent of project and 11.4 percent of non-project households were headed by a female, which is consistent with the findings of other studies (e.g., Bangladesh Demographic and Health Survey 2007). Chittagong/ Sylhet division households were more likely to be female-headed (at 17.7 percent) than Dhaka (10.7 percent), Rajshahi (6.8 percent), and Khulna/Barisal (7.3 percent) division households.

The mean household size was 4.8 and 4.9, respectively, in project and non-project areas. This matches the BDHS 2007 estimate. The mean household size was considerably higher in Chittagong/ Sylhet division at 5.5 members. Single-person households were rare in every area.

Table 2.2. Household composition

Percent distribution of households by sex of the head of household, household size, according to project and non-project areas, BSSFP 2008.

	Project areas					Non-project areas
	Dhaka division	Chittagong/ Sylhet division	Khulna/ Barisal division	Rajshahi division	Total project areas	
Sex of the household head						
Male	89.3	82.3	92.7	93.2	88.7	88.6
Female	10.7	17.7	7.3	6.8	11.3	11.4
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of usual members						
1	1.9	1.3	1.2	2.3	1.8	1.6
2	9.8	5.7	6.1	10.0	8.3	7.6
3	15.8	12.3	17.0	19.8	15.9	17.1
4	22.6	16.4	27.1	28.1	22.7	22.7
5	21.4	19.8	22.4	19.7	20.6	20.7
6	12.6	17.9	12.7	10.0	13.5	13.0
7	7.9	11.2	6.5	5.5	8.0	7.5
8	3.3	6.0	3.6	2.0	3.8	4.2
9+	4.7	9.4	3.3	2.9	5.4	5.7
Total	100.0	100.0	100.0	100.0	100.0	100.0
Mean size	4.7	5.5	4.7	4.3	4.8	4.9
Number	2404	1780	694	1557	6435	6769

2.3. Marital Status

Table 2.3 presents information on the distribution of the household male and female population by five-year age group, according to marital status and across project and non-project areas. The proportion ever-married in the younger age groups varied widely by sex. A significantly higher proportion of females were married at a rather early age.

There were virtually no ever-married males less than 15 years of age in either project or non-project areas. By contrast, the proportion of ever-married females in the same age group was 1.5 percent in project areas and 1.4 percent in non-project areas. Less than four percent (3.5 and 3.8 percent in project and non-project areas, respectively) of males aged 15-19 were ever-married, compared to 38.6 and 42.1 percent, respectively, of project and non-project females. Little variation was observed in this pattern across project and non-project areas.

Table 2.3. Marital status

Percentage of household male and female population by five year age group, according to marital status, project and non-project areas, BSSFP 2008.

	Male						Female					
	Project areas			Non-Project areas			Project areas			Non-Project areas		
Age Group	CM	FM	NM	CM	FM	NM	CM	FM	NM	CM	FM	NM
10-14	0.1	0.1	99.8	0.1	0.0	99.9	1.5	0.0	98.5	1.4	0.0	98.6
15-19	3.4	0.1	96.5	3.6	0.2	96.2	38.2	0.4	61.4	41.5	0.6	57.8
20-24	25.5	1.0	73.5	26.2	0.3	73.5	81.4	1.7	16.9	78.8	2.3	18.9
25-29	68.3	0.3	31.5	67.6	0.5	31.9	93.3	3.1	3.6	93.9	2.9	3.2
30-34	90.2	0.8	9.1	90.1	0.5	9.4	95.2	4.0	0.8	95.7	3.3	1.1
35-39	97.5	0.2	2.3	96.4	0.7	2.9	92.4	7.3	0.4	93.2	6.7	0.2
40-44	97.4	1.4	1.2	99.7	0.1	0.2	91.0	8.9	0.1	90.0	9.5	0.5
45-49	98.9	0.8	0.3	99.1	0.9	0.0	86.7	13.3	0.0	86.9	13.1	0.0
50-54	97.9	1.3	0.8	99.1	0.7	0.2	71.6	27.8	0.7	77.6	22.4	0.0
55-59	98.7	1.2	0.2	98.3	1.7	0.0	66.1	33.8	0.1	69.5	30.4	0.1
60-64	95.9	3.8	0.3	95.8	3.7	0.5	50.2	49.2	0.5	56.7	42.7	0.6
65-69	96.1	3.9	0.0	95.3	4.7	0.0	48.2	51.8	0.0	45.6	54.4	0.0
70-74	94.0	5.7	0.2	93.5	6.1	0.5	32.4	67.6	0.0	26.8	72.5	0.7
75-79	89.7	9.5	0.8	91.9	8.1	0.0	24.1	75.9	0.0	25.9	74.1	0.0
80+	82.7	16.8	0.5	78.9	20.4	0.7	13.1	86.9	0.0	10.9	88.8	0.3
Total	58.7	1.4	39.9	58.3	1.4	40.3	62.2	10.8	27.1	62.6	10.7	26.7
Number	6703	164	4552	7128	169	4931	7451	1288	3244	7998	1363	3410

Note: Table is based on de jure members, i.e., usual residents. CM: currently married; FM: formerly married; NM: never married.

2.4. Housing Characteristics

The distribution of households by housing characteristics such as the source of drinking water, type of sanitation facilities, access to electricity, and main housing materials is provided in Tables 2.4 and 2.5. Table 2.4 shows that tube wells were the major source of drinking water in project and non-project areas, supplying roughly 96 percent of households. Only a small proportion of households depended on a non-improved source (i.e. surface water, an unprotected dug well, etc.), while piped water was quite rare. The sources of cooking and hand-washing water were similar to those for drinking water.

Generally speaking, sanitation facilities varied little between project and non-project areas. Nearly 92 percent of project and non-project households had some type of toilet facility. However, 85.7 and 86.7 percent, respectively, of project and non-project households had hygienic toilets (septic tank/modern toilet, water sealed/slab latrine, or pit latrine). About 34 percent of those with some kind of toilet facility shared it with other households (Table 2.4).

Table 2.4. Household drinking water and sanitation facilities

Percent distribution of households by source of drinking water and sanitation facilities, according to project and non-project areas, BSSFP 2008.

Characteristics	Project areas	Non-Project areas
Source of drinking water		
Improved source		
Piped water into dwelling/yard/plot	0.9	1.0
Public tap/standpipe	0.7	0.5
Tube well or borehole	95.8	95.9
Protected dug well	0.6	0.4
Protected spring	0.0	0.0
Rainwater	0.7	0.6
Non-improved source		
Unprotected dug well	0.3	0.2
Unprotected spring	0.0	0.2
Tanker truck/cart with small tank	0.0	0.0
Surface water	1.0	1.3
Bottled water (improved source)	0.0	0.0
Other	0.0	0.0
Total	100.0	100.0
Source of cooking and hand-washing water		
Improved source		
Piped water into dwelling/yard/plot	0.9	1.0
Public tap/standpipe	0.7	0.5
Tube well or borehole	95.8	95.9
Protected dug well	0.6	0.4
Protected spring	0.0	0.0
Rainwater	0.7	0.6
Non-improved source		
Unprotected dug well	0.3	0.2
Unprotected spring	0.0	0.2
Tanker truck/cart with small tank	0.0	0.0
Surface water	1.0	1.3
Bottled water	0.0	0.0
Other	0.0	0.0
Total	100.0	100.0
Type of toilet/latrine facility		
Septic tank/toilet	6.0	6.6
Water sealed/slab latrine	65.1	67.0
Pit latrine	14.6	13.1
Open latrine	0.2	0.1
Hanging latrine	6.1	5.4
No facility, bush	8.0	7.8
Other	0.0	0.0
Total	100.0	100.0
Number	6435	6769
Share toilet facility with other households		
Yes	34.3	34.1
No	65.7	65.9
Total	100.0	100.0
Number	5921	6243

Table 2.5 presents data on housing conditions. Tin was the most common roofing material, accounting for 91 percent of project and non-project households. About six percent of project and non-project households lived in dwellings with roofs made of natural materials such as thatch/palm, leaf/bamboo/wood, or plank/cardboard. Only two to three percent of households had a cement or concrete roof.

Almost half of all households in project and non-project areas had dwellings with walls made of tin. Nearly 38 percent of project and 36 percent of non-project households lived in structures with walls made of natural materials, such as cane, palm, trunks, bamboo, or mud. Eleven percent of project and 12 percent of non-project households lived in houses with cement or brick walls. By far the most commonly used floor material was earth, sand, palm, or bamboo (accounting for 91.5 percent of project and 90.2 percent of non-project households, respectively), followed by cement or ceramic tiles (accounting for 8.4 percent of project and 9.7 percent of non-project households).

2.5. Household Assets and Amenities

Information on possession of household assets and amenities, as well as ownership of homestead and other land, is presented in Tables 2.5 and 2.6. In rural Bangladesh, ownership of homestead and other land and access to electricity are potentially important indicators of a household's socioeconomic circumstances; ownership of a radio or television is a measure of access to mass media; telephone ownership measures access to efficient communication; and motorcycle/scooter ownership is a measure of access to a means of transportation. In general, possession of these items has a bearing on the households' access to information and health. Along with other data, this information can also be used to rank households according to socioeconomic status (SES).

Nearly 94 percent of project and 95.3 percent of non-project households owned their own homestead. Household possession of land other than the homestead was not common. About 56 percent of project and 55 percent of non-project households were landless. About 22 percent of project and 24 percent of non-project households possessed less than an acre of land other than the homestead. Very few differences existed between project and non-project households with respect to ownership of the homestead and any other land. Some differences existed with respect to electricity access between project and non-project areas (Table 2.6), with 39.4 percent of project and 42 percent of non-project households having electricity.

More than two-thirds of households owned either a chair or a table. Nearly 59 percent of project and 62 percent of non-project households owned either a watch or a clock. Only 28.4 percent of project and 30.9 percent of non-project households owned an almirah. The project versus non-project differentials in ownership of durable goods were small. Mobile telephones were equally present in project (40.8 percent) and non-project (42.7 percent) households. About four percent of households owned a refrigerator. These patterns suggest almost identical economic conditions in project and non-project areas.

Table 2.5. Housing characteristics and land ownership

Percent distribution of households by housing characteristics and land ownership, according to project and non-project areas, BSSFP 2008.

	Project areas	Non-Project areas
Main roof material		
No roof	0.1	0.1
Thatch/palm leaf/bamboo/wood plank/cardboard	6.2	5.8
Tin	91.3	91.0
Cement, ceramic tiles	2.1	2.9
Other	0.3	0.2
Total	100.0	100.0
Main wall material		
No walls	0.1	0.1
Cane/palm/trunks, dirt, bamboo with mud	37.8	36.1
Tin	49.5	50.1
Cement, stone with lime/cement, bricks	10.5	12.0
Other	2.2	1.6
Total	100.0	100.0
Flooring material		
Earth/sand/palm/bamboo	91.5	90.2
Parquet or polished wood	0.1	0.0
Cement/ceramic tiles	8.4	9.7
Other	0.0	0.1
Total	100.0	100.0
Household owns any homestead		
Yes	94.0	95.3
No	6.0	4.7
Total	100.0	100.0
Household owns any other land		
Yes	43.7	44.7
No	56.3	55.3
Total	100.0	100.0
Amount of other land owned		
No land	56.3	55.3
<50 decimals	13.6	14.4
50-99 decimals	8.7	9.2
1.00 acres-1.99 acres	9.5	9.2
2.00 acres-4.99 acres	7.6	7.8
5.00+ acres	2.7	2.8
DK/missing	1.5	1.3
Total	100.0	100.0
Number	6435	6769

Table 2.6. Household assets and amenities

Percentage of households possessing various household effects, according to project and non-project areas, BSSFP 2008.

	Project areas	Non-Project areas
Electricity		
Yes	39.4	42.0
No	60.6	58.0
Durable Goods		
Almirah	28.4	30.9
Table	69.4	71.6
Chair	71.2	73.1
Watch or clock	58.6	61.5
Radio	17.8	19.1
Television	24.8	27.3
Bicycle	22.8	24.1
Motorcycle/scooter	2.2	3.0
Mobile telephone	40.8	42.7
Non-mobile telephone	.5	0.8
Refrigerator	3.6	4.8
Animal drawn cart	1.0	1.0
Car/truck	0.2	0.3
Boat with a motor	1.4	1.4
Rickshaw/van	4.8	5.0
Sewing machine	3.8	4.4
Do not own any durable goods	0.0	0.0
Number	6435	6769

2.6. Socioeconomic Status

Households in project and non-project areas were ranked according to socioeconomic status (SES) using an index based primarily on dwelling characteristics (e.g., the presence of electricity, type of water source, type of toilet, floor, wall, and roof materials, and ownership of selected assets and durable goods, including an almirah, table/chair, watch/clock, radio, television, motorcycle, refrigerator, car/truck, etc.). Two indicators of land ownership (homestead and other land) were also included. The SES index was constructed using a version of the principal components method that accounts for the binary and ordinal nature of some of the measures of durable goods and dwelling characteristics. The method assigned each variable a factor score or weight. The index was then basically a weighted sum of the characteristics of the dwelling and the durable goods available in the households. Households were then categorized by quintiles using the index.

In the following chapters, we refer to the SES classification of households as asset quintiles. The classification of households used in this report was independent of any national socioeconomic distribution that may have been used in other surveys. The SES classification was specific to the population of rural BSSFP project and non-project comparison areas at that time.

CHAPTER 3. CHARACTERISTICS OF RESPONDENTS

Chapter three presents information on the background of individual women interviewed in the 2008 BSSFP baseline survey. Its objective is to provide some further context for the findings presented later in the report. The BSSFP baseline survey interviewed 6,330 and 6,789 ever-married women of reproductive age from project and non-project areas, respectively. Background characteristics of respondents included age, current marital status, educational attainment, religion, exposure to mass media, and membership in NGOs.

3.1. General Characteristics

Table 3.1 shows the distribution of ever-married women age 10 to 49 years by selected background characteristics. Their age was initially determined through two questions:

1. In what month and year were you born?
2. How old were you at your last birth day?

In situations where respondents did not know their age or date of birth, interviewers were instructed to probe to determine age and finally, to record their best estimate. More than 53 percent of ever-married women in project areas were 20-34 years of age, and 10 percent were less than 20 years of age. The age distribution of non-project women was similar.

Table 3.1 also presents the distribution of respondents by household asset quintile. Given that socioeconomic status (SES) classification was obtained using project and non-project samples, each quintile should contain 20 percent of the sample. Departures from 20 percent in each quintile both in project and non-project areas show inequalities in SES. It can be seen that about 25 percent of non-project and 21.2 percent of project households were in the highest quintile. Proportions in the lower quintiles were slightly higher in project than in non-project areas.

The vast majority (97 percent) of women in project and non-project areas married only once. About 94 percent of project and 90 percent of non-project women were Muslim, with most of the remainder being Hindus (5.4 and 9.1 percent, respectively, of project and non-project respondents).

Educational status was almost identically distributed across project and non-project areas. About 45 percent of project and 43 percent of non-project ever-married women had no formal education. Only 5.6 percent of project and 6.7 percent of non-project women had completed secondary or higher level education. Only 37 percent of project and about 40 percent of non-project women could read or write easily and 11 percent of both project and non-project women could read and write with some difficulty.

Table 3.1. Background characteristics of respondents

Percent distribution of women by selected background characteristics, BSSFP 2008.

	BSSFP Project area			Non-project area		
	Weighted percent	Weighted number	Unweighted number	Weighted percent	Weighted number	Unweighted number
Age						
10-14	0.5	29	24	0.4	26	23
15-19	9.8	622	615	10.9	737	718
20-24	18.4	1164	1163	17.7	1199	1190
25-29	18.7	1182	1192	18.6	1264	1271
30-34	16.3	1031	1037	15.9	1078	1077
35-39	14.6	924	929	14.7	1000	1005
40-44	12.3	779	773	11.7	793	807
45-49	9.5	598	597	10.2	691	698
Domain						
Dhaka division	37.0	2342	1557	-	-	-
Chittagong/Sylhet division	28.8	1822	2881	-	-	-
Khulna/Barisal division	10.8	681	965	-	-	-
Rajshahi division	23.5	1485	927	-	-	-
Household asset quintile						
Lowest	18.1	1145	1133	16.7	1133	18.1
Second	19.1	1212	1145	18.3	1244	19.1
Middle	20.6	1303	1217	19.1	1297	20.6
Fourth	21.0	1328	1321	20.9	1421	21.0
Highest	21.2	1343	1514	25.0	1695	21.2
Married once/more						
Once	97.1	6148	6150	96.7	6566	6583
More than once	2.9	182	180	3.3	223	206
Highest educational level						
No education	44.6	2821	2728	43.1	2923	2817
Primary incomplete	16.3	1035	1018	14.8	1001	1005
Primary complete	12.2	769	773	11.5	779	806
Secondary incomplete	21.4	1352	1425	24.0	1632	1689
Secondary complete or higher	5.6	353	386	6.7	454	472
Can read or write						
Easily	37.1	2347	2444	39.8	2699	37.1
With difficulty	10.6	668	687	11.0	745	10.6
Not at all	52.4	3315	3199	49.3	3344	52.4

	BSSFP Project area			Non-project area		
	Weighted percent	Weighted number	Unweighted number	Weighted percent	Weighted number	Unweighted number
Religion						
Islam	94.0	5952	5940	90.4	6135	6093
Hinduism	5.4	339	334	9.1	616	655
Buddhism	0.6	35	53	0.2	17	27
Christianity	0.1	4	3	0.3	19	13
Other/missing	-	-	-	0.0	2	1
Total	100.0	6330	6330	100.0	6789	6789

3.2. Exposure to Mass Media

Ever-married women were asked whether and how often they read a newspaper or magazine, listened to the radio, or watched television. Table 3.2 shows the distribution of women by exposure to these media sources. Approximately 94 percent of project and 93 percent of non-project women could not read a newspaper, only a small minority (5.5 percent in project and 6.2 percent in non-project) read a newspaper once or less than once a week, and less than one percent did so every day.

Radio listenership was not common in project or non-project areas. Only a small proportion of respondents (8.2 percent in project and 9.1 percent in non-project areas) were every day listeners. Exposure to television was higher than exposure to radio or newspapers in both project and non-project areas. Twenty two percent of project and twenty five percent of non-project women were everyday viewers of television.

3.3. Membership in NGOs

Respondents were asked whether they were affiliated with any non-governmental organizations (NGOs). The major NGOs engaged in development activities in Bangladesh are Grameen Bank, BRAC, BRDB, Mother's club, Proshika, ASHA, and TMMS. Table 3.3 provides the distribution of women by membership in selected NGOs across project and non-project areas. No respondents reported membership in Mother's Club, and only a small proportion reported membership in BRDB, Proshika, and TMMS. Membership in Grameen Bank, ASHA, and BRAC was more common in both project and non-project areas. ASHA was the most common NGO (12.6 percent) in project areas, followed closely by Grameen Bank (12.5 percent), BRAC (9.1 percent), and other NGOs (9 percent). In non-project areas, Grameen Bank was the most common NGO (14.4 percent), followed by ASHA (12 percent), BRAC (9.3 percent), and other NGOs (9.2 percent).

Table 3.2. Exposure to mass media

Percent distribution of women by whether they are exposed to specific media, according to project and non-project areas, BSSFP 2008.

Characteristics	Project areas	Non-Project areas
How often reads newspaper		
Everyday	0.6	0.6
At least once a week	2.3	2.8
Less than once a week	3.2	3.4
Does not/can not read	93.9	93.1
Total	100.0	100.0
How often listens to radio		
Everyday	8.2	9.1
At least once a week	6.1	5.9
Less than once a week	3.4	3.1
Does not listen	82.2	81.9
Total	100.0	100.0
Exposure to TV		
Everyday	21.9	24.9
At least once a week	9.6	9.7
Less than once a week	6.4	5.2
Does not watch	62.1	60.2
Total	100.0	100.0
Number	6330	6789

Table 3.3. Membership in NGOs

Percentage of women by membership of selected NGOs, according to project and non-project areas, BSSFP 2008.

Type of NGO	Project areas	Non-Project areas
Grameen bank		
Yes	12.5	14.4
No	87.5	85.6
BRAC		
Yes	9.1	9.3
No	90.9	90.7
BRDB		
Yes	0.8	0.7
No	99.2	99.3
Mother's club		
Yes	0.0	0.0
No	100.0	100.0
Proshika		
Yes	0.6	0.5
No	99.4	99.5
ASHA		
Yes	12.6	12.0
No	87.4	88.0
TMMS		
Yes	0.7	1.0
No	99.3	99.0
Other NGOs		
Yes	9.0	9.2
No	91.0	90.8
Number	6330	6789

CHAPTER 4. FERTILITY

A major objective of the 2008 BSSFP baseline survey was to examine the fertility levels, trends, and differentials in BSSFP project and non-project areas. This chapter presents a description of current and past fertility, trends in total and age-specific fertility rates, and birth spacing.

The fertility measures presented in this chapter are based on the retrospective reproductive history of ever-married women aged 15-49 who were interviewed in the survey. Each woman was asked to provide information on the number of sons and daughters to whom she had given birth, the number currently living with her, the number living elsewhere, and the number who had died. The women were then asked about the year of each birth, the sex of the child, and survival status. Based on this information, measures of age-specific fertility and total fertility rates were computed. The data were also analyzed to provide information on the length of the interval between births. Various measures of current fertility were calculated for the three years preceding the survey, which roughly corresponds to the years 2005-2007. A three-year period was chosen because it reflects the most recent situation and is subject to less recall bias than a longer retrospective time period.

4.1. Current Fertility Levels and Differentials

Table 4.1 presents age-specific fertility rates, general fertility rates, total fertility rates, and the crude birth rate for the three years preceding the survey. The sum of the age-specific fertility rates weighted by the number of years in each age interval (known as the total fertility rate, or TFR) is a useful means of summarizing the current level of fertility at a point in time. It can be interpreted as the number of children a woman would have by the end of her childbearing years if she were to pass through those years bearing children at the currently observed age-specific rates. The general fertility rate (GFR) represents the annual number of live births occurring in a population per 1,000 women aged 15-44. The crude birth rate (CBR) is the annual number of live births occurring per 1,000 members of a population, regardless of gender. All of these measures are calculated using the birth history data for the three-year period preceding the survey.

Overall, the total fertility rate (TFR) in project areas was estimated at approximately 2.97 births per woman. This means that a woman residing in a project area would have, on average, 2.97 children in her lifetime, provided the currently observed age-specific fertility rates were to remain constant. In non-project areas the TFR was slightly lower, at 2.81 births per woman. The highest age-specific fertility rates in project and non-project areas were among 20-24 year olds. These figures are comparable to other survey estimates, such as those from the 2007 Bangladesh DHS. There was considerable variation between divisions, with rates as high as 3.24 in Chittagong and Sylhet and as low as 2.45 in Khulna and Barisal.

Table 4.1 also presents the gross fertility rate (GFR) and the crude birth rate (CBR) for the three years preceding the survey across project and non-project areas. Both the GFR and CBR were slightly higher in project areas.

Table 4.1. Current fertility levels

Age-specific and cumulative fertility rates, general fertility rates, and the crude birth rate for the three years preceding the survey (1-36 months) by project and non-project areas, BSSFP 2008.

Age group	Project area	Non-Project area
15-19	127	125
20-24	168	163
25-29	138	131
30-34	96	74
35-39	40	44
40-44	15	16
45-49	8	7
TFR 15-49	2.97	2.81
TFR 15-44	2.93	2.77
GFR	110	104
CBR	23.70	22.64

TFR: Total fertility rate expressed per woman.
GFR: General fertility rate expressed per 1,000 women.
CBR: Crude birth rate, expressed per 1,000 population.

Table 4.2 shows the proportion of currently married women in project areas who reported that they were pregnant at the time of interview. Overall, 6.07 percent of women in the project areas were currently pregnant. There was also variation by division: while slightly above seven percent in Chittagong and Sylhet were currently pregnant, only 4.3 percent reported pregnancy in Khulna and Barisal.

Table 4.2. Fertility by domain

Total fertility rate for the three years preceding the survey and percentage currently pregnant among currently married women, by residence in project areas, BSSFP 2008.

Residence	Total fertility rate (TFR)*	Percentage currently pregnant
Dhaka division	2.94	6.54
Chittagong/Sylhet division	3.24	7.07
Khulna/Barisal division	2.45	4.30
Rajshahi division	2.97	4.90
Total	2.97	6.07

* Rate for women age 15-49 years.

4.2. Fertility Trends

Table 4.3 displays period-specific fertility rates in five-year intervals for the 15 years preceding the survey. This information provides insight into fertility decline. Fertility exhibited a persistent and sharp downward trend in both project and non-project areas and across all divisions over the preceding 15 years. The rate of decline was largest in the five years preceding the survey. The fertility rate declined from the 5-9 year period preceding the survey by 1.15 percentage points in project areas, which corresponds to a 39 percent decrease overall. The corresponding decline in non-project areas was 1.05 percentage points, or 36.7 percent. The largest fertility decline occurred in the lowest fertility region (Khulna/Barisal) at 52.1 percent, while the smallest decline was observed in Rajshahi division (at 19.8 percent).

Table 4.4 presents trends in age-specific fertility rates for the five-year intervals preceding the survey. The figures for certain age groups in various intervals may be influenced by missing data due to truncation: some women would have been too old to be interviewed at the time of the survey for a particular period. For example, no data were available for women ages 45-49 in the period 5-9 years prior to the survey because they would have been 50-54 years old at the survey date and therefore ineligible for interview. There was a generally declining trend in fertility for all age groups in project and non-project areas. Because of this truncation problem, however, these figures may not reflect the true value of the fertility decline for those periods.

Table 4.3. Trends in total fertility rates

Total fertility rates for five-year periods preceding the survey by domain, project and non-project areas, BSSFP 2008.

Characteristic	TFR, period before the survey			Changes in TFR			
	0-4 years (1-60 months)	5-9 years (61-120 months)	10-14 years (121-180 months)	1-60 months vs. 61-120 months		1-60 months vs. 121-180 months	
	Absolute	Absolute	Absolute	%	Absolute	%	Absolute
Domain							
Dhaka division	2.94	4.26	4.31	44.9	1.32	46.6	1.37
Chittagong/Sylhet division	3.31	4.65	4.94	40.5	1.34	49.2	1.63
Khulna/Barisal division	2.42	3.68	4.08	52.1	1.26	68.6	1.66
Rajshahi division	2.83	3.39	3.56	19.8	0.56	25.8	0.73
Project and Non-project areas							
Project area	2.95	4.10	4.27	39.0	1.15	44.7	1.32
Non-project area	2.86	3.91	4.19	36.7	1.05	46.5	1.33

Table 4.4. Trends in age-specific fertility rates

Age-specific fertility rates for five-year periods preceding the survey by region of residence, project and non-project areas, BSSFP 2008.

	Number of years preceding the survey			
	0-4	5-9	10-14	15-19
Dhaka division				
15-19	123	203	194	210
20-24	176	227	257	260
25-29	130	184	196	210
30-34	91	121	147	176
35-39	43	85	67	0
40-44	17	33	0	0
45-49	10	0	0	0
Chittagong/Sylhet division				
15-19	107	170	182	192
20-24	197	260	264	285
25-29	165	216	247	265
30-34	114	154	171	222
35-39	49	86	125	0
40-44	26	46	0	0
45-49	5	0	0	0
Khulna/Barisal division				
15-19	123	182	195	191
20-24	144	201	208	235
25-29	112	139	190	199
30-34	63	116	124	159
35-39	28	71	97	0
40-44	14	27	0	0
Rajshahi division				
15-19	161	193	201	204
20-24	136	179	211	216
25-29	126	152	154	181
30-34	87	87	80	146
35-39	32	50	66	0
40-44	12	18	0	0
45-49	11	0	0	0

	Number of years preceding the survey			
	0-4	5-9	10-14	15-19
BSSFP project area				
15-19	125	188	192	201
20-24	170	223	242	253
25-29	137	180	200	218
30-34	93	121	136	182
35-39	40	75	85	0
40-44	18	32	0	0
45-49	8	0	0	0
Non project area				
15-19	121	170	188	200
20-24	168	221	218	256
25-29	130	172	196	216
30-34	80	123	146	171
35-39	45	65	89	0
40-44	19	32	0	0
45-49	9	0	0	0

4.3. Birth Intervals

Birth intervals, defined as the length of time between two successive live births, indicate the pace of childbearing. Research has shown that birth spacing patterns have far-reaching implications for fertility and child mortality levels. Proper spacing is beneficial to the health of both mother and child. Birth intervals of less than 24 months are widely regarded as too short. Table 4.5 shows the distribution of non-first births occurring in the five years preceding the survey by number of months since the preceding birth. About 11.2 percent of births occurred within 24 months of the previous one, while roughly 5.3 percent occurred within the even shorter interval of seven to 17 months. In non-project areas, about 9.2 percent of births occurred within 24 months of the previous one, which is two percentage points lower than the project area estimate.

The median birth interval in project areas was about 44.7 months, which was approximately one month lower than in non-project areas. Younger women reported shorter intervals, presumably reflecting their greater fecundity and desire to build families. The median birth interval also varied with socioeconomic status, from about 42.2 months for those in the lowest asset quintile to 50.0 months for those in the highest one.

Table 4.5. Birth intervals

Percent distribution of non-first births in the five years preceding the survey by number of months since preceding birth according to background characteristics, project and non project areas, BSSFP 2008.

Characteristics	Months since preceding birth					Total	Number of births	Median number of months
	7-17	18-23	24-35	36-47	48+			
Age								
5-19	32.0	15.8	42.4	9.9		100.0	63	24.3
20-29	4.9	7.6	25.6	22.1	39.8	100.0	1428	42.0
30-39	4.4	3.1	20.6	17.4	54.5	100.0	861	50.7
40+	2.4	1.3	15.6	16.2	64.5	100.0	148	61.3
Birth order								
2-3	4.5	6.0	20.9	18.4	50.2	100.0	1571	47.6
4-6	6.5	4.9	26.8	22.0	39.9	100.0	765	41.4
7+	7.1	9.8	36.4	23.2	23.6	100.0	164	33.9
Sex of prior birth								
Male	5.1	5.6	22.7	18.1	48.5	100.0	1236	46.5
Female	5.5	6.1	24.7	21.5	42.2	100.0	1264	43.1
Survival of prior birth								
Still Living	3.7	4.7	23.6	20.6	47.4	100.0	2306	46.1
Deceased	23.7	20.2	25.6	10.7	19.9	100.0	194	25.5
Domain								
Dhaka division	3.9	5.5	22.5	21.8	46.2	100.0	895	45.6
Chittagong/Sylhet division	5.8	6.3	30.3	22.7	34.9	100.0	847	38.3
Khulna/Barisal division	3.2	5.1	18.8	14.0	58.9	100.0	222	57.2
Rajshahi division	7.8	6.0	17.3	14.3	54.6	100.0	537	51.4
Highest educational level								
No education	5.1	6.2	24.0	20.0	44.8	100.0	1083	44.3
Primary incomplete	4.0	4.9	26.0	21.9	43.2	100.0	476	43.9
Primary complete	6.6	5.2	22.5	18.0	47.6	100.0	336	46.1
Secondary incomplete	5.8	6.3	23.2	19.4	45.2	100.0	485	45.0
Secondary complete or higher	6.2	6.8	18.1	16.5	52.4	100.0	120	51.3
Household asset quintile								
Lowest	5.0	6.2	26.5	21.6	40.7	100.0	589	42.2
Second	5.8	6.1	28.4	17.9	41.8	100.0	582	40.0
Middle	4.5	6.0	23.7	21.2	44.7	100.0	477	45.1
Fourth	5.5	5.8	21.7	17.2	49.8	100.0	454	47.3
Highest	5.6	5.0	15.2	21.3	52.9	100.0	398	50.0
Project Non-project areas								
BSSFP project area	5.3	5.9	23.7	19.8	45.3	100.0	2500	44.7
Non-project area	3.8	5.4	23.4	19.7	47.6	100.0	2484	46.1

CHAPTER 5. CONTRACEPTION

This chapter discusses fertility regulation. Currently married women interviewed in the survey were asked whether they were currently using a contraceptive method. The data were then used to indicate overall and method-specific prevalence of contraceptive use. This chapter also examines differentials in the current use of contraceptive methods, the sources of supply of modern contraceptive methods, and provider market share in supplying contraceptive methods in project and non-project areas.

5.1. Current Use of Contraception

Current use of contraception (measured using the contraceptive prevalence rate, or CPR) is defined as the proportion of currently married women using a contraceptive method at the time of interview. Table 5.1 presents data on the proportion of currently married women in project and non-project areas who reported that they were using a contraceptive method, according to respondent age. Overall, 56.5 percent of currently married women in project areas were currently using a contraceptive method, with 49.7 percent using a modern method and 6.9 percent relying on traditional methods. Among modern methods, the oral contraceptive pill appeared to be the most popular at 26.4 percent, followed by injection (14.5 percent), female sterilization (4.5 percent), male condoms (2.8 percent), and IUDs (0.5 percent). Among traditional methods, periodic abstinence was the most popular method reported (5.5 percent). Overall, the contraceptive prevalence rate was exactly the same in non-project areas. The pill, injection, female sterilization, and male condom use were also the principal modern methods in non-project areas. The usage rate of any modern method was almost identical between project and non-project areas. However, compared with project areas, the use of the pill was slightly higher (27.9 percent versus 26.4 percent) in non-project areas, and the use of injection was more than three percentage points lower in non-project areas. The use of traditional methods was slightly higher in non-project areas.

Differentials in Current Use of Contraception

Table 5.1 also presents differentials in contraceptive use by various background characteristics. Considering the observed age pattern, contraceptive use was most prevalent (65.3 percent) in the 30-34 age group, and least prevalent among those in their teens (34.7 to 43.8 percent). The oral pill was the most popular method among women in all age groups, except for those in the oldest cohort (45-49), who were more likely to be sterilized or utilize traditional methods. The contraceptive prevalence rate was highest in Khulna/Barisal and Rajshahi divisions at 64 percent, and lowest in the Chittagong and Sylhet divisions at 46.5 percent. There was no apparent pattern in contraceptive use according to educational levels or household asset quintiles. However, currently married women with some living children tended to be more likely to use any type of contraception.

The pattern of method-specific use of contraception was similar both in project and non-project areas. The pill was used by a majority of users irrespective of the level of education, number of living children, or household asset quintile. Use of injection was negatively associated with the level of education and asset quintiles. As the number of living children increased female sterilization became more common. There was no apparent pattern to the use of traditional methods with respect to education and asset quintile.

Table 5.1. Current use of contraception by background characteristics: project and non-project areas

Percent distribution of currently married women by contraceptive method currently used according to selected background characteristics, project and non-project areas, BSSFP 2008.

	Using any method	Using any modern method	Modern Methods							Using any traditional method	Traditional Methods			Not using any method	Total	Number of women
			Pill	IUD	Injec-tions	Male condom	Female steriliza-tion	Male ster-ilization	Im-plants		Periodic absti-nence	With-drawal	Using any folk method			
Age																
10-14	34.7	24.0	24.0	0.0	0.0	0.0	0.0	0.0	0.0	10.7	5.2	5.5	0.0	65.3	100.0	29
15-19	43.8	40.2	26.9	0.5	7.6	4.9	0.0	0.0	0.2	3.6	3.3	0.4	0.0	56.2	100.0	616
20-24	52.3	48.2	29.6	0.2	14.6	2.2	0.8	0.0	0.8	4.1	3.1	1.0	0.0	47.7	100.0	1,142
25-29	63.2	57.0	31.9	0.5	17.8	3.8	1.9	0.4	0.7	6.2	4.2	1.8	0.1	36.8	100.0	1,142
30-34	65.3	58.2	29.0	0.8	20.7	2.1	4.9	0.3	0.5	7.1	5.9	1.2	0.1	34.7	100.0	990
35-39	64.2	54.6	26.1	0.7	16.4	2.9	6.9	0.5	1.1	9.6	8.0	1.6	0.0	35.8	100.0	858
40-44	55.9	45.2	20.2	0.8	10.8	2.2	10.1	0.3	0.8	10.7	9.0	1.4	0.3	44.1	100.0	709
45-49	39.1	31.3	11.4	0.4	5.7	1.3	11.5	0.5	0.5	7.8	6.6	0.7	0.4	60.9	100.0	519
Domains																
Dhaka division	57.3	48.3	26.3	0.6	13.1	2.6	4.7	0.3	0.7	9.0	7.2	1.8	0.1	42.7	100.0	2,228
Chittagong/Sylhet division	46.5	41.2	20.1	0.4	12.9	2.8	3.8	0.3	0.9	5.3	4.5	0.7	0.1	53.5	100.0	1,716
Khulna/Barisal division	64.2	55.4	29.4	0.5	16.3	2.6	5.8	0.2	0.6	8.7	7.4	1.3	0.0	35.8	100.0	656
Rajshahi division	64.0	59.6	33.0	0.6	17.8	3.2	4.4	0.2	0.5	4.3	3.2	1.0	0.1	36.0	100.0	1,405
Highest educational level																
No education	55.6	48.0	21.1	0.6	15.8	1.6	7.7	0.3	1.0	7.6	5.9	1.4	0.3	44.4	100.0	2,586
Some primary	59.1	53.1	28.6	0.2	17.1	1.9	4.0	0.5	0.8	6.0	5.6	0.4	0.0	40.9	100.0	994
Primary complete	62.0	55.0	32.5	0.7	16.5	2.2	2.3	0.3	0.5	6.9	6.4	0.5	0.0	38.0	100.0	758
Secondary incomplete	53.5	47.7	30.5	0.6	10.6	4.4	0.9	0.2	0.3	5.9	4.3	1.6	0.0	46.5	100.0	1,320
Secondary complete or higher	55.5	48.2	30.7	0.4	7.3	9.3	0.6	0.0	0.0	7.3	4.5	2.8	0.0	44.5	100.0	347
Household asset quintile																
Lowest	56.7	49.6	22.9	0.2	18.3	1.8	5.1	0.3	1.1	7.0	5.2	1.5	0.4	43.3	100.0	1,032
Second	60.5	54.3	27.5	0.4	19.2	1.1	4.5	0.5	1.1	6.2	4.8	1.2	0.2	39.5	100.0	1,146
Middle	58.9	51.8	28.1	0.7	14.3	2.1	5.9	0.3	0.4	7.1	6.3	0.7	0.0	41.1	100.0	1,244
Fourth	55.5	48.3	26.5	0.7	13.7	3.1	3.4	0.1	0.7	7.2	5.8	1.5	0.0	44.5	100.0	1,276
Highest	51.7	45.0	26.5	0.6	8.2	5.4	3.8	0.2	0.3	6.7	5.3	1.4	0.0	48.3	100.0	1,307
Number of living children																
0	22.3	18.1	13.4	0.0	0.4	4.3	0.0	0.0	0.0	4.3	3.7	0.5	0.0	77.7	100.0	575
1-2	59.1	53.0	31.5	0.6	14.1	3.2	2.7	0.2	0.7	6.1	4.4	1.7	0.0	40.9	100.0	2,593
3-4	64.5	56.5	26.1	0.7	18.8	2.2	7.8	0.3	0.6	7.9	6.6	1.2	0.1	35.5	100.0	1,994
5+	53.3	45.0	20.5	0.3	15.1	1.8	5.3	0.6	1.4	8.3	7.3	0.4	0.5	46.7	100.0	842
Project and non-project areas																
Project areas	56.5	49.7	26.4	0.5	14.5	2.8	4.5	0.3	0.7	6.9	5.5	1.2	0.1	43.5	100.0	6,005
Non-project areas	56.5	49.4	27.9	1.0	11.1	2.9	5.3	0.4	0.7	7.1	6.0	1.0	0.1	43.5	100.0	6,437

Table 5.2. Current use of contraception by married adolescents

Percent distribution of currently married adolescent by contraceptive method currently used by the age of the respondent, according to residence, project and non-project areas, BSSFP 2008.

Residence and age	Using any method	Using any modern method	Modern Methods					Using any traditional method	Traditional Methods		Not using any method	Total	Number of women
			Pill	IUD	Injections	Male condom	Implants		Periodic abstinence	With-drawal			
Dhaka division													
Age													
10-14	20.0	10.0	10.0	0.0	0.0	0.0	0.0	10.0	10.0	0.0	80.0	100.0	15
15-19	45.3	42.2	31.1	0.0	5.6	5.0	0.6	3.1	2.5	0.6	54.7	100.0	242
Chittagong/Sylhet division													
Age													
10-14	16.7	16.7	16.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	83.3	100.0	4
15-19	24.2	20.8	10.8	0.0	6.2	3.8	0.0	3.5	3.5	0.0	75.8	100.0	164
Khulna/Barisal division													
Age													
10-14	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	100.0	2
15-19	53.5	47.5	32.7	2.0	7.9	5.0	0.0	5.9	5.0	1.0	46.5	100.0	71
Rajshahi division													
Age													
10-14	80.0	60.0	60.0	0.0	0.0	0.0	0.0	20.0	0.0	20.0	20.0	100.0	8
15-19	59.3	55.8	36.0	1.2	12.8	5.8	0.0	3.5	3.5	0.0	40.7	100.0	138
Project areas													
Age													
10-14	34.7	24.0	24.0	0.0	0.0	0.0	0.0	10.7	5.2	5.5	65.3	100.0	29
15-19	43.8	40.2	26.9	0.5	7.6	4.9	0.2	3.6	3.3	0.4	56.2	100.0	616
Non-project areas													
Age													
10-14	19.8	19.8	17.4	0.0	0.0	2.4	0.0	0.0	0.0	0.0	80.2	100.0	26
15-19	45.7	40.0	27.6	0.0	7.4	4.7	0.2	5.7	4.4	1.3	54.3	100.0	725

Table 5.3 presents current use of modern contraception by asset quintile, according to project and non-project areas. The use of modern contraception was highest in Rajshahi division (59.6 percent), and lowest in Chittagong and Sylhet divisions. No particular pattern was observed in the use of modern contraception by asset quintile.

5.2. Use of Contraception by Married Adolescents

Information pertaining to the current use of contraception among currently married adolescents aged 10 to 19 is presented in Table 5.2. The contraceptive prevalence rate among married adolescents aged 15-19 was somewhat lower in project areas, by a margin of 1.9 percentage points. It was also much higher among those aged 10-14 (14.9 percentage points higher) in project areas. The rate of use of any modern method was almost identical (at 40 percent) between project and non-project adolescent women aged 15-19, but usage rates were 4.2 percentage points higher among those aged 10-14 years. Surprisingly, the use of any traditional method was much higher among married adolescents in project areas.

The rate of use of any method was higher among those aged 15-19 across all divisions. The use of contraception among adolescents was highest in Rajshahi division, followed by Khulna/Barisal, Dhaka, and Chittagong/Sylhet divisions. Oral pills were the most popular method across all divisions and area types.

Table 5.3. Current use of modern contraception, by asset quintile

Percentage of currently married women who use modern contraceptive method, by asset quintile, project and non-project areas, 2008.

Household asset quintile	Project Areas					Non-project Areas
	Dhaka division	Chittagong/ Sylhet division	Khulna/ Barisal division	Rajshahi division	Total	
Lowest	48.2	44.2	52.2	56.5	49.6	47.5
Second	50.4	48.1	57.7	62.4	54.3	51.7
Middle	49.1	42.7	55.4	61.9	51.8	54.1
Fourth	46.9	38.7	60.2	57.1	48.3	52.2
Highest	47.0	37.3	51.0	58.5	45.0	43.2
Total	48.3	41.2	55.4	59.6	49.7	49.4
Number of Women	2,228	1,716	656	1,405	6,005	6,437

5.3. Sources of Supply of Modern Contraceptive Methods

The distribution of current users of modern contraceptive methods by the most recent source of supply is presented in Tables 5.4A and 5.4B, respectively. Sources of contraceptive supply were classified into five major categories: public sector sources, Smiling Sun NGO sources, other NGO sources, private medical sources, and other private sources. In project areas, Smiling Sun sources were the principal sources of contraceptive supply with an overall market share of 35.4 percent, followed by private medical sources (28.5 percent), public sector sources (24.5 percent), and other private sources (10 percent). Smiling Sun providers were by far the most important source of injection, accounting for an estimated 67 percent of market share, with public sector sources a distant second (25.4 percent). Smiling Sun providers were the second most important source for IUD and implant supply after public sector sources. The public sector was the common source of IUDs (72.3 percent), female sterilization (83.8 percent), male sterilization (79 percent) and implants (61.4 percent). Pharmacists/pharmacies and private shops supplied about 57 percent of oral pills, while Smiling Sun providers were distantly in the second position, with a market share of 27.3 percent. The market share attributed to public sector sources was only 13.2 percent.

As expected, public sector providers were the principal sources of supply of modern contraceptive methods in non-project areas, with a market share of 56.1 percent. The private medical sector was the second most important source of supply at 28.6 percent, followed by other private sources (9.5 percent). Only 4.7 percent of respondents in non-project areas received contraceptives from Smiling Sun providers.

Looking at the sources of specific methods in non-project areas, the main source of oral contraceptives was the public sector (44.4 percent), followed by the private medical sector (37.5 percent), and other private sources (13.8 percent). For more than one-third of pill users (36.6 percent), pharmacists/pharmacies were the last reported source of supply. About two-thirds of condom users also obtained this method from pharmacies in non-project areas.

Table 5.4A. Source of supply of modern contraceptive methods: project areas

Percent distribution of current users of modern contraceptive methods by most recent source of supply, according to specific method, BSSFP 2008.

Source of supply	Contraceptive methods							
	Pill	IUD	Injections	Male condom	Female sterilization	Male sterilization	Implants	Total
Public sector	13.2	72.3	25.4	2.1	83.8	79.0	61.4	24.5
Hospital/Medical college	0.1	0.0	0.5	0.0	19.1	12.9	6.7	2.2
Family welfare center	3.8	40.0	10.6	0.4	12.2	0.0	8.4	6.8
Upazila health complex	1.8	32.3	4.9	0.0	48.6	61.9	46.4	8.3
MCWC	0.1	0.0	0.1	0.0	3.8	4.3	0.0	0.5
Rural Dispensary/community clinic	0.0	0.0	0.6	0.0	0.0	0.0	0.0	0.2
Satellite clinic/EPI outreach site	1.6	0.0	3.4	0.0	0.0	0.0	0.0	1.8
Health assistant (HA)	.3	0.0	0.5	0.4	0.0	0.0	0.0	0.3
FWA	5.4	0.0	4.8	1.3	0.0	0.0	0.0	4.3
Smiling Sun	27.3	25.8	67.0	9.6	3.0	0.0	23.5	35.4
Static clinic	2.2	18.7	8.1	1.1	3.0	0.0	22.0	4.4
Satellite clinic	6.2	7.1	43.8	3.3	0.0	0.0	1.5	16.3
Community service provider (CSP)/Depotholder	18.8	0.0	15.2	5.2	0.0	0.0	0.0	14.7
Other NGO	1.7	0.0	1.6	1.4	1.6	7.6	9.7	1.8
MARIE STOPES clinic/ hospital	0.0	0.0	0.0	0.0	1.1	3.8	3.6	0.2
Hospital/clinic	0.0	0.0	0.0	0.0	0.4	3.8	6.1	0.1
Satellite clinic	0.0	0.0	0.2	0.0	0.0	0.0	0.0	0.1
Fieldworker	0.4	0.0	0.5	0.4	0.0	0.0	0.0	0.4
Depotholder	1.3	0.0	0.9	1.0	0.0	0.0	0.0	1.0
Private medical sector	42.2	1.9	5.9	57.4	11.4	9.1	5.4	28.5
Private hospital/clinic	0.0	1.9	0.0	0.0	11.4	9.1	3.9	1.2
Qualified doctor	0.0	0.0	0.6	0.0	0.0	0.0	0.0	0.2
Village doctor	1.2	0.0	1.0	.0	0.0	0.0	0.0	0.9
Pharmacist/pharmacy	41.0	0.0	4.3	57.0	0.0	0.0	1.5	26.1
Traditional healer/kabiraj	0.0	0.0	0.0	0.4	0.0	0.0	0.0	0.0
Other private	15.6	0.0	0.1	29.5	0.2	4.3	0.0	10.0
Shop	15.6	0.0	0.1	29.1	0.0	0.0	0.0	9.9
Other	0.0	0.0	0.0	0.4	0.2	4.3	0.0	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	1,587	33	870	166	282	17	41	2,995

Table 5.4B. Source of supply of modern contraceptive methods: non-project areas

Percent distribution of current users of modern contraceptive methods by most recent source of supply, according to specific method, BSSFP 2008.

Source of supply	Contraceptive methods							
	Pill	IUD	Injections	Male condom	Female sterilization	Male sterilization	Implants	Total
Public sector	44.4	97.7	77.5	10.2	82.7	89.1	87.6	56.1
Hospital/Medical college	0.0	2.3	.3	0.0	20.7	24.2	6.9	2.8
Family welfare center	7.9	37.9	22.6	1.5	10.1	0.0	20.5	11.8
Upazila health complex	2.7	52.8	8.1	0.0	49.9	64.9	51.6	11.2
MCWC	0.0	0.0	.1	0.0	2.1	0.0	8.5	0.4
Rural Dispensary/community clinic	0.7	2.3	4.0	0.0	0.0	0.0	0.0	1.3
Satellite clinic/EPI outreach site	4.9	0.0	12.2	1.9	0.0	0.0	0.0	5.6
Health assistant (HA)	0.9	0.0	1.3	0.0	0.0	0.0	0.0	.8
FWA	27.3	2.3	28.8	6.8	0.0	0.0	0.0	22.3
Smiling Sun	2.8	0.0	12.7	0.8	0.4	5.8	7.4	4.7
Static clinic	0.5	0.0	5.7	0.0	0.2	5.8	7.4	1.7
Satellite clinic	0.3	0.0	3.8	0.0	0.0	0.0	0.0	1.0
Community service provider (CSP)/Depotholder	2.1	0.0	3.2	0.8	0.2	0.0	0.0	2.0
Other NGO	1.2	0.0	1.4	0.0	0.9	0.0	3.5	1.1
MARIE STOPES clinic/ hospital	0.0	0.0	.2	0.0	0.7	0.0	3.5	0.2
Hospital/clinic	0.0	0.0	.2	0.0	0.2	0.0	0.0	0.1
Satellite clinic	0.1	0.0	.1	0.0	0.0	0.0	0.0	0.1
Fieldworker	0.8	0.0	.5	0.0	0.0	0.0	0.0	0.6
Depotholder	0.3	0.0	.3	0.0	0.0	0.0	0.0	0.2
Private medical sector	37.5	2.3	8.3	65.7	15.2	0.0	1.6	28.6
Private hospital/clinic	0.1	0.0	.5	0.3	14.6	0.0	1.6	1.8
Qualified doctor	0.0	2.3	.6	0.0	0.6	0.0	0.0	0.2
Village doctor	0.8	0.0	1.7	0.0	0.0	0.0	0.0	0.8
Pharmacist/pharmacy	36.6	0.0	5.5	65.3	0.0	0.0	0.0	25.7
Traditional healer/kabiraj	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Other private	14.1	0.0	0.1	23.4	0.8	5.1	0.0	9.5
Shop	13.7	0.0	0.1	22.6	0.0	0.0	0.0	9.1
Other	0.3	0.0	0.0	0.8	0.8	5.1	0.0	0.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	1,799	63	713	188	354	29	48	3,194

Tables 5.5A and 5.5B present the sources of supply of modern contraceptive methods by asset quintile. Table 5.5A shows that in project areas, where Smiling Sun clinics were the main source of method supply, Smiling Sun's market share was highest in the lower asset quintiles. A similar pattern emerged for public sector sources. On the other hand, the market share of the private medical sector appeared to increase with the household asset quintile.

