

Serbia

Monitoring the situation of children and women



Multiple Indicator Cluster Survey 2005



Statistical Office
of the Republic of Serbia



Strategic Marketing



United Nations
Children's Fund



SERBIA MULTIPLE INDICATOR CLUSTER SURVEY 2005

**MONITORING THE SITUATION
OF CHILDREN AND WOMEN**

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For publisher

Ann-Lis Svensson

UNICEF Area Representative

for Serbia, Croatia and Montenegro

Editor

Oliver Petrovic

UNICEF Belgrade

Programme Specialist

Proofreading

Rowland Palairet

Design

Rastko Toholj

Cover photo

Zoran Jovanovic Maccak

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Contributors to the report

MICS Global team

Oliver Petrovic

Ivana Bjelic

Dragisa Bjeloglav

Dragana Djokovic-Papic

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Contents

LIST OF ABBREVIATIONS	7	CHILD DEVELOPMENT	52
SUMMARY TABLE OF FINDINGS	9	EDUCATION	54
EXECUTIVE SUMMARY	13	Pre-School Attendance and School Readiness	54
INTRODUCTION	19	Primary and Secondary School Participation	55
Background	19	Adult Literacy	56
Survey Objectives	19	CHILD PROTECTION	57
SAMPLE AND SURVEY METHODOLOGY	21	Birth Registration	57
Sample Design	21	Child Labour	57
Questionnaires	22	Child Discipline	58
Training and Fieldwork	23	Early Marriage	59
Data Processing	23	Domestic Violence	60
SAMPLE COVERAGE AND THE CHARACTERISTICS OF HOUSEHOLDS AND RESPONDENTS	24	Child Disability	60
Sample Coverage	24	HIV/AIDS AND SEXUAL BEHAVIOUR	61
Characteristics of Households	24	Knowledge of HIV Transmission and Condom Use	61
Characteristics of Respondents	26	Sexual Behaviour Related to HIV Transmission	64
CHILD MORTALITY	28	List of References	65
NUTRITION	30	APPENDICES	
Nutritional Status	30	Appendix A	
Breastfeeding	33	SAMPLE DESIGN	69
Low Birth Weight	37	Appendix B	
CHILD HEALTH	38	LIST OF PERSONNEL INVOLVED IN THE SURVEY	74
Immunization	38	Appendix C	
Oral Rehydration Treatment	40	ESTIMATES OF SAMPLING ERRORS	75
Care Seeking and Antibiotic Treatment of Pneumonia	41	Appendix D	
Solid Fuel Use	42	DATA QUALITY TABLES	86
ENVIRONMENT	44	Appendix E	
Water and Sanitation	44	MICS INDICATORS: NUMERATORS AND DENOMINATORS	97
Security of Tenure and Durability of Housing	47	Appendix F	
REPRODUCTIVE HEALTH	48	QUESTIONNAIRES	105
Contraception	48		
Unmet Need	49		
Antenatal Care	50		
Assistance at Delivery	51		

List of Tables

TABLE HH.1	Results of household and individual interviews	143	TABLE RH.4	Antenatal care	180
TABLE HH.2	Household age distribution by sex.	144	TABLE RH.5	Assistance during delivery	181
TABLE HH.3	Household composition	145	TABLE CD.1	Family support for learning	182
TABLE HH.4	Women's background characteristics	146	TABLE CD.2	Learning materials.	183
TABLE HH.5	Children's background characteristics	147	TABLE CD.3	Children left alone or with other children	184
TABLE CM.1	Child mortality	148	TABLE ED.1	Early childhood education	185
TABLE CM.2	Children ever born and proportion dead.	149	TABLE ED.2	Primary school entry	186
TABLE NU.1	Child malnourishment	150	TABLE ED.3	Primary school net attendance ratio.	187
TABLE NU.2	Initial breastfeeding	151	TABLE ED.4	Secondary school net attendance ratio.	188
TABLE NU.3	Breastfeeding	152	TABLE ED.4w	Secondary school age children attending primary school	189
TABLE NU.4	Adequately fed infants	153	TABLE ED.5	Children reaching grade 5	190
TABLE NU.5	Low birth weight infants	154	TABLE ED.6	Primary school completion and transition to secondary education.	191
TABLE CH.1	Vaccinations in first year of life	155	TABLE ED.7	Education gender parity	192
TABLE CH.1a	Vaccinations in first year of life (BCG vaccine calculated to mother's report only).	156	TABLE ED.8	Adult literacy	193
TABLE CH.2	Vaccinations by background characteristics	157	TABLE CP.1	Birth registration	194
TABLE CH.3	Oral rehydration treatment	158	TABLE CP.2	Child labour	195
TABLE CH.4	Home management of diarrhoea	160	TABLE CP.3	Labourer students and student labourers	196
TABLE CH.5	Care seeking for suspected pneumonia	162	TABLE CP.4	Child discipline	197
TABLE CH.6	Antibiotic treatment of pneumonia	163	TABLE CP.5	Early marriage	198
TABLE CH.6a	Knowledge of the two danger signs of pneumonia	164	TABLE CP.6	Spousal age difference	199
TABLE CH.7	Solid fuel use	165	TABLE CP.7	Attitudes toward domestic violence	200
TABLE CH.8	Solid fuel use by type of stove or fire	166	TABLE CP.8	Child disability	201
TABLE EN.1	Use of improved water sources	167	TABLE HA.1	Knowledge of preventing HIV transmission	202
TABLE EN.2	Household water treatment	168	TABLE HA.2	Identifying misconceptions about HIV/AIDS	203
TABLE EN.3	Time to source of water	169	TABLE HA.3	Comprehensive knowledge of HIV/AIDS transmission	204
TABLE EN.4	Person collecting water	170	TABLE HA.4	Knowledge of mother-to-child HIV transmission	205
TABLE EN.5	Use of sanitary means of excreta disposal	171	TABLE HA.5	Attitudes toward people living with HIV/AIDS	206
TABLE EN.6	Disposal of child's faeces	172	TABLE HA.6	Knowledge of a facility for HIV testing	207
TABLE EN.7	Use of improved water sources and improved sanitation.	173	TABLE HA.7	HIV testing and counselling coverage during antenatal care	208
TABLE EN.8	Security of tenure	174	TABLE HA.8	Sexual behaviour that increases risk of HIV infection.	209
TABLE EN.9	Durability of housing	175	TABLE HA.9	Condom use at last high-risk sexual encounter	210
TABLE EN.10	Slum housing	176			
TABLE RH.1	Use of contraception	177			
TABLE RH.2	Unmet need for contraception.	178			
TABLE RH.3	Antenatal care provider	179			

List of Figures

FIGURE HH.1	Age and sex distribution of household population, Serbia, 2005	25
FIGURE NU.1	Percentage of children under-5 who are undernourished, Serbia, 2005	31
FIGURE NU.1a	Distribution of weight-for-age among children under five, Serbia, 2005	32
FIGURE NU.1b	Distribution of height-for-age among children under five, Serbia, 2005	32
FIGURE NU.1c	Distribution of weight-for-height among children under five, Serbia, 2005	32
FIGURE NU.1d	Prevalence of malnutrition in children under five, Serbia, 1996–2005	33
FIGURE NU.2	Percentage of mothers who started breastfeeding within one hour and within one day of birth, Serbia, 2005	34
FIGURE NU.3	Infant feeding patterns by age: Percentage distribution of children under the age of 3 by feeding pattern by age group, Serbia, 2005	35
FIGURE NU.3a	Progress in major breastfeeding indicators, Serbia, 1996–2005	36
FIGURE CH.1	Percentage of children aged 18–29 months who received the recommended vaccination by the age of 12 months (by 18 months in case of MMR).	39
FIGURE EN.1	Percentage distribution of household members by source of drinking water, Serbia, 2005	45
FIGURE RH.1	Use of contraception, modern and traditional contraceptive methods, Serbia, 2005	49
FIGURE ED.1	Percentage of children aged 36–59 months who are attending some form of organised early childhood education program, Serbia, 2005	54
FIGURE HA.1	Percentage of women who have comprehensive knowledge of HIV/AIDS transmission, Serbia, 2005	62
FIGURE HA.2	Sexual behaviour that increases risk of HIV infection, Serbia, 2005	64

List of Abbreviations

AIDS	Acquired Immune Deficiency Syndrome
BCG	Bacillus-Cereus-Geuerin (Tuberculosis)
CSPro	Census and Survey Processing System
DPT	Diphtheria Pertussis Tetanus
EPI	Expanded Programme on Immunization
GPI	Gender Parity Index
HIV	Human Immunodeficiency Virus
IPV	Inactivated Polio Vaccine
IUD	Intrauterine Device
LAM	Lactational Amenorrhea Method
MDG	Millennium Development Goals
MICS	Multiple Indicator Cluster Survey
MMR	Measles, Mumps, and Rubella
MoH	Ministry of Health
NAR	Net Attendance Rate
NGO	Non Governmental Organization
ORS	Oral Rehydration Solution
ORT	Oral Rehydration Therapy
SPSS	Statistical Package for Social Sciences
SRSWoR	Simple Random Sampling Without Replacement
STI	Sexually Transmitted Infection
UNAIDS	United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNGASS	United Nations General Assembly Special Session on HIV/AIDS
UNICEF	United Nations Children's Fund
WFFC	World Fit For Children
WHO	World Health Organization

Summary Table of Findings

Multiple Indicator Cluster Surveys (MICS) and Millennium Development Goals (MDG) Indicators, Serbia, 2005

TOPIC	MICS INDICATOR NUMBER	MDG INDICATOR NUMBER	INDICATOR	VALUE	
CHILD MORTALITY					
Child mortality ¹	1	13	Under-five mortality rate – Roma in Roma settlements	28	per thousand
	2	14	Infant mortality rate – Roma in Roma settlements	25	per thousand
NUTRITION					
Nutritional status	6	4	Underweight prevalence	1.6	percent
	7		Stunting prevalence	5.9	percent
	8		Wasting prevalence	3.3	percent
Breastfeeding	45		Timely initiation of breastfeeding	17.4	percent
	15		Exclusive breastfeeding rate	15.1	percent
	16		Continued breastfeeding rate		
			at 12–15 months	22.4	percent
			at 20–23 months	8.2	percent
	17		Timely complementary feeding rate	39.0	percent
	18		Frequency of complementary feeding	33.5	percent
	19		Adequately fed infants	24.6	percent
Low birth weight	9		Low birth weight infants	5.0	percent
	10		Infants weighed at birth	97.9	percent
CHILD HEALTH					
Immunization	25		Tuberculosis immunization coverage	74.1	percent
	26		Polio immunization coverage	88.2	percent
	27		DPT immunization coverage	89.7	percent
	28	15	Measles (MMR) immunization coverage	84.1	percent
	31		Fully immunized children	43.6	percent

¹ The module on child mortality was used only for Roma living in Roma settlements

TOPIC	MICS INDICATOR NUMBER	MDG INDICATOR NUMBER	INDICATOR	VALUE	
Care of illness	33		Use of oral rehydration therapy (ORT)	94.0	percent
	34		Home management of diarrhoea	26.2	percent
	35		Received ORT or increased fluids, and continued feeding	71.0	percent
	23		Care seeking for suspected pneumonia	92.5	percent
	22		Antibiotic treatment of suspected pneumonia	56.8	percent
Solid fuel use	24	29	Solid fuels	33.5	percent
ENVIRONMENT					
Water and Sanitation	11	30	Use of improved drinking water sources	98.9	percent
	13		Water treatment	4.5	percent
	12	31	Use of improved sanitation facilities	99.8	percent
	14		Disposal of child's faeces	36.7	percent
Security of tenure and durability of housing	93		Security of tenure	16.5	percent
	94		Durability of housing	0.4	percent
	95	32	Slum household	18.9	percent
REPRODUCTIVE HEALTH					
Contraception and unmet need	21	19c	Contraceptive prevalence	41.2	percent
	98		Unmet need for family planning	28.5	percent
	99		Demand satisfied for family planning	59.1	percent
Maternal and newborn health	20		Antenatal care	98.2	percent
	44		Content of antenatal care	99.0	percent
			Blood test taken	95.6	percent
			Blood pressure measured	95.5	percent
			Urine specimen taken	95.4	percent
			Weight measured	93.5	percent
	4	17	Skilled attendant at delivery	99.0	percent
	5		Institutional deliveries	98.8	percent
CHILD DEVELOPMENT					
Child development	46		Support for learning	84.4	percent
	47		Father's support for learning	70.0	percent
	48		Support for learning: children's books	79.3	percent
	49		Support for learning: non-children's books	75.7	percent
	50		Support for learning: materials for play	20.9	percent
	51		Non-adult care	8.8	percent

TOPIC	MICS INDICATOR NUMBER	MDG INDICATOR NUMBER	INDICATOR	VALUE
EDUCATION				
Education	52		Pre-school attendance	32.5 percent
	53		School readiness	89.0 percent
	54		Net intake rate in primary education	93.6 percent
	55	6	Net primary school attendance rate	98.4 percent
	56		Net secondary school attendance rate	83.8 percent
	57	7	Children reaching grade five	99.8 percent
	58		Transition rate to secondary school	97.1 percent
	59	7b	Primary completion rate	90.7 percent
	61	9	Gender parity index	
			primary school	1.00 ratio
			secondary school	1.08 ratio
Literacy	60	8	Adult literacy rate	95.6 percent
CHILD PROTECTION				
Birth registration	62		Birth registration	98.9 percent
Child labour	71		Child labour	4.4 percent
	72		Labourer students	93.4 percent
	73		Student labourers	4.5 percent
Child discipline	74		Child discipline	
			Any psychological/physical punishment	72.7 percent
Early marriage	67		Marriage before age 15	0.8 percent
			Marriage before age 18	8.4 percent
	68		Young women aged 15–19 currently married/in union	5.8 percent
	69		Spousal age difference	
			Women aged 15–19	26.3 percent
			Women aged 20–24	13.7 percent
Domestic violence	100		Attitudes towards domestic violence	6.2 percent
Disability	101		Child disability	11.3 percent

TOPIC	MICS INDICATOR NUMBER	MDG INDICATOR NUMBER	INDICATOR	VALUE	
HIV/AIDS AND SEXUAL BEHAVIOUR					
HIV/AIDS knowledge and attitudes	82	19b	Comprehensive knowledge about HIV prevention among young people	42.3	percent
	89		Knowledge of mother-to-child transmission of HIV	57.0	percent
	86		Attitude towards people with HIV/AIDS	36.5	percent
	87		Women who know where to be tested for HIV	69.4	percent
	88		Women who have been tested for HIV	7.0	percent
	90		Counselling coverage for the prevention of mother-to-child transmission of HIV	14.3	percent
	91		Testing coverage for the prevention of mother-to-child transmission of HIV	8.9	percent
Sexual behaviour	84		Age at first sex among young people	1.1	percent
	92		Age-mixing among sexual partners	7.4	percent
	83	19a	Condom use with non-regular partners	74.4	percent
	85		Higher risk sex in the last year	60.8	percent

The Serbia Multiple Indicator Survey 2005 is a nationally representative sample survey of households, women and children. The results pertain to October 2005 – January 2006, when the fieldwork was conducted.

Child mortality

- The infant mortality rate among the Roma children living in Roma settlements is estimated at 25 per thousand live births, while the probability of dying under the age of 5 is around 28 per thousand live births (almost three times higher than national average).

whereas all infants should still be breastfed exclusively at this age. The percentage of exclusively breastfed children aged under six months is significantly lower, at 15 percent.

- Only every sixth child was breastfed for the first time within one hour of birth. The practice is much less present in Belgrade (9 percent) than in West and South-East Serbia (23 and 25 percent, respectively). 67 percent of children in Serbia started breastfeeding within one day of birth.
- Between the ages of 6–9 months, 39 percent of children are receiving breast milk and solid or semi-solid foods. By the ages of 12–15

EXECUTIVE SUMMARY

Nutritional status

- 15 percent of children under the age of five are overweight.
- The prevalence of child malnourishment (moderate and severe) in Serbia is relatively low: the prevalence of underweight is nearly 2 percent, 6 percent of children are stunted and 3 percent are wasted.
- The opposite nutritional status is found among Roma children living in Roma settlements – while prevalence of malnourishment is several times higher than the national average (nearly 8 percent of children are underweight and 20 percent stunted), the prevalence of obesity is over two times lower (nearly 7 percent of Roma children are moderately or severely obese).

months and 20–23 months respectively, 22 and 8 percent of children are still being breastfed. Roma children from Roma settlements are more likely to continue to be breastfed than the entire population, since 60 percent of Roma children by age 12–15 months and 34 percent by age 20–23 months are still breastfed.

Low birth weight

- Out of 98 percent of weighed live births, 5 percent were below 2500 grams. In the Roma population, only 90 percent were weighed, and 9 percent of those live births were underweight.

Immunization

- Roughly two thirds of children had their own personal health card recording their vaccines.
- Only 74 percent of children aged 18–29 months received a BCG vaccination in the first year

Breastfeeding

- Approximately 23 percent of children aged under four months were exclusively breastfed,

of life. This result is quite unexpected and is most probably due to the lack of information on the BCG vaccination from their vaccination cards, since according to the mother's report, the BCG vaccine was received by nearly all children aged 18–29 months.

- All three doses of DPT and oral polio were given to 90 percent and 88 percent, respectively. 84 percent of children aged 18–29 months received a measles vaccine in the form of the measles-mumps-rubella (MMR) vaccine by the age of 18 months.
- Only 44 percent of children had all eight recommended vaccinations according to the national immunization schedule. The low coverage is mostly due to the low immunization coverage against tuberculosis. The figure is not realistic and mainly shows that personal immunization records are not a reliable source of information.
- There are significant territorial differences in immunization coverage – the lowest percentage of fully immunized children is in South-East Serbia, at 31 percent, and the highest in Vojvodina and East Serbia, at 81 and 63 percent, respectively. Children living in urban settlements are more likely to be fully immunized; 62 percent of children living in urban, compared to 52 percent of children from rural areas have received all the recommended vaccinations.
- Ethnicity is strongly related to immunization coverage. While 57 percent of Serbian children aged 18–29 have been fully immunized, only 27 percent of Roma children living in Roma settlements have received all vaccinations.

Oral rehydration treatment

- Overall, 5 percent of children under the age of five had diarrhoea in the two weeks preceding the survey. High prevalence of diarrhoea is noticed among children living in Roma settlements and in the poorest households, at 13 and 7 percent respectively.

- The use of oral rehydration therapy (ORT), which is the application of ORS fluid or other recommended home made fluids is satisfactorily high, at 94 percent.

- However, home management of diarrhoea is only 26 percent in Serbia, with significant gender (29 percent of boys compared to 23 percent of girls) and urban/rural differences (29 percent and 22 percent respectively) among children receiving home management of diarrhoea. Also, home management of diarrhoea is much lower (18 percent) among children from the poorest households.
- 71 percent of children who had diarrhoea in two weeks prior to the survey received ORT (or increased fluids) and continued feeding, with the same pattern as for home management of diarrhoea.

Care seeking and antibiotic treatment of pneumonia

- 3 percent of children aged 0–59 months had suspected pneumonia during the two weeks preceding the survey. 92 percent of children with suspected pneumonia were taken to an appropriate health provider (94 percent of boys and 90 percent of girls).
- 57 percent of children with suspected pneumonia received antibiotics in the last two weeks. Antibiotics were given more to boys (61 percent) than girls (52 percent) and more in urban (59 percent) than in rural (54 percent) areas.
- Every third mother/caretaker recognizes two danger signs of pneumonia (fast and difficult breathing). Knowledge is strongly correlated to the region, ethnicity and wealth index. While 57 percent of mothers/caregivers in Belgrade recognize the two danger signs of pneumonia, only 15 percent of mothers/caregivers in West Serbia have similar knowledge. Poorer knowledge is noticed among Muslim/Bosnians and Roma mothers – only 8 and 12 percent respectively, recognize both signs of pneumonia. 28 percent of mothers from the poorest households, compared to 40 percent from the richest know those signs.

- Interestingly, fever is considered as the most dangerous sign of child illness in Serbia – 82 percent of mothers think that their child should be taken to a health facility as soon as it develops a fever.

Solid fuel use

- One third of households in Serbia are using solid fuels for cooking. A much higher proportion of solid fuels usage is noticed among the poorest socio-economic classes (86 percent), in Roma households (85 percent) and in rural areas (61 percent).

Water sanitation

- 99 percent of the population have access to an improved drinking water source, if one uses a broad definition of access which, by improved drinking water source, includes piped water, a public tap/standpipe, a tubewell/borehole, a protected well and spring. 77 percent of the population uses water piped into their dwelling or yard from a public or local water supply as the main source of drinking water. Such access is much higher in urban areas (91 percent) than in rural areas (60 percent). In rural areas, 15 percent of the population have a tubewell/borehole with a pump, and 18 percent have a protected well or spring.
- Virtually the entire population uses sanitary means of excreta disposal. 89 percent have a flush toilet connected either to a sewage system or septic tank. Septic tanks are much more common in rural areas; 64 percent of the rural population uses a septic tank, compared to 13 percent of the urban population. Usage of traditional pit latrines is quite common among the Roma population (48 percent of them use one). 5 percent of the Roma population do not even have sanitation facilities.

Security of tenure and durability of housing

- 13 percent of households do not have formal residential documentation. Regional differences are significant, with the best situation

in Belgrade, where 7 percent of households do not have formal documentation, and worst in South-East Serbia, where 18 percent of households are missing formal documentation. The least security of tenure is found among Roma living in Roma settlements where 38 percent of households do not have formal residential documentation, and among the poorest households, with 26 percent of the households without formal documentation.

- Almost the entire population lives in durable housing – less than 1 percent of households and household members are living in dwellings which are considered non-durable. The situation in Roma settlements is quite different, with as much as 12 percent of the Roma population living in non-durable households.

Contraception

- Current use of any contraception was reported by 41 percent of married women/in union women. Among women in Serbia, traditional methods are more popular than modern ones, 23 compared to 19 percent. The most popular traditional methods are withdrawal and periodical abstinence (14 and 8 percent respectively), while the most popular modern method is the condom (8 percent).
- Contraceptive prevalence ranges from 27 percent in Central Serbia to 54 percent in East Serbia. Contraceptive prevalence increases with age, up to the age of 40, and then there is a pattern of decreased contraception use. Women's education level, ethnicity and wealth index are significantly linked to contraceptive prevalence.
- Contraceptive usage is highest among Hungarian women, where 57 percent of women are using mainly modern methods of contraception. Only one in four married Roma women are using any contraceptive method, usually withdrawal (every fifth). Traditional methods of contraception are also present among Muslim/Bosnian women whose main choice is periodical abstinence.

Unmet need

- Almost one third of married or in union women in Serbia have an unmet need for contraception. The need for contraception is less satisfied among the “highest risk” population: Roma women living in Roma settlements, and the poorest and most uneducated women.

Antenatal care

- 99 percent of pregnant women received antenatal care one or more times during pregnancy. Lower antenatal care coverage is noticed among Roma, the youngest and less educated women, and women from the poorest households.
- 98 percent of women aged 15–49 who gave birth in the two years preceding the survey received antenatal care from skilled personnel. Antenatal care provided by medical personnel, especially a doctor, is significantly lower among Roma and less educated women.

Assistance at delivery

- With 99 percent of women, skilled personnel assisted at the delivery. Approximately the same percentage of women was delivered in a health facility. Roma women from Roma settlements and Muslim/Bosnian women are behind the national average – 93 and 94 percent of those women respectively were delivered by skilled personnel.
- Medical doctors assisted in 87 percent of the deliveries and an auxiliary midwife assisted in 10 percent of cases.

Child development

- For about 84 percent of children under the age of 5, an adult engaged in four or more activities that promote learning and school readiness during the 3 days preceding the survey. The average number of activities was 5. The involvement of fathers in such activities was significantly lower, 70 percent, with the average number of activities at 2.3.

- Children from the poorest and Roma families, as well as children whose parents are less well educated are less likely to be involved in activities that promote learning than average.
- About 9 percent of children under the age of 5 in Serbia were left with inadequate care in the week preceding the survey. Female, older children and children from rural areas are more often left with inadequate care. This practice is particularly present among Roma and Muslim/Bosnian families (18 and 16 percent of children left without proper care, respectively).

Pre-school attendance and school readiness

- 32 percent of children aged 36–59 months were attending some form of organised early childhood education programme. Attendance was three times higher in urban than rural areas. Higher education of a child’s mother and higher household wealth status imply a higher proportion of children attending pre-school.
- Roma children attend pre-school eight times less than the rest of the population.

Primary and secondary school participation

- 94 percent of children of primary school entry age in Serbia are currently attending first grade. Roma children start primary education on time more rarely than other children (66 percent).
- 98 percent of children of primary school age attend primary school. Only 74 percent of Roma children of this age attend school.
- Almost all of the children who entered the first grade of primary school eventually reach grade five.
- About 84 percent of children in Serbia, between the ages of 15 and 18, are attending secondary or higher school. Only 10 percent of Roma children from Roma settlements are attending school at that age. Children of secondary school age from wealthier households are more likely to attend secondary school or higher.

- The Gender Parity Index (GPI) for primary school in Serbia is 1.0, indicating no difference in primary school attendance of girls and boys. However, the indicator goes up to 1.1 for secondary education.
- The disparity of girls is only pronounced in Roma settlements, where the GPI for primary and secondary schools are 0.94 and 0.42, respectively.

Adult literacy

- The literacy rate of females, aged between 15 and 24 in Serbia is 96 percent. The literacy level is lower among women with no or primary education. Younger women aged 15–19 are less literate than women aged 20–24 (93 compared to 98 percent). Roma women living in Roma settlements showed a lower level of literacy; only 52 percent of young Roma women are considered literate. The second and middle wealth index quintile classes are the most literate.

Birth Registration

- The births of 99 percent of children under five years of age in Serbia have been registered. There are no significant variations in birth registration across sex, age, or education categories. Only Roma from Roma settlements are somewhat less likely to have their births registered than other children (95 percent registered).

Child Labour

- 4 percent of children aged between 5 and 14, in Serbia are involved in child labour.
- Children living in rural areas are twice as involved in child labour activities (6 percent), than urban children (3 percent). Even 8 percent of children from the poorest households and 7 percent of Roma children are involved in child labour.
- Out of the 92 percent of children aged between 5 and 14 who are attending school, 5 percent are involved in child labour activities. On the other hand, out of the 4 percent of children classified as child labourers, the majority of them are also attending school (93 percent).

Child Discipline

- In Serbia, 73 percent of children aged between 2 and 14 were subjected to at least one form of psychological or physical punishment by their mothers/caretakers or other household members.
- 62 percent of children were exposed to psychological punishment, 51 percent to minor physical punishment and 7 percent were subjected to severe physical punishment. Severe physical punishment is a frequently used disciplinary method among Roma (21 percent) and Muslims/Bosnians (15 percent).
- 6 percent of mothers/caretakers in Serbia believe that in order to raise their children properly, they need to physically punish them.
- Every fifth child in Serbia has been disciplined through non-violent methods.
- Male children were subjected more to both minor and severe physical discipline (53 and 8 percent) than female children (49 and 5 percent). Violent disciplining is most practised in South-East Serbia. Less educated mothers and mothers from the poorest households are using violent methods more in child disciplining.

Early marriage

- The proportion of women aged between 15 and 49 who got married before the age of 15 is very low (1 percent). 6 percent of women aged 15 to 19 are currently married or in union. This practice is more present in East Serbia, rural areas, among the less educated, the poorest and particularly among Roma, where almost half of Roma women from Roma settlements were married before the age of 18.
- 26 percent of young married women aged 15 to 19 are married to a partner 10 or more years older. The percentage is much lower (14 percent), among married women aged 20 to 24 years. This phenomenon is mainly correlated to poverty and lower education.

Domestic violence

- 6 percent of women in Serbia feel that their husband/partner has a right to hit or beat them for at least one of a variety of reasons. Women who approve their partner's violence, in most cases agree and justify violence in instances when they neglect the children (6 percent), or if they demonstrate their autonomy, e.g. go out without telling their husbands or argue with them (2 percent).
- Domestic violence is more accepted in South and West Serbia (approximately 12 percent) than in other parts of the country. Acceptance is more present among the poorest and less educated, and also currently married women. It is also strongly correlated to ethnicity – every third Muslim/Bosnian and Roma woman believes it is justified for a husband to beat his wife/partner.

Child disability

- 11 percent of children aged between 2 and 9 have at least one reported disability. Child disabilities are more frequent among Roma children from Roma settlements (23 percent), children from the poorest households (17 percent) and those whose mothers are less educated (15 percent).

Knowledge of HIV transmission

- In Serbia, 98 percent of the women interviewed have heard of AIDS. Yet, the number of women who knew all three main ways of preventing HIV transmission (having only one faithful uninfected partner, using a condom during each act of sexual intercourse, and abstaining from sex) is only 36 percent.
- Only half of the women correctly identify the two most common misconceptions about HIV transmission (that HIV cannot be transmitted by sharing food and that HIV cannot be

transmitted by mosquito bites) and know that a healthy looking person can be infected. This percentage is higher among more educated and wealthier women.

- Only 37 percent of women in Serbia have comprehensive knowledge about HIV transmission (identify 2 prevention methods and 3 misconceptions). 42 percent of women aged 15–24 have comprehensive knowledge about HIV transmission.
- 57 percent of women of reproductive age know the three ways in which HIV can be transmitted from mother to child.
- 69 percent of women know a place to get tested for AIDS. Seven percent have been tested, of whom 84 percent have been given the result.
- 64 percent of women expressed a discriminatory attitude towards people with HIV/AIDS.

Sexual Behaviour

- Only 1 percent of women aged 15 to 19 had sex before the age of 15, while 19 percent of women aged 20 to 24 reported having sex before the age of 18. A different pattern is found among Roma women from Roma settlements (16 percent had sex before the age of 15 and 51 percent before the age of 18) and girls who terminate their education at primary school (3 percent had sex before the age of 15 and 42 percent before the age of 18).
- Having sex with a partner 10 or more years older is reported by one in twelve women. It appears that women with primary or less education and women from the poorest households are more inclined to these kinds of relationship (20 and 12 percent respectively).
- Over 60 percent of women aged 15–24 report having sex with a non-regular partner in the 12 months prior to the MICS. Three-quarters of those women reported condom usage when they had sex with the high risk partner.

Background

This report is based on the Serbia Multiple Indicator Cluster Survey, conducted in 2005 by UNICEF, the Statistical Office of the Republic of Serbia and the Strategic Marketing Research Agency. The survey provides valuable information on the situation of children and women in Serbia. It was based, to a large extent, on the need to monitor progress towards goals and targets deriving from recent international

third round of a nation-wide household Multiple Indicator Cluster Survey. The survey provides the largest single source of data for reporting on progress towards the aforementioned goals, which will give a rich foundation of comparative data for comprehensive progress reporting.

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

INTRODUCTION

agreements: the Millennium Declaration, adopted by all 191 United Nations Member States in September 2000, and the World Fit for Children Plan of Action, adopted by 189 Member States at the United Nations Special Session on Children in May 2002. Both of these commitments build upon promises made by the international community at the 1990 World Summit for Children.

In signing these international agreements, governments committed themselves to improving conditions for their children and to monitoring progress towards that end. UNICEF was assigned a supporting role in this task.

The Government of the Republic of Serbia adopted the Poverty Reduction Strategy Plan in 2003, the National Plan of Action for Children (NPA) in 2004, and in 2005 the United Nations Millennium Declaration. By undertaking these international obligations, the Republic of Serbia committed itself to monitor and assess progress towards internationally defined goals and targets. MICS3 is the

Survey Objectives

The 2005 Serbia Multiple Indicator Cluster Survey has the following primary objectives:

- To provide up-to-date information for assessing the situation of children and women in Serbia;
- To learn about existing disparities in the status of children and women in Serbia;
- To provide data needed for monitoring progress towards goals established by the Millennium Development Goals, the goals of A World Fit For Children (WFFC), and other internationally agreed-upon goals, as a basis for future action;
- To contribute to the improvement of data and monitoring systems in Serbia and to strengthen technical expertise in the design, implementation, and analysis of such systems.

A Commitment to Action: National and International Reporting Responsibilities

The governments that signed the Millennium Declaration and the World Fit for Children Declaration and Plan of Action also committed themselves to monitoring progress towards the goals and objectives they contained:

“We will monitor regularly at the national level and, where appropriate, at the regional level and assess progress towards the goals and targets of the present Plan of Action at the national, regional and global levels. Accordingly, we will strengthen our national statistical capacity to collect, analyse and disaggregate data, including by sex, age and other relevant factors that may lead to disparities, and support a wide range of child-focused research. We will enhance international cooperation to support statistical capacity-building efforts and build community capacity for monitoring, assessment and planning.” (*A World Fit for Children*, paragraph 60)

“...We will conduct periodic reviews at national and subnational levels of progress in order to address obstacles more effectively and accelerate procedures...” (*A World Fit for Children*, paragraph 61)

The Plan of Action (paragraph 61) also calls for the specific involvement of UNICEF in the preparation of periodic progress reports:

“...As the world’s lead agency for children, the United Nations Children’s Fund is requested to continue to prepare and disseminate, in close collaboration with Governments, relevant funds, programmes and the specialized agencies of the United Nations system, and all other relevant actors, as appropriate, information on the progress made in the implementation of the Declaration and the Plan of Action.”

Similarly, the *Millennium Declaration* (paragraph 31) calls for periodic reporting on progress:

“...We request the General Assembly to review on a regular basis the progress made in implementing the provisions of this Declaration, and ask the Secretary-General to issue periodic reports for consideration by the General Assembly and as a basis for further action.”

Sample Design

The sample for the Serbia Multiple Indicator Cluster Survey (MICS) was designed to provide estimates on a large number of indicators on the situation of children and women at the national level, for urban and rural areas, and for six regions: Vojvodina, Belgrade, West, Central, East and South-East Serbia. Belgrade has a large population (almost one-quarter of the total) and its predominantly urban characteristics make it necessary to separate it from the rest of Central Serbia, to which it administratively belongs. In order to look

In the case of Serbia without the Roma settlements sample, 400 census enumeration areas within each region with probability proportional to size were selected during the first stage. Since the sample frame (Census 2002) was not up to date, household lists in all selected enumeration areas were updated prior to the selection of households. Owing to the low fertility rate and small household size, households were stratified into two categories. One category of households consists of households with under 5 children,

SAMPLE AND SURVEY METHODOLOGY

more deeply into existing ethnic disparities and to provide national estimates, a separate sample was designed for Roma living in Roma settlements.

Important factors which influenced the sample design of both Serb and Roma samples are the fertility rate and number of household members. For example, one generation of Serb children makes up less than 1 percent of the population, and the average number of Serb household members is around three. But the situation in Roma settlements is quite different; the average household size is around five and there is a significantly higher proportion of children under the age of 5 in the total Roma population.

Because of these differences, the sample plan had to be modified. For both samples, regions were identified as the main sampling domains and the samples were selected in two stages.

while the other category consists of households without children under 5. The allocation of the sample in the category of households with children was significantly greater than the allocation of the sample in the category of households without children. Based on the updated information, selected units were divided into clusters of 18 households on average, plus 3 backup households. Backup households were interviewed only if some of the first 18 households were not found. In the event that a household refused to be interviewed, a backup household was not contacted. In each cluster, the number of households with children was selected with probability proportional to size.

In the case of the Roma population, the universe could be defined only for Roma who live in separate settlements. During the first stage, 106 census enumeration areas were selected. The updating of household lists was done prior

to household selection, but there was no need for sample stratification of households with and without children under 5. The average number of households selected in each cluster was 18 on average, plus 3 backup households.

Secondly, after the household listing was carried out within the selected enumeration areas, a systematic sample of 7,974 households in Serbia without Roma from Roma settlements and 1,979 Roma households from Roma settlements was drawn up, which makes a total of 9,953 sampled households. Each selected enumeration area was visited during the field work period. The Serbia Multiple Indicator Cluster Survey sample is not self-weighted. For reporting of national level results, sample weights were used. A more detailed description of the sample design can be found in Appendix A.

Questionnaires

Three sets of questionnaires were used in the survey: 1) a household questionnaire which was used to collect information on all *de jure* household members, the household, and the dwelling; 2) a women's questionnaire; and 3) an under-5's questionnaire.

The Household Questionnaire included the following modules:

- Household listing
- Education
- Water and Sanitation
- Household characteristics
- Child Labour
- Child Discipline
- Child Disability
- Roma in Roma settlements

The Questionnaire for Individual Women was completed by all women aged 15–49 living in the households, and included the following modules:

- Women's information panel
- Child Mortality (this module was used only in Roma households living in Roma settlements)
- Maternal and Newborn Health
- Security of tenure
- Marriage/Union
- Contraception
- Attitudes toward domestic violence
- Sexual behaviour
- HIV/AIDS

The Questionnaire for Children Under Five² was completed by mothers of under-5 children; in cases when the mother was not listed in the household roster, a primary caretaker for the child was identified and interviewed. The questionnaire included the following modules:

- Under-Five Child's Information Panel
- Birth Registration and Early Learning
- Child Development
- Breastfeeding
- Care of Illness
- Immunization
- Anthropometry

The questionnaires are based on the MICS3 model questionnaire³. Certain changes were made according to country specific situations. Some of the original modules (tetanus, polygamy, Vitamin A modules, etc.) were not covered by this survey since they were not applicable. On the other hand, some of the modules were expanded with additional questions in order to obtain data that

² The terms "children under 5", "children age 0–4 years", and "children aged 0–59 months" are used interchangeably in this report.

³ The model MICS3 questionnaire can be found at www.childinfo.org.

is missing, but important for finding out more about existing practices and for future activity planning. For example, the Education module was expanded with additional questions concerning commuting to school – distance, cost, means and duration of the journey. Questionnaires used among the Roma population differ slightly from those used in non-Roma settlements. They were expanded with a new module which included questions about the language spoken in the household, the type of Roma settlement, the main source of household income, etc. Questionnaires from the MICS3 model English version were translated into Serbian. After adaptation, they were translated into Albanian and Hungarian, and were pre-tested in several places in Serbia: Belgrade, Novi Sad, Subotica, Kraljevo, Kragujevac, Valjevo and Nis, at the end of September 2005. Based on the results of the pre-test, modifications were made to the wording of the questionnaires.

A copy of the Serbia MICS questionnaires is provided in Appendix F.

In addition to the administration of questionnaires, fieldwork teams measured the weight and height of children under 5 years of age. Details and findings of these measurements are provided in the respective sections of this report.

Training and Fieldwork

The Statistical Office of the Republic of Serbia and the Strategic Marketing Research Agency were responsible for data collection. The whole territory of Serbia was divided into 18 districts according to the regional network of responsible institutions. In each district a team of people was selected – one supervisor for the district and the interviewers (whose number depended on the number of clusters in the region). The interviewers and supervisors were recruited according to their qualifications, communication skills, experience in fieldwork and knowledge of the region where the research was to be conducted. All field staff were

selected before the updating of household listing started. Training of supervisors was conducted in September 2005, before the pre-test. Towards the end of the supervisor training period, supervisors spent five days to practise interviewing and checking questionnaires and methodology in several places: Belgrade, Novi Sad, Subotica, Kraljevo, Kragujevac, Valjevo and Nis. The field interviewers, all highly skilled professionals with previous experience in similar surveys, were trained for three days in October 2005. Training included lectures on interview techniques and the contents of the questionnaires, and the interactive approach of practising interviews between trainees to gain practice in asking questions. A separate process was applied for the interviewers that were to conduct interviews in Roma settlements. Roma women included in the fieldwork received additional special training.

The data was collected by 47 teams; each comprised of three to four interviewers. Each team in charge of data collection in Roma settlements included one or two members from the Roma women's network, and one professional interviewer. One supervisor was in charge of two or three teams. Fieldwork began in October 2005 and concluded in January 2006.

Data Processing

Data was entered using the CSPro software into twenty computers by twenty data entry operators and four data entry supervisors. In order to ensure quality control, all questionnaires were entered twice and internal consistency checks were performed. Procedures and standard programmes developed under the global MICS3 project and adapted to the Serbia questionnaire were used throughout. Data processing began simultaneously with data collection in October 2005 and was completed in March 2006. Data was analysed using the Statistical Package for Social Sciences (SPSS) software programme, Version 14, and the model syntax and tabulation plans developed by UNICEF for this survey.

Sample Coverage

Of the 9,953 households selected for the sample, 9,372 were found to be occupied. Of these, 8,730 were successfully interviewed for a household response rate of 93 percent. In the interviewed households, 7,895

lower than that of the total population. Thanks to previously updated lists of households in selected enumeration areas, there were no significant differences between the number of sampled and occupied households.

SAMPLE COVERAGE AND THE CHARACTERISTICS OF HOUSEHOLDS AND RESPONDENTS

women (aged 15–49) were identified. Of these, 7,516 were successfully interviewed, yielding a response rate of 95 percent. In addition, 3,838 children under the age of five were listed in the household questionnaire. Questionnaires were completed for 3,777 of these children, which corresponds to a response rate of 98 percent. Overall response rates of 89 and 92 percent are calculated for the women's and under-5s' interviews respectively (Table HH.1).

Response rates were similar across regions and areas. Despite the busy lifestyle of Belgrade residents, surprisingly high response rates were recorded in the capital. This can be attributed to a successful media campaign and interviewers' diligent efforts. Although the inclusion of the Roma women's network in fieldwork helped interviewers to gain the trust of Roma communities, the response rate in Roma settlements was still slightly

Characteristics of Households

The age and sex distribution of the surveyed population is provided in Table HH.2. The distribution is also used to produce the population pyramid in Figure HH.1. In the 8,730 households successfully interviewed in the survey, 28,163 household members were listed. Of these, 13,614 were male, and 14,549 were female. These figures also indicate that the survey estimated the average household size at 3.2 persons.

The age and sex distribution of the surveyed population is in accordance with the 2002 Census and indicates negative population growth during the past decade. Serbia is characterised by a low proportion of under-five children and a high proportion of elderly. The majority of the population

is in the 50–55 age group, i.e. the post Second World War baby boom generation. Children (up to 18 years of age) constitute 22 percent of the population. The single year age distribution (Table DQ.1 and Figure DQ.1a in Appendix D) shows a decrease in population after the fifties (expected, natural), and a constant decline in the young population.

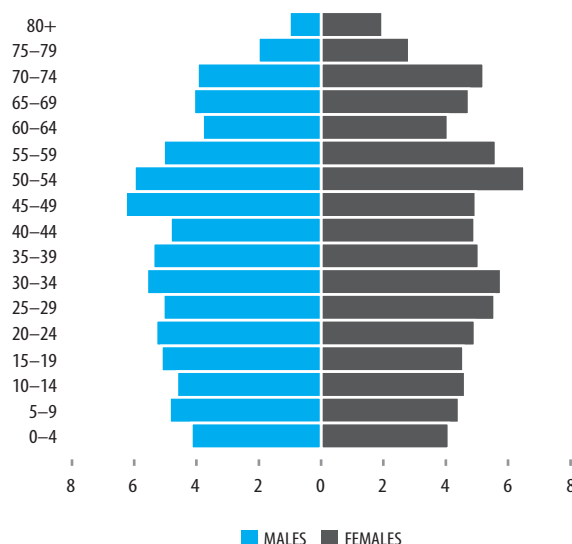
The male-female ratio shows small variations in the first 50 years of life after which the number of women increases and exceeds that of men.

The Roma population single year distribution is completely different (Figure DQ.1b in Appendix D), and is comparable with other underdeveloped populations. The proportion of children under 5 in the Roma population is highest (about 12 percent), and then in each subsequent age band the proportion of the population progressively decreases.

As a basic check on the quality of age reporting, the percentage of missing data is shown in the Table DQ.6 in Appendix D. The age of almost all the surveyed population was collected. 1 percent of all eligible women interviewed did not know their complete date of birth (ie. day, month and year). Yet, the year of birth and age were gathered for these women. For all children under 5, the complete date of birth (month and year) was collected, because field supervisors were instructed to repeat interviews in case information was missing.

Table HH.3 provides basic background information on the households. Within households, the area (Serbia without Roma in Roma settlements or Roma in Roma settlements), the sex of the head of the household, the region, urban/rural status, the number of household members, and the ethnicity⁴ of the household head are shown in the table. These background characteristics are also used in subsequent tables in this report; the figures in the table are also intended to show the numbers of observations by major categories of analysis in the report. In addition to being useful in interpretation of survey results, background characteristics serve as a basic check on sample implementation.

Figure HH.1
Age and sex distribution of household population, Serbia, 2005



The totals of weighted and unweighted number of households are equal, since sample weights were normalised (See Appendix A). Table HH.3 also shows the proportions of households where at least one child under 18, at least one child under 5, and at least one eligible woman aged 15–49 were found.

Looking at the number of households in each background category, we can notice a significant difference between weighted and unweighted numbers of Roma households from Roma settlements (the weighted number is 85 and the unweighted 1716). According to the 2002 Census data, the proportion of Roma in the general population is approximately 1 percent. In order to gain qualitative results for the Roma population it was necessary to do over-sampling, and later by using sample weights, the model was adjusted to Census data.

About 60 percent of households are urban, while the rest are rural. The regional distribution is in accordance with Census data. The Vojvodina region comprises the largest number of households with nearly one third of the total, while the smallest

⁴ This was determined by asking the respondents what ethnic group the head of household belonged to.

number of households is from East Serbia at 9 percent. In two thirds of interviewed households the head of the household is male, which correlates strongly with Serbian tradition in which the male figure represents the guardian and breadwinner of the family. Household distribution by the ethnicity of the head of the household shows that the biggest ethnic group is Serbian (87 percent), while the proportion of other ethnic groups is less than 5 percent each.

The majority of households have between two and five members. In 56 percent of interviewed households, lives at least one woman aged 15 to 49, and in 14 percent of interviewed households at least one child under 5 years of age. The fact that in 38 percent of households lives only one child under 18, shows that the Serbian population is “old”.

Characteristics of Respondents

Tables HH.4 and HH.5 provide information on the background characteristics of female respondents 15–49 years of age and of children under the age of 5. In both tables, the total numbers of weighted and unweighted observations are equal, since sample weights have been normalised (standardised). In addition to providing useful information on the background characteristics of women and children, the tables are also intended to show the number of observations in each background category. These categories are used in the subsequent tabulations of this report.

Like in the description of households’ background information, the weighted numbers of Roma

women and children under 5 are significantly lower than unweighted numbers, due to over-sampling. By using sample weights, the model was adjusted to Census data.