In non-project areas the public sector (56.1 percent) and private medical sources (28.6 percent) were the two major sources of method supply. As in project areas, the market share for the public sector was larger in the lower asset quintiles while that for the private medical sector was greater in the higher asset quintiles.

5.4. Knowledge of Sources among Non-Users

Married women who were not currently using any contraceptive method were asked if they were aware of various sources of contraceptive methods. Table 5.6 shows that Smiling Sun providers were most commonly recognized by respondents in project areas, while public sector sources were the most well-known in non-project areas. Smiling Sun sources were better known in Rajshahi than in any other division.

Table 5.5A. Source of supply of modern contraceptive methods by asset quintile: project areas

Percent distribution of current users of modern contraceptive methods by most recent source of supply, according to asset quintile, BSSFP 2008.

Source of supply	Household asset quintile					Total
	Lowest	Second	Middle	Fourth	Highest	
Public sector	28.7	26.8	24.7	23.4	19.2	24.5
Hospital/Medical college	1.9	2.0	2.3	1.8	2.9	2.2
Family welfare center	7.3	7.6	8.0	7.0	4.1	6.8
Upazila health complex	10.1	9.7	7.6	8.9	5.4	8.3
MCWC	0.6	0.2	1.0	0.2	0.3	0.5
Rural Dispensary/community clinic	0.3	0.5	0.1	0.1	0.0	0.2
Satellite clinic/EPI outreach site	1.3	2.4	2.6	1.6	1.2	1.8
HA	0.3	0.0	0.2	0.9	0.4	0.3
FWA	7.0	4.3	3.0	3.0	5.0	4.3
Smiling Sun	43.3	43.5	36.4	31.6	22.6	35.4
Static clinic	4.3	6.4	3.8	3.6	3.8	4.4
Satellite clinic	20.2	18.3	17.2	16.4	9.6	16.3
Community service provider (CSP)/ Depotholder	18.8	18.7	15.4	11.6	9.2	14.7
Other NGO	1.3	1.5	3.0	1.3	1.6	1.8
MARIE STOPES clinic/hospital	0.1	0.2	0.3	0.1	0.1	0.2
Hospital/clinic	0.1	0.1	0.1	0.3	0.1	0.1
Satellite clinic	0.1	0.0	0.2	0.0	0.0	0.1
Fieldworker	0.3	0.2	0.3	0.6	0.5	0.4
Depotholder	0.7	1.0	2.0	0.3	0.9	1.0
Private medical sector	20.2	19.2	25.0	32.3	45.2	28.5
Private hospital/clinic	0.8	0.8	1.7	1.1	1.5	1.2
Qualified doctor	0.0	0.0	0.2	0.0	0.7	0.2
Village doctor	0.7	1.2	0.8	1.0	0.8	0.9
Pharmacist/pharmacy	18.7	17.2	22.3	30.2	42.1	26.1
Traditional healer/Kabiraj	0.0	0.0	0.0	0.0	0.1	0.0
Other private	6.5	9.0	10.9	11.4	11.4	10.0
Shop	6.3	9.0	10.8	11.4	11.4	9.9
Other	0.3	0.0	0.1	0.0	0.0	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	505	608	658	631	594	2,995

Table 5.5B. Source of supply of modern contraceptive methods by asset quintile: non-project areas

Percent distribution of current users of modern contraceptive methods by most recent source of supply, according to asset quintile, BSSFP 2008.

Source of supply	Household asset quintile					Total
	Lowest	Second	Middle	Fourth	Highest	
Public sector	68.2	62.9	62.5	51.0	41.1	56.1
Hospital/Medical college	3.3	3.6	2.8	1.7	2.7	2.8
Family welfare center	12.0	13.2	11.9	12.6	9.4	11.8
Upazila health complex	15.6	12.5	11.8	10.2	7.7	11.2
MCWC	0.3	0.8	0.1	0.4	0.4	0.4
Rural Dispensary/community clinic	1.8	1.1	1.4	2.1	0.3	1.3
Satellite clinic/EPI outreach site	8.3	5.7	6.4	4.9	3.4	5.6
HA	0.1	1.0	1.4	0.2	1.1	0.8
FWA	26.8	25.0	26.6	19.0	16.0	22.3
Smiling Sun	6.7	5.3	5.3	3.6	3.2	4.7
Static clinic	2.5	1.8	2.1	1.6	0.7	1.7
Satellite clinic	1.3	1.4	1.1	0.7	0.6	1.0
Community service provider (CSP)/ Depotholder	3.0	2.0	2.1	1.3	1.9	2.0
Other NGO	1.2	2.1	0.2	1.6	0.6	1.1
MARIE STOPES clinic/hospital	0.3	0.4	0.1	0.1	0.1	0.2
Hospital/clinic	0.0	0.0	0.0	0.2	0.1	0.1
Satellite clinic	0.1	0.2	0.0	0.0	0.0	0.1
Fieldworker	0.4	1.1	0.1	0.9	0.4	0.6
Depotholder	0.3	0.5	0.0	0.3	0.0	0.2
Private medical sector	17.4	19.0	23.0	34.1	44.5	28.6
Private hospital/clinic	0.6	1.4	1.5	2.3	2.9	1.8
Qualified doctor	0.0	0.4	0.3	0.2	0.3	0.2
Village doctor	0.9	0.4	0.3	2.0	0.4	0.8
Pharmacist/pharmacy	15.9	16.8	20.9	29.5	40.8	25.7
Traditional healer/Kabiraj	0.0	0.0	0.1	0.1	0.0	0.0
Other private	6.4	10.8	9.0	9.7	10.6	9.5
Shop	5.8	10.0	9.0	9.1	10.6	9.1
Other	0.6	0.8	0.0	0.6	0.0	0.4
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	509	580	703	684	719	3,194

Table 5.6. Knowledge of source for non-users

Percent distribution of women who do not currently use a contraceptive method by knowledge of source of supply, project and non-project areas, BSSFP 2008.

Source of supply*	Project areas					Non-project areas
	Dhaka division	Chittagong/ Sylhet division	Khulna/ Barisal division	Rajshahi division	Total	
Public sector	35.6	30.6	31.9	23.7	31.1	65.9
Hospital/Medical college	0.5	1.7	1.4	0.9	1.1	0.9
Family welfare center	16.6	10.5	8.1	9.8	12.3	22.4
Upazila health complex	14.1	14.2	14.2	7.7	12.9	18.7
MCWC	0.2	0.1	0.6	0.0	0.1	0.3
Rural Dispensary/community clinic	0.2	0.7	0.6	0.6	0.5	1.3
Satellite clinic/EPI outreach site	3.8	2.6	2.3	3.3	3.1	8.1
HA	0.3	0.3	0.6	0.6	0.4	0.8
FWA	3.5	3.2	6.4	3.0	3.5	21.1
Smiling Sun	39.8	41.4	43.8	51.8	43.1	7.3
Static clinic	4.0	7.9	12.8	6.8	6.7	3.2
Satellite clinic	11.9	20.3	18.8	22.8	17.6	1.0
Community service provider (CSP)/ Depotholder	24.5	14.8	15.1	24.0	20.1	3.2
Other NGO	4.4	1.7	1.7	3.0	2.9	1.8
MARIE STOPES clinic/hospital	0.0	0.3	0.0	0.0	0.1	0.0
UPHCP	0.0	0.0	0.3	0.0	0.0	0.1
Hospital/clinic	0.0	0.1	0.0	0.0	0.0	0.1
Satellite clinic	0.3	0.1	0.3	0.3	0.2	0.1
Fieldworker	1.4	0.5	0.0	0.6	0.8	1.2
Depotholder	2.7	0.9	1.2	2.1	1.8	0.3
Private medical sector	33.0	26.9	22.9	10.7	25.5	27.7
Private hospital/clinic	1.7	1.0	0.6	0.6	1.1	1.1
Qualified doctor	0.6	0.1	0.0	0.0	0.3	0.2
Village doctor	0.2	1.3	2.9	0.9	0.9	1.3
Pharmacist/pharmacy	32.5	25.2	20.3	9.5	24.3	26.2
Traditional healer/Kabiraj	0.0	0.4	0.3	0.0	0.2	0.1
Other private	11.7	12.9	6.1	4.1	10.1	10.3
Shop	11.7	12.9	6.1	4.1	10.1	10.3
Other	0.0	0.0	0.0	0.0	0.0	0.0
DK	9.6	11.6	15.4	17.8	12.4	10.6
Number of Women	990	967	244	541	2,742	2,935

* Multiple responses possible.

CHAPTER 6. INFANT AND CHILD MORTALITY

Infant and child mortality rates are important indicators for monitoring the progress in the reduction of childhood mortality. This chapter examines the mortality of children under five years of age in project and non-project areas. The indicators of infant and childhood mortality include mortality rates during the neonatal period (0 to 28 days of life), post-neonatal period (29 days to 11 months), infancy (0 to 11 months or before the first birthday) and childhood (from 1 to 4 years, i.e., after the first birthday but before the fifth birthday). All the rates are expressed per 1,000 live births, with the exception of child mortality, which is expressed per 1,000 children surviving to their first birthday (12 months of age). Mortality rates are presented by division (Chittagong/Sylhet, Khulna/Barisal, Dhaka, and Rajshahi) and for project and non-project areas. Trends in mortality rates during 0 to 4 years, 5 to 9 years, 10 to 14 years, and 15 to 19 years are considered. Mortality rates by respondent education levels and household asset quintiles are also presented.

The data for mortality rates were compiled from birth histories provided by ever-married women aged 10 to 49. Women were asked to provide a complete history of their births including the sex, month and year of birth, survival status, and age at the time of the survey (or age at death) for each live birth. Age at death was recorded in days if the child died within the first month of life, in months if the child died thereafter but before 24 months of age, and in years for children dying at later ages. Mortality rates were calculated in a straightforward fashion.

The reliability of mortality estimates calculated from retrospective birth histories depends on the completeness with which deaths of children are reported and the extent to which birth dates and ages at death are accurately reported and recorded. Errors that might lead to "age heaping" in mortality reports were given special emphasis during interviewer training. Interviewers were instructed to probe for exact ages in cases where dates of death corresponded to common heaping dates. For example, if a child was reported to have died at age one, interviewers were instructed to ask if the child died at exactly one year or whether the child died before one year. Such heaping may bias infant mortality downwards, effectively transferring infant deaths to child deaths.

6.1. Early Childhood Mortality Rates

Table 6.1 presents various measures of infant and child mortality by project and non-project areas for the five years before interview. The mortality rate for the most recent five-year period corresponds roughly to the period 2003-2007. Despite the overall decline in infant and child mortality in recent years, the under-five mortality rate for the most recent five-year period prior to the 2008 survey was 60 deaths per 1,000 live births, and infant mortality was 45 deaths per 1,000 live births in project areas. This means that one in seventeen children born in project areas died before reaching their fifth birthday, while one in twenty-two children died before reaching their first birthday. Sixty percent of the under-five deaths occurred during the neonatal period, about fifteen percent during the post-neonatal period, and approximately one quarter occurred between the ages of one and four years. All mortality indicators, with the exception of post-neonatal mortality, were found to be relatively better in non-project areas. For instance, neonatal mortality was higher in project areas by approximately 13 deaths per 1,000 live births. Early childhood mortality rates declined over the last two decades in both project and non-project areas. The decline was more pronounced in non-project areas, particularly in the most recent years.

Table 6.1. Early childhood mortality rates

Neonatal, post neonatal, infant, child, and under-five mortality rates for five-year periods preceding the survey, project and non-project areas, BSSFP 2008.

	Neonatal mortality (NN)	Postneonatal[1] mortality (PNN)	Infant mortality (${}_1q_0$)	Child mortality (${}_4q_1$)	Under-five mortality (${}_5q_0$)
	Project areas				
Years preceding the survey					
0-4	35.9	9.3	45.2	15.3	59.8
5-9	40.5	16.7	57.3	21.7	77.7
10-14	50.6	29.6	80.3	27.4	105.5
15-19	53.8	30.6	84.3	33.0	114.5
	Non-project areas				
Years preceding the survey					
0-4	22.5	16.0	38.5	14.4	52.4
5-9	31.5	20.5	52.0	18.5	69.5
10-14	45.6	20.7	66.2	23.6	88.2
15-19	55.9	28.1	84.0	39.5	120.2

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

6.2. Early Childhood Mortality by Socioeconomic Characteristics

Differentials in childhood mortality for the ten years preceding the survey by selected background characteristics are presented in Table 6.2. Several pronounced differences were apparent across divisions. The infant mortality rate was highest in Rajshahi division, and lowest in Chittagong/ Sylhet division. Similarly, under-5 mortality was highest in Rajshahi and lowest in Khulna/Barisal.

Mortality was negatively associated with maternal education.[2] Infants born to women with no education were approximately 1.7 times more likely to die before their first birthday than those born to mothers with a secondary or higher education. Other mortality indicators demonstrated a similar association between early childhood mortality and maternal education. All mortality indicators showed a pattern of decline with increases in socioeconomic status. For instance, infant mortality decreased from 52 deaths per 1,000 live births for children in the lowest asset quintile to 27 deaths per 1,000 live births for those in the highest one.

[2] Small sample sizes make calculations of early childhood mortality rates imprecise for children of mothers with a college education.

Table 6.2. Early childhood mortality rates by socioeconomic characteristics: project and non-project areas

Neonatal, post neonatal, infant, child, and under-five mortality rates for the 10-year period preceding the survey, by background characteristic in project areas and non-project areas, 2008.

Background characteristics	Neonatal mortality (NN)	Postnatal mortality (PNN)	Infant mortality (${}_1q_0$)	Child mortality (${}_4q_1$)	Under-five mortality (${}_5q_0$)
Domains					
Dhaka division	37.8	11.7	49.5	19.1	67.7
Chittagong/Sylhet division	32.2	14.0	46.3	18.9	64.3
Khulna/Barisal division	33.3	15.9	49.2	11.9	60.5
Rajshahi division	52.2	15.9	68.1	20.4	87.1
Highest educational level					
No education	40.5	17.7	58.2	24.6	81.4
Primary incomplete	44.2	12.1	56.3	12.6	68.2
Primary complete	46.5	10.0	56.4	16.6	72.1
Secondary incomplete	28.0	7.8	35.8	8.4	43.9
Secondary complete or higher	20.9	13.6	34.4	6.2	40.4
Household asset quintile					
Lowest	35.5	16.2	51.7	24.8	75.2
Second	48.6	19.6	68.2	18.2	85.2
Middle	40.4	15.6	56.0	19.2	74.1
Fourth	41.9	7.1	49.0	17.1	65.3
Highest	22.3	5.1	27.4	7.4	34.6
Project Non-project areas					
BSSFP project areas	38.5	13.5	51.9	18.4	69.4
Non-project areas	27.4	18.5	45.8	16.5	61.5

CHAPTER 7. MATERNAL, NEWBORN, AND CHILD HEALTH

This chapter presents findings from the 2008 BSSFP baseline survey regarding the use of various maternal and child health services and the prevalence and treatment of important childhood health concerns. Among other things, it examines the use of antenatal care from medically trained providers, place of delivery, delivery assistance, pregnancy-related complications, and postnatal care for mothers and their children. In addition, the results of the survey provide information pertaining to micronutrient (iron tablet or syrup) intake for mothers, newborn care, initial breastfeeding, childhood vaccination, the prevalence and treatment of childhood illness, and awareness of maternal and child health services. Information provided in this chapter can be used to identify sub-groups of women and children at risk for health complications resulting from the non-use of reproductive and child health services. The results presented below are based on data obtained from mothers with live births in the five years preceding the survey.

7.1. Antenatal Care

Antenatal care is an important component of the BSSFP service package. It entails visits to medical care providers at periodic intervals to detect, monitor, and treat problems that may arise in the course of pregnancy. Antenatal care from a medically trained provider reduces risks for the mother and child during pregnancy and delivery.

7.1.1. Antenatal Care Coverage

Tables 7.1A and 7.1B present the distribution of antenatal care utilization by source of care and background characteristics, respectively, for women in project and non-project areas who had a live birth in the three years preceding the survey. Interviewers were instructed to record all persons or providers that a woman had consulted for antenatal care for the most recent birth. Only the provider with the highest qualifications (among those that a woman may have reported visiting) was included in the final tabulations. About 52.1 percent of women in project areas received any antenatal care, while antenatal care coverage in non-project areas was approximately 50.4 percent. Antenatal care visits to a medically trained provider among women in project areas were considerably higher (46.2 percent) than for women in non-project areas (41.3 percent). Women in project areas were as likely to receive antenatal care from a qualified doctor as women in non-project areas, and were similarly likely to go to a lower-level qualified provider (such as a nurse, midwife, paramedic, or family welfare visitor). Very few women in either domain received antenatal care from non-medically trained providers. Older women in project areas were less likely to receive antenatal care, but more likely to be seen by a trained provider when they did. Younger women were more likely to be seen by a doctor, nurse, midwife, or paramedic. Mothers with more children were less likely to seek antenatal care, and when they did, less likely to do so from a qualified doctor. Visit likelihood varied by division, from a low of 46.4 percent in Dhaka to 53.1 percent in Chittagong/Sylhet, 56.0 percent in Rajshahi, and 61.4 percent in Khulna/Barisal. There was a pronounced association between care-seeking behavior and socioeconomic status, with those belonging to higher household asset quintiles being far more likely to have a visit and, when doing so, to be seen by a qualified doctor. Similar patterns prevailed in non-project areas.

Table 7.1A. Antenatal care, project areas

Percent distribution of women who had a live birth in the three years preceding the survey by antenatal care (ANC) provider during pregnancy for the most recent birth, according to background characteristics, BSSFP 2008.

Background characteristic	Received any ANC	Medically trained provider			Non-medically trained provider				No one	Missing	Total	Number of women
		Qualified doctor	Nurse/ midwife/ paramedic/ FWV	CSBA/ MA/ SACMO	HA/ FWA	Traditional birth attendant	Village doctor	Other				
Mother's age at birth												
10-14	52.6	29.7	18.9	0.0	3.9	.00	0.0	0.0	47.4	0.0	100.0	18
15-19	60.1	23.4	29.0	0.6	5.7	0.1	1.0	0.3	39.9	0.0	100.0	519
20-34	50.8	22.5	22.4	0.2	4.1	0.1	1.5	0.0	49.2	0.0	100.0	1,320
35-49	33.4	12.6	18.2	0.0	1.0	0.0	1.6	0.0	66.6	0.0	100.0	133
Birth order												
1	66.0	32.5	26.1	0.5	5.5	0.2	1.0	0.3	34.0	0.0	100.0	585
2-3	52.8	21.1	25.4	0.2	4.4	0.0	1.8	0.0	47.2	0.0	100.0	908
4-5	38.7	13.1	20.1	0.5	3.2	0.4	1.2	0.2	61.3	0.0	100.0	351
6+	24.1	8.9	13.2	0.0	1.5	0.0	0.4	0.0	75.9	0.0	100.0	146
Domains												
Dhaka division	46.4	20.1	22.0	0.4	2.3	0.0	1.7	0.0	53.6	0.0	100.0	719
Chittagong/Sylhet division	53.1	26.9	22.4	0.0	2.4	0.3	1.0	0.1	46.9	0.0	100.0	655
Khulna/Barisal division	61.4	22.7	29.5	0.0	6.8	0.4	1.9	0.0	38.6	0.0	100.0	186
Rajshahi division	56.0	17.9	26.5	0.7	9.3	0.0	1.1	0.4	44.0	0.0	100.0	429
Highest educational level												
No education	32.6	9.6	18.7	0.5	2.4	0.1	1.3	0.1	67.4	0.0	100.0	670
Primary incomplete	47.7	15.7	24.9	0.5	5.6	0.2	0.9	0.0	52.3	0.0	100.0	321
Primary complete	52.4	18.1	28.9	0.0	4.3	0.0	1.0	0.0	47.6	0.0	100.0	302
Secondary incomplete	68.9	34.7	25.8	0.3	5.6	0.1	2.2	0.3	31.1	0.0	100.0	559
Secondary complete or higher	88.2	56.1	26.3	0.0	5.4	0.5	0.0	0.0	11.8	0.0	100.0	138

Background characteristic	Received any ANC	Medically trained provider			Non-medically trained provider				No one	Missing	Total	Number of women
		Qualified doctor	Nurse/ midwife/ paramedic/ FWV	CSBA/ MA/ SACMO	HA/ FWA	Traditional birth attendant	Village doctor	Other				
Household asset quintile												
Lowest	34.9	9.0	18.3	0.0	5.9	0.2	1.4	0.2	65.1	0.0	100.0	407
Second	42.7	11.5	24.6	0.4	4.9	0.0	1.3	0.0	57.3	0.0	100.0	404
Middle	48.6	14.1	27.6	0.4	4.1	0.5	1.9	0.0	51.4	0.0	100.0	382
Fourth	58.0	26.9	25.9	0.4	4.1	0.0	.4	0.4	42.0	0.0	100.0	411
Highest	77.3	50.1	22.8	0.4	2.2	0.0	1.8	0.0	22.7	0.0	100.0	386
Total	52.1	22.1	23.8	0.3	4.3	0.1	1.3	0.1	47.9	0.0	100.0	1,990

Note: If more than one source of ANC was mentioned, only the provider with the highest qualifications is considered in this tabulation.

FWV = family welfare visitor; CSBA = community skilled birth attendant; MA = medical assistant; SACMO = sub-assistant community medical officer.

Table 7.1B. Antenatal care, non-project areas

Percent distribution of women who had a live birth in the three years preceding the survey by antenatal care (ANC) provider during pregnancy for the most recent birth, according to background characteristics, 2008.

Background characteristic	Received any ANC	Medically trained provider			Non-medically trained provider				No one	Missing	Total	Number of women
		Qualified doctor	Nurse/ midwife/ paramedic/ FWV	CSBA/ MA/ SACMO	HA/ FWA	Traditional birth attendant	Village doctor	Other				
Mother's age at birth												
10-14	60.1	22.8	30.0	0.0	7.3	0.0	0.0	0.0	39.9	0.0	100.0	23
15-19	55.9	23.8	20.4	0.0	9.8	0.3	1.3	0.3	44.1	0.0	100.0	574
20-34	48.6	24.8	15.4	0.1	6.7	0.1	1.2	0.3	51.4	0.0	100.0	1,301
35-49	43.3	27.3	9.8	0.0	4.0	0.0	1.9	0.4	56.7	0.0	100.0	157
Birth order												
1	61.2	29.0	20.0	0.0	10.8	0.3	1.0	0.0	38.8	0.0	100.0	665
2-3	49.9	24.2	16.9	0.1	6.7	0.1	1.4	0.6	50.1	0.0	100.0	933
4-5	40.6	20.7	13.1	0.0	4.7	0.0	1.7	0.4	59.4	0.0	100.0	312
6+	24.8	16.5	5.5	0.4	1.9	0.0	0.4	0.0	75.2	0.0	100.0	145
Highest educational level												
No education	33.5	13.8	13.0	0.1	4.8	0.0	1.4	0.4	66.5	0.0	100.0	652
Primary incomplete	41.9	17.5	13.0	0.2	8.5	0.0	2.2	0.5	58.1	0.0	100.0	328
Primary complete	48.5	15.8	19.7	0.0	12.0	0.3	.5	0.2	51.5	0.0	100.0	260
Secondary incomplete	62.0	32.6	20.5	0.0	7.2	0.3	1.2	0.3	38.0	0.0	100.0	639
Secondary complete or higher	89.6	63.1	17.1	0.0	8.7	0.0	0.7	0.0	10.4	0.0	100.0	176
Household asset quintile												
Lowest	30.8	11.6	11.4	0.0	5.9	0.2	1.1	0.6	69.2	0.0	100.0	410
Second	40.8	14.0	16.3	0.3	8.6	0.0	1.6	0.0	59.2	0.0	100.0	434
Middle	47.7	15.5	22.6	0.0	9.0	0.0	0.5	0.0	52.3	0.0	100.0	361
Fourth	57.7	25.7	20.2	0.0	8.8	0.0	2.3	0.6	42.3	0.0	100.0	383
Highest	72.7	52.3	13.6	0.0	5.0	0.4	0.9	0.5	27.3	0.0	100.0	467
Total	50.4	24.7	16.5	0.1	7.4	0.1	1.3	0.3	49.6	0.0	100.0	2,055

Note: If more than one source of ANC was mentioned, only the provider with the highest qualifications is considered in this tabulation.

FWV = family welfare visitor; CSBA = community skilled birth attendant; MA = medical assistant; SACMO = sub-assistant community medical officer.

7.1.2. Number and Timing of Antenatal Visits

Table 7.2 provides the distribution of the number and timing of the first antenatal care visit during the last pregnancy in the three years preceding the survey across project and non-project areas. In project areas, only 14.5 percent of women completed the recommended antenatal care schedule of at least four visits. The corresponding percentage in non-project areas was 14.7 percent. Among those who sought care, the median number of visits was 2.5 in both project and non-project areas.

Pregnant women surveyed seemed to seek antenatal care rather late in their pregnancy. Despite some discrepancies between the two areas in terms of the distribution in the months of pregnancy at which first visits occurred, the median month of first visit was exactly the same at 5 months.

In project areas 34.9 percent of women in the lowest asset quintile had at least one antenatal care visit, compared to 77.3 percent for women in the highest quintile. The corresponding estimates for non-project areas were 30.8 and 72.7 percent, respectively (see Table 7.3).

Table 7.2. Number of antenatal care visits and stage of pregnancy, last three years

Percent distribution of women with live birth in the three years preceding the survey by number of antenatal care (ANC) visits during the last pregnancy by the stage of pregnancy at the time of the first visit, BSSFP 2008.

Number and timing of ANC visits	Project areas					Non-project areas
	Dhaka division	Chittagong/ Sylhet division	Khulna/ Barisal division	Rajshahi division	Total	
Number of ANC visits						
None	53.6	46.9	38.6	44.0	47.9	49.6
1	14.0	12.0	14.8	13.8	13.4	14.4
2	13.6	14.1	9.1	16.4	13.9	11.1
3	8.4	10.9	17.0	9.7	10.3	10.2
4+	10.5	16.1	20.5	16.0	14.5	14.7
DK/Missing						
Total	100.0	100.0	100.0	100.0	100.0	100.0
Median number of visits (for those with ANC)	2.2	2.6	2.9	2.6	2.5	2.5
Number of months pregnant at time of first ANC visit						
No antenatal care	53.6	46.9	38.6	44.0	47.9	49.6
<4 months	11.9	17.5	15.5	13.8	14.5	14.0
4-5 months	16.1	17.7	23.9	19.8	18.1	16.4
6-7 months	11.9	13.1	15.5	15.7	13.5	13.4
8+ months	6.5	4.8	6.4	6.7	6.0	6.4
Don't know/missing	0.0	0.0	0.0	0.0	0.0	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0
Median months pregnant at first visit (for those with ANC)	5.1	4.7	5.0	5.1	5.0	5.0
Number of women	719	655	186	429	1,990	2,055

Table 7.3. Use of antenatal care in the last three years

Percentage of women who had a live birth in the three years preceding the survey by whether they had at least one antenatal care (ANC) visit during the last pregnancy by household asset quintile, BSSFP 2008.

Household asset quintile	Project areas					Non-project areas
	Dhaka division	Chittagong/ Sylhet division	Khulna/ Barisal division	Rajshahi division	Total	
Lowest	28.7	31.2	47.5	44.4	34.9	30.8
Second	36.3	37.7	52.3	52.2	42.7	40.8
Middle	44.7	46.3	61.2	51.4	48.6	47.7
Fourth	50.0	60.8	72.7	65.9	58.0	57.7
Highest	77.3	76.3	83.3	77.8	77.3	72.7
Total	46.4	53.1	61.4	56.0	52.1	50.4
Number	719	655	186	429	1,990	2,055

7.1.3. Sources of Antenatal Care

Table 7.4 provides the market shares for suppliers of antenatal care visits for the last pregnancy of women with a live birth in the past three years, conditional on reporting at least one antenatal care visit. In rural project areas, about 36 percent of those with at least one visit visited a Smiling Sun NGO provider. Those who used Smiling Sun NGO providers were most likely to visit satellite clinics. The other two important suppliers of antenatal care were the public sector (32 percent) and private medical facilities (23 percent). Among public sector facilities, Upazila Health Complexes were the most popular, followed by Family Welfare Centers (the representation of other strata of public sector providers was negligible). The primary contributors to the private sector's market share were private doctors and clinics.

In non-project areas, the public sector was the most important source of antenatal care, with a market share of 52 percent. Upazila Health Complexes and Family Welfare Centers were the two most important public sector providers. Private hospitals/clinics and doctors had the next largest share of the market at 27 percent. The use of private clinics and doctors for antenatal care services was four percentage points higher at 16.6 percent in non-project areas. Perhaps owing to the proximity of non-project communities to project areas, Smiling Sun static clinics had a 6.8 percent market share.

Table 7.4. Source of antenatal care in the last three years

Percent distribution of women who had a live birth in the three years preceding the survey by whether they had at least one antenatal care (ANC) visit during the last pregnancy, by source of care, BSSFP 2008.

Place for antenatal checkup	BSSFP project areas					Non-project areas
	Dhaka division	Chittagong/ Sylhet division	Khulna/ Barisal division	Rajshahi division	Total	
Home	5.0	4.2	6.2	9.3	5.8	6.8
Medical person at home	5.0	3.6	5.6	9.3	5.6	6.0
Non-medical person at home	0.0	0.5	0.6	0.0	0.3	0.7
Public sector	26.6	29.6	35.8	40.7	31.9	52.2
Hospital/Medical college	5.4	3.3	2.5	6.0	4.5	4.8
Family welfare center	6.3	6.5	5.6	11.3	7.5	15.9
Upazila health complex	9.9	14.4	19.1	12.0	12.9	18.4
MCWC	0.9	1.6	2.5	1.3	1.4	1.8
Rural Dispensary/community clinic	0.5	0.0	0.0	0.0	0.1	0.8
Satellite clinic/EPI outreach site	2.3	1.6	2.5	0.0	1.5	3.0
HA	0.0	0.5	1.2	0.7	0.5	0.6
FWA	1.4	1.6	2.5	9.3	3.4	7.0
Smiling Sun	36.0	31.5	43.2	39.3	36.1	9.8
Static clinic	13.1	10.9	13.6	12.7	12.3	6.8
Satellite clinic	21.6	19.3	25.3	22.0	21.3	2.1
Community service provider (CSP)/ Depotholder	1.4	1.3	4.3	4.7	2.4	0.9
Other NGO	3.2	1.3	2.5	4.0	2.6	4.1
MARIE STOPES clinic/hospital	0.0	0.4	0.0	0.0	0.1	0.2
UPHCP	0.0	0.0	0.0	0.0	0.0	0.3
Hospital/clinic	1.8	0.7	1.2	3.3	1.7	2.5
Satellite clinic	0.5	0.2	1.2	0.7	0.5	0.1
Fieldworker	0.9	0.0	0.0	0.0	0.3	0.7
Depotholder	0.0	0.0	0.0	0.0	0.0	0.2
Private medical sector	28.8	32.9	12.3	6.7	23.2	26.8
Private hospital/clinic	17.1	18.4	8.0	2.7	13.2	16.6
Qualified doctor	8.6	12.9	3.7	2.0	8.0	9.1
Village doctor	2.3	0.4	0.6	1.3	1.2	1.0
Pharmacist/pharmacy	0.9	1.1	0.0	0.7	0.8	0.2
Traditional healer/kabiraj	0.0	0.2	0.0	0.0	0.1	0.0
Other private	0.5	0.4	0.0	0.0	0.3	0.2
DK/missing	0.0	0.2	0.0	0.0	0.1	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	334	348	114	240	1,036	1,035

7.1.4. Iron Supplementation

Many pregnant women in Bangladesh suffer from anemia and iron deficiency. Respondents were asked whether they had taken any iron tablet or syrup during their most recent pregnancy for the three years preceding the survey. Table 7.5 provides the distribution of iron supplementation during pregnancy for women with a live birth in the last year preceding the interview. In project areas, 51.2 percent of women received iron supplements during their most recent pregnancy, which was two percentage points lower than the figure in non-project areas (53.4 percent). In project areas, iron intake was highest in Chittagong/Sylhet (55.8 percent) and lowest in Dhaka (46.2 percent). Iron supplementation during pregnancy was negatively related to parity and maternal age and positively related to education and socioeconomic status. Women in their first pregnancy were more than 10 percentage points more likely to use iron supplementation than those in their second pregnancy. Women in the highest asset quintile were almost two times more likely to take iron supplements than those in the lowest quintile.

7.1.5. Tetanus Toxoid (TT) Vaccination

Tetanus toxoid (TT) injections are given during pregnancy to prevent neonatal tetanus, historically one of the principal causes of death among infants in many developing countries. To achieve protection for herself and the newborn baby, a pregnant woman should receive two doses of tetanus toxoid vaccine during a given pregnancy. However, if a woman was vaccinated in a prior pregnancy, she may require only one booster dose for a subsequent pregnancy. Five doses are believed to provide lifetime protection.

Prevalence of TT Vaccine

The 2008 rural BSSFP baseline survey collected data on whether or not women received any tetanus toxoid vaccination during last pregnancy and whether or not the pregnancy was protected against neonatal tetanus. Table 7.6 presents the percentage of women whose last birth was protected against neonatal tetanus among those who had a live birth in the three years preceding the survey. Eighty-one percent of women in project areas were protected against neonatal tetanus. In addition, nearly 52 percent of mothers received two or more injections during their last pregnancy. However, about 28 percent of women received no tetanus toxoid injection during their last pregnancy.

Receiving two or more doses of tetanus toxoid injections was inversely related to age—in other words, older women were less likely to do so. This is probably a reflection of their higher 'stock' of tetanus toxoid vaccinations from earlier pregnancies. Protection against neonatal tetanus was inversely correlated with birth order. The relationship between education and receiving two doses of tetanus toxoid during pregnancy was not strong. Complete protection was substantially higher among wealthier women.

Table 7.5. Iron supplementation in the last three years

Percent distribution of women with a live birth in the three years preceding the survey by intake of iron supplements during pregnancy for the most recent birth by selected background characteristics, BSSFP 2008.

Background Characteristics	Took iron tablet/syrup during pregnancy				
	Yes	No	DK/missing	Total	Number of women
Mother's age at birth					
10-14	58.1	41.9	0.0	100.0	18
15-19	56.0	44.0	0.0	100.0	519
20-34	49.9	50.1	0.0	100.0	1320
35-49	44.8	55.2	0.0	100.0	133
Birth order					
1	59.7	40.3	0.0	100.0	585
2-3	49.3	50.7	0.0	100.0	908
4-5	45.8	54.2	0.0	100.0	351
6+	41.8	58.2	0.0	100.0	146
Domains					
Dhaka division	46.2	53.8	0.0	100.0	719
Chittagong/Sylhet division	55.8	44.2	0.0	100.0	655
Khulna/Barisal division	50.0	50.0	0.0	100.0	186
Rajshahi division	53.0	47.0	0.0	100.0	429
Highest educational levels					
No education	37.8	62.2	0.0	100.0	670
Some primary	46.0	54.0	0.0	100.0	321
Primary complete	52.9	47.1	0.0	100.0	302
Secondary incomplete	63.5	36.5	0.0	100.0	559
Secondary complete or higher	74.6	25.4	0.0	100.0	138
Household asset quintile					
Lowest	38.3	61.7	0.0	100.0	407
Second	44.8	55.2	0.0	100.0	404
Middle	47.6	52.4	0.0	100.0	382
Fourth	56.0	44.0	0.0	100.0	411
Highest	69.8	30.2	0.0	100.0	386
Project and Non-project areas					
Project areas	51.2	48.8	0.0	100.0	1990
Non-project areas	53.4	46.6	0.0	100.0	2055

Table 7.6. Tetanus toxoid injections

Among mothers with a live birth in the three years preceding the survey, the percentage receiving two or more tetanus toxoid injections during the pregnancy for the last live birth and the percentage whose last live birth was protected against neonatal tetanus, according to background characteristics, project and non-project areas, BSSFP 2008.

Background characteristic	Number of tetanus toxoid injections					Percentage whose last birth was protected against neonatal tetanus[1]	Number of mothers
	None	One injection	Two or more injections	Don't know/ missing	Total		
Mother's age at birth							
10-14	15.9	3.9	80.2	0.0	100.0	92.1	18
15-19	22.3	17.0	60.8	0.0	100.0	88.8	519
20-34	28.6	21.6	49.7	0.1	100.0	79.0	1320
35-49	43.7	20.6	35.7	0.0	100.0	68.9	133
Birth order							
1	23.2	17.8	59.1	0.0	100.0	87.7	585
2-3	24.8	21.0	54.0	0.2	100.0	80.8	908
4-5	35.0	24.2	40.7	0.0	100.0	75.3	351
6+	48.1	14.8	37.1	0.0	100.0	69.2	146
Domains							
Dhaka division	30.5	17.8	51.7	0.0	100.0	82.4	719
Chittagong/Sylhet division	28.4	19.5	52.1	0.0	100.0	80.5	655
Khulna/Barisal division	22.7	27.7	49.6	0.0	100.0	77.3	186
Rajshahi division	24.6	22.0	53.0	0.4	100.0	81.0	429
Highest educational level							
No education	33.1	18.0	48.7	0.2	100.0	73.4	670
Primary incomplete	29.4	17.9	52.7	0.0	100.0	80.7	321
Primary complete	26.3	20.7	52.9	0.0	100.0	83.3	302
Secondary incomplete	21.8	21.7	56.5	0.0	100.0	86.7	559
Secondary complete or higher	26.6	28.7	44.7	0.0	100.0	90.4	138
Household asset quintile							
Lowest	29.5	15.8	54.3	0.4	100.0	76.1	407
Second	30.9	23.2	45.9	0.0	100.0	75.5	404
Middle	26.8	15.8	57.5	0.0	100.0	83.8	382
Fourth	26.5	22.7	50.9	0.0	100.0	83.9	411
Highest	25.3	23.4	51.3	0.0	100.0	86.2	386
Project and Non-project areas							
Project areas	27.8	20.2	51.9	0.1	100.0	81.0	1990
Non-project areas	26.2	21.0	52.9	0.0	100.0	82.3	2055

[1] Includes mothers with two injections during the pregnancy of her last birth, or two or more injections (the last within three years of the last live birth), or three or more injections (the last within five years of the last birth), or four or more injections (the last within ten years of the last live birth), or five or more injections prior to the last birth.

Sources of Tetanus Toxoid

Table 7.7 provides the source of the most recent tetanus toxoid vaccine received by women with a live birth in the 36 months preceding the survey. In project areas, the most important source of tetanus toxoid vaccination was the public sector, which comprised nearly 54 percent of market share, followed somewhat distantly by Smiling Sun facilities, with 39 percent of market share. Smiling Sun satellite clinics were the most important provider in all divisions, offering 30 percent of all vaccinations. In non-project areas, the main providers were public sector facilities, particularly government satellite clinics, Upazila health complexes, and family welfare centers, which collectively accounted for 89 percent of the market.

7.2. Knowledge of Pregnancy Complications and Care

Ever-married women were asked if they were aware of any maternal conditions during pregnancy, delivery, or after delivery that may be potentially life threatening for the pregnant woman or child. Table 7.8 provides the distribution of women's awareness of such complications. About 49 percent in project areas were aware of tetanus as an important complication of pregnancy. Knowledge of other complications, however, was less extensive: retained placenta, 42.2 percent; convulsion/eclampsia, 29.6 percent; baby's hand or feet come first/bad baby position, 29.4 percent; severe headache/blurred vision, 24.5 percent; obstructed labor, 23.1 percent; excessive vaginal bleeding, 21.1 percent; prolonged labor, 16.1 percent; and edema/pre-eclampsia, 9.3 percent. This overall set of complications was identified as the most life threatening in all divisions. The ranking and level of pregnancy complications was similar in non-project areas. Around two percent of those in project and 2.8 percent of non-project areas were unaware of any complications.

7.3. Delivery Care

The objective of providing safe delivery services is to protect the life and health of the mother and her child. Proper medical attention and hygienic conditions during delivery are essential to controlling the risks of complications that could result in death or serious illness for either the mother or newborn. It is thus preferable to have deliveries either in suitable health facilities or with assistance from trained medical practitioners. The Bangladesh Maternal Health Strategy encourages women to deliver under the care of medically trained birth attendants, and promotes safe motherhood through various activities, especially delivery by skilled birth attendants (SBAs). This section discusses place of delivery and type of assistance during delivery. Data on delivery care were obtained for all births that occurred in the five years preceding interview.

Table 7.7. Source of tetanus toxoid injections

Percent distribution of women with a live birth in the last three years preceding the survey who received a tetanus toxoid injection, by source of most recent tetanus toxoid injection, BSSFP 2008.

Source for most recent tetanus toxoid injection	Project areas					Non-project areas
	Dhaka division	Chittagong/ Sylhet division	Khulna/ Barisal division	Rajshahi division	Total	
Home	1.8	1.2	2.9	1.0	1.5	2.1
Medical person at home	1.8	1.1	2.9	1.0	1.5	2.1
Non-medical person at home	0.0	0.1	0.0	0.0	0.0	0.0
Public sector	56.9	51.6	54.4	51.0	53.6	88.6
Hospital/Medical college	1.8	0.7	3.4	2.0	1.6	1.5
Family welfare center	11.7	7.8	4.4	9.9	9.3	15.1
Upazila health complex	8.1	9.0	8.8	8.4	8.6	10.2
MCWC	0.0	0.7	1.0	0.0	0.3	0.3
Rural dispensary/community clinic	0.3	1.3	1.0	0.0	0.6	0.9
Satellite clinic/EPI outreach site	27.1	24.8	23.0	18.8	24.1	38.3
HA	1.5	3.0	5.4	3.0	2.7	4.3
FWA	6.3	4.3	7.4	8.9	6.4	18.0
Smiling Sun	36.4	39.6	41.7	42.6	39.4	4.8
Static clinic	5.1	6.5	6.9	7.9	6.4	2.5
Satellite clinic	29.2	31.3	30.9	28.2	29.8	2.0
Community service provider (CSP)/ Depotholder	2.1	1.9	3.9	6.4	3.2	0.2
Other NGO	2.4	1.5	0.5	3.0	2.0	1.1
MARIE STOPES clinic/hospital	0.0	0.4	0.0	0.0	0.1	0.1
UPHCP	0.0	0.0	0.0	0.0	0.0	0.1
Hospital/clinic	0.0	0.1	0.0	1.0	0.3	0.2
Satellite clinic	1.5	0.5	0.5	1.0	1.0	0.5
Fieldworker	0.0	0.3	0.0	0.0	0.1	0.1
Depotholder	0.9	0.1	0.0	1.0	.6	0.0
Private medical sector	2.4	6.1	0.5	2.5	3.4	3.5
Private hospital/clinic	1.5	2.0	0.5	0.5	1.3	1.9
Qualified doctor	0.3	1.6	0.0	1.0	0.9	0.7
Village doctor	0.0	0.9	0.0	1.0	0.5	0.3
Pharmacist/pharmacy	0.6	1.5	0.0	0.0	0.7	0.6
Traditional healer/kabiraj	0.0	0.0	0.0	0.0	0.0	0.0
Other private	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 Women	499	469	144	324	1,436	1,517

Table 7.8. Knowledge of pregnancy complications

Percentage of women who know of complications threatening the life of a mother during pregnancy, delivery, or post delivery, BSSFP 2008.

Pregnancy complications	Project areas					Non-project areas
	Dhaka division	Chittagong/ Sylhet division	Khulna/ Barisal division	Rajshahi division	Total	
Severe headache, blurry vision, high blood pressure	21.5	26.4	23.3	27.4	24.5	22.7
Edema, pre-eclampsia	9.4	9.6	16.4	5.7	9.3	10.8
Convulsions, eclampsia	28.6	29.6	28.6	31.4	29.6	30.1
Excessive vaginal bleeding	20.3	21.5	24.4	20.5	21.1	21.1
Foul smelling discharge with high fever	4.2	4.3	2.5	1.8	3.5	3.1
Jaundice	7.1	6.6	9.0	5.5	6.8	7.6
Tetanus	57.5	41.7	37.8	50.1	49.1	49.2
Baby hand or feet come first, baby in bad position	29.2	30.2	22.1	32.0	29.4	26.6
Prolonged labor	14.0	17.8	19.1	15.7	16.1	15.5
Obstructed labor	23.1	25.5	22.7	20.4	23.1	25.3
Retained placenta	36.3	34.2	43.3	61.1	42.2	42.0
Torn uterus	8.3	6.9	4.8	12.0	8.4	7.8
Other	0.1	0.1	0.6	0.0	0.1	0.1
DK, Missing	2.3	2.0	2.8	1.2	2.0	2.8
Number of women	2,342	1,822	681	1,485	6,330	6,789

7.3.1. Place of Delivery

Table 7.9 provides the distribution of live births in the five years preceding the survey by place of delivery, according to selected background characteristics. Nearly nine of every ten mothers in project and non-project areas delivered at home (88.2 percent in project areas versus 86.5 percent in non-project areas). Only 7.2 percent of births in project areas and 7.6 percent of births in non-project areas occurred at government or NGO health facilities. A very small fraction of births (0.3 percents) in project areas occurred in Smiling Sun clinics. Deliveries in a facility were more common for mothers in project areas who were giving birth for the first time, who had attained a secondary or higher level of education, or who lived in the Khulna or Barisal divisions. Deliveries in a facility were also more common for mothers of higher asset quintiles.

Table 7.9. Place of delivery

Percent distribution of last born live birth in the five years preceding the survey by place of delivery, according to selected background characteristics, BSSFP 2008.

Background Characteristics	Place of delivery							Number of births
	Public health facility	Smiling Sun health facility	Other NGO healthy facility	Private health facility	Home	Other	Total	
Mother's age at birth								
10-14	6.1	0.0	0.0	8.3	85.5	0.0	100.0	25
15-19	8.0	0.4	0.7	5.4	85.6	0.0	100.0	704
20-34	6.1	0.2	0.3	4.3	89.0	0.0	100.0	1,915
35-49	5.1	0.3	0.0	4.4	90.2	0.0	100.0	217
Birth order								
1	11.7	0.4	0.4	8.9	78.5	0.1	100.0	771
2-3	5.3	0.3	0.6	4.4	89.5	0.0	100.0	1,309
4-5	3.5	0.1	0.1	0.5	95.7	0.0	100.0	533
6+	2.7	0.3	0.0	1.7	95.3	0.0	100.0	247
Domains								
Dhaka division	4.8	0.1	0.3	4.2	90.6	0.0	100.0	1,037
Chittagong/Sylhet division	6.4	0.6	0.1	4.9	88.0	0.1	100.0	914
Khulna/Barisal division	12.1	0.5	0.3	7.8	79.3	0.0	100.0	280
Rajshahi division	6.9	0.0	1.0	3.6	88.5	0.0	100.0	629
Mother's education level								
No education	2.6	0.2	0.0	0.6	96.6	0.0	100.0	987
Some primary	4.8	0.1	0.0	2.4	92.6	0.0	100.0	494
Primary complete	6.5	0.4	0.4	3.1	89.7	0.0	100.0	416
Secondary incomplete	10.3	0.4	0.7	8.1	80.4	0.1	100.0	767
Secondary complete or higher	15.1	0.3	2.3	20.2	62.1	0.0	100.0	196
Household asset quintile								
Lowest	3.0	0.0	0.0	0.4	96.7	0.0	100.0	568
Second	5.2	0.5	0.3	1.6	92.4	0.0	100.0	590
Middle	4.3	0.1	0.0	2.1	93.5	0.0	100.0	556
Fourth	7.5	0.1	0.4	6.2	85.7	0.1	100.0	575
Highest	12.4	0.7	1.3	12.9	72.7	0.0	100.0	571
Project and Non-project areas								
Project areas	6.5	0.3	0.4	4.6	88.2	0.0	100.0	2,861
Non-project areas	7.0	0.2	0.4	6.0	86.5	0.1	100.0	3,008

7.3.2. Assistance during Delivery

Assistance by medically trained birth attendants during delivery is considered to be effective in the reduction of maternal and neonatal deaths. As with antenatal care, the interviewer was instructed to record all responses if more than one person assisted during delivery. However, for the purposes of this tabulation, only the most highly qualified individual mentioned was considered. Table 7.10 provides the distribution of the type of delivery assistance for live births in the five years preceding the survey by selected background characteristics. In project areas, untrained traditional birth attendants (TBAs) assisted in 66.9 percent of deliveries, followed distantly in importance by private and government health professionals (12.6 percent) and trained TBAs (7.0 percent). Less than one percent (0.8 percent) of deliveries were assisted by Smiling Sun health professionals (doctors, nurses, midwives, and FWVs). Only 13.4 percent of deliveries in project areas and a slightly higher percentage (15.3 percent) in non-project areas were assisted by medically trained providers. Delivery assistance by a trained provider was negatively associated with the age of the mother and the child's birth order: Qualified doctors and nurses/midwives were slightly more important for younger mothers and for first births.

Qualified doctors played a more important role in birth attendance in Khulna/Barisal and Chittagong/ Sylhet. Mothers with a secondary or higher level of education were more likely to have a qualified doctor in attendance at delivery. Those who had more frequent antenatal care visits were also more likely to seek assistance from doctors or other trained providers. In addition, mothers from higher asset quintiles were more likely to have a qualified doctor or nurse to assist at delivery. The situation was much the same in non-project areas.

7.4. Postnatal Care

One of the crucial components of safe motherhood is postnatal care. Postnatal checkups provide an opportunity to assess and treat delivery complications and to counsel mothers on how to care for themselves and their children. A large proportion of maternal and neonatal deaths occur during the 24 hours following delivery. In addition, the first two days following delivery are critical for monitoring complications arising from the delivery. The 2008 BSSFP baseline survey assessed the utilization of postnatal care for the most recent live birth among women who had delivered a child in the three years preceding the survey. In order to assess the extent of postnatal care utilization, interviewers asked each woman if she and her child had received a health check after the delivery, when this check occurred, and what type of health provider was used.

Table 7.10. Assistance during delivery

Percent distribution of last born live births in the five years preceding the survey by person providing assistance during delivery, according to background characteristics, project and non-project areas, BSSFP 2008.