Table HH.4 provides background characteristics of female respondents 15–49 years of age. The table includes information on the distribution of women according to area, region, urban-rural settlements, age, marital status, motherhood status, education⁵, ethnicity and wealth index quintiles.⁶

Approximately, one third of interviewed eligible women live in Vojvodina, and one fifth in Belgrade. Distribution among the other four regions is approximately equal, with the exception of East Serbia where the proportion of eligible women in the interviewed population is 9 percent. This pattern is expected and follows the Census data.

The majority of the sample are women 30–34 years of age, around 17 percent. The proportion of young women is significantly lower: there are 13 percent of both 15–19 and 20–24 age groups which could be the consequence of systematical negative natality growth in past years.

Around two thirds of all women in this sample are married, while 30 percent have never been married. Distribution by motherhood status is similar: 65 percent of women have given birth, compared to 35 percent that have never given birth. The majority of interviewed women have secondary education (59 percent), while the proportion of women with none or primary education, and those with higher education is approximately the same (20 percent). Additional analysis which is not shown in the table HH.4 indicates a

⁵ Unless otherwise stated, “education” refers to the educational level attended by the respondent throughout this report when it is used as a background variable.

⁶ Principal components analysis was performed by using information on the ownership of household goods and amenities (assets) to assign weights to each household asset, and obtain wealth scores for each household in the sample. The assets used in these calculations were as follows: number of rooms for sleeping per member; floor, roof and walls material of dwelling; type of water and sanitation; the type of fuel used for cooking; radio, mobile, phone, fridge, washing machine, dishwasher, computer, air conditioner, central heating and car. Each household was then weighted by the number of household members, and the household population was divided into five groups of equal size, from the poorest quintile to the richest quintile, based on the wealth scores of households they were living in. The wealth index is assumed to include the underlying long-term wealth through information on the household assets, and is intended to produce a ranking of households by wealth, from poorest to richest. The wealth index does not provide information on absolute poverty, current income or expenditure levels, and the wealth scores calculated are applicable for only the particular data set they are based on. Further information on the construction of the wealth index can be found in Rutstein and Johnson, 2004, and Filmer and Pritchett, 2001.

strong correlation between woman's educational level and the type of settlement she lives in. While only one in five women in urban settlements have either none or primary education, in rural areas there are as many as 30 percent of such women. Conversely, while approximately one third of urban women have high education, this applies to only one in ten women living in rural settlements. It is important to notice that education levels are categorised, according to the country's educational system, into three groups: none or primary, secondary and higher/high.

In accordance with household ethnic distribution, the majority of women live in households where the ethnicity of the head of the household is Serbian. The proportion of other ethnic groups is under 5 percent. As far as wealth index quintiles are concerned, less women live in the poorest households – about 15 percent – while the largest group are those living in the richest households, 23 percent.

Some background characteristics of children under 5 are presented in Table HH.5. These include distribution of children according to several

attributes: area of residence, sex and region; urban/rural settlements; age in months; mother's or caretaker's education, ethnicity and wealth.

The proportion of male and female children in the under-5 sample is approximately the same. Age distribution of children 0–59 months is well balanced. The proportion of mothers with secondary education is approximately the same as in the women's sample. This is not the case with mothers with higher education; it seems that women with higher education tend to have less children, since the proportion is lower than in the women's sample and is around 17 percent. For children whose mother did not live in the household the educational level of the caretaker was taken into consideration.

The majority of children live in households where the ethnicity of the head of the household is Serbian (82 percent). The number of children living in Roma and Muslim – ie. Bosnian families is higher than average. As a result, the percentage of these children is higher than the percentage of household or women's distribution of these ethnic groups.

One of the overarching goals of the Millennium Development Goals (MDGs) and the World Fit for Children (WFFC) is to reduce infant and under-five mortality. Specifically, the MDGs call for the reduction in under-five mortality by two-thirds between 1990 and 2015. Monitoring progress towards this goal is an important but difficult objective. Measuring childhood mortality may seem easy, but attempts using direct questions, such as “Has anyone in this household died in the last year?” give inaccurate results. Alternatively, indirect methods developed to measure child

ing into account both the mortality risks to which children are exposed and their length of exposure to the risk of dying, assuming a particular model age pattern of mortality. Based on previous information on mortality in Roma settlements in Serbia, the East model life table was selected as the most appropriate. All estimates have been calculated by averaging mortality estimates obtained from women aged 25–29 and 30–34, and refer to mid-2003.

The module on child mortality was used just for Roma living in Roma settlements for several

CHILD MORTALITY

mortality produce robust estimates that are comparable with the ones obtained from other sources. Indirect methods minimise the pitfalls of memory lapses, inexact or misinterpreted definitions, and poor interviewing technique.

The infant mortality rate is the probability of dying before the first birthday. The under-five mortality rate is the probability of dying before the fifth birthday. In MICS surveys, infant and under-five mortality rates are calculated, based on an indirect estimation technique known as the Brass method (United Nations, 1983; 1990a; 1990b). The data used in the estimation is: the mean number of children ever born to five year age groups of women from aged 15 to 49, and the proportion of these children who are dead, similarly for five-year age groups of women. The technique converts this data into probabilities of dying by tak-

reasons: there was no data on Roma child mortality in the regular statistics, and the estimation was that it was higher than the national average. Secondly, it was estimated that regular statistics provide accurate data for the general population, and also that mortality is low, so with this research technique we could not compile reliable data.

Table CM.1 provides estimates of child mortality by various background characteristics, while Table CM.2 provides the basic data used in the calculation of mortality rates for Roma in Roma settlements.

The infant mortality rate is estimated at 25 per thousand, while the probability of dying under 5 years of age is around 28 per thousand live births. There is a significant difference between the likelihood of dying among males and

females: the infant mortality rate among boys is 32, and among girls 20, and the under-five mortality rate among boys is 36, compared to 23 per thousand among girls. Infant and under-5 mortality rates are lowest in Vojvodina, while the figures for Central Serbia⁷ are almost twice

as high as that of Vojvodina. There are also significant differences in mortality in terms of educational levels and wealth. However, all those differences should be regarded with caution, owing to the small number of children in the sample.

⁷ Since all results are estimated using the Brass method, in order to obtain qualitative findings, grouping of some background variables was necessary. As the number of Roma women who gave birth was not big enough to provide estimates on the level of six regions, the results are shown on three regional levels: Vojvodina, Belgrade and Central Serbia (which includes Central, West, East and South East Serbia).

Nutritional Status

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

Malnutrition is associated with more than half of all children's deaths worldwide. Undernourished children are more likely to die from common childhood ailments, and those who survive have recurring sicknesses and faltering growth. Three-quarters of

of the three nutritional status indicators can be expressed in standard deviation units (z-scores) from the median of the reference population.

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

NUTRITION

children who die from causes related to malnutrition were only mildly or moderately malnourished, showing no outward sign of their vulnerability. The Millennium Development target is to reduce by half the proportion of people who suffer from hunger between 1990 and 2015. The World Fit for Children goal is to reduce the prevalence of malnutrition among children under five years of age by at least one-third (between 2000 and 2010), with special attention to children under 2 years of age. A reduction in the prevalence of malnutrition will assist in the goal to reduce child mortality.

In a well-nourished population, there is a reference distribution of height and weight for children under the age of five. Under-nourishment in a population can be gauged by comparing children to a reference population. The reference population used in this report is the WHO/CDC/NCHS reference, which was recommended for use by UNICEF and the World Health Organization at the time the survey was implemented. Each

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

Finally, children whose weight-for-height is more than two standard deviations below the median of the reference population are classified as *moderately or severely wasted*, while those who fall more than three standard deviations below the median are *severely wasted*. Wasting is usually the result of a recent nutritional deficiency. The indicator may exhibit significant seasonal shifts associated with changes in the availability of food or disease prevalence. On the other hand,

children whose weight-for-height is two or more standard deviations above the median of the reference population are considered as *moderately or severely obese*. Obesity is mostly a result of bad nutritional practices (low intake of proteins, fruit and vegetables, high intake of saturated fats and sugar...) and is a risk factor for some of the chronic diseases in future life, like cardiovascular diseases and diabetes.

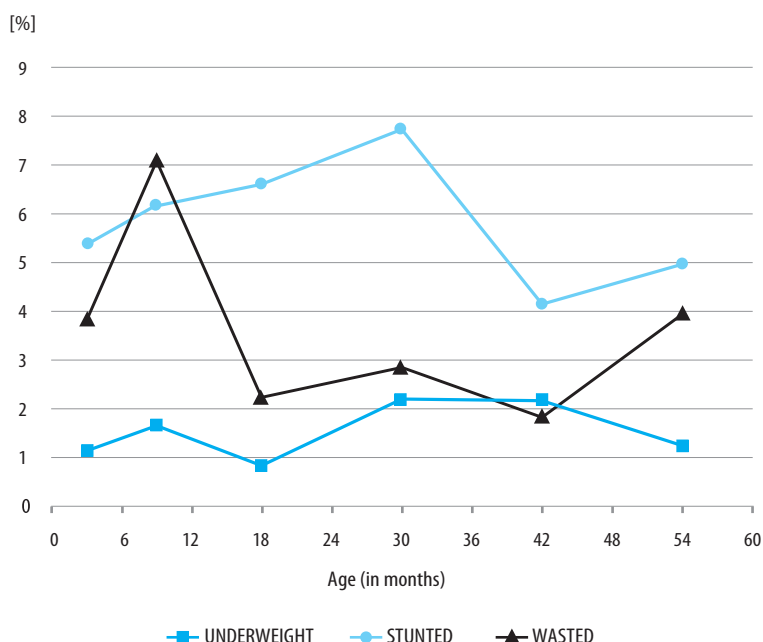
In assessing child nutritional status the following determinants were used: height (in centimetres), weight (in kilos), age (in months) and sex.

Table NU.1 shows the percentages of children classified into each of the described malnutrition categories, and also the percentage of children who are overweight. Children who were not weighed and measured (approximately 12 percent of children) and those whose measurements are outside a plausible range are excluded.

Almost 2 percent of children under the age of five in Serbia are moderately underweight and almost no child is classified as severely underweight (Table NU.1). 6 percent of children are stunted or too short for their age and 3 percent are wasted or too thin for their height.

By each measure – underweight, wasting and stunting – figures for children from the poorest and Roma households significantly exceed the average. Stunting prevalence among Roma from Roma settlements is 20 percent, which is three times higher than average. Underweight and stunting is two times higher among children from poor households and children whose mothers are less educated. Regional distribution shows that children in Belgrade are more likely to be undernourished than other children, which is quite an unexpected result. In contrast, the percentage of all indicators is lowest in the West region. The age pattern shows that the child becomes vulnerable to wasting during the first six months of life when complementary food is introduced and breastfeeding is discontinued. That is also the age when stunting begins, which is very difficult to recover from (Figure NU.1).

Figure NU.1
Percentage of children under-5 who are undernourished, Serbia, 2005



15 percent of children are overweight. There is a significant difference between urban and rural prevalence: 17 percent of children from rural areas compared to 14 percent of urban children are overweight. Looking at age distribution we can conclude that obesity starts right after birth, and constantly continues to grow, reaching its maximum at a child's second year, when every fourth child becomes overweight.

The distribution of indicators, shown in Figures NU.1a, NU.1b and NU.1c confirms that the main nutrition problem in Serbia is not malnutrition, which is even below the values of the reference population, but obesity.

Analysing the trends in malnutrition, we found that malnutrition remains at a very low level, with small insignificant variations. The decrease in prevalence of underweight and wasting since the year 2000 can be explained by the different seasons the survey was conducted in, which entail insensitivity to infections, consumption of different types of food etc (differences shown

on the Figure NU.1d are not statistically significant). There is a continuation of the rising trend of stunting prevalence during the past ten years.

Overweight prevalence has also shown some growth, but the differences are not statistically significant.

Figure NU.1a
Distribution of weight-for-age among children under five, Serbia, 2005

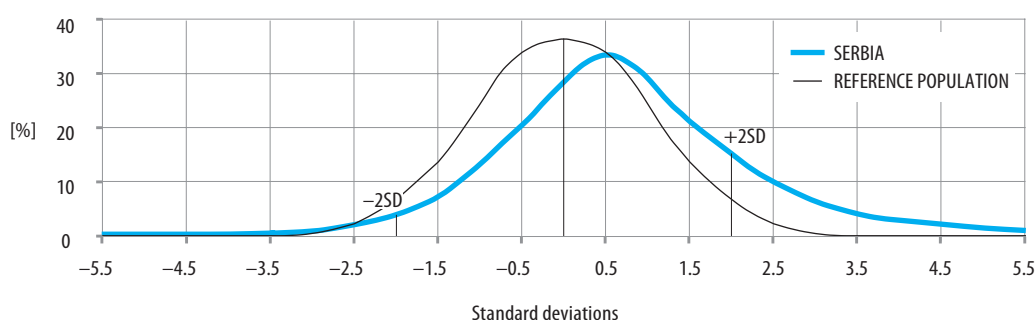


Figure NU.1b
Distribution of height-for-age among children under five, Serbia, 2005

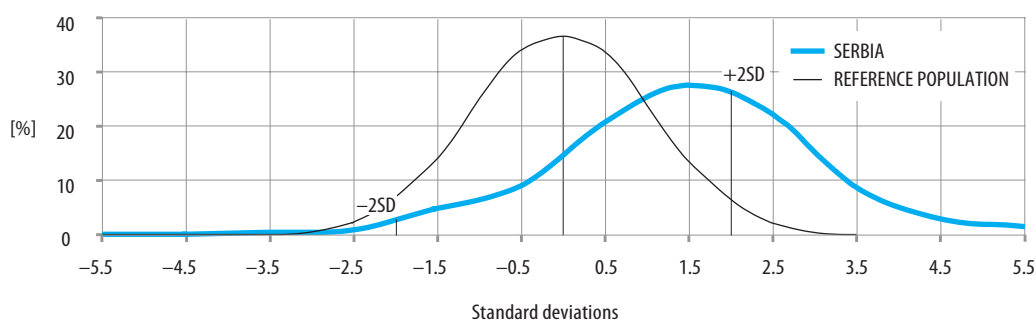


Figure NU.1c
Distribution of weight-for-height among children under five, Serbia, 2005

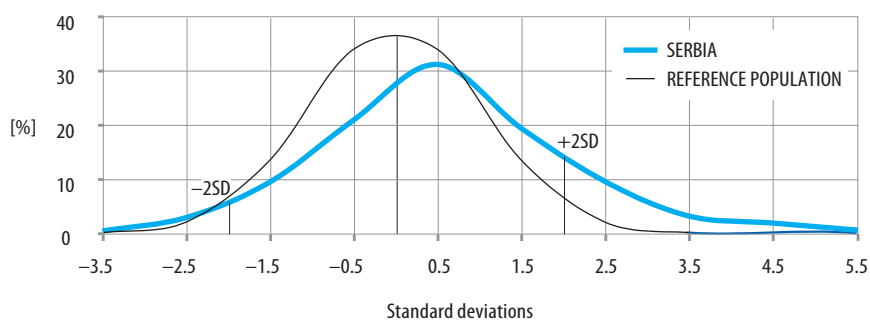
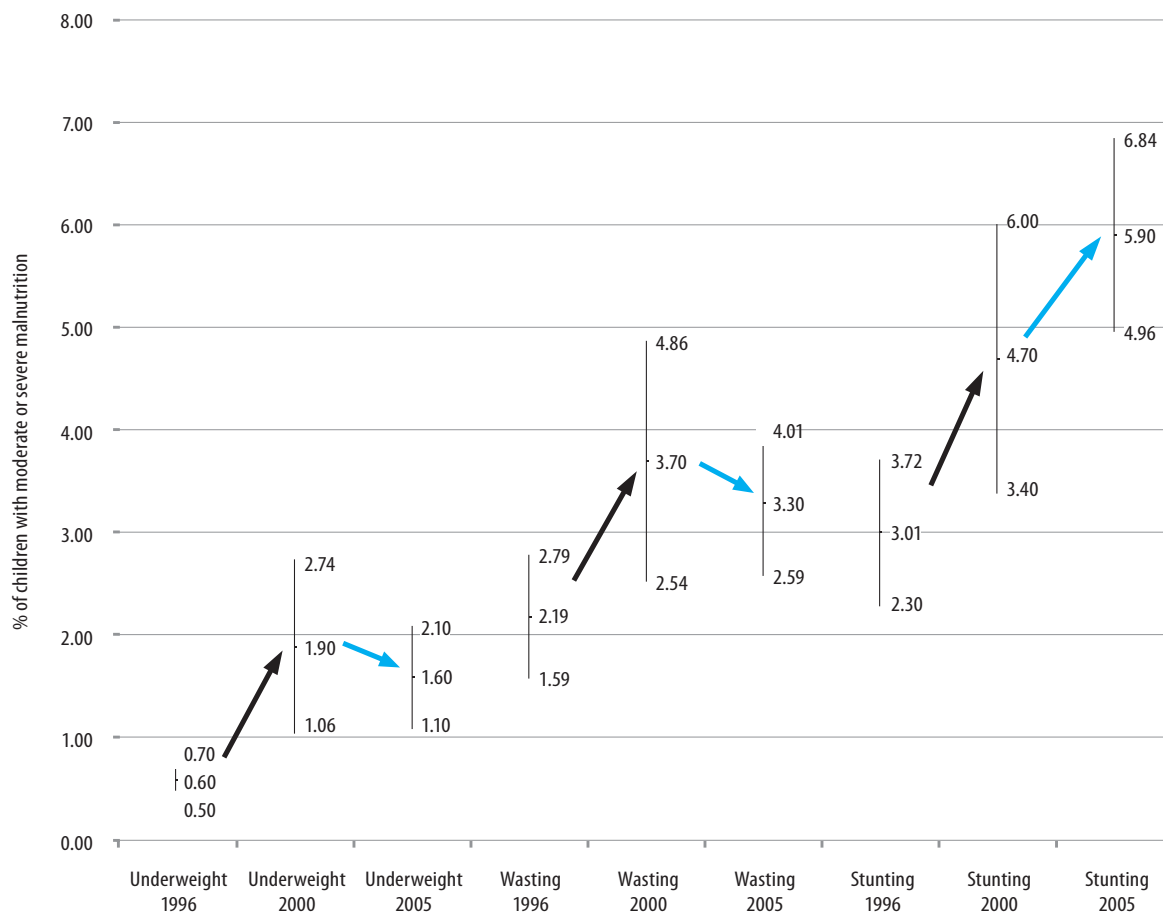


Figure NU.1d
Prevalence of malnutrition in children under five, Serbia, 1996–2005



Breastfeeding

Breastfeeding for the first few years of life protects children from infection, provides an ideal source of nutrients, and is economical and safe. However, many mothers stop breastfeeding too soon and there are often pressures to switch to infant formula, which can contribute to growth difficulties and micronutrient malnutrition and is unsafe if clean water is not readily available.

WHO/UNICEF have the following feeding recommendations:

- Exclusive breastfeeding for the first six months
- Continued breastfeeding for two years or more
- Safe, appropriate and adequate complementary foods beginning at 6 months
- Frequency of complementary feeding: 2 times per day for 6–8 month olds; 3 times per day for 9–11 month olds

It is also recommended that breastfeeding be initiated within one hour of birth.

The indicators of recommended child feeding practices are as follows:

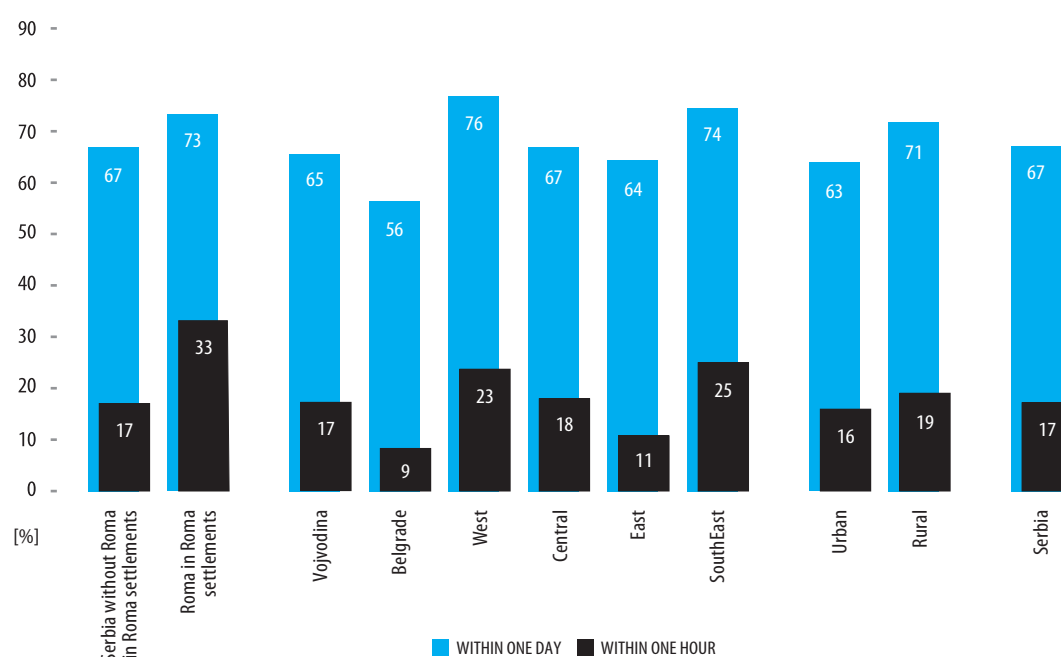
- Exclusive breastfeeding rate
- Timely complementary feeding rate
- Continued breastfeeding rate
- Timely initiation of breastfeeding
- Frequency of complementary feeding
- Adequately fed infants

Also, additional indicators are calculated (predominant breastfeeding and total breastfeeding rate) in order to compare the results with the MICS 2000.

The goal of this module was to assess the existing feeding practices of young children in Serbia. The MICS remain the only national source of data for this purpose.

Table NU.2 shows the proportion of women who started breastfeeding their infants within one hour of birth, and women who started breastfeeding within one day of birth (including those who started within one hour). Although a very important step in management of lactation and establishment of a physical and emotional relationship between the baby and the mother, only every sixth baby is breastfed for the first time within one hour of birth, while 67 percent of newborns in Serbia start breastfeeding within one day of birth. The practice of breastfeeding within one hour of birth is much less present in Belgrade (9 percent) than in West and South-East Serbia (23 and 25 percent, respectively). The percentage falls, the higher the mothers' education and socioeconomic status of the household. Roma children from Roma settlements are twice as likely to be breastfed within one hour of birth.

Figure NU.2
Percentage of mothers who started breastfeeding within one hour and within one day of birth, Serbia, 2005



In Table NU.3, breastfeeding status is based on the reports of mothers/caretakers concerning their children's consumption of food and fluids in the 24 hours prior to the interview. *Exclusively breastfed* refers to infants who received only breast milk (and vitamins, mineral supplements, or medicine). The table shows exclusive breastfeeding of infants during the first six months of life (separately for 0–3 months and 0–5 months), as well as complementary feeding of children 6–9 months and continued breastfeeding of children at 12–15 and 20–23 months of age.

Approximately 15 percent of children aged less than six months are exclusively breastfed, a level significantly lower than recommended. Exclusive breastfeeding is more frequent in urban settlements and among girls. However, all the conclusions should be regarded with caution, owing to the small sample size. At age 6–9 months, 39 percent of children are

receiving breast milk and solid or semi-solid foods. By the ages of 12–15 and 20–23 months respectively, 22 and 8 percent of children are still being breastfed. Roma children from Roma settlements are more likely to continue to be breastfed than the entire population, since 60 percent of Roma children by age 12–15 months and 34 percent by age 20–23 months are still breastfed.

Figure NU.3 shows the detailed pattern of breastfeeding status by the child's age in months. Even at the earliest ages, the majority of children are receiving liquids or foods other than breast milk. 32 percent of infants aged 0 – 1 months were exclusively breastfed, and this proportion drops off rapidly until it falls below 4 percent by the fifth month.

Looking at the trends over the past decade, an increasing trend of key breastfeeding indicators is noted (Figure NU.3a). Exclusive breastfeeding

Figure NU.3
Infant feeding patterns by age:
Percentage distribution of children under the age of 3 by feeding pattern by age group, Serbia, 2005

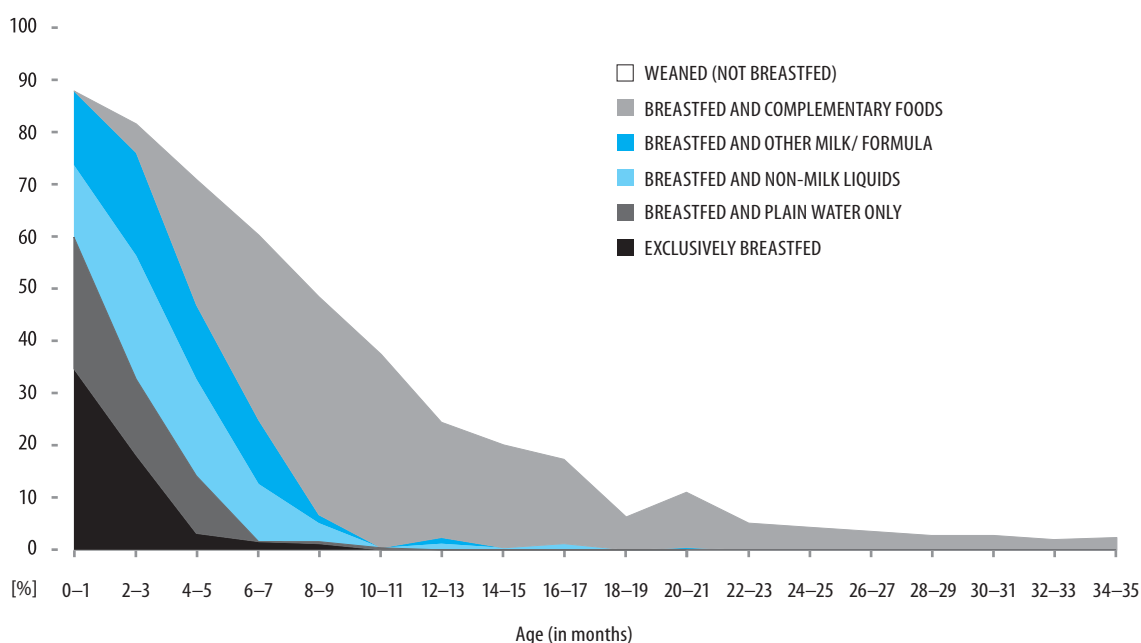
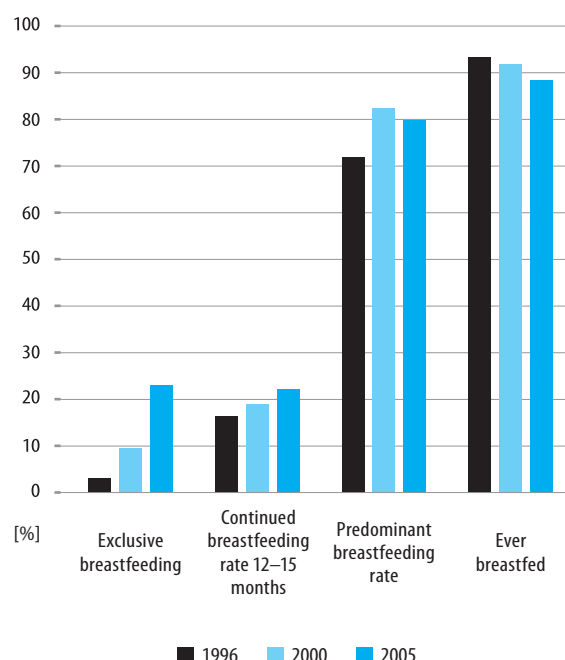


Figure NU.3a
Progress in major breastfeeding indicators,
Serbia, 1996–2005



during the first four months rose from 3 percent in 1996, up to 23 percent in 2005, which is almost 8 times higher. The continued and predominant breastfeeding rates have also improved, while the percentage of the total number of breastfed children is slightly decreasing (although the change is not statistically significant).

The adequacy of infant feeding in children under 12 months is provided in Table NU.4. Different criteria for adequate feeding are used depending on the age of the child. For infants aged 0–5 months, exclusive breastfeeding is considered to be adequate feeding. Infants aged 6–8 months are considered to be adequately fed if they are receiving breastmilk and complementary food at least twice a day, while infants aged 9–11 months are considered to be adequately fed if they are receiving breastmilk and eating complementary food at least three times a day. When we add all the above recommended practices together, we will come to the sum indicator – the percentage of infants aged 0–11 months who are adequately fed.

Every third child aged 6–8 months has received breastmilk and complementary food according to the recommended schedule. This practice is more used for girls than boys, more in rural areas, and much more in Vojvodina than in the rest of the country. The recommendation is more practised by more educated mothers, and by the middle class. While every tenth Muslim/Bosnian child is receiving breastmilk and complementary food at this age, much more Roma (42 percent) and Hungarian (66 percent) are benefiting from this practice. The percentage is growing, but not significantly between the ages of 9 and 11 months, showing similar patterns, as already explained.

In total, when we look at the feeding pattern for all infants (aged 0–11), only each fourth infant is adequately fed, following the recommendations. Girls are better fed than boys; infants in Vojvodina and Central Serbia are better fed than infants from the West and East. There are no urban/rural differences. Interestingly, Roma children from Roma settlements have a better chance of being adequately fed, mainly owing to the higher percentage of breastfed children, but also owing to the fact that they follow more closely the other feeding recommendations. The worst feeding practices are noted among the poorest and the richest children, but the reasons are completely different. While only 17 percent of the poorest children aged 0–11 months are adequately fed, mainly owing to the fact that they are not even receiving complementary food the minimum recommended times a day, children from the richest households are not appropriately fed mainly because very few of them are exclusively breastfed. A mother's education and appropriate child nutrition are strongly correlated. The more educated the mother is, the better the child's chance of being adequately fed. The percentage of children under 12 months who are adequately fed rises from 20 percent among those children whose mother has primary or no education to 24 percent among children whose mothers have secondary education, and up to 33 percent among mothers with higher education.

Low Birth Weight

Weight at birth is a good indicator not only of a mother's health and nutritional status but also the newborn's chances for survival, growth, long-term health and psychosocial development. Low birth weight (less than 2500 grams) carries a range of grave health risks for children. Babies who were undernourished in the womb face a greatly increased risk of dying during their early months and years. Those who survive have an impaired immune function and increased risk of disease; they are likely to remain undernourished, with reduced muscle strength throughout their lives, and suffer a higher incidence of diabetes and heart disease in later life. Children born underweight also tend to have a lower IQ and cognitive disabilities, affecting their performance in school and their job opportunities as adults.

In the developing world, low birth weight stems primarily from the mother's poor health and nutrition. Three factors have most impact: the mother's poor nutritional status before conception, short stature (due mostly to under nutrition and infections during her childhood), and poor nutrition during the pregnancy. Inadequate weight gain during pregnancy is particularly important since it accounts for a large proportion of foetal growth retardation. Moreover, diseases such as diarrhoea and malaria, which are common in many developing countries, can significantly impair foetal growth if the mother becomes infected while pregnant.

In the industrialised world, cigarette smoking during pregnancy is the leading cause of low birth weight. In developed and developing countries alike, teenagers who give birth when their own bodies have yet to finish growing run the risk of bearing underweight babies.

The percentage of births weighing below 2500 grams is estimated from two items in the questionnaire: the mother's assessment of the child's **size** at birth (i.e., very small, smaller than average, average, larger than average, very large) and the mother's recall of the child's **weight** or the weight as recorded on a health card if the child was weighed at birth⁸.

Overall, 98 percent of births were weighed at birth and approximately 5 percent of infants are estimated to weigh less than 2500 grams at birth (Table NU.5). While there are no significant differences in the percentage of weighed infants at birth (with the exception of Roma babies, where 10 percent are not weighed at birth) there are certainly differences in the low birth weight measured. Roma children (9 percent) and the poorest children (9 percent) are twice as likely to weigh less than 2500 grams at birth than average children. The indicator improves, the higher the mother's education. The percentage of low birth weight does not vary much by region or urban and rural areas.

⁸ For a detailed description of the methodology, see Boerma, Weinstein, Rutstein and Sommerfelt, 1996.

Immunization

The Millennium Development Goal (MDG) 4 is to reduce child mortality by two thirds between 1990 and 2015. Immunization plays a key part in this goal. Immunizations have saved the lives of millions of children in the three decades since the launch of the Expanded Programme on Immunization (EPI) in 1974. Worldwide there are still 27 million children overlooked by routine immunization and as a result, vaccine-preventable diseases cause more than 2 million deaths every year.

not have a card or the card was not shown, the mother was asked to recall whether or not the child had received each of the vaccinations and, for DPT and Polio, how many times. The percentage of children aged 18 to 29 months who had received each of the vaccinations is shown in Table CH.1. The denominator for the table is comprised of children aged 18–29 months, so that only children who are old enough to be fully vaccinated are counted. In the top panel, the numerator includes all children who had been vaccinated

CHILD HEALTH

A World Fit for Children goal is to ensure full immunization of children under one year of age at 90 percent nationally, with at least 80 percent coverage in every district or equivalent administrative unit.

According to UNICEF and WHO guidelines, a child should receive a BCG vaccination to protect against tuberculosis, three doses of DPT to protect against diphtheria, pertussis, and tetanus, three doses of the polio vaccine, and a measles vaccination by the age of 12 months.

The national immunization calendar in Serbia differs slightly, with the measles vaccine being administered between the ages of 12 and 18 months in the MMR form (Measles, Mumps, and Rubella).

Mothers were asked to provide vaccination cards for children under the age of five. Interviewers copied vaccination information from the cards onto the MICS3 questionnaire.

Overall, 71 percent of children aged 18 to 29 months have vaccination cards. If the child did

at any time before the survey, according to the vaccination card or the mother's report. In the bottom panel, for BCG, DPT and polio vaccines, only those who had been vaccinated before their first birthday are included. For MMR vaccine, in the bottom panel, the numerator includes only those children who were vaccinated before 18 months of age. For children without vaccination cards, the proportion of vaccinations given before the first birthday (18 months in the case of MMR) is assumed to be the same as for children with vaccination cards.

According to survey results, only 74 percent of children aged 18–29 months received a BCG vaccine by the age of 12 months. This result is quite unexpected and probably not accurate. It is much more an indicator of weaknesses in the BCG registration than of accurate BCG vaccination coverage. Namely, only 44 percent of children aged 18 to 29 months who had the vaccination card have the BCG vaccine registered, while according to the mother's report all children received a BCG. Most likely the problem

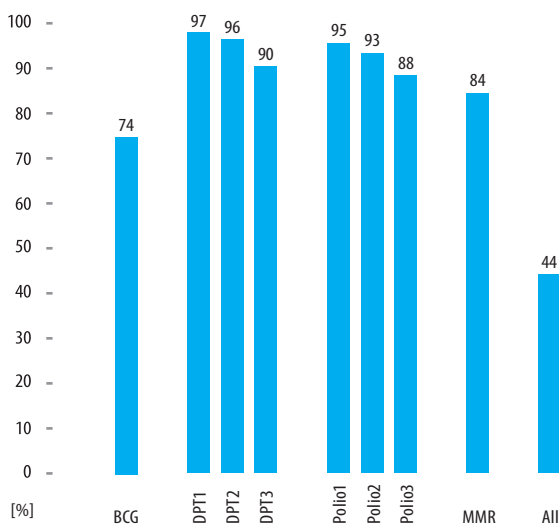
arises from lack of communication between different health facilities where the vaccine is given and where the vaccination card is provided for a child. Usually, a child receives the BCG vaccine in a maternity ward, and gets the vaccination card later, in the health post.

The first dose of DPT was given to 97 percent of children. The percentage declines for subsequent doses of DPT to 96 percent for the second dose, and 90 percent for the third dose (Figure CH.1). Similarly, 95 percent of children received polio 1 by age 12 months and this declines to 88 percent by the third dose. Polio and DPT are normally administered simultaneously. The slight difference in coverage rates can be explained by the introduction of the new practice whereby children are receiving IPV instead of the oral polio vaccine. The coverage for the MMR vaccine for children was somewhat lower: 84 percent of children aged 18–29 months received the measles vaccine before 18 months of age.

The percentage of children who had all eight recommended vaccinations by the specified age is 44 percent, far below the international and national target. When we change the denominator and include all children, we see that 57 percent of children aged 18 to 29 months have received all the recommended vaccinations. That indicates delayed vaccination, where some children, probably due to false temporary contra-indications, are receiving vaccines after the defined time.

Since there is a suspicion in validation of BCG vaccination coverage results, additional calculation of fully immunized children was done. The figures for fully immunized children are shown in the table CH.1a, and they indicate children receiving vaccinations according to all the aforementioned criteria and, in the case of all vaccines except the BCG, are based on information from both cards and mothers' reports. According to the aforementioned analysis of BCG vaccine registration, in this calculation, information on the BCG is only based on the mothers' report, while the probability that the child received it at the recommended time was

Figure CH.1
Percentage of children aged 18–29 months who received the recommended vaccinations by 12 months (by 18 months in case of MMR), Serbia, 2005



based on the vaccination card. Taking this “mix” of information into account was necessary for estimation of the BCG, and consequently estimation of full immunization coverage of children in Serbia. Based on this calculation, the proportion of fully immunized children according to the recommended schedule in Serbia is 60 percent, while 80 percent of children aged 18 to 29 months of age received vaccinations at some point preceding the survey.

Tables CH.2 show vaccination coverage rates among children 18–29 months by background characteristics. The figures indicate children receiving the vaccinations at any time up to the date of the survey, and are based on information from both the vaccination cards and mothers'/caretakers' reports.

Regional distribution indicates that the lowest percentage of fully immunized children is in South-East Serbia, at 31 percent, while the highest proportion of children who received all recommended vaccinations is in Vojvodina and East Serbia, at 81 and 63 percent, respectively.

Children living in urban settlements are more likely to be fully immunized; 62 percent of children living in urban, compared to 52 percent of children from rural areas have received all recommended vaccinations. Whether the child will receive all the recommended vaccinations, depends on the mother's education. The percentage of children who received all vaccinations rises from 54 percent for children whose mothers are less educated to 65 percent for children whose mothers have attended university. As far as household wealth is concerned, the majority of children from the middle and fourth quintile have been fully immunized, while nearly every second child from other socio-economic classes has received all the recommended vaccinations.

A specially jeopardized group of Roma children are those living in Roma settlements, with only 27 percent of them having received all vaccinations.

No significant differences between boys' and girls' immunization coverage have been found.

The findings presented are much lower than routine statistical data shows.

Oral Rehydration Treatment

Diarrhoea is the second leading cause of death among children under five worldwide. Most diarrhoea-related deaths in children are due to dehydration from loss of large quantities of water and electrolytes from the body in liquid stools. Management of diarrhoea – either through oral rehydration salts (ORS) or a recommended home fluid (RHF) – can prevent many of these deaths. Preventing dehydration and malnutrition by increasing fluid intake and continuing to feed the child are also important strategies for managing diarrhoea.

The goals are to: 1) reduce by half deaths due to diarrhoea among children under five by 2010

compared to 2000 (A World Fit for Children); and 2) reduce by two thirds the mortality rate among children under five by 2015 compared to 1990 (Millennium Development Goals). In addition, the World Fit for Children calls for a reduction in the incidence of diarrhoea by 25 percent.

The indicators are:

- Prevalence of diarrhoea
- Oral rehydration therapy (ORT)
- Home management of diarrhoea
- (ORT or increased fluids) AND continued feeding

Official figures show that in the past few years acute diarrhoea diminishes as one of the most frequent causes of child mortality. In Serbia, the last case of death caused by diarrhoea of a child under 5 was registered in 2004.

In the MICS questionnaire, mothers (or caretakers) were asked to report whether their child had had diarrhoea in the two weeks prior to the survey. If so, the mother was asked a series of questions about what the child had had to drink and eat during the episode of diarrhoea.

Overall, 5 percent of under-five children had had diarrhoea in the two weeks preceding the survey (Table CH.3), which would correspond to 1.4 episodes per child annually (assuming no seasonal variations and that the child only had had one diarrhoeal episode during the previous two weeks). High prevalence of diarrhoea is noticed among Roma and the poorest children, at 13 and 7 percent respectively. Regional distribution shows that the smallest number of children with diarrhoea was in Belgrade and East Serbia, while in South East Serbia almost one out of twelve children under five had had diarrhoea. A strong correlation between the mother's education and the child's health is noticeable; the percentage of children with diarrhoea falls from 7 percent for children whose mothers have primary or no education, to 5 and 4 percent for those whose mothers have

secondary, ie. higher education. With regards to a child's age, the peak of diarrhoea prevalence occurs in the weaning period, among children aged 6–23 months.

Table CH.3 also shows the percentage of children receiving various types of recommended liquids during the episode of diarrhoea. For this, so-called Oral Rehydration Therapy varieties of liquids are recommended for use during the episode of diarrhoea in Serbia: ORS fluid, mother's milk, porridge, soup, yoghurt, tea, sugar and salt solution and unsweetened juice. Since mothers were able to name more than one type of liquid, the percentages do not necessarily add up to 100. Using this wide definition of ORT, we found that a high percentage of under-five children (94 percent) are receiving some of the recommended liquids during diarrhoea episodes. Mainly children are receiving porridge or soup (63 percent) or yoghurt, tea, sugar and salt solution (68 percent). Use of ORS is relatively low, only 17 percent of children with diarrhoea received ORS fluids, being the highest in Belgrade – 26 percent. There are some variations in ORT use according to the type of settlement and mothers' education, but owing to the small number of children with diarrhoea in each sample group, those variations are not statistically significant. The only significance is the difference with Roma children, where one out of ten Roma children with diarrhoea is left without treatment.

More than one third (36 percent) of under-five children with diarrhoea drank more than usual while 64 percent drank the same or less (Table CH.4). Three-quarters of children ate somewhat less, the same or more (continued feeding), but one-quarter ate much less or ate almost nothing. In all, only 26 percent of children received home management of diarrhoea. Regional differences are significant, with half of the children in South East Serbia receiving home management of diarrhoea and only 15 percent of children in Vojvodina. Urban/rural differences are also strongly marked, with 29 percent of urban and 22 percent of rural

children being managed by the recommended model. Roma children from Roma settlements are poorly treated; only every seventh Roma child received home management of diarrhoea. A child's treatment is strongly dependent on the mother's educational level. The more educated the mother is, the more likely the child will be appropriately cared for.

Overall 71 percent of children with diarrhoea received ORT or increased fluids and continued feeding, with significant urban/rural differences (76 and 64 percent respectively).

Care Seeking and Antibiotic Treatment of Pneumonia

Pneumonia is the leading cause of death in children and the use of antibiotics in under-5s with suspected pneumonia is a key intervention. A World Fit for Children goal is to reduce by one-third the deaths due to acute respiratory infections.

Children with suspected pneumonia are those who had an illness with a cough accompanied by rapid or difficult breathing and whose symptoms were NOT due to a problem in the chest and a blocked nose. The indicators are:

- Prevalence of suspected pneumonia
- Care seeking for suspected pneumonia
- Antibiotic treatment for suspected pneumonia
- Knowledge of the danger signs of pneumonia

In the MICS questionnaire, children with acute respiratory infection are defined as those who had an illness with a cough accompanied by rapid or difficult breathing, and whose symptoms were due to a problem in the chest, or both a problem in the chest and a blocked nose, or whose mother did not know the source of the problem.

Table CH.5 presents the prevalence of suspected pneumonia and, if care was sought outside

the home, the location of that care. 3 percent of children aged 0–59 months were reported to have had symptoms of pneumonia during the two weeks preceding the survey. The proportion of children with suspected pneumonia is significantly higher among Roma children, at 10 percent.

Of all children with suspected pneumonia, 93 percent were taken to an appropriate provider. Boys and younger children were taken to an appropriate health provider more often.

Table CH.6 presents the use of antibiotics for the treatment of suspected pneumonia in under-5s by sex, age, region, residence and socio-economic factors. In Serbia, 57 percent of under-5 children with suspected pneumonia had received an antibiotic during the two weeks prior to the survey. Antibiotic treatment of suspected pneumonia is very low among Roma households, at only 45 percent.

Mothers' knowledge of the danger signs of pneumonia are presented in Table CH.6a. Overall, every third woman knows the two danger signs of pneumonia – fast and difficult breathing. 39 percent of mothers identified fast breathing and 48 percent of mothers identified difficult breathing as symptoms for taking children immediately to a health care provider. The most commonly identified symptom for taking a child to a health facility is when the child develops a fever (82 percent).

The percentage of mothers who know the two danger signs of pneumonia is extremely low among Roma and Muslim – ie. Bosnian mothers – at only 12 and 7 percent, respectively. Regional distribution shows that women living in Belgrade are most familiar with these two signs (57 percent), while in West Serbia this figure is only 15 percent. A mother's educational level is an important factor in recognising symptoms, since a higher number of women with secondary or higher education named both signs.

Solid Fuel Use

More than 3 billion people around the world rely on solid fuels (biomass and coal) for their basic energy needs, including cooking and heating. Cooking and heating with solid fuels leads to high levels of indoor smoke, a complex mix of health-damaging pollutants. The main problem with the use of solid fuels is products of incomplete combustion, including CO, polycyclic aromatic hydrocarbons, SO₂, and other toxic elements. Use of solid fuels increases the risks of acute respiratory illness, pneumonia, chronic obstructive lung disease, cancer, and possibly tuberculosis, low birth weight, cataracts, and asthma. The primary indicator is the proportion of the population using solid fuels as the primary source of domestic energy for cooking.

Overall, one third of all households in Serbia use solid fuels for cooking. Use of solid fuels is characteristic of Roma settlements, where 85 percent use solid fuels, almost three times above the national average. Use of solid fuels is lower in urban areas (14 percent), than in rural households (61 percent), as shown in Table CH.7. Differentials with respect to household wealth and the educational level of the head of the household are also significant. The proportion of households that use solid fuels for cooking rapidly decreases from 86 percent among poorest households to 21 percent among the middle class, while hardly any rich household uses solid fuel for cooking.

Cooking with electricity is highest in Belgrade, where 84 percent of interviewed households use electricity, and lowest in West Serbia at 27 percent. In Vojvodina the usage of electricity and gas is approximately the same, with 43 percent of households in Vojvodina cooking with electricity and 38 percent using gas. With regards to household wealth, as expected, cooking with electricity is inversely proportional to solid fuel usage: 89 percent of the richest, as opposed to 8 percent of the poorest households cook with electricity.

Solid fuel use alone is a poor proxy for indoor air pollution, since the concentration of the pollutants is different when the same fuel is burnt in different stoves or fires. Use of closed stoves with chimneys minimises indoor pollution, while an open stove or fire with no chimney or hood means that there is no protection from the harmful effects of solid fuels. The type of stove used with a solid fuel is depicted in Table CH.8.

Approximately 96 percent of households that use solid fuels for cooking have a closed stove with a chimney. The proportion of other types of stoves are 1 or below 1 percent, with the exception of Belgrade, where 6 percent of households have an open stove or fire with a chimney. Still, barely a single household cooks on a type of stove, without protection from the effects of solid fuels.

Water and Sanitation

Safe drinking water is a basic necessity for good health. Unsafe drinking water can be a significant carrier of diseases such as trachoma, cholera, typhoid, and schistosomiasis. Drinking water can also be tainted with chemical, physical and radiological contaminants with harmful effects on human health. In addition to its association with disease, access to drinking water may be particularly important for women and children, especially in rural areas, who bear the primary responsibility for carrying water, often over long distances.

The distribution of the population according to the source of drinking water is shown in Table EN.1 and Figure EN.1. The population using *improved sources* of drinking water are those using any of the following types of supply: piped water (into their dwelling, yard or plot, from a public or local piped system), a public tap/standpipe, a tubewell/borehole, a protected well and spring. Bottled water is considered an improved water source only if the household is using an improved water source for other purposes, such as hand washing and cooking.

ENVIRONMENT

The MDG goal is to reduce by half, between 1990 and 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation. The World Fit for Children goal calls for a reduction in the proportion of households without access to hygienic sanitation facilities and affordable and safe drinking water by at least one-third.

The list of indicators used in MICS are as follows:

Water

- Use of improved drinking water sources
- Use of adequate water treatment methods
- Time to source of drinking water
- Person collecting drinking water

Sanitation

- Use of improved sanitation facilities
- Sanitary disposal of child faeces

Overall, 99 percent of the population uses an improved source of drinking water – 99 percent in urban areas and 98 percent in rural areas.

The source of drinking water for the population slightly varies according to region (Table EN.1). In West Serbia, 66 percent of the population uses drinking water from a public or local water supply, and there is the highest percentage of tubewell/borehole and protected well or spring water use at 32 percent. In Vojvodina, 14 percent of the household population that has access to improved water sources uses bottled water, while in the West region use of bottled water is nearly zero.

The more interesting information for the country is the proportion of the population with a water source that is piped into the dwelling or yard from a water supply system. 77 percent of the population uses water from a public or local water supply as a main source of drinking water. There is a significant difference in terms of water supply between urban and rural settlements. 91 percent of people in towns in Serbia use water from public

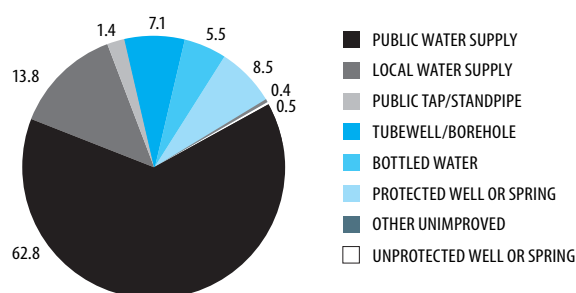
or local water-supply installations in their dwellings or yards as a main source of drinking water. In rural settlements only 60 percent of people get their drinking water in the dwelling/yard from a public or local water-supply system. There are regional differences in Serbia: whereas 87 percent of the population in the Belgrade uses water piped into the dwelling or yard, the proportion in West Serbia is lowest, at 66 percent.

If we look at this restrictive definition, we can notice that the poorest households are a more jeopardized group. Only 49 percent of the poorest compared to 89 percent of the richest population has access to water from public or local water supply systems.

Use of in-house water treatment is presented in Table EN.2. Households were asked about ways they may be treating water at home to make it safer to drink – boiling, adding bleach or chlorine, using a water filter, and using solar disinfection were considered to be proper drinking water treatments. The table shows the percentage of household members using appropriate water treatment methods, separately for all households, and for households using improved and unimproved drinking water sources.

In Serbia, only 4 percent of the population uses appropriate water treatment. Use of appropriate water treatment greatly depends on the region the household lives in. While in Belgrade, 9 percent of the population treats water to make it safer, only 1 percent of the East Serbian population does the same. More importantly, only 8 percent of the population that has unimproved water sources apply appropriate water treatment methods. The socioeconomic status and educational level of the head of the household have a great influence on practising water treatment. Wealthier households and those with highly educated heads of the household appropriately treat their drinking water more often than poorer households and those with less educated heads of the family. The Roma population living in Roma settlements represents the most unaware group of users of correct water treatment methods – only 1 percent of them use any water treatment.

Figure EN.1
Percentage distribution of household members by source of drinking water Serbia, 2005



The amount of time it takes to obtain water is presented in Table EN.3, and the person who usually collected the water in Table EN.4. Note that these results refer to one round trip from home to the drinking water source. Information on the number of trips made in one day was not collected. In most of the households (96 percent) the drinking water source is on the premises. For 3 percent of all households, it takes less than 30 minutes to get to the water source and bring water, while about 1 percent of households spend 30 minutes or more for this purpose. When we exclude the households with water on the premises, the average time to the source of drinking water is 22 minutes. Unexpectedly, more time for collecting water is spent in urban settlements (33 minutes) than in rural ones (19 minutes). It is also interesting that the average time to collect water in Belgrade as a typical urban city is quite high, 31 minutes. Although the percentage of the Roma population that has water on the premises is under the national average – 86 percent – they spent less time collecting water (19 minutes), since they usually have a source of water in the Roma settlement they live in.

In the majority of households (53 percent), an adult male is usually the person collecting the water, when the source of drinking water is not on the premises. Adult women collect water in 41 percent of cases, while in about 1 percent of households, a female or male child under the age of 15 collects water. In Roma settlements,

the situation is a little different. In nearly two thirds of Roma households, an adult woman is the person in charge of collecting water.

Inadequate disposal of human excreta and personal hygiene is associated with a range of diseases. Improved sanitation facilities for excreta disposal include: flush or pour flush to a piped sewer system, a septic tank, no flush with a water-proof septic tank and traditional pit latrine.

Nearly 100 percent of the population of Serbia is living in households using improved sanitation facilities (Table EN.5), with no differences between the population living in urban and rural settlements.

A more appropriate analysis for the country is when breaking down the sanitary means according to type: toilets linked to sewage systems; toilets linked to septic tanks, and latrines. The safest way of disposing of human excreta and liquid waste is by means of a sewage system; 53 percent of the population live in a household with such means. 37 percent use a toilet that flushes into a septic tank. Altogether, 89 percent of the population has flush toilets either linked to a sewage system or a septic tank.

Geographical distribution shows all the variations within the country: in Vojvodina households mostly used a flush to a septic tank – 55 percent – while in Belgrade (76 percent), Central (56 percent) and South-East Serbia (56 percent) a flush to piped sewer system is predominant. In West and East Serbia both systems are equally used. A higher percentage of traditional pit latrines are used in the poorest regions (in the South East, 19 percent; and in the West, 15 percent).

There are important urban/rural differences when it comes to sanitation facilities. The urban population mostly (84 percent) uses a flush toilet linked to a sewage system, while in rural areas the population mainly (64 percent) uses a flush to a septic tank, and then traditional pit latrine (19 percent). Only 15 percent of rural households have a toilet in a piped sewer system.

Use of a flush to the sewer system, as the most appropriate type of toilet facility is much higher among the richest households – 97 percent, compared to 7 percent of the poorest who are connected to the piped sewer system.

Half of the Roma living in Roma settlements use the traditional pit latrine. A third of their households are connected to the piped sewer system – mainly those in peri-urban areas. 5 percent live without toilet facilities.

Safe disposal of child faeces is the child's last stool which was disposed of, using a toilet or rinsed into a toilet or latrine. Disposal of the faeces of children between 0 and 2 years of age is presented in Table EN.6.

In one out of three households with children aged 0 to 2 years the child faeces are safely disposed of. Namely, in 11 percent of households, children use a toilet, and in 26 percent of the cases their faeces were put/inserted into the toilet of a latrine. Findings show that the most frequently used method of disposing of child faeces in Serbia is throwing it into the rubbish (58 percent of the households).

Regional distribution shows that the lowest number of safe disposals of child faeces is in East Serbia, at 21 percent. This practice is more used in Vojvodina, West and Central Serbia, at about 40–42 percent.

Only 20 percent of Roma households with children aged 0 to 2 years are disposing of their children's faeces safely. 62 percent of them throw child faeces into the rubbish.

An overview of the percentage of households with improved sources of drinking water and sanitary means of excreta disposal is presented in Table EN.7. Overall, 99 percent of the population in Serbia has access to improved water sources and sanitation. Exceptions are Roma and the poorest households, where slightly lower percentages have access to both improved water sources and sanitation facilities.

Security of Tenure and Durability of Housing

Target 11 of MDG is the achievement of significant improvements in the lives of at least 100 million slum dwellers, and the related indicator is the proportion of urban household members living in slum housing. In MICS, three indicators were introduced to measure issues related to slum housing: security of tenure, durability of housing, and the proportion living in slum households. An urban household is considered a slum in MICS if it fulfils one of the following conditions: improved drinking water sources are not used; improved sanitation facilities are not used; the living area is not sufficient; housing is not durable, or security of tenure is lacking.

Lack of security of tenure is defined as the lack of formal documentation for the residence or the perceived risk of eviction. Table EN.8 is on the security of tenure. In urban areas covered in Serbia MICS, 13 percent of households do not have formal documentation for their residence, and 7 percent of respondents to the household questionnaire indicated that there is a risk of eviction. Combining these figures, it is observed that 17 percent of households do not have security of tenure. As additional information, the table also shows that 13 percent of household members have indeed been evicted from a dwelling they were residing in during the last 15 years.

Lack of security of tenure is highest among the Roma population living in Roma settlements. As many as 38 percent of Roma households live in dwellings without formal documentation, and every fifth Roma household feels that there is a risk of eviction. Security of tenure is highly linked to household wealth. The wealthier the household is, the more secure the tenure. The proportion of households that do not have security of tenure decreases from 31 to 11 percent from the poorest to the richest households. These results are not only a consequence of lack of formal documentation; they are highly correlated with the perceived risk of eviction.

Finding that every eighth household was forced to move in the last 15 years is not so surprising considering the political situation and the civil wars that happened during this period. The fact that 22 percent of these households are from the poorest class, indicates that they were not in a position to improve their socio-economic status.

Structures that households are inhabiting considered non-durable in MICS are those where the floor material is natural and two or more bad conditions were identified, like cracks or openings in the wall; no windows or windows with broken glass; visible holes in the walls; an incomplete roof or an insecure door; or where conditions of vulnerability to accidents in terms of the dwelling's surroundings exist, or if the structure is located in or near a hazardous area (eg. a landslide area, a flood-prone area, a river bank, a steep hill, a rubbish tip, an industrial pollution area, a railway line, power plant or flyover). Table EN.9 provides information on the findings of the survey. The proportion of households and household members that live in dwellings which are considered non-durable is very low, under 1 percent, with the exception of Roma households. As many as 12 percent of Roma live in non-durable dwellings. 14 percent of dwellings inhabited by Roma have a natural floor, and 4 percent of them are located in hazardous areas.

Table EN.10 brings together all 5 components of slum housing (see above). Overall, 19 percent of households are considered to be slum housing. 21 percent of the population is living in those households. The Roma population represents the most jeopardized group regarding security of tenure and poor dwelling conditions. Around 60 percent of Roma households and as many as 63 percent of Roma household members live in slum housing.

Contraception

Appropriate family planning is important to the health of women and children by: 1) preventing pregnancies that are too early or too late; 2) extending the period between births; and 3) limiting the number of children. A World Fit for Children goal is access for all couples to information and services to prevent pregnancies that are too early, too closely spaced, too late or too numerous.

Current use of contraception was reported by less than half (41 percent) of women currently

Contraceptive prevalence of both traditional and modern methods seemed to increase with age, up to the age of 40, and then there is a pattern of decreased contraception use. Women's education level, ethnicity and wealth index are significantly linked to contraceptive prevalence (Figure RH.1).

The percentage of women using any method of contraception rose from 33 percent among those with primary or no education to 41 percent among women with secondary education, and up to 52

REPRODUCTIVE HEALTH

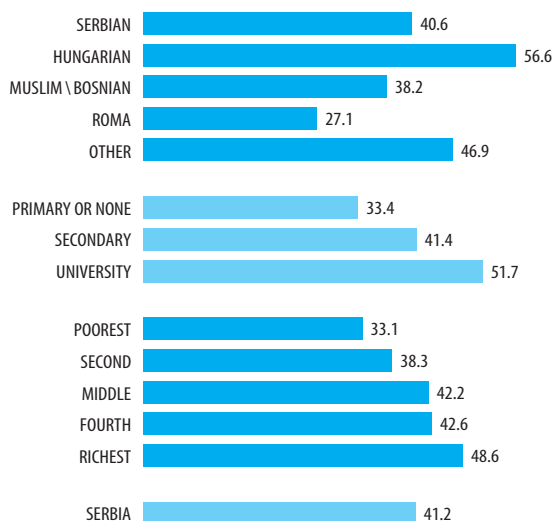
married or in union (Table RH.1). Women in Serbia are more frequently using traditional contraceptive methods – 23 percent. The most popular contraceptive methods are withdrawal and periodic abstinence, at 14 and 8 percent, respectively. The next most popular contraceptive method is the condom at 8 percent. 6 percent use intrauterine devices, 3 percent use the pill and less than 1 percent of married women reported the use of some other method for preventing pregnancy.

Contraceptive prevalence ranges from 27 percent in Central Serbia to 54 percent in East Serbia. Each area has its own characteristics in terms of practices used. For example, in East and South-east Serbia, which are considered underdeveloped parts of the country, women predominantly use traditional contraceptive methods, while in Belgrade and Vojvodina, the most developed areas, modern methods of contraception are prevalent.

percent among women with higher education. Also, as the educational level increases, the proportion using modern methods – particularly the condom – increases, and the proportion using withdrawal as a method decreases. A similar pattern is noticed with regards to wealth: women from the richest households are using modern contraceptive methods more than average. The use of any contraceptive method decreases as poverty increases.

Contraceptive usage is highest among Hungarian women, where 57 percent of women are using mainly modern methods of contraception. Only one in four married Roma women are using any contraceptive method, usually withdrawal (every fifth). Only 4 percent of Roma women use modern methods. Traditional methods of contraception are also present among Muslims – i.e. Bosnians – but their main choice is periodic abstinence. In both of these ethnic groups, condom usage is extremely low.

Figure RH.1
Use of contraception, modern and traditional contraceptive methods, Serbia, 2005



Unmet Need

The unmet need⁹ for contraception refers to fecund women who are not using any method of contraception, but who wish to postpone the next birth or who wish to stop childbearing altogether. Unmet need is identified in MICS by using a set of questions eliciting current behaviour and preferences pertaining to contraceptive use, fecundity, and fertility preferences.

Women with an unmet need for spacing include women who are currently married (or in union), fecund (are currently pregnant or think that they are physically able to become pregnant), are currently not using contraception, and want to space their births. Pregnant women are considered to want to space their births when they did not want the child at the time they got pregnant. Women who are not pregnant are classified in this category if they want to have a(nother) child, but want to have the child at least two years later, or after marriage.

Women with an unmet need for limiting are those women who are currently married (or in union), fecund (are currently pregnant or think that they are physically able to become pregnant), are currently not using contraception, and want to limit their births. The latter group includes women who are currently pregnant but had not wanted the pregnancy at all, and women who are not currently pregnant but do not want to have a(nother) child.

The total unmet need for contraception is simply the sum of the unmet need for spacing and the unmet need for limiting.

Using information on contraception and unmet need, the percentage of demand for contraception satisfied is also estimated from the MICS data. The percentage of demand for contraception satisfied is defined as the proportion of women currently married or in union who are currently using contraception, out of the total demand for contraception. The total demand for contraception includes women who currently have an unmet need (for spacing or limiting), plus those who are currently using contraception.

Table RH.2 shows the results of the survey on contraception, unmet need, and the satisfied demand for contraception.

28 percent of married women or women in union in Serbia have an unmet need for contraception. Since there is a close link to contraception use, the findings according to background characteristics are very similar to those of contraceptive prevalence. We notice that as women's education and wealth decrease, so too does their satisfaction of their demand for contraception. Above all, needs for contraception are not satisfied among the "most at risk" population: Roma women living in Roma settlements, uneducated women, and women from the poorest households.

Regional distribution shows that an unmet need for contraception is lowest in East Serbia.

⁹ Unmet need measurement in MICS is somewhat different to that used in other household surveys, such as the Demographic and Health Surveys (DHS). In DHS, more detailed information is collected on additional variables, such as postpartum amenorrhoea, and sexual activity. Results from the two types of surveys are strictly not comparable.

Conversely, women from West Serbia, to the largest degree, have unmet needs for contraception. Unmet need for contraception mainly manifests as unmet need for limiting, with the exception of younger women, 15 to 24 years old, whose needs are mainly manifested as a need for spacing.

Antenatal Care

The antenatal period presents important opportunities for reaching pregnant women with a number of interventions that may be vital to their health and well-being, and that of their infants. Better understanding of foetal growth and development and its relationship to the mother's health has resulted in increased attention to the potential of antenatal care as an intervention to improve both maternal and newborn health. For example, if the antenatal period is used to inform women and families about the danger signs and symptoms and the risks of labour and delivery, it may provide the route for ensuring that pregnant women do, in practice, deliver with the assistance of a skilled health care provider. The antenatal period also provides an opportunity to supply information on birth spacing, which is recognized as an important factor in improving infant survival. The prevention and management of anaemia during pregnancy and treatment of STIs can significantly improve foetal outcomes and improve maternal health.

Adverse outcomes such as low birth weight can be reduced through a combination of interventions to improve women's nutritional status and prevent infections (e.g., STIs) during pregnancy. More recently, the potential of the antenatal period as an entry point for HIV prevention and care, in particular for the prevention of HIV transmission from mother to child, has led to renewed interest in access to and use of antenatal services.

The WHO recommends a minimum of four antenatal visits based on a review of the effectiveness of different models of antenatal care. WHO guidelines are specific on the content of antenatal care visits, which include:

- Blood pressure measurement
- Urine testing for bacteriuria and proteinuria
- Blood testing to detect syphilis and severe anaemia
- Weight/height measurement (optional)

Coverage of antenatal care (by a doctor, nurse, or midwife) is almost universal in Serbia, with 99 percent of women receiving antenatal care at least once during pregnancy. Lower antenatal care coverage is noticed among Roma, the youngest and less educated women, and women from the poorest households.

Looking at the content of antenatal care received, almost all women in Serbia have their blood pressure measured, a blood sample and urine specimen taken. 6 percent of women are not weighed. A Papanicolaou test is performed on half of the women in Serbia during the antenatal care provided, and is performed mostly in Belgrade. Those interventions are performed more frequently on the more educated and richest women. Coverage of Roma women with almost all reported interventions is 20 percent lower than average.

The type of personnel providing antenatal care to women aged 15–49 years who gave birth in the two years preceding is presented in Table RH.3. 98 percent of women have received antenatal care from a professional health worker (doctor, nurse or midwife). In the majority of cases, care is provided by a medical doctor (98 percent), while other medical personnel represent 1 percent or less. Contrary to these general results, antenatal care provided by medical personnel, especially a doctor is significantly lower among Roma and less educated women.

Assistance at Delivery

Three quarters of all maternal deaths occur during delivery and the immediate post-partum period. The single most critical intervention for safe motherhood is to ensure that a competent health worker with midwifery skills is present at every birth, and that transport is available to a referral facility for obstetric care in case of emergency. A World Fit for Children goal is to ensure that women have ready and affordable access to skilled attendance at delivery. The indicators are the proportion of births with a skilled attendant and the proportion of institutional deliveries. The skilled attendant at delivery indicator is also used to track progress towards the Millennium Development target of reducing the maternal mortality rate by three quarters between 1990 and 2015.

The MICS included a number of questions to assess the proportion of births attended by a skilled attendant. A **skilled attendant** includes a doctor, nurse, midwife or auxiliary midwife.

About 99 percent of births occurring in the two years prior to the MICS survey were delivered by skilled personnel (Table RH.5). There are no statistically significant differences in any of the categories, except ethnicity. Roma women from

Roma settlements and Muslim/Bosnian women are slightly behind the national average – 93 and 94 percent of those women respectively were delivered by skilled personnel.

In most of the cases (87 percent) doctors assisted at the delivery. Doctors assisted at the delivery in a higher percentage to the youngest, more educated and richest women. On average, an auxiliary midwife assisted in 10 percent of births in two years prior to the MICS survey. The other type of assistance during delivery is practically absent in Serbia (the exception are Roma again where 6 percent were delivered without assistance or with the assistance of a relative or friend). Roma women from Roma settlements more frequently delivered with the help of an auxiliary midwife.

In Serbia, 99 percent of births which occurred in the past two years were delivered in health facilities. Similar to all other indicators, women from the “most at risk population”, Roma in Roma settlements happened to deliver in health facilities less than the average female population, 93 percent. Although there are some disparities regarding women’s education and living standard, they are not of statistical significance.

It is well recognized that a period of rapid brain development occurs in the first 3–4 years of life, and the quality of home care is the major determinant of a child's development during this period. In this context, adult activities with children, the presence of books in the home, for the child, and the conditions of care are important indicators of quality of home care. A World Fit for Children goal is that “children should be physically healthy, mentally alert, emotionally secure, socially competent and ready to learn.”

Information on a number of activities that support early learning was collected in the survey.

There are no gender or urban/rural differences found in family support for learning. The most significant differences concerning the parents' involvement in development activities were in the terms of the child's age. Children aged 2 to 5 years are more likely to be supported in different activities by their parents, than younger children (94 as opposed to 69 percent). The higher the parents' education is, the more they are involved in supporting child development. The same statement goes for wealth index – the richer families are, the more they are involved in child development (particularly fathers). While more or less all ethnic groups are showing similar behaviour patterns,

CHILD DEVELOPMENT

These included the involvement of adults with children in the following activities: reading books or looking at picture books, telling stories, singing songs, taking children outside the home, compound or yard, playing with children, and spending time with children naming, counting, or drawing things.

For more than four in five (84 percent) under-five children, an adult engaged in more than four activities that promote learning and school readiness during the 3 days preceding the survey (Table CD.1). The average number of activities that adults engaged in with children was 5. The father's involvement in such activities was somewhat limited, with about 70 percent of fathers involved in, on average, 2 activities with the child. Around 5 percent of under-5 children in Serbia live in a household without their fathers.

Roma parents are showing a different habit – every second Roma child received development support from family members, with also a lower (on average 3) number of activities. Paternal involvement in child activities among the Roma population is much lower – only one third of fathers are involved in child development, with less than one activity.

Exposure to books in early years not only provides the child with greater understanding of the nature of print, but may also give the child opportunities to see others reading, such as older siblings doing school work. The presence of books is important for later school performance and IQ scores.

In Serbia, in four out of five households, three or more books (children's and non-children's) are present (Table CD.2). The median number of books is 10. There are no gender differences, but it is found that a child's exposure to books

is strongly influenced by household wealth and the mother's education. While only 54 percent of children whose mother has primary or less education live in a household where more than 3 non-children's books are present, that percentage is as much as 90 among children whose mothers are highly educated. Socio-economic status shows a similar pattern regarding book ownership. Only 50–54 percent of the poorest households own 3 or more books from both categories, while this figure is 91–94 percent in rich families. The number of children's books present in the household varies according to the child's age. 87 percent of children aged between 2 and 5, as opposed to 67 percent of younger children live in a household where 3 or more children's books are present. Regional distributions show the highest percentage of books present in Belgrade (about 90 percent), and the lowest in Central Serbia (about 69 percent). Books are more present in urban than rural households. There are significant differences regarding exposure to books between Roma children and the rest of the population. One in four Roma children is living in a household with books. The median number of books present in Roma households is zero.

Table CD.2 also shows that 21 percent of children aged 0–59 months had 3 or more playthings to play with in their homes, while 5 percent had no playthings. The playthings in MICS included household objects, homemade toys, toys that came from a store, and objects and materials found outside the home. Most children, 88 percent, play with toys that come from a store; one third of them play with household objects or objects and materials found outside the house. Just 20 percent of children are playing with homemade toys. Gender differences are not

noticed. Interestingly, playthings are less present in Belgrade than in other regions. As expected in rural areas, there are more objects and materials found outside the home than in urban areas (34 vs 27 percent). As many as 13 percent of Roma and of Muslim children do not have any playthings. Roma children play with objects and homemade toys above average, and with toys that came from a store below average. The percentage of children from the poorest households that play with toys that came from a store is significantly below average, but they more often play with homemade toys and objects and materials found outside the home.

Leaving children alone or in the presence of other young children is known to increase the risk of accidents. In MICS, two questions were asked to find out whether children aged 0–59 months were left alone during the week preceding the interview, and whether children were left in the care of other children under 10 years of age.

Table CD.3 shows that 9 percent of children were left with inadequate care during the week preceding the survey – 7 percent of children aged 0–59 months were left in the care of other children, while 5 percent were left alone during the week preceding the interview. Female and children from rural areas are more often left with inadequate care. This practice is more present in Belgrade, West and Central Serbia (10–11 percent) than in Vojvodina (5 percent). Older children (aged 24–59 months) were left with inadequate care more than younger ones. Mothers with primary or no education and the poorest tended to leave the child with inadequate care more than others. This practice is also more present in Roma and Muslim/Bosnian families (18 and 16 percent of children left without proper care, respectively).

Pre-School Attendance and School Readiness

Attending pre-school education in an organised learning or child education programme is important for children's readiness for school. One of the World Fit for Children goals is the promotion of early childhood education.

In Serbia, every third child aged between 3 and 5 years is attending some form of organised early

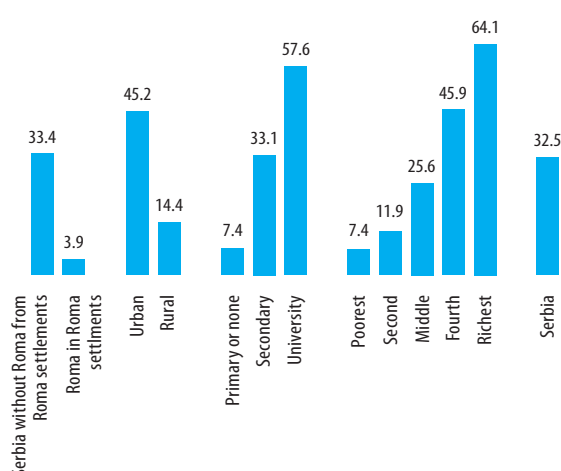
The small national coverage is even smaller among Roma (4 percent coverage), the poorest, mothers with primary or no education (7 percent) and in rural areas (14 percent). Regionally it is more prevalent in Belgrade (57 percent), and lowest in the East and South East region (18 and 21 percent respectively). Those facts are strong evidence that the system favours

EDUCATION

education programme (Table ED.1). While there are no gender differences, all other differences are very prominent (see Figure ED.1).

the better-off, the richest, and working families in the main urban centres.

Figure ED.1
Percentage of children aged 36–59 months who are attending some form of organised early childhood education program, Serbia, 2005



The table ED.1 also shows the proportion of children in the first grade of primary school who attended pre-school the previous year (Table ED.1), an important indicator of school readiness. Overall, 89 percent of children who are currently aged 7 and attending the first grade of primary school were attending pre-school the previous year. This proportion was somewhat expected, mainly owing to the fact that the pre-school programme before first grade is obligatory in Serbia. Again, the biggest difference is coverage of Roma and children from the poorest households, where just 62 percent of Roma and 77 percent of the poorest children attended pre-school programmes one year prior to the first grade. No significant differences in terms of child gender, region and type of settlement were found.

Primary and Secondary School Participation

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

The indicators for primary and secondary school attendance include:

- Net intake rate in primary education
- Net primary school attendance rate
- Net secondary school attendance rate
- Net primary school attendance rate of children of secondary school age
- Female to male education ratio (GPI)

The indicators of school progression include:

- Survival rate to grade five
- Transition rate to secondary school
- Net primary completion rate

Of children who are of primary school entry age (children that are to turn 7 in the observed calendar year) in Serbia, 94 percent are attending the first grade of primary school (ED.2). The only significant difference concerning intake rate in primary education is detected in the case of Roma children. Only 66 percent of them enter primary school on time.

Table ED.3 shows the percentage of children of primary school age attending primary or secondary school. The majority of children of primary school age are attending school (98 percent of children that are to turn 7 to 14 in the observed calendar year). Similar to the intake rate findings,

the only category that is significantly lower is the category of Roma children. The rate of primary school attendance among this population is significantly lower, at 74 percent. On average, there are no significant differences between boys and girls in regard to elementary education attendance. Again, exceptions are Roma children, where 76 percent of boys compared to 71 percent of girls are attending primary school. Among Roma children, the child's age has a strong influence on the school attendance rate. The attendance rate is lowest in the first grade. The maximum is reached between the ages of 8 and 10, and after that, a serious drop is visible at the age of 11 with girls, and at the age of 12 with boys. The difference between the rate of primary education and the primary school attendance rate indicates that there are certain children who start their education later than expected. This occurrence is more frequent among Roma children, since the difference between rates is higher in their case than the average (8 to 5 percent).

84 percent of children of secondary school age are attending secondary school (Table ED.4). Of the remaining 16 percent, 1.5 percent are attending primary school (Table ED.4w), while the rest are out of school.

The proportion of children attending secondary school among the Roma population is drastically below average, at 10 percent (Table ED.4). Again, among this ethnic group, gender differences are significant: the proportion of boys in secondary school is twice as high as the proportion of girls (14 and 6 percent), which is the complete opposite of the rest of the population, where the percentage of girls in secondary school is slightly higher. Secondary school attendance is influenced by household wealth. About 64 percent of children from the poorest households are attending secondary school, while that is the case with 94 percent of children from the richest households. Children from urban areas are more likely to continue their education after primary school.

The percentage of children entering first grade who eventually reach grade 5 is presented in Table ED.5. Nearly all children starting grade one will eventually reach grade five. The only exception is Roma children from Roma settlements. Data shows that 97 percent of Roma children entering first grade will eventually reach grade five. No other significant differences were observed. Notice that this number includes children that repeat grades and that eventually move up to reach grade five.

The net primary school completion rate and transition rate to secondary education is presented in Table ED.6. At the time of the survey, 91 percent of children of primary completion age (14 years) were attending the last grade of primary education. A significantly lower percentage of Roma children (28 percent) attended the last grade of primary education. This value should be distinguished from the gross primary completion ratio which includes children of any age attending the last grade of primary. The majority of children who successfully completed the last grade of primary school (97 percent) were found to be attending the first grade of secondary school. No significant gender, regional or socioeconomic influences on education continuance were detected.

The ratio of girls to boys attending primary and secondary education is provided in Table ED.7. These ratios are better known as the Gender Parity Index (GPI). Notice that the ratios included here are obtained from net attendance ratios rather than gross attendance ratios. The latter ratios provide an erroneous description

of the GPI mainly because in most of the cases the majority of over-aged children attending primary education tend to be boys. The table shows that gender parity for primary school is close to 1.0, indicating no difference in the attendance of girls and boys to primary school. However, the indicator goes up to 1.1 for secondary education. The disparity of girls is only pronounced in the Roma in Roma settlements, where the GPI for primary and secondary school are 0.94 and 0.42, respectively.

Adult Literacy

One of the World Fit for Children goals is to assure adult literacy. Adult literacy is also an MDG indicator, relating to both men and women. In MICS, since only a women's questionnaire was administered, the results are based only on females aged 15–24. Literacy was assessed on the ability of women to read a short simple statement, or on school attendance. The literacy percentage is presented in Table ED.8. The literacy rate of females, aged 15–24 years in Serbia is 96 percent. As expected, the literacy level is lower among women with no or primary education. Younger women aged 15–19 are less literate than women aged 20–24 (93 compared to 98 percent). 52 percent of Roma women aged 15 to 24 years are literate – much lower than the national average. The women from the second and middle wealth index quintile classes are the most literate.

Birth Registration

The Convention on the Rights of the Child states that every child has the right to a name and a nationality and the right to protection from being deprived of his or her identity. Birth registration is a fundamental means of securing these rights for children. The World Fit for Children states the goal of developing systems to ensure the registration of every child at or shortly after birth, and fulfil his or her right to acquire a name and a nationality, in

moral or social development...” The World Fit for Children mentions nine strategies to combat child labour and the MDGs call for the protection of children against exploitation. In the MICS questionnaire, a number of questions addressed the issue of child labour, that is, children 5–14 years of age involved in labour activities. A child is considered to be involved in child labour activities at the moment of the survey if during the week preceding the survey:

CHILD PROTECTION

accordance with national laws and relevant international instruments. The indicator is the percentage of children under 5 years of age whose birth is registered.

The births of 99 percent of children under five years in Serbia have been registered. There are no significant variations in birth registration across sex, age, type of settlement, mother’s education or wealth index. Only Roma from Roma settlements are somewhat less likely to have their births registered than other children (95 percent registered).

Child Labour

Article 32 of the Convention on the Rights of the Child states: “Parties recognize the right of the child to be protected from economic exploitation and from performing any work that is likely to be hazardous or to interfere with the child’s education, or to be harmful to the child’s health or physical, mental, spiritual,

- Ages 5–11: at least one hour of economic work or 28 hours of domestic work per week.
- Ages 12–14: at least 14 hours of economic work or 28 hours of domestic work per week.

This definition allows one to differentiate child labour from child work and to identify the type of work that should be eliminated. As such, the estimate provided here is a minimum of the prevalence of child labour since some children may be involved in hazardous labour activities for a number of hours that could be less than the numbers specified in the criteria explained before. Table CP.2 presents the results of child labour by the type of work.

4 percent of children aged 5 to 14 years in Serbia are involved in child labour, mainly unpaid and working for the family business.

There is a strong correlation between child labour and the type of settlement a child is living in. Children living in rural areas are twice as involved in child labour activities (6 percent), than

urban children (3 percent). The poorest children and Roma children from Roma settlements are the most exploited group when it comes to child labour. As many as 8 percent of children from the poorest households and 7 percent of Roma children are involved in child labour. The pattern is the same – it is mainly unpaid, family business-type work. The exception are Roma children, who work outside home, doing an equal amount of paid and unpaid work. Children whose mothers have secondary or higher education are less likely to be involved in labour (4 percent), than children whose mothers have primary or no education (6 percent).

Table CP.3 shows the percentage of children classified as student labourers or as labourer students. Student labourers are children attending school that were involved in child labour activities at the time of the survey. More specifically, of the 92 percent of children aged 5–14 attending school, 4 percent are also involved in child labour activities. The proportion of student labourers is almost two times higher among the poorest and Roma children, at 8 percent and 6 percent respectively.

On the other hand, out of the 4 percent of children classified as child labourers, the majority of them are also attending school (93 percent). This percentage is slightly lower among the poorest children; 89 percent of those who work are also attending school, while among Roma children this percentage is significantly lower (58 percent). Statistically, it is important to emphasise that only 90 percent of children from the poorest households and 67 percent of Roma children aged 5 to 14 are attending school.

Child Discipline

As stated in *A World Fit for Children*, “children must be protected against any acts of violence...” and the Millennium Declaration calls for the protection of children against abuse, exploitation and violence. In the Serbia MICS survey, mothers/caretakers of children aged between 2 and 14 were asked a series of questions on the methods parents tended to use to discipline their children

when they misbehaved. Note that for the child discipline module, one child aged 2–14 per household was selected randomly during fieldwork. Out of these questions, the following indicators used to describe aspects of child discipline are: 1) the number of children aged 2–14 that experience psychological aggression as punishment *or* minor physical punishment *or* severe physical punishment; and 2) the number of parents/caretakers of children 2–14 years of age that believe that in order to raise their children properly, they need to physically punish them.

In Serbia, 73 percent of children aged 2–14 years were subjected to at least one form of psychological or physical punishment by their mothers/caretakers or other household members. Two thirds of those children were exposed to psychological punishment, half of them to minor physical punishment and 7 percent were subjected to severe physical punishment. The latter figure correlates with the percentage of mothers/caretakers who believed that children should be physically punished, which unfortunately implies that they are applying this belief in practice. Every fifth child in Serbia has been disciplined through non-violent methods, and 6 percent of children have neither been punished nor disciplined which leaves an open question: how are they disciplined?

Male children were subjected more to both minor and severe physical discipline (53 and 8 percent) than female children (49 and 5 percent). Violent disciplining is most practised in South-East Serbia, where two-thirds of children experienced minor, and one in seven children severe physical punishment. A seed of a good practice can be seen in Belgrade, where 27 percent of caregivers are using non-violent disciplinary methods. Physical punishment decreases with the age of the child. The mother’s education is strongly correlated with the child disciplining methods used – less educated mothers use non-violent methods less, and violent methods more in child disciplining. The same pattern is seen looking at the wealth index – use of violent methods decreases and use of non-violent methods increases according to the degree of wealth. 14 percent of the poorest caregivers use severe physical punishment for disciplining

plining the child – twice the national average. The ethnicity of the head of the household is strongly correlated with the disciplinary method used. While Serbs and Hungarians show similar practices (the difference is that Hungarians use more psychosocial and less physical punishment), Roma and Muslims/Bosnians practise completely different methods – 89 and 86 percent respectively use some form of punishment in child disciplining. Severe physical punishment is a frequently used disciplinary method (22 among Roma and 15 among Muslims/Bosnians). Only 6 percent of Roma and 9 percent of Muslim/Bosnian children are disciplined using non violent methods.

Early Marriage

Marriage before the age of 18 is a reality for many young girls. According to UNICEF's worldwide estimates, over 60 million women aged 20–24 were married/in union before the age of 18. Factors that influence child marriage rates include: the state of the country's civil registration system, which provides proof of age for children; the existence of an adequate legislative framework with an accompanying enforcement mechanism to address cases of child marriage; and the existence of customary or religious laws that condone the practice.

In many parts of the world parents encourage the marriage of their daughters while they are still children in the hope that the marriage will benefit them both financially and socially, while also relieving financial burdens on the family. In actual fact, child marriage is a violation of human rights, compromising the development of girls and often resulting in early pregnancy and social isolation, with little education and poor vocational training reinforcing the gendered nature of poverty. The right to 'free and full' consent to a marriage is recognized in the Universal Declaration of Human Rights – with the recognition that consent cannot be 'free and full' when one of the parties involved is not sufficiently mature to make an informed decision about a life partner. The Convention on the Elimination of all Forms of Discrimination against Women mentions the right to protection from

child marriage in article 16, which states: "The betrothal and the marriage of a child shall have no legal effect, and all necessary action, including legislation, shall be taken to specify a minimum age for marriage..." While marriage is not considered directly in the Convention on the Rights of the Child, child marriage is linked to other rights – such as the right to express their views freely, the right to protection from all forms of abuse, and the right to be protected from harmful traditional practices – and is frequently addressed by the Committee on the Rights of the Child.

Young married girls are often required to perform large amounts of domestic work, are under pressure to demonstrate fertility, and are responsible for raising children while still children themselves. Women who married at younger ages were more likely to believe that it is sometimes acceptable for a husband to beat his wife and were more likely to experience domestic violence themselves. The age gap between partners is thought to contribute to these abusive power dynamics and to increase the risk of untimely widowhood.

Closely related to the issue of child marriage is the age at which girls become sexually active. Women who are married before the age of 18 tend to have more children than those who marry later in life. Pregnancy related deaths are known to be a leading cause of mortality for both married and unmarried girls between the ages of 15 and 19, particularly among the youngest of this group.

Two indicators are to estimate the percentage of women married before 15 years of age and the percentage married before 18 years of age. The percentage of women married at various ages is provided in Table CP.5.

In Serbia, according to the Family Law, marriage is not allowed before the age of 19. However, under special circumstances marriage is allowed after the age of 16.

Nearly 1 percent of women aged 15 to 49 had married before the age of 15. The tendency towards early marriage is significantly higher among Roma women from Roma settlements,

where 12 percent of interviewed women married before the age of 15.

8 percent of all women aged 20 to 49 married before the age of 18. This practice is more present in East Serbia, rural areas, among the less educated, the poorest and particularly among Roma. For example, almost half of Roma women from Roma settlements were married before the age of 18, every third woman with primary or no education and every fifth woman from the poorest households.

Another component is the spousal age difference with an indicator being the percentage of married/in union women with a difference of 10 or more years of age compared to their current spouse. Table CP.6 shows the results of the age difference between husbands and wives. While 26 percent of young married women aged 15 to 19 are married to a partner 10 or more years older, among married women aged 20 to 24 years this percentage is much lower – 14 percent. Interestingly this phenomenon is mainly correlated with poverty and lower education – every third young women is married to a husband who is more than 10 years older, for example. On the other hand, Roma women, although entering marriage very early, are mainly married to slightly older partners, and very seldom to partners 10 years older.

Domestic Violence

A number of questions were asked of women aged 15–49 to assess their attitudes towards whether husbands are justified to hit or beat their wives/partners for a variety of scenarios. These questions were asked to have an indication of cultural beliefs that tend to be associated with the prevalence of violence against women by their husbands/partners. The main assumption here is that women that agree with the statements indicating that husbands/partners are justified to beat their wives/partners under the circumstances described in reality tend to be abused by their own husbands/partners. The responses to these questions can be found in Table CP.7.

Overall, 6 percent of women in Serbia feel that their husband/partner has a right to hit or beat them, mostly in cases when they neglect the children (6 percent), or if they demonstrate their autonomy, e.g. go out without telling their husbands or argue with him (2 percent).

Regionally, domestic violence is more accepted in South and West Serbia (approximately 12 percent) than in other parts of the country, owing to the same reasons as stated above. Acceptance is more present among the poorest and less educated, and also currently married women. However, it is mainly correlated with ethnicity – every third Muslim/Bosnian and Roma woman believes it is justified for a husband to beat his wife/partner, mainly when she neglects the children or goes out or argues with him, and in the case of Roma women also if she refuses to have sex with him.

Child Disability

One of the World Fit for Children goals is to protect children against abuse, exploitation, and violence, including the elimination of discrimination against children with disabilities. For children aged between 2 and 9 years, a series of questions were asked to assess the number of disabilities/impairments, such as sight impairment, deafness, and difficulties with speech. This approach is based on the concept of functional disability developed by the WHO and aims to identify the implications of any impairment or disability for the development of the child (e.g. health, nutrition, education, etc.). Table CP.8 shows the results of these questions.

According to the mothers' report, every tenth child aged between 2 and 9 in Serbia displays some kind of disability. This appears to be more frequent among Roma children from Roma settlements (23 percent), children from the poorest households (17 percent) and those whose mothers are less educated (15 percent). Also, child disabilities are more frequent among children from rural (13 percent), than children from urban settlements (9 percent).

Knowledge of HIV Transmission and Condom Use

One of the most important prerequisites for reducing the rate of HIV infection is accurate knowledge of how HIV is transmitted and strategies for preventing transmission. Correct information is the first step towards raising awareness and giving young people the tools to protect themselves from infection. Misconceptions about HIV are common and can confuse young

The results are presented in Table HA.1. In Serbia, 98 percent of the interviewed women had heard of AIDS. Although this percentage is significantly high, the percentage of women who know all three main ways of preventing HIV transmission is only 36 percent. Comprehensive and correct knowledge of HIV prevention is more frequent among young women, women who are wealthier

HIV/AIDS AND SEXUAL BEHAVIOUR

people and hinder prevention efforts. The UN General Assembly Special Session on HIV/AIDS (UNGASS) called on governments to improve the knowledge and skills of young people to protect themselves from HIV. The indicators to measure this goal as well as the MDG of reducing HIV infections by half include improving the level of knowledge of HIV and its prevention, and changing behaviour to prevent further spread of the disease. The HIV module was administered to women 15–49 years of age.

One indicator which is both an MDG and UNGASS indicator is the percentage of young women who have comprehensive and correct knowledge of HIV prevention and transmission. Women were asked whether they knew of the three main methods of HIV transmission – having only one faithful uninfected partner, using a condom every time, and abstaining from sex.

and have secondary or higher education. On the other hand, women who have primary education, or belong to the poorest class are less aware of AIDS existence, and their correct knowledge about HIV transmission is below average. Roma women from Roma settlements are fairly unfamiliar with AIDS. Only 72 percent of them had ever heard of AIDS, and only 14 percent of them are aware of all three ways of transmission. An alarming fact is that one in two Roma women are unaware of any way HIV transmission can be prevented.

86 percent of women know about using a condom every time, 67 percent about having one faithful uninfected sex partner, and 50 percent know about abstaining from sex as the main ways of preventing HIV transmission. While 91 percent of women know at least one way, almost one in ten do not know any of the three ways.

The results show a high correlation between women's place of residence and knowledge of HIV. Women living in urban settlements are likely to be better informed about HIV and its prevention, as well as those living in Belgrade (a highly urban city) and in Vojvodina. On the other hand, 16 and 10 percent of women respectively, living in Central and East Serbia, do not know any way of preventing transmission.

Table HA.2 shows the percentage of women who can correctly identify misconceptions concerning HIV. The indicator is based on the two most common and relevant misconceptions in Serbia: that HIV can be transmitted by sharing food with an infected person and mosquito bites. The table also provides information on whether women know that HIV cannot be transmitted by supernatural means, and that HIV can be transmitted by sharing needles. Only half of the interviewed women reject the two most common misconceptions and know that a healthy-looking person can be infected. The table shows that the most common misconception is that mosquitoes can transmit HIV, since almost one third of women in Serbia believe in this kind of transmission. 79 percent of women know that HIV can not be transmitted by sharing food with an infected person and 77 percent of

women know that a healthy-looking person can be infected. One in ten women believes that HIV can be transmitted by supernatural means. This misconception is particularly common among Roma and the poorest women; every second Roma woman and every fourth woman from a poor household believes in this misconception.