Background Characteristics	Medically trained providers			Non-medically trained providers						No one	Total	Number of births
	Smiling Sun health professional*	Other private/ Govt. health professional*	CSBA/ MA/ SACMO	HA/ FWA	Trained birth attendant	Untrained birth attendant	Village doctor	Relatives and friends	Other			
Mother's age at birth												
10-14	0.0	14.5	0.0	0.0	0.0	70.4	0.0	15.2	0.0	0.0	100.0	25
15-19	1.1	16.4	0.0	0.2	7.8	63.4	0.7	10.3	0.0	0.0	100.0	704
20-34	0.6	11.5	0.0	0.3	7.3	67.3	0.7	11.7	0.1	0.4	100.0	1,915
35-49	0.9	9.3	0.0	0.0	2.4	73.7	0.7	12.3	0.0	0.7	100.0	217
Birth order												
1	1.2	23.8	0.1	0.3	7.3	58.0	0.8	8.5	0.0	0.0	100.0	771
2-3	0.5	10.7	0.0	0.2	7.6	68.0	0.8	12.0	0.0	0.3	100.0	1,309
4-5	0.7	4.4	0.0	0.2	6.8	71.9	0.3	14.3	0.3	1.2	100.0	533
6+	0.8	5.2	0.0	0.6	3.7	78.0	1.1	10.7	0.0	0.0	100.0	247
Domains												
Dhaka division	0.4	10.0	0.0	0.1	7.5	71.4	0.4	9.4	0.1	0.4	100.0	1,037
Chittagong/Sylhet division	1.0	13.3	0.1	0.3	5.3	72.8	0.8	6.2	0.0	0.1	100.0	914
Khulna/Barisal division	1.0	20.9	0.0	0.3	8.1	47.9	1.3	20.7	0.0	0.0	100.0	280
Rajshahi division	0.8	12.0	0.0	0.3	8.1	59.3	0.8	18.1	0.0	0.8	100.0	629
Mother's education level												
No education	0.5	3.4	0.0	0.2	5.5	75.4	0.4	13.6	0.2	0.8	100.0	987
Some primary	0.8	6.9	0.1	0.4	6.2	72.9	0.8	11.9	0.0	0.0	100.0	494
Primary complete	0.9	12.5	0.0	0.2	8.3	65.4	1.1	11.3	0.0	0.4	100.0	416
Secondary incomplete	0.9	20.5	0.0	0.2	7.5	60.6	0.9	9.3	0.0	0.1	100.0	767
Secondary complete or higher	1.0	42.1	0.0	0.0	12.2	36.3	0.8	7.5	0.0	0.0	100.0	196

Background Characteristics	Medically trained providers			Non-medically trained providers						No one	Total	Number of births
	Smiling Sun health professional*	Other private/ Govt. health professional*	CSBA/ MA/ SACMO	HA/ FWA	Trained birth attendant	Untrained birth attendant	Village doctor	Relatives and friends	Other			
Household asset quintile												
Lowest	0.4	3.3	0.0	0.1	6.5	75.2	0.3	13.6	0.0	0.5	100.0	568
Second	0.6	8.1	0.0	0.1	4.6	70.8	0.6	14.5	0.3	0.5	100.0	590
Middle	0.5	6.6	0.0	0.6	6.1	74.6	0.7	10.9	0.0	0.0	100.0	556
Fourth	1.1	15.4	0.0	0.1	7.7	62.8	1.1	11.1	0.0	0.7	100.0	575
Highest	1.1	29.5	0.1	0.3	10.2	51.0	0.9	6.9	0.0	0.0	100.0	571
Number of Antenatal Care Visits												
None	0.3	4.5	0.0	0.2	5.9	74.8	0.6	13.0	0.1	0.5	100.0	1,397
1	0.9	9.2	0.0	0.0	6.5	69.7	0.4	12.6	0.0	0.8	100.0	388
2	1.4	15.0	0.2	0.2	5.6	67.3	1.5	8.9	0.0	0.0	100.0	374
3	1.6	20.0	0.0	0.4	8.7	58.9	0.4	10.1	0.0	0.0	100.0	310
4+	1.0	36.7	0.0	0.5	11.5	41.5	1.0	7.8	0.0	0.0	100.0	390
DK/missing												
Project and Non-project areas												
Project areas	0.8	12.6	0.0	0.2	7.0	66.9	0.7	11.4	0.1	0.3	100.0	2,861
Non-project areas	0.2	15.1	0.0	0.4	10.3	63.0	0.5	10.3	0.0	0.2	100.0	3,008

Note: If the respondent mentioned more than one person attending during delivery, only the most qualified person is considered in this tabulation.

*Health professional: Doctor/nurse/midwife/FWV.

7.4.1. Timing of the First Postnatal Checkup of Mothers and Children

According to Table 7.11, in the three years preceding the survey about 16.8 percent of women in project areas received postnatal care following their last birth. About 12.3 percent received postnatal care within 24 hours of delivery, and 14.8 percent received care within the first two days of delivery. Differences in the timing of postnatal care by maternal age, child birth order, division, maternal education, and household asset quintile were pronounced. Women under the age 35 at the time of birth, having their first child, living in Khulna or Barisal, highly educated, and in the highest household asset quintile were much more likely to receive postnatal care within the first two days after delivery. Postnatal care for women in non-project areas was almost identical to that in project areas. About 13.5 percent of women in non-project areas received postnatal care within 24 hours of delivery, and 15.6 percent received care within the first two days of delivery.

Surprisingly, postnatal checkups for infants were slightly less common than postnatal care for women. In project areas, nearly 15.4 percent of the most recent live births in the three years preceding the survey received postnatal care, against 17 percent in non-project areas. Differentials in the timing of postnatal care for children were comparable to those for women (Table 7.12).

7.4.2. Postnatal Care Providers for Mothers and Children

Table 7.13 presents information on the type of postnatal care provider utilized according to maternal background characteristics. Overall, 12.4 percent of mothers aged 15-49 in project areas who had a live birth in three years preceding the survey received postnatal care from a medically trained provider following their most recent live birth. Approximately 8.8 percent received postnatal care from a qualified doctor; 3.6 percent received care from a nurse, midwife, paramedic, or FWV; and 4.5 percent received care from non-medically trained providers. Women giving birth for the first time, with secondary or higher levels of education, and in the highest household asset quintiles were much more likely to receive postnatal care from a medically trained provider. Among the mothers in non-project areas, 14.2 percent received postnatal care from medically trained providers, with 10.3 percent seeking care from qualified doctors.

7.5. Newborn Care

Essential newborn care includes (i) immediate drying and wrapping of the baby in order to keep the newborn warm, (ii) clean cord care, and (iii) exclusive breastfeeding within 24 hours of birth. Women who gave birth in the past three years but did not deliver their last-born child in a health facility were asked about newborn care practices, including cord cutting and wiping, wrapping, bathing, and breastfeeding of the newborn following birth.

Table 7.11. Timing of first postnatal checkup for women

Among women age 15-49 giving birth in the three years preceding the survey, the percent distribution of the mother's first postnatal check-up for the last live birth by time after delivery, according to background characteristics, BSSFP 2008.

Background characteristic	Timing after delivery of mother's first postnatal checkup				No postnatal checkup[1]	Total	Within 2 days of delivery	Number of women
	< 4 hours	4-23 hours	Within 1-2 days of delivery	Within 3-41 days of delivery				
Mother's age at birth								
10-14	11.4	0.0	0.0	0.0	88.6	100.0	11.4	18
15-19	11.6	2.5	1.3	1.7	82.9	100.0	15.4	519
20-34	10.3	1.7	3.2	2.2	82.6	100.0	15.2	1320
35-49	6.4	2.1	0.5	1.0	89.9	100.0	9.0	133
Birth order								
1	16.0	3.1	2.4	2.2	76.3	100.0	21.5	585
2-3	10.2	1.4	3.0	1.8	83.6	100.0	14.6	908
4-5	4.7	0.8	1.7	2.3	90.6	100.0	7.2	351
6+	2.3	2.8	1.9	2.0	91.0	100.0	7.0	146
Domains								
Dhaka division	9.6	1.9	1.7	1.3	85.6	100.0	13.2	719
Chittagong/Sylhet division	10.8	2.5	2.4	2.2	82.0	100.0	15.7	655
Khulna/Barisal division	13.3	1.5	4.2	2.7	78.4	100.0	18.9	186
Rajshahi division	9.7	1.1	3.4	2.6	83.2	100.0	14.2	429
Highest education level								
No education	4.3	.7	1.2	1.4	92.4	100.0	6.2	670
Primary incomplete	7.3	2.2	3.5	2.0	85.0	100.0	13.0	321
Primary complete	7.7	2.1	2.2	1.1	87.0	100.0	11.9	302
Secondary incomplete	15.0	2.5	2.9	2.5	77.1	100.0	20.4	559
Secondary complete or higher	34.0	4.1	5.7	4.9	51.4	100.0	43.7	138
Household asset quintile								
Lowest	4.7	1.3	1.0	1.3	91.8	100.0	7.0	407
Second	5.8	.9	1.5	1.5	90.4	100.0	8.1	404
Middle	9.3	.3	1.8	.3	88.2	100.0	11.5	382
Fourth	10.8	3.1	4.3	2.7	79.1	100.0	18.3	411
Highest	21.7	3.9	4.0	4.3	66.2	100.0	29.6	386
Project and Non-project areas								
Project areas	10.4	1.9	2.5	2.0	83.2	100.0	14.8	1990
Non-project areas	11.6	1.9	2.1	2.3	82.0	100.0	15.6	2055

[1] Includes women who received a checkup after 41 days.

Table 7.12. Timing of first postnatal checkup for children

Among live births in the three years preceding the survey, the percent distribution of the children's first postnatal check-up for the last live birth by timing after delivery, according to background characteristics, BSSFP 2008.

Background characteristic	Timing after deliver of child's first postnatal checkup				No postnatal checkup	Total	Within 2 days of delivery	Number of children
	< 4 hours	4-23 hours	Within 1-2 days of delivery	Within 3-41 days of delivery				
Mother's age at birth								
10-14	7.5	0.0	3.9	0.0	88.6	100.0	11.4	18
15-19	10.8	1.5	2.5	2.0	83.2	100.0	14.8	519
20-34	8.5	1.6	2.7	2.6	84.6	100.0	12.8	1320
35-49	4.7	1.0	3.8	1.0	89.6	100.0	9.5	133
Birth order								
1	14.0	2.9	4.0	2.4	76.7	100.0	20.8	585
2-3	8.5	1.0	2.4	2.5	85.7	100.0	11.9	908
4-5	3.7	0.4	1.7	1.5	92.8	100.0	5.7	351
6+	2.8	1.9	2.8	3.0	89.6	100.0	7.5	146
Domains								
Dhaka division	7.7	1.7	1.7	2.3	86.6	100.0	11.1	719
Chittagong/Sylhet division	11.1	1.9	2.8	2.5	81.7	100.0	15.8	655
Khulna/Barisal division	11.0	1.9	5.3	1.1	80.7	100.0	18.2	186
Rajshahi division	6.3	0.4	3.4	2.6	87.3	100.0	10.1	429
Mother's education level								
No education	3.0	0.6	1.7	2.4	92.3	100.0	5.3	670
Primary incomplete	6.4	2.0	2.7	1.8	87.0	100.0	11.1	321
Primary complete	7.6	1.4	2.8	0.6	87.6	100.0	11.8	302
Secondary incomplete	13.0	1.8	3.4	2.5	79.3	100.0	18.2	559
Secondary complete or higher	28.9	3.6	5.1	6.3	56.1	100.0	37.6	138
Household asset quintile								
Lowest	3.1	1.0	1.2	1.2	93.4	100.0	5.4	407
Second	4.9	0.7	2.4	1.8	90.3	100.0	7.9	404
Middle	6.0	.9	.7	3.3	89.1	100.0	7.6	382
Fourth	9.7	2.3	4.3	2.6	81.1	100.0	16.2	411
Highest	21.0	2.6	5.1	2.8	68.4	100.0	28.8	386
Project and Non-project areas								
Project areas	8.8	1.5	2.7	2.3	84.6	100.0	13.1	1990
Non-project areas	10.5	1.7	2.1	2.6	83.0	100.0	14.3	2055

[1] Includes children who received a checkup after 41 days.

Table 7.13. Type of provider of first postnatal checkup for women

Among women age 15-49 giving birth in the three years preceding the survey, the percent distribution by type of provider of the mother's first postnatal health check for the last live birth, according to background characteristics, BSSFP 2008.

Background characteristic	Medically trained provider			Non-medically trained provider[1]	No postnatal checkup	Total	Percentage receiving postnatal care from a medically trained provider	Number of women
	Qualified doctor	Nurse/ midwife/ paramedic/ FWV	CSBA/ MA/ SACMO					
Mother's age at birth								
10-14	7.5	0.0	0.0	3.9	88.6	100.0	7.5	18
15-19	10.3	3.6	0.0	3.2	82.9	100.0	13.9	519
20-34	8.1	3.9	0.0	5.3	82.6	100.0	12.1	1320
35-49	9.2	0.0	0.0	1.4	89.4	100.0	9.2	133
Birth order								
1	13.6	5.9	0.0	4.3	76.2	100.0	19.5	585
2-3	8.4	3.2	0.1	4.8	83.5	100.0	11.7	908
4-5	3.7	1.6	0.0	4.1	90.6	100.0	5.3	351
6+	3.2	1.3	0.0	4.4	91.0	100.0	4.5	146
Domains								
Dhaka division	8.2	2.9	0.0	3.3	85.6	100.0	11.1	719
Chittagong/Sylhet division	10.0	3.3	0.1	4.5	82.0	100.0	13.4	655
Khulna/Barisal division	12.1	5.7	0.0	4.5	77.7	100.0	17.8	186
Rajshahi division	6.3	4.1	0.0	6.3	83.2	100.0	10.4	429
Highest education level								
No education	2.6	1.6	0.0	3.4	92.4	100.0	4.2	670
Primary incomplete	5.3	4.4	0.0	5.4	85.0	100.0	9.7	321
Primary complete	6.0	3.2	0.0	4.1	86.7	100.0	9.2	302
Secondary incomplete	14.6	4.3	0.0	4.1	77.0	100.0	18.9	559
Secondary complete or higher	29.3	8.8	0.5	10.0	51.4	100.0	38.6	138
Household asset quintile								
Lowest	2.0	2.3	0.0	3.9	91.8	100.0	4.3	407
Second	5.1	2.3	0.0	2.4	90.2	100.0	7.4	404
Middle	4.9	2.7	0.0	4.2	88.2	100.0	7.6	382
Fourth	8.1	5.9	0.2	6.8	79.1	100.0	14.2	411
Highest	24.2	4.6	0.0	5.2	66.0	100.0	28.8	386
Project and Non-project areas								
Project Areas	8.8	3.6	0.0	4.5	83.2	100.0	12.3	1990
Non-project areas	10.3	3.9	0.0	3.8	82.0	100.0	14.2	2055

FWV = family welfare visitor; MA = medical assistant; SACMO = sub-assistant community medical officer; HA = health assistant; FWA = family welfare assistant.

[1] Includes women who received a checkup after 41 days.

7.5.1. Care of the Umbilical Cord

Table 7.14 shows that a blade was the most common instrument (96.6 percent) used for cutting the umbilical cord in project areas. The cord was cut with a blade from a delivery bag in only 8.1 percent of cases, however, and the remaining 88.5 percent of blades were from other sources. Bamboo strips were used to cut the cord in 2.4 percent of births. In more than eight in every ten (86.2 percent) non-institutional births, the instruments used to cut the cord were boiled before use. The use of boiled instruments was highest among women in Rajshahi division and women in the highest asset quintile. Similar patterns prevailed in non-project areas.

Table 7.15 provides information on the materials applied to the cord immediately after cutting and tying it. In approximately two-thirds (65.6 percent) of cases, nothing was applied to the cord after it was cut (project areas). When something was applied to the cord, antibiotic (9.0 percent), antiseptic (7.3), boric powder (3.3 percent), and mustard oil (2.6 percent) were the most common materials. Women with a secondary or higher level of education and women in the highest household asset quintile were more likely to have antibiotic or antiseptic crème/powder applied to the cord.

7.5.2. Wiping, Wrapping, and Bathing the Newborn

Wiping and wrapping the newborn immediately after birth are essential to avoid the risk of hypothermia. A newborn should be wiped dry and wrapped within minutes after birth, and should not be washed in the first 24 hours. The 2008 BSSFP survey asked women when a newborn was first wiped and wrapped, and when it was first washed. Table 7.16 shows that 29.3 percent of newborns were not wiped dry after birth, but were washed instead. Only eight percent were wiped within the recommended five minutes after birth. There was little variation in the early wiping of newborns by background characteristics. Newborns in the Dhaka (10.3 percent) and Khulna/Barisal (10.0 percent) divisions were more likely to be wiped within five minutes of birth than newborns in other divisions. Early wiping peaked at 10.5 percent of newborns whose mothers had completed primary education. It was lower both among less educated and more educated women. Early wiping of newborns was higher among children in the fourth household asset quintile compared with those in the other quintiles. It was negatively associated with birth order. The practice of wiping newborns after birth was found to be almost identical in non-project areas, with 9.6 percent wiping within five minutes of birth.

The practice of keeping the newborn warm was not common. Only 1.2 percent were wrapped within the recommended five minutes after birth, while 44.7 percent were wrapped ten minutes or more after birth. Wrapping of newborns within five minutes of birth was positively associated with mother's age and birth order, and negatively associated with maternal education (Table 7.16).

Table 7.14. Use of clean home delivery kits and other instruments to cut the umbilical cord

Percent distribution of most recent non-institutional live births in the three years preceding the survey, by type of instrument used to cut the umbilical cord, and the percentage of instruments boiled before the cord was cut, according to background characteristics, BSSFP 2008.

Background characteristic	Instrument used to cut the umbilical cord								Percentage of instruments boiled before the cord was cut	Number of births
	Blade from delivery bag	Blade from other source	Bamboo strips	Scissors	Other	Cord was not cut	DK	Total		
Mother's age at birth										
10-14	0.0	100.0	0.0	0.0	0.0	0.0	0.0	100.0	96.2	17
15-19	9.2	87.6	1.8	0.8	0.4	0.3	0.0	100.0	85.4	434
20-34	7.9	88.7	2.4	0.5	0.0	0.2	0.2	100.0	86.0	1169
35-49	7.0	87.8	5.1	0.0	0.0	0.0	0.0	100.0	89.7	118
Birth order										
1	9.6	86.4	2.2	1.2	0.0	0.5	0.0	100.0	85.7	454
2-3	8.1	89.2	1.6	0.3	0.2	0.2	0.4	100.0	86.4	811
4-5	7.7	89.8	2.1	0.5	0.0	0.0	0.0	100.0	87.4	332
6+	4.3	87.8	7.9	0.0	0.0	0.0	0.0	100.0	84.1	140
Domains										
Dhaka division	3.7	95.1	0.0	0.7	0.0	0.2	0.2	100.0	86.9	642
Chittagong/Sylhet division	7.3	85.1	6.7	0.7	0.0	0.2	0.0	100.0	85.8	568
Khulna/Barisal division	7.1	88.6	1.4	1.0	0.0	1.0	1.0	100.0	82.4	148
Rajshahi division	16.9	82.2	0.4	0.0	0.4	0.0	0.0	100.0	87.3	378
Mother's education level										
No education	6.5	88.6	4.1	0.3	0.2	0.1	0.1	100.0	84.5	644
Primary incomplete	7.0	91.0	1.7	0.0	0.0	0.0	0.2	100.0	83.4	293
Primary complete	9.4	88.6	0.7	1.0	0.0	0..3	0.0	100.0	90.1	273
Secondary incomplete	8.5	88.4	1.3	0.9	0.0	0.5	0.3	100.0	88.7	438
Secondary complete or higher	17.3	78.3	2.9	0.7	0.0	0.8	0.0	100.0	83.7	88

Background characteristic	Instrument used to cut the umbilical cord								Percentage of instruments boiled before the cord was cut	Number of births
	Blade from delivery bag	Blade from other source	Bamboo strips	Scissors	Other	Cord was not cut	DK	Total		
Household asset quintile										
Lowest	5.5	89.0	4.7	0.0	0.4	0.2	0.2	100.0	82.7	391
Second	6.5	89.5	2.7	1.0	0.0	0.2	0.2	100.0	85.3	372
Middle	8.2	90.2	1.4	0.2	0.0	0.0	0.0	100.0	86.6	355
Fourth	9.4	87.7	1.1	0.6	0.0	0.8	0.4	100.0	86.9	350
Highest	12.3	84.9	1.6	1.2	0.0	0.0	0.0	100.0	91.3	270
Project and Non-project areas										
Project areas	8.1	88.5	2.4	0.6	0.1	0.2	0.2	100.0	86.2	1737
Non-project areas	9.8	87.6	1.6	0.9	0.0	0.2	0.0	100.0	87.7	1748

Table 7.15. Use of substance on stump after cutting umbilical cord

Percent distribution of non-institutional last live births in the three years preceding the survey, by material applied to the cord immediately after cutting and tying it, according to background characteristics, BSSFP 2008.

Background characteristic	Material applied to the cord							Number of births[2]
	Antibiotic	Antiseptic	Mustard oil with garlic	Boric powder	Other[1]	DK	Nothing applied to cord	
Mother's age at birth								
10-14	13.4	17.2	0.0	0.0	8.1	0.0	61.4	17
15-19	8.3	8.7	2.4	3.6	13.1	0.3	63.6	432
20-34	9.5	6.5	2.6	3.5	12.6	0.1	66.1	1166
35-49	6.2	9.2	3.5	0.5	14.3	0.0	68.2	118
Birth order								
1	10.5	8.2	2.0	4.4	12.8	0.4	62.1	452
2-3	9.3	7.7	3.0	2.4	13.0	0.1	65.4	809
4-5	7.0	5.7	2.6	3.8	12.0	0.0	69.2	332
6+	7.2	6.6	2.3	3.2	13.1	0.0	68.8	140
Domains								
Dhaka division	11.7	9.4	1.6	4.2	6.3	0.0	67.1	641
Chittagong/Sylhet division	7.0	4.6	3.6	1.2	19.2	0.4	64.9	567
Khulna/Barisal division	13.9	7.2	4.3	2.4	32.7	0.0	43.8	147
Rajshahi division	5.5	8.1	2.1	5.1	6.4	0.0	72.5	378
Mother's education level								
No education	6.9	5.3	2.3	3.4	13.0	0.1	69.7	644
Primary incomplete	9.4	7.5	4.1	2.5	13.1	0.0	62.3	293
Primary complete[1]	8.0	9.0	1.8	3.9	12.3	0.0	65.9	273
Secondary incomplete	9.6	8.8	2.4	3.6	12.7	0.4	64.6	436
Secondary complete or higher[2]	23.8	8.9	3.2	1.7	12.1	0.0	50.3	87
Household asset quintile								
Lowest	7.8	6.0	1.5	3.7	12.0	0.2	68.4	390
Second	6.8	6.2	2.6	2.2	13.5	0.0	69.3	371
Middle	7.1	5.7	4.0	4.1	13.6	0.0	67.1	355
Fourth	10.5	9.7	3.0	2.5	13.0	0.2	61.7	347
Highest	14.6	10.0	1.8	4.1	11.5	0.5	59.4	270
Project and Non-project areas								
Project areas	9.0	7.3	2.6	3.3	12.8	0.1	65.6	1733
Non-project areas	8.5	8.9	2.2	3.8	13.2	0.3	64.8	1745

[1] Includes spirits/alcohol, chewed rice, turmeric juice/powder, ginger juice, shidur, gentian violet (blue ink), and talcom powder.

[2] Excludes births whose umbilical cord was not cut.

Table 7.16. Newborn care practices

Percentage of non-institutional last live births in the three years preceding the survey, by timing of wiping and wrapping, according to background characteristics, BSSFP 2008.

Background characteristic	Timing of wiping							Timing of wrapping							Number of births
	0-4 minutes	5-9 minutes	10+ minutes	Baby died before wiping	Baby not wiped after birth	DK/ missing	Total	0-4 minutes	5-9 minutes	10+ minutes	Baby died before wrapping	Baby not wrapped after birth	DK/ missing	Total	
Mother's age at birth															
10-14	24.8	25.7	22.6	0.0	22.6	4.3	100.0	0.0	28.6	44.5	0.0	22.6	4.3	100.0	17
15-19	8.4	35.7	25.4	0.7	27.6	2.2	100.0	0.9	24.2	44.6	0.7	27.4	2.2	100.0	434
20-34	7.9	35.2	25.5	0.2	29.0	2.3	100.0	1.3	22.1	45.2	0.5	28.9	2.1	100.0	1169
35-49	4.8	25.8	27.7	1.3	40.4	0.0	100.0	1.4	17.6	39.4	1.3	40.4	0.0	100.0	118
Birth order															
1	8.5	36.5	24.3	0.8	26.2	3.7	100.0	1.0	24.2	44.4	0.7	26.2	3.6	100.0	454
2-3	8.5	35.3	26.9	0.0	27.2	2.0	100.0	1.3	22.9	46.6	0.3	27.1	1.8	100.0	811
4-5	7.3	34.2	23.8	0.5	33.5	0.8	100.0	1.6	21.1	42.6	0.5	33.4	0.8	100.0	332
6+	4.6	24.9	26.4	1.1	42.5	0.5	100.0	0.0	16.9	39.0	2.2	41.4	0.5	100.0	140
Domains															
Dhaka division	10.3	33.0	20.6	0.9	32.6	2.6	100.0	1.9	26.0	36.3	1.2	32.3	2.3	100.0	642
Chittagong/Sylhet division	5.9	37.6	22.1	0.0	33.3	1.1	100.0	0.3	19.9	45.7	0.0	33.0	1.0	100.0	568
Khulna/Barisal division	10.0	42.4	29.5	0.5	14.8	2.9	100.0	1.0	23.8	56.7	0.5	15.2	2.9	100.0	148
Rajshahi division	6.4	29.7	37.7	0.0	23.7	2.5	100.0	1.3	19.5	52.5	0.4	23.7	2.5	100.0	378
Mother's education level															
No education	6.3	32.7	23.9	0.5	35.9	0.6	100.0	1.8	19.0	42.0	0.7	35.9	0.6	100.0	644
Primary incomplete	8.5	31.7	29.7	0.0	27.6	2.5	100.0	1.5	24.4	44.2	0.0	27.4	2.5	100.0	293
Primary complete	10.5	29.5	25.4	0.6	30.5	3.5	100.0	0.6	20.8	44.3	1.4	29.5	3.5	100.0	273
Secondary incomplete	9.1	40.7	24.2	0.3	23.1	2.6	100.0	0.6	26.2	47.6	0.3	23.1	2.1	100.0	438
Secondary complete or higher	5.1	42.8	31.7	0.8	14.6	5.1	100.0	0.0	26.5	52.3	0.0	16.1	5.1	100.0	88
Household asset quintile															
Lowest	5.1	32.0	25.3	0.0	36.7	0.9	100.0	1.3	20.5	40.2	0.0	37.3	0.7	100.0	391
Second	7.7	34.2	26.7	0.4	28.4	2.6	100.0	2.1	18.9	47.4	1.2	27.8	2.6	100.0	372
Middle	8.7	30.4	26.7	0.0	30.3	3.9	100.0	0.6	21.1	44.9	0.2	29.7	3.5	100.0	355
Fourth	11.4	40.6	22.5	1.1	23.1	1.3	100.0	0.4	29.5	44.9	0.9	23.1	1.3	100.0	350
Highest	7.2	36.5	27.1	0.6	26.8	1.9	100.0	1.3	22.5	46.9	0.6	26.9	1.9	100.0	270
Project and Non-project areas															
Project areas	8.0	34.6	25.6	0.4	29.3	2.1	100.0	1.2	22.4	44.7	0.6	29.2	2.0	100.0	1737
Non-project areas	9.6	36.5	23.0	0.5	28.9	1.4	100.0	1.4	24.6	43.4	0.5	28.8	1.4	100.0	1748

The survey also assessed the timing of a newborn's first bath. Table 7.17 shows that nearly half (49.1 percent) of newborns in project areas were given a bath within the first five hours of birth, while 58.6 percent were given a bath in the first 24 hours. Only 11.7 percent received a bath 72 or more hours following birth, which is the recommended practice in Bangladesh. Bathing 72 or more hours after birth was negatively associated with mother's age, but positively associated with maternal education and household asset quintile. Only 9.2 percent of newborns of mothers with no education were bathed at least 72 hours after birth, compared with 21.1 percent of those born to women who had completed secondary or higher education. This statistic occurred with a frequency of only 7.6 percent among women of the lowest asset quintile, against 15.9 percent among those of the highest quintile. Bathing the newborn at least 72 hours after birth occurred most often in Rajshahi (15.7 percent) and least often in Dhaka (7.5 percent). The timing and pattern of the first bath after birth was also similar in the non-project areas.

7.5.3. Breastfeeding

Infant feeding practices play a pivotal role in early childhood development. Poor breastfeeding practices have adverse consequences for the health and nutritional status of children, which also affects their physical and mental development. Infant feeding affects both the mother, by influencing postpartum infertility and overall fertility levels, and the child by influencing nutritional status and overall health. It is recommended that children be fed colostrum (first breast milk) immediately after birth, continue to breastfeed exclusively for the first six months of life, and that children be given solid/semi-solid complementary food beginning with the seventh month of life.

Initial Breastfeeding

Table 7.17A shows the proportion of children born in the three years preceding the survey who were ever breastfed, who started breastfeeding within one hour and within one day of birth, and the proportion who received a pre-lacteal feed and colostrums by background characteristics. Although nearly all last born living children in both project and non-project areas born in the three years preceding the survey were ever breastfed, only 36 percent in both project and non-project areas started doing so within one hour of birth. Eight out of ten children in either domain started breastfeeding within one day of birth. About 1.2 percent of children in project areas and 1.6 percent of children in non-project areas were never breastfed.

Variations in breastfeeding practices by child gender, division, and socioeconomic status were negligible. Mothers with higher levels of education were more likely to initiate breastfeeding within one hour or one day of birth. For instance, of children whose mothers had attained some secondary level of education, about 39 percent received breast milk within one hour of birth, while the corresponding figure for those born of uneducated mothers was 34 percent. Boys were slightly more likely than girls to be breastfed within one hour of birth.

Nine out of ten of the most recently born children in project and non-project areas received colostrums. Receipt of colostrums was positively associated with a mother's education and household asset quintile. Children delivered at a health facility were more likely to receive colostrums than those delivered at home (96.3 versus 92 percent, respectively).

Table 7.17. Newborn care practices, timing of first bath

Percentage of noninstitutional last live births in the three years preceding the survey, by timing of first bath, according to background characteristics, BSSFP 2008.

Background characteristic	Timing of first bath								Number of births
	0-5 hours	6-11 hours	12-23 hours	24-71 hours	72+ hours	Baby died before bath	DK/ missing	Total	
Mother's age at birth									
10-14	47.4	9.1	0.0	30.6	12.9	0.0	0.0	100.0	17
15-19	47.9	6.3	2.2	30.6	11.1	1.4	0.5	100.0	434
20-34	48.6	7.6	2.3	28.2	12.4	0.4	0.4	100.0	1169
35-49	58.7	7.6	1.1	25.0	6.4	1.3	0.0	100.0	118
Birth order									
1	46.4	7.0	1.0	31.4	11.6	1.5	1.1	100.0	454
2-3	47.9	7.6	2.0	29.4	12.8	0.2	0.1	100.0	811
4-5	52.3	6.6	4.8	23.0	12.5	0.5	0.4	100.0	332
6+	57.8	8.1	0.5	28.3	3.2	2.2	0.0	100.0	140
Domains									
Dhaka division	55.5	8.9	1.4	25.1	7.5	0.9	0.7	100.0	642
Chittagong/Sylhet division	53.9	6.1	2.1	23.0	14.1	0.2	0.4	100.0	568
Khulna/Barisal division	41.9	6.2	2.4	38.1	10.0	1.4	0.0	100.0	148
Rajshahi division	33.9	6.8	3.4	39.4	15.7	0.8	0.0	100.0	378
Mother's education level									
No education	55.2	6.5	1.6	26.2	9.2	1.0	0.2	100.0	644
Primary incomplete	48.4	8.4	1.5	27.8	12.9	0.0	0.9	100.0	293
Primary complete	48.8	5.2	2.5	31.2	10.3	1.4	0.6	100.0	273
Secondary incomplete	42.8	9.8	2.9	30.3	13.4	0.3	0.3	100.0	438
Secondary complete or higher	39.3	3.3	3.3	32.3	21.1	0.8	0.0	100.0	88
Household asset quintile									
Lowest	59.2	6.6	1.1	24.9	7.6	0.2	0.4	100.0	391
Second	49.4	8.4	1.6	28.3	10.5	1.4	0.4	100.0	372
Middle	45.6	7.6	2.8	32.0	11.8	0.0	0.2	100.0	355
Fourth	42.9	8.5	3.3	29.5	13.9	1.5	0.4	100.0	350
Highest	46.8	4.9	2.1	29.0	15.9	0.6	0.7	100.0	270
Project and Non-project areas									
Project areas	49.1	7.3	2.2	28.6	11.7	0.7	0.4	100.0	1737
Non-project areas	51.3	6.1	2.0	28.7	10.9	0.8	0.2	100.0	1748

Table 7.17A. Initial breastfeeding

Percentage of last born children in the three years preceding the survey who were ever breastfed, and the percentage who started breastfeeding within one hour and within one day of birth and the percentage who received a prelacteal feed and the percentage who received colostrums, by background characteristics, BSSFP 2008.

Background characteristic	Percentage ever breastfed	Percentage who started breastfeeding within 1 hour of birth	Percentage who started breastfeeding within 1 day of birth[1]	Percentage who received a prelacteal feed[2]	Percentage who received colostrums	Number of children
Sex						
Male	98.8	36.2	85.6	47.4	92.7	980
Female	98.8	35.0	84.0	46.7	92.3	1010
Domains						
Dhaka division	98.7	32.4	87.9	53.8	94.4	719
Chittagong/Sylhet division	98.8	37.0	89.8	35.1	90.3	655
Khulna/Barisal division	99.2	33.3	83.7	49.6	95.8	186
Rajshahi division	98.5	39.6	72.4	53.0	91.4	429
Mother's education level						
No education	98.4	34.4	82.6	46.7	88.4	670
Primary incomplete	98.9	31.2	84.3	47.3	93.2	321
Primary complete	99.1	37.9	86.9	51.0	93.3	302
Secondary incomplete	98.9	39.4	86.8	47.1	95.9	559
Secondary complete or higher	99.0	30.1	83.4	39.7	95.8	138
Assistance at delivery						
Medically trained[3]	97.4	29.9	80.3	41.5	95.4	288
Traditional midwife	99.0	35.8	86.2	48.5	91.7	1457
Other	99.0	41.3	81.5	45.1	93.5	238
No one	100.0	24.2	74.2	50.0	100.0	6
Place of delivery						
Health facility	97.7	27.2	81.0	40.2	96.3	252
At home	98.9	36.8	85.3	48.1	92.0	1737
Other	100.0	0.0	100.0	0.0	100.0	1
Household asset quintile						
Lowest	99.3	36.8	81.9	47.6	89.0	407
Second	98.5	32.1	82.0	48.4	89.2	404
Middle	98.8	37.9	86.6	48.4	94.3	382
Fourth	98.4	35.0	87.5	46.3	95.0	411
Highest	98.8	36.2	86.0	44.7	95.3	386
Project and Non-project areas						
Project areas	98.8	35.5	84.8	47.1	92.5	1990
Non-project areas	98.4	36.4	86.7	46.7	93.1	2055

Note: Table is based on most recent births in the last three years whether the children are living or dead at the time of interview.

[1] Includes children who started breastfeeding within one hour of birth.

[2] Children given something other than breast milk during the first three days of life.

[3] Doctor, nurse/midwife, family welfare visitor, or community skilled birth attendant.

Exclusive Breastfeeding

Breast milk is uncontaminated and contains all the nutrients needed by children in the first few months of life. It is recommended that very young children be exclusively breastfed. Giving a newborn honey, water, sugar, juice, or even baby formula immediately after birth, however, is a common practice in Bangladesh. Any such pre-lacteal feed is an unhealthy practice. Women were asked whether in the first three days after birth, of the last born child in the three years preceding the survey, the child was given anything to drink other than breast milk. Survey results show that about half (47.1 percent in project vs. 46.7 percent in non-project areas) of newborns received some type of pre-lacteal feed within three days after birth. Nearly 52 percent of both project and non-project children were exclusively breastfed, at least in the first three days after birth. About 45 percent were fed with either a water based liquid/juice or other milk/baby formula in the three days after birth. Pronounced differences exist in exclusive breastfeeding by division, maternal education, place of delivery, assistance at delivery, and household asset quintile. Exclusive breastfeeding was highest in Chittagong/Sylhet (at 63.7 percent) and lowest in Dhaka (at 45 percent). It was found to be highest among children of mothers who had completed a secondary or higher level of education, those delivered at a health facility, those whose delivery was assisted by medically trained providers, and among those in the highest household asset quintile (Table 17.7B).

7.6. Child Health

7.6.1. Childhood Vaccination

Immunization of children under one year of age against the six vaccine-preventable diseases (tuberculosis; diphtheria, pertussis, and tetanus (DPT); poliomyelitis; and measles) is a priority in Bangladesh. Children are also commonly vaccinated with a hepatitis B vaccine, although this is not a recommended vaccine in the charter of childhood vaccination. The 2008 BSSFP survey collected information on childhood immunizations for all surviving children born during the five-year period preceding interview. In rural areas, immunizations are routinely recorded on a child health card. However, mothers were less likely to retain the cards than had been anticipated. For each child, they were asked whether they had the card and, if so, to show it to the interviewer. When the card was presented, the date of vaccinations was transferred to the questionnaire. When cards were not available, information was gathered by asking mothers about the immunization histories of their children.

Table 7.17B. Initial breastfeeding

Percentage of last born children in the three years preceding the survey by breastfeeding status during first three days after birth, by background characteristics, BSSFP 2008.

Background characteristic	Percentage never ever breastfed	Breastfeeding and:					Number of children
		Exclusively breastfed	Plain water only	Water based liquid/juice	Milk/baby formula	Other	
Sex							
Male	1.21	51.35	3.43	22.23	22.70	8.54	980
Female	1.24	52.03	2.41	21.86	21.96	9.26	1010
Domains							
Dhaka division	1.26	44.98	3.35	29.92	23.43	6.28	719
Chittagong/Sylhet division	1.16	63.71	1.93	19.31	8.59	12.93	655
Khulna/Barisal division	0.76	49.62	4.55	12.50	28.41	12.50	186
Rajshahi division	1.49	45.52	2.99	17.16	38.81	5.60	429
Mother's education level							
No education	1.58	51.70	2.31	25.33	20.77	7.66	670
Primary incomplete	1.09	51.61	2.25	17.08	22.67	11.88	321
Primary complete	0.94	48.10	4.47	22.35	25.45	9.31	302
Secondary incomplete	1.10	51.80	3.49	21.13	23.72	8.54	559
Secondary complete or higher	0.97	59.35	1.67	20.63	16.64	8.59	138
Assistance at delivery							
Medically trained	2.56	55.91	.46	16.24	24.88	3.85	288
Traditional midwife	1.01	50.51	3.45	23.55	21.65	10.31	1457
Other	.97	53.93	2.02	20.43	23.36	6.66	238
No one	.00	50.00	25.78	.00	24.22	.00	6
Place of delivery							
Health facility	2.33	57.43	0.53	14.61	25.90	3.65	252
At home	1.07	50.85	3.26	23.13	21.82	9.67	1737
Other	0.00	100.00	0.00	0.00	0.00	0.00	1
Household asset quintile							
Lowest	.72	51.63	3.37	23.18	21.02	8.45	407
Second	1.45	50.17	2.55	21.97	25.01	8.70	404
Middle	1.17	50.43	3.71	22.69	21.50	8.73	382
Fourth	1.58	52.16	2.66	23.23	22.34	9.47	411
Highest	1.21	54.13	2.30	19.01	21.69	9.18	386
Project and Non-project areas							
Project areas	1.23	51.70	2.91	22.04	22.33	8.90	1990
Non-project areas	1.56	51.70	3.85	22.18	20.27	9.39	2055

Note: Table is based on most recent births in the last three years whether the children are living or dead at the time of interview.

Vaccination Coverage

Table 7.18 provides specific vaccination rates for children aged 12 to 23 months, as well as vaccination rates by 12 months of age. Overall, 81.4 percent of project area children aged 12-23 months had received all of the recommended vaccines (BCG, three doses of DPT, three doses of polio, and measles) at any time preceding the survey, and 66.2 percent completed the full course of vaccinations before their first birthday (according to the vaccination card and the mother's report). Vaccination rates according to information found recorded on cards averaged approximately 61.3 percent. Although the level of coverage for BCG varied, coverage rates for all three doses of DPT and the first two doses of polio were 90 percent or more. Unfortunately, however, the dropout rates for the second and third doses of DPT and the third dose of polio were relatively substantial. The dropout rates from the first to the third dose of DPT and polio[3] were 4.4 percent and 2.4 percent, respectively. These dropout rates are relatively low when compared to the rates recorded in the 2007 BDHS and previous NSDP surveys. Hepatitis B vaccine coverage ranged from 89 percent for the first dose to 84.9 percent for the third dose. Overall, 6.5 percent of children did not receive any vaccinations.

In non-project areas, the proportion of children aged 12 to 23 months who were fully vaccinated was 80.6 percent. Coverage rates for BCG and measles were 95.0 and 83.3 percent, respectively. Dropout rates in non-project areas from the first to the third doses of DPT and polio vaccines were 6.1 percent and 4.3 percent, respectively. These dropout rates are also substantially less than that observed in other surveys.

The overall vaccination rate in rural BSSFP areas was 81.4 percent, while the rate was 54.4 percent using only information obtained from a vaccination card. The corresponding figures in non-project areas were 80.6 and 55.1 percent, respectively. The prevalence of hepatitis B vaccination in project and non-project areas seemed to be quite high (84.9 percent in project versus 85.1 percent in non-project areas).

Table 7.19A presents vaccination rates (by vaccination card or mothers' report) for project areas by sex, birth order, division, maternal education, and asset quintile. Table 7.19B presents the same information for children in non-project areas. In project areas, boys aged 12 to 23 months were more likely to enjoy full coverage than girls in the same age cohort (by a margin of 9.9 percentage points). Vaccination coverage was related to birth order and maternal education. First-born children were more likely than sixth or higher order children to receive full coverage by a margin of almost 17.1 percentage points. Children with more highly educated mothers were more likely to be fully vaccinated. The proportion of children receiving vaccinations increased with household asset qunitile for all vaccine types. For instance, in project areas, the proportion of children receiving the third dose of DPT vaccination in households in the highest asset quintile was 15 percentage points higher than that in the lowest quintile. The proportion of children receiving no vaccinations was three times higher among the lowest socioeconomic group than among the highest group (12.1 against 4.1 percent). A similar pattern is also evident in non-project areas, as shown in Table 7.19B.

[3] Estimated by dropout rate = (dose 1-dose 3) *100/dose 1.

Table 7.18. Vaccinations by source of information

Percentage of children age 12-23 months who received specific vaccines at any time before the survey, by source of information (vaccination card or mother's report), and percentage vaccinated by 12 months of age, BSSFP 2008.

Source of information	Percentage of children who received:													Number of children
	BCG	DPT 1	DPT 2	DPT 3	Polio 1	Polio 2	Polio 3	Hepatitis 1	Hepatitis 2	Hepatitis 3	Measles	All[2]	No vaccina-tions	
Project Areas														
Vaccinated at any time before survey														
Vaccination card	61.3	61.3	60.7	59.5	60.9	60.3	59.2	58.5	57.8	56.6	54.4	54.4	0.0	387
Mother's report	32.2	32.3	31.9	29.9	30.6	30.6	30.1	30.4	30.2	28.3	29.2	27.0	6.5	245
Either source	93.4	93.5	92.6	89.4	91.5	90.9	89.3	89.0	88.0	84.9	83.6	81.4	6.5	633
Vaccinated by 12 months of age	93.3	92.9	92.4	88.6	91.3	90.6	88.2	88.1	87.7	83.8	73.3	66.2	0.0	633
Non-Project Areas														
Vaccinated at any time before survey														
Vaccination card	64.1	64.1	62.9	61.2	63.8	62.9	61.4	61.9	60.7	59.2	55.5	55.1	0.0	396
Mother's report	30.9	30.9	29.8	28.0	30.8	30.5	29.1	28.3	27.4	25.9	27.9	25.5	5.0	222
Either source	95.0	95.0	92.7	89.2	94.6	93.4	90.5	90.2	88.0	85.1	83.3	80.6	5.0	618
Vaccinated by 12 months of age	94.5	94.1	90.9	88.0	94.1	92.1	89.2	89.4	86.2	83.4	75.0	68.6	0.0	618

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

Table 7.19A. Vaccinations by background characteristics, project areas

Percentage of children age 12-23 months who received specific vaccines at any time before the survey (according to a vaccination card or the mother's report), and percentage with a vaccination card, by background characteristics, BSSFP 2008.

Background characteristic	Percentage of children who received:													Percentage with a vaccination card seen	Number of children
	BCG	DPT 1	DPT 2	DPT 3	Polio 1	Polio 2	Polio 3	Hepatitis 1	Hepatitis 2	Hepatitis 3	Measles	All basic vaccina-tions	No vac-cinations		
Sex															
Male	95.5	95.5	95.2	93.6	93.7	93.7	92.3	91.4	90.9	88.8	87.5	86.5	4.5	59.5	306
Female	91.5	91.7	90.1	85.4	89.4	88.3	86.4	86.7	85.3	81.2	79.9	76.6	8.3	62.9	327
Birth order															
1	93.7	93.7	91.8	88.9	91.3	89.5	88.5	88.8	86.5	83.2	83.8	81.2	6.3	61.7	201
2-3	95.2	95.2	94.8	91.0	93.4	93.4	92.2	89.7	89.1	85.8	86.4	84.4	4.8	65.0	278
4-5	97.6	97.6	97.0	93.8	96.4	96.4	92.6	95.8	95.8	92.6	82.7	81.5	2.4	60.3	107
6+	72.2	73.5	73.5	72.2	69.5	69.5	68.2	70.3	70.3	69.0	68.2	64.1	26.5	39.7	47
Domains															
Dhaka division	97.8	97.8	96.4	92.1	96.4	95.0	93.5	95.7	93.5	89.2	87.1	85.6	2.2	61.9	209
Chittagong/Sylhet division	89.4	89.7	89.1	87.1	86.5	86.5	84.1	85.6	85.6	83.5	81.5	77.4	10.3	57.6	215
Khulna/Barisal division	100.0	100.0	97.6	93.9	97.6	96.3	92.7	92.7	92.7	90.2	89.0	87.8	0.0	76.8	58
Rajshahi division	90.4	90.4	90.4	87.2	89.4	89.4	89.4	83.0	81.9	78.7	79.8	78.7	9.6	59.6	151
Mother's education level															
No education	86.7	87.0	85.9	80.7	82.7	82.0	78.6	83.5	82.7	78.5	75.0	70.9	13.0	53.7	205
Primary incomplete	93.4	93.4	93.4	90.9	92.8	92.8	92.3	86.1	86.1	81.7	82.9	81.8	6.6	65.1	112
Primary complete	97.6	97.6	96.9	93.6	96.8	96.8	94.6	94.4	94.4	91.9	84.8	84.0	2.4	65.1	92
Secondary incomplete	97.3	97.3	95.7	93.5	95.7	94.5	94.1	91.7	90.9	88.7	89.8	87.7	2.7	64.5	177
Secondary complete or higher	100.0	100.0	100.0	100.0	100.0	100.0	100.0	98.7	92.1	92.1	97.3	97.3	0.0	65.7	47
Household asset quintile															
Lowest	87.4	87.9	86.3	80.9	86.5	85.4	83.0	83.6	81.4	76.0	77.2	73.2	12.1	55.1	136
Second	90.5	90.5	90.0	86.5	87.8	87.2	84.9	87.8	87.8	84.8	73.7	71.0	9.5	56.1	124
Middle	98.5	98.5	97.9	91.1	93.9	93.9	91.3	91.3	91.3	85.8	86.1	83.0	1.5	68.1	108
Fourth	95.6	95.6	94.0	93.0	94.1	93.0	92.0	91.3	90.2	88.1	88.2	87.2	4.4	69.0	134
Highest	95.9	95.9	95.9	95.9	95.4	95.4	95.4	91.3	90.1	90.1	92.9	92.4	4.1	59.0	130
Total	93.4	93.5	92.6	89.4	91.5	90.9	89.3	89.0	88.0	84.9	83.6	81.4	6.5	61.3	633

Table 7.19 B. Vaccinations by background characteristics, non-project areas

Percentage of children age 12-23 months who received specific vaccines at any time before the survey (according to a vaccination card or the mother's report), and percentage with a vaccination card, by background characteristics, BSSFP 2008.

Background characteristic	Percentage of children who received:													Percentage with a vaccination card seen	Number of children
	BCG	DPT 1	DPT 2	DPT 3	Polio 1	Polio 2	Polio 3	Hepatitis 1	Hepatitis 2	Hepatitis 3	Measles	All basic vaccinations	No vaccinations		
Sex															
Male	95.2	95.2	93.0	88.9	94.7	93.5	90.0	91.2	89.1	85.0	82.7	79.7	4.8	68.1	321
Female	94.7	94.7	92.4	89.5	94.5	93.4	91.0	89.1	86.8	85.2	84.0	81.6	5.3	59.7	297
Birth order															
1	95.4	95.4	92.5	88.2	94.3	94.0	88.6	93.6	91.4	87.1	84.5	79.7	4.6	62.8	208
2-3	95.9	95.9	94.7	92.4	95.9	94.7	93.5	89.0	87.9	85.6	84.2	83.3	4.1	69.1	284
4-5	94.8	94.8	91.8	86.5	94.8	91.8	91.1	89.7	83.7	82.4	82.6	78.7	5.2	59.5	91
6+	86.1	86.1	79.7	76.3	86.1	84.3	76.3	81.5	79.7	76.3	71.1	69.3	13.9	43.9	36
Mother's education level															
No education	89.6	89.6	85.9	81.3	89.6	87.2	83.6	85.8	82.2	77.8	75.1	72.7	10.4	61.2	180
Primary incomplete	94.5	94.5	93.8	90.0	94.5	93.8	90.7	89.0	88.4	86.1	81.8	78.0	5.5	64.5	94
Primary complete	95.3	95.3	93.3	91.3	95.3	93.3	91.3	88.8	87.4	85.4	79.7	79.7	4.7	71.0	84
Secondary incomplete	98.7	98.7	96.1	93.0	97.6	97.3	93.8	94.1	91.6	88.4	90.1	86.4	1.3	64.8	206
Secondary complete or higher	98.9	98.9	98.9	96.2	98.9	98.9	98.9	94.0	94.0	94.0	93.1	90.4	1.1	59.4	55
Household asset quintile															
Lowest	92.4	92.4	88.2	84.0	90.5	88.9	84.9	88.8	85.4	80.4	80.3	77.1	7.6	62.0	129
Second	94.5	94.5	89.8	85.3	94.5	91.7	87.9	88.8	83.8	80.5	83.1	79.1	5.5	61.1	120
Middle	92.2	92.2	92.2	88.8	92.2	92.2	90.2	89.5	89.5	86.1	75.9	74.5	7.8	66.6	104
Fourth	99.4	99.4	97.6	94.4	99.4	98.9	95.2	93.2	92.6	90.8	88.1	83.6	0.6	68.5	113
Highest	96.2	96.2	95.4	93.0	96.2	95.4	94.0	90.8	89.2	87.8	87.6	86.7	3.8	63.2	153
Total	95.0	95.0	92.7	89.2	94.6	93.4	90.5	90.2	88.0	85.1	83.3	80.6	5.0	64.1	618

Sources of Vaccination

Government satellite clinics and hospitals, Smiling Sun satellite clinics, and joint Smiling Sun-EPI sessions were the most common sources of vaccination in project areas (see Table 7.20). Government satellite clinics provided approximately 40.8 percent of BCG vaccinations in project areas, followed by Smiling Sun satellite clinics (26.5 percent), joint Smiling Sun-EPI sessions (12.6 percent), other government clinics or hospitals (7.2 percent), Smiling Sun static clinics (6.5 percent), and Health Assistants/Family Welfare Visitors (6.3 percent). In non-project areas, government satellite clinics were by far the most important source, accounting for 78 percent of BCG vaccination, followed distantly by government clinics/hospitals at 10.5 percent and HA/FWA at 8.2 percent. The sources of all other vaccines in project and non-project areas were almost identical.