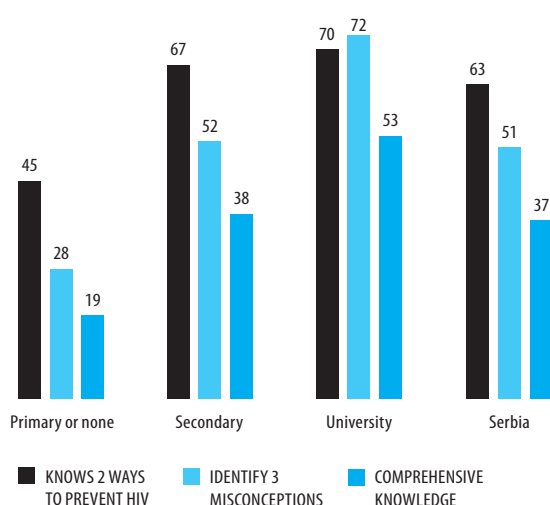
In general, misconceptions are more common in rural areas, and among poorer and less educated women. Looking at territory distribution, we notice that the most informed are women from Belgrade and Vojvodina.

Table HA.3 summarises information from Tables HA.1 and HA.2 and shows the percentage of women who know two ways of preventing HIV transmission and reject three common misconceptions.

Although a large proportion of women have heard of AIDS, only 37 percent of women in Serbia have comprehensive knowledge regarding this topic. This figure indicates that comprehensive knowledge of HIV prevention methods and transmission in Serbia is still fairly low, although there are differences according to age groups, areas of residence, education, and women's wealth. There is a significant lack of knowledge among Roma women from Roma settlements. Only 5 percent of Roma women know two ways of preventing transmission and reject the three most common misconceptions. The highest level of knowledge is registered among adolescents and younger women, but still, it is below 50 percent. Women from urban areas have a slightly higher knowledge of HIV transmission. As expected, the percentage of women with comprehensive knowledge increases with the woman's education level (Figure HA.1). While in Vojvodina, Belgrade and West Serbia almost every second women has above average knowledge (from 44 to 46 percent), in Central, East and South-East Serbia, comprehensive knowledge is registered only in every fourth woman (from 24 to 28 percent).

Knowledge of mother-to-child transmission of HIV is also an important first step for women to seek HIV testing when they are pregnant to

Figure HA.1
Percentage of women who have comprehensive knowledge of HIV/AIDS transmission, Serbia, 2005



avoid infection of the baby. Women should know that HIV can be transmitted during pregnancy, delivery, and through breastfeeding. The level of knowledge among women aged 15–49 years concerning mother-to-child transmission is presented in Table HA.4. Overall, 87 percent of women know that HIV can be transmitted from mother to child. The percentage of women who know all three ways of mother-to-child transmission is 57 percent, while 11 percent of women did not know of any specific way. The knowledge of HIV transmission during pregnancy is most common among women. When two other ways are in question, the values decrease slightly. 74 percent of women know that HIV can be transmitted from mother to child at delivery, and 62 percent are aware of HIV transmission through breastfeeding. As in the case of other indicators, lack of mother-to-child HIV transmission is more prominent among Roma women, women from the poorest households and women who are less educated. Only one in five of Roma women are aware of the ways of mother-to-child transmission of HIV.

The indicators on attitudes towards people living with HIV measure stigma and discrimination in the community. Stigma and discrimination are low if respondents report an accepting attitude to the following four questions: 1) would care for a family member suffering from AIDS; 2) would buy fresh vegetables from a vendor who was HIV positive; 3) thinks that a female teacher who is HIV positive should be allowed to teach in school; and 4) would *not* want to keep the HIV status of a family member a secret. Table HA.5 shows the attitudes of women towards people living with HIV/AIDS.

In Serbia, 64 percent of women who have heard of AIDS agree with at least one discriminatory statement. According to the survey results, the most common discriminative attitude is rejection of buying food from a person with HIV/AIDS. Half the women who have heard of AIDS would not buy food from an infected person. Less educated women and those from the poorest households have more severe prejudices than the ones with a better wealth status and higher education. Ethnicity is strongly correlated to

discriminatory attitudes. Data shows that about 80 percent of Muslims/Bosnians and Roma agree with at least one of the discriminatory statements. A very low percentage of women who have heard about AIDS would not take care of a family member infected with HIV (2 percent). But Roma women from Roma settlements have a more discriminative attitude towards this statement: as many as 7 percent of Roma women wouldn't take care of a family member who was suffering from AIDS, although the percentage of them who would keep it a secret is lower than the national average. All this data confirms the facts that lack of knowledge is a serious source of fear and not an acceptance of differences.

Another important indicator is the knowledge of where to be tested for HIV and use of such services. Questions related to knowledge among women of a facility for HIV testing and whether they have ever been tested is presented in Table HA.6. 69 percent of women know where to be tested, while 7 percent have actually been tested. This information is known only to every fifth Roma woman from a Roma settlement and about every second woman with a low level of education and from the poorest households. A slightly larger percentage applies to women from rural settlements (59 percent) and from South-East Serbia (52 percent). Although the knowledge of a place to get tested is not so low, only 7 percent of all women have been tested. This percentage is significantly higher among women living in Belgrade and in East Serbia, as well as among more educated women and those from wealthier households.

Among women who had given birth within the two years preceding the survey, the percentage who had received counselling and HIV testing during antenatal care is shown in Table HA.7. Although the coverage of antenatal care in Serbia is quite high (98 percent), information about HIV was provided to only every seventh women (14 percent), and only every tenth women has been tested and received her results within the antenatal care program. East Serbia is the only region where HIV counselling and testing during antenatal care is well provided: 35 percent of women from East Serbia have been tested and received

results during antenatal care. On the other hand, the population from Roma settlements barely receive any antenatal care at all. Only 2 percent of Roma women received their test results within the antenatal care program.

Sexual Behaviour Related to HIV Transmission

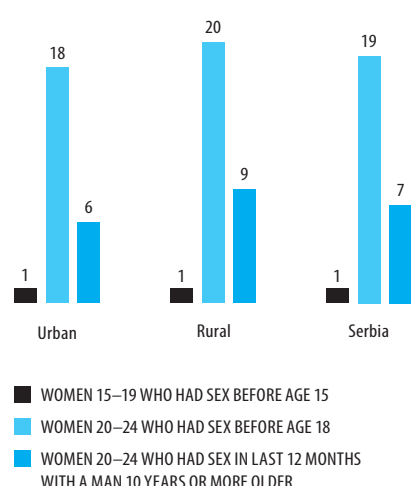
Promoting safer sexual behaviour is critical for reducing HIV prevalence. The use of condoms during sex, especially with non-regular partners, is especially important for reducing the spread of HIV. In most countries over half of new HIV infections are among young people between the ages of 15 and 24, thus a change in behaviour among this age group will be especially important to reduce new infections. A module of questions was administered to women aged 15–24 to assess their risk of HIV infection. Risk factors for HIV

include sex at an early age, sex with older men, sex with a non-marital non-cohabitating partner, and failure to use a condom.

The frequency of sexual behaviour that increases the risk of HIV infection among women is presented in Table HA.8 and Figure HA.2.

With the exception of Roma women from Roma settlements, the number of young women who had sex before the age of 15 in Serbia is very low. Only 1 percent of women aged 15 to 19 had sex before the age of 15. On the other hand Roma women from Roma settlements start their sexual activities as very young girls, 16 percent of them had sex before the age of 15. The situation is similar regarding sex at the age of 18. Namely, while in Serbia 19 percent of women aged 20 to 24 reported having sex before the age of 18, among Roma women this percentage is 51, which is over two times higher. Girls who terminate their education at primary school level tend to have sex at an early age; 3 percent before the age of 15 and 42 percent before the age of 18.

Figure HA.2
Sexual behaviour that increases risk of HIV infection, Serbia, 2005



Having sex with a partner 10 or more years older is reported by one in twelve women. It appears that women with primary or less education are more inclined to these kinds of relationships. One in every five women from the poorest households had had sex with a partner 10 or more years older in the 12 months prior to the MICS.

Condom use during sex with men other than husbands or live-in partners (non-marital, non-cohabiting) was assessed in women aged 15–24 who had had sex with such a partner in the previous year (Table HA.9). Over 60 percent of women aged 15–24 report having sex with a non-regular partner in the 12 months prior to the MICS. Three-quarters of those women reported condom usage when they had sex with the high risk partner.

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Appendices

APPENDIX A	
SAMPLE DESIGN	69
APPENDIX B	
LIST OF PERSONNEL INVOLVED IN THE SURVEY	74
APPENDIX C	
ESTIMATES OF SAMPLING ERRORS	75
APPENDIX D	
DATA QUALITY TABLES	86
APPENDIX E	
MICS INDICATORS: NUMERATORS AND DENOMINATORS.	97
APPENDIX F	
QUESTIONNAIRES	105

Appendix A

Sample Design

The major features of sample design are described in this appendix. Sample design features include target sample size, sample allocation, sample frame and listing, choice of domains, sampling stages, stratification, and the calculation of sample weights.

The primary objective of the sample design for the Serbia Multiple Indicator Cluster Survey was to produce statistically reliable estimates of most indicators, at national level, for urban and rural areas, and for the six regions of the country: Vojvodina, Belgrade, West, Central, East and South-East Serbia. In order to look more deeply into ethnic disparities and to provide national estimates, a separate sample was designed for Roma living in Roma settlements.

A stratified, two-stage random sampling approach was used for the selection of the survey sample.

Sample Size and Sample Allocation

The Serbia MICS3 sample was created by merging two samples: Serbia without Roma from Roma settlements and Roma living in Roma settlements. The average household size and the percentage of children under five in the total population were the factors which caused slightly different sample design for each of the samples.

Serbia is characterised by a very low fertility rate and a small number of household members. For example, one generation of children born makes up less than 1 percent of the population, and the average number of household members is around 3. Owing to these facts, the modification of the recommended sample plan had to be made, and

that was the stratification of households in selected census block units into two categories: households with children and households without children under 5. The allocation of the sample in the category of households with children was significantly bigger than the allocation of the sample in the category of households without children.

In the case of the Roma population, the universe could be defined only for Roma who live in separate settlements. The birth rate and household size among Roma living in Roma settlements is higher than in other population groups, so key determinants were different to those used in calculations for Serbia.

The target sample size for the Serbia MICS was calculated as 7200 households in Serbia excluding Roma settlements and 1900 Roma households from Roma settlements.

For the calculation of the sample size, for both Serbia without Roma and Roma samples, the key indicator used was the percentage of children aged 0–4 years who had had Acute Respiratory infections. The following formula was used to estimate the required sample size for these indicators:

$$n = \frac{[4 (r) (1-r) (f) (n_r)]}{[(me)^2 (r)^2 (p) (n_h)]} \quad (1)$$

where

- n is the required sample size, expressed as the number of households
- 4 is a factor to achieve the 95 per cent level of confidence
- r is the predicted or anticipated prevalence (coverage rate) of the indicator

- n_r is the factor necessary to raise the sample size by $100(n_r - 1)$ percent for non-response
- f is the shortened symbol for $deff$ (design effect)
- $me * r$ is the margin of error to be tolerated at the 95 percent level of confidence, defined as me percent of r (relative sampling error of r)
- p is the proportion of the total population upon which the indicator, r , is based
- n_h is the average household size.

As far as the sample size for Serbia excluding Roma settlements is concerned, the following levels of parameters were included: r (percentage of children aged 0–4 years who had had Acute Respiratory infections) was assumed to be 12 percent. The expected non-response rate n_r was determined at 15 percent. The value of $deff$ (design effect) was taken as 1.5 based on estimates from previous surveys. The maximum relative error allowed (me) was 12 percent, p (percentage of children aged 0–4 years in the total population) was taken as 4.5 percent and n_h (average household size) was taken as 3.

For the Roma sample: r (percentage of children aged 0–4 years who had had Acute Respiratory infections) and the expected non-response rate (n_r) were assumed to be 12 and 15 percent, respectively, like the Serbia sample. Also the predicted value for design effect was the same, 1.5. The relative margin of error wanted (me) was 20 percent. The percentage of children 0–4 years in the total population, p was taken as 9.5, and n_h (average household size) as 4.7.

The resulting number of households from these exercises was as follows:

In the case of Serbia, excluding Roma settlements, the calculated sample size was 26000 households. Only a sample of that size would provide a significant number of children under 5 for drawing reliable conclusions. Therefore, in order to cut down the number of households in the sample, but not to lose estimation reliability, the stratification of the sample into categories with and without chil-

dren aged 0–4 years was needed. For calculation of the necessary number of households in each category, the following formula was used:

$$n = (n_s) (n_c) (p_s) \quad (2)$$

where

- n is the required sample size, expressed as the number of households
- n_s is the expected number of households with, or the number of households without children under 5 in a cluster, depending on what category the calculation is used
- n_c is the number of clusters in the sample, and
- p_s is the probability of selection of the household in each category.

Taking into account that the proportion of children under 5 in the total population, p was 4.5 percent, and if the average household size is 3, the estimated number of households with children was 13.5 per 100 households (the average number of households in each cluster). So the n_s was assumed to be 13.5 for the category with children, and 86.5 for the category without children. The probability of selection of a household (p_s) with at least one child out of all households with children was assumed to be 0.67, and the probability of selecting a household without children from all households with children in each cluster was 0.1. Supposing that 400 clusters were about to be selected, the total number of households was calculated at 3600 households with, and 3400 of households without children under 5, which makes a total of 7000 households. For the Roma sample, the stratification of primary units was not needed. Using formula (1), the calculated sample size was 1800 households.

The average cluster size in the Serbia MICS was determined as 18 households, plus 3 backup households for both Serbia and Roma samples. Back-up households were to be interviewed only if some of the first 18 households were not found. In cases where a household refused to be interviewed, the substitution with a back-up household was not possible. The calculation was based on a

number of considerations, including the budget available, and the time that would be needed per team to complete one cluster. Dividing the total number of households by the number of households per cluster, it was calculated that the selection of a total number of 400 clusters in Serbia without Roma from Roma settlements and 106 clusters in Roma settlements would be needed in all regions.

Allocation of the total sample size to the six regions was targeted with probability proportional to the regions' size. Therefore, 400 Serbia excluding Roma, plus 106 Roma sample clusters were allocated across the regions, with the final sample size calculated at 9108 households [(400+106) clusters x 18 households per cluster]. In each region, the clusters (primary sampling units) were distributed to urban and rural domains, proportional to the size of the urban and rural populations in that region. The table below shows the allocation of clusters to the sampling domains.

Table SD.1
Allocation of Sample Clusters
(Primary Sampling Units) to Sampling Domains

Region	Population (Census 2002)			Roma Population (Census 2002)			Number of Clusters Serbia without Roma			Number of Clusters Roma in Roma settlements		
	Total	Urban	Rural	Total	Urban	Rural	Urban	Rural	Total	Urban	Rural	Total
Vojvodina	2031992	1152295	879697	29057	12593	16464	62	45	107	13	13	26
Belgrade	1576124	1281801	294323	19191	16040	3151	67	17	84	17	5	22
West Serbia	835225	322919	512306	6294	1345	4949	18	26	44	1	3	4
Central Serbia	1301656	636412	665244	7320	5446	1874	36	37	73	4	2	6
East Serbia	694905	326326	368579	8452	6924	1528	17	20	37	7	1	8
South-East Serbia	1058099	506143	551956	37879	24415	13464	29	26	55	27	13	40
Total	7498001	4225896	3272105	108193	66763	41430	229	171	400	69	37	106

Sampling Frame and Selection of Clusters

The 2002 Serbian Population Census framework was used for the selection of clusters. Census enumeration areas (app. 100 households) were defined as primary sampling units (PSUs), and were selected from each of the sampling domains by using systematic pps (probability proportional to size) sampling procedures, based on the estimated sizes of the enumeration areas from the 2002 Population Census. The first stage of sampling was thus completed by selecting the required number of enumeration areas from each of the 6 regions by urban and rural areas separately.

Listing Activities

Since the sample frame (the 2002 Population Census) was not up to date, household lists in all selected enumeration areas were updated prior to the selection of households. For this purpose, listing teams were formed, who visited each enumeration area, and listed the occupied households. The Statistical Office of the Republic of Serbia and The Strategic Marketing Research Agency were responsible for updating household lists. The listing exercise was performed by teams which were the direct implementers of the field work during the course of data collection that came later. The whole territory of Serbia was divided into 18 districts according to the regional network of institutions responsible for listing and fieldwork. In each district a team of people was selected – one super-

visor for the district and the interviewers (whose number depended on the number of clusters in the region). Criteria for the selection of the interviewers and supervisors were their qualifications, communication skills, experience in fieldwork and knowledge of the region where research was to be conducted. A total of 47 teams were formed. For each team, the list of all households in the selected cluster from the last census was provided. The interviewers' task was to go to the addresses listed and to mark any change that had happened, e.g. the dwelling didn't exist any more, the household had moved away from the dwelling and another household was living there, and to note the number of children under five living in the household. The listing process was performed during September 2005. Besides providing updated information on households, updating household lists made interviewers more acquainted with the field.

Selection of Households

Lists of households were prepared by the listing teams in the field for each enumeration area. The households were then sequentially numbered from 1 to n (the total number of households in each enumeration area) at the Strategic Marketing Research Agency. Selection of 18 plus 3 back-up households with equal probability in each enumeration area was carried out using the method of random start and equal random walk (simulation of the SRSWoR scheme). In the case of the Serbia without Roma from Roma settlements sample, before the selection of households, updated census block units were put into two categories: households with children and households without children under 5.

Calculation of Sample Weights

The Serbia Multiple Indicator Cluster Survey sample is not self-weighted. In order to report the results at the national level sample weights were used. The use of sample weights was needed for the following reasons:

- one sample was created by merging two samples (Serbia without Roma in Roma settlements and Roma in Roma settlements)
- stratification of each of the separate samples by region and type of settlement.

For the Serbia without Roma in Roma settlements sample, two more strata were included – households with under-5 children and households without under-5 children. Calculated sample weights were used in the subsequent analyses of the survey data.

The major component of weight for both samples is the reciprocal value of the sampling fraction employed in selecting the number of sample households in that particular sampling domain:

$$W_h = 1 / f_h \quad (3)$$

The term f_h , the sampling fraction at the h -th stratum, is the product of probabilities of selection at every stage in each sampling domain:

$$f_h = P_{1h} * P_{2h} \quad (4)$$

where P_{ih} is the probability of selection of the sampling unit in the i -th stage for the h -th sampling domain.

Since the estimated numbers of households per enumeration area prior to the first stage selection (selection of primary sampling units) and the updated number of households per enumeration area were different, individual sampling fractions for households in each enumeration area (cluster) were calculated. The sampling fractions for households in each enumeration area (cluster) therefore included the probability of selection of the enumeration area in that particular sampling domain, and the probability of selection of a household in the sample enumeration area (cluster).

A second component which has to be taken into account in the calculation of sample weights is the level of non-response for household and individual interviews. The adjustment for household non-response is equal to the inverse value of:

$$\text{RR} = \frac{\text{Number of interviewed households}}{\text{Number of occupied households listed}} \quad (5)$$

After completion of the fieldwork, response rates were calculated for each sampling domain. These were used to adjust the sample weights calculated for each cluster. Response rates in the Serbia Multiple Indicator Cluster Survey are shown in Table HH.1 in this report.

Similarly, the adjustment for non-response at the individual level (women and under-5 children) is equal to the inverse value of:

$$\text{RR} = \frac{\text{Completed women's (or under-5's) questionnaires}}{\text{Eligible women (or under-5's)}} \quad (6)$$

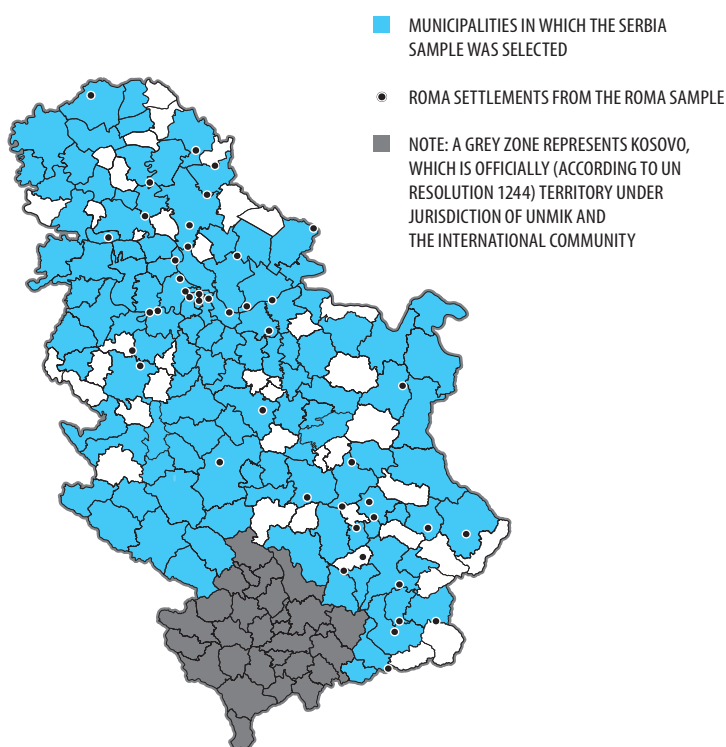
The numbers of eligible women and under-5 children were obtained from the household listing in the Household Questionnaire in households where interviews were completed.

The unadjusted weights for the households were calculated by multiplying the above factors for each enumeration area. These weights were then standardised (or normalised), one purpose of which is to make the sum of the interviewed sample units equal to the total sample size at national level. Normalisation is performed by multiplying the aforementioned unadjusted weights by the ratio of the number of completed households to the total unadjusted weighted number of households. A similar standardisation procedure was followed in obtaining standardised weights for the women's and under-5s questionnaires. Adjusted (normalised) weights varied between 0.36 and 1.5 in the 400 enumeration areas (clusters) in Serbia without Roma from Roma settlements, and between 0.39 and 3.47 in the 106 clusters among Roma settlements in Serbia.

For merged Serbia and Roma samples, additional customisation of calculated weights was performed. Since according to the 2002 Census, the proportion of Roma households in the total Serbia household population is 1 percent, the proportion of women aged 15 to 49 is 1.3 percent and the proportion of children under 5 is 3.4 percent; the final weights are products of normalised weights and the ratio of proportion of both the Roma and non-Roma population.

Sample weights were appended to all data sets and analyses were performed by weighting each household, woman and under-5 with these sample weights.

Map SD.1
Allocation of Sample Clusters



Appendix B

List of Personnel Involved in the Survey

Overall supervision and management

Ann-Lis Svenson

Project Management

Oliver Petrovic

Coordination team

Dragisa Bjeloglav
Dragana Djokovic–Papic
Oliver Petrovic

Head of the Steering Committee

Vesna Piperski–Tucakov

Sampling

Dragisa Bjeloglav

Questionnaire Design

Natalija Biliskov
Ivana Bjelic
Dragisa Bjeloglav
Dragana Djokovic–Papic
Ljiljana Djordjevic
Tatjana Jovanov
Oliver Petrovic

Data Processing/Programming

Ivana Bjelic
Aleksandar Zoric

Field Coordinators

Natalija Biliskov
Dragana Djokovic–Papic
Ljiljana Djordjevic
Tatjana Jovanov

Field Supervisors

Ruzica Antunovic
Branko Dragisic
Slavica Janjic
Milan Jelenkovic
Jasmina Jugovic
Aleksandra Lazovic
Jelena Lukic
Olgica Miletic
Bojan Ognjanovic
Negosava Perovic
Ksenija Rakic
Dusan Randjelovic
Andjelka Stojicevic
Vesna Todorovic
Radmila Vicentijevic
Jasna Vidakovic
Mirko Vukomanovic
Ljiljana Vukovic

Appendix C

Estimates of Sampling Errors

The sample of respondents selected in the Serbia Multiple Indicator Cluster Survey is only one of the samples that could have been selected from the same population, using the same design and size. Each of these samples would yield results that differ somewhat from the results of the actual sample selected. Sampling errors are a measure of the variability between all possible samples. The extent of variability is not known exactly, but can be estimated statistically from the survey results.

The following sampling error measures are presented in this appendix for each of the selected indicators:

- Standard error (*se*): Sampling errors are usually measured in terms of standard errors for particular indicators (means, proportions etc). Standard error is the square root of the variance. The Taylor linearization method is used for the estimation of standard errors.
- Coefficient of variation (*se/r*) is the ratio of the standard error to the value of the indicator
- Design effect (*deff*) is the ratio of the actual variance of an indicator, under the sampling method used in the survey, to the variance calculated under the assumption of simple random sampling. The square root of the design effect (*deft*) is used to show the efficiency of the sample design. A *deft* value of 1.0 indicates that the sample design is as efficient as a simple

random sample, while a *deft* value above 1.0 indicates the increase in the standard error due to the use of a more complex sample design.

- Confidence limits are calculated to show the interval within which the true value for the population can be reasonably assumed to fall. For any given statistic calculated from the survey, the value of those statistics will fall within a range of plus or minus two times the standard error ($p + 2.se$ or $p - 2.se$) of the statistic in 95 percent of all possible samples of identical size and design.

For the calculation of sampling errors from MICS data, the SPSS Version 14 Complex Samples module has been used. The results are shown in the tables that follow. In addition to the sampling error measures described above, the tables also include weighted and unweighted counts of denominators for each indicator.

Sampling errors are calculated for indicators of primary interest, for the national total, for the regions, and for urban and rural areas. One of the selected indicators is based on households, 6 are based on household members, 11 are based on women, and 12 are based on children under the age of 5. All indicators presented here are in the form of proportions. Table SE.1 shows the list of indicators for which sampling errors are calculated, including the base population (denominator) for each indicator. Tables SE.2 to SE.10 show the calculated sampling errors.

Table SE.1

Indicators selected for sampling error calculations

List of indicators selected for sampling error calculations, and base populations (denominators) for each indicator, Serbia, 2005

MICS INDICATOR		BASE POPULATION
HOUSEHOLDS		
74	Child discipline	Children aged 2–14 years selected
HOUSEHOLD MEMBERS		
11	Use of improved drinking water sources	All household members
12	Use of improved sanitation facilities	All household members
55	Net primary school attendance rate	Children of primary school age
56	Net secondary school attendance rate	Children of secondary school age
59	Primary completion rate	Children of primary school completion age
71	Child labour	Children aged 5–14 years
WOMEN		
4	Skilled attendant at delivery	Women aged 15–49 years with a live birth in the last 2 years
20	Antenatal care	Women aged 15–49 years with a live birth in the last 2 years
21	Contraceptive prevalence	Women aged 15–49 currently married/in union
60	Adult literacy	Women aged 15–24 years
67	Marriage before age 18	Women aged 20–49 years
82	Comprehensive knowledge about HIV prevention among young people	Women aged 15–24 years
83	Condom use with non-regular partners	Women aged 15–24 years who had a non-marital, non-cohabiting partner in the last 12 months
84	Age at first sex among young people	Women aged 15–24 years
86	Attitude towards people with HIV/AIDS	Women aged 15–49 years
88	Women who have been tested for HIV	Women aged 15–49 years
89	Knowledge of mother-to-child transmission of HIV	Women aged 15–49 years
UNDER-5s		
6	Underweight prevalence	Children under age 5
25	Tuberculosis immunization coverage	Children aged 18–29 months
26	Polio immunization coverage	Children aged 18–29 months
27	Immunization coverage for DPT	Children aged 18–29 months
28	Measles immunization coverage	Children aged 18–29 months
31	Fully immunized children	Children aged 18–29 months
–	Acute respiratory infection in last two weeks	Children under age 5
22	Antibiotic treatment of suspected pneumonia	Children under age 5 with suspected pneumonia in the last 2 weeks
–	Diarrhoea in last two weeks	Children under age 5
35	Received ORT or increased fluids and continued feeding	Children under age 5 with diarrhoea in the last 2 weeks
46	Support for learning	Children under age 5
62	Birth registration	Children under age 5

Table SE.2

Sampling errors: Total sample

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Serbia, 2005

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweight- ed count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Child discipline	CP.4	0.7269	0.0116	0.0160	2.6733	1.6350	2716	3939	0.704	0.750
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0.9893	0.0020	0.0020	3.1945	1.7873	28163	8730	0.985	0.993
Use of improved sanitation facilities	EN.5	0.9983	0.0006	0.0006	1.8672	1.3665	28163	8730	0.997	0.999
Net primary school attendance rate	ED.3	0.9844	0.0023	0.0024	1.2910	1.1362	2669	3612	0.980	0.989
Net secondary school attendance rate	ED.4	0.8385	0.0120	0.0144	1.6540	1.2861	1264	1548	0.814	0.863
Primary completion rate	ED.6	0.9066	0.0112	0.0123	0.5657	0.7521	322	383	0.884	0.929
Child labour	CP.2	0.0441	0.0055	0.1242	3.3301	1.8249	3390	4678	0.033	0.055
WOMEN										
Skilled attendant at delivery	RH.5	0.9900	0.0036	0.0036	1.9037	1.3798	662	1445	0.983	0.997
Antenatal care	RH.3	0.9824	0.0040	0.0040	1.3135	1.1461	662	1445	0.975	0.990
Contraceptive prevalence	RH.1	0.4118	0.0102	0.0248	2.3583	1.5357	4844	5492	0.391	0.432
Adult literacy	ED.8	0.9557	0.0051	0.0054	1.2661	1.1252	1916	2051	0.945	0.966
Marriage before age 18	CP.5	0.0836	0.0046	0.0549	1.8093	1.3451	6578	6583	0.074	0.093
Comprehensive knowledge about HIV prevention among young people	HA.3	0.4228	0.0153	0.0361	1.9560	1.3986	1916	2051	0.392	0.453
Condom use with non-regular partners	HA.9	0.7445	0.0187	0.0251	0.6498	0.8061	547	354	0.707	0.782
Age at first sex among young people	HA.8	0.0112	0.0032	0.2882	0.8743	0.9351	938	933	0.005	0.018
Attitude towards people with HIV/AIDS	HA.5	0.3646	0.0104	0.0286	3.2201	1.7945	7345	6847	0.344	0.385
Women who have been tested for HIV	HA.6	0.0704	0.0056	0.0796	3.6061	1.8990	7516	7516	0.059	0.082
Knowledge of mother-to-child transmission of HIV	HA.4	0.5701	0.0114	0.0200	3.9676	1.9919	7516	7516	0.547	0.593
UNDER-5s										
Underweight prevalence	NU.1	0.0164	0.0030	0.1819	1.8223	1.3499	3337	3306	0.010	0.022
Tuberculosis immunization coverage	CH.2	0.7455	0.0179	0.0240	1.3009	1.1406	769	769	0.710	0.781
Polio immunization coverage	CH.2	0.9378	0.0081	0.0086	0.7772	0.8816	711	696	0.922	0.954
Immunization coverage for DPT	CH.2	0.9559	0.0058	0.0061	0.5548	0.7449	705	691	0.944	0.968
Measles immunization coverage	CH.2	0.8658	0.0149	0.0172	1.3963	1.1817	747	735	0.836	0.896
Fully immunized children	CH.2	0.5747	0.0226	0.0394	1.4423	1.2010	700	689	0.529	0.620
Acute respiratory infection in last two weeks	CH.5	0.0336	0.0036	0.1058	1.4717	1.2131	3777	3777	0.027	0.041
Antibiotic treatment of suspected pneumonia	CH.6	0.5681	0.0243	0.0427	0.4826	0.6947	127	202	0.520	0.617
Diarrhoea in last two weeks	CH.3	0.0523	0.0045	0.0864	1.5554	1.2472	3777	3777	0.043	0.061
Received ORT or increased fluids and continued feeding	CH.4	0.7095	0.0206	0.0290	0.5856	0.7652	198	286	0.668	0.751
Support for learning	CD.1	0.8442	0.0095	0.0113	2.5956	1.6111	3777	3777	0.825	0.863
Birth registration	CP.1	0.9890	0.0022	0.0022	1.7231	1.3127	3777	3777	0.985	0.993

Table SE.3

Sampling errors: Urban areas

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Serbia, 2005

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweight- ed count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Child discipline	CP.4	0.7060	0.0165	0.0233	3.0650	1.7507	1524	2342	0.673	0.739
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0.9942	0.0017	0.0017	2.4054	1.5509	15419	5116	0.991	0.997
Use of improved sanitation facilities	EN.5	0.9985	0.0005	0.0005	0.9588	0.9792	15419	5116	0.997	1.000
Net primary school attendance rate	ED.3	0.9837	0.0028	0.0029	1.0518	1.0256	1407	2110	0.978	0.989
Net secondary school attendance rate	ED.4	0.8734	0.0140	0.0160	1.6922	1.3008	703	956	0.845	0.901
Primary completion rate	ED.6	0.9118	0.0156	0.0171	0.7385	0.8594	190	245	0.881	0.943
Child labour	CP.2	0.0332	0.0071	0.2125	4.2792	2.0686	1810	2757	0.019	0.047
WOMEN										
Skilled attendant at delivery	RH.5	0.9889	0.0060	0.0060	2.7559	1.6601	350	856	0.977	1.000
Antenatal care	RH.3	0.9811	0.0066	0.0067	2.0187	1.4208	350	856	0.968	0.994
Contraceptive prevalence	RH.1	0.4258	0.0138	0.0324	2.4265	1.5577	2514	3111	0.398	0.453
Adult literacy	ED.8	0.9454	0.0078	0.0083	1.4165	1.1902	1056	1201	0.930	0.961
Marriage before age 18	CP.5	0.0467	0.0044	0.0939	1.6723	1.2932	3756	3873	0.038	0.055
Comprehensive knowledge about HIV prevention among young people	HA.3	0.4663	0.0205	0.0440	2.0264	1.4235	1056	1201	0.425	0.507
Condom use with non-regular partners	HA.9	0.7308	0.0260	0.0355	0.7605	0.8721	361	223	0.679	0.783
Age at first sex among young people	HA.8	0.0089	0.0040	0.4568	1.0657	1.0323	513	572	0.001	0.017
Attitude towards people with HIV/AIDS	HA.5	0.4176	0.0135	0.0322	2.9386	1.7142	4191	3944	0.391	0.445
Women who have been tested for HIV	HA.6	0.0887	0.0092	0.1041	4.6902	2.1657	4269	4445	0.070	0.107
Knowledge of mother-to-child transmission of HIV	HA.4	0.5700	0.0157	0.0275	4.4613	2.1122	4269	4445	0.539	0.601
UNDER-5s										
Underweight prevalence	NU.1	0.0194	0.0046	0.2353	2.2081	1.4860	1878	2013	0.010	0.029
Tuberculosis immunization coverage	CH.2	0.8105	0.0196	0.0242	1.1448	1.0700	411	457	0.771	0.850
Polio immunization coverage	CH.2	0.9461	0.0102	0.0108	0.8602	0.9275	386	419	0.926	0.967
Immunization coverage for DPT	CH.2	0.9439	0.0089	0.0094	0.6176	0.7859	382	415	0.926	0.962
Measles immunization coverage	CH.2	0.8492	0.0213	0.0251	1.5546	1.2468	402	440	0.807	0.892
Fully immunized children	CH.2	0.6239	0.0277	0.0444	1.3548	1.1639	381	415	0.568	0.679
Acute respiratory infection in last two weeks	CH.5	0.0346	0.0051	0.1479	1.7903	1.3380	2097	2286	0.024	0.045
Antibiotic treatment of suspected pneumonia	CH.6	0.5933	0.0138	0.0232	0.1061	0.3257	72	136	0.566	0.621
Diarrhoea in last two weeks	CH.3	0.0522	0.0066	0.1257	1.9913	1.4111	2097	2286	0.039	0.065
Received ORT or increased fluids and continued feeding	CH.4	0.7627	0.0254	0.0333	0.6488	0.8055	110	183	0.712	0.814
Support for learning	CD.1	0.8552	0.0132	0.0154	3.2089	1.7913	2097	2286	0.829	0.882
Birth registration	CP.1	0.9895	0.0028	0.0028	1.7485	1.3223	2097	2286	0.984	0.995

Table SE.4

Sampling errors: Rural areas

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Serbia, 2005

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweight- ed count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Child discipline	CP.4	0.7536	0.0159	0.0211	2.1724	1.4739	1193	1597	0.722	0.785
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0.9835	0.0039	0.0039	3.3183	1.8216	12744	3614	0.976	0.991
Use of improved sanitation facilities	EN.5	0.9980	0.0012	0.0012	2.4824	1.5756	12744	3614	0.996	1.000
Net primary school attendance rate	ED.3	0.9852	0.0038	0.0039	1.5000	1.2247	1262	1502	0.978	0.993
Net secondary school attendance rate	ED.4	0.7946	0.0211	0.0265	1.6098	1.2688	561	592	0.752	0.837
Primary completion rate	ED.6	0.8993	0.0155	0.0172	0.3615	0.6012	132	138	0.868	0.930
Child labour	CP.2	0.0566	0.0086	0.1515	2.6477	1.6272	1580	1921	0.039	0.074
WOMEN										
Skilled attendant at delivery	RH.5	0.9913	0.0037	0.0038	0.9555	0.9775	312	589	0.984	0.999
Antenatal care	RH.3	0.9840	0.0039	0.0040	0.5725	0.7566	312	589	0.976	0.992
Contraceptive prevalence	RH.1	0.3966	0.0151	0.0381	2.2716	1.5072	2329	2381	0.366	0.427
Adult literacy	ED.8	0.9683	0.0061	0.0063	1.0329	1.0163	860	850	0.956	0.981
Marriage before age 18	CP.5	0.1327	0.0088	0.0665	1.8322	1.3536	2822	2710	0.115	0.150
Comprehensive knowledge about HIV prevention among young people	HA.3	0.3695	0.0228	0.0617	1.8973	1.3774	860	850	0.324	0.415
Condom use with non-regular partners	HA.9	0.7711	0.0228	0.0296	0.3844	0.6200	186	131	0.725	0.817
Age at first sex among young people	HA.8	0.0140	0.0052	0.3706	0.6997	0.8365	425	361	0.004	0.024
Attitude towards people with HIV/AIDS	HA.5	0.2940	0.0164	0.0556	3.7383	1.9335	3154	2903	0.261	0.327
Women who have been tested for HIV	HA.6	0.0465	0.0045	0.0961	1.3813	1.1753	3247	3071	0.038	0.055
Knowledge of mother-to-child transmission of HIV	HA.4	0.5701	0.0164	0.0287	3.3572	1.8323	3247	3071	0.537	0.603
UNDER-5s										
Underweight prevalence	NU.1	0.0125	0.0034	0.2735	1.2198	1.1045	1459	1293	0.006	0.019
Tuberculosis immunization coverage	CH.2	0.6709	0.0304	0.0453	1.3023	1.1412	358	312	0.610	0.732
Polio immunization coverage	CH.2	0.9279	0.0127	0.0137	0.6668	0.8166	325	277	0.902	0.953
Immunization coverage for DPT	CH.2	0.9702	0.0073	0.0075	0.5064	0.7116	323	276	0.956	0.985
Measles immunization coverage	CH.2	0.8851	0.0208	0.0235	1.2466	1.1165	345	295	0.844	0.927
Fully immunized children	CH.2	0.5160	0.0355	0.0688	1.3763	1.1731	320	274	0.445	0.587
Acute respiratory infection in last two weeks	CH.5	0.0325	0.0048	0.1488	1.1070	1.0521	1680	1491	0.023	0.042
Antibiotic treatment of suspected pneumonia	CH.6	0.5347	0.0543	0.1015	0.7701	0.8776	55	66	0.426	0.643
Diarrhoea in last two weeks	CH.3	0.0524	0.0060	0.1145	1.0800	1.0392	1680	1491	0.040	0.064
Received ORT or increased fluids and continued feeding	CH.4	0.6427	0.0362	0.0563	0.5810	0.7622	88	103	0.570	0.715
Support for learning	CD.1	0.8304	0.0137	0.0165	1.9858	1.4092	1680	1491	0.803	0.858
Birth registration	CP.1	0.9884	0.0036	0.0036	1.6460	1.2830	1680	1491	0.981	0.996

Table SE.5

Sampling errors: Vojvodina

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Serbia, 2005

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Child discipline	CP.4	0.7428	0.0171	0.0230	1.5418	1.2417	757	1006	0.709	0.777
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0.9919	0.0020	0.0021	1.1928	1.0922	7767	2294	0.988	0.996
Use of improved sanitation facilities	EN.5	0.9988	0.0003	0.0003	0.1610	0.4012	7767	2294	0.998	0.999
Net primary school attendance rate	ED.3	0.9859	0.0039	0.0039	0.9848	0.9924	747	905	0.978	0.994
Net secondary school attendance rate	ED.4	0.8417	0.0229	0.0272	1.6177	1.2719	368	411	0.796	0.888
Primary completion rate	ED.6	0.9143	0.0048	0.0053	0.0324	0.1799	102	110	0.905	0.924
Child labour	CP.2	0.0439	0.0116	0.2632	3.7020	1.9241	936	1164	0.021	0.067
WOMEN										
Skilled attendant at delivery	RH.5	0.9971	0.0009	0.0009	0.1086	0.3295	180	376	0.995	0.999
Antenatal care	RH.3	0.9903	0.0041	0.0041	0.6523	0.8076	180	376	0.982	0.999
Contraceptive prevalence	RH.1	0.4824	0.0171	0.0354	1.6481	1.2838	1352	1411	0.448	0.517
Adult literacy	ED.8	0.9581	0.0099	0.0103	1.2841	1.1332	550	532	0.938	0.978
Marriage before age 18	CP.5	0.0742	0.0090	0.1214	1.9990	1.4139	1811	1694	0.056	0.092
Comprehensive knowledge about HIV prevention among young people	HA.3	0.5366	0.0335	0.0625	2.4008	1.5495	550	532	0.470	0.604
Condom use with non-regular partners	HA.9	0.6783	0.0383	0.0565	0.8152	0.9029	191	122	0.602	0.755
Age at first sex among young people	HA.8	0.0135	0.0077	0.5723	1.0727	1.0357	269	241	0.000	0.029
Attitude towards people with HIV/AIDS	HA.5	0.4201	0.0156	0.0372	1.8242	1.3506	2057	1822	0.389	0.451
Women who have been tested for HIV	HA.6	0.0368	0.0060	0.1625	1.9501	1.3964	2080	1935	0.025	0.049
Knowledge of mother-to-child transmission of HIV	HA.4	0.5367	0.0207	0.0385	3.3196	1.8220	2080	1935	0.495	0.578
UNDER-5s										
Underweight prevalence	NU.1	0.0162	0.0040	0.2487	0.9290	0.9639	979	915	0.008	0.024
Tuberculosis immunization coverage	CH.2	0.9259	0.0217	0.0234	1.3491	1.1615	223	198	0.883	0.969
Polio immunization coverage	CH.2	0.9568	0.0145	0.0152	0.9525	0.9759	212	187	0.928	0.986
Immunization coverage for DPT	CH.2	0.9798	0.0071	0.0073	0.4787	0.6918	212	187	0.966	0.994
Measles immunization coverage	CH.2	0.9160	0.0298	0.0325	2.2230	1.4910	218	194	0.856	0.976
Fully immunized children	CH.2	0.8138	0.0364	0.0447	1.6314	1.2773	214	188	0.741	0.887
Acute respiratory infection in last two weeks	CH.5	0.0488	0.0088	0.1795	1.6343	1.2784	1052	989	0.031	0.066
Antibiotic treatment of suspected pneumonia	CH.6	0.5028	0.0323	0.0642	0.2545	0.5045	51	62	0.438	0.567
Diarrhoea in last two weeks	CH.3	0.0500	0.0088	0.1768	1.6256	1.2750	1052	989	0.032	0.068
Received ORT or increased fluids and continued feeding	CH.4	0.7226	0.0112	0.0155	0.0387	0.1968	53	63	0.700	0.745
Support for learning	CD.1	0.8879	0.0128	0.0144	1.6321	1.2775	1052	989	0.862	0.914
Birth registration	CP.1	0.9918	0.0031	0.0031	1.1712	1.0822	1052	989	0.986	0.998

Table SE.6

Sampling errors: Belgrade

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Serbia, 2005

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweight- ed count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Child discipline	CP.4	0.6078	0.0337	0.0555	3.5692	1.8892	524	749	0.540	0.675
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0.9953	0.0036	0.0037	5.0114	2.2386	5535	1758	0.988	1.000
Use of improved sanitation facilities	EN.5	0.9997	0.0001	0.0001	0.1176	0.3429	5535	1758	0.999	1.000
Net primary school attendance rate	ED.3	0.9744	0.0084	0.0086	1.8169	1.3479	450	648	0.958	0.991
Net secondary school attendance rate	ED.4	0.8631	0.0312	0.0362	2.2910	1.5136	198	279	0.801	0.925
Primary completion rate	ED.6	0.8574	0.0370	0.0432	0.7394	0.8599	62	67	0.783	0.931
Child labour	CP.2	0.0227	0.0087	0.3859	3.0250	1.7393	606	877	0.005	0.040
WOMEN										
Skilled attendant at delivery	RH.5	0.9972	0.0013	0.0013	0.1432	0.3784	98	251	0.995	1.000
Antenatal care	RH.3	0.9755	0.0062	0.0063	0.4013	0.6335	98	251	0.963	0.988
Contraceptive prevalence	RH.1	0.3960	0.0232	0.0587	2.1984	1.4827	827	974	0.349	0.442
Adult literacy	ED.8	0.9587	0.0076	0.0079	0.5956	0.7717	387	408	0.943	0.974
Marriage before age 18	CP.5	0.0428	0.0068	0.1578	1.4419	1.2008	1370	1295	0.029	0.056
Comprehensive knowledge about HIV prevention among young people	HA.3	0.4189	0.0297	0.0708	1.4724	1.2134	387	408	0.360	0.478
Condom use with non-regular partners	HA.9	0.8747	0.0195	0.0223	0.3325	0.5766	154	97	0.836	0.914
Age at first sex among young people	HA.8	0.0139	0.0107	0.7701	1.6222	1.2736	183	195	0.000	0.035
Attitude towards people with HIV/AIDS	HA.5	0.4549	0.0284	0.0624	4.3601	2.0881	1536	1342	0.398	0.512
Women who have been tested for HIV	HA.6	0.1366	0.0200	0.1461	5.0319	2.2432	1554	1490	0.097	0.177
Knowledge of mother-to-child transmission of HIV	HA.4	0.4998	0.0252	0.0504	3.7735	1.9425	1554	1490	0.449	0.550
UNDER-5s										
Underweight prevalence	NU.1	0.0365	0.0125	0.3427	2.7695	1.6642	604	623	0.011	0.062
Tuberculosis immunization coverage	CH.2	0.8091	0.0443	0.0547	1.7373	1.3181	117	138	0.721	0.898
Polio immunization coverage	CH.2	0.9231	0.0142	0.0154	0.3398	0.5830	107	120	0.895	0.952
Immunization coverage for DPT	CH.2	0.8607	0.0247	0.0287	0.6003	0.7748	104	119	0.811	0.910
Measles immunization coverage	CH.2	0.7538	0.0425	0.0564	1.2945	1.1378	116	134	0.669	0.839
Fully immunized children	CH.2	0.4711	0.0665	0.1413	2.1149	1.4543	103	120	0.338	0.604
Acute respiratory infection in last two weeks	CH.5	0.0221	0.0069	0.3135	1.5962	1.2634	671	719	0.008	0.036
Antibiotic treatment of suspected pneumonia	CH.6	0.3464	0.0087	0.0250	0.0083	0.0911	15	26	0.329	0.364
Diarrhoea in last two weeks	CH.3	0.0391	0.0089	0.2265	1.4999	1.2247	671	719	0.021	0.057
Received ORT or increased fluids and continued feeding	CH.4	0.4836	0.0750	0.1551	1.3295	1.1530	26	60	0.334	0.634
Support for learning	CD.1	0.8710	0.0285	0.0328	5.1997	2.2803	671	719	0.814	0.928
Birth registration	CP.1	0.9783	0.0068	0.0069	1.5584	1.2484	671	719	0.965	0.992

Table SE.7

Sampling errors: West Serbia

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Serbia, 2005

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Child discipline	CP.4	0.7432	0.0321	0.0432	1.8988	1.3780	296	352	0.679	0.807
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0.9851	0.0048	0.0049	1.3470	1.1606	3155	863	0.976	0.995
Use of improved sanitation facilities	EN.5	0.9995	0.0005	0.0005	0.4008	0.6331	3155	863	0.999	1.000
Net primary school attendance rate	ED.3	0.9979	0.0017	0.0017	0.4365	0.6607	309	308	0.994	1.000
Net secondary school attendance rate	ED.4	0.8818	0.0266	0.0302	0.8012	0.8951	137	119	0.829	0.935
Primary completion rate	ED.6	0.9613	0.0402	0.0418	1.3477	1.1609	38	32	0.881	1.000
Child labour	CP.2	0.0506	0.0127	0.2515	1.3462	1.1603	391	400	0.025	0.076
WOMEN										
Skilled attendant at delivery	RH.5	0.9917	0.0082	0.0083	1.0670	1.0330	84	131	0.975	1.000
Antenatal care	RH.3	0.9927	0.0071	0.0071	0.8966	0.9469	84	131	0.979	1.000
Contraceptive prevalence	RH.1	0.3162	0.0246	0.0777	1.4695	1.2122	554	528	0.267	0.365
Adult literacy	ED.8	0.9796	0.0121	0.0124	1.3272	1.1520	211	182	0.955	1.000
Marriage before age 18	CP.5	0.1119	0.0128	0.1140	1.0845	1.0414	754	663	0.086	0.137
Comprehensive knowledge about HIV prevention among young people	HA.3	0.5272	0.0444	0.0843	1.4328	1.1970	211	182	0.438	0.616
Condom use with non-regular partners	HA.9	0.8587	0.0279	0.0325	0.1793	0.4235	45	29	0.803	0.914
Age at first sex among young people	HA.8	0.0088	0.0013	0.1504	0.0132	0.1151	88	67	0.006	0.011
Attitude towards people with HIV/AIDS	HA.5	0.3324	0.0337	0.1015	3.6884	1.9205	829	720	0.265	0.400
Women who have been tested for HIV	HA.6	0.0540	0.0114	0.2115	1.8602	1.3639	842	730	0.031	0.077
Knowledge of mother-to-child transmission of HIV	HA.4	0.7378	0.0223	0.0302	1.8706	1.3677	842	730	0.693	0.782
UNDER-5s										
Underweight prevalence	NU.1	0.0053	0.0039	0.7373	0.8391	0.9160	377	288	0.000	0.013
Tuberculosis immunization coverage	CH.2	0.6571	0.0569	0.0866	1.0780	1.0383	102	76	0.543	0.771
Polio immunization coverage	CH.2	0.8807	0.0260	0.0295	0.4051	0.6364	85	64	0.829	0.933
Immunization coverage for DPT	CH.2	0.9810	0.0028	0.0028	0.0263	0.1623	87	65	0.975	0.987
Measles immunization coverage	CH.2	0.8814	0.0400	0.0454	1.1159	1.0564	99	74	0.801	0.961
Fully immunized children	CH.2	0.4376	0.0567	0.1297	0.8240	0.9077	85	64	0.324	0.551
Acute respiratory infection in last two weeks	CH.5	0.0135	0.0066	0.4868	1.0457	1.0226	427	324	0.000	0.027
Antibiotic treatment of suspected pneumonia	CH.6	0.5160	0.0000	0.0000	0.0000	0.0000	6	5	0.516	0.516
Diarrhoea in last two weeks	CH.3	0.0549	0.0100	0.1815	0.6174	0.7858	427	324	0.035	0.075
Received ORT or increased fluids and continued feeding	CH.4	0.7894	0.0699	0.0886	0.5289	0.7273	23	19	0.650	0.929
Support for learning	CD.1	0.8830	0.0205	0.0233	1.3199	1.1489	427	324	0.842	0.924
Birth registration	CP.1	0.9938	0.0063	0.0063	2.0782	1.4416	427	324	0.981	1.000

Table SE.8

Sampling errors: Central Serbia

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Serbia, 2005

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweight- ed count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Child discipline	CP.4	0.7532	0.0278	0.0369	2.4324	1.5596	428	588	0.698	0.809
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0.9852	0.0072	0.0074	4.9497	2.2248	4653	1379	0.971	1.000
Use of improved sanitation facilities	EN.5	0.9947	0.0035	0.0035	3.1255	1.7679	4653	1379	0.988	1.000
Net primary school attendance rate	ED.3	0.9919	0.0041	0.0041	0.9977	0.9989	424	488	0.984	1.000
Net secondary school attendance rate	ED.4	0.8600	0.0301	0.0350	1.5018	1.2255	202	201	0.800	0.920
Primary completion rate	ED.6	0.9342	0.0285	0.0305	0.6740	0.8210	54	52	0.877	0.991
Child labour	CP.2	0.0663	0.0180	0.2718	3.3336	1.8258	528	636	0.030	0.102
WOMEN										
Skilled attendant at delivery	RH.5	0.9749	0.0165	0.0170	2.5099	1.5843	122	226	0.942	1.000
Antenatal care	RH.3	0.9648	0.0175	0.0181	2.0182	1.4206	122	226	0.930	1.000
Contraceptive prevalence	RH.1	0.2745	0.0252	0.0918	2.6652	1.6325	823	837	0.224	0.325
Adult literacy	ED.8	0.9667	0.0109	0.0112	1.0947	1.0463	325	300	0.945	0.988
Marriage before age 18	CP.5	0.0905	0.0105	0.1160	1.3519	1.1627	1057	1010	0.070	0.112
Comprehensive knowledge about HIV prevention among young people	HA.3	0.3425	0.0305	0.0891	1.2360	1.1118	325	300	0.282	0.404
Condom use with non-regular partners	HA.9	0.7137	0.0534	0.0748	0.5439	0.7375	62	40	0.607	0.820
Age at first sex among young people	HA.8	0.0038	0.0033	0.8798	0.3666	0.6055	161	125	0.000	0.011
Attitude towards people with HIV/AIDS	HA.5	0.3550	0.0261	0.0736	3.2511	1.8031	1209	1093	0.303	0.407
Women who have been tested for HIV	HA.6	0.0304	0.0080	0.2622	2.4440	1.5633	1218	1135	0.014	0.046
Knowledge of mother-to-child transmission of HIV	HA.4	0.5738	0.0290	0.0505	3.8914	1.9727	1218	1135	0.516	0.632
UNDER-5s										
Underweight prevalence	NU.1	0.0140	0.0062	0.4408	1.3061	1.1428	534	473	0.002	0.026
Tuberculosis immunization coverage	CH.2	0.6864	0.0253	0.0369	0.3686	0.6071	143	125	0.636	0.737
Polio immunization coverage	CH.2	0.9631	0.0171	0.0178	0.9324	0.9656	132	114	0.929	0.997
Immunization coverage for DPT	CH.2	0.9723	0.0127	0.0131	0.6733	0.8205	131	113	0.947	0.998
Measles immunization coverage	CH.2	0.8875	0.0300	0.0338	1.0436	1.0216	135	117	0.828	0.947
Fully immunized children	CH.2	0.5491	0.0413	0.0752	0.7583	0.8708	128	111	0.466	0.632
Acute respiratory infection in last two weeks	CH.5	0.0279	0.0059	0.2103	0.7589	0.8711	656	598	0.016	0.040
Antibiotic treatment of suspected pneumonia	CH.6	0.4797	0.1116	0.2325	0.9473	0.9733	18	20	0.257	0.703
Diarrhoea in last two weeks	CH.3	0.0535	0.0133	0.2477	2.0703	1.4389	656	598	0.027	0.080
Received ORT or increased fluids and continued feeding	CH.4	0.7293	0.0312	0.0428	0.1583	0.3978	35	33	0.667	0.792
Support for learning	CD.1	0.8087	0.0200	0.0247	1.5379	1.2401	656	598	0.769	0.849
Birth registration	CP.1	0.9983	0.0017	0.0017	1.0607	1.0299	656	598	0.995	1.000

Table SE.9

Sampling errors: East Serbia

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Serbia, 2005

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweight- ed count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Child discipline	CP.4	0.7674	0.0230	0.0300	1.0515	1.0255	251	355	0.721	0.813
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0.9920	0.0033	0.0033	1.0222	1.0110	2548	744	0.985	0.999
Use of improved sanitation facilities	EN.5	0.9990	0.0009	0.0009	0.5834	0.7638	2548	744	0.997	1.000
Net primary school attendance rate	ED.3	0.9821	0.0049	0.0049	0.4489	0.6700	253	336	0.972	0.992
Net secondary school attendance rate	ED.4	0.8084	0.0482	0.0596	2.0829	1.4432	113	140	0.712	0.905
Primary completion rate	ED.6	0.8305	0.0749	0.0902	1.1161	1.0565	21	29	0.681	0.980
Child labour	CP.2	0.0199	0.0115	0.5793	2.9355	1.7133	313	431	0.000	0.043
WOMEN										
Skilled attendant at delivery	RH.5	0.9969	0.0019	0.0019	0.1797	0.4240	62	152	0.993	1.000
Antenatal care	RH.3	0.9841	0.0102	0.0103	0.9971	0.9985	62	152	0.964	1.000
Contraceptive prevalence	RH.1	0.5352	0.0285	0.0532	1.6258	1.2751	451	499	0.478	0.592
Adult literacy	ED.8	0.9371	0.0265	0.0282	2.2107	1.4869	171	187	0.884	0.990
Marriage before age 18	CP.5	0.1453	0.0269	0.1852	3.1485	1.7744	549	541	0.092	0.199
Comprehensive knowledge about HIV prevention among young people	HA.3	0.3203	0.0504	0.1574	2.1723	1.4739	171	187	0.219	0.421
Condom use with non-regular partners	HA.9	0.6568	0.0337	0.0513	0.1009	0.3176	34	21	0.589	0.724
Age at first sex among young people	HA.8	0.0040	0.0007	0.1631	0.0098	0.0991	95	92	0.003	0.005
Attitude towards people with HIV/AIDS	HA.5	0.2480	0.0309	0.1246	2.8528	1.6890	631	558	0.186	0.310
Women who have been tested for HIV	HA.6	0.1712	0.0289	0.1691	3.7315	1.9317	644	633	0.113	0.229
Knowledge of mother-to-child transmission of HIV	HA.4	0.5248	0.0350	0.0667	3.1089	1.7632	644	633	0.455	0.595
UNDER-5s										
Underweight prevalence	NU.1	0.0086	0.0049	0.5704	0.9128	0.9554	292	325	0.000	0.018
Tuberculosis immunization coverage	CH.2	0.7305	0.0575	0.0787	1.2413	1.1142	70	75	0.616	0.845
Polio immunization coverage	CH.2	0.9954	0.0022	0.0022	0.0732	0.2706	65	70	0.991	1.000
Immunization coverage for DPT	CH.2	0.9953	0.0023	0.0023	0.0736	0.2713	64	69	0.991	1.000
Measles immunization coverage	CH.2	0.9285	0.0209	0.0225	0.4456	0.6675	65	69	0.887	0.970
Fully immunized children	CH.2	0.6255	0.0628	0.1004	1.0947	1.0463	62	66	0.500	0.751
Acute respiratory infection in last two weeks	CH.5	0.0510	0.0145	0.2839	1.6173	1.2717	337	374	0.022	0.080
Antibiotic treatment of suspected pneumonia	CH.6	0.9065	0.0833	0.0918	1.3087	1.1440	17	17	0.740	1.000
Diarrhoea in last two weeks	CH.3	0.0288	0.0097	0.3356	1.2443	1.1155	337	374	0.009	0.048
Received ORT or increased fluids and continued feeding	CH.4	0.7518	0.0510	0.0679	0.2513	0.5013	10	19	0.650	0.854
Support for learning	CD.1	0.7086	0.0475	0.0670	4.0704	2.0175	337	374	0.614	0.804
Birth registration	CP.1	0.9980	0.0010	0.0010	0.1815	0.4260	337	374	0.996	1.000

Table SE.10

Sampling errors: South-East Serbia

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Serbia, 2005

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweight- ed count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Child discipline	CP.4	0.7795	0.0314	0.0403	5.0956	2.2573	461	889	0.717	0.842
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0.9833	0.0069	0.0071	4.9380	2.2222	4505	1692	0.969	0.997
Use of improved sanitation facilities	EN.5	0.9980	0.0008	0.0008	0.6014	0.7755	4505	1692	0.996	1.000
Net primary school attendance rate	ED.3	0.9775	0.0070	0.0071	2.0567	1.4341	487	927	0.964	0.991
Net secondary school attendance rate	ED.4	0.7853	0.0250	0.0318	1.4670	1.2112	244	398	0.735	0.835
Primary completion rate	ED.6	0.9128	0.0105	0.0116	0.1284	0.3584	46	93	0.892	0.934
Child labour	CP.2	0.0548	0.0139	0.2538	4.3637	2.0889	616	1170	0.027	0.083
WOMEN										
Skilled attendant at delivery	RH.5	0.9840	0.0089	0.0090	1.5399	1.2409	115	309	0.966	1.000
Antenatal care	RH.3	0.9863	0.0065	0.0066	0.9670	0.9834	115	309	0.973	0.999
Contraceptive prevalence	RH.1	0.4451	0.0320	0.0718	5.1416	2.2675	837	1243	0.381	0.509
Adult literacy	ED.8	0.9263	0.0161	0.0173	1.6664	1.2909	272	442	0.894	0.958
Marriage before age 18	CP.5	0.0934	0.0107	0.1142	1.8523	1.3610	1037	1380	0.072	0.115
Comprehensive knowledge about HIV prevention among young people	HA.3	0.2775	0.0373	0.1343	3.0540	1.7476	272	442	0.203	0.352
Condom use with non-regular partners	HA.9	0.6181	0.0835	0.1352	1.3010	1.1406	61	45	0.451	0.785
Age at first sex among young people	HA.8	0.0179	0.0059	0.3273	0.4151	0.6443	141	213	0.006	0.030
Attitude towards people with HIV/AIDS	HA.5	0.2341	0.0237	0.1013	4.1077	2.0268	1083	1312	0.187	0.281
Women who have been tested for HIV	HA.6	0.0407	0.0077	0.1882	2.3923	1.5467	1178	1593	0.025	0.056
Knowledge of mother-to-child transmission of HIV	HA.4	0.6226	0.0351	0.0564	8.3631	2.8919	1178	1593	0.552	0.693
UNDER-5s										
Underweight prevalence	NU.1	0.0087	0.0041	0.4735	1.3412	1.1581	552	682	0.000	0.017
Tuberculosis immunization coverage	CH.2	0.4909	0.0582	0.1185	2.1128	1.4536	115	157	0.375	0.607
Polio immunization coverage	CH.2	0.8946	0.0291	0.0325	1.2561	1.1208	110	141	0.836	0.953
Immunization coverage for DPT	CH.2	0.9375	0.0206	0.0219	0.9881	0.9940	108	138	0.896	0.979
Measles immunization coverage	CH.2	0.8078	0.0418	0.0518	1.6444	1.2823	112	147	0.724	0.891
Fully immunized children	CH.2	0.3093	0.0626	0.2025	2.5515	1.5973	108	140	0.184	0.435
Acute respiratory infection in last two weeks	CH.5	0.0309	0.0078	0.2537	1.5826	1.2580	634	773	0.015	0.047
Antibiotic treatment of suspected pneumonia	CH.6	0.7083	0.0276	0.0389	0.2613	0.5112	20	72	0.653	0.763
Diarrhoea in last two weeks	CH.3	0.0797	0.0114	0.1435	1.3751	1.1726	634	773	0.057	0.103
Received ORT or increased fluids and continued feeding	CH.4	0.7545	0.0580	0.0769	1.6530	1.2857	50	92	0.639	0.871
Support for learning	CD.1	0.8260	0.0222	0.0269	2.6560	1.6297	634	773	0.781	0.870
Birth registration	CP.1	0.9783	0.0084	0.0086	2.5535	1.5980	634	773	0.962	0.995

Appendix D

Data Quality Tables

Table DQ.1

Age distribution of household population

Single-year age distribution of household population according to sex (weighted), Serbia, 2005

	Males		Females	
	Number	Percent	Number	Percent
0	140	1.0	140	1.0
1	161	1.2	144	1.0
2	160	1.2	159	1.1
3	152	1.1	146	1.0
4	153	1.1	158	1.1
5	206	1.5	163	1.1
6	179	1.3	169	1.2
7	190	1.4	163	1.1
8	140	1.0	142	1.0
9	181	1.3	165	1.1
10	173	1.3	176	1.2
11	170	1.3	173	1.2
12	184	1.3	181	1.2
13	163	1.2	133	.9
14	159	1.2	180	1.2
15	159	1.2	185	1.3
16	148	1.1	148	1.0
17	142	1.0	166	1.1
18	167	1.2	145	1.0
19	149	1.1	188	1.3
20	178	1.3	170	1.2
21	159	1.2	195	1.3
22	171	1.3	185	1.3
23	161	1.2	155	1.1
24	200	1.5	194	1.3
25	187	1.4	182	1.3
26	195	1.4	181	1.2
27	168	1.2	217	1.5
28	195	1.4	203	1.4
29	188	1.4	230	1.6
30	198	1.5	215	1.5
31	225	1.7	210	1.4
32	206	1.5	224	1.5

	Males		Females	
	Number	Percent	Number	Percent
33	205	1.5	180	1.2
34	193	1.4	224	1.5
35	200	1.5	182	1.3
36	208	1.5	192	1.3
37	222	1.6	166	1.1
38	184	1.4	205	1.4
39	174	1.3	157	1.1
40	163	1.2	176	1.2
41	195	1.4	171	1.2
42	173	1.3	170	1.2
43	180	1.3	180	1.2
44	168	1.2	204	1.4
45	179	1.3	185	1.3
46	169	1.2	176	1.2
47	194	1.4	171	1.2
48	159	1.2	209	1.4
49	188	1.4	162	1.1
50	211	1.5	233	1.6
51	234	1.7	241	1.7
52	211	1.5	254	1.7
53	229	1.7	270	1.9
54	213	1.6	191	1.3
55	229	1.7	230	1.6
56	212	1.6	239	1.6
57	186	1.4	219	1.5
58	170	1.2	180	1.2
59	132	1.0	163	1.1
60	129	.9	132	.9
61	150	1.1	143	1.0
62	146	1.1	138	.9
63	138	1.0	166	1.1
64	140	1.0	160	1.1
65	178	1.3	172	1.2

	Males		Females	
	Number	Percent	Number	Percent
66	153	1.1	212	1.5
67	124	.9	165	1.1
68	141	1.0	159	1.1
69	149	1.1	159	1.1
70	126	.9	175	1.2
71	127	.9	178	1.2
72	117	.9	147	1.0
73	121	.9	146	1.0

	Males		Females	
	Number	Percent	Number	Percent
74	103	.8	178	1.2
75	130	1.0	130	.9
76	90	.7	111	.8
77	72	.5	102	.7
78	89	.7	112	.8
79	54	.4	112	.8
80+	237	1.7	421	2.9

DK/ Missing	11	.1	14	.1
Total	13614	100.0	14549	100.0

Figure DQ.1a
Single year age distribution of the household population by sex, Serbia, 2005

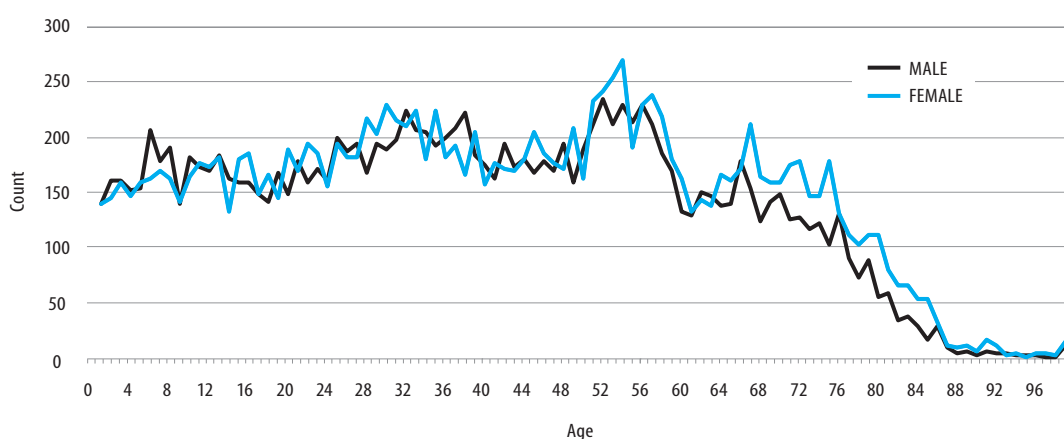


Figure DQ.1b
Single year age distribution of the household population by sex, Roma in Roma settlements, 2005

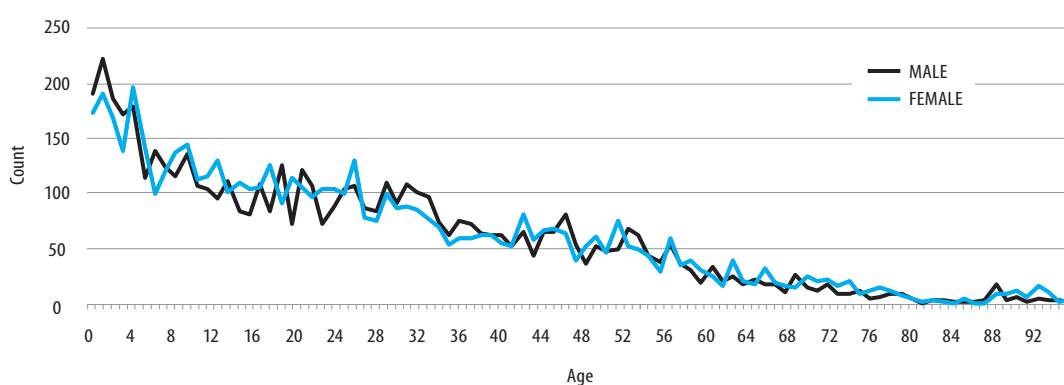


Table DQ.2

Age distribution of eligible and interviewed women

Household population of women aged 10–54, interviewed women aged 15–49, and percentage of eligible women who were interviewed (weighted), by five-year age group, Serbia, 2005

Age	Household population of women aged 10–54	Interviewed women aged 15–49		Percentage of eligible women interviewed
	Number	Number	Percent	
10–14	843	na	na	na
15–19	831	766	12.4	92.1
20–24	900	807	13.1	89.7
25–29	1013	963	15.6	95.0
30–34	1051	1031	16.7	98.1
35–39	902	877	14.2	97.2
40–44	902	872	14.1	96.7
45–49	904	864	14.0	95.5
50–54	1190	na	na	na
15–49	6504	6180	100.0	95.0

na Not applicable

Note: Weights for both household population of women and interviewed women are household weights.
Age is based on the household schedule.

Table DQ.3

Age distribution of eligible and interviewed under-5s

Household population of children aged 0–7, children whose mothers/caregivers were interviewed and percentage of under-5 children whose mothers/caregivers were interviewed (weighted), by five-year age group, Serbia, 2005

Age	Household population of children age 0–7	Interviewed children age 0–4		Percentage of eligible children interviewed
	Number	Number	Percent	
0	280	275	18.4	98.2
1	305	299	20.0	98.2
2	320	319	21.3	99.8
3	299	296	19.8	99.2
4	311	305	20.4	97.9
5	369	na	na	na
6	348	na	na	na
7	353	na	na	na
0–4	1514	1494	100.0	98.7

na Not applicable

Note: Weights for both household population of children under-5 and interviewed mothers/caregivers are household weights. Age is based on the household schedule.

Table DQ.4

Age distribution of under-5 children

Age distribution of under-5 children by 3-month groups (weighted), Serbia, 2005

Age in months	Males		Females		Total	
	Number	Percent	Number	Percent	Number	Percent
0–2	57	3.0	59	3.1	115	3.0
3–5	110	5.7	91	4.9	201	5.3
6–8	78	4.1	95	5.1	173	4.6
9–11	82	4.3	83	4.5	165	4.4
12–14	92	4.8	93	5.0	185	4.9
15–17	125	6.5	103	5.5	228	6.0
18–20	106	5.5	84	4.5	190	5.0
21–23	86	4.5	84	4.5	170	4.5
24–26	116	6.1	93	5.0	209	5.5
27–29	104	5.4	109	5.8	213	5.6
30–32	101	5.3	97	5.2	197	5.2
33–35	87	4.5	95	5.1	182	4.8
36–38	96	5.0	104	5.6	199	5.3
39–41	94	4.9	77	4.1	171	4.5
42–44	98	5.1	94	5.0	192	5.1
45–47	96	5.0	96	5.2	192	5.1
48–50	102	5.3	109	5.8	211	5.6
51–53	91	4.8	89	4.8	180	4.8
54–56	96	5.0	93	5.0	189	5.0
57–59	101	5.3	114	6.1	215	5.7
Total	1917	100.0	1860	100.0	3777	100.0

Table DQ.5

Age and Period Heaping

Age and period ratios at boundaries of eligibility by type of information collected (weighted), Serbia, 2005

	Age and period ratios*			Eligibility boundary (lower–upper)	Module or questionnaire
	Males	Females	Total		
Age in household questionnaire					
1	1.05	.97	1.01		
2	1.01	1.07	1.04	Lower	Child discipline and child disability
3	.98	.95	.96		
4	.90	1.02	.95	Upper	Under-5 questionnaire
5	1.15	1.00	1.08	Lower	Child labour and education
6	.93	1.02	.98		
8	.82	.91	.86		
9	1.10	1.02	1.06	Upper	Child disability
10	.99	1.03	1.01		
13	.97	.81	.89		
14	.99	1.08	1.04	Upper	Child labour and child discipline
15	1.02	1.08	1.06	Lower	Women’s questionnaire
16	.99	.89	.94		
17	.93	1.08	1.01		
18	.93	1.00	.96		
23	.91	.87	.89		
24	1.10	1.10	1.10	Upper	Education
25	.96	.98	.97		
48	.88	1.16	1.02		
49	1.01	.80	.90	Upper	Women’s questionnaire
50	1.00	1.10	1.05		
Age in women’s questionnaire					
23	na	.87	na		
24	na	1.08	na	Upper	Sexual behaviour
25	na	1.01	na		
Months since last birth in women’s questionnaire					
6–11	na	.97	na		
12–17	na	1.11	na		
18–23	na	.92	na	Upper	Maternal and child health
24–29	na	1.09	na		
30–35	na	.96	na		

* Age or period ratios are calculated as $x / [(x_{n-1} + x_n + x_{n+1}) / 3]$, where x is age or period.

na Not applicable

Table DQ.6

Completeness of reporting

**Percentage of observations missing information
for selected questions and indicators (weighted),
Serbia, 2005**

Questionnaire and Subject	Reference group	Percent with missing information*	Number of cases
Women			
Date of Birth	All women aged 15–49		
Month only		.2	7516
Month and year missing		.0	7516
Date of first birth	Roma women from Roma settlements aged 15–49 with at least one live birth		
Month only		6.3	78
Month and year missing		3.7	78
Completed years since first birth	Roma women from Roma settlements aged 15–49 with at least one live birth	10.9	3
Date of last birth	All women aged 15–49 with at least one live birth		
Month only		.2	4897
Month and year missing		.1	4897
Date of first marriage/union	Total married women aged 15–49		
Month only		7.8	5306
Month and year missing		4.8	5306
Age at first marriage/union	Total married women aged 15–49	2.6	5306
Age at first intercourse	All women aged 15–24 who have ever had sex	3.0	1916
Time since last intercourse	All women aged 15–24 who have ever had sex	6.2	1006
Under-5s			
Date of Birth	All under-five children surveyed		
Month only		.1	3777
Month and year missing		.0	3777
Anthropometry	All under-five children surveyed		
Height		6.5	3777
Weight		7.9	3777
Height or Weight		8.0	3777

* Includes "Don't know" responses

Table DQ.7

Presence of mother in the household and the person interviewed for the under-5 questionnaire

Distribution of children under five according to whether the mother lives in the same household, and the person interviewed for the under-5 questionnaire (weighted), Serbia, 2005

Age	Mother in the household		Mother not in the household			Total	Number of children aged 0–4 years
	Mother interviewed	Father interviewed	Father interviewed	Other adult female interviewed	Other adult male interviewed		
0	99.7	.0	.3	.0	.0	100.0	280
1	99.5	.0	.2	.3	.0	100.0	305
2	98.9	.3	.4	.4	.0	100.0	320
3	98.2	.2	1.0	.6	.0	100.0	299
4	98.7	.0	.7	.6	.0	100.0	311
Total	99.0	.1	.5	.4	.0	100.0	1514

Table DQ.8

School attendance by single age

Distribution of household population aged 5–24 by educational level and grade attended in the current year (weighted), Serbia, 2005

Age	Pre-school	Primary school								Secondary school				Higher	University	Non-standard curriculum	Don't know	Not attending school	Total	Number
		Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade 1	Grade 2	Grade 3	Grade 4							
5	50.9	.2	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	49.0	100.0	369
6	67.9	18.2	.2	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	13.7	100.0	348
7	3.0	71.3	23.0	.2	.4	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2.2	100.0	353
8	.0	1.4	79.6	18.0	.2	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.8	100.0	282
9	.0	.0	5.0	83.6	10.1	.4	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.8	100.0	347
10	.0	.2	.3	5.0	82.5	11.2	.0	.4	.0	.0	.0	.0	.0	.0	.0	.1	.0	.3	100.0	349
11	.0	.2	.1	.6	5.2	82.7	9.4	1.0	.4	.0	.0	.0	.0	.0	.0	.1	.0	.3	100.0	343
12	.0	.0	.2	.1	.9	5.9	76.4	15.4	.4	.0	.0	.0	.0	.0	.0	.1	.0	.6	100.0	365
13	.0	.0	.0	.1	.2	1.2	4.9	81.7	10.0	.0	.0	.5	.0	.0	.0	.2	.0	1.2	100.0	296
14	.0	.0	.0	.2	.1	.0	.6	5.4	78.6	11.3	1.3	.4	.0	.0	.0	.0	.0	2.0	100.0	339
15	.0	.0	.0	.0	.0	.1	.0	.3	1.9	80.7	12.3	.0	.0	.0	.0	.0	.0	4.6	100.0	344
16	.0	.0	.0	.0	.0	.0	.0	.0	1.3	7.5	65.3	14.4	.0	.0	.0	.1	.0	11.3	100.0	296
17	.0	.0	.0	.5	.0	.0	.0	.0	.1	1.1	7.9	64.5	12.9	.0	.5	.0	.0	12.6	100.0	307
18	.0	.0	.0	.0	.0	.0	.0	.0	.5	.2	.0	8.2	46.2	3.5	4.9	.0	.0	36.6	100.0	312
19	.0	.0	.0	.0	.0	.0	.0	.0	.4	.5	.0	1.0	4.5	10.6	36.5	.0	.0	46.5	100.0	337
20	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1.0	5.8	33.2	.0	.0	60.0	100.0	348
21	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1.0	8.8	27.1	.0	.0	63.0	100.0	354
22	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.4	.0	.0	6.3	29.6	.0	.0	63.7	100.0	356
23	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.2	5.2	23.4	.0	.0	71.3	100.0	316
24	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.4	.0	3.2	12.0	.4	.1	83.9	100.0	395
Total	6.4	4.8	4.8	5.4	5.1	5.2	4.9	4.8	4.6	5.1	3.9	4.1	3.1	2.2	8.5	.1	.0	27.1	100.0	6756

Table DQ.9

Sex ratio at birth among total children born and living

Sex ratio at birth among total children born, children living, and deceased children, by age of women (weighted), Serbia – Roma women from Roma settlements, 2005

Age	Children ever born			Children living			Children deceased			Number of women
	Total number of sons born	Total Number of daughters born	Sex ratio	Number of sons living	Number of daughters living	Sex ratio	Number of deceased sons	Number of deceased daughters	Sex ratio	
15–19	82	74	1.12	81	71	1.15	1	3	.31	378
20–24	225	230	.98	219	223	.98	6	7	.88	297
25–29	403	355	1.14	387	349	1.11	16	6	2.93	301
30–34	417	394	1.06	404	383	1.05	13	10	1.22	279
35–39	419	381	1.10	381	350	1.09	38	31	1.23	246
40–44	401	367	1.09	382	345	1.11	19	22	.88	238
45–49	279	277	1.01	249	268	.93	30	10	3.15	187
Total	2226	2078	1.07	2103	1990	1.06	123	88	1.41	1927

Note: Sex ratios are calculated as number of males/number of females.
Weights for Roma sample were used.

Table DQ.10

Distribution of women according to time since last birth

Distribution of women aged 15–49 with at least one live birth, by months since last birth (weighted), Serbia, 2005

	Months since last birth	
	Number	Percent
0	13	1.3
1	13	1.4
2	28	2.9
3	33	3.4
4	30	3.1
5	29	3.0
6	23	2.4
7	30	3.2
8	27	2.8
9	27	2.8
10	18	1.9
11	34	3.5
12	33	3.4
13	27	2.8
14	25	2.6
15	38	4.0
16	39	4.0
17	25	2.7
18	25	2.6
19	25	2.7
20	32	3.4
21	22	2.3
22	22	2.3
23	32	3.3
24	25	2.6
25	31	3.3
26	27	2.9
27	27	2.8
28	31	3.3
29	28	2.9
30	27	2.9
Total	959	100.0

Appendix E

MICS Indicators: Numerators and Denominators

	INDICATOR	NUMERATOR	DENOMINATOR
1	Under-five mortality rate	Probability of dying by exactly 5 years of age	
2	Infant mortality rate	Probability of dying by exactly 1 year of age	
4	Skilled attendant at delivery	Number of women aged 15–49 with a birth in the 2 years preceding the survey that were attended during childbirth by skilled health personnel	Total number of women surveyed aged 15–49 with a birth in the 2 years preceding the survey
5	Institutional deliveries	Number of women aged 15–49 with a birth in the 2 years preceding the survey that delivered in a health facility	Total number of women surveyed aged 15–49 with a birth in 2 years preceding the survey
6	Underweight prevalence	Number of children under age five that fall below minus two standard deviations from the median weight for age of the NCHS/WHO standard (moderate and severe); number that fall below minus three standard deviations (severe)	Total number of children under age five that were weighed
7	Stunting prevalence	Number of children under age five that fall below minus two standard deviations from the median height for age of the NCHS/WHO standard (moderate and severe); number that fall below minus three standard deviations (severe)	Total number of children under age five measured
8	Wasting prevalence	Number of children under age five that fall below minus two standard deviations from the median weight for height of the NCHS/WHO standard (moderate and severe); number that fall below minus three standard deviations (severe)	Total number of children under age five weighed and measured
9	Low-birthweight infants	Number of last live births in the 2 years preceding the survey weighing below 2500 grams	Total number of last live births in the 2 years preceding the survey
10	Infants weighed at birth	Number of last live births in the 2 years preceding the survey that were weighed at birth	Total number of last live births in the 2 years preceding the survey
11	Use of improved drinking water sources	Number of household members living in households using improved sources of drinking water	Total number of household members in households surveyed
12	Use of improved sanitation facilities	Number of household members using improved sanitation facilities	Total number of household members in households surveyed
13	Water treatment	Number of household members using water that has been treated	Total number of household members in households surveyed
14	Disposal of child's faeces	Number of children under age three whose (last) stools were disposed of safely	Total number of children under age three surveyed
15	Exclusive breastfeeding rate	Number of infants aged 0–5 months that are exclusively breastfed	Total number of infants aged 0–5 months surveyed

INDICATOR		NUMERATOR	DENOMINATOR
16	Continued breastfeeding rate	Number of infants aged 12–15 months, and 20–23 months, that are currently breastfeeding	Total number of children aged 12–15 months and 20–23 months surveyed
17	Timely complementary feeding rate	Number of infants aged 6–9 months that are receiving breastmilk and complementary foods	Total number of infants aged 6–9 months surveyed
18	Frequency of complementary feeding	Number of infants aged 6–11 months that receive breastmilk and complementary food at least the minimum recommended number of times per day (two times per day for infants aged 6–8 months, three times per day for infants aged 9–11 months)	Total number of infants aged 6–11 months surveyed
19	Adequately fed infants	Number of infants aged 0–11 months that are appropriately fed: infants aged 0–5 months that are exclusively breastfed and infants aged 6–11 months that are breastfed and ate solid or semi-solid foods the appropriate number of times (see above) yesterday	Total number of infants aged 0–11 months surveyed
20	Antenatal care	Number of women aged 15–49 years that were attended to at least once during pregnancy in the 2 years preceding the survey by skilled health personnel	Total number of women surveyed aged 15–49 with a birth in the 2 years preceding the survey
21	Contraceptive prevalence	Number of women currently married or in union aged 15–49 years that are using (or whose partner is using) a contraceptive method (either modern or traditional)	Total number of women aged 15–49 years that are currently married or in union
22	Antibiotic treatment of suspected pneumonia	Number of children aged 0–59 months with suspected pneumonia in the previous 2 weeks receiving antibiotics	Total number of children aged 0–59 months with suspected pneumonia in the previous 2 weeks
23	Care-seeking for suspected pneumonia	Number of children aged 0–59 months with suspected pneumonia in the previous 2 weeks that are taken to an appropriate health provider	Total number of children aged 0–59 months with suspected pneumonia in the previous 2 weeks
24	Solid fuels	Number of residents in households that use solid fuels (wood, charcoal, crop residues and dung) as the primary source of domestic energy to cook	Total number of residents in households surveyed
25	Tuberculosis immunization coverage	Number of children aged 18–29 months receiving BCG vaccine before their first birthday	Total number of children aged 18–29 months surveyed
26	Polio immunization coverage	Number of children aged 18–29 months receiving OPV3 vaccine before their first birthday	Total number of children aged 18–29 months surveyed
27	Immunization coverage for diphtheria, pertussis and tetanus (DPT)	Number of children aged 18–29 months receiving DPT3 vaccine before their first birthday	Total number of children aged 18–29 months surveyed
28	MMR immunization coverage	Number of children aged 18–29 months receiving MMR vaccine before 18 months of age	Total number of children aged 18–29 months surveyed
31	Fully immunized children	Number of children aged 18–29 months receiving DPT1-3, OPV-1-3, BCG and MMR vaccines within recommended time (DPT1-3, OPV-1-3, BCG before first birthday and MMR before 18 months of age)	Total number of children aged 18–29 months surveyed
33	Use of oral rehydration therapy (ORT)	Number of children aged 0–59 months with diarrhoea in the previous 2 weeks that received oral rehydration salts and/or an appropriate household solution	Total number of children aged 0–59 months with diarrhoea in the previous 2 weeks
34	Home management of diarrhoea	Number of children aged 0–59 months with diarrhoea in the previous 2 weeks that received more fluids AND continued eating somewhat less, the same or more food	Total number of children aged 0–59 months with diarrhoea in the previous 2 weeks
35	Received ORT or increased fluids and continued feeding	Number of children aged 0–59 months with diarrhoea that received ORT (oral rehydration salts or an appropriate household solution) or received more fluids AND continued eating somewhat less, the same or more food	Total number of children aged 0–59 months with diarrhoea in the previous 2 weeks

INDICATOR		NUMERATOR	DENOMINATOR
44	Content of antenatal care	Number of women with a live birth in the 2 years preceding the survey that received antenatal care during the last pregnancy	Total number of women with a live birth in the 2 years preceding the survey
45	Timely initiation of breastfeeding	Number of women with a live birth in the 2 years preceding the survey that put the newborn infant to the breast within 1 hour of birth	Total number of women with a live birth in the 2 years preceding the survey
46	Support for learning	Number of children aged 0–59 months living in households in which an adult has engaged in four or more activities to promote learning and school readiness in the past 3 days	Total number of children aged 0–59 months surveyed
47	Father's support for learning	Number of children aged 0–59 months whose father has engaged in one or more activities to promote learning and school readiness in the past 3 days	Total number of children aged 0–59 months
48	Support for learning: children's books	Number of households with three or more children's books	Total number of households surveyed
49	Support for learning: non-children's books	Number of households with three or more non-children's books	Total number of households surveyed
50	Support for learning: materials for play	Number of households with three or more materials intended for play	Total number of households surveyed
51	Non-adult care	Number of children aged 0–59 months left alone or in the care of another child younger than 10 years of age in the past week	Total number of children aged 0–59 months surveyed
52	Pre-school attendance	Number of children aged 36–59 months that attend some form of early childhood education programme	Total number of children aged 36–59 months surveyed
53	School readiness	Number of children in first grade that attended some form of pre-school the previous year	Total number of children in the first grade surveyed
54	Net intake rate in primary education	Number of children of school-entry age that are currently attending first grade	Total number of children of primary-school entry age surveyed
55	Net primary school attendance rate	Number of children of primary-school age currently attending primary or secondary school	Total number of children of primary-school age surveyed
56	Net secondary school attendance rate	Number of children of secondary-school age currently attending secondary school or higher	Total number of children of secondary-school age surveyed
57	Children reaching grade five	Proportion of children entering the first grade of primary school that eventually reach grade five	
58	Transition rate to secondary school	Number of children that were in the last grade of primary school during the previous school year that attend secondary school	Total number of children that were in the last grade of primary school during the previous school year surveyed
59	Primary completion rate	Number of children (of any age) attending the last grade of primary school (excluding repeaters)	Total number of children of primary school completion age (age appropriate to final grade of primary school) surveyed
60	Adult literacy rate	Number of women aged 15–24 that are able to read a short simple statement about everyday life	Total number of women aged 15–24 years surveyed
61	Gender parity index	Proportion of girls in primary and secondary education	Proportion of boys in primary and secondary education
62	Birth registration	Number of children aged 0–59 months whose births are reported registered	Total number of children aged 0–59 months surveyed

	INDICATOR	NUMERATOR	DENOMINATOR
67	Marriage before age 15 and age 18	Number of women that were first married or in union by the exact age of 15 and the exact age of 18, by age groups	Total number of women aged 15–49 years and 20–49 years surveyed, by age groups
68	Young women aged 15–19 years currently married or in union	Number of women aged 15–19 years currently married or in union	Total number of women aged 15–19 years surveyed
69	Spousal age difference	Number of women married/in union aged 15–19 years and 20–24 years with a difference in age of 10 or more years between them and their current spouse	Total number of women aged 15–19 and 20–24 years surveyed that are currently married or in union
71	Child labour	Number of children aged 5–14 years that are involved in child labour	Total number of children aged 5–14 years surveyed
72	Labourer students	Number of children aged 5–14 years involved in child labour activities that attend school	Total number of children aged 5–14 years involved in child labour activities
73	Student labourers	Number of children aged 5–14 years attending school that are involved in child labour activities	Total number of children aged 5–14 years attending school
74	Child discipline	Number of children aged 2–14 years that (1) experience only non-violent aggression, (2) experience psychological aggression as punishment, (3) experience minor physical punishment, (4) experience severe physical punishment	Total number of children aged 2–14 years selected and surveyed
82	Comprehensive knowledge about HIV prevention among young people	Number of women aged 15–24 years that correctly identify two ways of avoiding HIV infection and reject three common misconceptions about HIV transmission	Total number of women aged 15–24 years surveyed
83	Condom use with non-regular partners	Number of women aged 15–24 years reporting the use of a condom during sexual intercourse with their last non-marital, non-cohabiting sex partner in the previous 12 months	Total number of women aged 15–24 years surveyed that had a non-marital, non-cohabiting partner in the previous 12 months
84	Age at first sex among young people	Number of women aged 15–24 years that have had sex before age 15	Total number of women aged 15–24 years surveyed
85	Higher risk sex in the last year	Number of sexually active women aged 15–24 that have had sex with a non-marital, non-cohabiting partner in the previous 12 months	Total number of women aged 15–24 that were sexually active in the previous 12 months
86	Attitude towards people with HIV/AIDS	Number of women expressing acceptance on all four questions about people with HIV or AIDS	Total number of women surveyed
87	Women who know where to be tested for HIV	Number of women that state knowledge of a place to be tested	Total number of women surveyed
88	Women who have been tested for HIV	Number of women that report being tested for HIV	Total number of women surveyed
89	Knowledge of mother-to-child transmission of HIV	Number of women that correctly identify all three means of vertical transmission	Total number of women surveyed
90	Counselling coverage for the prevention of mother-to-child transmission of HIV	Number of women that gave birth in the previous 24 months and received antenatal care reporting that they received counselling on HIV/AIDS during this care	Total number of women that gave birth in the previous 24 months surveyed
91	Testing coverage for the prevention of mother-to-child transmission of HIV	Number of women that gave birth in the previous 24 months and received antenatal care reporting that they received the results of an HIV test during this care	Total number of women that gave birth in the previous 24 months surveyed

	INDICATOR	NUMERATOR	DENOMINATOR
92	Age-mixing among sexual partners	Number of women aged 15–24 years that had sex in the past 12 months with a partner who was 10 or more years older than they were	Total number of sexually active women aged 15–24 surveyed
93	Security of tenure	Number of household members living in urban households that lack formal documentation for their residence or that feel at risk of eviction	Number of urban household members in households surveyed
94	Durability of housing	Number of household members living in urban dwellings that are not considered durable	Number of urban household members in households surveyed
95	Slum household	Number of household members living in urban slums	Number of household members in urban households surveyed
98	Unmet need for family planning	Number of women that are currently married or in union that are fecund and want to space their births or limit the number of children they have and that are not currently using contraception	Total number of women interviewed that are currently married or in union
99	Demand satisfied for family planning	Number of women currently married or in union that are currently using contraception	Number of women currently married or in union that have an unmet need for contraception or that are currently using contraception
100	Attitudes towards domestic violence	Number of women that consider that a husband/partner is justified in hitting or beating his wife under at least one of the following circumstances: (1) she goes out without telling him, (2) she neglects the children, (3) she argues with him, (4) she refuses to have sex with him, (5) she burns the food	Total number of women surveyed
101	Child disability	Number of children aged 2–9 years with at least one of nine reported disabilities: (1) delay in sitting, standing or walking, (2) difficulty seeing, either in the daytime or at night, (3) appears to have difficulty hearing, (4) difficulty in understanding instructions, (5) difficulty walking or moving arms or has weakness or stiffness of limbs, (6) has fits, becomes rigid, loses consciousness, (7) does not learn to do things like other children his/her age, (8) cannot speak or cannot be understood in words, (9) appears mentally backward, dull or slow	Total number of children aged 2–9 surveyed

Appendix F

Questionnaires



We are from Statistical Office of the Republic of Serbia / Research Agency Strategic Marketing. We are working on a project concerned with family health and education. I would like to talk to you about this. The interview will take about 20 minutes. All the information we obtain will remain strictly confidential and your answers will never be identified. During this time I would like to speak with the household head and all mothers or others who take care of children in the household. May I start now? *If permission is given, begin the interview.*

MODULE HH – HOUSEHOLD INFORMATION PANEL	
HH1. Cluster number:	HH2. Household number:
HH3. Interviewer name:	HH4. Supervisor name:
Interviewer number:	Supervisor number:
HH5. Day/Month/Year of interview: / / 2 0 0 5	
HH6. Address of household:	HH7. Telephone of household: (Must enter area code)
HH8. Name of head of household:	

Interviewer: GO to MODULE HL – LIST OF HOUSEHOLD MEMBERS on the inside of the folder/cover in which you will put all questionnaires.