Table 7.20. Source of vaccinations

Percentage distribution of source of vaccinations for children age 12-23 months who received specific vaccinations, BSSFP 2008.

	BSSFP project areas	Non-project areas
Source of BCG vaccination		
Govt. Clinic/Hospital	7.2	10.5
Govt. Satellite clinic	40.8	77.7
HA/FWA	6.3	8.2
Smiling Sun static clinic	6.5	1.0
Smiling Sun satellite clinic	26.5	0.8
Joint Smiling Sun-Govt. EPI session	12.6	0.5
Other NGO clinic/hospital	0.0	0.9
Private clinic/hospital	0.0	0.2
Private doctor	0.1	0.1
Other	0.0	0.0
Total	100.0	100.0
Number	591	587
Source of Polio-3 vaccination		
Govt. Clinic/Hospital	7.6	10.0
Govt. Satellite clinic	41.2	78.7
HA/FWA	5.7	8.4
Smiling Sun static clinic	6.7	0.5
Smiling Sun satellite clinic	26.7	0.4
Joint Smiling Sun-Govt. EPI session	11.9	0.6
Other NGO clinic/hospital	0.0	1.0
Private clinic/hospital	0.0	0.3
Private doctor	0.1	0.1
Other	0.0	0.0
Total	100.0	100.0
Number	563	546

	BSSFP project areas	Non-project areas
Source of DPT-3 vaccination		
Govt. Clinic/Hospital	7.4	10.0
Govt. Satellite clinic	40.9	79.1
HA/FWA	5.7	8.4
Smiling Sun static clinic	6.7	0.2
Smiling Sun satellite clinic	26.8	0.4
Joint Smiling Sun-Govt. EPI session	12.4	0.6
Other NGO clinic/hospital	0.0	1.0
Private clinic/hospital	0.0	0.1
Private doctor	0.1	0.1
Other	0.0	0.0
Total	100.0	100.0
Number	565	552
Source of measles vaccination		
Govt. Clinic/Hospital	7.5	10.2
Govt Satellite clinic	39.5	78.8
HA/FWA	5.7	7.8
Smiling Sun static clinic	6.9	0.8
Smiling Sun satellite clinic	27.5	0.4
Joint Smiling Sun-Govt. EPI session	12.6	0.6
Other NGO clinic/hospital	0.0	1.0
Private clinic/hospital	0.0	0.1
Private doctor	0.3	0.1
Other	0.0	0.0
Total	100.0	100.0
Number	529	515
Source of Hepatitis B-3 vaccination		
Govt. Clinic/Hospital	6.8	9.6
Govt. Satellite clinic	41.9	80.3
HA/FWA	4.7	7.9
Smiling Sun static clinic	6.2	0.2
Smiling Sun satellite clinic	27.8	0.4
Joint Smiling Sun-Govt. EPI session	12.5	0.3
Other NGO clinic/hospital	0.0	1.0
Private clinic/hospital	0.0	0.1
Private doctor	0.1	0.1
Other	0.0	0.0
Total	100.0	100.0
Number	538	526

Use of Sources by Wealth Quintile

Table 7.21 provides vaccine sources by wealth quintiles for project and non-project areas. In both rural project and non-project areas, private sources were rarely used for vaccination. Of children receiving vaccination from government sources, a higher proportion came from middle household asset quintiles. This pattern was almost the same in project and non-project areas and across all vaccination types. Of those vaccinated at Smiling Sun clinic sources, a higher proportion were from the lowest asset quintile. For example, 38.4 percent from the lowest quintile received DPT-3 from Smiling Sun satellite clinics, compared to 24.7 percent from highest quintile.

7.6.2. Prevalence and Treatment of Acute Respiratory Infection

Acute respiratory infection (ARI) is defined as a cough with either rapid or difficult breathing or chest in drawing. ARI is a major contributing factor to high childhood mortality in Bangladesh. Along with other symptoms of ARI (cough, and difficult or rapid breathing or chest in-drawing), the infection can also be accompanied by fever. Prompt diagnosis and treatment with antibiotics can significantly reduce mortality. Prevalence of ARI symptoms was estimated by asking mothers if their children under five years of age had the core symptoms mentioned above in the two weeks preceding the survey. They were also asked about fever. Table 7.22 provides the percentage of children below five years of age with the selected symptoms of ARI.

In project areas, 5.45 percent of children under five had ARI symptoms in the two weeks preceding the survey. Among these children, 32.6 percent sought treatment or advice from a trained health facility or provider. The prevalence of ARI was slightly higher and the proportion for whom care was sought was four percentage points higher in non-project areas. Unsurprisingly, ARI prevalence was higher among children less than one year of age. More male (6.16 percent) than female (4.75 percent) children were reported to have symptoms of ARI, and care-seeking for ARI was much more common for boys (34.2 percent) than girls (30.4 percent).

Maternal education appears to have been associated both with the likelihood of ARI and seeking treatment. Children of more educated mothers were less likely to suffer from ARI but more likely to receive treatment. There was no clear association between ARI and socioeconomic status.

Table 7.21. Source of vaccinations by wealth quintile

Percentage of source of vaccinations for children age 12-23 months who received specific vaccinations by wealth quintiles, according to project and non-project areas, BSSFP 2008.

	Project areas						Non-project areas					
	Lowest	Second	Middle	Fourth	Highest	Total	Lowest	Second	Middle	Fourth	Highest	Total
Source of BCG vaccination												
Govt. Clinic/Hospital	7.0	3.2	2.0	8.8	13.8	7.2	12.4	4.9	11.1	8.0	15.0	10.5
Govt. SC	30.9	49.0	43.5	42.5	38.6	40.8	69.2	82.5	81.8	80.9	75.9	77.7
HA/FWA	7.3	6.4	9.6	3.3	5.6	6.3	14.4	9.7	4.8	6.0	5.8	8.2
Smiling Sun static clinic	5.7	5.2	6.6	4.8	10.1	6.5	1.2	1.5	0.6	1.9	0.0	1.0
Smiling Sun satellite clinic	36.3	24.8	21.6	24.8	24.7	26.5	1.4	0.0	0.0	2.0	0.4	0.8
Joint Smiling Sun-Govt. EPI session	12.7	10.7	16.8	15.9	7.3	12.6	0.0	1.5	0.0	0.7	0.5	.05
Other NGO clinic/hospital	0.0	0.0	0.0	0.0	0.0	0.0	1.4	0.0	1.7	0.0	1.4	0.9
Private clinic/hospital	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.9	0.2
Private doctor	0.0	0.6	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.6	0.0	.0.1
Other												
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number	119	113	107	128	125	591	119	113	96	112	147	587
Source of Polio-3 vaccination												
Govt. Clinic/Hospital	3.5	2.1	1.1	4.7	6.7	3.9	6.5	2.4	4.1	3.7	7.2	4.9
Govt. SC	14.8	26.5	23.1	23.1	18.1	20.9	35.1	39.4	40.0	38.0	41.0	38.8
HA/FWA	4.0	3.5	3.9	1.2	2.4	2.9	7.6	5.3	2.4	2.3	3.2	4.1
Smiling Sun static clinic	3.1	2.5	3.7	2.7	4.7	3.4	0.0	0.8	0.3	0.3	0.0	0.3
Smiling Sun satellite clinic	19.3	12.1	11.7	13.4	11.6	13.6	0.0	0.0	0.0	1.0	0.0	0.2
Joint Smiling Sun-Govt. EPI session	5.4	4.3	8.9	9.0	3.4	6.0	0.0	0.8	0.0	0.3	0.3	0.3
Other NGO clinic/hospital	0.0	0.0	0.0	0.0	0.0	0.0	0.8	0.0	0.9	0.0	0.8	0.5
Private clinic/hospital	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.1
Private doctor	0.0	0.3	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.3	0.0	0.1
Other												
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number	109	107	100	122	125	563	109	101	92	104	141	546
Source of DPT-3 vaccination												
Govt. Clinic/Hospital	7.6	2.7	2.2	8.6	14.3	7.4	13.1	4.9	9.2	7.8	13.6	10.0
Govt. SC	29.4	51.3	43.3	42.5	38.6	40.9	70.2	82.8	83.4	83.3	77.5	79.1
HA/FWA	7.9	6.7	7.5	2.1	5.1	5.7	15.2	10.7	5.0	5.0	6.5	8.4
Smiling Sun static clinic	6.2	4.9	7.1	4.9	10.1	6.7	0.0	0.0	0.7	0.6	0.0	0.2
Smiling Sun satellite clinic	38.4	23.9	22.6	24.3	24.7	26.8	0.0	0.0	0.0	2.1	0.0	0.4
Joint Smiling Sun-Govt. EPI session	10.7	9.8	17.3	17.6	7.3	12.4	0.0	1.6	0.0	0.7	0.5	0.6

	Project areas						Non-project areas					
	Lowest	Second	Middle	Fourth	Highest	Total	Lowest	Second	Middle	Fourth	Highest	Total
Other NGO clinic/hospital	0.0	0.0	0.0	0.0	0.0	0.0	1.5	0.0	1.8	0.0	1.5	1.0
Private clinic/hospital	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.4	0.1
Private doctor	0.0	0.7	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.6	0.0	0.1
Other												
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number	110	107	99	124	125	565	108	102	93	107	142	552
Source of measles vaccination												
Govt. Clinic/Hospital	7.8	1.4	1.6	9.1	14.8	7.5	14.3	3.7	8.7	7.8	14.4	10.2
Govt. SC	28.6	50.2	42.2	39.9	38.2	39.5	71.4	82.6	82.6	83.5	76.1	78.8
HA/FWA	7.7	6.2	7.9	2.2	5.3	5.7	12.7	10.4	5.8	3.0	6.9	7.8
Smiling Sun static clinic	6.5	5.7	7.5	5.2	9.4	6.9	0.0	1.7	0.8	2.1	0.0	0.8
Smiling Sun satellite clinic	38.8	25.6	23.3	25.1	24.9	27.5	0.0	0.0	0.0	2.2	0.0	0.4
Joint Smiling Sun-Govt. EPI session	10.6	10.8	15.9	18.6	7.5	12.6	0.0	1.7	0.0	0.7	0.6	0.6
Other NGO clinic/hospital	0.0	0.0	0.0	0.0	0.0	0.0	1.6	0.0	2.1	0.0	1.6	1.0
Private clinic/hospital	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.1
Private doctor	0.0	0.0	1.6	0.0	0.0	0.3	0.0	0.0	0.0	0.6	0.0	0.1
Other												
Total	21.2	16.8	18.6	22.7	20.7	100.0	19.7	19.9	15.3	19.6	25.4	100.0
Number	105	92	93	118	121	529	103	100	79	99	134	515
Source of Hepatitis B-3 vaccination												
Govt. Clinic/Hospital	5.9	2.7	2.3	7.6	13.9	6.8	13.7	5.2	7.7	8.1	11.9	9.6
Govt. SC	31.3	51.7	42.9	43.7	39.8	41.9	70.4	84.1	84.7	83.2	80.2	80.3
HA/FWA	6.9	6.8	6.2	1.1	3.5	4.7	14.3	10.7	5.1	4.6	5.4	7.9
Smiling Sun static clinic	5.0	4.4	7.5	5.1	8.8	6.2	0.0	0.0	0.7	0.6	0.0	0.2
Smiling Sun satellite clinic	39.6	24.4	23.3	25.4	26.3	27.8	0.0	0.0	0.0	2.2	0.0	0.4
Joint Smiling Sun-Govt. EPI session	11.4	9.3	17.7	17.1	7.7	12.5	0.0	0.0	0.0	0.7	0.6	0.3
Other NGO clinic/hospital	0.0	0.0	0.0	0.0	0.0	0.0	1.6	0.0	1.8	0.0	1.6	1.0
Private clinic/hospital	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	00	0.5	0.1
Private doctor	0.0	0.7	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.6	0.0	0.1
Other												
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number	103	105	93	119	118	538	103	96	90	102	134	526

Table 7.22. Prevalence and treatment of symptoms of ARI

Among children under age five, the percentage who had symptoms of acute respiratory infection (ARI) in the two weeks preceding the survey and among children with symptoms of ARI, the percentage for whom advice or treatment was sought from a health facility or provider, according to background characteristics, BSSFP 2008.

Background characteristic	Children under age five		Children under age five with symptoms of ARI					
	Percentage with symptoms of ARI[1]	Number of children	Percentage for whom advice or treatment was sought from a health facility or provider[2]	Pharmacy	Village doctor	Other	No one	Number of children
Age of child								
<6 months	5.14	253	46.5	20.0	11.6	10.3	11.6	13
6-11 months	9.71	440	31.1	19.8	28.7	10.0	10.4	43
12-23 months	5.94	700	29.3	26.2	20.2	8.8	15.6	42
24-35 months	5.67	649	28.5	32.9	15.9	12.3	10.5	37
36-47 months	4.17	678	39.2	12.4	26.4	5.3	16.8	28
48-59 months	3.13	606	31.5	10.4	15.5	7.9	34.7	19
Sex								
Male	6.16	1,658	34.2	21.3	18.4	11.5	14.6	102
Female	4.75	1,668	30.4	22.4	24.8	6.3	16.0	79
Domains								
Dhaka division	5.07	935	29.6	31.8	20.0	6.6	12.0	47
Chittagong/Sylhet division	5.10	1,517	45.1	18.6	19.5	9.4	7.4	77
Khulna/Barisal division	6.12	605	22.3	13.7	31.2	5.8	27.0	37
Rajshahi division	7.26	270	9.7	25.4	11.3	21.8	31.9	20
Birth Order								
1	5.14	1,201	14.6	22.0	31.7	17.1	14.6	62
2-3	4.91	1,108	40.7	25.6	12.8	4.7	16.3	54
4-5	8.66	310	26.3	21.1	26.3	7.9	18.4	27
6+	5.43	708	54.2	16.7	12.5	4.2	12.5	38

Background characteristic	Children under age five		Children under age five with symptoms of ARI					
	Percentage with symptoms of ARI[1]	Number of children	Percentage for whom advice or treatment was sought from a health facility or provider[2]	Pharmacy	Village doctor	Other	No one	Number of children
Mother's education level								
No education	5.35	1,167	18.0	21.6	28.9	9.2	22.3	63
Primary incomplete	5.32	591	32.3	31.5	11.6	16.6	8.0	31
Primary complete	6.33	471	41.6	23.3	9.8	7.4	17.9	30
Secondary incomplete	6.22	874	45.2	13.3	24.2	6.6	10.7	54
Secondary complete or higher	1.42	222	20.0	60.0	20.0	0.0	0.0	3
Household asset quintile								
Lowest	5.85	687	18.5	24.1	31.4	7.1	18.9	40
Second	4.66	719	28.0	26.9	12.5	18.3	14.4	34
Middle	6.76	628	50.6	14.0	18.7	4.6	12.1	42
Fourth	6.91	649	29.7	19.9	24.4	6.3	19.7	45
Highest	3.17	644	36.5	29.1	13.5	14.8	6.2	20
Project and Non-project areas								
Project areas	5.45	3,326	32.6	21.8	21.2	9.3	15.2	181
Non-project areas	5.53	3,442	36.5	22.3	22.1	5.9	13.2	190

[1] Symptoms of ARI (cough accompanied by short, rapid breathing which was chest-related) is considered a proxy for pneumonia.

[2] Includes public & NGO health facilities, private clinic/hospital, qualified doctor.

Table 7.23 presents sources of treatment for children who had ARI during the two weeks preceding interview. About 15 percent of children did not receive any sort of treatment. In project areas, the private medical sector commanded more than three-fourths of the treatment market. Smiling Sun clinics had only a tiny market share (4.4 percent). Treatment seeking for ARI was highest in Rajshahi (at 87.5 percent), and lowest in Khulna/Barisal (at 81.6 percent) division.

Children in the higher household asset quintiles were more likely to receive care/treatment for ARI and to use private medical sources (Table 7.24A and Table 7.24B). In project areas, a much higher proportion of children in the lowest asset quintile (18.9 percent) did not receive any treatment as compared with those in the highest one (6.2 percent). There were too few Smiling Sun clinic patrons to make comparisons across household asset quintiles. Treatment seeking patterns for ARI were essentially the same in non-project areas.

7.6.3. Vitamin A Supplementation

For many years, Bangladesh has carried out the distribution of vitamin A supplementation for children, with the recommended first dose being given around the time of measles vaccination at 9-12 months of age. In recent years, vitamin A supplementation has also been included in the twice-yearly National Immunization Days in the form of biannual booster doses.

The 2008 rural BSSFP survey asked mothers with children aged one to five years if their youngest child had received a vitamin A capsule in the six months prior to the survey. A question was also asked about the source of vitamin A. Table 7.25 provides the distribution of vitamin A supplementation for children 9-59 months of age. The percentage receiving vitamin A supplementation was slightly lower in project (75.7 percent) than non-project (78.1 percent) areas. There was some variation across divisions, from a high of 78.3 percent in Rajshahi to a low of 74.5 percent in Dhaka. Children in the highest asset quintile were about 10 percentage points more likely to receive vitamin A than those in the lowest quintile. A similar relationship was observed between household asset quintiles and vitamin A consumption in non-project areas.

Table 7.26 provides the sources of vitamin A for children (who were the most recent birth in the last five years) who received vitamin A in the last six months. In project areas, nearly 43 percent of children received vitamin A from Smiling Sun and joint Smiling Sun-EPI sources, against 56.7 percent from government sources. In non-project areas, about 97 percent of recipients obtained vitamin A from government sources.

Table 7.23. Source of treatment of ARI

Among children with symptoms of ARI, the percentage for whom advice or treatment was sought from a health facility by source of treatment, BSSFP 2008.

	BSSFP project areas					
	Dhaka division	Chittagong/ Sylhet division	Khulna/ Barisal division	Rajshahi division	Total	**Non-project areas**
Sought treatment						
Yes	85.4	83.7	81.6	87.5	84.8	86.8
No	14.6	16.3	18.4	12.5	15.2	13.2
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number	62	54	27	38	181	190
Source of treatment						
Home	0.0	0.0	0.0	0.0	0.0	1.7
Medical person at home	0.0	0.0	0.0	0.0	0.0	1.7
Non-medical person at home	0.0	0.0	0.0	0.0	0.0	0.0
Public sector	5.7	22.2	3.2	14.3	12.1	22.0
Hospital/Medical college	2.9	5.6	0.0	4.8	3.7	6.3
Family welfare center	2.9	5.6	0.0	0.0	2.6	6.9
Upazila health complex	0.0	11.1	3.2	9.5	5.8	6.8
MCWC	0.0	0.0	0.0	0.0	0.0	0.9
Rural dispensary/community clinic	0.0	0.0	0.0	0.0	0.0	0.0
Satellite clinic/EPI outreach site	0.0	0.0	0.0	0.0	0.0	0.0
HA	0.0	0.0	0.0	0.0	0.0	0.0
FWA	0.0	0.0	0.0	0.0	0.0	1.0
Smiling Sun	2.9	1.4	6.5	9.5	4.4	0.0
Static clinic	0.0	0.0	0.0	0.0	0.0	0.0
Satellite clinic	.0	1.4	6.5	9.5	3.4	0.0
Community service provider (CSP)/ Depotholder	2.9	0.0	0.0	0.0	1.0	0.0
Other NGO	0.0	0.0	0.0	0.0	0.0	0.0
MARIE STOPES clinic/hospital	0.0	0.0	0.0	0.0	0.0	0.0
UPHCP	0.0	0.0	0.0	0.0	0.0	0.0
Hospital/clinic	0.0	0.0	0.0	0.0	0.0	0.0
Satellite clinic	0.0	0.0	0.0	0.0	0.0	0.0
Fieldworker	0.0	0.0	0.0	0.0	0.0	0.0
Depotholder	0.0	0.0	0.0	0.0	0.0	0.0
Private medical sector	88.6	75.0	90.3	76.2	82.1	75.5
Private hospital/clinic	2.9	2.8	9.7	14.3	6.3	5.5
Qualified doctor	8.6	22.2	12.9	23.8	16.6	13.9
Village doctor	37.1	15.3	32.3	14.3	25.0	25.5
Pharmacist/pharmacy	25.7	30.6	25.8	19.0	25.7	25.7
Homeopath	14.3	2.8	9.7	4.8	8.1	5.0
Traditional doctor/kabiraj	0.0	1.4	0.0	0.0	0.4	0.0
Other private	2.9	1.4	0.0	0.0	1.4	0.8
Shop	2.9	1.4	0.0	0.0	1.4	0.8
Relatives/friends	0.0	0.0	0.0	0.0	0.0	0.0
Other	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 Women	53	46	22	34	154	165

Table 7.24 A. Source of treatment of ARI by project area

Among children with symptoms of ARI, the percentage for whom advice or treatment was sought by source of treatment according to wealth quintile, BSSFP 2008.

	Household asset quintile					
	Lowest	Second	Middle	Fourth	Highest	**Total**
Sought treatment						
Yes	81.1	85.6	87.9	80.3	93.8	84.8
No	18.9	14.4	12.1	19.7	6.2	15.2
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number	40	34	42	45	20	181
Source of treatment						
Home	0.0	0.0	0.0	0.0	0.0	0.0
Medical person at home	0.0	0.0	0.0	0.0	0.0	0.0
Non-medical person at home	0.0	0.0	0.0	0.0	0.0	0.0
Public sector	9.7	15.6	19.3	7.0	6.6	12.1
Hospital/Medical college	1.9	7.8	5.7	1.8	0.0	3.7
Family welfare center	1.9	2.2	5.7	1.8	0.0	2.6
Upazila health complex	5.8	5.6	7.9	3.5	6.6	5.8
MCWC	0.0	0.0	0.0	0.0	0.0	0.0
Rural Dispensary/community clinic	0.0	0.0	0.0	0.0	0.0	0.0
Satellite clinic/EPI outreach site	0.0	0.0	0.0	0.0	0.0	0.0
HA	0.0	0.0	0.0	0.0	0.0	0.0
FWA	0.0	0.0	0.0	0.0	0.0	0.0
Smiling sun	4.9	5.2	1.7	8.4	0.0	4.4
Static clinic	0.0	0.0	0.0	0.0	0.0	0.0
Satellite clinic	4.9	.0	1.7	8.4	0.0	3.4
Community service provider (CSP)/ Depotholder	0.0	5.2	0.0	0.0	0.0	1.0
Other NGO	0.0	0.0	0.0	0.0	0.0	0.0
MARIE STOPES clinic/hospital	0.0	0.0	0.0	0.0	0.0	0.0
UPHCP	0.0	0.0	0.0	0.0	0.0	0.0
Hospital/clinic	0.0	0.0	0.0	0.0	0.0	0.0
Satellite clinic	0.0	0.0	0.0	0.0	0.0	0.0
Fieldworker	0.0	0.0	0.0	0.0	0.0	0.0
Depotholder	0.0	0.0	0.0	0.0	0.0	0.0
Private medical sector	83.4	79.2	79.0	84.6	85.5	82.1
Private hospital/clinic	0.0	2.5	8.6	7.9	15.4	6.3
Qualified doctor	8.2	14.7	28.0	13.6	16.9	16.6
Village doctor	38.7	14.6	21.2	30.4	14.4	25.0
Pharmacist/pharmacy	29.8	31.4	15.9	24.8	31.0	25.7
Traditional doctor/kabiraj	6.8	16.1	5.3	6.1	7.9	8.1
Homeopath	0.0	0.0	0.0	1.8	0.0	0.4
Other private	1.9	0.0	0.0	0.0	7.9	1.4
Shop	1.9	0.0	0.0	0.0	7.9	1.4
Relatives/friends	0.0	0.0	0.0	0.0	0.0	0.0
Other	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 Women	33	29	37	36	19	154

Table 7.24B. Source of treatment of ARI by non-project area

Among children with symptoms of ARI, the percentage for whom advice or treatment was sought by source of treatment according to wealth quintile, BSSFP 2008.

	Household asset quintile					Total
	Lowest	Second	Middle	Fourth	Highest	
Sought treatment						
Yes	84.9	81.7	91.7	88.1	88.3	86.8
No	15.1	18.3	8.3	11.9	11.7	13.2
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number	41	42	40	33	34	190
Source of treatment						
Home	0.0	1.8	4.0	2.6	0.0	1.7
Medical person at home	0.0	1.8	4.0	2.6	0.0	1.7
Non-medical person at home	0.0	0.0	0.0	0.0	0.0	0.0
Public sector	21.7	15.6	28.6	26.9	16.9	22.0
Hospital/Medical college	9.5	0.0	4.5	16.5	2.5	6.3
Family welfare center	2.1	9.0	14.4	7.8	.0	6.9
Upazila health complex	10.0	1.8	9.7	2.6	9.5	6.8
MCWC	0.0	0.0	0.0	0.0	4.9	0.9
Rural Dispensary/community clinic	0.0	0.0	0.0	0.0	0.0	0.0
Satellite clinic/EPI outreach site	0.0	0.0	0.0	0.0	0.0	0.0
HA	0.0	0.0	0.0	0.0	0.0	0.0
FWA	.0	4.8	.0	.0	.0	1.0
Smiling Sun	0.0	0.0	0.0	0.0	0.0	0.0
Static clinic	0.0	0.0	0.0	0.0	0.0	0.0
Satellite clinic	0.0	0.0	0.0	0.0	0.0	0.0
Community service provider (CSP)/ Depotholder	0.0	0.0	0.0	0.0	0.0	0.0
Other NGO	0.0	0.0	0.0	0.0	0.0	0.0
MARIE STOPES clinic/hospital	0.0	0.0	0.0	0.0	0.0	0.0
UPHCP	0.0	0.0	0.0	0.0	0.0	0.0
Hospital/clinic	0.0	0.0	0.0	0.0	0.0	0.0
Satellite clinic	0.0	0.0	0.0	0.0	0.0	0.0
Fieldworker	0.0	0.0	0.0	0.0	0.0	0.0
Depotholder	0.0	0.0	0.0	0.0	0.0	0.0
Private medical sector	76.5	82.6	65.4	70.6	83.1	75.5
Private hospital/clinic	4.3	2.2	.0	9.4	13.8	5.5
Qualified doctor	5.7	8.4	15.7	22.3	19.1	13.9
Village doctor	24.7	44.5	23.5	13.7	18.2	25.5
Pharmacist/pharmacy	41.9	18.9	17.8	23.1	27.0	25.7
Traditional doctor/kabiraj	0.0	0.0	0.0	0.0	0.0	0.0
Homeopath	0.0	8.7	8.4	2.1	4.9	5.0
Other private	1.8	0.0	2.0	0.0	0.0	0.8
Shop	1.8	0.0	2.0	0.0	0.0	0.8
Relatives/friends	0.0	0.0	0.0	0.0	0.0	0.0
Other	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 Women	35	35	37	29	30	165

Table 7.25. Vitamin A supplementation

Percentage of children 9-59 months of age (most recent birth in the last five years) receiving vitamin A in the last six months by background characteristics, BSSFP 2008.

	Project areas					Non-project areas				
	Yes	No	DK/ missing	Total	Number	Yes	No	DK/ missing	Total	Number
Domains										
Dhaka division	74.5	25.5	0.0	100.0	842					
Chittagong/Sylhet division	75.5	24.1	0.4	100.0	740					
Khulna/Barisal division	75.4	24.3	0.3	100.0	232					
Rajshahi division	78.3	21.0	0.6	100.0	503					
Mother's education										
No education	71.9	27.7	0.4	100.0	815	76.3	23.5	0.2	100.0	847
Primary incomplete	74.5	25.1	0.4	100.0	401	78.4	21.0	0.6	100.0	375
Primary complete	77.8	22.0	0.2	100.0	339	79.2	20.8	0.0	100.0	299
Secondary incomplete	78.0	21.7	0.2	100.0	602	78.9	20.8	0.3	100.0	703
Secondary complete or higher	85.4	14.3	0.4	100.0	160	81.5	18.5	0.0	100.0	196
Household asset quintile										
Lowest	71.8	28.1	0.1	100.0	457	72.2	27.2	0.6	100.0	463
Second	72.1	27.4	0.5	100.0	470	78.1	21.8	0.1	100.0	479
Middle	76.7	23.3	0.0	100.0	467	79.1	20.6	0.4	100.0	452
Fourth	75.9	23.5	0.6	100.0	459	83.0	17.0	0.0	100.0	462
Highest	82.1	17.6	0.3	100.0	466	78.3	21.5	0.2	100.0	565
Total	75.7	24.0	0.3	100.0	2,318	78.1	21.6	0.3	100.0	2,420

Table 7.26. Source of vitamin-A

Source of vitamin A for children 9-59 months of age (most recent birth in the last five years) who received vitamin A in the last six months by asset quintiles, BSSFP 2008.

Source of vitamin-A	Household asset quintile					Total
	Lowest	Second	Middle	Fourth	Highest	
BSSFP project areas						
Govt. Clinic/Hospital	3.2	5.9	6.2	3.6	7.1	5.3
Govt. SC	37.6	42.2	40.9	48.0	47.2	43.3
HA/FWA	11.1	8.9	8.5	5.4	7.0	8.1
Smiling Sun static clinic	3.9	4.8	2.1	2.5	6.1	3.9
Smiling Sun satellite clinic	30.7	27.2	22.9	22.5	20.9	24.7
Joint Smiling Sun-Govt. EPI session	13.6	10.8	19.2	17.4	11.1	14.4
Other NGO clinic/hospital	0.0	0.0	0.2	0.0	0.0	0.0
Private clinic/hospital	0.0	0.0	0.0	0.2	0.2	0.1
Private doctor	0.0	0.2	0.0	0.5	0.4	0.2
Other	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	328	339	358	348	383	1755
Non-project areas						
Govt. Clinic/Hospital	8.9	5.8	8.1	6.7	9.9	7.9
Govt. SC	72.6	73.9	74.9	78.1	76.3	75.3
HA/FWA	16.3	16.2	14.7	10.7	10.7	13.5
Smiling Sun static clinic	0.0	0.9	0.7	0.4	0.1	0.4
Smiling Sun satellite clinic	1.4	1.3	1.5	1.3	0.7	1.2
Joint Smiling Sun-Govt. EPI session	0.2	1.4	0.2	1.3	1.6	1.0
Other NGO clinic/hospital	0.5	0.4	0.	1.3	0.0	0.4
Private clinic/hospital	0.0	0.0	0.0	0.0	0.4	0.1
Private doctor	0.0	0.0	0.0	0.2	0.1	0.1
Other	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	334	374	357	383	442	1891

7.6.4. Childhood Diarrhea

Dehydration as a result of severe watery diarrhea is a major cause of childhood death in Bangladesh. Such mortality can be reduced through proper treatment. Oral rehydration therapy (ORT) is a simple means of countering the effects of dehydration. Severe diarrhea requires advice/treatment from a competent medical practitioner. In oral rehydration therapy, the child with diarrhea is given a solution that can be prepared by mixing water with a commercially prepared packet of oral rehydration salt (ORS)—called *khabar/packet* saline in Bangladesh—or by making a homemade mixture of sugar, salt and water—called *laban gur*. Research has shown that zinc provides a very effective treatment for childhood diarrhea. Zinc treatment reduces the severity and duration of diarrhea as well as the likelihood of future episodes of diarrhea.

The 2008 BSSFP Survey asked mothers of children less than five years of age whether they had suffered from diarrhea in the two weeks preceding the survey, the type of treatment sought, if any, and the source of such treatment. Table 7.27 provides the prevalence of diarrhea among children younger than five years of age in the two weeks preceding the survey. Prevalence rates were approximately the same across project and non-project areas and among boys and girls. Children with less educated and poorer mothers were at higher risk of diarrhea.

Treatment of Diarrhea

About 17.7 percent of children with diarrhea in project areas and 23.3 percent of diarrhea-infected children in non-project areas were taken to a health facility or provider for treatment (Table 7.28). More than three-fourths of children with diarrhea in project and non-project areas were treated with oral rehydration salts. However, the proportion treated with either ORS or zinc was about one percentage point higher in project areas. Zinc with ORS was given to 30.4 percent of diarrhea-infected children in project areas, and 37 percent of infected children in non-project areas. No association was apparent between diarrhea treatment with either ORS or with ORS plus zinc and socioeconomic status. ORS treatment was highest in Rajshahi (at 86.7 percent) and lowest in Dhaka (at 66.7 percent).

Sources of Diarrhea Treatment

Table 7.29 provides the sources of treatment for diarrhea in the two weeks preceding the survey. About 18 percent of children with diarrhea in project areas were taken for treatment to a health facility/provider. Of those who obtained treatment in project areas, the vast majority did so from the private medical sector (79.9 percent). About 13 percent sought care at public facilities. Only 4.6 percent were treated at Smiling Sun facilities. Among private medical sector facilities, pharmacists or pharmacies (35.9 percent) and village doctors (26.8 percent) were the two main sources of treatment. In non-project areas, nearly eight out of ten children were treated at private medical sector and public sector facilities/providers.

Table 7.27. Prevalence of diarrhea

Percentage of children under age five who had diarrhea in the two weeks preceding the survey, by background characteristics, BSSFP 2008.

Background characteristic	Percentage with diarrhea in the two weeks preceding the survey	Number of children
Age of child		
<6 months	.5	253
6-11 months	7.1	440
12-23 months	5.9	700
24-35 months	5.8	649
36-47 months	2.8	678
48-59 months	2.6	606
Sex of Child		
Male	4.4	1,658
Female	4.3	1,668
Source of drinking water		
Improved	4.3	3,277
Not improved	13.4	49
Toilet facility		
Improved, not shared	3.4	1,458
Non-improved or shared	5.1	1,869
Domains		
Dhaka division	2.3	1,201
Chittagong/Sylhet division	4.7	1,108
Khulna/Barisal division	6.2	310
Rajshahi division	6.8	708
Mother's education level		
No education	5.3	1,167
Primary incomplete	4.4	591
Primary complete	4.3	471
Secondary incomplete	3.7	874
Secondary complete or higher	2.1	222
Household asset quintile		
Lowest	6.5	687
Second	3.6	719
Middle	4.9	628
Fourth	4.9	649
Highest	2.0	644
Project and Non-project areas		
Project areas	4.4	3,326
Non-project areas	4.0	3,442

Table 7.28. Diarrhea treatment

Among children under age five who had diarrhea in the two weeks preceding the survey, the percentage for whom advice or treatment was sought from a health facility or provider, the percentage given oral rehydration therapy (ORT), the percentage given increased fluids, the percentage given ORT or increased fluids, the percentage given ORT and Zinc, and the percentage who were given other treatments, by background characteristics, BSSFP 2008.

Background characteristic	Percentage of children with diarrhea for whom advice or treatment was sought from a health facility or provider	Oral rehydration therapy (ORT) and Zinc						Other treatments				Number of children
		ORS packets or pre-packaged liquid	Recommended home fluids (RHF)	Increased fluids	Received ORS, RHF, or increased fluids	Zinc syrup or tablets	ORS/RHF and zinc	Antibiotic pill/syrup/injection	Other/ Unknown pill or syrup	Home remedy	No treatment	
Age of child												
<6 months	0.0	0.0	0.0	0.0	0.0	50.0	0.0	0.0	0.0	0.0	50.0	1
6-11 months	17.5	63.3	21.3	17.8	72.7	33.0	23.8	4.3	4.8	.0	13.7	31
12-23 months	19.7	77.6	22.1	50.8	87.1	41.5	33.0	4.8	18.0	1.5	6.7	41
24-35 months	13.6	84.9	11.9	36.0	93.2	36.1	28.4	5.1	20.3	0.0	5.7	37
36-47 months	27.0	93.0	14.4	63.7	96.7	44.7	41.4	.0	7.0	0.0	0.0	19
48-59 months	12.9	81.9	8.0	43.4	81.9	30.5	30.5	4.5	12.9	0.0	8.0	16
Sex												
Male	12.3	78.0	18.8	40.2	86.2	38.7	30.1	2.7	10.3	0.9	6.7	74
Female	23.3	78.5	14.4	40.6	84.9	36.4	30.7	5.4	17.0	0.0	8.5	72
Domains												
Dhaka division	5.6	66.7	16.7	38.9	77.8	16.7	11.1	.0	16.7	0.0	22.2	27
Chittagong/Sylhet division	15.9	78.0	11.0	25.6	78.0	45.1	35.4	7.3	12.2	1.2	9.8	52
Khulna/Barisal division	25.9	74.1	14.8	33.3	88.9	40.7	37.0	11.1	22.2	0.0	0.0	19
Rajshahi division	23.3	86.7	23.3	60.0	96.7	40.0	33.3	0.0	10.0	0.0	0.0	48
Mother's education level												
No education	15.0	78.6	11.5	21.3	82.0	36.4	30.9	3.2	11.3	1.0	8.9	62
Primary incomplete	12.3	70.1	28.5	58.7	87.7	35.3	26.6	9.9	13.0	0.0	13.0	26
Primary complete	9.7	76.0	29.7	43.7	79.5	43.0	36.7	.0	17.4	0.0	7.4	20
Secondary incomplete	32.8	84.4	11.0	59.9	94.2	41.7	32.9	2.2	15.9	0.0	1.9	33
Secondary complete or higher	13.8	86.2	0.0	41.5	86.2	13.8	0.0	13.8	15.4	0.0	0.0	5

Background characteristic	Percentage of children with diarrhea for whom advice or treatment was sought from a health facility or provider	Oral rehydration therapy (ORT) and Zinc						Other treatments				Number of children
		ORS packets or prepackaged liquid	Recommended home fluids (RHF)	Increased fluids	Received ORS, RHF, or increased fluids	Zinc syrup or tablets	ORS/RHF and zinc	Antibiotic pill/syrup/injection	Other/ Unknown pill or syrup	Home remedy	No treatment	
Household asset quintile												
Lowest	13.2	83.8	21.5	32.9	85.4	44.1	39.8	5.9	12.1	1.4	5.7	44
Second	21.7	76.5	10.3	27.3	82.0	32.4	29.9	2.7	10.3	0.0	15.6	26
Middle	14.5	66.3	17.4	32.2	78.5	28.6	24.2	2.1	14.0	0.0	14.8	31
Fourth	20.1	81.3	15.0	63.8	91.3	42.0	28.3	4.2	17.2	0.0	0.0	32
Highest	26.6	83.0	14.4	53.8	95.2	36.2	19.2	4.8	15.5	0.0	0.0	13
Project and Non-project areas												
Project areas	17.7	78.3	16.6	40.4	85.5	37.6	30.4	4.0	13.6	0.4	7.6	146
Non-project areas	23.3	77.1	20.8	32.4	81.8	43.9	37.0	8.2	23.9	4.1	5.4	139

Note: ORT includes solution prepared from oral rehydration salt (ORS), pre-packaged ORS packet, and recommended home fluids (RHF).

Table 7.29. Source of diarrhea treatment

Percentage distribution of source of treatment of children under five years who had diarrhea in the two weeks preceding the survey, BSSFP 2008.

Place or provider taken for diarrhea treatment	BSSFP Project Areas					Non-project areas
	Dhaka division	Chittagong/ Sylhet division	Khulna/ Barisal division	Rajshahi division	Total	
Home	0.0	1.8	0.0	0.0	0.6	0.5
Medical person at home	0.0	1.8	0.0	0.0	0.6	0.5
Non-medical person at home	0.0	0.0	0.0	0.0	0.0	0.0
Public sector	0.0	14.3	27.3	8.7	12.5	17.1
Hospital/Medical college	0.0	3.6	0.0	0.0	1.3	1.9
Family welfare center	0.0	0.0	0.0	0.0	0.0	4.9
Upazila health complex	0.0	10.7	22.7	4.3	8.9	9.8
MCWC	0.0	0.0	0.0	0.0	0.0	0.5
Rural Dispensary/community clinic	0.0	0.0	0.0	4.3	1.6	0.0
Satellite clinic/EPI outreach site	0.0	0.0	0.0	0.0	0.0	0.0
HA	0.0	0.0	4.5	0.0	0.7	0.0
FWA	0.0	0.0	0.0	0.0	0.0	0.0
Smiling Sun	0.0	0.0	9.1	8.7	4.6	0.0
Static clinic	0.0	0.0	0.0	0.0	0.0	0.0
Satellite clinic	0.0	0.0	9.1	4.3	3.0	0.0
Community service provider (CSP)/ Depotholder	0.0	0.0	0.0	4.3	1.6	0.0
Other NGO	0.0	0.0	0.0	4.3	1.6	0.0
MARIE STOPES clinic/hospital	0.0	0.0	0.0	0.0	0.0	0.0
UPHCP	0.0	0.0	0.0	0.0	0.0	0.0
Hospital/clinic	0.0	0.0	0.0	0.0	0.0	0.0
Satellite clinic	0.0	0.0	0.0	0.0	0.0	0.0
Fieldworker	0.0	0.0	0.0	4.3	1.6	0.0
Depotholder	0.0	0.0	0.0	0.0	0.0	0.0
Private medical sector	100.0	83.9	59.1	78.3	79.9	78.7
Private hospital/clinic	0.0	0.0	0.0	4.3	1.6	1.7
Qualified doctor	12.5	7.1	0.0	13.0	8.9	7.7
Village doctor	25.0	30.4	31.8	21.7	26.8	29.9
Pharmacist/pharmacy	50.0	44.6	18.2	30.4	35.9	32.3
Traditional doctor/kabiraj	0.0	1.8	4.5	4.3	2.9	5.7
Homeopath	12.5	0.0	4.5	4.3	3.8	1.2
Other private	0.0	0.0	4.5	0.0	0.7	3.8
Shop	0.0	0.0	4.5	0.0	0.7	2.4
Relatives/friends	0.0	0.0	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	0.0	0.0	1.4
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	12	35	16	37	100	120

Feeding Practices during Diarrhea

To avoid or control dehydration, a child with diarrhea must receive elevated amounts of liquid and food. Table 7.30 provides amounts of liquids and food offered (as compared with normal practices) for children under five years of age who had diarrhea in the two weeks preceding the survey, according to select background characteristics. In project areas, two-fifths of children who experienced diarrhea were offered more liquid during the illness than normal. One-fifth of children were provided the same amount of food or drink and roughly a quarter were actually given less than normal. In non-project areas, 18.7 percent were offered less food than normal and only 32.4 percent were given more. Feeding practices during diarrhea episodes were correlated with maternal education. More educated mothers were more likely to offer more or the same quantity of liquid to their diarrhea stricken child (as compared with usual amounts). Children of higher asset quintiles were more likely to receive more liquid and food during diarrhea episodes than those of lower quintiles.

Table 7.30. Feeding practices during diarrhea

Percent distribution of children under age five who had diarrhea in the two weeks preceding the survey by amount of liquids and food offered compared with normal practice, the percentage of children given increased fluids and continued feeding during the diarrhea episode, and the percentage of children who continued feeding and were given ORT and/or increased fluids during the episode of diarrhea, by background characteristics, 2008.

Background characteristic	Amount of liquids offered						Amount of food offered							Percentage given increased fluids and continued feeding	Percentage who continued feeding and were given ORT and/or increased fluids	Number of children with diarrhea
	More	Same as usual	Somewhat less	Much less	None	Total	More	Same as usual	Somewhat less	Much less	None	Didn't start solid food	Total			
Age of child																
<6 months	0.0	50.0	50.0	0.0	0.0	100.0	0.0	100.0	0.0	0.0	0.0	0.0	100.0	0.0	0.0	1
6-11 months	17.8	25.6	35.0	21.6	.0	100.0	13.7	26.9	38.3	21.1	0.0	0.0	100.0	17.8	58.4	31
12-23 months	50.8	17.8	16.2	10.0	5.2	100.0	37.7	20.0	26.8	13.9	1.5	0.0	100.0	43.0	74.7	41
24-35 months	36.0	26.7	20.1	15.3	1.9	100.0	21.7	26.6	36.9	14.8	0.0	0.0	100.0	36.0	81.8	37
36-47 months	63.7	3.3	26.5	6.6	0.0	100.0	25.2	37.2	18.1	19.5	0.0	0.0	100.0	47.5	77.2	19
48-59 months	43.4	12.9	25.5	8.0	10.1	100.0	38.9	12.9	35.7	8.0	4.5	0.0	100.0	38.9	73.4	16
Sex																
Male	40.2	18.6	26.5	14.8	0.0	100.0	21.0	35.3	24.9	17.8	1.0	0.0	100.0	35.0	71.2	74
Female	40.6	20.6	21.2	11.4	6.1	100.0	32.4	15.3	38.0	13.5	0.9	0.0	100.0	36.2	74.0	72
Domains																
Dhaka division	38.9	16.7	22.2	16.7	5.6	100.0	16.7	22.2	44.4	16.7	.0	0.0	100.0	33.3	66.7	27
Chittagong/Sylhet division	25.6	28.0	29.3	15.9	1.2	100.0	12.2	36.6	34.1	15.9	1.2	0.0	100.0	25.6	68.3	52
Khulna/Barisal division	33.3	33.3	29.6	.0	3.7	100.0	29.6	29.6	25.9	11.1	3.7	0.0	100.0	29.6	74.1	19
Rajshahi division	60.0	6.7	16.7	13.3	3.3	100.0	46.7	13.3	23.3	16.7	.0	0.0	100.0	50.0	80.0	48
Mother's education level																
No education	21.3	22.1	33.3	18.3	5.0	100.0	14.4	24.6	46.3	14.7	.0	0.0	100.0	21.3	74.8	62
Primary incomplete	58.7	5.1	18.4	15.4	2.4	100.0	31.5	12.0	25.6	28.5	2.4	0.0	100.0	46.9	59.2	26
Primary complete	43.7	17.4	28.0	7.4	3.5	100.0	28.9	32.2	24.1	11.3	3.5	0.0	100.0	40.2	64.7	20
Secondary incomplete	59.9	26.4	6.9	6.9	0.0	100.0	46.4	28.9	12.7	12.0	0.0	0.0	100.0	50.1	82.2	33
Secondary complete or higher	41.5	29.3	29.3	0.0	0.0	100.0	13.8	56.9	29.3	0.0	0.0	0.0	100.0	41.5	86.2	5

Background characteristic	Amount of liquids offered						Amount of food offered							Percentage given increased fluids and continued feeding	Percentage who continued feeding and were given ORT and/or increased fluids	Number of children with diarrhea
	More	Same as usual	Somewhat less	Much less	None	Total	More	Same as usual	Somewhat less	Much less	None	Didn't start solid food	Total			
Household asset quintile																
Lowest	32.9	18.3	33.7	13.6	1.6	100.0	22.0	19.5	37.0	21.4	0.0	0.0	100.0	29.5	69.7	44
Second	27.3	20.7	32.7	19.3	0.0	100.0	10.3	25.1	48.0	16.5	0.0	0.0	100.0	21.1	67.9	26
Middle	32.2	9.3	28.8	17.5	12.2	100.0	30.5	21.5	33.7	12.2	2.1	0.0	100.0	32.2	66.3	31
Fourth	63.8	21.6	5.9	8.7	0.0	100.0	40.4	33.7	7.0	16.7	2.2	0.0	100.0	51.6	77.1	32
Highest	53.8	40.9	5.4	0.0	0.0	100.0	32.0	34.2	33.8	0.0	0.0	0.0	100.0	53.8	95.2	13
Project and Non-project areas																
Project areas	40.4	19.6	23.9	13.1	3.0	100.0	26.6	25.4	31.4	15.7	0.9	0.0	100.0	35.6	72.6	146
Non-project areas	32.4	32.3	18.7	13.6	3.0	100.0	12.0	36.3	24.4	22.9	3.0	1.3	100.0	20.8	56.0	139

CHAPTER 8. AWARENESS AND USE OF SMILING SUN CLINICS

This chapter assesses the knowledge and awareness of ever-married women aged 10-49 years of the Smiling Sun logo/symbol, Smiling Sun health services and providers, the location of Smiling Sun clinics, and the availability of services provided through the Smiling Sun network. It also examines the utilization of Smiling Sun facilities and providers for essential health services and the quality of these services.

8.1. Awareness of a Specific Symbol

Health service providers often use a particular symbol or logo to inform people about their location, the type of services they provide, and to associate clinics/sites marked with that logo with a specific quality of care. The symbols/logos that are being used by health service providers in Bangladesh include *Green Umbrella*, *Emergency Obstetric Care (EmOC)*, *Smiling Sun*, and *Marie Stopes*, the first two of which are being used by the government facilities, and the remaining two by NGOs. The symbol Green Umbrella stands for health and family planning services, while the EmOC symbol denotes maternal and emergency obstetric care provided by government facilities. The Smiling Sun symbol stands for the essential service package provided by BSSFP NGOs, while Marie Stopes facilities provide mainly maternal care. By showing cards with each logo, every respondent's recognition of those logos was assessed.

Table 8.1 provides the distribution of women who reported having seen each specific logo and correctly identified the corresponding group of clinics or NGOs associated with that logo. While nearly 59 percent of project area women had seen the Smiling Sun symbol, only 38.5 percent correctly identified the provider or NGO it represents. Awareness about other symbols or logos was relatively low. Awareness of the EmOC symbol was 53.5 percent. The figures for Green Umbrella and Marie Stopes were 36.0 and 20.3 percent, respectively. In non-project areas, awareness was highest with respect to the EmOC symbol, followed by Smiling Sun, Green Umbrella, and Marie Stopes.

8.2. Awareness of the Smiling Sun Symbol

Table 8.2 provides the distribution of those who reported having seen the Smiling Sun symbol. Overall, 58.6 percent of women in project areas were aware of the Smiling Sun symbol or logo. However, only 29.8 percent were able to correctly identify it as Smiling Sun clinic. Another 8.7 percent of respondents correctly identified the logo as representing an NGO operating a Smiling Sun clinic, and 20.1 percent recognized the logo but were not aware of the specific provider/ NGO it represents. Awareness was highest in Rajshahi, and lowest in Chittagong/Sylhet. It was significantly higher among the better educated. Almost 87 percent of those with a secondary education or better recognized the symbol, compared to only 47.5 percent of respondents with no education. Awareness was also higher among women in higher household asset quintiles. About 71 percent of those in the highest asset quintile recognized the Smiling Sun logo, as compared to 51 percent in the lowest quintile. Unsurprisingly, awareness of the Smiling Sun logo was lower among women in non-project areas. Approximately 38 percent of respondents in non-project areas, as compared with roughly 59 percent in project areas, recognized the logo.

Table 8.1. Awareness of specific symbol

Percent distribution of women reporting having seen the Smiling Sun and other NGO Logo according to background characteristics, BSSFP 2008.

Operating NGO	Seen and correctly identified the NGO	Seen but identify as other NGO/Tells nothing	Not seen	Total	Number of women
	Project areas				
Green umbrella	16.7	19.3	63.9	100.0	6330
Emergency obstetrics care (EOC)	27.9	25.5	46.5	100.0	6330
Smiling Sun	38.5	20.1	41.4	100.0	6330
Marie Stopes	5.8	14.5	79.7	100.0	6330
	Non-project areas				
Green umbrella	16.7	17.0	66.3	100.0	6789
Emergency obstetrics care (EOC)	26.7	23.9	49.3	100.0	6789
Smiling Sun	19.8	17.9	62.3	100.0	6789
Marie Stopes	6.0	12.8	81.2	100.0	6789

Table 8.2. Awareness of Smiling Sun symbol

Percent distribution of women reporting having seen the Smiling Sun logo according to background characteristics, BSSFP 2008.

Domains	Percentage reporting					Number of women
	Seen and correctly identified as Smiling Sun clinic	Seen and correctly identified as Smiling Sun clinic operating NGO	Seen but identify as other NGO/ Tells nothing	Not seen	Total	
Dhaka division	27.9	8.1	20.2	43.8	100	2342
Chittagong/Sylhet division	24.2	8.8	22.1	44.9	100	1822
Khulna/Barisal division	31.0	16.4	16.4	36.3	100	681
Rajshahi division	39.3	5.9	19.2	35.6	100	1485
Highest education level						
No education	19.2	7.6	20.6	52.5	100	2821
Primary incomplete	27.3	8.5	23.6	40.6	100	1035
Primary complete	31.5	9.1	22.0	37.4	100	769
Secondary incomplete	43.3	10.7	17.6	28.4	100	1352
Secondary complete or higher	66.5	8.7	11.8	12.9	100	353
Household asset quintile						
Lowest	23.9	7.7	19.3	49.1	100	1145
Second	24.4	8.2	21.3	46.2	100	1212
Middle	28.0	6.7	22.1	43.2	100	1303
Fourth	28.3	10.5	20.1	41.1	100	1328
Highest	43.0	10.1	17.9	29.0	100	1343
Project and Non-project areas						
Project areas	29.8	8.7	20.1	41.4	100	6330
Non-project areas	15.5	4.3	17.9	62.3	100	6789

Table 8.3 provides the percentage of women who reported seeing the Smiling Sun logo at various sites by sources of awareness and according to project/non-project areas. Almost three quarters of women in project areas reported seeing the symbol on signboards at health clinics, while roughly 30 percent reported doing so on television advertisements/dramas. About 18 percent reported seeing the symbol on posters, and 9.2 percent on billboards. Among those women in non-project areas who reported seeing the Smiling Sun logo, the main sources of awareness were signboards at health clinics (63 percent), television advertisements (31.9 percent), posters (19.3 percent), television dramas (13.1 percent), and billboards (8 percent).

Table 8.3. Source of awareness of Smiling Sun symbol

Percentage of women who reported to have seen the Smiling Sun logo by source, BSSFP 2008.

Seen logo on:	Project areas	Non-project areas
Television (in an advertisement)	21.1	31.9
Television (in a drama)	8.5	13.1
Poster	17.9	19.3
Pamphlet or brochure	1.4	0.8
Billboard sign	9.2	8.0
Sign at a health clinic	73.8	63.0
Other	0.1	0.1
Number of women	2437	1344

8.3. Preferred Health Facility That Initially Comes to Mind

To better understand preferences for various health facilities when seeking care, each woman was asked, "When in need of health services, what is the first clinic or hospital that comes to mind?" Table 8.4 provides the distribution of women who mentioned different health facilities/ providers that first come to mind when they need health services. In project areas, the majority (50.5 percent) mentioned government hospitals as their first preference, while about one-fifth (19.8 percent) identified pharmacies, and one-seventh (14.6 percent) private doctor's offices. A Smiling Sun clinic was the first preference for health care for only 4.1 percent of women. Preferences for government health care facilities were relatively low among highly educated and wealthier women. Preferences for private doctors were two times higher in Chittagong/Sylhet than in other divisions; it was also considerably higher among women of higher asset quintiles.

The scenario in non-project areas was almost the same, with government hospitals as the most preferred facility (about 55 percent), followed distantly by pharmacies (17.6 percent) and private doctor's offices (14.4 percent). Only 1.3 percent of respondents in non-project areas preferred Smiling Sun clinics.

8.4. Perceptions about the Smiling Sun Symbol

Table 8.5 presents the percentage of women who were aware of the Smiling Sun Symbol by their reported perception about the Smiling Sun clinic. Among the positive aspects of Smiling Sun clinic, the most often cited by both project and non-project women was *good quality related* (84 to 85 percent), followed by all *types of health services are available* (about 30 percent), and *good behavior of providers* (16.5 percent in project vs. 13.3 percent in non-project areas). Only a few had a negative perception of the clinics, citing high prices, bad quality, and non-availability of certain services as reasons for their negative view.

Table 8.4. Preferred health facility that comes to mind first

Percent distribution of women age 10-49 who mentioned different health facility/provider that come to their mind first when they need health services by background characteristics, BSSFP 2008.

	Health facility/provider that comes to mind first when need health services										Total	Number
	Govt. hospital	Green umbrella clinic	Smiling Sun clinic	MARIE STOPES clinic	UPHCP	Private clinic	Private doctor chamber	Pharmacy	Others	Don't know		
	Project areas											
Domains												
Dhaka division	53.2	0.4	3.0	0.1	0.1	3.3	12.7	21.8	5.4	0.0	100	2342
Chittagong/Sylhet division	41.1	0.6	3.3	0.3	0.2	6.9	22.6	18.5	6.4	0.0	100	1822
Khulna/Barisal division	57.3	0.4	6.7	0.3	0.1	5.2	9.0	14.4	6.5	0.0	100	681
Rajshahi division	54.5	0.5	5.7		0.1	3.3	10.6	20.8	4.4	0.0	100	1485
Highest education level												
No education	52.2	0.4	3.5	0.1	0.0	2.8	13.7	21.6	5.7	0.0	100	2821
Primary incomplete	50.7	0.6	4.5	0.3	0.3	4.1	11.9	21.4	6.2	0.0	100	1035
Primary complete	52.1	0.1	4.6	0.1	0.3	4.4	15.4	18.0	4.9	0.0	100	769
Secondary incomplete	48.1	0.6	4.1	0.2	0.1	6.9	17.7	16.8	5.4	0.0	100	1352
Secondary complete or higher	41.8	0.9	6.4		0.2	11.3	17.5	16.8	5.1	0.0	100	353
Household asset quintile												
Lowest	52.7	0.6	4.6	0.1	0.2	2.1	12.2	21.6	5.9	0.0	100	1145
Second	50.1	0.3	3.5	0.2	0.3	3.0	11.2	25.4	6.1	0.0	100	1212
Middle	54.6	0.5	3.7	0.1	0.0	3.7	12.9	19.1	5.3	0.0	100	1303
Fourth	48.8	0.3	3.8	0.1	0.1	4.9	16.0	19.6	6.4	0.0	100	1328
Highest	46.7	0.7	5.0	0.2	0.0	8.6	20.2	14.3	4.3	0.0	100	1343
Total	50.5	0.5	4.1	0.1	.01	4.6	14.6	19.8	5.6	0.0	100	6330

	Health facility/provider that comes to mind first when need health services										Total	Number
	Govt. hospital	Green umbrella clinic	Smiling Sun clinic	MARIE STOPES clinic	UPHCP	Private clinic	Private doctor chamber	Pharmacy	Others	Don't know		
	Non-project areas											
Highest education level												
No education	56.2	1.0	.8	0.0	0.1	3.6	12.9	18.7	6.6	0.0	100	2923
Primary incomplete	55.9	0.4	1.4	0.1	0.1	5.1	13.6	18.4	5.1	0.0	100	1001
Primary complete	54.0	0.7	1.5	0.5	0.0	5.3	15.1	17.9	5.1	0.0	100	779
Secondary incomplete	54.3	0.7	1.2	0.1	0.0	6.5	15.8	15.6	5.7	0.0	100	1632
Secondary complete or higher	47.2	0.5	3.4	1.0	0.0	8.0	19.7	15.1	5.2	0.0	100	454
Household asset quintile												
Lowest	57.2	1.1	1.6	0.1	0.1	4.2	10.4	18.9	6.4	0.1	100	1133
Second	58.1	1.0	1.1	0.2	0.1	3.0	9.9	20.5	6.2	0.0	100	1244
Middle	55.4	0.3	1.0	0.3	0.0	4.8	13.2	18.4	6.5	0.0	100	1297
Fourth	55.0	0.8	1.1	0.1	0.0	4.4	15.5	17.3	5.8	0.0	100	1421
Highest	50.3	0.7	1.5	0.2	0.0	7.8	20.3	14.1	5.0	0.0	100	1695
										0.0		
Total	54.8	0.8	1.3	0.2	0.0	5.0	14.4	17.6	5.9	0.0	100	6789

Table 8.5. Perception about Smiling Sun symbol

Percentage of women who have seen Smiling Sun symbol by perception about Smiling Sun clinic when they see/think of Smiling Sun, BSSFP 2008.

Perception about Smiling Sun	Project areas	Non-project areas
Positive perception		
Good quality related	83.7	85.1
Reasonable price/value	11.2	9.2
Liking	9.1	6.5
Good behavior	16.5	13.3
Cleanliness	5.8	4.4
Promotional activities	3.6	2.7
All types of health services are available	30.2	29.5
Negative perception		
Bad quality	2.5	3.0
High price/value	4.1	2.4
Disliking	0.6	0.5
Unpleasant behaviour	0.4	0.3
Uncleanliness	0.6	0.2
All health services are not available	2.2	2.8
Other		0.2
Number of women	2437	1344

8.5. Possession and Use of Health Benefit Cards

Smiling Sun clinics issue a green health benefit card (HBC) to poor clients to guarantee easy access at low or no cost to its service options. About 11.7 percent of women reported receiving health benefit cards, but only half of those could actually show the cards to the interviewers. Possession of an HBC was highest in Khulna/Barisal (17.1 percent) and lowest in Dhaka (11.1 percent). About 17.4 percent of women in the lowest asset quintile received an HBC against 10 percent of those in the highest quintile. Surprisingly, 6.5 percent of women in non-project areas received an HBC, with 12.6 percent of those women reporting assets in the second quintile, and 5.6 percent reporting assets in the highest quintile (Table 8.6A).

It was evident that card holders used the green health benefit cards very frequently. About 82 percent of project and 85 percent of non-project women who were in possession of an HBC used it in seeking care from Smiling Sun clinics. Use of an HBC varied little by division. Variation in use according to asset quintile in non-project areas was pronounced, but also might be attributed to smaller sample size (Table 8.6B).

Table 8.6A. Possession of health benefit card (HBC)

Percentage of women who have seen Smiling Sun symbol by whether they received health benefit card (HBC), by background characteristics, BSSFP 2008.

Background characteristics	Yes seen	Yes not seen	Didn't receive card	Dk/ missing	Total	Number of women
	Project areas					
Domains						
Dhaka division	4.1	7.0	88.2	0.7	100	842
Chittagong/Sylhet division	4.9	4.2	89.7	1.2	100	601
Khulna/Barisal division	11.8	5.3	81.4	1.5	100	323
Rajshahi division	6.2	6.2	86.9	0.7	100	671
Household asset quintile						
Lowest	11.6	4.2	82.6	1.5	100	362
Second	7.4	6.4	85.8	0.3	100	394
Middle	5.5	5.8	87.9	0.8	100	452
Fourth	3.8	7.9	87.6	0.8	100	515
Highest	4.0	4.9	89.9	1.2	100	713
Total	5.9	5.8	87.3	0.9	100	2437
	Non-project areas					
Household asset quintile						
Lowest	4.0	3.8	91.5	.7	100	113
Second	5.3	6.8	87.4	0.5	100	161
Middle	2.9	5.3	88.6	3.2	100	212
Fourth	3.4	1.7	93.4	1.4	100	295
Highest	2.0	2.8	94.4	0.8	100	563
Total	3.0	3.5	92.2	1.3	100	1344

Table 8.6B. Use of health benefit card (HBC)

Percentage of women who have HBC card by whether they carry HBC to Smiling Sun clinic by background characteristics, BSSFP 2008.

Background characteristics	Carried HBC to Smiling Sun clinic	Did not carry HBC to Smiling Sun clinic	Never visited Smiling Sun clinic	Total	Number of women who have HBC
	Project areas				
Domains					
Dhaka division	87.1	11.3	1.6	100	93
Chittagong/Sylhet division	79.3	18.4	2.3	100	55
Khulna/Barisal division	82.1	16.7	1.3	100	55
Rajshahi division	78.8	15.4	5.8	100	83
Household asset quintile					
Lowest	81.9	14.2	3.9	100	57
Second	92.0	5.0	2.9	100	54
Middle	83.2	16.8		100	51
Fourth	81.8	15.7	2.5	100	60
Highest	73.9	21.5	4.6	100	64
Total	82.2	14.9	2.9	100	287
	Non-project areas				
Household asset quintile					
Lowest	91.5	8.5	0.0	100	9
Second	61.9	34.9	3.2	100	20
Middle	83.8	16.2	.0.0	100	17
Fourth	100.0	0.0	0.0	100	15
Highest	90.8	9.2	0.0	100	27
Total	84.7	14.6	0.7	100	88

8.6. Knowledge and Awareness of Satellite Clinics

The 2008 survey asked ever-married women questions regarding their awareness and use of temporary/satellite clinics. Women were asked if they knew of a temporary/satellite clinic that served their area. If they knew, they were then asked if the temporary/satellite clinic was held during the past three months and, if so, about the type of clinic. Table 8.7 presents this awareness by background characteristics for the project and non-project comparison areas.

In project areas, 82.3 percent of respondents were aware of temporary satellite clinics in their area, and of those, about 87 percent indicated that the clinics were conducted in their area during the past three months. Among those who knew of a satellite clinic held in the last three months, approximately 80 percent identified it as a Smiling Sun satellite clinic, while a far smaller number (20 percent) identified it as a government clinic. Awareness of temporary clinics did not vary substantially by age or education. It was highest in Rajshahi and lowest in Khulna/Barisal.

Table 8.7. Knowledge and awareness of temporary and satellite clinics

Percentage of women who are aware of a temporary/satellite clinic in their area, who know whether such a clinic was held in the last three months, and among those who reported temporary/satellite clinic held in the last three months percent distribution by type of clinic, by background characteristics, BSSFP 2008.

Background characteristics	Aware of temporary clinics	Number of Women	Clinic held in last three months	Number of women knowing of temp. clinic	Type of temporary/satellite clinic					Number of women reporting clinics in last 3 months
					Smiling Sun Satellite clinic	Govt. satellite clinic	Other	DK/ missing	Total	
Age										
> 20	74.6	651	87.9	486	79.8	19.2	0.0	1.1	100.0	427
20-24	81.7	1164	87.9	951	79.8	19.3	0.0	0.9	100.0	836
25-29	83.1	1182	85.8	983	80.4	19.3	0.1	0.2	100.0	844
30-34	86.2	1031	88.4	889	79.5	20.0	0.0	0.5	100.0	785
35-49	82.6	2301	86.3	1901	79.0	20.6	0.1	0.3	100.0	1642
Domains										
Dhaka division	82.9	2342	89.9	1942	79.4	20.3	0.0	0.3	100.0	1745
Chittagong/Sylhet division	82.2	1822	84.6	1497	80.0	19.8	0.1	0.1	100.0	1267
Khulna/Barisal division	73.5	681	78.4	500	79.5	18.0	0.0	2.5	100.0	392
Rajshahi division	85.5	1485	88.9	1270	79.3	20.0	0.1	0.6	100.0	1129
Highest education level										
No education	81.8	2821	86.6	2308	79.7	19.9	0.1	0.3	100.0	1999
Primary incomplete	83.2	1035	86.8	861	77.5	21.7	0.1	0.7	100.0	747
Primary complete	83.7	769	84.4	644	78.9	20.4	0.0	0.7	100.0	544
Secondary incomplete	82.2	1352	89.0	1112	80.7	18.5	0.0	0.7	100.0	990
Secondary complete or higher	81.0	353	88.7	286	81.1	18.7	0.0	0.2	100.0	254
Household asset quintile										
Lowest	80.5	1145	85.3	922	81.4	18.0	0.2	0.5	100.0	787
Second	81.7	1212	86.9	990	80.8	18.1	0.2	0.9	100.0	861
Middle	83.7	1303	87.3	1091	79.1	20.3	0.0	0.5	100.0	953
Fourth	84.2	1328	87.0	1118	80.3	19.5	0.0	0.2	100.0	973
Highest	81.1	1343	88.2	1090	76.7	23.0	0.0	0.3	100.0	961
Project and Non-project areas										
Project areas	82.3	6330	87.0	5210	79.6	19.9	0.1	0.5	100.0	4534
Non-project areas	81.2	6789	88.1	5514	7.2	92.4	0.2	0.2	100.0	4856

Knowledge and awareness of temporary/satellite clinics was lower in non-project areas. About 81 percent of women in non-project areas were aware of temporary clinics in their area. Of these, 88.1 percent reported a temporary clinic held in their area in the past three months. It was nearly always described as a government temporary/satellite clinic (92.4 percent). A small percentage (7.2 percent) were identified as Smiling Sun satellite clinics, which was most likely due to the close proximity of non-project areas to project areas.

8.7. Knowledge of ESP Services at Smiling Sun Satellite Clinics

Respondents who were aware of Smiling Sun temporary/satellite clinics were asked about the types of services available at the clinics. Table 8.8 provides the distribution of specific types of services available at satellite clinics in rural project areas (based on the reports of women aware of a satellite clinic in their area in the past three months).

Over 84 percent were aware that the Smiling Sun satellite clinics provide maternal health care, 75.5 percent were aware that they provided family planning services, and 66.9 percent knew about child health services available. However, only about eight percent were aware that Smiling Sun satellite clinics provided general health care. About 51 percent were aware that Smiling Sun satellite clinics provided non-clinical family planning methods, 42 percent were aware of clinical family planning methods, 64 percent knew about antenatal care, 48 percent were aware of care for tetanus, and 43 percent reported awareness of EPI services.

Table 8.8. Knowledge of ESP services at Smiling Sun temporary/satellite clinics, project areas

Among women who are aware of a temporary/satellite clinic in their area in last three months percentage who identify specific services at temporary/satellite clinics, project areas, BSSFP 2005.

Types of Services	Percentage
Family planning	75.5
Clinical methods	41.8
Non-clinical methods	50.7
Advise for side effects	2.1
Maternal health	84.3
Antenatal care	64.3
Postnatal care	8.6
Tetanus	47.8
Child health	66.9
EPI	42.9
Diarrhea treatment	5.4
ARI treatment	0.2
Vitamin A	13.4
General illnesses	19.5
Other child care	7.2
Treatment of RTI/STD	0.1
General health	7.9
Other	0.0
DK/missing	1.0
Number	3607

8.8. Use of Smiling Sun Satellite Clinics

In the 2008 survey, women who knew of a Smiling Sun temporary/satellite clinic conducted in their area during the past three months were asked if they had ever used it in the past three months. The latter set of questions was used to elicit information on satisfaction with care while reducing the possibility of recall bias from use in the distant past. Women who did not report a clinic in their area in the past three months were assumed not to have used the clinics.

Table 8.9 provides the proportion of women who ever used services at Smiling Sun satellite clinics in the last three months by background characteristics. In rural project areas, 18.4 percent of women reported ever using a Smiling Sun satellite clinic for ESP services in the three months preceding interview. Use of Smiling Sun satellite clinics was highest in Khulna/Barisal and lowest in Dhaka division, though the gaps between divisions were not particularly pronounced. Use in the past three months was inversely associated with socioeconomic status. Women in the lowest asset quintile were eight percentage points more likely to have used a Smiling Sun satellite clinic in the past three months than those in the wealthiest one. Use in the past three months was also highest among women aged 20-34. Differences across education levels were small.

About 7.2 percent of women in non-project areas reported a Smiling Sun satellite clinic in their area in the last three months, and 14.4 percent of those women reported use of a Smiling Sun clinic for ESP services in the three months preceding interview.

8.9. Sources of Information about Smiling Sun Satellite Clinics

Women who reported knowledge of a satellite clinic that had been held in the past three months were asked who told them about the clinic. Table 8.10 provides the distribution of sources of information about Smiling Sun satellite clinics.

In project areas, women were mainly informed in advance about Smiling Sun satellite clinics by Smiling Sun providers (46 percent), particularly by community service promoters/depotholders (43.5 percent). About half (49.6 percent) were not informed by anyone.

8.10. Quality of Care at Smiling Sun Satellite Clinics

Women who used temporary/satellite clinics in the past three months preceding the survey answered questions about the quality of care received during their most recent visit. The questions addressed payment, travel time, and waiting time. The distribution of responses is reported in Table 8.11.

Responses indicated a generally comparable quality of care across project and non-project areas. Both travel times and waiting times were slightly longer for Smiling Sun clinics in project areas. The mean waiting time for service at the Smiling Sun satellite clinics was 17.5 minutes, and the mean travel time was reported to be 12.5 minutes. In project areas, all users of Smiling Sun services reported paying for the services they received, and approximately 89 percent of those paid the exact amount they were asked to pay.

Table 8.9. Use of temporary/satellite clinics

Percentage of women who have ever used Smiling Sun temporary/satellite clinics in the last three months, by selected background characteristics, BSSFP 2008.

Background characteristics	Used services in last three months	Number of women knowing of temporary clinic
Age		
>20	16.8	341
20-24	21.2	667
25-29	22.4	678
30-34	21.0	625
35-49	14.0	1297
Domains		
Dhaka division	15.9	1386
Chittagong/Sylhet division	18.0	1014
Khulna/Barisal division	22.6	312
Rajshahi division	21.3	895
Highest education level		
No education	17.3	1594
Primary incomplete	19.7	579
Primary complete	22.6	429
Secondary incomplete	17.6	799
Secondary complete or higher	17.5	206
Household asset quintile		
Lowest	22.2	640
Second	22.2	695
Middle	17.4	754
Fourth	16.8	781
Highest	14.2	737
Project and Non-project areas		
Project areas	18.4	3607
Non-project areas	14.4	349

Table 8.10. Source of information about Smiling Sun temporary/satellite clinics, project areas

Among women who are aware of a temporary/satellite clinic in their area in last three months percentage who are informed in advance about Smiling Sun temporary clinics by source of information, project areas, BSSFP 2008.

Source of information	Percentage
Health professional	1.4
Qualified doctor	0.0
Nurse/midwife	0.1
FWV/MA/SACMO	0.3
FWA	0.2
Govt. Satellite Clinic Worker	0.1
Health Assistant	0.7
Smiling Sun	46.0
Static clinic worker	0.3
Satellite clinic worker	1.3
Community service promoter (CSP)/Depotholder	43.5
Community mobilizer/Service promoter	0.8
Other Person	3.0
Unqualified doctor/village doctor	0.0
TTBA/UTBA	2.9
Neighbor/relative	0.0
Other	0.1
Was not informed	49.6
Total	100.0
Number	3,607

Table 8.11. Quality of services from Smiling Sun temporary/satellite clinics

Among women who used service from Smiling Sun satellite clinic in the three months preceding the survey, percentage by perceptions of quality of treatment during last visit, BSSFP 2008.

Quality Indicator	Project areas	Non-project areas
Mean travel time (minutes)	12.50	10.95
Mean waiting time (minutes)	17.54	15.03
Number	663	50
Did pay for services		
Yes	73.5	85.0
No	26.5	15.0
Number	663	50
Paid amount		
Same amount asked for	89.1	80.9
More	3.6	
Less	6.0	12.2
Credit	1.3	6.9
Number	487	43

8.11. Awareness of Smiling Sun Static Clinic

The survey collected information from ever married women regarding their awareness and use of Smiling Sun static clinics/hospitals. Women were asked if they knew of a hospital/clinic from which one can get health and family planning services. They were also asked if they were aware of a Smiling Sun static clinic (by showing Smiling Sun logo if necessary). Probing respondents in this manner may tend to over-report awareness of Smiling Sun static clinics.

Table 8.12 provides the percentage of women who were aware of a Smiling Sun static clinic in their area by background characteristics, according to project and non-project areas. Overall, 23 percent of project area women were aware of a Smiling Sun static clinic/hospital in their area. Awareness varied by age, education, division and socioeconomic status. Younger and more highly educated women were more likely to be aware of a Smiling Sun static clinic. Awareness was highest in Khulna/Barisal (30.3 percent), and lowest in Dhaka (18.4 percent). Awareness was positively associated with socioeconomic status. About 30 percent of women in the highest asset quintile were aware of a Smiling Sun static clinic, against only 19.4 percent in the lowest quintile. Awareness of a Smiling Sun static clinic was lower in non-project areas. About 10.7 percent women in non-project areas were aware of a Smiling Sun static clinic. Awareness did not vary greatly by age and socioeconomic status.

8.12. Awareness of Hospital/Clinic Providing Health and Family Planning Services

Women were asked about clinics and hospitals in their area from where they could receive health or family planning services. If they knew of such a hospital/clinic in their area, they were then asked about the type of hospital/clinic. If a woman did not spontaneously report awareness of a type of hospital/clinic, she was shown the Smiling Sun logo. If she was aware, a series of questions about her awareness and experiences with Smiling Sun Static clinics were asked. Table 8.13 provides the distribution of facility types by division and project and non-project areas.

Most women in project and non-project areas (83 percent in project against 87 percent in non-project areas) were able to identify a specific source for their health or family planning services. Among those women in project areas, 67.5 percent identified public sector sources, 10.1 percent identified Smiling Sun static clinics, and a very small percentage mentioned private medical sources. About 17 percent were unaware of a clinic providing health and family planning services. There was some variation in awareness of Smiling Sun static clinics by division, with 14.2 percent reporting awareness of Smiling Sun static clinics in Rajshahi and only 6.1 percent reporting awareness in Dhaka. In all divisions, public sector sources were more commonly known than Smiling Sun sources.

In non-project areas, public sector sources were identified by 77.4 percent of respondents, while only 3.9 percent mentioned Smiling Sun static clinics as providers of health and family planning services. Private hospitals/clinics were not identified as major sources of health or family planning services in either project or non-project areas.

Table 8.12. Awareness of Smiling Sun static clinics

Percentage of women who are aware of a Smiling Sun static clinic in their area from which one can obtain health of family planning services, by background characteristics, BSSFP 2008.

	Project areas		Non-project areas	
	Yes	Number	Yes	Number
Age				
> 20	25.5	651	12.2	763
20-24	26.1	1164	11.9	1199
25-29	24.3	1182	13.2	1264
30-34	20.2	1031	11.4	1078
35-49	21.1	2301	7.9	2485
Domains				
Dhaka division	18.4	2342	-	-
Chittagong/Sylhet division	20.8	1822	-	-
Khulna/Barisal division	30.3	681	-	-
Rajshahi division	29.2	1485	-	-
	.			
Highest education level				
No education	18.0	2821	7.3	2923
Primary incomplete	22.0	1035	8.7	1001
Primary complete	25.8	769	13.0	779
Secondary incomplete	28.2	1352	13.6	1632
Secondary complete or higher	38.6	353	22.1	454
Household asset quintile				
Lowest	19.4	1145	9.3	1133
Second	20.0	1212	10.7	1244
Middle	21.3	1303	9.5	1297
Fourth	22.9	1328	11.0	1421
Highest	30.2	1343	12.1	1695
Total	22.9	6330	10.7	6789

Note: Response includes probing for Smiling Sun static clinic.

Table 8.13. Knowledge of hospital/clinic providing health and family planning services

Percent distribution of women by type of hospital/static clinic in their area from which one can obtain health of family planning services, BSSFP 2008.

Type of hospital/static clinic	Project areas					Non-project areas
	Dhaka division	Chittagong/ Sylhet division	Khulna/ Barisal division	Rajshahi division	Total	
Public sector	77.5	65.3	69.6	53.5	67.5	77.4
Hospital clinic	.9	5.9	3.9	5.5	3.8	2.7
FWC	34.8	22.4	13.9	17.2	24.8	33.9
UHC	40.5	35.6	49.2	29.4	37.4	38.3
MCWC	.1	.5	1.0	.3	.4	.5
Community clinic/Rural dispensary	1.2	.9	1.6	1.1	1.1	2.0
Smiling Sun static clinic	6.1	10.7	13.0	14.2	10.1	3.9
NGO sector	.0	.4	.0	.2	.2	.5
Marie Stopes	.0	.0	.0	.0	.0	.0
UPHCP						
Other NGO clinic	.0	.4	.0	.2	.2	.5
Private hospital/clinic	4.9	6.4	8.4	3.0	5.3	5.4
Other	.0	.0	.0	.0	.0	.0
Not aware of clinic/ Don't know type	11.4	17.3	9.0	29.0	17.0	12.8
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number	2,342	1,822	681	1,485	6,330	6,789

8.13. Knowledge of ESP Services at Smiling Sun Static Clinics

To measure the level of knowledge of women about the availability of ESP services at Smiling Sun static clinics, women who were aware of a Smiling Sun static clinic were asked if they were aware of specific ESP services offered at those clinics. Table 8.13A provides the proportion of women who identified specific ESP services at Smiling Sun clinics.

Most respondents in project areas who identified Smiling Sun static clinics knew that these clinics provide maternal care. More than four-fifths knew that maternal health care was available, while 69 percent knew that antenatal care was offered. About three-fourths also reported that Smiling Sun static clinics provide family planning services (with 48 percent describing clinical and 45 percent describing non-clinical methods), and two-thirds of respondents mentioned child health services. Less commonly mentioned was the provision of postnatal and general health care.

Although overall awareness about Smiling Sun static clinics was low in non-project areas, four-fifths of those who were aware of these clinics knew about the maternal health care they provide, and two-thirds knew of the provision of family planning and child health services.

Table 8.13A. Knowledge of ESP services at Smiling Sun static clinics

Percentage of women who know a specific services at Smiling Sun static clinics, according to service type, BSSFP 2008.

Type services	Project areas	Non-project areas
Family planning	71.9	63.0
Clinical method	47.6	46.8
Non-clinical method	45.3	36.9
Advice for side effects	4.1	1.5
Maternal health	82.3	85.0
Antenatal care	68.8	75.8
Postnatal care	13.7	14.2
Tetanus	38.9	34.5
Child health	66.3	63.7
EPi	33.1	32.6
Diarrhea treatment/ORS	7.4	5.2
ARI treatment	0.9	0.7
Vitamin A	10.2	7.0
General illness.	26.0	27.3
Other child care	11.4	13.8
Reproductive health (RTI/STD)	0.3	0.3
General health	16.3	13.5
Other		
DK/missing	2.0	3.3
Number	1451	723

Note: Multiple responses possible.

8.14. Use of Smiling Sun Static Clinics

Women who identified Smiling Sun static clinics in their area were asked whether they had ever visited that clinic and whether they had visited it in the three months prior to the survey. Table 8.14 provides the percentage of women who ever visited Smiling Sun static clinics and the percentage of those who visited them in the last three months according to selected background characteristics. Ever-use and usage of static clinics in the previous three months were low across all divisions and project/non-project areas. For project areas, 51.3 percent of those who were aware of Smiling Sun clinics reported ever attending one, and only 10.6 percent reported doing so in the last three months.

Ever-use of Smiling Sun static clinics among women was highest in Khulna/Barisal (57.2 percent), followed by Chittagong/Sylhet (55.3 percent), Dhaka (48.8 percent), and Rajshahi (47.6 percent). Ever-use was clearly related to the need for health services. It was slightly higher among those with more children and among those of prime reproductive age. Ever-use was also slightly higher among wealthier women relative to the lowest quintile, though use in the past three months was roughly equal across quintiles. In non-project areas, ever-use and use in last three months of Smiling Sun static clinics were 50.9 and 6.9 percent, respectively.

Table 8.14. Use of Smiling Sun static clinics

Percentage of women who have ever visited Smiling Sun static clinics, and who visited a Smiling Sun static clinic in last three months, by selected background characteristics, BSSFP 2008.

Background characteristics	Ever visited Smiling Sun static clinic	Visited Smiling Sun static clinic in last 3 months	Number of women
Age			
>20	51.1	15.3	166
20-24	55.9	10.4	304
25-29	51.5	11.0	287
30-34	52.4	11.7	208
35-49	48.0	8.5	486
Domains			
Dhaka division	48.8	10.5	432
Chittagong/Sylhet division	55.3	9.7	379
Khulna/Barisal division	57.2	12.0	206
Rajshahi division	47.6	11.1	434
Highest education level			
No education	49.3	8.8	508
Primary incomplete	52.6	11.9	228
Primary complete	53.6	10.0	198
Secondary incomplete	51.4	10.6	381
Secondary complete or higher	53.3	16.3	136
Number of Living Children			
0	42.5	10.2	130
1	55.9	10.3	348
2	48.8	11.3	344
3	53.9	12.3	303
4+	50.4	8.9	326
Household asset quintile			
Lowest	49.4	10.3	222
Second	49.7	12.9	242
Middle	52.9	10.1	277
Fourth	52.2	8.2	304
Highest	51.6	11.7	405
Project and Non-project areas			
Project areas	51.3	10.6	1451
Non-project areas	50.9	6.9	723

8.15. ESP Services Used at Smiling Sun Static Clinics

Women who had visited a Smiling Sun Static clinic in the last three months were asked about the type of ESP services they used at them. Table 8.15 provides the proportion of women who used a specific ESP service at a Smiling Sun static clinic in the three months preceding the survey, according to service type and project and non-project areas.

In project areas, only 10.6 percent of those who were aware of a Smiling Sun static clinic visited the clinic in the last three months. Among those, 48.9 percent visited for family planning services, 38.4 percent used the clinics for child health, 21.4 percent visited for maternal health, and only 10.4 percent used the facilities for general health services. In non-project areas, only 6.9 percent of those who were aware of a Smiling Sun static clinic visited the clinic in the three months preceding the survey. Among those, 46.7 percent visited for family planning services, 27.6 percent for child health, 26.9 percent for maternal health, and 8.6 percent visited for general health services.

Table 8.15. ESP services used at Smiling Sun static clinics

Percentage of women who used specific services at Smiling Sun static clinics in the last three months according to service type, BSSFP 2008.

Type services	Project areas	Non-project areas
Family planning	48.9	46.7
Clinical method	29.7	33.9
Non-clinical method	17.2	11.5
Advice for side effects	4.3	4.2
Maternal health	21.4	26.9
Antenatal care	11.7	24.1
Postnatal care	3.6	1.2
Tetanus	13.6	4.0
Child health	38.4	27.6
EPi	14.1	4.2
Diarrhea treatment/ORS	1.4	1.2
ARI treatment	.5	
Vitamin A	3.8	6.1
General illness.	16.4	12.9
Other child care	5.7	5.9
Reproductive health (RTI/STD)	0.0	0.0
General health	10.4	8.6
Other	0.0	0.0
DK/missing	0.0	0.0
Number	155	50

8.16. Quality of Care at Smiling Sun Static Clinics

Users of Smiling Sun static clinics in the past three months were asked a set of questions related to the quality of care that they received during their most recent visit. The questions addressed travel time, waiting time, and payment. Table 8.16 presents data on these issues, by project and non-project areas.

In project areas, the mean travel time to Smiling Sun static clinics was 25.7 minutes, as compared with 38.4 minutes in non-project areas. The mean waiting time at Smiling Sun static clinics was 23.5 minutes, compared to 27.9 minutes in non-project areas. In project areas, all visitors (100 percent) reported paying for the services they received, and approximately 83 percent paid the exact amount they were asked to pay. In non-project areas, 97 percent made this payment, and 90 percent paid the exact amount requested. This indicated comparable quality of care across project and non-project areas.

8.17. Perception and Attitude towards Smiling Sun Clinics

Users' perception and attitude towards services are important determinants of utilization of services, and in turn, of program sustainability. It is therefore important to know about the users' perceived benefits and attitude towards services when they seek services from Smiling Sun static or satellite clinics. Table 8.17 presents the percentages of women who used services from Smiling Sun static or satellite clinics in the three months preceding the survey by their perceived benefits, and favorable points that come to their mind when they seek services from these clinics. Also presented are perceptions about the individuals who seek care at these facilities.

The most important perceived benefit was that Smiling Sun clinics provide high quality of services (47.4 percent), followed in importance by reasonable prices (32.3 percent), essential care available (30 percent), and close proximity to residence (28.1 percent). Perception of a high quality of care at Smiling Sun clinics was positively associated with education and socioeconomic status. Perception varied little by age and geographic division.

Women were asked about the favorable points that came to their mind when they sought care at Smiling Sun clinics. The most important favorable point mentioned was "service assurance/ existence of safety net" (49.7 percent). The other favorable points mentioned included: Smiling Sun clinics contribute to ensure good health for all (26.1 percent), provide social service (22.7 percent), and build social awareness (19.7 percent). Variations in perceptions by age, education, and socioeconomic status were negligible.

In response to a question on "which economic group mostly seeks care at Smiling Sun facilities?", three-fourths reported that all economic groups came to the Smiling Sun static and satellite clinics for care. This perception varied little by age, division, socioeconomic status, and education.

Table 8.16. Quality of services from Smiling Sun clinic

Women's perceptions of quality of treatment at Smiling Sun clinic during most recent visit in three months preceding the survey, BSSFP 2008.

Quality Indicator	Project areas	Non-project areas
Mean travel time (minutes)	25.7	38.4
Mean waiting time (minutes)	23.5	27.9
Number	155	50
Did pay for services		
Yes	74.1	98.8
No	25.9	1.2
Number	155	50
Paid amount		
Same amount asked for	83.3	89.7
More	4.8	2.8
Less	11.9	4.5
Credit	0.0	3.0
Number	115	49

Table 8.17. Perception and attitude towards Smiling Sun clinic

Among women who used service from Smiling Sun satellite clinic or static clinic in the three months preceding the survey, percentage by perceptions of benefits when seeking services from the Smiling Sun static or satellite, percentage by favorable points that come to their mind when seeking services from the Smiling Sun static or satellite clinic, and percent distribution by economic groups coming to the Smiling Sun static or satellite clinic by selected background characteristics, BSSFP 2008.

Background characteristics	Perceived benefits when seeking services from Smiling Sun clinic*					Favorable points about Smiling Sun clinic*				Economic groups coming to the Smiling Sun static or satellite clinic					Number of women
	Trained provider	High quality services	Nearest facility	Essential care	Reasonable price	Safety net exist	Social service	Build health awareness	Contribute to ensure good health for all	Upper class	Middle class	Lower class	Poor or pop	All class	
Age															
>20	1.0	55.3	27.4	24.4	28.7	46.4	28.6	16.9	21.4	2.1	4.7	7.1	8.9	77.2	130
20-24	4.8	50.1	28.9	29.8	28.9	47.5	22.2	19.8	28.5	0.5	5.1	10.0	7.3	77.1	293
25-29	6.7	47.0	29.2	28.1	30.4	49.7	22.4	16.9	25.9	0.3	5.9	9.8	7.4	76.6	275
30-34	8.4	47.0	24.8	32.9	33.8	51.9	19.9	20.1	26.2	1.4	5.6	10.3	10.2	72.5	215
35-49	3.3	43.1	28.7	31.7	36.5	51.3	22.8	22.4	26.1	0.3	6.9	10.1	6.7	76.0	384
Domains															
Dhaka division	5.3	49.4	34.0	23.8	27.2	51.7	21.9	17.7	23.4	0.4	4.9	9.8	9.1	75.8	399
Chittagong/Sylhet division	4.6	49.0	21.0	34.0	30.4	45.2	23.5	21.3	25.8	1.0	7.7	9.5	5.8	75.9	368
Khulna/Barisal division	7.1	48.1	23.2	41.9	32.8	49.0	34.0	20.3	25.7	1.2	4.1	9.1	9.5	75.9	170
Rajshahi division	4.0	43.1	31.1	27.1	39.6	52.4	17.3	20.0	29.8	0.4	5.8	10.2	7.6	76.0	360
Highest education level															
No education	2.8	43.3	29.1	25.6	34.6	45.7	23.1	18.5	24.7	0.6	6.3	10.1	6.3	76.6	490
Primary incomplete	4.3	45.2	27.7	29.0	34.6	51.7	21.6	17.6	25.5	0.3	3.5	8.9	11.1	76.2	215
Primary complete	3.1	48.3	29.3	28.1	29.1	50.7	22.1	21.3	20.5	0.7	8.3	16.8	9.7	64.5	188
Secondary incomplete	7.1	51.2	27.3	35.4	29.2	51.8	23.3	21.4	27.7	1.1	5.6	5.2	7.3	80.7	309
Secondary complete or higher	14.9	59.0	23.3	40.8	31.5	56.9	21.7	22.3	41.2	0.7	4.5	10.2	5.8	78.9	95

Background characteristics	Perceived benefits when seeking services from Smiling Sun clinic*					Favorable points about Smiling Sun clinic*				Economic groups coming to the Smiling Sun static or satellite clinic					Number of women
	Trained provider	High quality services	Nearest facility	Essen-tial care	Reason-able price	Safety net ex-ist	Social service	Build health aware-ness	Contribute to ensure good health for all	Upper class	Mid-dle class	Lower class	Poor or pop	All class	
Household asset quintile															
Lowest	4.5	45.1	27.8	23.0	34.5	42.6	21.6	20.4	25.1	0.6	5.8	7.0	12.6	74.0	237
Second	2.8	39.9	27.4	27.2	37.4	46.2	22.0	16.2	30.5	1.2	5.0	10.8	8.9	74.2	248
Middle	4.8	48.6	26.5	29.4	35.8	51.1	18.4	19.4	26.5	0.9	7.3	7.7	6.4	77.7	258
Fourth	4.2	48.7	27.0	33.5	32.6	54.8	24.9	21.4	22.8	0.5	4.9	12.0	7.9	74.7	266
Highest	8.1	53.3	31.2	35.5	22.5	52.5	25.9	21.0	26.0	0.4	6.2	10.8	4.1	78.5	288
Project and Non-project areas															
Project areas	5.0	47.4	28.1	30.0	32.3	49.7	22.7	19.7	26.1	0.7	5.9	9.7	7.8	75.9	1297
Non-project areas	5.9	57.4	25.6	25.3	31.3	54.4	22.4	20.2	21.9	0.9	6.8	6.2	9.0	77.1	410

Note: Multiple responses possible.

8.18. Sources of Health and Family Planning Information and Services

Respondents were asked whether they were able to obtain health information, supplies of pills, condoms, ORS, or vitamin A from someone in their area. Table 8.18 shows that more than two-thirds of respondents in project areas reported being able to do so. For 85.2 percent of these women, the source was identified as a Smiling Sun Community Service Promoter (CSP) or depotholder, while 13.8 percent identified the source as a government family planning worker. Awareness did not vary by division, but did do so by socioeconomic status. Awareness was higher among women of lower quintiles.

A slightly lower proportion (64.5 percent) of non-project women reported being able to get health information or supplies of pills, condoms, ORS, etc. from someone in their area. More than eight in every ten women identified the source of health information as a government family planning worker, while 10.3 percent identified a government health worker. Variations by socioeconomic status were not significant.

Table 8.18. Source of health and family planning information and services

Percentage of all women who report being able to get health information or supplies of pills, condoms, ORS or vitamin A from someone affiliated with an organization in their area by background characteristics, BSSFP 2008.

	Anybody with information on health and pill supplies etc.		Among those who knew anybody with health information or supplies, percentage by organization of the provider					
	Could get information	Number of women	Smiling Sun CSP/ depotholder	Government family planning/health worker	BRAC/ Other NGO Worker	Other	DK/ missing	Number of women
	Project areas							
Domains								
Dhaka division	72.9	2342	85.6	14.0	3.8	0.4	0.0	1708
Chittagong/Sylhet division	59.8	1822	86.1	11.6	3.1	0.5	0.0	1090
Khulna/Barisal division	60.0	681	82.7	17.3	1.0	0.2	1.2	409
Rajshahi division	79.9	1485	84.6	14.2	2.3	0.0	0.0	1187
Household asset quintile								
Lowest	67.4	1145	88.0	10.6	3.3	0.5	0.0	772
Second	72.8	1212	88.8	11.0	1.6	0.2	0.0	882
Middle	72.5	1303	84.9	13.1	3.4	0.3	0.2	945
Fourth	69.8	1328	83.1	15.7	3.4	0.2	0.2	927
Highest	64.5	1343	81.5	18.0	3.2	0.2	0.1	867
Total	69.4	6330	85.2	13.8	3.0	0.3	0.1	4393
	Non-project areas							
Household asset quintile								
Lowest	62.6	1133	10.9	84.6	5.3	0.4	0.0	709
Second	67.9	1244	10.3	84.9	4.7	0.5	0.2	845
Middle	68.1	1297	9.5	86.4	5.8	0.1	0.0	884
Fourth	67.0	1421	9.4	85.1	7.4	0.3	0.0	952
Highest	58.2	1695	11.5	84.5	5.7	0.2	0.1	987
Total	64.5	6789	10.3	85.1	5.8	0.3	0.1	4377

8.19. Health and Family Planning Information and Services Received in the Past Three Months

Table 8.19 provides the percentage of women who mentioned receiving specific information about health and family planning from a provider in the past three months by type of information and affiliation of that provider. Approximately 17 percent of women in project areas reported receiving health and family planning information in the last three months from a Smiling Sun CSP or depot holder. For women in project areas receiving information from Smiling Sun Community Service Promoters/depotholders, the most common type of information provided concerned family planning and its potential side effects (86 percent). Other less common types of information included maternal health, child health, illness, vitamin A, and diarrhea treatment/ORS. Government family planning and health workers and other NGO workers were also important sources of information.

Approximately 16 percent of women in project areas reported receiving family planning or health services in the previous three months (Table 8.20). Half of them (49.4 percent) received oral contraceptives, while about one-third received other family planning methods. Other services and supplies included ORS (7.4 percent), child health services (5 percent), condoms (3.5 percent), and vitamin A (2.5 percent). The pattern in non-project areas was similar. Government health and family planning workers were the main source of information and services in them.

8.20. Referral to Health and Family Planning Services and Home Visitation in the Last Three Months

Women were also asked whether they had been referred to a satellite clinic for health and family planning services in the past three months. Tables 8.21A and 8.21B provide the percentage of women who were referred to any satellite or static clinics for health or family planning services in the past three months by type of providers and services. Nearly six percent of women who visited a BSSFP CSP/depotholder reported that person referred them to a satellite or static clinic. The corresponding percentage was 7.3 percent in non-project areas. In both project and non-project areas, the most common reason for referral was for a clinical or non-clinical family planning method, but referrals were also made for antenatal care, illnesses, and EPI. Nearly one-fifth of women in project areas reported that the Smiling Sun CSP/depotholder had visited them in their homes in the past three months while about 19 percent in non-project areas recalled being visited by a government family planning/health worker.

Table 8.19. Health and family planning information received in the past three months

Percentage of women who mentioned receiving specific information about health and family planning from a provider in the past three months by provider type, BSSFP 2008.

	Organization			Other	Total
	Smiling Sun CSP/ depotholder	Government family planning/ health worker	BRAC/Other NGO Worker		
	Project areas				
Received FP/health information in last 3 months					
Yes	16.6	13.1	11.7	8.0	16.0
Number	3741	611	130	17	4499
Information received					
Family planning/Side effect	86.0	86.5	61.1	52.7	85.4
Maternal health	10.1	4.5	28.6	0.0	9.9
Child health	5.9	4.3	39.5	0.0	6.4
Diarrhea treatment/ORS	1.7	1.6	0.0	0.0	1.7
ARI treatment	0.0	0.0	0.0	0.0	0.0
Vitamin A	2.0	5.3	9.8	0.0	2.6
Illness	6.1	3.9	14.0	47.3	6.1
Other child care	1.6	0.0	9.8	0.0	1.6
RTI/STD treatment	0.0	0.0	0.0	0.0	0.0
General health	1.6	10.4	0.0	47.3	2.6
Other	0.0	0.0	0.0	0.0	0.0
Number	622	80	15	01	719
	Non-project areas				
Received FP/health information in last 3 months					
Yes	16.2	16.6	8.8	9.3	16.1
Number					
	451	3751	255	16	4473
Information received					
Family planning/Side effect	90.0	87.6	67.4	100.0	87.2
Maternal health	10.8	6.2	16.7	0.0	7.0
Child health	1.0	4.2	9.3	0.0	4.0
Diarrhea treatment/ORS	0.0	3.2	0.0	0.0	2.8
ARI treatment	0.0	0.3	0.0	0.0	0.2
Vitamin A	4.5	1.9	2.8	0.0	2.2
Illness	2.0	2.9	2.8	100.0	3.0
Other child care	0.0	1.6	14.9	0.0	1.9
RTI/STD treatment	0.0	0.3	0.0	0.0	0.2
General health	0.0	2.2	6.6	0.0	2.1
Other	0.0	0.0	0.0	0.0	0.0
Number	73	624	22	01	721

Note: Numerator is the number of women who report receiving information on specific services; denominator is the number of women who report knowing of a specific provider who supplies health and family planning information.

Table 8.20. Health and family planning services received in the past three months

Percentage of women who received specific health and family planning services in the past three months and type of service received, BSSFP 2008.

	Organization				
	Smiling Sun CSP/ depotholder	Government family planning/ health worker	BRAC/Other NGO Worker	Other	Total
	BSSFP project areas				
Received any supplies in last 3 months					
Yes	16.0	12.8	9.8	8.0	15.4
Number	3741	611	130	17	4499
Supplies received					
Oral pill	49.4	65.3	66.1	0.0	51.4
Condom	3.5	6.3	4.9	0.0	3.8
Other family planning method	34.4	23.3	0.0	100.0	32.7
ORS	7.4	2.5	18.0	0.0	7.0
Vitamin A	2.5	.8	12.5	0.0	2.5
Child health	5.0	4.4	33.9	0.0	5.5
Other	1.6	0.0	0.0	0.0	1.4
Number	599	78	13	01	691
	Non-project areas				
Received any supplies in last 3 months					
Yes	12.0	18.9	8.6	9.3	17.6
Number	451	3751	255	16	4473
Supplies received					
Oral pill	60.0	68.3	54.6	0.0	67.2
Condom	.0	2.9	0.0	0.0	2.6
Other family planning method	35.6	24.7	14.3	0.0	25.2
ORS	1.4	1.9	13.5	0.0	2.2
Vitamin A	7.1	1.4	0.0	0.0	1.7
Child health	0.0	2.5	10.1	100.0	2.7
Other	0.0	0.8	7.6	0.0	0.9
Number	54	708	22	1	786

Note:

Received any supplies: Numerator is the number of women who report receiving any family planning or health services from a specific provider; denominator is the number of women who report knowing of a specific provider who supplies health and family planning information.