After all questionnaires for the household have been completed, fill in the following information:	
HH9. Result of HH interview:	HH10. Respondent to HH questionnaire:
Completed 1	Name:
Not at home 2	Line No. from List of Household Members (MODULE HL)
Refused 3	
HH not found/destroyed 4	HH11. Total number of household members:
Other (specify) 6	
HH12. No. of women eligible for interview:	HH13. No. of women questionnaires completed:
HH14. No. of children under age 5:	HH15. No. of under-5 questionnaires completed:
Interviewer/supervisor notes: Use this space to record notes about the interview with this household, such as call-back times, incomplete individual interview forms, number of attempts to re-visit, etc.	
HH16. Data entry clerk:	

MODULE HL – HOUSEHOLD LISTING FORM

First, please tell me the name of each person who usually lives here, starting with the head of the household.

List the head of the household in line 01. List all household members (HL2), their relationship to the household head (HL3), and their sex (HL4).

Then ask: Are there any others who live here, even if they are not at home now? (These may include children in school or at work). If yes, complete listing. Then, ask questions starting with HL2A for each person at a time. Add a continuation sheet if there are more than 15 household members. Tick here if continuation sheet used. ☐

Record in line 01 the name of household head. After HH proceed with names of other household members (column HL2).

Then ask questions, beginning with HL2A for each member of household separately.

HL1. Line No.	HL2. Name	HL2A. Activity of household members: 01 Employed 02 Works outside official employment 03 Delf-employed 04 Farmer 05 Unemployed 06 Pensioner 07 Housewife 08 Child, pupil, student 09 Lives abroad 10 Other	HL3. What is the relationship of (name) to the head of the household?	HL4. Is (name) male or female? 1 Male 2 Female	HL5. How old is (name)? How old was (name) on his/her last birthday? Record in completed years 998 = DK* ⇨ HL6 For each child and woman write down age in completed years	HL5A. Date of (name's) birth? For each child and woman write down at least the year of birth 98 = DK day 98 = DK month 9998 = DK year
LINE	NAME	ACTIVITY	RELATIONSHIP	M F	AGE	BIRTH DATE
01			0 1	1 2		
02				1 2		
03				1 2		
04				1 2		
05				1 2		
06				1 2		
07				1 2		
08				1 2		
09				1 2		
10				1 2		
11				1 2		
12				1 2		
13				1 2		
14				1 2		
15				1 2		

* Codes for HL3: Relationship to head of household:

01 = Head

02 = Wife or Husband

03 = Son or Daughter

04 = Son or Daughter In-Law

05 = Grandchild

06 = Parents

07 = Parent-In-Law

08 = Brother or Sister

09 = Brother or Sister-In-Law

10 = Uncle/Aunt

11 = Niece/Nephew By Blood

12 = Niece/Nephew By Marriage

13 = Other Relative

14 = Adopted/Foster/Stepchild

15 = Not Related

98 = Don't Know

Eligible for			For children age 0–17 years ask HL9–HL12			
Women's Interview	Child labour module	Under-5 interview				
HL6. Circle Line no. if woman is age 15–49	HL7. For each child age 5–14: Who is the mother or primary caretaker of this child? Record Line no. of mother/caretaker	HL8. For each child under 5: Who is the mother or primary care- taker of this child? Record Line no. of mother/caretaker in corresponding line for child under 5	HL9. Is (name's) natural mother alive? 1 Yes 2 No ⇒ HL11 8 DK ⇒ HL11	HL10. If alive: Does (name's) natural mother live in this household? Record Line no. of mother or 00 for 'no'	HL11. Is (name's) natural father alive? 1 Yes 2 No ⇒ next line 8 DK ⇒ next line	HL12. If alive: Does (name's) natural father live in this household? Record Line no. of father or 00 for 'no'
15–49	MOTHER	MOTHER	YES NO DK	MOTHER	YES NO DK	FATHER
01			1 2 8		1 2 8	
02			1 2 8		1 2 8	
03			1 2 8		1 2 8	
04			1 2 8		1 2 8	
05			1 2 8		1 2 8	
06			1 2 8		1 2 8	
07			1 2 8		1 2 8	
08			1 2 8		1 2 8	
09			1 2 8		1 2 8	
10			1 2 8		1 2 8	
11			1 2 8		1 2 8	
12			1 2 8		1 2 8	
13			1 2 8		1 2 8	
14			1 2 8		1 2 8	
15			1 2 8		1 2 8	

Are there any other persons living here – even if they are not members of your family or do not have parents living in this household?
Including children at work or at school? If yes, insert child's name and complete form. Then, complete the totals below.

WOMEN 15–49	CHILDREN 5–14	UNDER-5s

Now you should prepare separate questionnaires for each woman aged 15 to 49 years, and each child under 5, who live in this household. For each woman aged 15 to 49 years prepare the Questionnaire for Woman aged 15–49 years and write her name and line number and other identifying information in the information panel of the Women's. For each child under 5 prepare a Questionnaire for Child Under 5, and, write his/her name and line number and the line number of his/her mother or caretaker in the information panel of the Questionnaire for Children Under Five. PROCEED WITH FILLING QUESTIONNAIRE FOR HOUSEHOLD.

* See instructions: to be used only for elderly household members (code meaning "do not know/over age 50").

Now for each woman aged 15–49 years, write her name and line number and other identifying information in the information panel of the Women's Questionnaire. For each child under age 5, write his/her name and line number AND the line number of his/her mother or caretaker in the information panel of the Questionnaire for Children Under Five. You should now have a separate questionnaire for each eligible woman and each child under five in the household.

1. QUESTIONNAIRE FOR HOUSEHOLD – QUESTIONS FROM THIS QUESTIONNAIRE CAN BE ANSWERED BY ANY ADULT HOUSEHOLD M

HH1. Cluster number:
HH2. Household number:

MODULE ED – EDUCATION (For each household member keep line number from table HL)

For household members age 5 and above		For household members age 5–24 years										1. grade
ED1. Line No.	ED1A. Name	ED2. Has (name) ever attended school or pre-school?	ED3. What is the highest level of school (name) attended? What is the highest grade (name) completed at this level?	ED4. Did (name) attend school or pre-school during school year 2005/2006.?	ED5. Since last (day of the week), how many days did (name) attend school? Insert number of days in space below.	ED6. During this/that school year, which level and grade is (name) attending?	ED7. Did (name) attend school or pre-school at any time during the previous school year, that is (2003–2004)?	ED8. During that previous school year, which level and grade did (name) attend?	ED9. Ask only for children who go to first grade of primary school: Did (name) attend pre-school institution for at least 2 hours in 6 months during last 12?			
LINE	NAME	YES	NO	LEVEL	GRADE	YES	NO	DAYS	LEVEL	GRADE	YES	NO
01		1	2⇒next.	0 1 2 3 4 6 8		1	2		0 1 2 3 4 6 8		1	2
02		1	2⇒next.	0 1 2 3 4 6 8		1	2		0 1 2 3 4 6 8		1	2
03		1	2⇒next.	0 1 2 3 4 6 8		1	2		0 1 2 3 4 6 8		1	2
04		1	2⇒next.	0 1 2 3 4 6 8		1	2		0 1 2 3 4 6 8		1	2
05		1	2⇒next.	0 1 2 3 4 6 8		1	2		0 1 2 3 4 6 8		1	2
06		1	2⇒next.	0 1 2 3 4 6 8		1	2		0 1 2 3 4 6 8		1	2
07		1	2⇒next.	0 1 2 3 4 6 8		1	2		0 1 2 3 4 6 8		1	2
08		1	2⇒next.	0 1 2 3 4 6 8		1	2		0 1 2 3 4 6 8		1	2
09		1	2⇒next.	0 1 2 3 4 6 8		1	2		0 1 2 3 4 6 8		1	2
10		1	2⇒next.	0 1 2 3 4 6 8		1	2		0 1 2 3 4 6 8		1	2
11		1	2⇒next.	0 1 2 3 4 6 8		1	2		0 1 2 3 4 6 8		1	2
12		1	2⇒next.	0 1 2 3 4 6 8		1	2		0 1 2 3 4 6 8		1	2
13		1	2⇒next.	0 1 2 3 4 6 8		1	2		0 1 2 3 4 6 8		1	2
14		1	2⇒next.	0 1 2 3 4 6 8		1	2		0 1 2 3 4 6 8		1	2
15		1	2⇒next.	0 1 2 3 4 6 8		1	2		0 1 2 3 4 6 8		1	2

MODULE ED – EDUCATION (For each household member keep line number from table HL)

For all household members aged from 5 to 24 years who attended school in school year 2005/2006 (Answered "Yes" to question ED4, on previous page).

ED1. Line No	ED1A. Name	ED10. What is the distance in kilometers from house/flat to school which (name of child) attends? • If school is located at distance < than 1 km, write down 000 • If household member aged from 5 to 24 years does not live with parents, that is, if he/she attends school in other place, write down 998 and go to other household member	ED11. How does (name of child) usually go to school? 1. On foot ⇒ ED13. 2. Public transport ⇒ ED12. 3. Car, motorcycle ⇒ ED12. 4. Other (bicycle etc.) ⇒ ED13.	ED12. What is (name of child's) total monthly cost of transportation to school and back from school? Write down answer in Dinars.	ED13. How many minutes does (name of child) spend going to/from school?
LINE	NAME	DISTANCE OF SCHOOL (IN KM)	WAY	DINARS	MINUTES
01			1 2 3 4		
02			1 2 3 4		
03			1 2 3 4		
04			1 2 3 4		
05			1 2 3 4		
06			1 2 3 4		
07			1 2 3 4		
08			1 2 3 4		
09			1 2 3 4		
10			1 2 3 4		
11			1 2 3 4		
12			1 2 3 4		
13			1 2 3 4		
14			1 2 3 4		
15			1 2 3 4		

MODULE WS – WATER AND SANITATION			
WS1. What is the main source of drinking water for members of your household?	City/town water-supply system	11	WS5
	Rural (local) water-supply system	12	
	Public tap/standpipe	13	WS3
	Tubewell/borehole	21	
	Protected well or spring	31	
	Unprotected well or spring	32	
	Tanker-truck	61	
	Surface water (river, stream, dam, lake, pond, canal, irrigation channel)	81	
	Bottled water	91	WS2
	Other (specify)	96	WS3
WS2. What is the main source of water used by your household for other purposes such as cooking and hand washing?	City/town water-supply system	11	WS5
	Rural (local) water-supply system	12	
	Public tap/standpipe	13	WS3
	Tubewell/borehole	21	
	Protected well or spring	31	
	Unprotected well or spring	32	
	Tanker-truck	61	
	Surface water (river, stream, dam, lake, pond, canal, irrigation channel)	81	
	Other (specify)	96	
WS3. How long does it take to go there, get water, and come back?	No. of minutes		WS4
	Water on premises	995	WS5
	Don't know	998	WS4
WS4. Who usually goes to this source to fetch the water for your household? <i>Probe:</i> Is this person under age 15? What sex? <i>Circle code that best describes this person.</i>	Adult woman	1	WS5
	Adult man	2	
	Female child (under 15 g.)	3	
	Male child (under 15 g.)	4	
	Don't know	8	
WS5. Do you treat your water in any way to make it safer to drink?	Yes	1	WS6
	No	2	WS7
	Don't know	8	
WS6. What do you usually do to the water to make it safer to drink? Anything else? <i>Record all items mentioned.</i> <i>"Z" is circled only if no answer is given.</i>	Boil	A	WS7
	Add bleach/chlorine	B	
	Strain it through a cloth	C	
	Use water filter (ceramic, sand, composite, etc.)	D	
	Solar disinfection	E	
	Let it stand and settle	F	
	Other (specify)	X	
	Don't know	Z	

WS7. What kind of toilet facility do members of your household usually use? <i>If “flush” or “pour flush”, probe: Where does it flush to? If necessary, ask permission to observe the facility</i>	Flush to piped sewer system	11	WS8
	Flush to septic tank	12	
	No flush with a water-proof septic tank	21	
	Latrine	22	
	No toilet facility	95	Section HC
	Other (specify)	96	WS8
WS8. Do you share this facility with other households?	Yes	1	WS9
	No	2	Section HC
WS9. How many households in total use this toilet facility?	No. of households (if less than 10)	0	Section HC
	Ten or more households	10	
	Don't know	98	

MODULE HC – HOUSEHOLD CHARACTERISTICS			
HC1A. What is the religion of the head of this household?	Orthodox	11	HC1B
	Catholic	12	
	Islamic	13	
	Protestant	14	
	Nonbeliever	17	
	Other (specify)	96	
HC1B. What is the mother tongue/native language of the head of this household?	Serbian	11	HC1C
	Hungarian	12	
	Bosnian	13	
	Roma	14	
	Albanian	15	
	Other (specify)	96	
HC1C. To what ethnic group does the head of this household belong?	Serbian	11	HC2
	Montenegrin	12	
	Hungarian	13	
	Bosniak	14	
	Muslim	15	
	Roma	16	
	Albanian	17	
	Other (specify)	96	
HC2. What is the area of house/flat you live in? <i>Write down area in square meters.</i>	Area in m ²		HC2A
HC2A. How many rooms do you use in house/flat that you live in other than kitchen, hall and auxiliary rooms?	No. of rooms		HC2B
HC2B. How many rooms in this household are used for sleeping?	No. of rooms for sleeping		HC3

HC3. Main material of the dwelling floor Record observation.	Natural floor		HC4
	Earth	11	
	Rudimentary floor		
	Wood planks	21	
	Finished floor		
	Parquet or polished wood	31	
	Vinyl or asphalt strips	32	
	Ceramic tiles	33	
	Cement	34	
	Other (specify)	96	
HC4. Main material of the roof Record observation.	No Roof	11	HC5
	Natural roofing		
	Straw	12	
	Rudimentary Roofing		
	Reed	21	
	Wood planks	23	
	Finished roofing		
	Metal	31	
	Wood	32	
	Calamine/cement fiber	33	
	Ceramic tiles	34	
	Cement	35	
	Roofing shingles	36	
	Other (specify)	96	
HC5. Main material of the walls Record observation.	No walls	11	HC6
	Natural walls		
	Cane/palm/trunks	12	
	Dirt	13	
	Rudimentary walls		
	Bamboo with mud	21	
	Stone with mud	22	
	Uncovered adobe	23	
	Plywood	24	
	Carton	25	
	Reused wood	26	
	Finished walls		
	Cement	31	
	Stone with lime/cement	32	
	Bricks	33	
	Cement blocks	34	
	Covered adobe	35	
	Wood planks/shingles	36	
	Other (specify)	96	

HC6. What type of fuel does your household mainly use for cooking? One answer.	Electricity	01	HC8	
	Liquid Propane Gas (LPG)	02		
	Natural gas	03		
	Coal/Lignite	06	HC7	
	Charcoal	07		
	Wood	08		
	Straw/shrubs/grass	09		
	Agricultural crop residue	11		
	Other (specify)		96	
HC7. In this household, is food cooked on an open fire, an open stove or a closed stove? Probe for type.	Open fire/fireplace	1	HC7A	
	Open stove (without plate)	2	HC8	
	Closed stove (with plate)	3		
	Other (specify)		6	
HC7A. Does the fire/stove have a chimney or a hood?	Yes	1	HC8	
	No	2		
HC8. Is the cooking usually done in the house, in a separate building, or outdoors? One answer.	In the house	1	HC9	
	In a separate building	2		
	Outdoors	3		
	Other (specify)			6
HC9. Does your household have: Read the list.		Yes	No	HC10
	Electricity	1	2	
	Radio	1	2	
	Television	1	2	
	Non-Mobile Telephone	1	2	
	Refrigerator	1	2	
	Water heater	1	2	
	Washing machine	1	2	
	Dishwashing machine	1	2	
	Computer	1	2	
	Air conditioner	1	2	
	Heating	1	2	
HC10. Does any member of your household have: Read the list.		Yes	No	HC10A
	Mobile Telephone	1	2	
	Bicycle	1	2	
	Motorcycle	1	2	
	Tractor	1	2	
	Car	1	2	
	Truck	1	2	
	Boat with motor	1	2	

HC10A. How would you evaluate the standard of your household? <i>Do not read answers.</i>	Very bad	1	HC10B
	Bad	2	
	Medium	3	
	Good	4	
	Very good	5	
	DK/Not sure	8	
HC10B. In your opinion, what is the minimal monthly amount needed to cover basic costs of your household? <i>If DK or not sure, write down "999998".</i>	Dinars		HC11
HC11. Does any member of this household own any land that can be used for agriculture?	Yes	1	HC12
	No	2	HC13
HC12. How many hectares of agricultural land do members of this household own? <i>If unknown, record '98'.</i>	Hectares		HC13
HC13. Does this household own any livestock, herds, or farm animals?	Yes	1	HC14
	No	2	HC15A
HC14. How many of the following animals does this household have? <i>If none, record '000'.</i> <i>If unknown, record '998'.</i> <i>Write answers from the list in given order.</i>	Total Cattle		HC15A
	Milk cows		
	Horses, donkeys, or mules		
	Goats		
	Sheep		
	Poultry (including chicken, ducks, gees)		
	Pigs		
	Bee hive		
HC15A. Do you or someone in this household own this dwelling, or do you live in state-owned dwelling? <i>For owners – write down line number from List of household members. If more than one owner – write down "95".</i>	Owner	1	HC15B
	Rent	2	HC15D
	State-owned flat	3	
	Rent free/squatter/other	4	
HC15B. Do you or someone in this household have a title deed, or sale contract for this dwelling?	Yes	1	HC15F
	No	2	HC15C
HC15C. What kind of document do you have for the ownership of this dwelling? Anything else? <i>Record all items mentioned.</i>	Certificate of occupation (or adjudication certificate)	A	HC15F
	Property tax certification	B	
	Utility bills	C	
	Other (specify)	X	
	None/No document	Y	
HC15D. Do you have a written rental contract for this dwelling?	Yes	1	HC15F
	No	2	HC15E

HC15E. Do you have any documentation or agreement for the rental of this dwelling? <i>If Yes, What kind of document or agreement do you have for the rental of this dwelling?</i> Anything else? <i>If no documentation, ask on what basis they rent the dwelling. Record all items mentioned.</i>	Informal agreement (written)	A	HC15F
	Verbal agreement (no document)	B	
	Occupied rent free		
	With knowledge of owner	C	
	Without the owner's knowledge	D	
	Other (specify)	X	
	None/No document	Y	
HC15F. Do you feel secure from eviction from this dwelling?	Yes	1	HC15G
	No	2	
	Don't know	8	
HC15G. Have you been evicted from your home at any time during the past 15 years? <i>If Yes, probe: Has this happened only once, or more than once?</i>	Yes, once	1	HC15H
	Yes, several times	2	
	No	3	
HC15H. Dwelling located in or near: <i>Observe, and circle all items that describe the location of dwelling.</i> <i>Multiple answer. Circle "Y" only if none of the above.</i>	Landslide area	A	HC15I
	Flood-prone area	B	
	River bank	C	
	Steep hill	D	
	Garbage mountain/pile	E	
	Industrial pollution area	F	
	Railroad	G	
	Power plant	H	
	Flyover	I	
	None of the above	Y	
HC15I. Condition of dwelling: <i>Multiple answer. Observe, and circle all items that describe the condition of dwelling.</i> <i>Circle "Y" only if none of the above.</i>	Cracks/openings in walls	A	HC15J
	No windows	B	
	Windows with broken glass/no glass	C	
	Visible holes in the roof	D	
	Incomplete roof	E	
	Insecure door	F	
	None of the above	G	
HC15J. Dwelling surroundings: <i>Multiple answer. Observe, and circle all items that describe the dwelling surroundings.</i> <i>Circle "Y" only if none of the above.</i>	Very narrow passage between houses instead of road	A	Section CL
	Too many power cables connecting to neighborhood's main distribution post	B	
	None of the above	Y	

MODULE CL – CHILD LABOUR (For each household number keep line number from table HL – LIST OF HOUSEHOLD MEMBERS)

To be administered to mother/caretaker of each child in the household age 5 through 14 years. For household members below age 5 or above age 14, leave row's blank.
Now I would like to ask about any work children in this household may do.

CL1. Line No	CL2. Name	CL3. During the past week, did (name) do any kind of work for someone who is not a member of this household? If yes: For pay in cash or kind? 1 Yes, for pay (cash or kind) 2 Yes, unpaid 3 No ⇒ to CL5.	CL4. If yes: Since last (day of the week), about how many hours did he/she do this work for someone who is not a member of this household? If more than one job, include all hours at all jobs. Record response then ⇒ CL6	CL5. At any time during the past year, did (name) do any kind of work for someone who is not a member of this household? If yes: For pay in cash or kind? 1 Yes, for pay (cash or kind) 2 Yes, unpaid 3 No		CL6. During the past week, did (name) help with household chores such as shopping, collecting firewood, cleaning, fetching water, or caring for children? 1 Yes 2 No ⇒ to CL8	CL7. If yes: Since last (day of the week), about how many hours did he/she spend doing these chores?	CL8. During the past week, did (name) do any other family work (on the farm or in a business or selling goods in the street?) 1 Yes 2 No ⇒ next line	CL9. If yes: Since last (day of the week), about how many hours did he/she do this work?
				PAID	UNPAID				
01		1 2 3			1 2 3	1 2		1 2	
02		1 2 3			1 2 3	1 2		1 2	
03		1 2 3			1 2 3	1 2		1 2	
04		1 2 3			1 2 3	1 2		1 2	
05		1 2 3			1 2 3	1 2		1 2	
06		1 2 3			1 2 3	1 2		1 2	
07		1 2 3			1 2 3	1 2		1 2	
08		1 2 3			1 2 3	1 2		1 2	
09		1 2 3			1 2 3	1 2		1 2	
10		1 2 3			1 2 3	1 2		1 2	
11		1 2 3			1 2 3	1 2		1 2	
12		1 2 3			1 2 3	1 2		1 2	
13		1 2 3			1 2 3	1 2		1 2	
14		1 2 3			1 2 3	1 2		1 2	
15		1 2 3			1 2 3	1 2		1 2	

MODULE CD – CHILD DISCIPLINE

Ask mother/caretaker questions from module CD – Child Discipline Module for one child aged from 2 to 14 years. If no children of this age in the household, go to next module DA – Disability. If more than one child aged 2 to 14 years, **the questions will refer to the child whose birthday comes first after the date of interview.** Find this information in List of Household Members (Table HL – question HL5A). Ask questions for that particular child.

After establishing to which child the questions from this module will refer, administer to mother/caretaker of this child.

CD11. Write name and line no. of the child selected from Table HL – List of household members, questions HL1 I HL2.	Name	CD12	
	Line no.		
CD12. All adults use certain ways to teach children the right behavior or to address a behavior problem. I will read various methods that are used and I want you to tell me if you or anyone else in your household has used this method with <i>(name)</i> in the past month.			
CD12A. Took away privileges, forbade something <i>(name)</i> liked or did not allow him/her to leave house.	Yes	1	CD12B
	No	2	
CD12B. Explained why something (the behavior) was wrong.	Yes	1	CD12C
	No	2	
CD12C. Shook him/her.	Yes	1	CD12D
	No	2	
CD12D. Shouted, yelled at or screamed at him/her.	Yes	1	CD12E
	No	2	
CD12E. Gave him/her something else to do.	Yes	1	CD12F
	No	2	
CD12F. Spanked, hit or slapped him/her on the bottom with bare hand.	Yes	1	CD12G
	No	2	
CD12G. Hit him/her on the bottom or elsewhere on the body with something like a belt, hairbrush, stick or other hard object.	Yes	1	CD12H
	No	2	
CD12H. Called him/her dumb, lazy, or another name like that.	Yes	1	CD12I
	No	2	
CD12I. Hit or slapped him/her on the face, head or ears.	Yes	1	CD12J
	No	2	
CD12J. Hit or slapped him/her on the hand, arm, or leg.	Yes	1	CD12K
	No	2	
CD12K. Beat him/her up with an implement (hit over and over as hard as one could).	Yes	1	CD13
	No	2	
CD13. Do you believe that in order to bring up (raise, educate) <i>(name)</i> properly, you need to physically punish him/her?	Yes	1	Section DA
	No	2	
	Don't know/no opinion	8	

MODULE DA – DISABILITY (For each household number keep line number from table HL – LIST OF HOUSEHOLD MEMBERS)

To be administered to caretakers of all children 2 through 9 years old living in the household. For household members below age 2 or above age 9, leave rows blank I would like to ask you if any children in this household aged 2 through 9 has any of the health conditions I am going to mention to you.

DA1. Line No	DA2. Child's name:	DA3. Compared with other children, does or did (name) have any serious delay in sitting, standing, or walking?	DA4. Compared with other children, does (name) have difficulty seeing, either in the daytime or at night?	DA5. Does (name) appear to have difficulty hearing? (uses hearing aid, hears with difficulty, completely deaf?)	DA6. When you tell (name) to do something, does he/she seem to understand what you are saying?	DA7. Does (name) have difficulty in walking or moving his/her arms or does he/she have weakness and/or stiffness in the arms or legs?	DA8. Does (name) sometimes have fits, become rigid, or lose consciousness?	DA9. Does (name) learn to do things like other children his/her age?	DA10. Does (name) speak at all (can he/she make him or herself understood in words; can say any recognizable words)?	DA11. (For 3–9 year olds): Is (name's) speech in any way different from normal (not clear enough to be understood by people other than the immediate family)?	DA12. (For 2-year-olds): Can (name) name at least one object (for example, an animal, a toy, a cup, a spoon)?	DA13. (For all children 2 through 9 years): Compared with other children of the same age, does (name) appear in any way mentally backward, dull or slow?	
LINE	NAME	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
01		1	2	1	2	1	2	1	2	1	2	1	2
02		1	2	1	2	1	2	1	2	1	2	1	2
03		1	2	1	2	1	2	1	2	1	2	1	2
04		1	2	1	2	1	2	1	2	1	2	1	2
05		1	2	1	2	1	2	1	2	1	2	1	2
06		1	2	1	2	1	2	1	2	1	2	1	2
07		1	2	1	2	1	2	1	2	1	2	1	2
08		1	2	1	2	1	2	1	2	1	2	1	2
09		1	2	1	2	1	2	1	2	1	2	1	2
10		1	2	1	2	1	2	1	2	1	2	1	2
11		1	2	1	2	1	2	1	2	1	2	1	2
12		1	2	1	2	1	2	1	2	1	2	1	2
13		1	2	1	2	1	2	1	2	1	2	1	2
14		1	2	1	2	1	2	1	2	1	2	1	2
15		1	2	1	2	1	2	1	2	1	2	1	2

MODULE R – ROMA IN ROMA SETTLEMENTS			
R1. Which language is spoken in your household?	Only Roma	1	R2
	Only Serbian	2	
	Neither Roma nor Serbian	3	
	Combined Roma and Serbian	4	
	Combined Roma and other language other than Serbian	5	
R2. What is the ethnical composition of the settlement you live in? Are the people living in it	Only Roma	1	R3
	Majority are Roma	2	
	Roma are a minority	3	
	No other Roma except you	4	
R3. What is the composition of your household like?	All household members are Roma	1	R4
	Majority of household members are Roma	2	
	Majority of household members are not Roma	3	
R4. Type of settlement:	Slum – community of extreme poverty	1	R5
	Old inner city tissue – partaja	2	
	Older rural settlement within town	3	
	Poor village or hamlet	4	
	Newer inner city/suburban settlement	5	
	Typified settlement/shacks/containers	6	
	Collective residential buildings	7	
R5. Does any of your children attend programs organised by NGO-s?	Yes	1	R6
	No	2	R7
R6. If attends NGO programs, ask: How satisfied are you with these programs?	Very satisfied	1	R8
	Satisfied	2	
	Dissatisfied	3	
R8. Did your children speak Serbian language before going to school?	Yes, all children did	1	R9
	Some did, some didn't	2	
	None of them did	3	
	No children of school age	4	
R9. What is the main source of income of your household? <i>Respondent should specify the most important source of income. Circle up to two answers.</i>	Salary of household member with full time or part time job	1	SI2
	Agriculture	2	
	Various trades	3	
	Selling and black marketeering	4	
	Some household members are beggars	5	
	Collect and sell various junk and old items (paper, iron...)	6	
	Seasonal work	7	
	Social assistance and child allowances	8	
	Some household members have pension	9	
	Helped by relatives and friends	10	
	Humanitarian aid from the Red Cross and other humanitarian organizations	11	
	Some other income, which	12	
	DK	98	

SI2.

Is there any woman aged from 15–49 years who lives in this household?

Check list of household members – column HL6. For each woman who satisfies the condition it is necessary to have a previously prepared questionnaire for woman aged from 15 to 49 years with filled information panel.

- ☐ Yes ⇒ Go to QUESTIONNAIRE FOR WOMAN AGED FROM 15 TO 49 YEARS.
- ☐ No ⇒ Go to SI3.

SI3.

Are there any children aged under 5 years who live in this household?

Check list of household members – column HL8. For each child who satisfies the condition it is necessary to have a previously prepared questionnaire for Children under five with filled information panel.

- ☐ Yes ⇒ Go to QUESTIONNAIRE FOR CHILDREN UNDER FIVE.
- ☐ No ⇒ Finish the interview and thank the respondent for cooperation.

Collect all questionnaires for this household, put them in “cover” and fill fields HH9–HH15 on the first page.

MODULE WM – WOMEN'S INFORMATION PANEL

*This questionnaire is to be administered to all women aged 15 through 49 (see column HL6 of HH listing).
Fill in one form for each eligible woman, aged 15–49 years
Fill in the cluster and household number, and the name and line number of the woman in the space below.
Fill in interviewer's name, code and the date of interview.*

WM1. Cluster number: 	WM2. Household number:
WM3. Woman's Name: 	WM4. Woman's Line Number:
WM5. Interviewer's name: 	WM6. Day/Month/Year of interview: / / 2 0 0 5
Interviewer's code:	
WM7. Result of women's interview:	Completed 1
	Not at home 2
	Refused 3
	Partly completed 4
	Incapacitated 5
	Other (specify) 6

Repeat greeting if not already read to this woman:

We are from Statistical Office of Serbia / Research agency Strategic Marketing. We are working on a project concerned with family health and education. I would like to talk to you about this. The interview will take about 15 minutes. The information we obtain will remain strictly confidential and your answers will never be identified. Also, you are not obliged to answer any question you don't want to, and you may withdraw from the interview at any time. May I start now?

If permission is given, begin the interview. If the woman does not agree to continue, thank her, complete wm7, and go to the next interview. discuss this result with your supervisor for a future revisit.

WM8. In what month and year were you born?	Month	WM9
	DK month 98	
	Year	
WM9. How old are you?	Age (in completed years)	WM10
WM10. Have you ever attended school?	Yes 1	WM11
	No 2	WM14
WM11. What is the highest level of school you attended: primary, secondary, higher, or high?	Primary 1	WM12
	Secondary 2	
	Higher 3	
	High 4	
	Non-standard curriculum 6	

WM12. What is the highest grade you completed at that level?	Grade or year		WM13
WM13. Check WM11:			
☐ Secondary school, higher or high. ⇒ Go to next MODULE CM – Child Mortality. ☐ Primary school or Non-standard curriculum. ⇒ Continue with WM14.			
WM14. Now I would like you to read this sentence to me.			MODULE CM
<i>Show sentences to respondent.</i> <i>If the respondent doesn't speak any language in which the sentences are written, circle code "4".</i>	Cannot read at all	1	
<i>If respondent cannot read whole sentence, probe:</i> Can you read part of the sentence to me?	Able to read only parts of sentence	2	
	Able to read whole sentence	3	
<i>Show card with sentences. Mind the language in which the sentences are written.</i>	No sentence in required language	4	
	(specify language)		
Example sentences for literacy test:	Blind/mute, visually/speech impaired	5	
1. The child is reading a book. 2. This summer was very rainy. 3. Parents must care for their children. 4. Farming is hard work.			

MODULE CM – CHILD MORTALITY

This module is to be administered to all women age 15–49. Questions CM2A to CM10 ask only Roma women living in Roma settlements.
All questions refer only to LIVE births.

CM1. Now I would like to ask about all the births you have had during your life. Have you ever given birth?	Yes	1	CM2A
<i>Probe:</i> I mean, have you even given birth to a child who ever breathed or cried or showed other signs of life – even if he or she lived only a few minutes or hours?	No	2	MODULE MA
CM2A. What was the date of your first birth?	Date of first birth:		CM3
	Day		
	DK day	98	
<i>Explain:</i> I mean the very first time you gave birth, even if the child is no longer living, or whose father is not your current partner.	Month		
	DK month	98	
	Year		
	DK year	98	CM2B
CM2B. How many years ago did you have your first birth?	Completed years since first birth:		CM3
CM3. Do you have any sons or daughters to whom you have given birth who are now living with you?	Yes	1	CM4
	No	2	CM5

CM4. How many sons live with you? How many daughters live with you?	Sons at home		CM5
	Daughters at home		
CM5. Do you have any sons or daughters to whom you have given birth who are alive but do not live with you?	Yes	1	CM6
	No	2	CM7
CM6. How many sons are alive but do not live with you? How many daughters are alive but do not live with you?	Sons elsewhere		CM7
	Daughters elsewhere		
CM7. Have you ever given birth to a boy or girl who was born alive but later died?	Yes	1	CM8
	No	2	CM9
CM8. How many boys have died? How many girls have died?	Boys dead		CM9
	Girls dead		
CM9. Sum answers to CM4, CM6 and CM8.	Sum		CM10
CM10. Just to make sure that I have this right, you have had in total (total number FROM CM9) births during your life. Is this correct? ☐ Yes ⇒ Go to CM11. ☐ No ⇒ Check responses and make corrections before proceeding to CM11.			
CM11. Of these (total number) births you have had, when did you deliver the last one (even if he or she has died)? If day is not known, enter '98' in space for day.	/ /		CM12
CM12. Check CM11: Did the woman's last birth occur within the last 2 years, that is, since (day and month of interview in 2003). ☐ No live birth in last 2 years. ⇒ Go to MARRIAGE/UNION MODULE. ☐ Yes, live birth in last 2 years. ⇒ Continue with CM13.			
CM13. At the time you became pregnant with (name), did you want to become pregnant then, did you want to wait until later, or did you want no (more) children at all?	Then	1	MODULE MN
	Later	2	
	No more	3	

MODULE MN – MATERNAL AND NEWBORN HEALTH MODULE

This module is to be administered to all women with a live birth in the 2 years preceding date of interview. All questions in this module refer to the last born child.
Check child mortality module CM12.
Use this child's name in the following questions, where indicated.

MN2. Did you see anyone for antenatal care during your last pregnancy? <i>Prompt the respondent to remember and circle all answers given.</i>	Health professional			MN3
	Doctor	A		
	Nurse	B		
	Midwife	C		
	Visiting nurse	G		
	Other person			
	Traditional birth attendant	F		
	Relative/friend	H		
	Other (specify)		X	
	No one	Y		MN7
MN3. As part of your antenatal care, were any of the following done at least once: MN3A. Were you weighed? MN3B. Was your blood pressure measured? MN3C. Did you give a urine sample? MN3D. Did you give a blood sample? MN3E. Did they perform Papanikolau test?		Yes	No	MN4
	Weight	1	2	
	Pressure	1	2	
	Urine analysis	1	2	
	Blood analysis	1	2	
	Papanikolau test	1	2	
MN4. During any of the antenatal visits for the pregnancy, were you given any information or counselled about AIDS or the AIDS virus?	Yes	1		MN5
	No	2		
	DK	8		
MN5. I don't want to know the results, but were you tested for HIV/AIDS as part of your antenatal care?	Yes	1		MN6
	No	2		MN7
	DK	8		
MN6. I don't want to know the results, but did you get the results of the test?	Yes	1		MN7
	No	2		
	DK	8		
MN7. Who assisted with the delivery of your last child? Did anyone else assist? <i>Probe for the type of person assisting and circle all answers given.</i>	Health professional			MN8
	Doctor	A		
	Nurse	B		
	Midwife	C		
	Visiting nurse	G		
	Other person			
	Traditional birth attendant	F		
	Relative/friend	H		
	Other (specify)		X	
	No one	Y		

MN8. Where did you give birth to (<i>name of child</i>)? <i>Probe to identify the type of institution and circle the appropriate code.</i>	Home		MN9
	Your home	11	
	Other home	12	
	Public sector		
	Public hospital	21	
	Private Sector		
	Private health institution	31	
	Other (<i>specify</i>)		96
MN9. When the child was born, was he/she very large, larger than average, average, smaller than average, or very small?	Very large	1	MN10
	Larger than average	2	
	Average	3	
	Smaller than average	4	
	Very small	5	
	DK	8	
MN10. Was (<i>name</i>) weighed at birth?	Yes	1	MN11
	No	2	MN12
	DK	8	
MN11. How much did (<i>name</i>) weigh at birth? <i>Record weight from health card, if available.</i>	From card (kilograms)	1	MN12
		.	
	From recall (kilograms)	2	
		.	
	DK	99998	
MN12. Did you ever breastfeed (<i>name</i>)?	Yes	1	MN13
	No	2	MODULE MA
MN13. How long after birth did you first put (<i>name</i>) to the breast? <i>If less than 1 hour, record '00' hours. If less than 24 hours, record hours. Otherwise, record days.</i>	Immediately	000	MODULE MA
	Hours	1	
	Days	2	
	Don't know/remember	998	

MODULE MA – MARRIAGE/UNION			
MA1. Are you currently married or living together with a man in de facto marriage?	Yes, currently married	1	MA2
	Yes, living with a man	2	
	No	3	MA3
MA2. How old was your husband/partner on his last birthday?	Age in years		MA5
	DK	98	
MA3. Have you ever been married or lived together with a man?	Yes, formerly married	1	MA4
	Yes, de facto marriage	2	
	No	3	MODULE ST

MA4. What is your marital status now: are you widowed, divorced or separated?	Widowed	1	MA5
	Divorced	2	
	Separated	3	
MA5. How many times have you been married or <i>de facto</i> married?	Only once	1	MA6
	More than once	2	
MA6. In what month and year did you first marry or start living with a man as if married?	Month		MA7
	DK month	98	
	Year		
	DK year	9998	
MA7. Check question MA6. on previous page:			
☐ Both month and year of marriage/union known? ⇒ Go to Next MODULE ST – SECURITY OF TENURE.			
☐ Either month or year of marriage/union not known? ⇒ Continue with MA8.			
MA8. How old were you when you started living with your first husband/partner?	Age in years		MODULE ST

MODULE ST – SECURITY OF TENURE

ST1. Do you feel secure from eviction from this dwelling?	Yes	1	MODULE CP
	No	2	
	DK	8	

MODULE CP – CONTRACEPTION

CP1. I would like to talk with you about another subject – family planning – and your reproductive health. Are you pregnant now?	Yes, currently pregnant	1	CP1A
	No	2	CP2
	Unsure/DK	8	
CP1A. When you got pregnant did you wish to get pregnant then, or to delay pregnancy, or to avoid pregnancy altogether?	Yes, then	1	CP4B
	Yes, later	2	
	Avoid pregnancy	3	
CP2. Some people use various ways or methods to delay or avoid a pregnancy. Are you currently doing something or using any method to delay or avoid getting pregnant?	Yes	1	CP3
	No	2	CP4A

CP3. Which method are you using to protect yourself from unwanted pregnancy? Do not prompt. If more than one method is mentioned, circle each one.	Female sterilization	A	CP4A
	Male sterilization	B	
	Pill	C	
	IUD	D	
	Injections	E	
	Implants	F	
	Condom	G	
	Female condom	H	
	Diaphragm	I	
	Foam/jelly	J	
	Lactational amenorrhoea method (LAM)	K	
	Periodic abstinence	L	
	Interrupted coitus	M	
	Other (specify)	X	
CP4A. Now I would like to ask some questions about the future. Would you like to have (a/another) child, or would you prefer not to have any (more) children? Do not read the answers.	Yes	1	CP4C
	No	2	CP4D
	Says she cannot get pregnant	3	MODULE DV
	Indecisive/DK	8	CP4D
CP4B. If currently pregnant: Now I would like to ask some questions about the future. After the child you are now expecting, would you like to have another child, or would you prefer not to have any (more) children? Do not read the answers.	Yes	1	CP4C
	No	2	CP4D
	Indecisive/DK	8	
CP4C. How long would you like to wait before the birth of (a/another) child?	Months	1	CP4D
	Years	2	
	Soon, now	993	
	Says she cannot get pregnant	994	MODULE DV
	After marriage	995	CP4D
	Other	996	
	DK	998	
CP4D. Check CP1. on previous page: ☐ Respondent is currently pregnant ⇒ Go to next MODULE DV – ATTITUDES TOWARD DOMESTIC VIOLENCE. ☐ Respondent not currently pregnant or unsure ⇒ Continue with CP4E.			
CP4E. Do you think you are physically able to get pregnant at this time?	Yes	1	MODULE DV
	No	2	
	DK	8	

MODULE DV – ATTITUDES TOWARD DOMESTIC VIOLENCE

DV1. Sometimes a husband is annoyed or angered by things that his wife does. In your opinion, is a husband justified in hitting or beating his wife in the following situations:					
		Yes	No	DK	
DV1A. If she goes out without telling him?	If she goes out without telling him	1	2	8	MODULE SB
DV1B. If she neglects the children?	If she neglects the children	1	2	8	
DV1C. If she argues with him?	If she argues with him	1	2	8	
DV1D. If she refuses sex with him?	If she refuses sex with him	1	2	8	
DV1E. If she burns the food?	If she burns the food	1	2	8	

MODULE SB – SEXUAL BEHAVIOUR

Check for the presence of others. Before continuing, ensure privacy.

SB0.
Check question WM9. on the first page of this questionnaire:
Age of respondent is 15 to 24 years?