Supplies received: Numerator is the number of women who report receiving a specific type of family planning or health service from a specific provider; denominator is the number of women who report receiving supplies from a specific provider.

Table 8.21A. Referral to health and family planning services and home visitation, project areas

Percentage of women who were referred for specific health and family planning services in the past three months and percentage of women reporting home visitation in the past three months by provider type, BSSFP 2008.

	Organization				
	Smiling Sun CSP/ depotholder	Government family planning/ health worker	BRAC/Other NGO Worker	**Other**	**Total**
Referred to a satellite or static clinic in last 3 months					
Yes	6.4	3.1	1.2	0.0	5.8
Number	3741	611	130	17	4499
Referred services					
Clinical FP method	54.6	46.1	100.0	0.0	54.2
Non-clinical FP method	24.4	35.3	100.0	0.0	25.6
Treatment/advice for side-effect	1.9	0.0	0.0	0.0	1.8
Antenatal care	8.8	0.0	0.0	0.0	8.1
Postnatal care	0.9	0.0	0.0	0.0	.9
Tetanus toxoid	2.2	0.0	0.0	0.0	2.1
EPI	6.5	7.4	0.0	0.0	6.5
Diarrhea treatment/ORS	1.6	0.0	0.0	0.0	1.4
ARI treatment	0.0	0.0	0.0	0.0	.0
Vitamin A	1.5	0.0	0.0	0.0	1.4
Illness	6.8	14.5	0.0	0.0	7.3
Other child care	2.8	7.9	0.0	0.0	3.2
RTI/STD treatment	0.7	0.0	0.0	0.0	.6
General health	6.4	3.3	0.0	0.0	6.2
Other	0.0	0.0	0.0	0.0	.0
Number	238	19	2	0	259
Any one visited home in last 3 months to supply oral pill, condom, Vit-A or ORS					
Yes	21.1	15.8	12.9	26.0	20.1
Number	3741	611	130	17	4499

Table 8.21B. Referral to health and family planning services and home visitation, non-project areas

Percentage of women who were referred for specific health and family planning services in the past three months and percentage of women reporting home visitation in the past three months by provider type, BSSFP 2008.

	Organization			Other	Total
	Smiling Sun CSP/ depotholder	Government family planning/ health worker	BRAC/Other NGO Worker		
Referred to a satellite or static clinic in last 3 months					
Yes	7.3	3.4	1.8	0.0	3.7
Number	451	3751	255	16	4473
Referred services					
Clinical FP method	60.5	53.8	0.0	0.0	53.7
Non clinical FP method	14.9	30.8	0.0	0.0	26.8
Treatment/advice for side-effect	5.0	1.9	0.0	0.0	2.4
Antenatal care	13.6	5.8	68.0	0.0	9.1
Postnatal care	0.0	0.0	0.0	0.0	.0
Tetanus toxoid	6.9	7.0	0.0	0.0	6.8
EPI	2.3	6.7	0.0	0.0	5.6
Diarrhea treatment/ORS	0.0	0.6	0.0	0.0	.4
ARI treatment	0.0	0.0	0.0	0.0	.0
Vitamin A	4.5	1.6	0.0	0.0	2.2
Illness	13.2	5.2	64.0	0.0	8.5
Other child care	0.0	1.6	0.0	0.0	1.2
RTI/STD treatment	0.0	1.3	0.0	0.0	1.0
General health	0.0	2.2	0.0	0.0	1.7
Other	0.0	0.6	0.0	0.0	.4
Number	33	128	5	0	166
Any one visited home in last 3 months to supply oral pill, condom, vitamin-A or ORS					
Yes	18.5	19.0	9.8	0.0	18.4
Number	451	3751	255	16	4473

8.21. Attendance at Community Meetings

Project area women were asked if they had ever attended any meetings organized by a Smiling Sun Community Mobilizer or Community Service Promoter. Only 3.6 percent of respondents in project areas reported attending such a meeting. In general, family planning, pregnancy care, and child health issues were discussed in those meetings.

Table 8.22. Attendance at community meetings, project areas

Percentage of women who attended a meeting by a community mobilizer/service promoter, BSSFP 2008.

	Dhaka division	Chittagong/ Sylhet division	Khulna/Barisal division	Rajshahi division	Total
Attended a meeting by a community mobilizer					
Yes	3.79	2.53	4.25	4.21	3.58
Number	2342	1822	681	1485	6330
Issues discussed in the meeting					
Newlywed meeting	10.17	6.85	12.20	12.82	10.48
Pregnancy care	52.54	63.01	70.73	61.54	59.49
Postnatal care	15.25	8.22	9.76	17.95	13.86
Breastfeeding	8.47	5.48	14.63	10.26	9.14
Family Planning	72.88	68.49	48.78	66.67	67.19
Child health	35.59	24.66	56.10	23.08	32.53
STD/RTI	.00	2.74	4.88	2.56	1.89
Nutrition	5.08	4.11	17.07	7.69	7.14
Other	.00	.00	.00	2.56	.71
Number	89	46	29	62	226
Mean months since last meeting					
Months (mean)*	8.75	5.51	6.03	9.06	7.75
Number	77	44	28	53	201

* Excludes DK and missing observations.

ACPR Personnel Who Implemented the Bangladesh Smiling Sun Franchise Program (BSSFP) Baseline Survey 2008 – Rural Component

Project Director

Dr. M. Sekander Hayat Khan

Deputy Project Director

Mr. A. P. M. Shafiur Rahman
Ms. Tauhida Nasrin

Project Manager

Mr. S. M. Salamat Ullah
Mahfuza Begum

Quality Control Officer

Ms. Sadikun Nahar Sima
Ms. Tahmina Afrin
Ms. Jannatul Ferdous
Ms. Effat Jahan
Mr. Ehosan Ali Molla
Mr. Arabinda Mridha
Mr. Md. Asaduzzaman
Mr. Md. Nazrul Islam

Male Supervisor

Mr. Mohammad Masud Siddique
Mr. Md. Atikul Islam Shah
Mr. Md. Selimuzzaman
Mr. Md. Abdul Kadir
Mr. Khandaker Md. Azizur Rahman
Mr. Arafat Alam Bhuiyan
Mr. Dipok Chandra Malaker
Mr. Anwar Hossain
Mr. Md. Abu Farhad Al Masud
Mr. Md. Nurul Islam
Mr. Alok Mistry
Mr. Md. Aminul Islam
Mr. Mainul Islam
Mr. Azharul Hoque

Female Supervisor

Ms. Asma Begum
Ms. Ranu Ara Begum
Ms. Khadija Khatun
Ms. Shahriar Afroz
Ms. Shajeda Khatun
Ms. Shirina Khatun
Ms. Momota Parvin Belly
Ms. Rahanaj Afrin
Ms. Shahinur Akter
Ms. Nilufa Yeasmin
Ms. Tauhida Sultana
Ms. Sima Sultana
Ms. Nasima Akter Chowdhury
Ms. Lipika Khatun

Interviewer

Ms. Salina Akter Shila
Ms. Nasrin Akter (Ratna)
Ms. Rabeya Khanam
Ms. Sabrina Momtaz Tuly
Ms. Umme Kulsum
Ms. Sharmin Ara
Ms. Nasrin Khatun
Ms. Rubina Begum
Ms. Nasrin Nahar
Ms. Sufia Begum
Ms. Nadira Khatun
Ms. Rima Parvin
Ms. Parvin Akter Pole
Ms. Salina Akter
Ms. Papri Chowdhury
Ms. Nasrin Yeasmin (Shikha)
Ms. Anjumanara Begum
Ms. Munni Akter
Ms. Faujia Sharmin
Ms. Lutfun Nessa
Ms. Rupsana Begum
Ms. Nahida Khatun
Ms. Shiuly Begum (Dalia)
Ms. Begum Sayla Yasmin Shahnewaj
Ms. Ruma Begum
Ms. Taslima Nasrin
Ms. Shipu Helder

Ms. Sajeda Begum
Ms. Samira Akter Sultana
Ms. Rabeya Akter
Ms. Sonia Mahmuda
Ms. Towhida Subra
Ms. Shipra Parvin
Ms. Shiuli Khatun
Ms. Lata Mir
Ms. Nasrin Parvin
Ms. Monowara Begum
Ms. Afrin Akbar Lipi
Ms. Nilufa Akter
Ms. Morzina Khatun
Ms. Hosne Ara Khatun
Ms. Akija Khatun
Ms. Monira Akter (Champa)
Ms. Shabnom Mustary
Ms. Lipi Akter
Ms. Maksuda Khatun
Ms. Selina Parvin (Moyna)
Ms. Nafisa Nur Asha
Ms. Sahida Begum
Ms. Monoara Khatun
Ms. Fatema Khatun
Ms. Sumitra Bare
Ms. Khadiza Nasrin
Ms. Monika Mridha
Ms. Rowshan Ara Begum
Ms. Ratna Pervin

Household Listing Supervisor

Mr. Md. Shariful Islam
Mr. Md. Abdul Momin
Mr. Md. Torikul Islam
Mr. Sk. Rasel
Mr. Mohammad Ismail Hossain

Household Lister

Mr. Md. Kaosaruzzaman
Mr. Rafiqul Islam
Mr. B. M. Faysal
Mr. Md. Juwel Rana
Mr. Md. Asraf Hossen
Mr. A Z M Rayhan
Mr. Lelin Roy
Mr. Md. Rabiul Hassan
Mr. Md. Masud-ur-Rahman
Mr. Soroardiuhasan
Mr. Md. Abdul Momin
Mr. M. A. Obidah
Mr. Md. Nazib Uzzaman
Mr. Md. Sanaullah
Mr. Abdul Motin
Mr. Mohammad Abu Bakar Siddique
Mr. Mirza Shariful Islam
Mr. Md. Humayun Kabir
Mr. Md. Yusuf Ali
Mr. Md. Hadiul Islam

Registration and Documentation Officer

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Mr. Md. Shafiqul Islam
Mr. Md. Mahbubul Hakim
Mr. Md. Tariqul Basar (Robins)

SAMPLING ERROR TABLES: RURAL

Table A.1. Sampling errors, Rural BSSF areas, 2008

Variables	Value (R)	Standard error (SE)	Number of cases		Design effect (Deff)	Relative error (SE/R)	Confidence limits	
			Unweighted (N)	Weighted (WN)			R-2SE	R+2SE
Total fertility rate (TFR)	2.969	0.088				0.030	2.793	3.145
Mortality rates								
Neonatal	35.947	4.296				0.120	27.36	44.5385
Postnatal	9.265	2.106				0.227	5.052	13.4766
Infant	45.211	4.552				0.101	36.11	54.316
Child	15.281	2.515				0.165	10.25	20.3111
Under 5	59.802	5.083				0.085	49.64	69.968
Family planning								
Currently using method	0.565	0.011	6001	6004	1.719	0.019	0.543	0.587
Currently using modern method	0.497	0.010	6001	6004	1.550	0.020	0.477	0.517
Pill	0.264	0.009	6001	6004	1.582	0.034	0.246	0.282
IUD	0.005	0.001	6001	6004	1.099	0.200	0.003	0.007
Injection	0.145	0.007	6001	6004	1.540	0.048	0.131	0.159
Condom	0.028	0.003	6001	6004	1.409	0.107	0.022	0.034
Female sterilization	0.045	0.004	6001	6004	1.495	0.089	0.037	0.053
Male sterilization	0.003	0.001	6001	6004	1.417	0.333	0.001	0.005
Norplant	0.007	0.001	6001	6004	0.929	0.143	0.005	0.009
Any traditional	0.069	0.005	6001	6004	1.529	0.072	0.059	0.079
Not using any method	0.435	0.011	6001	6004	1.719	0.025	0.413	0.457
Using modern among 10-14	0.240	0.103	24	28	1.276	0.429	0.034	0.446
Using modern among 15-19	0.402	0.025	608	615	1.264	0.062	0.352	0.452
Vaccination among 12-23 months								
BCG	0.934	0.016	655	633	1.621	0.017	0.902	0.966
DPT 3	0.894	0.017	655	633	1.389	0.019	0.86	0.928
Polio 3	0.893	0.017	655	633	1.384	0.019	0.859	0.927
Measles	0.836	0.019	655	633	1.291	0.023	0.798	0.874
Full vaccination	0.841	0.020	655	633	1.376	0.024	0.801	0.881
Vitamin A among 9-59 months	0.757	0.012	2374	2318	1.347	0.016	0.733	0.781
Children received ORT for diarrhea	0.784	0.045	157	146	1.321	0.057	0.694	0.874
Children received labangur treatment	0.166	0.031	157	146	1.007	0.187	0.104	0.228
Children ARI treatment in facility	0.362	0.045	189	181	1.260	0.124	0.272	0.452
ANC received for birth last 35 months	0.521	0.018	2046	1990	1.607	0.035	0.485	0.557
ANC from medically trained last 35 months	0.462	0.017	2046	1990	1.521	0.037	0.428	0.496
TT received for births last 35 months	0.721	0.014	2046	1990	1.392	0.019	0.693	0.749

Variables	Value (R)	Standard error (SE)	Number of cases		Design effect (Deff)	Relative error (SE/R)	Confidence limits	
			Unweighted (N)	Weighted (WN)			R-2SE	R+2SE
Knowledge of SS static clinic services								
Knows clinical FP	0.476	0.025	1450	1451	1.907	0.053	0.426	0.526
Knows non-clinical FP	0.453	0.030	1450	1451	2.296	0.066	0.393	0.513
Knows advice for side effects	0.041	0.007	1450	1451	1.345	0.171	0.027	0.055
Knows ANC	0.688	0.022	1450	1451	1.809	0.032	0.644	0.732
Knows PNC	0.137	0.014	1450	1451	1.551	0.102	0.109	0.165
Knows EPI	0.331	0.028	1450	1451	2.267	0.085	0.275	0.387
Knows diarrhea treatment/ORS	0.074	0.010	1450	1451	1.455	0.135	0.054	0.094
Knowledge of SS satellite clinic services								
Knows clinical FP	0.418	0.024	3526	3607	2.922	0.057	0.37	0.466
Knows non-clinical FP	0.507	0.020	3526	3607	2.403	0.039	0.467	0.547
Knows advice for side effects	0.021	0.003	3526	3607	1.257	0.143	0.015	0.027
Knows ANC	0.643	0.019	3526	3607	2.382	0.030	0.605	0.681
Knows PNC	0.086	0.010	3526	3607	2.142	0.116	0.066	0.106
Knows EPI	0.429	0.024	3526	3607	2.912	0.056	0.381	0.477
Knows diarrhea treatment/ORS	0.054	0.006	3526	3607	1.594	0.111	0.042	0.066
Knowledge of pregnancy complications								
Tetanus	0.491	0.015	6330	6330	2.387	0.031	0.461	0.521
Prolonged labour	0.161	0.007	6330	6330	1.515	0.043	0.147	0.175
Convulsions	0.296	0.012	6330	6330	2.091	0.041	0.272	0.32
Retained placenta	0.422	0.017	6330	6330	2.739	0.040	0.388	0.456
Fetus in poor position	0.294	0.011	6330	6330	1.921	0.037	0.272	0.316
Excessive vaginal bleeding	0.211	0.010	6330	6330	1.950	0.047	0.191	0.231
Don’t know danger signs	0.020	0.002	6330	6330	1.137	0.100	0.016	0.024

Table A.2. Sampling errors, Rural non-BSSF areas, 2008

Variables	Value (R)	Standard error (SE)	Number of cases		Design effect (Deff)	Relative error (SE/R)	Confidence limits	
			Unweighted (N)	Weighted (WN)			R-2SE	R+2SE
Total fertility rate (TFR)	2.808	0.070				0.025	2.668	2.948
Mortality rates								
Neonatal	22.534	2.622				0.116	17.289	27.778
Postnatal	16.012	2.677				0.167	10.658	21.366
Infant	38.546	3.825				0.099	30.896	46.195
Child	14.400	2.672				0.186	9.056	19.744
Under 5	52.390	4.841				0.092	42.708	62.072
Family planning								
Currently using method	0.565	0.011	6438	6437	1.780	0.019	0.543	0.587
Currently using modern method	0.494	0.011	6438	6437	1.765	0.022	0.472	0.516
Pill	0.279	0.009	6438	6437	1.610	0.032	0.261	0.297
IUD	0.001	0.002	6438	6437	5.077	2.000	-0.003	0.005
Injection	0.111	0.007	6438	6437	1.788	0.063	0.097	0.125
Condom	0.029	0.003	6438	6437	1.434	0.103	0.023	0.035
Female sterilization	0.053	0.005	6438	6437	1.791	0.094	0.043	0.063
Male sterilization	0.004	0.001	6438	6437	1.271	0.250	0.002	0.006
Norplant	0.007	0.001	6438	6437	0.962	0.143	0.005	0.009
Any traditional	0.071	0.006	6438	6437	1.874	0.085	0.059	0.083
Not using any method	0.435	0.011	6438	6437	1.780	0.025	0.413	0.457
Using modern among 10-14	0.198	0.083	23	26	1.062	0.419	0.032	0.364
Using modern among 15-19	0.399	0.022	706	725	1.210	0.055	0.355	0.443
Vaccination among 12-23 months								
BCG	0.950	0.011	636	618	1.255	0.012	0.928	0.972
DPT 3	0.892	0.016	636	618	1.282	0.018	0.86	0.924
Polio 3	0.905	0.016	636	618	1.357	0.018	0.873	0.937
Measles	0.833	0.020	636	618	1.333	0.024	0.793	0.873
Full vaccination	0.806	2.1%	636	618	1.320	0.026	0.764	0.848
							0	
Vitamin A among 9-59 months	0.781	0.010	2483	2420	1.189	0.013	0.761	0.801
Children received ORT for diarrhea	0.770	0.038	146	139	1.065	0.049	0.694	0.846
Children received labangur treatment	0.208	0.046	146	139	1.336	0.221	0.116	0.3
Children ARI treatment in facility	0.365	0.036	205	190	1.031	0.099	0.293	0.437
ANC received for birth last 35 months	0.504	0.018	2098	2055	1.632	0.036	0.468	0.54
ANC from medically trained last 35 months	0.413	0.017	2098	2055	1.565	0.041	0.379	0.447
TT received for births last 35 months	0.738	0.014	2098	2055	1.443	0.019	0.71	0.766

Variables	Value (R)	Standard error (SE)	Number of cases		Design effect (Deff)	Relative error (SE/R)	Confidence limits	
			Unweighted (N)	Weighted (WN)			R-2SE	R+2SE
Knowledge of pregnancy complications								
Tetanus	0.492	0.015	6789	6789	2.472	0.030	0.462	0.522
Prolonged labour	0.155	0.007	6789	6789	1.594	0.045	0.141	0.169
Convulsions	0.301	0.012	6789	6789	2.156	0.040	0.277	0.325
Retained placenta	0.420	0.017	6789	6789	2.838	0.040	0.386	0.454
Fetus in poor position	0.266	0.01	6789	6789	1.865	0.038	0.246	0.286
Excessive vaginal bleeding	0.210	0.009	6789	6789	1.821	0.043	0.192	0.228
Don’t know danger signs	0.028	0.003	6789	6789	1.498	0.107	0.022	0.034

QUESTIONNAIRES

BANGLADESH SMILING SUN FRANCHISE PROGRAM (BSSFP) BASELINE SURVEY 2008 (RURAL COMPONENT)

HOUSEHOLD AND WOMAN'S QUESTIONNAIRE

ASSOCIATES FOR COMMUNITY AND POPULATION RESEARCH

3/10, Block A, Lalmatia
DHAKA-1207
TELEPHONE: 9114784, 8117926, FAX: 8153321
E-MAIL: acpr@bangla.net

MEASURE *Evaluation*
USA

BANGLADESH SMILING SUN FRANCHISE PROGRAM BASELINE SURVEY 2008
HOUSEHOLD QUESTIONNAIRE

IDENTIFICATION

DIVISION .....
(BARISAL=1; CHITTAGONG=2; DHAKA=3; KHULNA=4; RAJSHAHI=5; SYLHET=6)

DISTRICT _____

UPAZILA /THANA _____

UNION/WARD _____

VILLAGE/MOHALLA/BLOCK_____

CLUSTER NUMBER.....

TYPE OF CLUSTER 1= OLD CATCHMENT AREA
2 = NEW CATCHMENT AREA

HOUSEHOLD NUMBER.....

NAME OF THE HOUSEHOLD HEAD_____

DOMAIN: **URBAN**
- 01 = DHAKA CITY CORPORATION
- 02 = CHITTAGONG CITY CORPORATION
- 03 = REST CITY CORPORATION
- 04 = DISTRICT AND UPAZILA MUNICIPALITIES
- 05 = URBAN NON PROJECT

RURAL
- 06 DHAKA DIVISION
- 07 CHITTAGONG/SYLHET DIVISION
- 08 KHULNA BARISAL DIVISION
- 09 RAJSHAHI DIVISION
- 10 RURAL NON PROJECT

INTERVIEWER VISITS

	1	2	3	FINAL VISIT
DATE				DAY / MONTH / YEAR
INTERVIEWER'S NAME				INTV. CODE
RESULT*				RESULT*
NEXT VISIT: DATE				TOTAL NO. 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 RESP. TO HOUSEHOLD SCHEDULE

SUPERVISOR		FIELD EDITOR		OFFICE EDITOR	KEYED BY
NAME _____		NAME _____			
DATE _____		DATE _____			

INFORMED CONSENT

Hello. My name is_____. We come from _____, a private research organization, located in Dhaka. To assist in the implementation of socio-development programs in the country, we conduct different types of surveys. We are now conducting a survey about the health of women and children for the (Bangladesh Smiling Sun Franchise Program). The survey is paid for by the United States Agency for International Development. The data will be examined by firms in Bangladesh and by researchers at the University of North Carolina in Chapel Hill, North Carolina, USA. We would very much appreciate your participation in this survey. I would like to ask you about your household. This information will help us to plan health services. If some questions cause you embarrassment or make you feel uncomfortable, you can refuse to answer them. The survey usually takes between 8 and 12 minutes to complete. Whatever information you provide will be kept strictly confidential. It will be used for program evaluation purposes and will be seen only by staff and researchers at the organizations mentioned.

Participation in this survey is voluntary and you can choose not to answer any individual question or all of the questions. However, we hope that you will participate in this survey since your views are important. If you wish to know more about your rights as a participant in this study you may write the Institutional Review Board, CB # 7097, Medical Building 52, 105 Mason Farm Road, Chapel Hill, NC 27599-7097 U.S.A., or call, collect if necessary, 001-919-966-9347. If you have further questions regarding the nature of this study you may contact (Mitra and Associates at 2/17 Iqbal Road, Mohammadpur, Dhaka-1207 or phone 9115503 / ACPR 3/10, Block-A, Lalmatia, Dhaka-1207 or phone 817926)

At this time, do you want to ask me anything about the survey?
May I begin the interview now?

Signature of interviewee: _____Date:_____

Signature of interviewer: _____Date:_____

RESPONDENT AGREES TO BE INTERVIEWED.....1 ↓

RESPONDENT DOES NOT AGREE TO BE INTERVIEWED..... 2 →END

HOUSEHOLD QUESTIONNAIRE

Now we would like some information about the people who usually live in your household or who are staying with you now.

LINE NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX	RESIDENCE		AGE	MARITAL STATUS	WOMAN ELIGIBILITY
	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.	What is the relationship of (NAME) to the head of the household?*	Is (NAME) male or female?	Does (NAME) usually live here?	Did (NAME) sleep here last night?	How old is (NAME)? (IF LESS THAN 1 YEAR, RECORD '00' YEAR	FOR ALL AGED 10 YEARS OR ABOVE What is the current marital status of (NAME)?**	CIRCLE LINE NUMBER OF ALL EVER MARRIED WOMEN, USUAL RESIDENTS (Q5=1) (Q7 = AGE 10-49) (Q8=1 OR 2)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
01			M 1 F 2	YES 1 NO 2	YES 1 NO 2	IN YEARS	CM 1 FM 2 NM 3	01
02			1 2	1 2	1 2		1 2 3	02
03			1 2	1 2	1 2		1 2 3	03
04			1 2	1 2	1 2		1 2 3	04
05			1 2	1 2	1 2		1 2 3	05
06			1 2	1 2	1 2		1 2 3	06
07			1 2	1 2	1 2		1 2 3	07
08			1 2	1 2	1 2		1 2 3	08
09			1 2	1 2	1 2		1 2 3	09
10			1 2	1 2	1 2		1 2 3	10
11			1 2	1 2	1 2		1 2 3	10
12			1 2	1 2	1 2		1 2 3	02
13			1 2	1 2	1 2		1 2 3	03
14			1 2	1 2	1 2		1 2 3	04
15			1 2	1 2	1 2		1 2 3	05
16			1 2	1 2	1 2		1 2 3	06
17			1 2	1 2	1 2		1 2 3	07
18			1 2	1 2	1 2		1 2 3	08
19			1 2	1 2	1 2		1 2 3	09
20			1 2	1 2	1 2		1 2 3	10

TICK HERE IF CONTINUATION SHEET USED		☐	
Just to make sure that I have a complete listing:			
10)	Are there any other persons such as small children or infants that we have not listed?	YES ☐ ->	Go back to household schedule and enter new members in the household schedule.
11)	In addition, 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 ☐ ->	Go back to household schedule and enter new members in the household schedule.
12)	Are there any guests or temporary visitors staying here, or anyone else who slept here last night, who have not been listed?	YES ☐ ->	Go back to household schedule and enter new members in the household schedule.
13. Total number of women circled in column (9)		☐	

*** 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

**** CODE FOR Q.8**
MARITAL STATUS:
1 = CURRENTLY MARRIED
2 = FORMERLY MARRIED (DIVORCED/WIDOWED/SEPARATED/DESERTED)
3 = NEVER MARRIED

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
14.	What is the main source of drinking water for members of your household?	**Piped water** Piped into dwelling.....11 Piped to yard/plot .....12 Public tap/stand pipe .....13 Tubewell 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_____(Specify)....96	→ **15** → **15**
14a.	What is the main source of water used by your household for other purposes such as cooking and hand washing?	**Piped water** Piped into dwelling.....11 Piped to yard/plot .....12 Public tap/stand pipe .....13 Tubewell 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_____(Specify)....96	
15.	What kind of toilet facility do members of your household usually use?	**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** Pit latrine with slab.....22 Pit latrine without slab/open pit ..23 Bucket toilet .....31 Hanging toilet/hanging latrine.....41 No facility/bush/field.....51	→ **17**

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES			SKIP
		Other_____ (Specify) 96			
16.	Do you share this toilet with other households?	Yes.....1 No.....2			
17.	Does your household have?		Yes	No	
	Electricity?	Electricity	1	2	
	A working radio?	Working radio	1	2	
	A working television?	Working television	1	2	
	A mobile telephone?	Mobile telephone.....	1	2	
	A non mobile telephone?	Non mobile telephone	1	2	
	A refrigerator?	Refrigerator	1	2	
	An almirah or wardrobe?	Almirah or wardrobe	1	2	
	A table?	Table.....	1	2	
	A chair?	Chair.....	1	2	
	A watch?	Watch	1	2	
	A bicycle?	Bicycle.....	1	2	
	A motorcycle or motor scooter or tempo?	Motorcycle	1	2	
	An animal-drawn cart?	Animal-Drawn.....	1	2	
	A car or truck?	Car or Truck	1	2	
	A boat with a motor?	Boat with A Motor	1	2	
	A rickshaw/Van?	Rickshaw/Van	1	2	
	A Sewing Machine	Sewing Machine	1	2	
18.	Main material of the floor **RECORD OBSERVATION**	**Natural Floor** Earth/sand.....11 **Rudimentary Floor** Wood planks.....21 Palm/bamboo.....22 **Finished floor** Parquet or polished wood.....31 Ceramic tiles.....32 Cement .....33 Carpet .....34 Other_____ (Specify) 96			
18A.	Main material of the roof **RECORD OBSERVATION**	**Natural roofing** No roof .....11 Thatch/palm leaf.....12 **Rudimentary roofing** Bamboo .....21 Wood planks.....22 Cardboard.....23 **Finished roofing** Tin .....31 Wood.....32 Ceramic Tiles .....33 Cement .....34 Roofing shingles.....35 Other_____ (Specify) 96			

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
18B.	Main material of the exterior walls **RECORD OBSERVATION**	**Natural Walls** No walls.....11 Cane/Palm/Trunks.....12 Dirt .....13 **Rudimentary walls** Bamboo with mud .....21 Stone with mud.....22 Plywood.....23 Cardboard.....24 **Finished walls** Tin .....31 Cement .....32 Stone with lime/cement.....33 Bricks .....34 Wood planks/shingles .....35 Other_____....96 (Specify)	
19.	Does your household own any homestead? **IF 'NO', PROBE:** Does your household own homestead in any other places?	Yes .....1 No 2	
19A	Does your household own any land (other than the homestead land)?	Yes .....1 No .....2 → **Women ques.**	
19B	How much land does your household own (other than the homestead land)? Amount _____ Specify unit_____	☐☐ ☐☐ Acres Decimals	

BANGLADESH SMILING SUN FRANCHISE PROGRAM BASELINE SURVEY **2008**
WOMAN'S QUESTIONNAIRE

IDENTIFICATION

DIVISION _____

DISTRICT _____

UPAZILA _____

UNION/WARD _____

VILLAGE/MOHALLA/BLOCK _____

CLUSTER NUMBER .....

TYPE OF CLUSTER 1= OLD CATCHMENT AREA
2 = NEW CATCHMENT AREA

HOUSEHOLD NUMBER .....

NAME OF HOUSEHOLD HEAD _____

NAME AND LINE NUMBER OF ELIGIBLE WOMAN _____

DOMAIN : **URBAN**
- 01 DHAKA CITY CORPORATION
- 02 CHITTAGONG CITY CORPORATION
- 03 REST CITY CORPORATION
- 04 DISTRICT AND UPAZILA MUNICIPALITIES
- 05 URBAN NON PROJECT

RURAL
- 06 DHAKA DIVISION
- 07 CHITTAGONG/SYLHET DIVISION
- 08 KHULNA BARISAL DIVISION
- 09 RAJSHAHI DIVISION
- 10 RURAL NON PROJECT

INTERVIEWER VISITS

	1	2	3	FINAL VISIT
DATE				DAY / MONTH* / YEAR
INTERVIEWER'S NAME				CODE
RESULT*				RESULT**
NEXT VISIT: DATE				TOTAL NO. OF VISITS
TIME				

**RESULT CODES :
- 1 COMPLETED
- 2 NOT AT HOME
- 3 POSTPONED
- 4 REFUSED
- 5 PARTLY COMPLETED
- 6 RESPONDENT INCAPACITATED
- 7 OTHER _____ (SPECIFY)

*MONTH CODES

01 JANUARY	04 APRIL	07 JULY	10 OCTOBER
02 FEBRUARY	05 MAY	08 AUGUST	11 NOVEMBER
03 MARCH	06 JUNE	09 SEPTEMBER	12 DECEMBER

SUPERVISOR	FIELD EDITOR	OFFICE EDITOR	KEYED BY
NAME _____	NAME _____		
DATE _____	DATE _____		

SECTION 1. RESPONDENT'S BACKGROUND

INTRODUCTION AND CONSENT

INFORMED CONSENT

Hello. My name is_____. We come from _____, a private research organization, located in Dhaka. To assist in the implementation of socio-development programs in the country, we conduct different types of surveys. We are now conducting a survey about the health of women and children for the (Bangladesh Smiling Sun Franchise Program). The survey is paid for by the United States Agency for International Development. The data will be examined by firms in Bangladesh and by researchers at the University of North Carolina in Chapel Hill, North Carolina, USA. We would very much appreciate your participation in this survey. I would like to ask you about your health (and the health of your children). This information will help us to plan health services. If some questions cause you embarrassment or make you feel uncomfortable, you can refuse to answer them. The survey usually takes between 30 and 50 minutes to complete. Whatever information you provide will be kept strictly confidential. It will be used for program evaluation purposes and will be seen only by staff and researchers at the organizations mentioned.

Participation in this survey is voluntary and you can choose not to answer any individual question or all of the questions. However, we hope that you will participate in this survey since your views are important. If you wish to know more about your rights as a participant in this study you may write the Institutional Review Board, CB # 7097, Medical Building 52, 105 Mason Farm Road, Chapel Hill, NC 27599-7097 U.S.A., or call, collect if necessary, 001-919-966-9347. If you have further questions regarding the nature of this study you may contact (Mitra and Associates at 2/17 Iqbal Road, Mohammadpur, Dhaka-1207 or phone 9115503 / ACPR 3/10, Block-A, Lalmatia, Dhaka-1207 or phone 817926)

At this time, do you want to ask me anything about the survey?
May I begin the interview now?

Signature of interviewee: _____Date:_____

Signature of interviewer: _____Date:_____

RESPONDENT AGREES TO BE INTERVIEWED.....1 ↓

RESPONDENT DOES NOT AGREE TO BE INTERVIEWED..... 2 →END

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101	RECORD THE TIME STARTED	HOUR ☐☐ MINUTES ☐☐	
102	How long have you been living continuously in (NAME OF CURRENT PLACE OF RESIDENCE)? (IF LESS THAN 1 YEAR, RECORD '00' YEAR)	NUMBER OF YEARS ☐☐ ALWAYS 95	
103	In what month and year were you born?	MONTH ☐☐ DON'T KNOW MONTH 98 YEAR ☐☐☐☐ DON'T KNOW YEAR 9998	
103A	How old were you at your last birthday? COMPARE AND CORRECT 103 AND /OR 103A IF INCONSISTENT	AGE IN COMPLETED YEARS ☐☐	
104	Are you now married, separated, deserted, widowed, divorced or have you never been married?	CURRENTLY MARRIED 1 SEPARATED 2 DESERTED 3 DIVORCED 4 WIDOWED 5 NEVER MARRIED 6 →	END
105	Were you married once or more than once?	Married once 1 Married more than once 2	
105A	How old were you when you started living with your (first) husband?	AGE IN YEARS ☐☐	
106	Have you ever attended school/madrasha?	Yes, school 1 Yes, Madrasha 2 Yes, both 3 →	106B
		No 4 →	106D
106A	What type of school have you last attended?	School 1 Madrasha 2	
106B.	What is the highest class you completed? **IF NO CLASS WRITE 00**	Class ☐☐	
106C	**Interviewer: CHECK 106B and circle in appropriate code:**	**PRIMARY(00-05) 1** **SECONDARY OR HIGHER 2 →**	**107**
106D	Can you read and write a letter?	YES, EASILY 1 YES, WITH DIFFICULTY 2 NOT AT ALL 3 →	108
107	Do you usually read a newspaper or magazine?	YES 1 NO 2 →	108
107A	How often do you read newspaper or magazine: every day, at least once a week, or less than once a week?	EVERY DAY 1 AT LEAST ONCE A WEEK 2 LESS THAN ONCE A WEEK 3	
108	Do you usually listen to the radio?	YES 1 NO 2 →	109
108A	How often do you listen to the radio: every day, at least once a week, less than once a week?	EVERY DAY 1 AT LEAST ONCE A WEEK 2 LESS THAN ONCE A WEEK 3	
109	Do you usually watch television?	YES 1 NO 2 →	110
109A	How often do you watch television: every day, at least once a week, less than once a week?	EVERY DAY 1 AT LEAST ONCE A WEEK 2 LESS THAN ONCE A WEEK 3	
110	What is your religion?	ISLAM 1 HINDUISM 2 BUDDHISM 3 CHRISTIANITY 4 OTHER_____ 6 (SPECIFY)	
111	Do you belong to any of the following organizations? Such as: Grameen Bank? BRAC? BRDB? Mother's Club? Proshika? ASHA? TMSS? Any other organization (such as micro credit)?	YES NO GRAMEEN BANK 1 2 BRAC 1 2 BRDB 1 2 MOTHER'S CLUB 1 2 PROSHIKA 1 2 ASHA 1 2 TMSS 1 2	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
		OTHER_____1 2 (SPECIFY)	
112	**Now I would like to ask you some questions about your work**. **As you know, some women take up jobs for which they are paid in cash or kind. Others sell things, have a small business or work on the family farm or in the family business.** Are you currently doing any of these things or any other work?	YES .....1 NO .....2 →	201
112A	What is your occupation, that is, what kind of work do (did) you mainly do? Verbatim:_____ _____ _____	☐☐	
112B	Are you paid in cash or kind for this work or are you not paid?	CASH ONLY.....1 KIND ONLY .....2 CASH AND KIND .....3 NOT PAID.....4	

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 → 204	
202	Do you have any sons or daughters to whom you have given birth who are now living with you?	YES .....1 NO .....2 → 203	
202A	How many sons live with you? And how many daughters live with you? **IF NONE, RECORD "00".**	SONS AT HOME ..... ☐☐ DAUGHTERS AT HOME..... ☐☐	
203	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 → 204	
203A	How many sons are alive but do not live with you? And how many daughters are alive but do not live with you? **IF NONE, RECORD "00".**	SONS ELSEWHERE..... ☐☐ DAUGHTERS ELSEWHERE ..... ☐☐	
204	Have you ever given birth to a boy or girl who was born alive but later died? **IF NO, PROBE: Any baby who cried or showed signs of life but survived only a few hours or days?**	YES .....1 NO .....2 → 205	
204A	In all, how many boys have died? And how many girls have died? **IF NONE, RECORD "00".**	BOYS DEAD..... ☐☐ GIRLS DEAD..... ☐☐	
205	**INTERVIEWER: SUM ANSWERS TO 202A, 203A, and 204A, AND ENTER TOTAL.** **IF NONE, RECORD "00".**	**TOTAL.....** ☐☐	
205A	**INTERVIEWER:CHECK Q.205:** Just to make sure that I have this right: you have had in TOTAL _____ births during your life. Is that correct? YES ☐ ↓ NO ☐ → **PROBE AND CORRECT 201-205 AS NECESSARY**		
206	**Interviewer: Check Q.205 and circle in appropriate code**	One or more births.....1 No births .....2 → **219**	

Now I would like to ask you about all the children to whom you have given birth. I would also like to know about all the children who have died. Start with the child born first. LIST THE NAMES OF ALL THE CHILDREN IN Q. 207. IF THE CHILD WAS NOT NAMED OR DIED BEFORE BEING NAMED, THEN WRITE 'NO NAME'. IF THERE IS A MULTIPLE BIRTH, THEN USE DIFFERENT LINES FOR EACH BIRTH.

207 What name was given to your (first /next) baby? (NAME)	208 Were any of these births twins?	209 Is (NAME) a boy or a girl?	210 In what month and year was (NAME) born? (Probe) What is his/her birthday?	211 Is (NAME) still alive?	212 IF ALIVE: How old was (NAME) at his/her last birthday? RECORD AGE IN COMPLE-TED YEARS.	213 IF ALIVE: Is (NAME) living with you?	214 IF DEAD: How old was (NAME) when he/she died? IF '1 YR.', PROBE: How many months old was (NAME)? RECORD DAYS IF LESS THAN 1 MONTH; MONTHS IF LESS THAN TWO YEARS; OR YEARS.	215 Were there any other live births between (NAME OF PREVIOUS BIRTH) and (NAME)?
01	YES .....1 NO..... 2	BOY .....1 GIRL 2	MONTH ☐☐ YEAR ☐☐☐☐	YES.....1 NO.....2 → 214	AGE IN YEARS ☐☐	YES.....1 NO .....2 NEXT CHILD	DAYS..... 1 ☐☐ MONTHS . 2 ☐☐ YEARS..... 3 ☐☐	
02	YES .....1 NO..... 2	BOY .....1 GIRL 2	MONTH ☐☐ YEAR ☐☐☐☐	YES.....1 NO.....2 → 214	AGE IN YEARS ☐☐	YES.....1 NO .....2 → 215	DAYS..... 1 ☐☐ MONTHS . 2 ☐☐ YEARS..... 3 ☐☐	YES .....1 ADD BIRTH ← NO.....2 NEXT BIRTH
03	YES .....1 NO..... 2	BOY .....1 GIRL 2	MONTH ☐☐ YEAR ☐☐☐☐	YES.....1 NO.....2 → 214	AGE IN YEARS ☐☐	YES.....1 NO .....2 → 215	DAYS..... 1 ☐☐ MONTHS . 2 ☐☐ YEARS..... 3 ☐☐	YES .....1 ADD BIRTH ← NO.....2 NEXT BIRTH
04	YES .....1 NO..... 2	BOY .....1 GIRL 2	MONTH ☐☐ YEAR ☐☐☐☐	YES.....1 NO.....2 → 214	AGE IN YEARS ☐☐	YES.....1 NO .....2 → 215	DAYS..... 1 ☐☐ MONTHS . 2 ☐☐ YEARS..... 3 ☐☐	YES .....1 ADD BIRTH ← NO.....2 NEXT BIRTH
05	YES .....1 NO..... 2	BOY .....1 GIRL 2	MONTH ☐☐ YEAR ☐☐☐☐	YES.....1 NO.....2 → 214	AGE IN YEARS ☐☐	YES.....1 NO .....2 → 215	DAYS..... 1 ☐☐ MONTHS . 2 ☐☐ YEARS..... 3 ☐☐	YES .....1 ADD BIRTH ← NO.....2 NEXT BIRTH
06	YES .....1 NO..... 2	BOY .....1 GIRL 2	MONTH ☐☐ YEAR ☐☐☐☐	YES.....1 NO.....2 → 214	AGE IN YEARS ☐☐	YES.....1 NO .....2 → 215	DAYS..... 1 ☐☐ MONTHS . 2 ☐☐ YEARS..... 3 ☐☐	YES .....1 ADD BIRTH ← NO.....2 NEXT BIRTH
07	YES .....1 NO..... 2	BOY .....1 GIRL 2	MONTH ☐☐ YEAR ☐☐☐☐	YES.....1 NO.....2 → 214	AGE IN YEARS ☐☐	YES.....1 NO .....2 → 215	DAYS..... 1 ☐☐ MONTHS . 2 ☐☐ YEARS..... 3 ☐☐	YES .....1 ADD BIRTH ← NO.....2 NEXT BIRTH
08	YES .....1 NO..... 2	BOY .....1 GIRL 2	MONTH ☐☐ YEAR ☐☐☐☐	YES.....1 NO.....2 → 214	AGE IN YEARS ☐☐	YES.....1 NO .....2 → 215	DAYS..... 1 ☐☐ MONTHS . 2 ☐☐ YEARS..... 3 ☐☐	YES .....1 ADD BIRTH ← NO.....2 NEXT BIRTH
09	YES .....1 NO..... 2	BOY .....1 GIRL 2	MONTH ☐☐ YEAR ☐☐☐☐	YES.....1 NO.....2 → 214	AGE IN YEARS ☐☐	YES.....1 NO .....2 → 215	DAYS..... 1 ☐☐ MONTHS . 2 ☐☐ YEARS..... 3 ☐☐	YES .....1 ADD BIRTH ← NO.....2 NEXT BIRTH
10	YES .....1 NO..... 2	BOY .....1 GIRL 2	MONTH ☐☐ YEAR ☐☐☐☐	YES.....1 NO.....2 → 214	AGE IN YEARS ☐☐	YES.....1 NO .....2 → 215	DAYS..... 1 ☐☐ MONTHS . 2 ☐☐ YEARS..... 3 ☐☐	YES .....1 ADD BIRTH ← NO.....2 NEXT BIRTH
11	YES .....1 NO..... 2	BOY .....1 GIRL 2	MONTH ☐☐ YEAR ☐☐☐☐	YES.....1 NO.....2 → 214	AGE IN YEARS ☐☐	YES.....1 NO .....2 → 215	DAYS..... 1 ☐☐ MONTHS . 2 ☐☐ YEARS..... 3 ☐☐	YES .....1 ADD BIRTH ← NO.....2 NEXT BIRTH

12	YES .....1 NO..... 2	BOY .....1 GIRL 2	MONTH ☐☐ YEAR ☐☐☐☐	YES..... 1 NO..... 2 → 214	AGE IN YEARS ☐☐	YES.....1 NO .....2 → 215	DAYS..... 1 ☐☐ MONTHS . 2 ☐☐ YEARS..... 3 ☐☐	YES .....1 ADD BIRTH ← NO.....2 NEXT BIRTH

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
216.	Have you had any live births since the birth of (Name of last birth)? **IF YES, RECORD BIRTH(S) IN TABLE**	YES ..... 1 NO 2	
217.	Interviewer: Compare 205 with number of births in history above and mark: Numbers are same ☐ Numbers are different ☐ **(Probe and reconcile 207 to 215)** Check: For each birth (210):Year of birth is recorded ..... ☐ For each living child (212): Current age is recorded ..... ☐ For each dead child (214): Age at death is recorded ..... ☐ For age at death 12 months or 1 yr. (214): Probe to determine exact number of months ..... ☐		
218	**Interviewer: Check 210 and enter the number of births since June 2003 (Ashar 1410)** **IF NONE, RECORD `O'** ☐		
219	**Interviewer: Check Q. 104 and circle in appropriate code.**	**CURRENTLY MARRIED ..... 1** **SEPARATED ..... 2** **DESERTED..... 3** **DIVORCED ..... 4** **WIDOWED 5**	**301**
220	Are you pregnant now?	YES ..... 1 NO ..... 2 UNSURE 8	301
220A	How many months pregnant are you? **(IN COMPLETED MONTHS).**	MONTHS..... ☐☐	

SECTION 3. CONTRACEPTION

NOW I WOULD LIKE TO TALK ABOUT FAMILY PLANNING - THE VARIOUS WAYS OR METHODS THAT A COUPLE CAN USE TO DELAY OR AVOID A PREGNANCY.

	METHOD	301. HAVE YOU HEARD ABOUT (METHOD) ? (READ OUT)	301A. HAVE YOU EVER USED (METHOD)?
01	FEMALE STERILIZATION, LIGATION	YES .....1 NO .....2 →	HAVE YOU EVER HAD AN OPERATION TO AVOID HAVING ANY MORE CHILDREN? YES .....1 NO.....2
02	MALE STERILIZATION, VASECTOMY	YES .....1 NO .....2 →	HAS YOUR HUSBAND EVER HAD AN OPERATION TO AVOID HAVING ANY MORE CHILDREN? YES .....1 NO 2
03	PILL	YES .....1 NO .....2 →	YES .....1 NO 2
04	IUD	YES .....1 NO .....2 →	YES .....1 NO 2
05	INJECTIONS	YES .....1 NO .....2 →	YES .....1 NO 2
06	IMPLANTS/ NORPLANTS	YES .....1 NO .....2 →	YES .....1 NO 2
07	CONDOM	YES .....1 NO .....2 →	YES .....1 NO 2
08	SAFE PERIOD, COUNTING DAYS, CALENDAR, RHYTHM METHOD	YES .....1 NO .....2 →	YES .....1 NO 2
09	WITHDRAWAL	YES .....1 NO .....2 →	YES .....1 NO 2
10	HAVE YOU HEARD OF ANY OTHER WAYS OR METHODS FOR AVOIDING PREGNANCY? (SPECIFY)	YES .....1 NO .....2 →	YES .....1 NO 2

302	**Interviewer: Check Q.301A and circle in appropriate code.**	**Not a single yes (Never used).....1** **At least one Yes (Ever used).....2** →	**305**
303	Have you ever used anything or tried in any way to delay or avoid getting pregnant?	YES .....1 NO.....2 →	**310**
304	What have you used or done? **Interviewer: correct Q. 301 & Q. 301 A**	Name of Method:_____	
305	**Interviewer: Check Q.301A (01) and circle in appropriate code.**	**Women sterilized.....1** → **Women not sterilized.....2**	**308B**
306	**Interviewer: Check Q.104 and circle in appropriate code.**	**Widowed/divorced .....1** → **Currently married.....2**	**401**
307	**Interviewer: Check Q.220 and circle in appropriate code.**	**Pregnant .....1** → **Not pregnant or unsure 2**	**310**
308	Are you currently doing something or using any method to delay or avoid getting pregnant?	YES.....1 NO.....2 →	**310**
308A	Which method are you using?	FEMALE STERILIZATION.....01 MALE STERILIZATION.....02 PILL.....03 IUD/C-T.....04 INJECTIONS .....05 IMPLANTS/NORPLANT .....06 CONDOM .....07 SAFE PERIOD.....08 WITHDRAWAL .....09 →	**401**
308B	**CIRCLE '01' FOR FEMALE STERILIZATION.**		

		OTHER_____ 96 (SPECIFY)	

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
309	Where did you obtain (CURRENT METHOD) the last time? Where did the sterilization take place? (NAME OF PLACE/NAME OF WORKER) _____ (LOCATION)	**PUBLIC SECTOR** HOSPITAL/MEDICAL COLLEGE.....11 FAMILY WELFARE CENTRE.....12 UPAZILA HEALTH COMPLEX.....13 MCWC.....14 RURAL DISPENSARY/ COMMUNITY CLINIC.....15 SATELLITE CLINIC/ EPI OUTREACH SITE.....16 HA.....17 FWA.....18 **SMILING SUN** STATIC (VITAL / ULTRA) CLINIC.....21 SATELLITE (MINI) CLINIC.....22 COMMUNITY SERVICE PROVIDER (csp) Depoholger.....23 **OTHER NGO** MARIE STOPES clinic/hospital.....30 UPHCP.....31 HOSPITAL/ CLINIC.....32 SATELLITE CLINIC.....33 FIELDWORKER.....34 DEPOTHOLDER.....35 **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL/ CLINIC.....41 QUALIFIED DOCTOR.....42 VILLAGE DOCTOR.....43 PHARMACIST/PHARMACY.....44 TRADITIONAL HEALER/ KABIRAJ.....45 SHOP.....51 OTHER _____ 96 (SPECIFY) DON'T KNOW.....98	401
310	Do you know of a place where you can obtain a method of family planning?	YES.....1 NO.....2 → 401	
310A	Where can you get the method? (NAME OF PLACE/NAME OF WORKER) _____ (LOCATION) (NAME OF PLACE/NAME OF WORKER) _____ (LOCATION)	**PUBLIC SECTOR** HOSPITAL/MEDICAL COLLEGE..... A FAMILY WELFARE CENTRE..... B UPAZILA HEALTH COMPLEX..... C MCWC..... D RURAL DISPENSARY/ COMMUNITY CLINIC..... E SATELLITE CLINIC/ EPI OUTREACH SITE.....F HA..... G FWA..... H **SMILING SUN** STATIC (VITAL / ULTRA) CLINIC.....I SATELLITE (MINI) CLINIC.....J COMMUNITY SERVICE PROVIDER(CSP) Depoholder..... K **OTHER NGO** MARIE STOPES clinic/hospital.....L UPHCP.....M HOSPITAL/ CLINIC..... N SATELLITE CLINIC.....O FIELDWORKER..... P DEPOTHOLDER.....Q **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL/CLINIC..... R QUALIFIED DOCTOR..... S VILLAGE DOCTOR.....T PHARMACIST/PHARMACY..... U TRADITIONAL HEALER/ KABIRAJ..... V SHOP..... W OTHER _____ X (SPECIFY)	

SECTION 4. PREGNANCY, POSTNATAL CARE AND BREASTFEEDING

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
401	Now we would like to talk about possible problems that a woman might face when she is going to have a child. What are the complications or problems during pregnancy that may threaten the life of the mother? What are the complications or problems during delivery that may threaten the life of the mother? What are the complications or problems during post-delivery that may threaten the life of the mother?	SEVERE HEADACHE/BLURRY VISION/ HIGH BLOOD PRESSURE ..... A EDEMA/PRE-ECLAMSIA ..... B CONVULSION/ECLAMSIA ..... C EXCESSIVE VAGINAL BLEEDING ..... D FOUL-SMELLING DISCHARGE WITH HIGH FEVER ..... E JAUNDICE ..... F TETANUS ..... G BABY'S HAND OR FEET COME/ BABY IN BAD POSITION ..... H PROLONGED LABOR ..... I OBSTRUCTED LABOR ..... J RETAINED PLACENTA ..... K TORN UTERUS ..... L OTHER _____ X (SPECIFY) DON'T KNOW ..... Y	
402.	**Interviewer: Check Q. 218 and circle in appropriate code.**	**One or more births in June, 2003 or later ..... 1** **No births in June, 2003 or later .... 2** → **601**	
403.	**Interviewer: Check Q210 and enter in the table the line number, name and survival status of your youngest child who born after June, 2003 (Ashar, 1410) or later. If twin write the name and line no. of youngest one.** **Now I would like to ask you some questions about the health of your youngest child who born in the last five years.**		
404	**LINE NUMBER FROM 207**	**LAST BIRTH** **LINE NUMBER** ..... ☐☐	
405	**FROM 207 AND 211**	**NAME** _____ **LIVING** ☐ **DEAD** ☐	
406	When you were pregnant with (NAME), did you see anyone for a medical checkup?	YES ..... 1 NO ..... 2 → **406E** DON'T KNOW 8	
406A	Whom did you see? Any one else? (MULTIPLE RESPONSE) PROBE TO IDENTIFY EACH TYPE OF PERSON AND RECORD ALL MENTIONED.	**HEALTH PROFESSIONAL** QUALIFIED DOCTOR ..... A NURSE/MIDWIFE/PARAMEDIC ..... B FAMILY WELFARE VISITOR ..... C Community Skilled Birth Attendant (CSBA) ..... D MA/SACMO ..... E Health Assistant (HA) ..... F Family Welfare Assistant (FWA) ..... G **OTHER PERSON** TRAINED TBA ..... H UNTRAINED TBA ..... I Unqualified Doctor ..... J VILLAGE DOCTOR ..... K TRADITIONAL HEALER/ KABIRAJ ..... L OTHER ..... X (SPECIFY)	
406B	How many months pregnant were you when you first received medical checkup i.e., antenatal care for this pregnancy?	MONTHS ..... ☐☐ DON'T KNOW 98	
406C	How many times did you receive a medical checkup during this pregnancy?	NO. OF TIMES ..... ☐☐ DON'T KNOW 98	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
406D	Where did you get your (last) antenatal checkup? _____ (NAME OF PLACE) _____ (LOCATION)	**HOME** MEDICAL PERSON AT HOME ..... 01 NON-MEDICAL PERSON AT HOME..... 02 **PUBLIC SECTOR** HOSPITAL/MEDICAL COLLEGE ..... 11 FAMILY WELFARE CENTRE ..... 12 UPAZILA HEALTH COMPLEX..... 13 MCWC..... 14 RURAL DISPENSARY/ COMMUNITY CLINIC ..... 15 SATELLITE CLINIC/ EPI OUTREACH SITE ..... 16 HA ..... 17 FWA ..... 18 **SMILING SUN** STATIC (VITAL / ULTRA) CLINIC..... 21 SATELLITE (MINI) CLINIC..... 22 COMMUNITY SERVICE PROVIDER (CSP) Depoholder ..... 23 **OTHER NGO** MARIE STOPES clinic/hospital..... 30 UPHCP..... 31 HOSPITAL/CLINIC..... 32 SATELLITE CLINIC..... 33 FIELDWORKER..... 34 DEPOTHOLDER..... 35 **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL/CLINIC ..... 41 QUALIFIED DOCTOR..... 42 VILLAGE DOCTOR..... 43 PHARMACIST/PHARMACY ..... 44 Homeopath..... 45 TRADITIONAL HEALER/ KABIRAJ ..... 46 Trained traditional Birth Attendant (TTBA) ..... 47 Untrained Traditional Birth Attendant (UTBA)..... 48 OTHER..... 96 (SPECIFY) DON'T KNOW 98	
406E	During this pregnancy, were any of the following tested or measured? Such as: A. Weight? B. Height? C. Blood pressure (put a cuff on your arm with air pumped into it)? D. Urine? E. Blood? F. Eye for anemia?	YES NO DK WEIGHT 1 2 8 HEIGHT 1 2 8 BLOOD PRESSURE 1 2 8 URINE 1 2 8 BLOOD 1 2 8 EYE FOR ANEMIA 1 2 8	
407	During the time you were pregnant with (NAME OF LAST CHILD) were you given an injection in the arm to prevent the baby from getting tetanus, that is, convulsions after birth?	YES ..... 1 NO ..... 2 → **407D** DON'T KNOW 8	
407A	How many TT injections did you receive during this pregnancy?	NUMBER ..... ☐ DON'T KNOW 8	
407B	From whom/where did you receive the most recent TT injection ?	**HOME** MEDICAL PERSON AT HOME ..... 01 NON-MEDICAL PERSON AT HOME.....02 **PUBLIC SECTOR** HOSPITAL/MEDICAL COLLEGE ..... 11 FAMILY WELFARE CENTRE ..... 12 UPAZILA HEALTH COMPLEX..... 13 MCWC..... 14 RURAL DISPENSARY/ COMMUNITY CLINIC ..... 15 SATELLITE CLINIC/EPI OUTREACH SITE ... 16 HA ..... 17 FWA ..... 18 **SMILING SUN**	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
		STATIC (VITAL / ULTRA) CLINIC ..... 21 SATELLITE (MINI) CLINIC ..... 22 COMMUNITY SERVICE PROVIDER (CSP) Depoholder ..... 23 **OTHER NGO** MARIE STOPES clinic/hospital ..... 30 UPHCP ..... 31 HOSPITAL/ CLINIC ..... 32 SATELLITE CLINIC ..... 33 FIELDWORKER ..... 34 DEPOTHOLDER ..... 35 **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL/CLINIC ..... 41 QUALIFIED DOCTOR ..... 42 VILLAGE DOCTOR ..... 43 PHARMACIST/PHARMACY ..... 44 TRADITIONAL HEALER/ KABIRAJ ..... 46 OTHER ..... 96 q(SPECIFY) DON'T KNOW 98	
407C	**INTERVIEWER: CHECK 407A AND TICK IN APPROPRIATE BOX**	**2 OR MORE TIMES** ☐ → (SKIP TO409) **OTHER** ☐ →	
407D	At any time before this pregnancy, did you receive any tetanus injections, either to protect yourself or another baby?	Yes ..... 1 No ..... 2 Don't know 8	2 → 409
407E	Before this pregnancy, how many other times did you receive a tetanus injection? **IF 7 OR MORE TIMES, RECORD '7'.**	TIMES ☐ DON'T KNOW 8	
407F	In what month and year did you receive the last tetanus injection before this pregnancy?	Month ..... ☐☐ DK Month ..... 98 Year ..... ☐☐☐☐ DK Year 9998	→ 409
407G	How many years ago did you receive that tetanus injection?	Years ago ..... ☐☐	
409	Did you take any iron tablet or iron syrup during this pregnancy? SHOW TABLET/SYRUP.	YES ..... 1 NO ..... 2 DON'T KNOW 8	
410	Who assisted with the delivery of (NAME)? Anyone else? PROBE FOR THE TYPE OF PERSON AND RECORD ALL PERSONS ASSISTING.	**HEALTH PROFESSIONAL** QUALIFIED DOCTOR ..... A NURSE/MIDWIFE/PARAMEDIC ..... B FAMILY WELFARE VISITOR ..... C Community Skilled Birth Attendants (CSBA) .... D MA/SACMO ..... E HA ..... F FWA ..... G **OTHER PERSON** TRAINED TRADITIONAL BIRTH ATTENDANT (TTBA) ..... H UNTRAINED TBA (DAI) ..... I VILLAGE DOCTOR ..... J HOMEOPATH ..... K	→ 411

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
		TRADITIONAL HEALER/ KABIRAJ ..... L RELATIVES ..... M Neighbour /friends……N OTHER ..... X (SPECIFY) NO ONE ..... Z	
410a	Was any of these smiling sun providers?	YES ..... 1 NO ..... 2 → 411	
410b	Which one was smiling sun providers? Anyone else? **PROBE FOR THE TYPE OF PERSON AND RECORD ALL PERSONS ASSISTING.**	QUALIFIED DOCTOR ..... A NURSE/MIDWIFE/PARAMEDIC ..... B FAMILY WELFARE VISITOR (FWV) ..... C OTHER ..... X (SPECIFY)	
411	Where did you give birth to (NAME)? _____ (NAME OF PLACE) _____ (LOCATION)	HOME ..... 11 **PUBLIC SECTOR** HOSPITAL/MEDICAL COLLEGE ..... 21 UPAZILA HEALTH COMPLEX ..... 22 MATERNAL AND CHILD WELFARE CENTER (MCWC) ..... 23 FAMILY WELFARE CENTER ..... 24 **NGO SECTOR** SMILING SUN STATIC (VITAL / ULTRA) CLINIC ..... 31 MARIE STOPES CLINIC/HOSPITAL ..... 32 UPHCP ..... 33 OTHER NGO HOSPITAL/ CLINIC ..... 34 **PRIVATE SECTOR** PVT. HOSPITAL/CLINIC ..... 41 OTHER ..... 96 (SPECIFY)	→ **413**
	Now I would like to ask you some specific questions about what was done with ___ immediately following birth. (Name)		
412.	What was used to cut the cord?	Blade from delivery bag ..... 1 Blade from other source ..... 2 Bamboo strips ..... 3 Scissor ..... 4 Other_____ ..... 6 (Specify) Cord was not cut ..... 5 → 412D Don't know 8	
412A.	Was the _____sterilized or boiled (instrument) before the cord was cut?	Yes ..... 1 No ..... 2 Don't know 8	
412B	Was anything applied to the cord immediately after cutting and tying it?	Yes ..... 1 No ..... 2 → 412D Don't know 8	
412C	What was applied to the cord after it was cut and tied? Anything else?	Antibiotics (powder/ointm) ..... A Antiseptic (Detol/savlon/Hexisol) ..... B Spirit/alcohol ..... C Mustard oil with garlic ..... D Chewed rice ..... E Tumeric juice/powder ..... F Ginger juice ..... G Shidur ..... H Boric powder ..... I Gentian violet (Blue ink) ..... J Talcom powder ..... K Mustard oil……L Other_____ ..... X (Specify) Don't know ..... Y	
412D.	How long after (name) was born was the body wiped (dried)?	Minutes ..... ☐☐ Not wiped ..... 95 Died before wiped ..... 96 Don't know 98	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
412E.	How long after (name) was born was the body wrapped?	Minutes ☐☐ Not wrapped ..... 95 Died before wraped..... 96 Don't know..... 98	
412F	How long after delivery was (name) bathed for the first time? **If less than one day, record in hours** **If less than one week record in days otherwise record in weeks.**	Immediatley ……0 00 Hours..... 1 ☐☐ Days..... 2 Weeks..... 3 Died before bath.....997 Don't know 998	
413	After (name) was born, did any medical persons check on your health?	YES ..... 1 NO ..... 2 → 414	
413A	How long after the delivery did the first check take place? IF LESS THAN ONE DAY RECORD HOURS IF LESS THAN ONE WEEK RECORD DAYS, o**therwise record in weeks.**	HOURS ..... 1 DAYS ..... 2 ☐☐ WEEKS ..... 3 DON'T KNOW..... 998	
413B	Who checked on your health at that time? PROBE TO IDENTIFY APPROPRIATE PROVIDER and CIRCLE THE CODE	**HEALTH PROFESSIONAL** QUALIFIED DOCTOR ..... 01 NURSE/MIDWIFE/PARAMEDIC ..... 02 FAMILY WELFARE VISITOR..... 03 Community Skilled Birth Attendants (CSBA)...04 MA/SACMO ..... 05 HEALTH ASSISTANT (HA)..... 06 FAMILY WELFARE ASSISTANT (FWA) ..... 07 **OTHER PERSON** TRAINED TBA ..... 08 UNTRAINED TBA..... 09 VILLAGE DOCTOR ..... 10 HOMEOPATH..... 11 TRADITIONAL HEALER/ KABIRAJ..... 12 OTHER _____ ..... 96 (SPECIFY)	
413C	WHERE DID THIS FIRST CHECK TAKE PLACE? PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE IF UNABLE TO DETERMINE IF A HOSPITAL, HEALTH CENTER OR CLINIC IS PUBLIC OR PRIVATE MEDICAL WRITE THE NAME OF THE PLACE. _____ (NAME OF PLACE) _____ (LOCATION)	**HOME** MEDICAL PERSON AT HOME .....01 NON-MEDICAL PERSON AT HOME.....02 **PUBLIC SECTOR** HOSPITAL/MEDICAL COLLEGE.....11 FAMILY WELFARE CENTRE .....12 UPAZILA HEALTH COMPLEX.....13 MATERNAL AND CHILD WELFARE CENTER (MCWC).....14 RURAL DISPENSARY/ COMMUNITY CLINIC.....15 SATELLITE CLINIC/ EPI OUTREACH SITE.....16 HEALTH ASSISTANT (HA).....17 FAMILY WELFARE ASSISTANT (FWA).....18 **SMILING SUN** STATIC (VITAL / ULTRA) CLINIC .....21 SATELLITE (MINI) CLINIC.....22 COMMUNITY SERVICE PROVIDER (CSP) Depoholder .....23 **OTHER NGO** MARIE STOPES clinic/hospital .....30 UPHCP .....31 HOSPITAL/CLINIC .....32 SATELLITE CLINIC.....33 FIELDWORKER .....34 DEPOTHOLDER .....35 **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL/CLINIC.....41 QUALIFIED DOCTOR .....42 VILLAGE DOCTOR .....43 PHARMACIST/PHARMACY.....44 Homeopath .....45 TRADITIONAL HEALER/ KABIRAJ .....46 TRAINED TRADITIONAL BIRTH ATTENDANT (TTBA) .....47 UNTRAINED TRADITIONAL BIRTH	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
		ATTENDAN (UTBA) ..... 48 OTHER ..... 96 (SPECIFY) DON'T KNOW 98	
414	AFTER (NAME) WAS BORN DID ANY MEDICAL PERSONS CHECK ON YOUR BABY'S HEALTH?	YES ..... 1 NO ..... 2 → **415** DON'T KNOW ..... 8 → **415**	
414A	How many days or weeks after the delivery did the first check take place? IF LESS THAN ONE DAY RECORD HOURS IF LESS THAN ONE WEEK RECORD DAYS **Otherwise record in weeks.**	HOURS ..... 1 DAYS ..... 2 ☐☐ WEEKS ..... 3 DON'T KNOW 998	
414B	Who checked on your baby's health at that time? PROBE TO IDENTIFY APPROPRIATE PROVIDER and CIRCLE THE CODE	**HEALTH PROFESSIONAL** QUALIFIED DOCTOR ..... 01 NURSE/MIDWIFE/PARAMEDIC ..... 02 FAMILY WELFARE VISITOR ..... 03 Community Skilled Birth Attendants (CSBA) ... 04 MA/SACMO ..... 05 HEALTH ASSISTANT (HA) ..... 06 FAMILY WELFARE ASSISTANT (FWA) ..... 07 **OTHER PERSON** TRAINED TBA ..... 08 UNTRAINED TBA ..... 09 VILLAGE DOCTOR ..... 10 HOMEOPATH ..... 11 TRADITIONAL HEALER/ KABIRAJ ..... 12 OTHER _____ ..... 96 (SPECIFY)	
414C	Where did this first check take place? PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE IF UNABLE TO DETERMINE IF A HOSPITAL, HEALTH CENTER OR CLINIC IS PUBLIC OR PRIVATE MEDICAL WRITE THE NAME OF THE PLACE. _____ (Name of place) _____ (Location)	**HOME** MEDICAL PERSON AT HOME ..... 01 NON-MEDICAL PERSON AT HOME ..... 02 **PUBLIC SECTOR** HOSPITAL/MEDICAL COLLEGE ..... 11 FAMILY WELFARE CENTRE ..... 12 UPAZILA HEALTH COMPLEX ..... 13 MATERNAL AND CHILD WELFARE CENTER (MCWC) ..... 14 RURAL DISPENSARY/ COMMUNITY CLINIC ..... 15 SATELLITE CLINIC/ EPI OUTREACH SITE ..... 16 HEALTH ASSISTANT (HA) ..... 17 FAMILY WELFARE ASSISTANT (FWA) ..... 18 **SMILING SUN** STATIC (VITAL / ULTRA) CLINIC ..... 21 SATELLITE (MINI) CLINIC ..... 22 COMMUNITY SERVICE PROVIDER (CSP) Depoholder ..... 23 **OTHER NGO** MARIE STOPES clinic/hospital ..... 30 UPHCP ..... 31 HOSPITAL/CLINIC ..... 32 SATELLITE CLINIC ..... 33 FIELDWORKER ..... 34 DEPOTHOLDER ..... 35 **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL/CLINIC ..... 41 QUALIFIED DOCTOR ..... 42 VILLAGE DOCTOR ..... 43 PHARMACIST/PHARMACY ..... 44 Homeopath ..... 45 TRADITIONAL HEALER/ KABIRAJ ..... 46 TRAINED TRADITIONAL BIRTH ATTENDANT (TTBA) ..... 47 UNTRAINED TRADITIONAL BIRTH ATTENDAN (UTBA) ..... 48 OTHER ..... 96 (SPECIFY) DON'T KNOW 98	
415	Did you ever breastfeed (NAME)?	YES ..... 1 NO ..... 2 → **501**	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
415A.	How long after birth did you first put (NAME) to the breast? **IF LESS THAN 1 HOUR, RECORD "00" HOURS. IF LESS THAN 24 HOURS, RECORD HOURS. OTHERWISE, RECORD DAYS.**	IMMEDIATELY .....000 HOURS .....1 ☐☐ DAYS 2	
415B.	Was_____ given colostrum immediate after his/her birth? (name)	Yes ..... 1 No 2	
415c.	In the first three days after delivery, was_____ given anything to drink other than breast milk? (name)	Yes ..... 1 No ..... 2 →	**415E**
415D.	What was _____ given to drink? (name) Anything else?	Milk (Other than breast milk) .....A Plain water .....B Sugar/Glucose water .....C Gripe water .....D Sugar-salt-water solution .....E Fruit juice.....F Infant formula.....G Tea/Infusions .....H Honey.....I Other_____ .....X (Specify)	
415E.	**Interviewer: check Q. 405 and circled in appropriate code.**	**Living ..... 1** **Died ..... 2** →	**415G**
415F.	Are you still breastfeeding (NAME)?	YES.....1 NO .....2 →	**501**
415G	For how many months did you breastfeed (NAME)? **IF LESS THAN 1 MONTH, RECORD "00" .**	MONTHS ..... ☐☐ DON'T KNOW.....98	

SECTION 5. IMMUNIZATION AND HEALTH

501	**ENTER THE NAME, LINE NUMBER, AND SURVIVAL STATUS OF EACH BIRTH SINCE June 2003 (ASHAR 1410) IN THE TABLE. ASK THE QUESTIONS ABOUT ALL OF THESE BIRTHS. BEGIN WITH THE LAST BIRTH.** **(IF THERE ARE MORE THAN 2 BIRTHS, USE LAST COLUMN OF ADDITIONAL QUESTIONNAIRES).**		
502	LINE NUMBER FROM 207	LAST BIRTH LINE NUMBER ..... ☐☐	NEXT-TO-LAST BIRTH LINE NUMBER ..... ☐☐
503	FROM 207 AND 211	NAME _____ ALIVE ☐ DEAD ☐ (GO TO 503 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 601)	NAME _____ ALIVE ☐ DEAD ☐ (GO TO 503 IN NEXT TO LAST COLUMN; OF NEW QUESTION OR, IF NO MORE BIRTHS, GO TO 601)
504	Do you have a card where (NAME'S) vaccinations are written down? IF YES, May I see it please?	YES, SEEN ..... 1 (SKIP TO 506) YES, NOT SEEN ..... 2 (SKIP TO 508) NO CARD 3	YES, SEEN ..... 1 (SKIP TO 506) YES, NOT SEEN ..... 2 (SKIP TO 508) NO CARD 3
505	Did you ever have a vaccination card for (NAME)?	YES ..... 1 (SKIP TO 508) NO 2	YES ..... 1 (SKIP TO 508) NO 2
506	(1) COPY VACCINATION DATE FOR EACH VACCINE FROM THE CARD. (2) WRITE "44" IN "DAY" COLUMN IF CARD SHOWS THAT A VACCINATION WAS GIVEN, BUT NO DATE IS RECORDED	GOV'T CLINIC/HOSPITAL=01, FWA=02, HA=03, SMILING SUN STATIC (VITAL / ULTRA) CLINIC=04, SMILING SUN SATELL. (MINI) CLINIC=05,JOINT SMILING SUN -EPI SESSION=06, MARIE STOPES CLINIC/HOSPITAL=07, UPHCP = 08, OTHER NGO HOSPITAL/CLINIC=09 PRIVATE HOSPITAL/CLINIC =10, PRIVATE DOCTOR=11, GOVT. SATELLITE CLINIC=12, OTHER =96;	GOV'T CLINIC/HOSPITAL=01, FWA=02, HA=03, SMILING SUN STATIC (VITAL / ULTRA) CLINIC=04, SMILING SUN SATELL.(MINI) CLINIC=05,JOINT SMILING SUN -EPI SESSION=06, MARIE STOPES CLINIC/HOSPITAL=07, UPHCP = 08, OTHER NGO HOSPITAL/CLINIC=09,PRIVATE HOSPITAL/CLINIC =10, PRIVATE DOCTOR=11, GOVT. SATELLITE CLINIC=12, OTHER =96;

	DAY	MON	YEAR	SO.	DAY	MON	YEAR	SO.
BCG								
POLIO0 (POLIO given at birth)								
POLIO1								
POLIO 2								
POLIO 3								
DPT 1								
DPT 2								
DPT 3								
MEASLES								
Hepatitis B1								
Hepatitis B2								
Hepatitis B3								

506A	Did your child (NAME) receive any polio vaccine from National Immunization Day (NID)? IF YES, How many times did you receive from NID campaign? RECORD '00' IF NOT RECEIVED	TIMES ..... ☐☐	TIMES ..... ☐☐

507	Has (NAME) received any vaccinations that were not recorded on this card? RECORD "YES" ONLY IF RESPONDENT MENTIONS BCG, POLIOO-3, DPT 1-3, HEP-B1-B3 AND/OR MEASLES VACCINE(S)	YES.....1 (SKIP TO 514) (PROBE FOR VACCINATIONS AND WRITE "66" IN THE CORRESPONDING DAY COLUMN IN 506) NO .....2 (SKIP TO 514) DON'T KNOW.....8	YES .....1 (SKIP TO 514) (PROBE FOR VACCINATIONS AND WRITE "66" IN THE CORRESPONDING DAY COLUMN IN 506) NO .....2 (SKIP TO 514) DON'T KNOW 8
508	Did (NAME) ever receive any vaccinations to prevent him/her from getting diseases?	YES.....1 NO .....2 (SKIP TO 514) DON'T KNOW.....8	YES .....1 NO .....2 (SKIP TO 514) DON'T KNOW 8
509	Please tell me if (NAME) received any of the following vaccinations:		
509A	A BCG vaccination against tuberculosis, that is, an injection in the left shoulder that caused a scar?	YES.....1 NO .....2 (SKIP TO 510)	YES .....1 NO .....2 (SKIP TO 510)
509B	From where did (NAME) receive the BCG vaccination?	GOV'T CLINIC/HOSPITAL .....01 FWA.....02 HA.....03 SMILING SUN STATIC (VITAL / ULTRA) CLINIC.....04 SMILING SUN SATELL.(MINI) CLINIC 05 JOINT SMILING SUN -EPI SESSION.....06 MARIE STOPES CLINIC/HOSPITAL .....07 UPHCP .....08 OTHER NGO HOSPITAL/CLINIC .....09 PRIVATE HOSPITAL/CLINIC.....10 PRIVATE DOCTOR.....11 GOVT. SATELLITE CLINIC.....12 OTHER _____96 (SPECIFY)	GOV'T CLINIC/HOSPITAL .....01 FWA.....02 HA.....03 SMILING SUN STATIC (VITAL / ULTRA) CLINIC.....04 SMILING SUN SATELL.(MINI) CLINIC 05 JOINT SMILING SUN -EPI SESSION.....06 MARIE STOPES CLINIC/HOSPITAL .....07 UPHCP .....08 OTHER NGO HOSPITAL/CLINIC .....09 PRIVATE HOSPITAL/CLINIC.....10 PRIVATE DOCTOR.....11 GOVT. SATELLITE CLINIC.....12 OTHER _____ 96 (SPECIFY)
510	Polio vaccine that is, drops in the mouth?	YES.....1 NO .....2 (SKIP TO 510C) DON'T KNOW.....8	YES .....1 NO .....2 (SKIP TO 511) DON'T KNOW 8
510A	How many times did (NAME) receive polio vaccine from a clinic?	NUMBER OF TIMES ..... ☐	NUMBER OF TIMES ..... ☐
510B	From where did (NAME) receive the last polio vaccination?	GOV'T CLINIC/HOSPITAL .....01 FWA.....02 HA.....03 SMILING SUN STATIC (VITAL / ULTRA) CLINIC.....04 SMILING SUN SATELL..(MINI) CLINIC ..... 05 JOINT SMILING SUN -EPI SESSION.....06 MARIE STOPES CLINIC/HOSPITAL .....07 UPHCP .....08 OTHER NGO HOSPITAL/CLINIC .....09 PRIVATE HOSPITAL/CLINIC.....10 PRIVATE DOCTOR.....11 GOVT. SATELLITE CLINIC.....12 OTHER _____96 (SPECIFY)	GOV'T CLINIC/HOSPITAL .....01 FWA.....02 HA.....03 SMILING SUN STATIC (VITAL / ULTRA) CLINIC.....04 SMILING SUN SATELL.(MINI) CLINIC .05 JOINT SMILING SUN -EPI SESSION.....06 MARIE STOPES CLINIC/HOSPITAL .....07 UPHCP .....08 OTHER NGO HOSPITAL/CLINIC .....09 PRIVATE HOSPITAL/CLINIC.....10 PRIVATE DOCTOR.....11 GOVT. SATELLITE CLINIC.....12 OTHER _____ 96 (SPECIFY)
510C	How many times did (NAME) receive polio vaccine from National Immunization Day? (WRITE 00 IF DIDN'T RECEIVE ANY POLIO FROM NID)	NUMBER OF TIMES ..... ☐☐	NUMBER OF TIMES ..... ☐☐
511	DPT vaccination, that is, an injection given in the thigh or buttocks, sometimes at the same time as polio drops?	YES.....1 NO .....2 (SKIP TO 512) DON'T KNOW.....8	YES .....1 NO .....2 (SKIP TO 512) DON'T KNOW 8

511A	How many times?	NUMBER OF TIMES ..... ☐	NUMBER OF TIMES ..... ☐
511B	From where did (NAME) receive the last DPT vaccination?	GOV'T CLINIC/HOSPITAL .....01 FWA.....02 HA.....03 SMILING SUN STATIC (VITAL / ULTRA) CLINIC.....04 SMILING SUN SATELL. ..(MINI) CLINIC .....05 JOINT SMILING SUN -EPI SESSION.....06 MARIE STOPES CLINIC/HOSPITAL .....07 UPHCP .....08 OTHER NGO HOSPITAL/CLINIC .....09 PRIVATE HOSPITAL/CLINIC.....10 PRIVATE DOCTOR.....11 GOVT. SATELLITE CLINIC.....12 OTHER _____96 (SPECIFY)	GOV'T CLINIC/HOSPITAL .....01 FWA.....02 HA.....03 SMILING SUN STATIC (VITAL / ULTRA) CLINIC.....04 SMILING SUN SATELL.(MINI) CLINIC .05 JOINT SMILING SUN -EPI SESSION.....06 MARIE STOPES CLINIC/HOSPITAL .....07 UPHCP .....08 OTHER NGO HOSPITAL/CLINIC .....09 PRIVATE HOSPITAL/CLINIC.....10 PRIVATE DOCTOR.....11 GOVT. SATELLITE CLINIC.....12 OTHER _____ 96 (SPECIFY)
512	An injection to prevent measles?	YES.....1 NO .....2 (SKIP TO 513) ← DON'T KNOW.....8	YES .....1 NO .....2 (SKIP TO 513) ← DON'T KNOW 8
512A	From where did (NAME) receive the measles vaccination?	GOV'T CLINIC/HOSPITAL .....01 FWA.....02 HA.....03 SMILING SUN STATIC (VITAL / ULTRA) CLINIC.....04 SMILING SUN SATELL. ..(MINI) CLINIC .....05 JOINT SMILING SUN -EPI SESSION.....06 MARIE STOPES CLINIC/HOSPITAL .....07 UPHCP .....08 OTHER NGO HOSPITAL/CLINIC .....09 PRIVATE HOSPITAL/CLINIC.....10 PRIVATE DOCTOR.....11 GOVT. SATELLITE CLINIC.....12 OTHER _____96 (SPECIFY)	GOV'T CLINIC/HOSPITAL .....01 FWA.....02 HA.....03 SMILING SUN STATIC (VITAL / ULTRA) CLINIC.....04 SMILING SUN SATELL. ..(MINI) CLINIC .....05 JOINT SMILING SUN -EPI SESSION.....06 MARIE STOPES CLINIC/HOSPITAL .....07 UPHCP .....08 OTHER NGO HOSPITAL/CLINIC .....09 PRIVATE HOSPITAL/CLINIC.....10 PRIVATE DOCTOR.....11 GOVT. SATELLITE CLINIC.....12 OTHER _____ 96 (SPECIFY)
513.	A HEP.B vaccination, that is an injection given in the right thigh, sometimes given at the same time as DPT?	YES.....1 NO .....2 (SKIP TO 514) ← DON'T KNOW.....8	YES .....1 NO .....2 (SKIP TO 514) ← DON'T KNOW 8
513A.	How many times was a HEP B vaccination received?	No .of times ..... ☐ Don't know 8	No .of times..... ☐ Don't know 8
513B	From where did (name) receive the Hepatitis B vaccination?	GOV'T CLINIC/HOSPITAL .....01 FWA.....02 HA.....03 SMILING SUN STATIC (VITAL / ULTRA) CLINIC.....04 SMILING SUN SATELL ..(MINI) CLINIC .....05 JOINT SMILING SUN -EPI SESSION.....06 MARIE STOPES CLINIC/HOSPITAL .....07 UPHCP .....08 OTHER NGO HOSPITAL/CLINIC .....09 PRIVATE HOSPITAL/CLINIC.....10 PRIVATE DOCTOR.....11 GOVT. SATELLITE CLINIC.....12 OTHER _____96 (SPECIFY)	GOV'T CLINIC/HOSPITAL .....01 FWA.....02 HA.....03 SMILING SUN STATIC (VITAL / ULTRA) CLINIC.....04 SMILING SUN SATELL. ..(MINI) CLINIC .....05 JOINT SMILING SUN -EPI SESSION.....06 MARIE STOPES CLINIC/HOSPITAL .....07 UPHCP .....08 OTHER NGO HOSPITAL/CLINIC .....09 PRIVATE HOSPITAL/CLINIC.....10 PRIVATE DOCTOR.....11 GOVT. SATELLITE CLINIC.....12 OTHER _____ 96 (SPECIFY)

514	In the last 6 months, has (NAME) received any Vitamin A?	YES.....1 NO .....2 (SKIP TO 515) DON'T KNOW.....8	YES .....1 NO .....2 (SKIP TO 515) DON'T KNOW 8
514A	From where did (NAME) receive vitamin A?	GOV'T CLINIC/HOSPITAL .....01 FWA.....02 HA.....03 SMILING SUN STATIC (VITAL / ULTRA) CLINIC.....04 SMILING SUN SATELL. ..(MINI) CLINIC ..... 05 JOINT SMILING SUN -EPI SESSION.....06 MARIE STOPES CLINIC/HOSPITAL .....07 UPHCP .....08 OTHER NGO HOSPITAL/CLINIC .....09 PRIVATE HOSPITAL/CLINIC.....10 PRIVATE DOCTOR.....11 GOVT. SATELLITE CLINIC.....12 OTHER _____96 (SPECIFY)	GOV'T CLINIC/HOSPITAL .....01 FWA.....02 HA.....03 SMILING SUN STATIC (VITAL / ULTRA) CLINIC.....04 SMILING SUN SATELL. ..(MINI) CLINIC .....05 JOINT SMILING SUN -EPI SESSION.....06 MARIE STOPES CLINIC/HOSPITAL .....07 UPHCP .....08 OTHER NGO HOSPITAL/CLINIC .....09 PRIVATE HOSPITAL/CLINIC.....10 PRIVATE DOCTOR.....11 GOVT. SATELLITE CLINIC.....12 OTHER _____ 96 (SPECIFY)
515.	Has _____ had diarrhea (name) in the last 2 weeks?	YES.....1 NO .....2 (SKIP TO 516) DON'T KNOW.....8	YES .....1 NO .....2 (SKIP TO 516) DON'T KNOW 8
515A.	Now I would like to know how much _____ (name) was given to drink during the diarrhea (including breastmilk) Was he/she given less than usual to drink. about the same amount, or more than usual to drink? If less, probe : was he/she given much less than usual to drink or somewhat less?	Much less..... 1 Somewhat less ..... 2 About the same..... 3 More..... 4 Nothing to drink ..... 5 Don't know..... 8	Much less ..... 1 Somewhat less ..... 2 About the same ..... 3 More..... 4 Nothing to drink..... 5 Don't know 8
515B.	When_____ had diarrhea, (name) was he/she given less than usual to eat, about the same amount, more than usual, or nothing to eat? If less, probe was he/she given much less than usual to eat or somewhat less?	Much less..... 1 Somewhat less ..... 2 About the same..... 3 More..... 4 Stopped food..... 5 Didn't start solid/ semi-solid food .. 6 Don't know..... 8	Much less ..... 1 Somewhat less ..... 2 About the same ..... 3 More..... 4 Stopped food..... 5 Didn't start solid/ semi-solid food... 6 Don't know 8
515C.	Did you seek advice or treatment for the diarrhea from any source?	Yes ..... 1 No..... 2 (Skip to 515E)	Yes ..... 1 No..... 2 (Skip to 515E)

515D.	Where/whom did you seek advice or treatment most recently? Probe to identify each type of source and circle the appropriate codes If unable to determine if a hospital health center or clinics is public or private medical write the name of the place _____ (Name of Places)	**HOME** MEDICAL PERSON AT HOME..... 01 NON-MEDICAL PERSON AT HOME. .02 **PUBLIC SECTOR** HOSPITAL/MEDICAL COLLEGE..... 11 FAMILY WELFARE CENTRE ..... 12 UPAZILA HEALTH COMPLEX..... 13 MCWC..... 14 RURAL DISPENSARY/ COMMUNITY CLINIC..... 15 SATELLITE CLINIC/ EPI OUTREACH SITE..... 16 HA..... 17 FWA..... 18 **SMILING SUN** STATIC (VITAL / ULTRA) CLINIC..... 21 SATELLITE (MINI) CLINIC..... 22 COMMUNITY SERVICE PROVIDER(CSP) ... Depoholder 23 **OTHER NGO** MARIE STOPES clinic/hospital..... 30 UPHCP..... 31 HOSPITAL/ CLINIC..... 32 SATELLITE CLINIC..... 33 FIELDWORKER..... 34 DEPOTHOLDER..... 35 **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL/CLINIC..... 41 QUALIFIED DOCTOR..... 42 VILLAGE DOCTOR..... 43 PHARMACIST/PHARMACY..... 44 Homeopath..... 45 TRADITIONAL HEALER/ KABIRAJ .... 46 SHOP..... 51 FRIENDS/RELATIVES..... 52 OTHER _____ 96 (SPECIFY) DON'T KNOW..... 98	**HOME** MEDICAL PERSON AT HOME..... 01 NON-MEDICAL PERSON AT HOME. .02 **PUBLIC SECTOR** HOSPITAL/MEDICAL COLLEGE..... 11 FAMILY WELFARE CENTRE ..... 12 UPAZILA HEALTH COMPLEX..... 13 MCWC..... 14 RURAL DISPENSARY/ COMMUNITY CLINIC ..... 15 SATELLITE CLINIC/ EPI OUTREACH SITE ..... 16 HA ..... 17 FWA ..... 18 **SMILING SUN** STATIC (VITAL / ULTRA) CLINIC..... 21 SATELLITE (MINI) CLINIC..... 22 COMMUNITY SERVICE PROVIDER(CSP)/depoholder ..... 23 **OTHER NGO** MARIE STOPES clinic/hospital..... 30 UPHCP..... 31 HOSPITAL/ CLINIC..... 32 SATELLITE CLINIC..... 33 FIELDWORKER..... 34 DEPOTHOLDER..... 35 **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL/CLINIC ..... 41 QUALIFIED DOCTOR..... 42 VILLAGE DOCTOR..... 43 PHARMACIST/PHARMACY ..... 44 Homeopath..... 45 TRADITIONAL HEALER/ KABIRAJ .... 46 SHOP ..... 51 FRIENDS/RELATIVES..... 52 OTHER _____ 96 (SPECIFY) DON'T KNOW 98
515E.	DOES _____ STILL (NAME) HAVE DIARRHEA ?	YES..... 1 NO ..... 2 DON'T KNOW..... 8	YES ..... 1 NO ..... 2 DON'T KNOW 8

			Yes	No	DK		Yes	No	DK
515F.	Was he/she given any of the following to drink at any time since he/she started having the diarrhea.? Such as:								
	a. A fluid made from a special saline packet	A fluid made from a special saline packet	1	2	8	A fluid made from a special saline packet	1	2	8
	b. Homeomade sugar-salt-water solution(laban gur)?	Homeomade sugar-salt-water solution(laban gur)?	1	2	8	Homeomade sugar-salt-water solution(laban gur)?	1	2	8
	c. Zinc syrup?	Zinc syrup?	1	2	8	Zinc syrup?	1	2	8
	d. Zinc tablets?	Zinc tablets?	1	2	8	Zinc tablets?	1	2	8

515G.	Was anything (else) given to treat the diarrhea?	YES..... 1 NO ..... 2 (SKIP TO 516) ← DON'T KNOW..... 8	YES ..... 1 NO ..... 2 (SKIP TO 516) ← DON'T KNOW 8
515H.	What (else) was given to treat the diarrhea? Anything else? Record all treatments given.	**Pill/Capsul/syrup** Antibiotic..... A Antimotility ..... B Other(Not antibiotic, antimotility or zinc)..... C Unknown pill or syrup..... D **Injection** Antibiotic..... E Non antibiotic..... F Unknown injection..... G (IV) intravenous..... H Home remedy/herbal medicine ..... I Other_____..... X (Specify)	**Pill/Capsul/syrup** Antibiotic..... A Antimotility..... B Other(Not antibiotic, antimotility or zinc)..... C Unknown pill or syrup..... D **Injection** Antibiotic..... E Non antibiotic..... F Unknown injection..... G (IV) intravenous..... H Home remedy/herbal medicine ..... I Other_____..... X (Specify)

516.	Has _____ had an illness with a (name) cough at any time in the last 2 weeks?	YES.....1 NO .....2 (SKIP TO 517) ← DON'T KNOW.....8	YES .....1 NO .....2 (SKIP TO 517) ← DON'T KNOW 8
516A.	When _____ had an illness (name) with a cough, did he/she breath faster than usual with short, rapid breaths or have difficulty breathing?	YES.....1 NO .....2 (SKIP TO 517) ← DON'T KNOW.....8	YES .....1 NO .....2 (SKIP TO 517) ← DON'T KNOW 8
516B	Was the fast or difficulty breathing due to a problem in the chest or to a blocked or runny nose?	Chest only .....1 Nose only .....2 Both.....3 Other_____.....6 (Specify) Don't know 8	Chest only .....1 Nose only .....2 Both.....3 Other_____.....6 (Specify) Don't know 8
516C.	Did you seek advice or treatment for the illness from any source?	Yes .....1 No.....2 (Skip to 517) ←	Yes .....1 No.....2 (Skip to 517) ←
516D	Where/whom did you seek advice or treatment most recently? Probe to identify each type of source and circle the appropriate codes If unable to determine if a hospital health center or clinics is public or private medical write the name of the place _____ (Name of Places)	**HOME** MEDICAL PERSON AT HOME..... 01 NON-MEDICAL PERSON AT HOME.....02 **PUBLIC SECTOR** HOSPITAL/MEDICAL COLLEGE..... 11 FAMILY WELFARE CENTRE ..... 12 UPAZILA HEALTH COMPLEX..... 13 MCWC..... 14 RURAL DISPENSARY/ COMMUNITY CLINIC..... 15 SATELLITE CLINIC/ EPI OUTREACH SITE..... 16 HA..... 17 FWA..... 18 **SMILING SUN** STATIC (VITAL / ULTRA) CLINIC..... 21 SATELLITE (MINI) CLINIC..... 22 COMMUNITY SERVICE PROVIDER(CSP) .. / depoholder 23 **OTHER NGO** MARIE STOPES clinic/hospital..... 30 UPHCP..... 31 HOSPITAL/ CLINIC..... 32 SATELLITE CLINIC..... 33 FIELDWORKER..... 34 DEPOTHOLDER..... 35 **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL/CLINIC..... 41 QUALIFIED DOCTOR..... 42 VILLAGE DOCTOR..... 43 PHARMACIST/PHARMACY..... 44 Homeopath..... 45 TRADITIONAL HEALER/ KABIRAJ .... 46 SHOP..... 51 FRIENDS/RELATIVES..... 52 OTHER _____ 96 (SPECIFY) DON'T KNOW..... 98	**HOME** MEDICAL PERSON AT HOME..... 01 NON-MEDICAL PERSON AT HOME. .02 **PUBLIC SECTOR** HOSPITAL/MEDICAL COLLEGE ..... 11 FAMILY WELFARE CENTRE..... 12 UPAZILA HEALTH COMPLEX ..... 13 MCWC..... 14 RURAL DISPENSARY/ COMMUNITY CLINIC ..... 15 SATELLITE CLINIC/ EPI OUTREACH SITE ..... 16 HA ..... 17 FWA ..... 18 **SMILING SUN** STATIC (VITAL / ULTRA) CLINIC..... 21 SATELLITE (MINI) CLINIC ..... 22 COMMUNITY SERVICE PROVIDER(CSP) .. / depoholder 23 **OTHER NGO** MARIE STOPES clinic/hospital..... 30 UPHCP..... 31 HOSPITAL/ CLINIC..... 32 SATELLITE CLINIC ..... 33 FIELDWORKER..... 34 DEPOTHOLDER..... 35 **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL/CLINIC ..... 41 QUALIFIED DOCTOR..... 42 VILLAGE DOCTOR..... 43 PHARMACIST/PHARMACY ..... 44 Homeopath..... 45 TRADITIONAL HEALER/ KABIRAJ .... 46 SHOP ..... 51 FRIENDS/RELATIVES..... 52 OTHER_____ 96 (SPECIFY) DON'T KNOW 98
516E.	IS _____ STELL SICK WITH (NAME) A COUGH?	YES.....1 NO 2	YES .....1 NO 2
517		GO BACK TO 503 IN THE NEXT COLUMN, OR IF NO OTHER BIRTHS, GO TO 601.	GO BACK TO 503 IN THE NEXT COLUMN, OR IF NO OTHER BIRTHS, GO TO 601.