☐ Age 15 to 24 years ⇒ Continue with SB1.
☐ Age 25 to 49 years ⇒ Go to MODULE HA – HIV/AIDS

SB1. Now I need to ask you some questions about sexual activity in order to gain a better understanding of some family life issues. The information you supply will remain strictly confidential. How old were you when you first had sexual intercourse (if ever)?	Never had intercourse	00	MODULE HA
	Age in years		
	First time when started living with (first) husband/partner	95	
SB2. When was the last time you had sexual intercourse? <i>If less than 7 days ago circle 1 and write the answer in days.</i> <i>If less than 4 weeks, circle 2 and write the answer in weeks.</i> <i>If less than 12 months, circle 3 and write the answer in months.</i> <i>If more than 12 months, circle 4 and write the answer in years.</i>	Days ago	1 0	SB3
	Weeks ago	2 0	
	Months ago	3	
	Years ago	4	MODULE HA
SB3. The last time you had sexual intercourse was a condom used?	Yes	1	SB4
	No	2	
SB4. What is your relationship to the man with whom you last had sexual intercourse? <i>If man is 'boyfriend' or 'fiancée', ask:</i> Was your boyfriend/fiancée living with you when you last had sex? <i>If 'yes', circle 1. If 'no', circle 2.</i>	Spouse/cohabiting partner	1	SB6
	Boyfriend/fiancée	2	SB5
	Friend	3	
	Casual acquaintance	4	
	Other (specify)	6	
SB5 How old is this person? <i>If response is DK, probe:</i> About how old is this person?	Age of sexual partner		SB6
	DK	98	
SB6. Have you had sex with any other man in the last 12 months?	Yes	1	SB7
	No	2	MODULE HA
SB7. The last time you had sexual intercourse with this other man, was a condom used?	Yes	1	SB8
	No	2	

SB8. What is your relationship to this man? <i>If man is 'boyfriend' or 'fiancée', ask: Was your boyfriend/fiancée living with you when you last had sex? If 'yes', circle 1. If 'no', circle 2.</i>	Spouse/cohabiting partner	1	SB10
	Boyfriend/fiancée	2	SB9
	Friend	3	
	Casual acquaintance	4	
	Other (specify)	6	
SB9. How old is this person? <i>If response is DK, probe: About how old is this person?</i>	Age of sexual partner		SB10
	DK		
SB10. Other than these two men, have you had sex with any other man in the last 12 months?	Yes	1	SB11
	No	2	MODULE HA
SB11. In total, with how many different men have you had sex in the last 12 months?	Number of partners		MODULE HA

MODULE HA – HIV/AIDS			
HA1. Now I would like to talk with you about something else. Have you ever heard of the virus HIV or an illness called AIDS?	Yes	1	HA2
	No	2	Next questionnaire
HA2. Can people protect themselves from getting infected with the AIDS virus by having one sex partner who is not infected and also has no other partners?	Yes	1	HA3
	No	2	
	DK	8	
HA3. Can people get infected with the AIDS virus because of witchcraft or other supernatural means?	Yes	1	HA4
	No	2	
	DK	8	
HA4. Can people reduce their chance of getting the AIDS virus by using a condom every time they have sex?	Yes	1	HA5
	No	2	
	DK	8	
HA5. Can people get the AIDS virus from mosquito bites?	Yes	1	HA6
	No	2	
	DK	8	
HA6. Can people reduce their chance of getting infected with the AIDS virus by not having sex at all?	Yes	1	HA7
	No	2	
	DK	8	
HA7. Can people get the AIDS virus by sharing food with a person who has AIDS?	Yes	1	HA7A
	No	2	
	DK	8	
HA7A. Can people get the AIDS virus by getting injections with a needle that was already used by someone else?	Yes	1	HA8
	No	2	
	DK	8	

HA8. Is it possible for a healthy-looking person to have the AIDS virus?	Yes	1	HA9		
	No	2			
	DK	8			
HA9. Can the AIDS virus be transmitted from a mother to a baby:			HA10		
	Yes	No		DK	
HA9A. During pregnancy?	During pregnancy	1		2	8
HA9B. During delivery?	During delivery	1		2	8
HA9C. By breastfeeding?	By breastfeeding	1		2	8
HA10. If a female teacher has the AIDS virus but is not sick, should she be allowed to continue teaching in school?	Yes	1	HA11		
	No	2			
	DK/not sure/depends	8			
HA11. Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had the AIDS virus?	Yes	1	HA12		
	No	2			
	DK/not sure/depends	8			
HA12. If a member of your family became infected with the AIDS virus, would you want it to remain a secret?	Yes	1	HA13		
	No	2			
	DK/not sure/depends	8			
HA13. If a member of your family became sick with the AIDS virus, would you be willing to care for him or her in your household?	Yes	1	HA14		
	No	2			
	DK/not sure/depends	8			
HA14. Check question MN5 on the third page of this questionnaire: Were you tested for HIV during antenatal care? ☐ Yes ⇨ Go to HA18A. ☐ No, DK or did not answer questions from MODULE MN on 3 rd page ⇨ Continue with HA15.					
HA15. I do not want to know the results, but have you ever been tested to see if you have HIV, the virus that causes AIDS?	Yes	1	HA16		
	No	2	HA18		
HA16. I do not want you to tell me the results of the test, but have you been told the results?	Yes	1	HA17		
	No	2			
HA17. Did you, yourself, ask for the test, was it offered to you and you accepted, or was it required?	Asked for the test	1	Next questionnaire		
	Offered and accepted	2			
	Required	3			
HA18. At this time, do you know of a place where you can go to get such a test to see if you have the AIDS virus?	Yes	1	Next questionnaire		
	No	2			
HA18A. If tested for HIV during antenatal care: Other than at the antenatal clinic, do you know of a place where you can go to get a test to see if you have the AIDS virus?	Yes	1	Next questionnaire		
	No	2			

Check: "If respondent is mother/custodian of child under 5 years of age"? If YES, go to Questionnaire for children under 5, and fill special questionnaire for each child under 5 years of age to whom the respondent is mother/custodian. If NO, ask: "Is there any other woman aged from 15 to 49 years in your household"? If YES, finish the interview with this woman, extend thanks for cooperation, and start interview with other woman from the household who satisfies the condition. If NO, finish the interview with this woman, extend thanks for cooperation. Check whether there are any children under 5 in the household. If YES, ask mother/custodian to answer the questions from Questionnaire for children under 5.

MODULE UF – UNDER-FIVE CHILD INFORMATION PANEL

UF

This questionnaire is to be administered to all mothers or caretakers (see household listing, column HL8) who care for a child that lives with them and is under the age of 5 years (see household listing, column HL5). A separate questionnaire should be used for each eligible child.

Fill in the cluster and household number, and names and line numbers of the child and the mother/caretaker in the space below. Insert your own name and number, and the date.

UF1. Cluster number: 	UF2. Household number: 												
UF3. Child's Name: 	UF4. Child's Line Number: 												
UF5. Mother's/Caretaker's Name: 	UF6. Mother's/Caretaker's Line Number: 												
UF7. Interviewer name: 	UF8. Day/Month/Year of interview: / / 2 0 0 5												
Interviewer number:													
UF9. Result of interview for children under 5: (Codes refer to mother/caretaker.)	<table border="1"> <tr> <td>Completed</td> <td>1</td> </tr> <tr> <td>Not at home</td> <td>2</td> </tr> <tr> <td>Refused</td> <td>3</td> </tr> <tr> <td>Partly completed</td> <td>4</td> </tr> <tr> <td>Incapacitated</td> <td>5</td> </tr> <tr> <td>Other (specify) </td> <td>6</td> </tr> </table>	Completed	1	Not at home	2	Refused	3	Partly completed	4	Incapacitated	5	Other (specify)	6
Completed	1												
Not at home	2												
Refused	3												
Partly completed	4												
Incapacitated	5												
Other (specify)	6												

Repeat greeting if not already read to this respondent:

We are from Republic Statistical Office / Strategic Marketing Research. We are working on a project concerned with family health and education. I would like to talk to you about this. The interview will take about 20 minutes. All the information we obtain will remain strictly confidential and your answers will never be identified. Also, you are not obliged to answer any question you don't want to, and you may withdraw from the interview at any time. May I start now? If permission is given, begin the interview. If the respondent does not agree to continue, thank him/her and go to the next interview. Discuss this result with your supervisor for a future revisit.

UF10. Now I would like to ask you some questions about the health of each child under the age of 5 in your care, who lives with you now. Now I want to ask you about (name). In what month and year was (name) born? Probe: What is his/her birthday? If the mother/caretaker knows the exact birth date, also enter the day; otherwise, circle 98 for day. If the mother/caretaker does not know the exact month of birth, circle 98 for month. Year of birth must be entered.	<table border="1"> <tr> <td>Day</td> <td> </td> </tr> <tr> <td>DK day</td> <td>98</td> </tr> <tr> <td>Month</td> <td> </td> </tr> <tr> <td>DK month</td> <td>98</td> </tr> <tr> <td>Year</td> <td> </td> </tr> </table>	Day		DK day	98	Month		DK month	98	Year	
Day											
DK day	98										
Month											
DK month	98										
Year											

UF11. How old was (name) at his/her last birthday? <i>Record age in completed years.</i>	Age in completed years		
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MODULE BR – BIRTH REGISTRATION AND EARLY LEARNING			BR	
BR1. Does (name) have a birth certificate? May I see it?	Yes, seen	1	BR5	
	Yes, not seen	2	BR2	
	No	3		
	DK	8		
BR2. Has (name's) birth been registered with the civil authorities?	Yes	1	BR5	
	No	2	BR3	
	DK	8	BR4	
BR3. Why is (name's) birth not registered?	Costs too much	1	BR4	
	Must travel too far	2		
	Did not know it should be registered	3		
	Did not want to pay fine	4		
	Does not know where to register	5		
	Other (specify)	6		
BR4. Do you know how to register your child's birth?	DK	8	BR5	
	Yes	1		
BR5. Check age of child in UF11: Child is 3 or 4 years old? ☐ Yes ⇒ Continue with BR6. ☐ No ⇒ Go to BR8.				
BR6. Does (name) attend any organised learning or early childhood education program, such as a private or government facility, including kindergarten or community child care?	Yes	1	BR7	
	No	2	BR8	
	DK	8		
BR7. Within the last seven days, about how many hours did (name) attend?	No. of hours			BR8

BR8.
In the past 3 days, did you or any household member over 15 years of age engage in any of the following activities with (name):
If yes, ask: Who engaged in this activity with the child – the mother, the child's father or another adult member of the household
(including the caretaker/respondent)?
Circle all that apply.

	Mother	Father	Other	No one	
BR8A. Read books or look at picture books with (name)?	A	B	X	Y	MODULE CE
BR8B. Tell stories to (name)?	A	B	X	Y	
BR8C. Sing songs with (name)?	A	B	X	Y	
BR8D. Take (name) outside the home, compound, yard or enclosure?	A	B	X	Y	
BR8E. Play with (name)?	A	B	X	Y	
BR8F. Spend time with (name) naming, counting, and/or drawing things?	A	B	X	Y	

MODULE CE – CHILD DEVELOPMENT		CE
<i>Question CE1 is to be administered only once to each caretaker .</i>		
CE1. How many books are there in the household? Please include schoolbooks, but not other books meant for children, such as picture books. <i>If 'none' enter 00.</i>	Number of non-children's books 0	CE2
	Ten or more non-children's books 10	
CE2. How many children's books or picture books do you have for (name)? <i>If 'none' enter 00.</i>	Number of children's books 0	CE3
	Ten or more books 10	
CE3. I am interested in learning about the things that (name) plays with when he/she is at home. What does (name) play with? Does he/she play with: Household objects, such as bowls, plates, cups or pots? Objects and materials found outside the living quarters, such as sticks, rocks, animals, shells, or leaves? Homemade toys, such as dolls, cars and other toys made at home? Toys that came from a store? <i>If the respondent says "YES" to any of the prompted categories, then probe to learn specifically what the child plays with to ascertain the response Code Y if child does not play with any of the items mentioned.</i>	Household objects (bowls, plates, cups, pots) A	CE4
	Objects and materials found outside the living quarters (sticks, rocks, animals, shells, leaves) B	
	Homemade toys (dolls, cars and other toys made at home) C	
	Toys that came from a store D	
	No playthings mentioned Y	
CE4. Sometimes adults taking care of children have to leave the house to go shopping, wash clothes, or for other reasons and have to leave young children with others. Since last (day of the week) how many times was (name) left in the care of another child (that is, someone less than 10 years old)? <i>If 'none' enter 00.</i>	No. of times	CE5
CE5. In the past week, how many times was (name) left alone? <i>If 'none' enter 00.</i>	No. of times	MODULE BF

MODULE BF – BREASTFEEDING				BF	
BF1. Has (name) ever been breastfed?	Yes	1		BF2	
	No	2		BF3	
	DK	8			
BF2. Is he/she still being breastfed?	Yes	1		BF2A	
	No	2			
	DK	8			
BF2A. How long after birth did you first put (name) to the breast? <i>If less than 1 hour, record '00' hours. If less than 24 hours, record hours. Otherwise, record days.</i>	Immediately	000		BF2B	
	Hours	1			
	Days	2			
	DK/Doesn't remember	998			
BF2B. How often is/was (name) breastfed? <i>Don't read answers.</i>	According to established daily schedule	1		BF3	
	Whenever child wanted	2			
	DK	8			
BF3. Since this time yesterday, did he/she receive any of the following: <i>Read each item aloud and record response before proceeding to the next item.</i>				BF3I	
		Yes	No		DK
BF3A. Vitamin, mineral supplements or medicine?	A. Vitamin supplements	1	2		8
BF3B. Plain water?	B. Plain water	1	2		8
BF3C. Sweetened, flavored water or fruit juice or tea or infusion?	C. Sweetened water or juice	1	2		8
BF3D. Oral rehydration solution (Orosal or Nelit)?	D. ORS	1	2		8
BF3E. Infant formula? (Bebelac, Impamil...)?	E. Infant formula	1	2		8
BF3F. Powdered or fresh milk?	F. Milk	1	2		8
BF3G. Any other liquids?	G. Other liquids	1	2		8
BF3H. Solid or semi-solid (mushy) food?	H. Solid or semi-solid food	1	2	8	
BF3I. Since this time yesterday, was he/she given to drink from a bottle with the pacifier?	Yes	1		BF4	
	No	2			
	DK	8			
BF4. Check BF3H: Child received solid or semi-solid (mushy) food? ☐ Yes ⇒ Continue with BF5. ☐ No or DK ⇒ Go to Next Module.					
BF5. Since this time yesterday, how many times did (name) eat solid, semisolid, or soft foods other than liquids? <i>If 7 or more times, record '7'.</i>	No. of times			MODULE CA	
	DK	8			

MODULE CA – CARE OF ILLNESS				CA
CA1. Has (<i>name</i>) had diarrhea in the last two weeks, that is, since (<i>day of the week</i>) of the week before last? <i>Diarrhea is determined as perceived by mother or caretaker, or as three or more loose or watery stools per day, or blood in stool.</i>	Yes	1	CA2	
	No	2	CA5	
	DK	8		
CA2. During this last episode of diarrhea, did (<i>name</i>) drink any of the following: <i>Read each item aloud and record response before proceeding to the next item.</i>				CA3
		Yes	No	DK
CA2A. Breast milk		1	2	8
CA2B. Porridge (from cereals, leguminous plants, root vegetables) or soup		1	2	8
CA2C. Other (yogurt, sour milk, tea, sugar and salt solution, sugar-free fruit juice)		1	2	8
CA2D. Oral saline solutions for rehydration (Orosat, Nelit...)		1	2	8
CA2E. Cow/sheep/goat milk or adapted baby milk		1	2	8
CA2F. Water and food combined		1	2	8
CA2G. Only water		1	2	8
CA2H. Sweetened water, sweetened tea or sweetened fruit juice		1	2	8
CA3. During (<i>name's</i>) illness, did he/she drink much less, about the same, or more than usual?	Much less or none	1	CA4	
	About the same (or somewhat less)	2		
	More	3		
	DK	8		
CA4. During (<i>name's</i>) illness, did he/she eat less, about the same, or more food than usual? <i>If "less", probe: Much less or a little less?</i>	None	1	CA5	
	Much less	2		
	Somewhat less	3		
	About the same	4		
	More	5		
	DK	8		
CA5. Has (<i>name</i>) had an illness with a cough at any time in the last two weeks, that is, since (<i>day of the week</i>) of the week before last?	Yes	1	CA6	
	No	2	CA12	
	DK	8		
CA6. When (<i>name</i>) had an illness with a cough, did he/she breathe faster than usual with short, quick breaths or have difficulty breathing?	Yes	1	CA7	
	No	2	CA12	
	DK	8		
CA7. Were the symptoms due to a problem in the chest or a blocked nose?	Problem in chest	1	CA8	
	Blocked nose	2	CA12	
	Both	3	CA8	
	Other (<i>specify</i>)	6	CA12	
	DK	8	CA8	
CA8. Did you seek advice or treatment for the illness outside the home?	Yes	1	CA9	
	No	2	CA10	
	DK	8		

CA9. From where did you seek care? Anywhere else? <i>Circle all providers mentioned, but do NOT prompt with any suggestions.</i>	Surgery	A	CA10
	Health center	B	
	Hospital	C	
	Ambulance service	D	
	Private doctor	E	
	Chemist/pharmacist	F	
	Traditional healer	H	
	Relative/friend	I	
	Other (specify)	X	
CA10. Was (name) given medicine to treat this illness?	Yes	1	CA11
	No	2	CA12
	DK	8	
CA11. What medicine was (name) given? <i>Circle all medicines given.</i>	Cough syrup	A	CA12
	Antibiotic	B	
	Medicine to reduce fever	C	
	Domestic/traditional remedy	D	
	Tea	E	
	Other (specify)	X	
	DK	Z	
CA12. Check UF11: Child aged under 3? ☐ Yes ⇒ Continue with CA13. ☐ No ⇒ Go to CA14.			
CA13. The last time (name) passed stools, what was done to dispose of the stools	Child used toilet/latrine	01	CA14
	Put/rinsed into toilet or latrine	02	
	Put/rinsed into drain or ditch	03	
	Thrown into garbage (solid waste)	04	
	Buried	05	
	Left in the open	06	
	Other (specify)	96	
	DK	98	
Ask the following question (CA14) only once for each caretaker. CA14. Sometimes children have severe illnesses and should be taken immediately to a health facility. What types of symptoms would cause you to take your child to a health facility right away? <i>Keep asking for more signs or symptoms until the caretaker cannot recall any additional symptoms. Circle all symptoms mentioned, But do NOT prompt with any suggestions.</i>	Child not able to drink or breastfeed	A	MODULE IM
	Child becomes sicker	B	
	Child develops a fever	C	
	Child has fast breathing	D	
	Child has difficult breathing	E	
	Child has blood in stool	F	
	Child is drinking poorly	G	
	Child has convulsions/fits	H	
	Child vomits	I	
	Child has strong cough	J	
	Child complains of strong pains	K	

CA14.	Child injured him/herself		L	MODULE IM
	Child swallowed some object		M	
	Child burnt him/herself		N	
	Other (specify)		X	
	Other (specify)		Y	

MODULE IM – IMMUNIZATION

IM

If an immunization card is available, copy the dates in IM2A–IM8D for each type of immunization or vitamin A dose recorded on the card. IM10–IM18A are for recording vaccinations that are not recorded on the card. IM10–IM18 will only be asked when a card is not available.

IM1. Is there a vaccination card for (name)?	Yes	1	IM2A
	No	2	IM10
	DK	8	

(A) Copy dates for each vaccination from the card.

(B) Write '44' in day column if card shows that vaccination was given but no date recorded.

Vaccine		Day	Month	Year	Vaccine		Day	Month	Year	
IM2A. BCG	V				IM6A. OPV (Polio)	I				
IM2B. BCG	R				IM6B. OPV (Polio)	II				
IM3A. DPT	I				IM6C. OPV (Polio)	III				
IM3B. DPT (DiTePer)	II				IM6D. OPV (Polio)	R1				
IM3C. DPT (DiTePer)	III				IM6E. OPV (Polio)	R2				
IM3D. DPT (DiTePer)	R1				IM6F. OPV (Polio)	R3				
IM3E. DT	R2				IM7A. MMR (Morbili)	V				
IM3F. dt	R3				IM7B. MMR (Morbili)	R				
IM4. TT	R				IM8A. Hep.B*HBsAg	I				
IM5A. Hep.B	I				IM8B. Hep.B*HBsAg	II				
IM5B. Hep.B	II				IM8C. Hep.B*HBsAg	III				
IM5C. Hep.B	III				IM8D. Hep.B*HBsAg	IV				
IM9. In addition to the vaccinations shown on this card, did (<i>name</i>) receive any other vaccinations – including vaccinations received in campaigns or immunization days? <i>Record 'Yes' only if respondent mentions vaccinations that are on vaccinations card list.</i>					Yes				1	IM19A
					<i>(Probe for vaccinations and write '66' in the corresponding day column on IM2A to IM8D.)</i>					
					No					
					DK				8	
IM10. Has (<i>name</i>) ever received any vaccinations to prevent him/her from getting diseases, including vaccinations received in a campaign or immunization day?					Yes				1	IM11
					No				2	IM19A
					DK				8	
IM11. Has (<i>name</i>) ever been given a BCG vaccination against tuberculosis – that is, an injection in the arm or shoulder that caused a scar?					Yes				1	IM12
					No				2	
					DK				8	
IM12. Has (<i>name</i>) ever been given any “vaccination drops in the mouth” to protect him/her from getting diseases – that is, polio?					Yes				1	IM13
					No				2	IM15
					DK				8	

IM13. How old was he/she when the first dose was given – just after birth (within two weeks) or later?	Just after birth (within two weeks)	1	IM14
	Later	2	
IM14. How many times has he/she been given these drops?	No. of times		IM15
	DK	98	
IM15. Has (<i>name</i>) ever been given “DPT vaccination injections” – that is, an injection in the thigh or buttocks – to prevent him/her from getting tetanus, whooping cough, diphtheria? (sometimes given at the same time as polio)	Yes	1	IM16
	No	2	IM17
	DK	8	
IM16. How many times?	No. of times		IM17
	DK	98	
IM17. Has (<i>name</i>) ever been given “Measles vaccination injections” or MMR – that is, a shot in the arm between the age of 12 and 18 months – to prevent him/her from getting measles?	Yes	1	IM18
	No	2	
	DK	8	
IM18. Has (<i>name</i>) ever been given hepatitis B vaccination, to prevent him/her from getting hepatitis B, that is, an injection in buttocks or arm in three doses administered between the age of 12 and 24 months?	Yes	1	IM18A
	No	2	IM19A
	DK	8	
IM18A. How many times?	No. of times		IM19A
	DK	98	
IM19A. Has (<i>name</i>) ever participated in any nonregular vaccination action besides the regular vaccinations?	Yes	1	IM20
	No	2	
	DK	8	

IM20.
Does another eligible child reside in the household for whom this respondent is mother/caretaker?
Check household listing, column HL8.

- ☐ Yes ⇒ End the current questionnaire and then
Go to **QUESTIONNAIRE FOR CHILDREN UNDER FIVE** to administer the questionnaire for the next eligible child.
- ☐ No ⇒ End the interview with this respondent by thanking him/her for his/her cooperation.
If this is the last eligible child in the household, go on to **ANTHROPOMETRY MODULE**.

ANTHROPOMETRY MODULE
AN

After questionnaires for all children are complete, the measurer weighs and measures each child.

Record weight and length/height below, taking care to record the measurements on the correct questionnaire for each child.

Check the child's name and line number on the household listing before recording measurements.

AN1. Child's weight:	Kilograms (kg)	.	AN2
AN2. Child's length or height. Check age of child in UF11:	Length (cm), lying down	1 .	AN3
☐ Child under 2 years old. ⇒ Measure length (<i>lying down</i>). ☐ Child age 2 or more years. ⇒ Measure height (<i>standing up</i>).	Height (cm), standing up	2 .	
AN3. Measurer's identification code:	Measurer code		AN4
AN4. Result of measurement.	Measured	1	AN5
	Not present	2	
	Refused	3	
	Other (specify)	6	
AN5. Is there another child in the household who is eligible for measurement? ☐ Yes. ⇒ Record measurements for next child. ☐ No. ⇒ End the interview with this household by thanking all participants for their cooperation. Gather together all questionnaires for this household and check that all identification numbers are inserted on each page. Tally on the Household Information Panel the number of interviews completed.			

Tables

Table HH.1

Results of household and individual interviews

Number of households, women, and children under 5 by results of the household, women's and under-fives' interviews, and household, women's and under-fives' response rates, Serbia, 2005

	Area		Type of settlement		Region						Total
	Serbia without Roma from Roma settlements	Roma in Roma settlements	Urban	Rural	Vojvodina	Belgrade	West	Central	East	South-East	
Sampled households	7974	1979	5920	4033	2569	2108	983	1583	858	1852	9953
Occupied households	7522	1850	5516	3856	2468	1886	946	1480	820	1772	9372
Interviewed households	7014	1716	5116	3614	2294	1758	863	1379	744	1692	8730
Household response rate	93.2	92.8	92.7	93.7	92.9	93.2	91.2	93.2	90.7	95.5	93.1
Eligible women	5850	2045	4648	3247	1995	1550	757	1230	674	1689	7895
Interviewed women	5589	1927	4445	3071	1935	1490	730	1135	633	1593	7516
Women's response rate	95.5	94.2	95.6	94.6	97.0	96.1	96.4	92.3	93.9	94.3	95.2
Women's overall response rate	89.1	87.4	88.7	88.6	90.2	89.6	88.0	86.0	85.2	90.1	88.7
Eligible children under 5	2620	1218	2322	1516	993	727	327	612	379	800	3838
Mother/Caretaker Interviewed	2585	1192	2286	1491	989	719	324	598	374	773	3777
Child response rate	98.7	97.9	98.4	98.4	99.6	98.9	99.1	97.7	98.7	96.6	98.4
Children's overall response rate	92.0	90.8	91.3	92.2	92.6	92.2	90.4	91.0	89.5	92.3	91.7

Table HH.2
Household age distribution by sex

Percent distribution of the household population by five-year age groups and dependency age groups, and number of children aged 0–17 years, by sex, Serbia, 2005

		Sex				Total	
		Male		Female		Number	Percent
		Number	Percent	Number	Percent		
Age	0–4	767	5.6	747	5.1	1514	5.4
	5–9	896	6.6	803	5.5	1698	6.0
	10–14	849	6.2	843	5.8	1692	6.0
	15–19	765	5.6	831	5.7	1597	5.7
	20–24	869	6.4	900	6.2	1769	6.3
	25–29	933	6.9	1013	7.0	1946	6.9
	30–34	1029	7.6	1051	7.2	2080	7.4
	35–39	988	7.3	902	6.2	1890	6.7
	40–44	879	6.5	902	6.2	1780	6.3
	45–49	890	6.5	904	6.2	1794	6.4
	50–54	1097	8.1	1190	8.2	2287	8.1
	55–59	928	6.8	1031	7.1	1959	7.0
	60–64	702	5.2	739	5.1	1441	5.1
	65–69	746	5.5	867	6.0	1612	5.7
	70+	1278	9.4	1825	12.5	3103	11.0
Dependency age groups	<15	2511	18.4	2393	16.4	4904	17.4
	15–64	9080	66.7	9464	65.1	18544	65.8
	65+	2023	14.9	2692	18.5	4715	16.7
Age	Children aged 0–17	2960	21.7	2891	19.9	5851	20.8
	Adults 18+/Missing/DK	10654	78.3	11658	80.1	22312	79.2
Total		13614	100.0	14549	100.0	28163	100.0

Table HH.3
Household composition

Percentage distribution of households by selected characteristics, Serbia, 2005

		Weighted percentage	Number of households weighted	Number of households unweighted
Area	Serbia without Roma from Roma settlements	99.0	8645	7014
	Roma in Roma settlements	1.0	85	1716
Sex of head of the household	Male	73.7	6435	6753
	Female	26.3	2295	1977
Region	Vojvodina	28.3	2468	2294
	Belgrade	21.9	1911	1758
	West	10.6	927	863
	Central	15.8	1384	1379
	East	9.0	788	744
	South-East	14.3	1252	1692
Type of settlement	Urban	58.4	5097	5116
	Rural	41.6	3633	3614
Number of household members	1	17.4	1518	1108
	2–3	40.0	3494	2858
	4–5	31.8	2772	3072
	6–7	9.6	835	1351
	8–9	1.0	90	238
	10+	.2	20	103
Ethnicity of head of the household	Serbian	86.7	7565	6172
	Hungarian	4.5	389	285
	Muslim\Bosnian	1.8	154	242
	Roma	1.2	108	1608
	Other	5.9	514	423
Total		100.0	8730	8730
At least one child aged <18 years		38.3	8730	8730
At least one child aged <5 years		13.8	8730	8730
At least one woman aged 15–49		56.3	8730	8730

Table HH.4
Women's background characteristics

Percentage distribution of women aged 15–49
by background characteristics, Serbia, 2005

		Weighted percent	Number of women weighted	Number of women unweighted
Area	Serbia without Roma from Roma settlements	98.7	7415	5589
	Roma in Roma settlements	1.3	101	1927
Region	Vojvodina	27.7	2080	1935
	Belgrade	20.7	1554	1490
	West	11.2	842	730
	Central	16.2	1218	1135
	East	8.6	644	633
	South-East	15.7	1178	1593
Type of settlement	Urban	56.8	4269	4445
	Rural	43.2	3247	3071
Age	15–19	12.5	938	933
	20–24	13.0	978	1118
	25–29	15.4	1161	1417
	30–34	16.6	1251	1361
	35–39	14.2	1069	988
	40–44	14.2	1064	864
	45–49	14.0	1056	835
Marital/Union status	Currently married/in union	64.4	4844	5492
	Formerly married/in union	6.0	451	448
	Never married/in union	29.6	2221	1576
Motherhood status	Given birth	65.1	4897	5605
	Never given birth	34.9	2619	1911
Education	Primary or none	20.5	1539	2945
	Secondary	59.1	4439	3482
	University	20.5	1538	1089
Ethnicity of head of the household	Serbian	87.2	6550	4937
	Hungarian	3.7	277	191
	Muslim\Bosnian	2.2	167	258
	Roma	1.7	125	1804
	Other	5.3	397	326
Wealth index quintiles	Poorest	15.5	1163	2243
	Second	19.2	1442	1425
	Middle	21.9	1649	1412
	Fourth	20.8	1567	1231
	Richest	22.6	1695	1205
Total		100.0	7516	7516

Table HH.5
Children's background characteristics

Percentage distribution of children under five years of age
by background characteristics, Serbia, 2005

		Weighted percent	Number of women weighted	Number of women unweighted
Area	Serbia without Roma in Roma settlements	96.6	3647	2585
	Roma in Roma settlements	3.4	130	1192
Sex	Male	50.8	1917	1922
	Female	49.2	1860	1855
Region	Vojvodina	27.9	1052	989
	Belgrade	17.8	671	719
	West	11.3	427	324
	Central	17.4	656	598
	East	8.9	337	374
	South-East	16.8	634	773
Type of settlement	Urban	55.5	2097	2286
	Rural	44.5	1680	1491
Age	<6 months	8.4	316	339
	6–11 months	9.0	338	348
	12–23 months	20.5	773	800
	24–35 months	21.2	802	782
	36–47 months	20.0	754	736
	48–59 months	21.0	795	772
Mother's education	Primary or none	21.6	818	1638
	Secondary	61.0	2304	1684
	University	17.4	656	455
Ethnicity of head of the household	Serbian	81.7	3086	2209
	Hungarian	2.9	111	76
	Muslim\Bosnian	4.9	186	209
	Roma	4.4	166	1119
	Other	6.1	229	164
Wealth index quintiles	Poorest	17.4	656	1342
	Second	19.7	742	682
	Middle	22.7	858	662
	Fourth	22.0	830	610
	Richest	18.3	690	481
Total		100.0	3777	3777

Table CM.1 Early childhood mortality

Infant and under-five mortality rates by background
and demographic characteristics, Roma in Roma settlements, 2005

		Infant mortality rate*	Under-five mortality rate**
Area	Urban	28	32
	Rural	20	22
Sex	Male	32	36
	Female	20	23
Region	Vojvodina	16	18
	Belgrade	26	29
	Central	29	33
Mother's education	None	29	34
	Attended school	25	28
Wealth index quintiles	Poorest/Second	30	33
	Middle/Fourth/Richest	23	26
Total		25	28

* MICS indicator 2; MDG indicator 14

** MICS indicator 1; MDG indicator 13

Table CM.2

Total children born and proportion dead

Total mean number of children born and proportion dead according to age of women, Roma in Roma settlements, 2005

		Total mean number of children born	Proportion dead	Number of women
Age	15–19	.412	.023	378
	20–24	1.532	.028	297
	25–29	2.515	.029	301
	30–34	2.902	.028	279
	35–39	3.254	.086	246
	40–44	3.220	.054	238
	45–49	2.979	.071	187
Total		2.233	.049	1927

Table NU.1 Child malnourishment

Percentage of children aged 0–59 months who are severely or moderately malnourished, Serbia, 2005

		Weight for age		Height for age		Weight for height			Number of children 0–59 months
		% below – 2 SD*	% below – 3 SD	% below – 2 SD**	% below – 3 SD	% below – 2 SD***	% below – 3 SD	% above + 2 SD	
Area	Serbia without Roma in Roma settlements	1.4	.1	5.4	1.2	3.2	.4	15.6	3226
	Roma in Roma settlements	7.7	1.3	20.0	5.3	4.1	1.2	6.7	112
Sex	Male	1.6	.1	6.0	1.4	3.3	.2	14.9	1699
	Female	1.7	.1	5.7	1.2	3.2	.7	15.7	1638
Region	Vojvodina	1.6	.1	5.6	2.0	2.7	.2	13.9	979
	Belgrade	3.7	.5	7.6	1.3	7.9	1.5	13.5	604
	West	.5	.0	4.7	.4	1.5	.0	17.9	377
	Central	1.4	–	5.3	1.3	1.9	–	18.0	534
	East	.9	.1	8.8	1.8	3.0	.0	17.0	292
	South-East	.9	.0	4.2	.5	1.8	.6	14.4	552
Type of settlement	Urban	1.9	.2	5.8	1.1	3.4	.5	13.6	1878
	Rural	1.2	.0	6.0	1.6	3.1	.4	17.4	1459
Age	<6 months	1.2	–	5.4	1.2	3.9	.0	10.1	281
	6–11 months	1.7	.0	6.2	.6	7.1	1.6	13.2	300
	12–23 months	.9	.1	6.6	1.4	2.3	.3	24.1	675
	24–35 months	2.3	.0	7.7	1.2	2.9	.5	12.0	701
	36–47 months	2.2	.3	4.2	1.4	1.9	.0	13.8	666
	48–59 months	1.3	.3	5.0	1.5	4.0	.7	14.5	715
Mother's education	Primary or none	4.0	.4	9.9	3.2	5.1	1.1	15.3	707
	Secondary	1.0	–	5.0	.8	2.6	.3	15.9	2052
	University	1.0	.3	4.1	.7	3.4	.3	13.2	578
Ethnicity of head of the household	Serbian	1.2	.1	5.1	1.0	3.2	.3	15.9	2723
	Hungarian	1.4	–	4.1	1.4	1.4	–	15.4	105
	Muslim\Bosnian	1.7	–	4.6	1.7	.1	.1	18.8	162
	Roma	12.0	2.1	19.3	4.7	8.5	4.1	6.6	144
	Other	.8	–	8.9	2.9	4.4	.8	11.0	204
Wealth index quintiles	Poorest	4.4	.5	9.0	2.9	3.8	1.1	15.5	557
	Second	1.6	.0	6.6	2.0	2.3	.0	15.5	666
	Middle	.5	–	3.9	.5	2.3	.6	17.9	763
	Fourth	.4	–	5.9	.2	3.1	.2	15.9	723
	Richest	2.2	.2	4.7	1.4	5.2	.5	11.0	628
Total		1.6	.1	5.9	1.3	3.3	.5	15.3	3337

* MICS indicator 6; MDG indicator 4

** MICS indicator 7

*** MICS indicator 8

Table NU.2

Initial breastfeeding

Percentage of women aged 15–49 years with a birth in the two years preceding the survey who breastfed their baby within one hour of birth and within one day of birth, Serbia, 2005

		Percentage who started breastfeeding within one hour of birth*	Percentage who started breastfeeding within one day of birth	Number of women with live birth in the two years preceding the survey
Area	Serbia without Roma from Roma settlements	16.9	66.8	642
	Roma in Roma settlements	33.0	72.5	20
Region	Vojvodina	17.0	65.3	180
	Belgrade	8.6	56.3	98
	West	23.3	76.4	84
	Central	17.9	66.7	122
	East	10.6	63.9	62
	South-East	24.6	73.8	115
Type of settlement	Urban	15.7	63.0	350
	Rural	19.4	71.4	312
Months since last birth	<6 months	16.8	66.6	145
	6–11 months	17.2	62.2	159
	12–23 months	17.8	69.3	357
Education	Primary or none	19.9	72.0	144
	Secondary	18.2	66.9	403
	University	11.5	61.1	114
Ethnicity of head of the household	Serbian	16.4	66.5	538
	Hungarian	(9.7)	(55.1)	21
	Muslim\Bosnian	13.5	76.9	36
	Roma	27.4	71.4	27
	Other	32.6	68.0	39
Wealth index quintiles	Poorest	19.8	71.7	127
	Second	19.6	72.3	123
	Middle	20.0	68.8	157
	Fourth	15.5	67.0	139
	Richest	11.3	53.7	116
Total		17.4	67.0	662

* MICS indicator 45

Table NU.3 Breastfeeding

Percentage of living children according to breastfeeding status at each age group, Serbia, 2005

Area	Children 0–3 months		Children 0–5 months		Children 6–9 months		Children 12–15 months		Children 20–23 months	
	Percent exclusively breastfed	Number of children	Percent exclusively breastfed*	Number of children	Percent receiving breastmilk and solid/mushy food**	Number of children	Percent breastfed***	Number of children	Percent breastfed***	Number of children
Serbia without Roma in Roma settlements	23.2	176	14.9	302	38.7	220	20.9	257	7.1	236
Roma in Roma settlements	26.6	8	18.0	14	48.0	8	59.9	10	34.1	10
Sex										
Male	21.0	90	13.1	166	37.5	112	24.3	135	6.9	132
Female	25.7	95	17.2	149	40.5	116	20.5	132	9.8	113
Region										
Vojvodina	(31.8)	43	16.5	84	45.9	59	21.3	76	1.4	81
Belgrade	(18.2)	19	9.0	37	(35.1)	42	(25.2)	41	(7.0)	27
West	(*)	23	(4.2)	34	(*)	34	(16.0)	37	(*)	30
Central	(25.3)	38	18.4	59	(40.9)	43	(16.5)	53	(21.0)	40
East	(*)	19	(9.0)	34	(*)	19	(37.0)	25	(*)	24
South-East	(27.8)	43	22.3	68	(39.7)	31	(26.9)	35	6.2	43
Type of settlement										
Urban	25.7	84	17.8	146	36.6	135	23.9	145	8.4	133
Rural	21.5	101	12.7	170	42.5	93	20.7	123	8.0	112
Mother's education										
Primary or none	20.7	54	13.6	83	26.8	51	25.8	63	14.4	67
Secondary	22.1	104	13.8	188	41.6	136	21.6	157	7.4	144
University	(*)	26	(22.8)	46	(45.5)	41	20.6	48	(*)	35
Ethnicity of head of the household										
Serbian	21.7	141	13.8	251	39.3	187	20.4	214	6.7	197
Hungarian	–	6	–	12	(*)	6	–	12	–	3
Muslim\Bosnian	(*)	15	(*)	18	(*)	14	(*)	9	(*)	16
Roma	16.5	12	12.5	17	51.2	13	40.7	14	19.7	15
Other	(*)	10	(*)	18	(*)	7	(*)	18	–	15
Wealth index quintiles										
Poorest	23.7	47	15.4	73	26.8	40	42.6	41	12.5	65
Second	(23.6)	37	13.2	66	(41.3)	31	(15.0)	46	(6.3)	43
Middle	(17.1)	41	11.2	76	(45.7)	50	17.1	70	(9.5)	57
Fourth	(*)	33	(24.6)	53	(44.6)	63	(22.3)	54	(2.4)	53
Richest	(*)	26	(12.6)	48	(32.6)	44	(20.7)	56	(*)	28
Total	23.4	184	15.1	316	39.0	228	22.4	267	8.2	246

* MICS indicator 15

** MICS indicator 17

*** MICS indicator 16

Table NU.4 Adequately fed infants

Percentage of infants under 6 months of age exclusively breastfed, percentage of infants 6–11 months who are breastfed and who ate solid/semi-solid food at least the minimum recommended number of times the previous day and percentage of infants adequately fed, Serbia, 2005

		0–5 months exclusively breastfed	6–8 months who received breastmilk and complementary food at least 2 times in prior 24 hours	9–11 months who received breastmilk and complementary food at least 3 times in prior 24 hours	6–11 months who received breastmilk and complemen- tary food at least the minimum recom- mended number of times per day*	0–11 months who were appropriately fed**	Number of infants aged 0–11 months
Area	Serbia without Roma in Roma settlements	14.9	31.9	34.5	33.2	24.4	628
	Roma in Roma settlements	18.0	45.7	37.6	41.4	29.2	26
Sex	Male	13.1	28.9	29.8	29.4	21.1	327
	Female	17.2	35.2	39.4	37.2	28.0	327
Region	Vojvodina	16.5	43.5	34.6	39.5	28.3	172
	Belgrade	9.0	26.6	31.2	28.8	21.4	100
	West	4.2	16.9	36.2	24.4	15.0	74
	Central	18.4	32.5	36.0	34.2	26.6	122
	East	9.0	24.7	37.2	31.8	19.1	61
	South-East	22.3	36.9	34.6	35.6	28.4	126
Type of settlement	Urban	17.8	30.0	30.7	30.3	25.0	343
	Rural	12.7	35.6	40.2	37.9	24.1	311
Mother's education	Primary or none	13.6	23.6	33.2	27.1	19.7	149
	Secondary	13.8	35.5	31.5	33.5	24.1	395
	University	22.8	34.1	45.2	40.1	33.0	110
Ethnicity of head of the household	Serbian	13.8	32.4	32.0	32.2	23.5	529
	Hungarian	–	66.4	100.0	79.9	(*)	19
	Muslim\Bosnian	42.7	11.1	26.2	17.9	(29.0)	40
	Roma	12.5	42.0	48.7	45.0	28.9	35
	Other	16.7	33.7	51.3	45.5	(*)	31
Wealth index quintiles	Poorest	15.4	23.3	16.5	20.2	17.5	130
	Second	13.2	47.4	20.4	33.4	22.5	123
	Middle	11.2	37.3	51.2	43.5	26.7	146
	Fourth	24.6	28.4	53.3	40.4	34.5	140
	Richest	12.6	28.0	23.3	25.5	20.1	115
Total		15.1	32.3	34.7	33.5	24.6	654

* MICS indicator 18

** MICS indicator 19

Table NU.5

Low birth weight infants

Percentage of live births in the 2 years preceding the survey that weighed below 2500 grams at birth, Serbia, 2005

		Percent of live births below 2500 grams*	Percent of live births weighed at birth**	Number of live births
Area	Serbia without Roma from Roma settlements	4.9	98.1	642
	Roma in Roma settlements	9.3	90.1	20
Region	Vojvodina	5.0	99.6	180
	Belgrade	4.9	94.8	98
	West	6.4	100.0	84
	Central	4.8	97.4	122
	East	5.0	97.7	62
	South-East	4.4	96.8	115
Type of settlement	Urban	4.9	97.9	350
	Rural	5.2	97.8	312
Education	Primary or none	6.3	96.7	144
	Secondary	4.8	97.7	403
	University	4.0	100.0	114
Ethnicity of head of the household	Serbian	4.9	98.4	538
	Hungarian	(2.2)	(100.0)	21
	Muslim\Bosnian	3.8	94.3	36
	Roma	9.6	90.6	27
	Other	6.6	98.1	39
Wealth index quintiles	Poorest	8.6	96.1	127
	Second	5.0	98.7	123
	Middle	3.3	98.2	157
	Fourth	4.3	96.6	139
	Richest	4.3	100.0	116
Total		5.0	97.9	662

* MICS indicator 9

** MICS indicator 10

Table CH.1

Vaccination in the first year of life (18 months in the case of MMR)

Percentage of children aged 18–29 months immunized against childhood diseases at any time before the survey and before 12 months of age (before 18 months of age in case of MMR), Serbia, 2005

	BCG*	DPT 1	DPT 2	DPT 3**	Polio 1	Polio 2	Polio 3***	Measles (MMR)****	All *****	None	Number of children aged 18–29 months
Vaccination card	44.2	72.7	78.0	77.8	70.0	72.5	75.1	64.1	43.5	.0	782
Mother's report	30.4	25.8	19.3	17.8	26.9	22.5	18.7	22.5	14.0	.3	782
Either	74.5	98.5	97.3	95.6	96.9	95.1	93.8	86.6	57.5	.3	782
Vaccinated by 12 months of age	74.1	97.1	95.9	89.7	95.0	93.5	88.2	84.1	43.6	.3	782

* MICS indicator 25

** MICS indicator 27

*** MICS indicator 26

**** MICS indicator 28; MDG indicator 15

***** MICS Indicator 31

Table CH.1a
Vaccination in the first year of life
(BCG vaccination is calculated according
to the mother's report only)

Percentage of children aged 18–29 months immunized against childhood diseases at any time before the survey and before 12 months of age, 18 months in case of MMR, Serbia, 2005

	All vaccinations	No vaccination	Number of children aged 18–29 months
Vaccination card	65.6	0	782
Mother's report	14.0	.3	782
Either	79.6	.3	782
Vaccinated by 12 months of age	60.3	.3	782

Table CH.2
Vaccinations by background characteristics
 Percentage of children aged 18–29 months currently vaccinated
 against childhood diseases, Serbia, 2005

Area	BCG	DPT1	DPT2	DPT3	Polio 1	Polio 2	Polio 3	MMR	All	None	Percent with health card	Number of children aged 18–29 months
Serbia without Roma in Roma settlements	75.0	98.8	97.8	96.4	97.3	95.5	94.6	87.3	58.5	.2	71.0	755
Roma in Roma settlements	59.9	88.6	79.8	70.0	86.1	81.0	68.1	63.0	26.6	3.7	65.9	27
Sex												
Male	73.9	98.8	97.8	96.6	98.6	96.0	95.1	88.6	57.8	.1	70.1	412
Female	75.3	98.2	96.7	94.5	95.1	94.0	92.3	84.3	57.1	.6	71.5	371
Region												
Vojvodina	92.6	99.0	98.8	98.0	97.5	96.7	95.7	91.6	81.4	.2	82.8	223
Belgrade	80.9	96.4	90.1	86.1	99.2	94.7	92.3	75.4	47.1	.2	46.5	117
West	65.7	100.0	99.8	98.1	92.7	85.3	88.1	88.1	43.8	-	71.5	104
Central	68.6	99.2	99.0	97.2	98.3	98.2	96.3	88.7	54.9	-	69.0	145
East	73.1	100.0	99.7	99.5	100.0	99.7	99.5	92.8	62.5	-	70.2	73
SouthEast	49.1	96.6	95.9	93.7	93.6	93.2	89.5	80.8	30.9	1.6	74.0	121
Type of settlement												
Urban	81.0	98.0	96.4	94.4	98.1	96.3	94.6	84.9	62.4	.2	69.9	417
Rural	67.1	99.0	98.3	97.0	95.6	93.6	92.8	88.5	51.6	.5	71.8	365
Mother's education												
Primary or none	70.3	96.9	95.8	93.1	94.4	92.7	92.0	82.0	53.8	1.3	70.4	196
Secondary	73.6	99.1	97.9	96.6	98.4	96.0	94.6	89.2	57.1	-	71.9	458
University	84.5	98.8	97.3	95.9	95.5	95.0	93.3	84.3	64.7	.0	67.7	129
Ethnicity of head of the household												
Serbian	73.6	98.8	97.7	96.1	97.0	94.9	94.2	87.3	57.3	.3	71.9	626
Hungarian	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	-	(*)	19
Muslim\Bosnian	(73.1)	(100.0)	(99.5)	(96.6)	(100.0)	(99.5)	(92.9)	(88.3)	(52.6)	-	(62.2)	48
Roma	75.8	89.1	83.6	77.5	91.4	88.7	80.7	70.1	47.7	2.4	59.2	40
Other	(80.1)	(100.0)	(100.0)	(100.0)	(100.0)	(100.0)	(100.0)	(85.8)	(64.3)	-	(66.5)	50
Wealth index quintiles												
Poorest	64.3	97.4	96.3	93.2	94.2	90.9	90.6	86.5	50.1	1.6	69.1	162
Second	64.5	98.4	97.0	96.8	97.3	94.4	93.2	85.9	48.9	-	75.8	172
Middle	79.0	99.9	99.9	99.8	98.3	98.2	96.9	90.5	68.0	-	71.4	173
Fourth	87.0	98.0	96.0	93.0	96.2	95.0	93.1	85.4	65.3	-	67.6	154
Richest	79.8	98.7	97.3	94.5	99.1	96.6	95.1	83.7	53.7	-	69.1	122
Total	74.5	98.5	97.3	95.6	96.9	95.1	93.8	86.6	57.5	.3	70.8	782