SECTION 6: KNOWLEDGE ABOUT HEALTH SERVICES/PROVIDERS

Now I would like to talk about health services and health facilities available in your neighbourhood.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
601	If you need health services what is the first name of the clinic/hospital that comes to your mind? The second name ? The third name ? (Ask for first 3 names. Please probe but not prompt. Use codes from the list below) GOVT. HOSPITAL… .....01 GREEN UMBRELLA CLINIC …….. .....02 SMILING SUN CLINIC .....03 MARIE STOPS CLINIC/HOSPITAL.. .....04 UPHCP .....05 PRIVATE CLINIC .....06 PRIVATE DOCTOR CHAMBER .....07 PHARMACY .....08 OTHER _____ .....96 (SPECIFY) Don't Know……98	First name Second name Third name	

601A	Have you ever seen the following symbol before? Please tell me which provider it stands for? **(SHOW CARD WITH GREEN UMBRELLA , EmOC, SMILING SUN AND MARIE STOPS. logo)**		Seen and correctly identified provider	Seen and correctly identified as Smiling Sun clinic /hospital operating NGO	Seen but identify as other NGO/ Tells nothing	Not seen
		A.GREEN AMBRELLA	1		3	4
		B. EmOC	1		3	4
		C. SMILING SUN	1	2	3	4
		D. MARIE STOPS	1		3	4

601B.	**Interviewer: Check Q. 601A (C) and circle in appropriate code.**	**Code 1 or 2 of Smiling sun (C) is circled .....1** **Code 1 or 2 of smiling sun (C) is not circled .....2** →	**603**
602	Where have you seen this SMILING SUN symbol? Any others?	ON TELEVISION (IN AN ADVERTISEMENT) .....A ON TELEVISION (IN A DRAMA) .....B ON A POSTER.....C ON A PAMPHLET OR BROCHURE .....D ON A BILLBOARD SIGN .....E ON A SIGN AT A HEALTH CLINIC.....F OTHER .....X (SPECIFY)	
602A	What comes to your mind when you think or see of the Smiling Sun?	GOOD QUALITY RELATED .....A BAD QUALITY RELATED.....B Reasonable PRICE/VALUE RELATED .....C High PRICE/VALUE RELATED.....D LIKINGRELATED .....E DISLIKING RELATED.....F GOOD BEHABIOUR……G Unpleasant BEHABIOUR…….H CLEANLINESS ……I UNCLEANLINESS ……J PROMOTIONAL ACTIVITIES RELATED .....K ALL TYPES OF HEALTH SERVICES ARE AVAILABLE .....L ALL HEALTH SERVICES ARE NOTAVAILABLE .....M OTHER .....X (SPECIFY)	
602B.	Have you received a green health benefit card (HBC) from Smiling Sun clinic? IF YES. May I see it please?	Yes, seen .....1 Yes, not seen .....2 No card received .....3 Don't know .....8 →	603
602C.	While visiting smiling sun clinic for health services do you carry that health card?	YES .....1 NO.....2 Never visits Smiling Sun clinic 3	
603	Now I would like to ask you some questions about temporary or satellite clinics. In some places, there is a temporary clinic set up for a day or part of a day in someone's house, a community building or in a school. Are you aware of any such clinics in this area?	YES .....1 NO.....2 DON'T KNOW/CAN'T REMEMBER.....8 →	611

603A	During the last 3 months, was there any such clinic in this area?	YES ..... 1 NO ..... 2 → 611 DON'T KNOW/CAN'T REMEMBER 8	
604	Where was the temporary/satellite health clinic held? What type of temporary/satellite clinic was this? Name: _____ Location:_____	SMILING SUN SATELLITE (MINI) CLINIC ..... 1 → 605 GOVERNMENT SATELLITE CLINIC ..... 2 OTHER ..... 6 (SPECIFY) DON'T KNOW 8	
604A	Are you aware of any SMILING SUN temporary or satellite clinic held in this area during the last 3 months? (SHOW SMILING SUN LOGO IF NECESSARY) Name: _____ Location:_____	YES ..... 1 NO ..... 2 → 611	
605.	What services are available at this SMILING SUN temporary/satellite health clinic? Any others?	**FAMILY PLANNING** CLINICAL METHOD ..... A NON-CLINICAL METHOD ..... B TREATMENT/ADVICE FOR SIDE EFFECTS .... C **MATERNAL HEALTH** ANC ..... D PNC ..... E TT ..... F **CHILD HEALTH** EPI ..... G DIARRHEA TREATMENT/ORS ..... H ARI TREATMENT ..... I VITAMIN A ..... J ILLNESSES (GENERAL) ..... K OTHER CHILD CARE ..... L **OTHER REPRODUCTIVE HEALTH** TREATMENT OF RTI/STD ..... M GENERAL HEALTH ..... N OTHER ..... X (SPECIFY) DOES NOT KNOW ..... Y	
606.	Did anybody inform you in advance about the SMILING SUN temporary/satellite clinic?	YES ..... 1 NO ..... 2 → 607	
606A.	Who mainly told you? NAME: _____	**HEALTH PROFESSIONAL** QUALIFIED DOCTOR ..... 01 NURSE/MIDWIFE/PARAMEDIC ..... 02 FAMILY WELFARE VISITOR ..... 03 MA/SACMO ..... 04 HA ..... 05 FWA ..... 06 GOVT. SATELLITE CLINIC WORKER ..... 07 **SMILING SUN** STATIC (VITAL / ULTRA) CLINIC WORKER ... 08 SATELLITE (MINI) CLINIC WORKER ..... 09 COMMUNITY SERVICE PROVIDER(CSP)/ depoholder ..... 10 COMMUNITY MOBILIZER/ Service Promoter .. 11 **OTHER PERSON** TRAINED TRADITIONAL BIRTH ATTENDANT (TTBA) ..... 12 UNTRAINED TBA (DAI) ..... 13 VILLAGE DOCTOR ..... 14 RELATIVE ..... 15 NEIGHBOR ..... 16 OTHER ..... 96 (SPECIFY)	
607.	Have you gone to this smiling sun temporary satellite clinic in the last 3 months?	YES ..... 1 NO ..... 2 → 611	

607A.	What service(s) have you used at this SMILING SUN temporary/satellite clinic **last time** during last 3 months ? Any others?	**FAMILY PLANNING** CLINICAL METHOD ..... A NON-CLINICAL METHOD ..... .B TREATMENT/ADVICE FOR SIDE EFFECTS ... C **MATERNAL HEALTH** ANC..... D PNC..... .E TT.....F **CHILD HEALTH** EPI ..... G DIARRHEA TREATMENT/ORS..... H ARI TREATMENT .....I VITAMIN A .....J ILLNESSES (GENERAL)..... K OTHER CHILD CARE.....L OTHER REPRODUCTIVE HEALTH TREATMENT OF RTI/STD .....M GENERAL HEALTH..... N OTHER..... X (SPECIFY)	
608.	How long did it take for you to get to this SMILING SUN temporary clinic?	HOURS ☐☐ MINUTES ☐☐ NO TIME 0000 DON'T KNOW/CAN'T REMEMBER 9998	
609.	Once you arrived at the SMILING SUN temporary/satellite clinic, how long did you have to wait until you were treated?	HOURS ☐☐ MINUTES ☐☐ NO WAIT 0000 DON'T KNOW/CAN'T REMEMBER 9998	
610.	You said that you have received _____ (mentioned 607A) services during your most recent visit to the SMILING SUN temporary/satellite clinic. Did you pay for this service?	YES .....1 NO.....2 →	**611**
610A.	Did you pay the amount that you were asked to pay or did you pay more or less or on credit?	Same amount.....1 More .....2 Less.....3 Credit.....4	
611	Now I want to ask you some questions about your familiarity with clinics and hospitals in this area from where you can get health or family planning services. Do you know of any clinic/hospital in this area where you can get health or family planning services?	YES .....1 NO.....2 →	**618**
612	What type of hospital/ clinic was this? (SHOW SMILING SUN LOGO IF NECESSARY) Name: _____ Location:_____	**PUBLIC SECTOR** HOSPITAL/MEDICAL COLLEGE .....11 FAMILY WELFARE CENTRE.....12 UPAZILA HEALTH COMPLEX .....13 MCWC .....14 RURAL DISPENSARY/COMMUNITY CLINIC ....15 **SMILING SUN** STATIC (VITAL / ULTRA) CLINIC .....21 → **OTHER NGO** MARIE STOPS…… ....31 UPHCP …….....32 OTHER HOSPITAL/CLINIC…….. .....33 **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL /CLINIC.....41 OTHER.....96 (SPECIFY) DON'T KNOW 98	**613**
612A	Are you aware of any SMILING SUN clinic/ hospital? (**SHOW SMILING SUN LOGO IF NECESSARY**) Name: _____ Location:_____	YES .....1 NO.....2 →	**618**

613.	What services are available at this SMILING SUN hospital/clinic? Any others?	**FAMILY PLANNING** CLINICAL METHOD ..... A NON-CLINICAL METHOD ..... .B TREATMENT/ADVICE FOR SIDE EFFECTS ... C **MATERNAL HEALTH** ANC..... D PNC..... .E TT.....F **CHILD HEALTH** EPI ..... G DIARRHEA TREATMENT/ORS..... H ARI TREATMENT .....I VITAMIN A .....J ILLNESSES (GENERAL)..... K OTHER CHILD CARE.....L OTHER REPRODUCTIVE HEALTH TREATMENT OF RTI/STD .....M GENERAL HEALTH..... N OTHER..... X (SPECIFY) DOES NOT KNOW ..... Y	
614.	Have you ever gone to this SMILING SUN hospital/clinic ?	YES .....1 NO.....2	
614A.	Have you gone to this smiling sun hospital/clinic in the last 3 months?	YES .....1 NO.....2 →	**618**
614B.	What services have you used at this smiling sun hospital/clinic last time during last 3 months? Any others?	**FAMILY PLANNING** CLINICAL METHOD .....A NON-CLINICAL METHOD .....B TREATMENT/ADVICE FOR SIDE EFFECTS ..... C **MATERNAL HEALTH** ANC..... D PNC.....E TT.....F **CHILD HEALTH** EPI ..... G DIARRHEA TREATMENT/ORS..... H ARI TREATMENT .....I VITAMIN A .....J ILLNESSES (GENERAL).....K OTHER CHILD CARE.....L OTHER REPRODUCTIVE HEALTH TREATMENT OF RTI/STD .....M GENERAL HEALTH..... N OTHER.....X (SPECIFY)	
615.	How long did it take for you to get to this hospital/clinic?	HOURS ☐☐ ..... MINUTES ☐☐ NO TIME .....0000 DON'T KNOW/CAN'TREMEMBER.....9998	
616.	Once you arrived at the hospital/clinic, how long did you have to wait until you were treated?	HOURS ☐☐ ..... MINUTES ☐☐ NO WAIT.....0000 DON'T KNOW/CAN'TREMEMBER.....9998	
617.	You said that you have received _____ (mentioned in 614B) services during your most recent visit. Did you pay for this service?	YES .....1 NO.....2 →	618
617A.	Did you pay the amount that you were asked to pay or did you pay more or less or on credit?	Same anount.....1 More .....2 Less.....3 Credit.....4	
618.	**Interviewer: Check Q. 607 and Q.614 and circle in appropriate code.**	**Code 1 of Q.606 and Q.614 is circled .....1** **Code 1 of Q.606 or 614 is circled.....2** **Code 1 of Q.606 and Q.614 is not circled.....3** →	**620**
619	What are the benefits you perceive when you seek services from the Smiling Sun Hospital/ clinic and/or Smiling Sun satellite clinic?	TRAINED PROVIDER…… ..... A HIGH QUALITY SERVICES…….. ..... B NEAREST FACILITY…… ..... C ESSENTIAL CARE…….....D REASONABLE PRICE……..E OTHER .....X (SPECIFY)	
619A	What are the favourable points that come to your mind when you think of the Smiling Sun Hospital/clinic?	SAFETY NET EXIST……..... A SOCIAL SERVICE……..... B. BUILD HEALTH AWARENESS……..... C CONTRIBUTE TO ENSURE GOOD	

		HEALTH FOR ALL.....D OTHER.....X (SPECIFY)	
619B	In general (mostly) which economic group come to smiling sun Hospital/clinic for health care services?	UPPER CLASS…….....1 MIDDLE CLASS…….....2 LOWER CLASS.....3 POOR OR POP……. .....4 ALL CLASS…….....5	
620.	Is there anybody in your area from whom you can get health information or supplies of pills, condoms, ORS or vitamin A?	YES .....1 NO.....2 DON'T KNOW/CAN'T REMEMBER.....8	→ 626
620A.	Who is she? Which organization does she belong to? Name: _____ Location: _____ Anybody else? Name: _____ Location: _____	SMILING SUN CSP/depoholder .....A BRAC SHASTHASHABIKA.....B GOV'T F.P. WORKER .....C GOV'T HEALTH WORKER.....D OTHER NGO WORKER .....E OTHER .....X (SPECIFY) DON'T KNOW.....Y	
621.	**CHECK 620A: IF THE RESPONDENT MENTIONED THE NAME OF ONLY ONE PROVIDER, THEN ASK QUESTIONS 622-625 IN COLUMN 1. IF THE RESPONDENT MENTIONED MORE THAN ONE PROVIDER'S NAME, THEN ASK THE QUESTIONS 622-625 IN COLUMN 1 FOR THE FIRST PROVIDER AND THEN ASK 622-625 IN COLUMN 2 FOR THE OTHER PROVIDER**		

622. In the last three months, did you receive any information from her on health or family planning? YES.....1 NO 2	→ 623	622. In the last three months, did you receive any information from her on health or family planning? YES .....1 NO.....2	→ 623
622A. What information did you receive? FAMILY PLANNING .....A TREATMENT/ADVICE FOR SIDE EFFECTS.....B MATERNAL HEALTH.....C CHILD HEALTH.....D DIARRHEA TREATMENT/ORS .....E ARI TREATMENT.....F VITAMIN A.....G ILLNESSES (GENERAL).....H OTHER CHILD CARE .....I TREATMENT OF RTI/STD.....J GENERAL HEALTH .....K OTHER _____ X (SPECIFY) DOES NOT KNOW.....Y		622A. What information did you receive? FAMILY PLANNING.....A TREATMENT/ADVICE FOR SIDE EFFECTS .....B MATERNAL HEALTH .....C CHILD HEALTH .....D DIARRHEA TREATMENT/ORS.....E ARI TREATMENT .....F VITAMIN A .....G ILLNESSES (GENERAL) .....H OTHER CHILD CARE.....I TREATMENT OF RTI/STD .....J GENERAL HEALTH.....K OTHER _____ X (SPECIFY) DOES NOT KNOW .....Y	
623. In the last three months, did you receive any family planning and health services from her? YES.....1 NO 2	→ 624	623. In the last three months, did you receive any family planning and health services from her? YES .....1 NO.....2	→ 624
623A. What services did you receive? ORAL PILL.....A CONDOM .....B OTHER FP METHOD.....C ORS.....D VITAMIN A.....E CHILD HEALTH.....F OTHER_____ _____ X (SPECIFY)		623A. What services did you receive? ORAL PILL .....A CONDOM.....B OTHER FP METHOD .....C ORS .....D VITAMIN A .....E CHILD HEALTH .....F OTHER_____ _____ X (SPECIFY)	
624. In the last three months, has she referred or told you to go to any satellite or static clinic for health and family planning services YES.....1 NO 2	→ 625	624. In the last three months, has she referred or told you to go to any satellite or static clinic for health and family planning services YES .....1 NO.....2	→ 625

624A. For what service did she referred?		624A. For what service did she referred?	
FAMILY PLANNING CLINICAL METHOD ..... A NON-CLINICAL METHOD ..... B TREATMENT/ADVICE FOR SIDE EFFECTS ..... C **MATERNAL HEALTH** ANC ..... D PNC ..... E TT ..... F **CHILD HEALTH** EPI ..... G DIARRHEA TREATMENT/ORS ..... H ARI TREATMENT ..... I VITAMIN A ..... J ILLNESSES (GENERAL) ..... K OTHER CHILD CARE ..... L OTHER REPRODUCTIVE HEALTH TREATMENT OF RTI/STD ..... M GENERAL HEALTH ..... N OTHER _____ X (SPECIFY)		**FAMILY PLANNING** CLINICAL METHOD ..... A NON-CLINICAL METHOD ..... B TREATMENT/ADVICE FOR SIDE EFFECTS ..... C **MATERNAL HEALTH** ANC ..... D PNC ..... E TT ..... F CHILD HEALTH EPI ..... G DIARRHEA TREATMENT/ORS ..... H ARI TREATMENT ..... I VITAMIN A ..... J ILLNESSES (GENERAL) ..... K OTHER CHILD CARE ..... L OTHER REPRODUCTIVE HEALTH TREATMENT OF RTI/STD ..... M GENERAL HEALTH ..... N OTHER _____ X (SPECIFY)	
625. In the last three months, has she visited you in your house to talk to you about family planning and health services or given you any pill, condom, vitamin A or ORS? YES ..... 1 NO 2		625. In the last three months, has she visited you in your house to talk to you about family planning and health services or given you any pill, condom, vitamin A or ORS? YES ..... 1 NO 2	
INTERVIEWER: GO BACK TO 622 IN NEXT COLUMN OR IF NO MORE PROVIDER GO TO 626		**GO TO 626**	

626	CHECK FACE SHEET: Smiling sun areas (Domain Code: 01-04 or 06-09) ☐ ↓ Comparison areas (Domain code: 5 & 10) ☐ (SKIP TO 701A)		
627	Have you ever attended a meeting organized by _____? (NAME OF SERVICE PROMOTER) **INTERVIEWER: COLLECT NAME OF SERVICE PROMOTER FROM THE SMILING SUN CLINIC BEFORE ASKING THE QUESTION**	YES ..... 1 NO ..... 2 → 701A	
627A	What was the meeting about?	NEWLYWED MEETING ..... A PREGNANCY CARE ..... B PNC ..... C Breastfeeding ..... D FAMILY PLANNING ..... E CHILD HEALTH ..... F STDS/RTI ..... G NUTRITION ..... H OTHER _____ ... X (SPECIFY)	
627B	When was the last time that you attended a meeting? IF LESS THAN ONE MONTH AGO, WRITE '00'.	MONTHS AGO ..... ☐☐ DON'T KNOW/CAN'T REMEMBER 98	

SECTION 7: BIDDING GAME

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
701A	**The following services are available in Smiling Sun Clinic where MBBS doctors are providing IMCI, ANC, PNC, STI/RTI AND LCC GENERAL HEALTH,- FEVER, SKIN INFECTION, ABSCESS, CONJUNCTIVITIS, ARTHRITIS, HYPER- ACIDITY/GASTRITIS, SORE THROAT, JAUNDICE, LOW BACK PAIN, WEAKNESS, ANAEMIA, PAIN (HEADACHE) SERVICES].** Would your household pay Tk. 75 to receive such services?	Yes ..... 1 No ..... 2 →	 701D
701B	Would your household be willing to pay Tk. [85 …]?	Yes ..... 1 No ..... 2 →	 701G
701C	Would your household be willing to pay Tk. […95]?	Yes ..... 1 No ..... 2 →	701G
701D	Would your household be willing to pay Tk.[…65]?	Yes ..... 1 → No 2	701G
701E	Would your household be willing to pay Tk.[…55]?	Yes ..... 1 → No 2	701G
701F	Would you be willing to pay anything? If yes, how much?	Not willing to pay anything ..... 00 Taka ..... ***[WRITE THE AMOUNT THE RESPONDENT WILLING TO PAY]***	
701G	***INTERVIEWER: CHECK QUESTIONS 701A TO 701C AND WRITE THE AMOUNT THE RESPONDENT WILLING TO PAY***	Taka..... ☐☐	
702A	**THE FOLLOWING SERVICES ARE AVAILABLE IN SMILING SUN CLINIC WHERE PARAMEDICS ARE PROVIDING IMCI, ANC, PNC, STI/RTI AND LCC [LIMITED CURATIVE CARE- FEVER, SKIN INFECTION, ABSCESS, CONJUNCTIVITIS, ARTHRITIS, ANOREXIA, HYPER- ACIDITY/GASTRITIS, TONSILLITIS, SORE THROAT, HELMINTHIASIS, FOOD POISONING, JAUNDICE, LOW BACK PAIN, WEAKNESS, ANAEMIA, PAIN (HEADACHE/BODYACHE) SERVICES].** Would your household pay Tk. 40 to receive such services?	Yes ..... 1 No ..... 2 → Don't want service from paramedic ..... 3 →	702D 703
702B	Would your household be willing to pay Tk. [45 …]?	Yes ..... 1 No ..... 2 →	 702G
702C	Would your household be willing to pay Tk. [55 …]?	Yes ..... 1 No ..... 2 →	702G
702D	Would your household be willing to pay Tk.[35 …]?	Yes ..... 1 → No 2	702G
702E	Would your household be willing to pay Tk.[25 …]?	Yes ..... 1 → No 2	702G
702F	Would you be willing to pay anything? If yes, how much?	Not willing to pay anything ..... 00 Taka ..... ***[WRITE THE AMOUNT THE RESPONDENT WILLING TO PAY]***	
702G	***INTERVIEWER: CHECK QUESTIONS 702A TO 702F AND WRITE THE AMOUNT THE RESPONDENT WILLING TO PAY***	Taka..... ☐☐	
703	**INTERVIEWER: CHECK Q.220 AND CIRCLED IN APPROPRIATE CODE.**	**Yes ..... 1 →** **No ..... 2** **Unsure ..... 8** **No code is circled ..... 4 →**	**705** **710**
704	Do you plan to have another child in the next 3 years?	Yes ..... 1 No ..... 2 →	 710
	INTERVIEWER: ENCOURAGE WOMAN'S HUSBAND TO HELP IN ANSWERING REMAINING QUESTIONS		

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
705	Would you be willing to receive normal delivery service from a trained Nurse/Paramedic from the Smiling Sun clinic at home? **(INTERVIEWER: PLEASE TELL THE RESPONDENT CLEARLY THAT SERVICE TO BE RECEIVED AT THE CLINIC/HOSPITAL FROM A TRAINED DOCTOR IS SIGNIFICANTLY HIGHER QUALITY THAN THAT RECEIVED IN THE HOME)**	Yes .....1 No .....2 →	707A
706A	Suppose that you could receive normal delivery service from a paramedic from the Smiling Sun clinic at home. Would your household pay Tk. 750 to receive Smiling Sun delivery services in the home?	Yes .....1 No .....2 →	706D
706B	Would your household be willing to pay Tk. 850	Yes .....1 No .....2 →	706G
706C	Would your household be willing to pay Tk. 950 ?	Yes .....1 No .....2 →	706G
706D	Would your household be willing to pay Tk. 650	Yes .....1 → No 2	706G
706E	Would your household be willing to pay Tk 550 ?	Yes .....1 → No 2	706G
706F	Would you be willing to pay anything? If yes , how much?	Not willing to pay anything .....00 Taka ..... ***[WRITE THE AMOUNT THE RESPONDENT WILLING TO PAY]***	
706G	**INTERVIEWER: CHECK QUESTIONS 706A to 706F AND WRITE THE AMOUNT THE RESPONDENT WILLING TO PAY**	Taka..... ☐☐☐	
707A	Suppose that you could receive normal delivery service from a doctor at the Smiling Sun clinic. Would your household pay Tk. 1500 for delivery service from a doctor at the Smiling Sun clinic?	Yes .....1 No .....2 → Don't want normal delivery at clinic .....3 →	707D 707A
707B	Would your household be willing to pay Tk. [1700…]?	Yes .....1 No .....2 →	707G
707C	Would your household be willing to pay Tk. [1900…]?	Yes .....1 No .....2 →	707G
707D	Would your household be willing to pay Tk.[1300]?	Yes .....1 → No 2	707G
707E	Would your household be willing to pay Tk 1100 ?	Yes .....1 → No 2	707G
707F	Would you be willing to pay anything?	Not willing to pay anything .....00 Taka..... ***[WRITE THE AMOUNT THE RESPONDENT WILLING TO PAY]***	
707G	***INTERVIEWER: CHECK QUESTIONS 707A TO 707F AND WRITE THE AMOUNT THE RESPONDENT WILLING TO PAY***	Taka..... ☐☐☐☐	
708A	Suppose that in an emergency you could receive a Caesarean section at the Smiling Sun clinic. Would your household pay Tk. 7500 for a Caesarean section at the Smiling Sun clinic?	Yes .....1 No .....2 →	708D
708B	Would your household be willing to pay Tk. [8500....]?	Yes .....1 No .....2 →	708G
708C	Would your household be willing to pay Tk. […9500]?	Yes .....1 No .....2 →	708G
708D	Would your household be willing to pay Tk.[6500 …]?	Yes .....1 → No 2	708G
708E	Would your household be willing to pay Tk.[5500 …]?	Yes .....1 → No 2	708G

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
708F	Would you be willing to pay anything?	Not willing to pay anything .....00 Taka..... ***[WRITE THE AMOUNT THE RESPONDENT WILLING TO PAY]***	
708G	**INTERVIEWER: CHECK QUESTIONS 708A TO 708F AND WRITE THE AMOUNT THE RESPONDENT WILLING TO PAY**	Taka..... ☐☐☐☐	
709	Did the woman's husband help answer questions 705-708F?	Yes .....1 No.....2	
710	RECORD THE TIME.	HOUR ..... ☐☐ MINUTES ..... ☐☐	

INTERVIEWER'S OBSERVATIONS
(To be filled in after completing interview)

Comments about Respondent:

_____
_____
_____
_____
_____

Comments on Specific Questions:

_____
_____
_____
_____

Any Other Comments:

_____
_____

SUPERVISOR'S OBSERVATIONS

_____

_____

_____

_____

NAME OF SUPERVISOR:_____
DATE:_____

EDITOR'S OBSERVATIONS

_____

_____

_____

_____

NAME OF SUPERVISOR: _____

DATE:_____

BANGLADESH SMILING SUN FRANCHISE PROGRAM (BSSFP) BASELINE SURVEY 2008 (Rural Component)

COMMUNITY QUESTIONNAIRE

ASSOCIATES FOR COMMUNITY AND POPULATION RESEARCH

3/10, Block A, Lalmatia
DHAKA-1207
TELEPHONE: 9114784, 8117926, FAX: 8153321
E-MAIL: acpr@bangla.net

MEASURE *Evaluation*
USA

BANGLADESH SMILING SUN FRANCHISE PROGRAM (BSSFP)
BASELINE SURVEY 2008

CODE ☐☐☐

Rural Component
Community Questionnaire

IDENTIFICATION

DIVISION _____ ☐
(BARISAL=1; CHITTAGONG=2; DHAKA=3; KHULNA=4; RAJSHAHI=5; SYLHET=6)

DISTRICT _____ ☐☐

UPAZILA/THANA _____ ☐☐

UNION/WARD _____

VILLAGE/MOHALLA/BLOCK _____

CLUSTER NUMBER ..... ☐☐☐

TYPE OF CLUSTER 1= OLD CATCHMENT AREA
2 = NEW CATCHMENT AREA ☐

DOMAIN: **URBAN**
01 = DHAKA CITY CORPORATION
02 = CHITTAGONG CITY CORPORATION
03 = REST CITY CORPORATION
04 = DISTRICT AND UPAZILA MUNICIPALITIES
05 = URBAN NON PROJECT

RURAL
06 DHAKA DIVISION
07 CHITTAGONG/SYLHET DIVISION
08 KHULNA BARISAL DIVISION
09 RAJSHAHI DIVISION
10 RURAL NON PROJECT ☐

DATE OF VISIT _____

DAY ..... ☐☐
MONTH ..... ☐☐
YEAR ..... ☐☐☐☐

RESULTS OF THE INTERVIEW:
[COMPLETED =1, INCOMPLETE = 2,
OTHER (SPECIFY) = 6]

RESULT ..... ☐

NAME OF INTERVIEWER _____

INTERVIEWER CODE ..... ☐☐

NAME OF PERSON INTERVIEWED

1 _____
2 _____
3 _____
4 _____
5 _____
6 _____

	POSITION	SEX
ELECTED OFFICIAL	01 ☐☐	MALE 1 ☐
RELIGIOUS LEADER	02 ☐☐	FEMALE 2 ☐
TEACHER/EDUCATOR	03 ☐☐	☐
DOCTOR/HEALTH OFFICIAL	04 ☐☐	☐
SERVICE HOLDER	05 ☐☐	☐
BUSINESS PERSON	06 ☐☐	☐
OTHER _____ (SPECIFY)	96 ☐☐	☐

BEGINNING TIME:

HOUR ..... ☐☐
MINUTES ..... ☐☐

INFORMED CONSENT

AFTER ASSEMBLING THE INFORMANTS, READ THE FOLLOWING GREETING:

Hello. My name is_____. We come from _____, a private research organization, located in Dhaka. To assist in the implementation of socio-development programs in the country, we conduct different types of surveys. We are carrying out a survey of health facilities and communities to get a picture of services available to the communities and to understand when and why people use health services. We would like to ask you some questions about your community and about sources of health care in it and around it as a way of better understanding how to serve the population. Please be assured that this discussion is strictly confidential, the information gathered will never be linked back to you and you may choose to stop the interview at any time. The survey usually takes between 20 and 35 minutes to complete. Whatever information you provide will be used for program evaluation purposes and will be seen only by staff and researchers at the organizations mentioned.

Participation in this survey is voluntary and you can choose not to answer any individual question or all of the questions. However, we hope that you will participate in this survey since your views are important. If you wish to know more about your rights as a participant in this study you may write the Institutional Review Board, CB # 7097, Medical Building 52, 105 Mason Farm Road, Chapel Hill, NC 27599-7097 U.S.A., or call, collect if necessary, 001-919-966-9347. If you have further questions regarding the nature of this study you may contact (ACPR 3/10, Block-A, Lalmatia, Dhaka-1207 or phone 8117926)

At this time, do you want to ask me anything about the survey?
May I begin the interview now?
Signature of interviewee: _____Date:_____

Signature of interviewer: _____Date:_____

1. Community information

No.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
100	PERMISSION RECEIVED TO CONTINUE?	YES ..... 1 NO 2	 Stop
100A	CHECK RURAL AREA ☐	URBAN AREA ☐ →	 107
101	How far is the Upazila Headquarters? IF LESS THAN ONE MILE/KILOMETER, RECORD "00". RECORD "97" IF DISTANCE IS MORE THAN 97 MILES/KILOMETERS.	MILE .....1 KILOMETER....2 ☐☐ Dont know……998	
102	Which is the most common type of transportation i.e, most of the people use to go to the Upazila Headquarters?	CAR/BUS/TEMPO..... 01 MOTORCYCLE ..... 02 MOTOR LAUNCH ..... 03 BICYCLE ..... 04 ANIMAL CART ..... 05 BOAT ..... 06 PATH..... 07 RICKSHAW/RICKSHAW VAN ..... 08 TRAIN..... 09 BABY TAXI..... 10 OTHER_____ 96 (SPECIFY)	
103	How long does it take to go to the Upazila Headquarters using the transportation (MENTIONED IN Q 102)?	MINUTES ..... ☐☐☐ DON'T KNOW 998	
104	How far is the District Headquarters? IF LESS THAN ONE MILE/KILOMETER, RECORD "00". RECORD "997" IF DISTANCE IS MORE THAN 97 MILES/KILOMETERS.	MILE .....1 KILOMETER....2 ☐☐ Dont know……998	
105	Which is the most common type of transportation i.e, most of the people use to go to the District Headquarters?	CAR/BUS/TEMPO..... 01 MOTORCYCLE ..... 02 MOTOR LAUNCH ..... 03 BICYCLE ..... 04 ANIMAL CART ..... 05 BOAT ..... 06 PATH..... 07 RICKSHAW/RICKSHAW VAN ..... 08 TRAIN..... 09 BABY TAXI..... 10 OTHER_____ 96 (SPECIFY)	
106	How long does it take to go to the District Headquarters using the transportation (MENTIONED IN Q 105)?	MINUTES ..... ☐☐☐ DON'T KNOW 998	

No.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
107	What is the main access route to this village/mohalla ?	ALL WEATHER ROAD/ PACCA ROAD/MOTORABLE...1 SEASONAL ROAD/EARTHEN....2 WATERWAY.....3 PATH .....4 OTHER_____ 6 (SPECIFY)	
108	What are the main economic activities in this area/village? (CIRCLE ALL MENTIONED)	AGRICULTURE ..... A LIVESTOCK ..... B FISHING ..... C COMMERCE ..... D MANUFACTURING ..... E DAY LABOR ..... F SERVICE ..... G OTHER_____X (SPECIFY)	
109	How far is the nearest (daily) market from this village? IF LESS THAN ONE MILE/KILOMETER, RECORD "00". RECORD "97" IF DISTANCE IS MORE THAN 97 MILES/KILOMETERS.	MILE..... 1 ☐☐ KILOMETER ... 2 Dont know……998	
109A	CHECK RURAL AREA ☐	URBAN AREA ☐	→ 111A
110	How far is the nearest weekly market from this village? IF LESS THAN ONE MILE/KILOMETER, RECORD "000". RECORD "97" IF DISTANCE IS MORE THAN 97 MILES/KILOMETERS. RECORD "98" IF DON'T KNOW.	MILE..... 1 ☐☐ KILOMETER….2 Dont know……998	
111A	Is there any telephone/ mobile phone service in this village?	YES.....1 NO 2	→ 112
111B	How far is the nearest telephone service (government or private) from this village? IF LESS THAN ONE KILOMETER/ MILE, RECORD "000". RECORD "97" IF DISTANCE IS MORE THAN 97 MILES/ KILOMETERS..	MILE..... 1 ☐☐ KILOMETER ... 2 Dont know……998	
112	Is electricity available here?	YES.....1 NO 2	
113	What is the primary source of water for the majority of people in this village?	PIPED .....01 PUBLIC TAP .....02 WELL .....03 TUBE WELL.....04 RIVER/STREAM/LAKE.....05 RAINWATER .....06 OTHER_____96	
114	In this village/mohalla, are there any of the following : MOTHER'S CLUB OR LADIES ASSOCIATIONS? GRAMEEN BANK ? VOLUNTARY ORGANIZATION ? BRAC INCOME GENERATING ACTVITIES PROSHIKA ASHA COTTAGE INDUSTRIES OF BSIC COOPERATIVE SOCIETY	YES NO MOTHERS CLUB .....1 2 GRAMEEN BANK .....1 2 V0 MEMBER.....1 2 BRAC .....1 2 PROSHIKA .....1 2 ASHA .....1 2 BSIC.....1 2	

	TMSS(Thengamara Mahila Samaj Kalayn Samity) OTHER NGO INCOME GENERATING ACTIVITIES	COOPERATIVE SOCIETY ..1 2 TMSS 1 2 NGOS 1 2	

No.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
115	Please tell me if the following things are in this village/mohalla. **IF NOT IN VILLAGE/MOHALLA ASK HOW FAR IS IT?**		
	A. How far is the madrasha from this village/mohalla?	MILE.....1 ☐☐ KILOMETER....2 Within village/ mahalla……..000 Dont know……..998	
	B. How far is the primary school?	MILE.....1 ☐☐ KILOMETER....2 Within village/ mahalla……..000 Dont know……..998	
	C. How far is the boy's high school from this viilage/mohalla?	Dont know……..998 MILE.....1 ☐☐ KILOMETER....2	
	D. How far is the girl's high school from this village/mohalla?	Dont know……..998 MILE.....1 ☐☐ KILOMETER....2	
	E. How far is the high school (co-education)?	Dont know……..998 MILE.....1 ☐☐ KILOMETER....2	
	F. How far is the post office from this village/mohalla?	Dont know……..998 MILE.....1 ☐☐ KILOMETER....2	
	G. How far is the cinema hall from this village/mohalla?	Dont know……..998 MILE.....1 ☐☐ KILOMETER....2 Dont know……..998	
117	Is there any shop in this village/mohalla, which sells family planning methods?	YES ..... 1 NO ..... 2 DON'T KNOW 8	
118	How far is it from here to the nearest place that provides : (IF NEAREST PLACE IS IN VILLAGE/MOHALLA, RECORD '000'. IF DON'T KNOW DISTANCE, RECORD '998'.		
	EPI	MILE 1 KILOMETER 2 ☐☐	
	ORS PACKET	MILE 1 KILOMETER 2 ☐☐	
	CONDOMS	MILE 1 KILOMETER 2 ☐☐	
	PILL	MILE 1 KILOMETER 2 ☐☐	
	INJECTABLES	MILE 1 KILOMETER 2 ☐☐	
	IUD	MILE 1 KILOMETER 2 ☐☐	
	VASECTOMY	MILE 1 KILOMETER 2 ☐☐	
	TUBECTOMY	MILE 1 KILOMETER 2 ☐☐	
	NORPLANT	MILE 1 KILOMETER 2 ☐☐	
	ANC	MILE 1 KILOMETER 2 ☐☐	

	Delivery	MILE 1 KILOMETER 2 ☐☐	
	PNC	MILE 1 KILOMETER 2 ☐☐	
	ARI	MILE 1 KILOMETER 2 ☐☐	
	OTHER HEALTH SERVICES (LCC)	MILE 1 KILOMETER 2 ☐☐	

2. Identification of Health Facilities

Now we would lke to ask you some questions about health facilities from which people in this village/mohalla can obtain services if they want. We would like for you to tell us about all of the facilities known by the general population of this village/mohalla that are of specific types. Please start with the ones that are closest to this village/mohalla.

201. HEALTH FACILITY	202. Where is the HEALTH FACILITY located?	203. What is HEALTH FACILITY's operating authority?	204. How far in miles/kilometers is the FACILITY located from the center of the village? IF LOCATED IN THE VILLAGE/ MOHALLA, RECORD '000'	206. When did FACILITY first open?	206A. For how long has HEALTH FACILITY been open?	207. Is HEALTH FACILITY in this Upazila?
01.A. HOSPITAL (nearest) NAME: _____ DON'T KNOW NONE----------	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01 NGO ..... 02 PRIVATE..... .03 RELIGIOUS..... 04 OTHER _____ 96 DON'T KNOW 98	MILE ..... KILOMETER...2 DK.....998	YEAR → 207 DK ..... 9998 → 206A	YEARS ... DK..... 98	YES..... 1 → 02A NO..... 2 → 01B
01.B. HOSPITAL (in this Upazila) NAME: _____ DON'T KNOW NONE	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01 NGO ..... 02 PRIVATE..... .03 RELIGIOUS..... 04 OTHER _____ 96 DON'T KNOW 98	MILE ..... KILOMETER...2 DK.....998	YEAR → 207 DK ..... 9998 → 206A	YEARS ... DK..... 98	
02.A. UPAZILA HEALTH COMPLEX (nearest) NAME: _____ DON'T KNOW NONE	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01	MILE ..... KILOMETER...2 DK.....998	YEAR → 207 DK ..... 9998 → 206A	YEARS ... DK..... 98	YES..... 1 → 03A NO..... 2 → 02B
02.B. UPAZILA HEALTH COMPLEX (in this Upazila) NAME: _____ DON'T KNOW NONE	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01	MILE ..... KILOMETER...2 DK.....998	YEAR → 207 DK ..... 9998 → 206A	YEARS .. DK..... 98	

03.A. FAMILY WELFARE CENTER (nearest) NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01	MILE ..... KILOMETER...2 DK.....998	YEAR → 207 DK ..... 9998 → 206A	YEARS .. DK..... 98	YES..... 1 → 04A NO..... 2 → 03B
03.B. FAMILY WELFARE CENTER (in this Upazila) NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01	MILE ..... KILOMETER...2 DK.....998	YEAR → 207 DK ..... 9998 → 206A	YEARS .. DK..... 98	
04.A. MATERNAL AND CHILD WELFARE CENTER (nearest) NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01	MILE ..... KILOMETER...2 DK.....998	YEAR → 207 DK ..... 9998 → 206A	YEARS .. DK..... 98	YES..... 1 → 05A NO..... 2 → 04B
04.B. MATERNAL AND CHILD WELFARE CENTER (in this Upazila) NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01	MILE ..... KILOMETER...2 DK.....998	YEAR → 207 DK ..... 9998 → 206A	YEARS .. DK..... 98	
05.A. SMILING SUN STATIC CLINIC (nearest) NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	SMILING SUN 05	MILE ..... KILOMETER...2 DK.....998	YEAR → 207 DK ..... 9998 → 206A	YEARS .. DK..... 98	YES..... 1 → 06A NO..... 2 → 05B
05.B. SMILING SUN STATIC CLINIC (in this Upazila) NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	SMILING SUN 05	MILE ..... KILOMETER...2 DK.....998	YEAR → 207 DK ..... 9998 → 206A	YEARS .. DK..... 98	

List all of the PRIVATE CLINICS that are available for people in this village/mohalla to use.

201. HEALTH FACILITY	202. Where is the HEALTH FACILITY located?	203. What is HEALTH FACILITY's operating authority?	204. How far in miles/kilometers is the FACILITY located from the center of the village? IF LOCATED IN THE VILLAGE/ MOHALLA, RECORD '000'	206. When did this facility first open?	206A. For how long has HEALTH FACILITY been open?	207. Any others ?
06. A. PRIVATE CLINIC (nearest) NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	PRIVATE ..... 03 RELIGIOUS ..... 04 OTHER _____ 96 DON'T KNOW 98	MILE ..... KILOMETER ... DK.....998	YEAR → 207 DK ..... 9998 → 206A	YEARS .. DK..... 98	YES..... 1 → 06B NO..... 2 → 07A
06.B. PRIVATE CLINIC NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	PRIVATE ..... 03 RELIGIOUS ..... 04 OTHER _____ 96 DON'T KNOW 98	MILE ..... KILOMETER ... DK.....998	YEAR → 207 DK ..... 9998 → 206A	YEARS .. DK..... 98	YES..... 1 → 06C NO..... 2 → 07A
06.C. PRIVATE CLINIC NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	PRIVATE ..... 03 RELIGIOUS ..... 04 OTHER _____ 96 DON'T KNOW 98	MILE ..... KILOMETER ... DK.....998	YEAR → 207 DK ..... 9998 → 206A	YEARS .. DK..... 98	YES..... 1 → 06D NO..... 2 → 07A
06.D. PRIVATE CLINIC NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	PRIVATE ..... 03 RELIGIOUS ..... 04 OTHER _____ 96 DON'T KNOW 98	MILE ..... KILOMETER ... DK.....998	YEAR → 207 DK ..... 9998 → 206A	YEARS .. DK..... 98	

List all of the OTHER NGO CLINICS (NON- SMILING SUN) that are available for people in this village/mohalla to use.

201. HEALTH FACILITY	202. Where is the HEALTH FACILITY located?	203. What is HEALTH FACILITY's operating authority?	204. How far in miles/kilometers is the FACILITY located from the center of the village? IF LOCATED IN THE VILLAGE/ MOHALLA, RECORD '000'	206. When did this facility first open?	206A. For how long has HEALTH FACILITY been open?	207. Any others ?
07.A. NGO CLINIC (nearest) NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	NGO 02	MILE .....1 KILOMETER ...2 ☐☐ DK 998	YEAR ... ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	YES..... 1 → 07B NO..... 2 → 08A
07.B. NGO CLINIC NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	NGO 02	MILE .....1 KILOMETER ...2 ☐☐ DK 998	YEAR ... ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	YES..... 1 → 07C NO..... 2 → 08A
07.C.NGO CLINIC NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	NGO 02	MILE .....1 KILOMETER ...2 ☐☐ DK 998	YEAR ... ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	YES..... 1 → 07D NO..... 2 → 08A
07.D. NGO CLINIC NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	NGO 02	MILE .....1 KILOMETER ...2 ☐☐ DK 998	YEAR ... ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	

List all of the COMMUNITY CLINICS that are available for people in this village/mohalla to use.

201. HEALTH FACILITY	202. Where is the HEALTH FACILITY located?	203. What is HEALTH FACILITY's operating authority?	204. How far in miles/kilometers is the FACILITY located from the center of the village? IF LOCATED IN THE VILLAGE/ MOHALLA, RECORD '000'	206. When did this facility first open?	206A. For how long has HEALTH FACILITY been open?	207. Any others ?
08.A. COMMUNITY CLINIC (nearest) NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01	MILE .....1 KILOMETER ...2 ☐☐ DK 998	YEAR ... ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	YES..... 1 → 08B NO..... 2 → 09A
08.B. COMMUNITY CLINIC NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01	MILE .....1 KILOMETER ...2 ☐☐ DK 998	YEAR ... ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	YES..... 1 → 08C NO..... 2 → 09A
08.C. COMMUNITY CLINIC NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01	MILE .....1 KILOMETER ...2 ☐☐ DK 998	YEAR ... ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	YES..... 1 → 08D NO..... 2 → 09A
08.D. COMMUNITY CLINIC NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01	MILE .....1 KILOMETER ...2 ☐☐ DK 998	YEAR ... ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	

List all of the RURAL DISPENSARIES / UNION SUB-CENTER that are **available** for people in this village/mohalla to use.

201. HEALTH FACILITY	202. Where is the HEALTH FACILITY located?	203. What is HEALTH FACILITY's operating authority?	204. How far in miles/kilometers is the FACILITY located from the center of the village? IF LOCATED IN THE VILLAGE/ MOHALLA, RECORD '000'	206. When did this facility first open?	206A. For how long has HEALTH FACILITY been open?	207. Any others ?
09.A. RURAL DISPENSARY / UNION SUB-CENTER (nearest) NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01	MILE .....1 ☐☐ KILOMETER ...2 DK 998	YEAR ... ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	YES..... 1 → 09B NO..... 2 → 10A
09.B. RURAL DISPENSARY/ UNION SUB-CENTER NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01	MILE .....1 ☐☐ KILOMETER ...2 DK 998	YEAR ... ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	YES..... 1 → 09C NO..... 2 → 10A
09.C. RURAL DISPENSARY/ UNION SUB-CENTER NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01	MILE .....1 ☐☐ KILOMETER ...2 DK 998	YEAR ... ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	YES..... 1 → 09D NO..... 2 → 10A
09.D. RURAL DISPENSARY/ UNION SUB-CENTER NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT.... 01	MILE .....1 ☐☐ KILOMETER ...2 DK 998	YEAR ... ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	

List all of the SATELLITE CLINICS that provide services to individuals in this village/mohalla.

201. HEALTH FACILITY	202. Where is the HEALTH FACILITY located?	203. What is HEALTH FACILITY's operating authority?	204. How far in miles/kilometers is the FACILITY located from the center of the village? IF LOCATED IN THE VILLAGE/ MOHALLA, RECORD '000'	206. When did this facility first open?	206A. For how long has HEALTH FACILITY been open?	207. Any others ?
10. A. SATELLITE CLINIC (nearest) NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT... .01 NGO ..... 02 PRIVATE..... 03 RELIGIOUS..... .04 SMILING SUN .... 05 OTHER _____ 96 DON'T KNOW 98	MILE .....1 KILOMETER ...2 ☐☐ DK.....998	YEAR ... ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	YES..... 1 → 10B NO..... 2 → 300
10.B. SATELLITE CLINIC NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT... .01 NGO ..... 02 PRIVATE..... 03 RELIGIOUS..... .04 SMILING SUN .... 05 OTHER _____ 96 DON'T KNOW 98	MILE .....1 KILOMETER ...2 ☐☐ DK.....998	YEAR ... ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	YES..... 1 → 10C NO..... 2 → 300
10.C. SATELLITE CLINIC NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT... .01 NGO ..... 02 PRIVATE..... 03 RELIGIOUS..... .04 SMILING SUN .... 05 OTHER _____ 96 DON'T KNOW 98	MILE .....1 KILOMETER ...2 ☐☐ DK.....998	YEAR .. ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	YES..... 1 → 10D NO..... 2 → 300
10.D. SATELLITE CLINIC NAME: _____ DON'T KNOW	DISTRICT: _____ UPAZILA: _____ LOCATION: _____	GOVERNMENT... .01 NGO ..... 02 PRIVATE..... 03 RELIGIOUS..... .04 SMILING SUN .... 05 OTHER _____ 96 DON'T KNOW 98	MILE .....1 KILOMETER ...2 ☐☐ DK.....998	YEAR ... ☐☐☐☐ → 207 DK ..... 9998 → 206A	YEARS ..... ☐☐ DK..... 98	

3: List of the Health and Family Planning Workers. Please provide us the name of all health and family planning fieldworkers working in this cluster/village/mohalla

300.Name of the fieldworker	301. What is the title/position of this fieldworker?	302. Under what authority does this fieldworker work ?	303: Does he/she live in this locality?	304. Where does he/she live?	305. What services does he/she provide?
01. NAME: _____	FWA ..... 1 HEALTH ASSISTANT ..... 2 COMMUNITY MOBILIZER/ Service Promoter ..... 3 OTHER_____ 6 DON'T KNOW 8	GOVERNMENT ... .01 NGO ..... 02 PRIVATE ..... 03 RELIGIOUS ..... .04 SMILING SUN .... 05 OTHER _____ 96 DON'T KNOW.....98	YES ..... 1 (GO TO 305) ← NO 2	DISTRICT: UPAZILA: UNION: VILLAGE:	HEALTH ..... 1 FAMILY PLANNING .. 2 BOTH ..... 3 DON'T KNOW..... 8
02. NAME: _____	FWA ..... 1 HEALTH ASSISTANT ..... 2 COMMUNITY MOBILIZER/ Service Promoter ..... 3 OTHER_____ 6 DON'T KNOW 8	GOVERNMENT ... .01 NGO ..... 02 PRIVATE ..... 03 RELIGIOUS ..... .04 SMILING SUN .... 05 OTHER _____ 96 DON'T KNOW.....98	YES ..... 1 (GO TO 305) ← NO 2	DISTRICT: UPAZILA: UNION: VILLAGE:	HEALTH ..... 1 FAMILY PLANNING .. 2 BOTH ..... 3 DON'T KNOW..... 8
03. NAME: _____	FWA ..... 1 HEALTH ASSISTANT ..... 2 COMMUNITY MOBILIZER/ Service Promoter ..... 3 OTHER_____ 6 DON'T KNOW 8	GOVERNMENT ... .01 NGO ..... 02 PRIVATE ..... 03 RELIGIOUS ..... .04 SMILING SUN .... 05 OTHER _____ 96 DON'T KNOW.....98	YES ..... 1 (GO TO 305) ← NO 2	DISTRICT: UPAZILA: UNION: VILLAGE:	HEALTH ..... 1 FAMILY PLANNING .. 2 BOTH ..... 3 DON'T KNOW..... 8
04. NAME: _____	FWA ..... 1 HEALTH ASSISTANT ..... 2 COMMUNITY MOBILIZER/ Service Promoter ..... 3 OTHER_____ 6 DON'T KNOW 8	GOVERNMENT ... .01 NGO ..... 02 PRIVATE ..... 03 RELIGIOUS ..... .04 SMILING SUN .... 05 OTHER _____ 96 DON'T KNOW.....98	YES ..... 1 (GO TO 305) ← NO 2	DISTRICT: UPAZILA: UNION: VILLAGE:	HEALTH ..... 1 FAMILY PLANNING .. 2 BOTH ..... 3 DON'T KNOW..... 8
05. NAME: _____	FWA ..... 1 HEALTH ASSISTANT ..... 2 COMMUNITY MOBILIZER/ Service Promoter ..... 3 OTHER_____ 6 DON'T KNOW 8	GOVERNMENT ... .01 NGO ..... 02 PRIVATE ..... 03 RELIGIOUS ..... .04 SMILING SUN .... 05 OTHER _____ 96 DON'T KNOW.....98	YES ..... 1 (GO TO 305) ← NO 2	DISTRICT: UPAZILA: UNION: VILLAGE:	HEALTH ..... 1 FAMILY PLANNING .. 2 BOTH ..... 3 DON'T KNOW..... 8

4: List Depotholders/ community service provider(CSP)

Please tell us about any depotholders who may work in this village, that is, a person who sells family planning or ORS from his or her house.

400. Name of the depotholder	401. Under what authority does this depotholder work ?	402: Does he/she live in this locality?	403. Where does he/she live?	404. What services does he/she provide?
01. NAME: _____	GOVERNMENT... .01 NGO ..... 02 PRIVATE ..... 03 RELIGIOUS..... .04 SMILING SUN .... 05 OTHER _____ 96 DON'T KNOW 98	YES.....1 (GO TO 404) ← NO 2	DISTRICT: UPAZILA: UNION: VILLAGE:	HEALTH ..... 1 FAMILY PLANNING ..... 2 BOTH..... 3 DON'T KNOW 8
02. NAME: _____	GOVERNMENT... .01 NGO ..... 02 PRIVATE ..... 03 RELIGIOUS..... .04 SMILING SUN .... 05 OTHER _____ 96 DON'T KNOW 98	YES.....1 (GO TO 404) ← NO 2	DISTRICT: UPAZILA: UNION: VILLAGE:	HEALTH ..... 1 FAMILY PLANNING ..... 2 BOTH..... 3 DON'T KNOW 8
03. NAME: _____	GOVERNMENT... .01 NGO ..... 02 PRIVATE ..... 03 RELIGIOUS..... .04 SMILING SUN .... 05 OTHER _____ 96 DON'T KNOW 98	YES.....1 (GO TO 404) ← NO 2	DISTRICT: UPAZILA: UNION: VILLAGE:	HEALTH ..... 1 FAMILY PLANNING ..... 2 BOTH..... 3 DON'T KNOW 8

5: Availability of Doctors (allopathic, homeopathic) and Pharmacies

Please tell us about the doctors and pharmacies working in this village/mohalla.

No.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
501	Are there any allopathic/MBBS doctors in this village/mohalla?	YES ..... 1 NO ..... 2 →	503
502	How many allopathic/MBBS doctors are in this village/mohalla?	ONE ..... 1 2-5 ..... 2 MORE THAN 5 ..... 3 DON'T KNOW 8	
503	How far away is the nearest allopathic/MBBS doctor?	MILE ..... 1 KILOMETER ..... 2 DK ..... 98 ☐☐ ENTER 'OO' IF IN THIS VILLAGE/ MOHALLA	
504	Are there any Village doctor in this village/mohalla?	YES ..... 1 NO ..... 2 →	506
505	How many Village doctors are in this village/mohalla?	ONE ..... 1 2-5 ..... 2 MORE THAN 5 ..... 3 DON'T KNOW 8	
506	How far away is the nearest Village doctor?	MILE ..... 1 KILOMETER ..... 2 DK ..... 98 ☐☐ ENTER 'OO' IF IN THIS VILLAGE/ MOHALLA	
507	Are there any homeopathic doctors in this village/mohalla?	YES ..... 1 NO ..... 2 →	509
508	How many homeopathic doctors are in this village/mohalla?	ONE ..... 1 2-5 ..... 2 MORE THAN 5 ..... 3 DON'T KNOW 8	
509	How far away is the nearest homeopathic doctor?	MILE ..... 1 KILOMETER ..... 2 DK ..... 98 ☐☐ ENTER 'OO' IF IN THIS VILLAGE/ MOHALLA	
510	Are there any ayurvedic/unani doctors in this village/mohalla?	YES ..... 1 NO ..... 2 →	512
511	How many ayurvedic/unani doctors are in this village/mohalla?	ONE ..... 1 2-5 ..... 2 MORE THAN 5 ..... 3 DON'T KNOW 8	
512	How far away is the nearest ayurvedic/unani doctor?	MILE ..... 1 KILOMETER ..... 2 DK ..... 98 ☐☐ ENTER 'OO' IF IN THIS VILLAGE/ MOHALLA	
513	Are there any pharmacies in this village/mohalla?	YES ..... 1 NO ..... 2 →	515
514	How many pharmacies are in this village/mohalla?	ONE ..... 1 2-5 ..... 2 MORE THAN 5 ..... 3 DON'T KNOW 8	
515	How far away is the nearest pharmacy?	MILE ..... 1 KILOMETER ..... 2 DK ..... 98 ☐☐ ENTER 'OO' IF IN THIS VILLAGE/ MOHALLA	

6: Other Programmes Provided by NGOs:

No.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
601	Other than ESP, do the _____ have any other programs in the area? **(NAME OF SMILING SUN CLINIC OPERATING NGO)**	YES ..... NO ..... →	602

601a. In what area those programs with? (Tick the appropriate box and ask questions 601B & 601C)	601b. Who is funding?	601C. Since which year?
1.Health Yes….1 No……2	Govt. .....1 Others _____ 2 (Specify)	YEARS ☐☐☐☐
2.Nutrition Yes….1 No……2	Govt. .....1 Others _____ 2 (Specify)	YEARS ☐☐☐☐
3.Sanitation Yes….1 No……2	Govt. .....1 Others _____ 2 (Specify)	YEARS ☐☐☐☐
4.Microcredit Yes….1 No……2	Govt. .....1 Others _____ 2 (Specify)	YEARS ☐☐☐☐
5.Others (Specify)…… Yes….1 No……2	Govt. .....1 Others _____ 2 (Specify)	YEARS ☐☐☐☐

602	Is any other organization other than _____ **(NAME OF SMILING SUN CLINIC OPERATING NGO)** working in the area?	YES ..... NO ..... →	603a

602B. What type of programs do they implement? (Tick the appropriate box and ask questions 602A & 603)	602A. What type of organizations is this?	603. Since which year?
1.Health Yes….1 No……2	Govt. .....1 Other NGOs 2	YEARS ☐☐☐☐
2.Nutrition Yes….1 No……2	Govt. .....1 Other NGOs 2	YEARS ☐☐☐☐
3. Sanitation Yes….1 No……2	Govt. .....1 Other NGOs 2	YEARS ☐☐☐☐
4. Microcredit Yes….1 No……2	Govt. .....1 Other NGOs 2	YEARS ☐☐☐☐
5. Others_____ (Specify) Yes….1 No……2	Govt. .....1 Other NGOs 2	YEARS ☐☐☐☐

603a. ENDING TIME	HOUR..... ☐☐ ..... MINUTES .... ☐☐ .....