Table CH.3
Oral rehydration treatment

Percentage of children aged 0–59 months with diarrhoea in the last two weeks and treatment with oral rehydration solution or other recommended liquids (ORS), Serbia, 2005

		Had diarrhoea in last two weeks	Number of children aged 0–59 months	Fluid from ORS packet	Breast milk
Area	Serbia without Roma in Roma settlements	5.0	3647	16.7	19.3
	Roma in Roma settlements	13.0	130	19.8	37.5
Sex	Male	5.8	1917	16.8	23.5
	Female	4.6	1860	17.3	17.4
Region	Vojvodina	5.0	1052	16.8	15.4
	Belgrade	3.9	671	26.0	21.7
	West	5.5	427	(*)	(*)
	Central	5.3	656	(1.0)	(28.3)
	East	2.9	337	(*)	(*)
	South-East	8.0	634	27.7	24.5
Type of settlement	Urban	5.2	2097	17.3	24.5
	Rural	5.2	1680	16.6	16.4
Age	<6 months	4.2	316	(*)	(*)
	6–11 months	8.6	338	(6.2)	(48.5)
	12–23 months	7.7	773	22.4	22.5
	24–35 months	5.2	802	19.4	5.3
	36–47 months	4.7	754	(15.6)	(1.0)
	48–59 months	2.4	795	(17.1)	(1.0)
Mother's education	Primary or none	7.0	818	26.9	22.7
	Secondary	4.9	2304	10.6	19.6
	University	4.1	656	(*)	(*)
Ethnicity of head of the household	Serbian	5.1	3086	14.6	18.7
	Hungarian	8.0	111	(*)	–
	Muslim\Bosnian	5.3	186	(*)	(*)
	Roma	10.4	166	28.0	35.5
	Other	1.9	229	(*)	(*)
Wealth index quintiles	Poorest	7.1	656	20.8	26.2
	Second	5.7	742	(15.5)	(21.5)
	Middle	3.6	858	(10.7)	(9.4)
	Fourth	5.3	830	(7.7)	(19.8)
	Richest	4.8	690	(*)	(*)
Total		5.2	3777	17.0	20.9

* MICS indicator 33

Porridge (from cereals, leguminous plants, root vegetables) or soup	Other (yoghurt, sour milk, tea, sugar and salt solution, sugar-free fruit juice)	Cow/sheep /goat milk or adapted baby milk	Water and food combined	Only water	Sweetened water, sweetened tea or sweetened fruit juice	No treatment	ORT use rate*	Number of children aged 0–59 months with diarrhoea
63.9	69.2	41.6	59.7	72.0	64.4	5.5	94.5	181
50.8	54.3	27.6	63.7	83.7	69.4	11.1	88.9	17
57.4	60.2	33.4	60.9	74.2	67.5	8.6	91.4	112
69.7	78.0	49.5	58.9	71.5	61.2	2.6	97.4	86
61.1	84.3	61.2	45.2	66.2	65.1	3.4	96.6	53
35.5	49.5	31.3	38.4	73.3	34.9	7.2	92.8	26
(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	23
(69.4)	(78.1)	(27.9)	(68.5)	(68.9)	(75.0)	(6.8)	(93.2)	35
(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	10
69.3	55.7	30.4	71.4	84.1	76.3	7.8	92.2	50
64.6	71.4	42.9	58.6	77.7	58.2	6.1	93.9	110
60.5	63.6	37.3	61.8	67.2	73.0	5.8	94.2	88
(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	13
(84.1)	(58.3)	(36.5)	(73.7)	(60.8)	(66.1)	(.0)	(100.0)	29
66.7	73.0	39.8	61.2	74.1	66.3	3.1	96.9	59
64.3	71.2	43.3	58.2	79.1	69.1	5.1	94.9	42
(59.9)	(71.3)	(38.3)	(57.4)	(75.6)	(77.6)	(12.4)	(87.6)	35
(60.6)	(82.4)	(47.7)	(60.4)	(68.4)	(50.4)	(15.7)	(84.3)	19
50.8	57.9	34.9	52.9	75.3	76.0	3.3	96.7	57
67.9	74.7	44.7	64.8	70.6	60.1	7.3	92.7	114
(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	27
68.2	69.1	39.9	61.0	74.1	63.4	6.4	93.6	157
(*)	(*)	(*)	(*)	(*)	(*)	–	(*)	9
(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	10
45.5	57.5	33.1	58.8	85.0	62.9	9.4	90.6	17
(*)	(*)	(*)	(*)	(*)	(*)	–	(*)	4
60.4	52.2	29.2	54.2	74.8	81.8	3.3	96.7	47
(56.6)	(64.7)	(43.1)	(61.6)	(66.4)	(65.9)	(9.6)	(90.4)	43
(58.7)	(74.1)	(44.3)	(84.9)	(85.3)	(57.3)	(14.8)	(85.2)	31
(76.2)	(85.7)	(38.1)	(61.3)	(77.4)	(64.2)	(.2)	(99.8)	44
(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	33
62.7	67.9	40.4	60.1	73.0	64.8	6.0	94.0	198

Table CH.4
Home management of diarrhoea

Percentage of children aged 0–59 months with diarrhoea in the last two weeks who took increased fluids and continued to feed during the episode, Serbia, 2005

		Had diarrhoea in last two weeks	Number of children aged 0–59 months	Children with diarrhoea who drank more
Area	Serbia without Roma in Roma settlements	5.0	3647	37.4
	Roma in Roma settlements	13.0	130	26.4
Sex	Male	5.8	1917	38.8
	Female	4.6	1860	33.3
Region	Vojvodina	5.0	1052	23.1
	Belgrade	3.9	671	48.4
	West	5.5	427	–
	Central	5.3	656	(47.4)
	East	2.9	337	(*)
	South-East	8.0	634	56.8
Type of settlement	Urban	5.2	2097	35.6
	Rural	5.2	1680	37.4
Age	0–11 months	6.5	654	22.9
	12–23 months	7.7	773	37.0
	24–35 months	5.2	802	42.5
	36–47 months	4.7	754	(53.7)
	48–59 months	2.4	795	(19.1)
Mother's education	Primary or none	7.0	818	32.6
	Secondary	4.9	2304	37.7
	University	4.1	656	(*)
Ethnicity of head of the household	Serbian	5.1	3086	38.6
	Hungarian	8.0	111	(*)
	Muslim\Bosnian	5.3	186	(*)
	Roma	10.4	166	26.1
	Other	1.9	229	(*)
Wealth index quintiles	Poorest	7.1	656	24.4
	Second	5.7	742	(42.2)
	Middle	3.6	858	(45.9)
	Fourth	5.3	830	(38.7)
	Richest	4.8	690	(*)
Total		5.2	3777	36.4

* MICS indicator 34

** MICS indicator 35

Children with diarrhoea who drank the same or less	Children with diarrhoea who ate somewhat less, same or more	Children with diarrhoea who ate much less or none	Home management of diarrhoea*	Received ORT or increased fluids AND continued feeding**	Number of children aged 0–59 months with diarrhoea
62.6	76.3	23.7	27.3	72.6	181
73.6	61.5	38.5	15.1	53.6	17
61.2	79.8	20.2	28.7	72.9	112
66.7	68.9	31.1	23.0	68.4	86
76.9	75.5	24.5	14.6	72.3	53
51.6	49.1	50.9	25.6	48.4	26
(*)	(*)	(*)	–	(*)	23
(52.6)	(79.7)	(20.3)	(33.8)	(72.9)	35
(*)	(*)	(*)	(*)	(*)	10
43.2	79.8	20.2	47.7	75.5	50
64.4	80.7	19.3	29.3	76.3	110
62.6	68.0	32.0	22.4	64.3	88
77.1	82.5	17.5	17.8	81.6	42
63.0	70.5	29.5	32.2	67.8	59
57.5	68.8	31.2	27.4	67.8	42
(46.3)	(80.4)	(19.6)	(37.5)	(72.9)	35
(80.9)	(76.2)	(23.8)	(2.7)	(60.4)	19
67.4	64.5	35.5	21.9	62.2	57
62.3	81.1	18.9	26.8	75.2	114
(*)	(*)	(*)	(*)	(*)	27
61.4	81.8	18.2	30.4	77.3	157
(*)	(*)	(*)	–	(*)	9
(*)	(*)	(*)	–	(*)	10
73.9	57.1	42.9	14.9	50.8	17
(*)	(*)	(*)	(*)	(*)	4
75.6	65.2	34.8	18.4	62.7	47
(57.8)	(77.7)	(22.3)	(30.9)	(71.8)	43
(54.1)	(78.2)	(21.8)	(24.1)	(63.7)	31
(61.3)	(89.6)	(10.4)	(32.4)	(89.6)	44
(*)	(*)	(*)	(*)	(*)	33
63.6	75.1	24.9	26.2	71.0	198

Table CH.5
Care seeking for suspected pneumonia
 Percentage of children aged 0–59 months in the last two weeks
 taken to a health provider, Serbia, 2005

Area	Had acute respiratory infection	Number of children aged 0–59 months	Ambulance	Health centre	Hospital	Private doctor	Other	Any appropriate provider*	Number of children aged 0–59 months with suspected pneumonia
Serbia without Roma in Roma settlements	3.1	3647	18.2	71.0	14.1	8.5	–	92.8	114
Roma in Roma settlements	10.4	130	14.2	70.1	17.2	.8	.8	90.2	13
Sex									
Male	3.6	1917	11.3	79.9	18.9	4.5	.2	94.2	69
Female	3.1	1860	25.5	60.3	9.2	11.4	–	90.5	58
Region									
Vojvodina	4.9	1052	18.0	60.7	12.4	8.5	–	87.5	51
Belgrade	2.2	671	(11.1)	(97.3)	(13.0)	–	–	(98.0)	15
West	1.3	427	–	(*)	(*)	–	–	(*)	6
Central	2.8	656	–	(*)	–	(*)	–	(*)	18
East	5.1	337	(*)	(*)	(*)	(*)	–	(*)	17
South-East	3.1	634	45.8	58.9	12.9	7.6	.6	98.3	20
Type of settlement									
Urban	3.5	2097	17.8	70.8	12.3	9.8	.2	90.6	72
Rural	3.2	1680	17.8	71.1	17.3	4.8	–	95.0	55
Age									
0–11 months	1.9	654	(3.3)	(91.6)	(5.1)	–	–	(97.7)	12
12–23 months	3.7	773	(27.8)	(67.0)	(18.0)	–	–	(95.1)	28
24–35 months	4.0	802	(20.1)	(83.8)	(1.6)	(3.9)	(.3)	(99.2)	32
36–47 months	2.9	754	(7.2)	(72.6)	(21.5)	(31.0)	–	(93.1)	22
48–59 months	4.0	795	(19.7)	(52.4)	(22.8)	(4.9)	–	(81.1)	32
Mother's education									
Primary or none	4.2	818	26.6	63.6	10.9	.3	.3	92.5	35
Secondary	3.3	2304	17.8	71.6	15.4	5.5	–	92.7	76
University	2.6	656	–	(*)	(*)	(*)	–	(*)	17
Ethnicity of head of the household									
Serbian	3.1	3086	15.3	75.0	15.0	8.4	–	92.9	97
Hungarian	4.0	111	(*)	(*)	–	(*)	–	(*)	4
Muslim\Bosnian	1.4	186	–	(*)	(*)	(*)	–	(*)	3
Roma	7.7	166	14.9	72.1	16.5	–	.9	91.6	13
Other	4.5	229	(*)	(*)	(*)	–	–	(*)	10
Wealth index quintiles									
Poorest	3.2	656	21.3	64.1	23.8	–	.5	88.7	21
Second	3.6	742	(17.2)	(72.1)	(11.6)	(5.8)	–	(95.0)	27
Middle	4.0	858	(17.1)	(70.4)	(16.6)	(7.5)	–	(91.7)	35
Fourth	3.8	830	(*)	(*)	(*)	(*)	–	(*)	31
Richest	1.9	690	(*)	(*)	(*)	(*)	–	(*)	13
Total	3.4	3777	17.8	70.9	14.4	7.6	.1	92.5	127

* MICS indicator 23

Table CH.6 Antibiotic treatment of pneumonia

Percentage of children aged 0–59 months with suspected pneumonia who received antibiotic treatment, Serbia, 2005

		Percentage of children aged 0–59 months with suspected pneumonia who received antibiotics in the last two weeks*	Number of children aged 0–59 months with suspected pneumonia in the two weeks prior to the survey
Area	Serbia without Roma in Roma settlements	58.2	114
	Roma in Roma settlements	45.1	13
Sex	Male	61.0	69
	Female	51.9	58
Region	Vojvodina	50.3	51
	Belgrade	(34.6)	15
	West	(*)	6
	Central	(*)	18
	East	(*)	17
	South-East	70.8	20
Type of settlement	Urban	59.3	72
	Rural	53.5	55
Age	0–11 months	(50.8)	12
	12–23 months	(53.5)	28
	24–35 months	(66.3)	32
	36–47 months	(70.3)	22
	48–59 months	(43.3)	32
Mother's education	Primary or none	62.9	35
	Secondary	54.2	76
	University	(*)	17
Ethnicity of head of the household	Serbian	60.8	97
	Hungarian	(*)	4
	Muslim\Bosnian	(*)	3
	Roma	45.0	13
	Other	(*)	10
Wealth index quintiles	Poorest	60.1	21
	Second	(66.5)	27
	Middle	(45.9)	35
	Fourth	(*)	31
	Richest	(*)	13
Total		56.8	127

* MICS indicator 22

Table CH.6a

Knowledge of the two danger signs of pneumonia

Percentage of mothers/caretakers of children aged 0–59 months by knowledge of types of symptoms for taking a child immediately to a health facility, and percentage of mothers/caretakers who recognise fast and difficult breathing as signs for seeking care immediately, Serbia, 2005

	Percentage of mother/caretakers of children aged 0–59 months who think that a child should be taken immediately to a health facility if the child										Mothers/ caretakers who recognise the two danger signs of pneumonia	Number of mothers/ caretakers of children aged 0–59 months
	Is not able to drink or breastfeed	Becomes sicker	Develops a fever	Has fast breathing	Has difficulty breathing	Has blood in stool	Is drinking poorly	Child has shocks	Has other symptoms			
Area	Serbia without Roma in Roma settlements	30.8	42.1	81.3	39.8	48.7	41.3	22.7	44.8	–	33.6	3647
Region	Roma in Roma settlements	13.1	17.5	90.1	16.9	19.8	16.0	8.9	18.7	–	12.3	130
	Vojvodina	14.7	41.4	65.6	35.5	45.8	31.2	16.6	32.6	–	29.3	1052
	Belgrade	59.7	67.7	88.1	62.2	68.4	72.4	45.4	74.6	–	57.2	671
	West	18.7	22.2	92.7	21.3	21.5	29.8	14.3	32.5	–	14.6	427
	Central	28.7	35.1	79.1	33.0	63.2	41.6	13.1	54.3	–	28.7	656
	East	35.7	35.3	84.1	34.8	36.1	33.5	13.5	32.9	–	31.9	337
	South-East	30.8	35.2	95.1	40.7	36.7	31.7	26.4	33.1	–	30.1	634
Type of settlement	Urban	33.3	44.8	82.6	41.7	51.0	43.9	23.0	46.8	–	35.6	2097
Mother's education	Rural	26.2	36.8	80.4	35.6	43.6	36.2	21.2	40.3	–	29.4	1680
	Primary or none	29.0	37.0	83.3	35.8	42.7	36.1	23.4	38.8	–	31.1	818
	Secondary	28.8	41.6	81.3	39.3	48.4	40.1	21.4	43.7	–	33.0	2304
Ethnicity of head of the household	University	36.3	45.3	80.5	42.1	51.7	47.3	23.4	51.1	–	34.7	656
	Serbian	30.6	42.3	80.7	40.0	48.2	41.6	22.1	45.4	–	33.3	3086
	Hungarian	7.9	32.9	64.4	22.4	30.3	25.1	10.6	26.5	–	15.9	111
	Muslim/Bosnian	16.9	8.9	99.1	11.0	32.0	13.3	4.2	13.8	–	7.7	186
	Roma	25.1	30.4	87.7	30.0	34.2	29.4	21.2	34.4	–	27.1	166
Wealth index quintiles	Other	49.8	65.1	83.3	63.1	72.2	63.3	44.8	63.3	–	59.8	229
	Poorest	25.0	32.0	82.1	33.2	37.3	31.0	17.9	35.9	–	28.0	656
	Second	25.2	36.5	81.2	33.6	44.9	38.2	20.2	40.8	–	28.3	742
	Middle	29.5	40.4	82.4	37.3	45.4	38.1	22.0	40.9	–	31.0	858
	Fourth	31.3	46.6	79.8	42.6	54.6	42.4	21.9	46.3	–	36.5	830
Total	Richest	39.9	49.6	82.8	48.1	55.2	52.5	29.1	55.8	–	40.4	690
		30.2	41.2	81.6	39.0	47.7	40.5	22.2	43.9	–	32.9	3777

Table CH.7 Solid fuel use

Percentage distribution of households according to type of cooking fuel, and percentage of households using solid fuels for cooking, Serbia, 2005

Area	Type of fuel used for cooking						Total	Solid fuels for cooking*	Number of households
	Electricity	Gas	Coal	Wood	Other solid fuel	Other			
Serbia without Roma from Roma settlements	52.5	14.1	1.3	31.5	.2	.3	100.0	33.0	8645
Roma in Roma settlements	14.5	.4	.9	81.6	2.0	.5	100.0	84.5	85
Region									
Vojvodina	43.5	38.2	1.3	16.1	.6	.4	100.0	17.9	2468
Belgrade	84.0	4.2	3.5	7.5	.2	.7	100.0	11.2	1911
West	27.1	1.5	.8	70.4	.2	.2	100.0	71.3	927
Central	39.9	7.7	.1	51.8	.2	.3	100.0	52.1	1384
East	47.6	4.7	1.1	46.5	—	.1	100.0	47.6	788
South-East	55.6	3.3	.1	41.1	.0	.0	100.0	41.1	1252
Urban	70.4	15.4	.9	12.9	.0	.5	100.0	13.7	5097
Rural	26.6	12.1	2.0	58.8	.5	.1	100.0	61.3	3633
Primary or none	31.6	9.5	2.0	56.0	.6	.2	100.0	58.6	3264
Secondary	59.9	17.6	1.0	21.2	.0	.2	100.0	22.2	4056
University	77.3	13.8	.8	7.3	—	.8	100.0	8.1	1410
Ethnicity of head of the household									
Serbian	53.9	12.3	1.4	32.0	.2	.3	100.0	33.6	7565
Hungarian	42.9	40.7	.5	14.6	.8	.4	100.0	16.0	389
Muslim\Bosnian	19.2	5.5	2.3	73.1	—	.0	100.0	75.3	154
Roma	19.0	1.4	2.2	75.5	1.5	.4	100.0	79.2	108
Other	50.9	24.4	.4	23.4	—	.9	100.0	23.8	514
Wealth index quintiles									
Poorest	8.1	5.7	1.9	83.2	.8	.3	100.0	85.8	1934
Second	28.5	16.9	2.6	51.5	.2	.2	100.0	54.4	1627
Middle	56.6	22.5	1.2	19.5	.1	.1	100.0	20.8	1659
Fourth	80.8	16.8	.8	1.1	.1	.4	100.0	2.0	1705
Richest	89.5	9.7	.2	.0	—	.6	100.0	.2	1805
Total	52.1	14.0	1.3	32.0	.2	.3	100.0	33.5	8730

* MICS indicator 24; MDG indicator 29

Table CH.8

Solid fuel use by type of stove or fire

Percentage of households using solid fuels for cooking by type of stove or fire, Serbia, 2005

		Percentage of households using solid fuels for cooking					Total	Number of households using solid fuels for cooking
		Closed stove with chimney	Open stove or fire with chimney or hood	Open stove or fire with no chimney or hood	Other stove	DK stove type/missing		
Area	Serbia without Roma from Roma settlements	96.0	1.0	.1	.1	2.8	100.0	2856
	Roma in Roma settlements	99.4	.1	.2	.3	—	100.0	72
Region	Vojvodina	97.7	.7	.4	.0	1.2	100.0	442
	Belgrade	88.8	6.2	.7	—	4.3	100.0	213
	West	97.3	—	—	—	2.7	100.0	661
	Central	96.9	.5	—	.3	2.4	100.0	721
	East	91.4	2.2	—	—	6.4	100.0	375
	South-East	98.6	—	—	.0	1.4	100.0	515
Type of settlement	Urban	95.2	1.9	—	.1	2.8	100.0	701
	Rural	96.4	.6	.1	.1	2.7	100.0	2227
Education of head of the household	Primary or none	95.4	1.3	.2	.1	3.0	100.0	1913
	Secondary	97.5	.4	—	.0	2.1	100.0	901
	University	96.8	—	—	.0	3.2	100.0	114
Ethnicity of head of the household	Serbian	96.1	.8	.1	.1	3.0	100.0	2542
	Hungarian	(97.4)	—	—	(.0)	(2.6)	(100.0)	62
	Muslim\Bosnian	98.2	1.4	—	.4	—	100.0	116
	Roma	94.7	4.1	.2	.3	.7	100.0	86
	Other	94.1	3.0	1.3	.0	1.7	100.0	122
Wealth index quintiles	Poorest	96.1	1.1	.2	.1	2.5	100.0	1660
	Second	96.4	.9	—	.0	2.6	100.0	885
	Middle	95.4	.3	—	.1	4.1	100.0	345
	Fourth	(93.3)	—	—	(.0)	(6.7)	(100.0)	35
	Richest	(*)	—	—	—	—	(*)	4
Total		96.1	1.0	.1	.1	2.8	100.0	2928

Table EN.1

Use of improved water sources

Percentage distribution of household population according to main source of drinking water and percentage of household population using improved drinking water sources, Serbia, 2005

	Area	Main source of drinking water										Total	Improved source of drinking water*	Number of household members
		Improved sources					Unimproved sources							
		Public water supply	Local water supply	Public tap/standpipe	Tubewell/borehole	Protected well or spring	Bottled water	Unprotected well or spring	Tanker – truck	Bottled water	Other			
	Serbia without Roma in Roma settlements	62.8	13.9	1.3	7.1	8.5	5.4	.5	.1	.1	.4	100.0	99.0	27782
	Roma in Roma settlements	61.7	9.6	10.1	10.3	4.5	.5	.6	–	–	2.7	100.0	96.7	381
Region	Vojvodina	54.9	20.0	2.2	7.9	.6	13.6	.0	.4	.2	.2	100.0	99.2	7767
	Belgrade	82.8	4.2	.1	2.5	5.2	4.8	.3	.1	–	.1	100.0	99.5	5535
	West	52.6	13.4	.5	11.7	20.0	.3	1.1	–	–	.4	100.0	98.5	3155
	Central	59.2	17.3	.7	5.6	13.2	2.4	.3	–	–	1.1	100.0	98.5	4653
	East	56.6	14.1	3.3	11.4	13.0	.8	.7	–	–	.1	100.0	99.2	2548
	South-East	65.9	11.6	1.9	7.4	10.4	1.0	1.2	–	.0	.5	100.0	98.3	4505
Type of settlement	Urban	89.5	1.1	.7	.4	1.0	6.7	.2	.1	.1	.1	100.0	99.4	15419
	Rural	30.5	29.2	2.3	15.2	17.5	3.7	.8	.1	–	.7	100.0	98.3	12744
Education of head of the household	Primary or none	44.9	21.0	1.9	12.3	16.1	2.3	.9	–	–	.7	100.0	98.4	10088
	Secondary	70.6	11.4	1.2	4.9	4.9	6.5	.2	.2	.0	.2	100.0	99.4	13755
	University	79.7	4.9	1.0	2.3	2.2	8.7	.5	.1	.3	.3	100.0	98.8	4320
Ethnicity of head of the household	Serbian	63.5	12.8	1.3	7.2	9.3	4.9	.4	.1	.1	.4	100.0	99.0	24310
	Hungarian	50.8	26.2	.6	9.8	.9	11.7	–	–	–	–	100.0	100.0	1078
	Muslim \Bosnian	77.6	20.5	1.4	.4	–	.1	–	–	–	.0	100.0	100.0	675
	Roma	65.8	8.4	8.0	8.9	6.1	.3	.5	–	–	2.0	100.0	97.5	475
	Other	52.3	18.9	1.7	7.4	5.5	11.6	2.2	.2	–	.2	100.0	97.4	1626
Wealth index quintiles	Poorest	25.6	23.7	3.6	18.4	25.0	1.0	1.4	.1	–	1.1	100.0	97.4	5634
	Second	47.1	23.3	1.3	11.8	12.6	2.9	.3	.2	–	.5	100.0	99.1	5626
	Middle	69.1	14.9	1.7	4.6	3.7	5.1	.5	.2	.0	.2	100.0	99.1	5639
	Fourth	84.3	5.5	.4	.8	.9	7.5	.3	.1	.1	.1	100.0	99.4	5634
	Richest	87.6	1.6	.1	–	.1	10.2	.0	–	.2	.1	100.0	99.6	5629
Total		62.8	13.8	1.4	7.1	8.5	5.3	.5	.1	.1	.4	100.0	98.9	28163

* MICS indicator 11; MDG indicator 30

Table EN.2 Household water treatment

Percentage distribution of household population according to drinking water treatment method used in the household, and percentage of household population that applied an appropriate water treatment method, Serbia, 2005

Area	Water treatment method used in the household						All drinking water sources: Appropriate water treatment method*	Number of household members	Improved drinking water sources: Appropriate water treatment method	Number of household members	Unimproved drinking water sources: Appropriate water treatment method	Number of household members
	None	Boil	Add bleach/chlorine	Use water filter	Let it stand and settle	Other						
Serbia without Roma in Roma settlements	93.9	1.8	.9	1.9	.3	1.4	.1	4.6	27782	4.5	8.1	288
Roma in Roma settlements	98.5	.8	.5	.1	.1	.2	—	1.4	381	1.4	—	13
Region												
Vojvodina	93.9	2.7	—	2.6	.8	.3	.0	5.2	7767	5.2	(2.6)	63
Belgrade	88.8	4.0	.9	4.3	.2	1.7	.4	9.2	5535	9.0	(*)	26
West	93.6	.5	1.0	.7	.3	4.3	—	2.2	3155	2.0	(*)	47
Central	95.2	.7	1.9	.9	.1	1.7	—	3.4	4653	3.4	(*)	69
East	98.0	.1	.5	.1	.2	1.2	—	.7	2548	.7	—	20
South-East	96.9	.4	1.7	.6	—	.4	—	2.7	4505	2.8	—	75
Type of settlement												
Urban	93.8	2.1	.3	2.7	.4	1.0	.2	5.1	15419	5.0	17.7	90
Rural	94.1	1.4	1.7	.9	.3	1.8	—	3.9	12744	3.9	3.5	211
Education of head of the household												
Primary or none	94.8	1.2	1.5	.7	.6	1.7	.0	3.2	10088	3.2	7.8	162
Secondary	94.1	2.0	.8	2.1	.2	1.1	.0	4.8	13755	4.7	(12.2)	88
University	91.4	2.5	.2	4.0	.1	1.5	.4	6.8	4320	6.9	—	52
Ethnicity of head of the household												
Serbian	93.7	1.7	1.1	2.0	.3	1.5	.1	4.6	24310	4.6	8.8	246
Hungarian	92.4	4.5	—	2.4	.6	.0	.3	6.9	1078	6.9	—	0
Muslim/Bosnian	98.6	.5	—	.0	—	.9	—	.5	675	.5	—	0
Roma	98.9	.6	.4	.0	—	.1	—	1.0	475	1.0	—	12
Other	94.9	2.9	—	1.6	.6	—	.3	4.4	1626	4.5	(*)	42
Wealth index quintiles												
Poorest	94.6	1.1	2.0	.3	.3	2.2	—	3.2	5634	3.2	3.2	144
Second	95.1	1.0	1.7	.6	.6	1.2	—	3.2	5626	3.2	(*)	53
Middle	94.5	1.7	.6	1.9	.3	1.2	.1	4.1	5639	4.0	(*)	52
Fourth	94.5	2.1	.4	2.4	.2	.8	.0	4.8	5634	4.7	(*)	32
Richest	90.9	3.1	—	4.3	.2	1.3	.4	7.4	5629	7.5	—	20
Total	93.9	1.8	.9	1.9	.3	1.3	.1	4.5	28163	4.5	7.7	301

* MICS indicator 13

Table EN.3 Time to source of water

Percentage distribution of households according to time to go to source of drinking water, get water and return, and mean time to source of drinking water, Serbia, 2005

Area	Water on premises	Time to source of drinking water					Total	Mean time to source of drinking water (excluding those on premises)	Number of households
		Less than 15 minutes	15 minutes to less than 30 minutes	30 minutes to less than 1 hour	1 hour or more	DK/Missing			
Serbia without Roma from Roma settlements	95.5	2.0	1.0	.6	.4	.5	100.0	22.4	8645
Region									
Roma in Roma settlements	86.5	8.8	1.9	1.7	1.1	—	100.0	19.3	85
Vojvodina	94.5	1.8	2.1	.4	.6	.6	100.0	26.5	2468
Belgrade	98.3	.6	.0	.5	.2	.4	100.0	30.8	1911
West	95.0	3.6	.4	.6	—	.5	100.0	10.9	927
Central	97.6	1.2	.3	.3	.1	.4	100.0	18.3	1384
East	89.8	4.4	1.8	1.2	1.4	1.3	100.0	23.4	788
South-East	94.5	2.7	1.2	1.1	.4	.1	100.0	20.1	1252
Type of settlement									
Urban	98.3	.5	.4	.3	.3	.1	100.0	33.1	5097
Rural	91.6	4.0	1.8	1.1	.5	.9	100.0	19.2	3633
Education of head of the household									
Primary or none	93.0	3.6	1.4	.6	.5	.9	100.0	18.5	3264
Secondary	96.8	1.2	.7	.7	.4	.2	100.0	25.5	4056
University	97.6	.6	.7	.5	.4	.3	100.0	35.7	1410
Ethnicity of head of the household									
Serbian	95.4	2.1	1.0	.7	.3	.5	100.0	20.4	7565
Hungarian	96.7	.6	1.1	.5	.5	.6	100.0	24.3	389
Muslim\Bosnian	98.9	.7	—	.0	.3	—	100.0	25.5	154
Roma	88.2	6.4	1.4	1.2	2.8	—	100.0	29.0	108
Other	95.7	1.4	.7	.4	1.5	.3	100.0	47.5	514
Wealth index quintiles									
Poorest	88.6	6.6	2.1	1.1	.9	.9	100.0	18.1	1934
Second	95.1	1.3	1.5	1.1	.3	.7	100.0	23.3	1627
Middle	96.5	1.1	.9	.7	.4	.5	100.0	28.1	1659
Fourth	98.8	.3	.2	.0	.4	.2	100.0	53.8	1705
Richest	99.6	—	.1	.2	—	.1	100.0	29.9	1805
Total	95.5	2.0	1.0	.6	.4	.5	100.0	22.3	8730

Table EN.4 Person collecting water

Percentage distribution of households according to the person collecting drinking water used in the household, Serbia, 2005

Area	Person collecting drinking water					Total	Number of households
	Adult woman	Adult man	Female child (under 15)	Male child (under 15)	Missing		
Serbia without Roma from Roma settlements	40.0	53.3	.8	.4	5.4	100.0	365
Region							
Roma in Roma settlements	63.5	33.1	1.7	.5	1.3	100.0	11
Vojvodina	30.6	62.1	1.5	1.4	4.4	100.0	119
Belgrade	39.0	56.1	.1	—	4.8	100.0	31
West	(62.0)	(35.0)	—	—	(3.0)	(100.0)	47
Central	(30.1)	(61.6)	—	—	(8.3)	(100.0)	32
East	41.8	45.0	1.8	—	11.4	100.0	80
South-East	48.3	51.6	—	.1	.1	100.0	68
Type of settlement							
Urban	29.8	65.9	2.2	2.0	.2	100.0	81
Rural	43.7	49.1	.5	.0	6.7	100.0	295
Primary or none	46.2	45.2	1.5	.0	7.1	100.0	222
Education of head of the household							
Secondary	32.3	63.0	—	1.3	3.3	100.0	122
University	(*)	(*)	—	—	—	(*)	31
Ethnicity of head of the household							
Serbian	41.0	52.7	.5	.5	5.3	100.0	330
Hungarian	—	(*)	(*)	—	(*)	(*)	11
Muslim\Bosnian	(*)	(*)	—	—	—	(*)	2
Roma	69.7	27.7	1.0	.4	1.1	100.0	13
Other	(*)	(*)	—	—	—	(*)	20
Wealth index quintiles							
Poorest	52.7	43.6	.1	.0	3.7	100.0	219
Second	27.2	58.1	4.0	—	10.7	100.0	77
Middle	(23.0)	(68.8)	—	(2.9)	(5.4)	(100.0)	56
Fourth	(*)	(*)	—	—	(*)	(*)	18
Richest	(*)	(*)	—	—	—	(*)	6
Total	40.7	52.7	.9	.4	5.3	100.0	376

Table EN.5
Use of sanitary means of excreta disposal
 Percentage distribution of household population according to type of toilet facility used by the household, and the percentage of household population using sanitary means of excreta disposal, Serbia, 2005

Area	Type of toilet facility used by household							Total	Percentage of population using sanitary means of excreta disposal*	Number of households members	
	Improved sanitation facility				Unimproved sanitation facility						
	Flush to piped sewer system		Flush to septic tank		Pit latrine with watertight tank	Traditional pit latrine	No facilities				Other
	Flush to piped sewer system	Flush to septic tank	Flush to piped sewer system	Flush to septic tank							
Serbia without Roma in Roma settlements	53.1	36.8	.5	9.5	–	.1	100.0	99.9	27782		
Roma in Roma settlements	30.4	15.6	1.0	47.7	4.9	.4	100.0	94.7	381		
Vojvodina	39.1	54.9	.1	5.7	.1	.0	100.0	99.9	7767		
Belgrade	75.9	20.3	.0	3.7	.0	–	100.0	100.0	5535		
West	42.9	40.0	1.7	15.3	–	.0	100.0	100.0	3155		
Central	56.5	31.0	.8	11.2	–	.5	100.0	99.5	4653		
East	44.8	43.5	.2	11.3	.0	.1	100.0	99.9	2548		
South-East	55.5	24.1	.8	19.3	.2	.0	100.0	99.8	4505		
Urban	83.7	13.5	.1	2.6	.1	.1	100.0	99.9	15419		
Rural	15.3	64.4	1.0	19.0	.1	.1	100.0	99.8	12744		
Primary or none	28.7	49.3	.8	20.8	.2	.1	100.0	99.7	10088		
Secondary	60.8	33.8	.4	4.9	.0	.1	100.0	99.9	13755		
University	83.4	15.4	.2	1.0	–	–	100.0	100.0	4320		
Serbian	53.6	36.4	.4	9.5	.0	.1	100.0	99.9	24310		
Hungarian	34.8	58.1	–	7.1	–	–	100.0	100.0	1078		
Muslim\Bosnian	76.0	6.2	5.0	12.8	.1	.0	100.0	99.9	675		
Roma	28.3	20.9	.8	46.1	3.6	.2	100.0	96.1	475		
Other	50.0	41.2	.8	8.0	.0	.0	100.0	100.0	1626		
Poorest	6.9	51.4	1.5	39.9	.3	.0	100.0	99.6	5634		
Second	26.1	65.7	.6	7.6	–	.0	100.0	100.0	5626		
Middle	51.3	45.4	.6	2.4	–	.4	100.0	99.6	5639		
Fourth	83.0	16.8	–	.1	–	.1	100.0	99.9	5634		
Richest	96.6	3.4	–	–	–	–	100.0	100.0	5629		
Total	52.8	36.5	.5	10.0	.1	.1	100.0	99.8	28163		

* MICS indicator 12; MDG indicator 31

Table EN.6
Disposal of child faeces

Percentage distribution of children aged 0–2 years according to place of disposal of child faeces, and the percentage of children aged 0–2 years whose stools are disposed of safely, Serbia, 2005

	Child used toilet	What was done to dispose of the stools					Total	Proportion of children whose stools are disposed of safely*	Number of children aged 0–2 years
		Put/rinsed into toilet or latrine	Put/rinsed into drain or ditch	Thrown into garbage	Other	DK/Missing			
Area	11.4	25.9	2.9	58.1	1.1	.6	100.0	37.3	2177
	Serbia without Roma in Roma settlements								
Region		4.7	15.2	9.1	62.5	6.4	2.2	19.8	82
	Vojvodina	12.6	27.3	1.6	57.1	1.2	.2	39.9	626
	Belgrade	16.4	17.7	4.8	58.2	1.7	1.3	34.1	367
	West	10.7	31.6	3.3	52.3	1.0	1.0	42.3	280
	Central	10.4	31.5	2.6	54.3	1.1	.1	41.9	409
	East	7.4	13.2	3.2	73.3	1.5	1.5	20.6	194
	South-East	6.8	25.8	4.1	61.1	1.3	.9	32.6	382
Type of settlement									
	Urban	11.5	24.5	2.5	59.9	.9	.7	36.0	1202
	Rural	10.8	26.8	3.7	56.3	1.8	.6	37.5	1056
Mother's education									
	Primary or none	10.9	20.2	10.5	54.3	3.3	.6	31.2	524
	Secondary	11.3	29.2	1.1	57.0	.9	.6	40.5	1349
	University	10.9	20.0	–	67.9	–	1.2	30.9	386
Ethnicity of head of the household									
	Serbian	11.0	27.6	1.8	58.2	.7	.7	38.6	1816
	Hungarian	(10.0)	(30.0)	(2.0)	(52.0)	(6.0)	–	(40.0)	73
	Muslim\Bosnian	19.4	12.5	5.2	61.3	1.5	.1	31.9	124
	Roma	5.9	14.6	16.6	52.9	8.7	1.4	20.4	109
	Other	10.7	16.5	8.1	63.5	.0	1.2	27.2	137
Wealth index quintiles									
	Poorest	8.5	21.1	12.2	52.8	4.7	.7	29.6	422
	Second	14.4	32.2	1.0	50.0	1.2	1.1	46.6	440
	Middle	9.8	29.8	2.0	57.6	.3	.5	39.6	532
	Fourth	11.2	25.6	.3	62.3	.3	.3	36.8	474
	Richest	12.3	16.9	.4	69.3	.3	.8	29.2	390
Total		11.2	25.5	3.1	58.2	1.3	.7	36.7	2259

* MICS indicator 14

Table EN.7

Use of improved water sources and improved sanitation

Percentage of household population using both improved drinking water sources and sanitary means of excreta disposal, Serbia, 2005

		Percentage of household population using improved sources of drinking water*	Percentage of household population using sanitary means of excreta disposal**	Percentage of household population using improved sources of drinking water and using sanitary means of excreta disposal	Number of household members
Area	Serbia without Roma in Roma settlements	99.0	99.9	98.9	27782
	Roma in Roma settlements	96.7	94.7	91.9	381
Region	Vojvodina	99.2	99.9	99.1	7767
	Belgrade	99.5	100.0	99.5	5535
	West	98.5	100.0	98.5	3155
	Central	98.5	99.5	98.0	4653
	East	99.2	99.9	99.1	2548
	South-East	98.3	99.8	98.1	4505
Type of settlement	Urban	99.4	99.9	99.3	15419
	Rural	98.3	99.8	98.1	12744
Education of head of the household	Primary or none	98.4	99.7	98.1	10088
	Secondary	99.4	99.9	99.2	13755
	University	98.8	100.0	98.8	4320
Ethnicity of head of the household	Serbian	99.0	99.9	98.9	24310
	Hungarian	100.0	100.0	100.0	1078
	Muslim\Bosnian	100.0	99.9	99.9	675
	Roma	97.5	96.1	94.0	475
	Other	97.4	100.0	97.4	1626
Wealth index quintiles	Poorest	97.4	99.6	97.1	5634
	Second	99.1	100.0	99.0	5626
	Middle	99.1	99.6	98.7	5639
	Fourth	99.4	99.9	99.3	5634
	Richest	99.6	100.0	99.6	5629
Total		98.9	99.8	98.8	28163

* MICS indicator 11; MDG indicator 30

** MICS indicator 12; MDG indicator 31

Table EN.8
Security of tenure

Percentage of household members living in households in urban areas which lack formal documentation for their residence in the dwelling or who feel at risk of eviction from the dwelling, and percentage of household members who were evicted from any dwelling in prior 5 years, Serbia, 2005

		Household does not have formal documentation for the residence	Respondent feels there is a risk of eviction	Household does not have security of tenure*	Household members evicted from any dwelling in prior 15 years	Numbers of households members
Area	Serbia without Roma in Roma settlements	12.7	6.4	16.1	12.8	15167
	Roma in Roma settlements	37.6	22.0	43.1	16.1	252
Region	Vojvodina	15.9	7.1	19.8	15.1	4240
	Belgrade	7.1	5.8	10.8	14.4	4290
	West	16.9	4.3	18.3	10.7	1175
	Central	13.4	5.2	16.2	13.2	2340
	East	11.5	10.3	17.9	10.1	1260
	South-East	17.8	8.0	20.0	7.6	2114
Education of head of the household	Primary or none	9.9	6.9	13.5	10.4	3122
	Secondary	15.0	7.0	18.5	13.8	8747
	University	11.1	5.5	14.2	12.6	3550
Ethnicity of head of the household	Serbian	12.6	6.1	15.6	12.8	13251
	Hungarian	10.0	7.9	16.5	8.1	604
	Muslim\Bosnian	18.3	6.3	21.7	13.8	461
	Roma	37.1	21.7	44.8	22.9	300
	Other	11.6	9.6	17.5	12.5	802
Wealth index quintiles	Poorest	26.2	15.6	31.2	22.4	924
	Second	17.3	11.9	24.1	14.1	1691
	Middle	13.0	7.3	17.6	13.1	3146
	Fourth	13.8	5.6	16.1	11.4	4368
	Richest	8.9	3.8	11.2	11.8	5289
Total		13.1	6.6	16.5	12.8	15419

* MICS indicator 93

Table EN.9
Durability of housing

Percentage of households and household members living in dwellings in urban areas (or in capital city) that are not considered durable, by background characteristics, Serbia, 2005

Area	Dwelling has natural floor material	Dwelling is in poor condition	Dwelling is vulnerable to accidents	Dwelling located in hazardous location	Percent of households living in dwellings considered non durable*	Number of households	Percent of household members living in dwelling considered non-durable	Number of household members
Serbia without Roma from Roma settlements	.2	1.6	.2	.1	.3	5043	.3	15167
Roma in Roma settlements	14.5	24.5	1.5	3.7	11.5	53	11.2	252
Region								
Vojvodina	.7	1.9	–	.3	.7	1409	.7	4240
Belgrade	.2	1.4	.6	.1	.7	1584	.9	4290
West	–	3.6	–	–	–	371	–	1175
Central	.0	1.2	–	–	.0	720	.0	2340
East	.4	1.5	–	.1	.2	397	.3	1260
South-East	.6	2.4	.0	–	.2	615	.3	2114
Education of head of the household								
Primary or none	1.4	4.9	.1	.3	1.0	1140	1.5	3122
Secondary	.1	1.1	.3	.1	.4	2759	.4	8747
University	.0	.4	–	.1	.1	1198	.1	3550
Ethnicity of head of the household								
Serbian	.2	1.2	.2	.1	.3	4418	.3	13251
Hungarian	.5	1.2	–	–	.3	230	.4	604
Muslim\Bosnian	.3	8.0	.0	.2	.4	106	.5	461
Roma	11.0	26.6	2.1	2.4	9.3	65	9.4	300
Other	.8	4.0	.0	.0	.8	277	.7	802
Wealth index quintiles								
Poorest	3.6	16.4	.7	.6	2.9	321	4.4	924
Second	.8	2.9	.6	.3	1.2	611	1.1	1691
Middle	.1	1.4	.0	.1	.1	1040	.2	3146
Fourth	–	.2	.2	.1	.3	1404	.3	4368
Richest	.1	.2	–	–	–	1721	–	5289
Total	.4	1.8	.2	.1	.4	5097	.5	15419

* MCS indicator 94

Table EN.10
Slum housing

Percentage of households and household members in urban areas that are considered to be living in slum housing, by background characteristics, Serbia, 2005

Area	Dwelling considered non durable	Lack of security of tenure	Overcrowding more than three persons per sleeping room	Lack of use of improved water source	Lack of use of improved sanitation	Percent of households considered to be living in slum housing*	Number of households	Percent of households members considered to be living in slum housing	Number of household members
Serbia without Roma from Roma settlements	.3	15.4	4.2	.4	.1	18.5	5043	20.5	15167
Region									
Roma in Roma settlements	11.5	44.6	27.1	2.8	5.2	60.1	53	63.2	252
Vojvodina	.7	18.3	3.5	.9	.1	20.7	1409	23.2	4240
Belgrade	.7	9.5	3.9	.4	.0	12.9	1584	16.2	4290
West	–	18.8	4.9	.0	.4	20.7	371	21.2	1175
Central	.0	16.8	5.9	.1	.4	21.4	720	23.1	2340
East	.2	19.7	9.1	.1	.0	24.4	397	24.7	1260
South-East	.2	20.3	3.0	.3	.2	22.2	615	22.9	2114
Education of head of the household									
Primary or none	1.0	12.2	3.5	.4	.4	14.7	1140	18.5	3122
Secondary	.4	18.0	5.7	.5	.1	21.9	2759	23.7	8747
University	.1	13.8	2.6	.4	–	15.9	1198	17.3	3550
Ethnicity of head of the household									
Serbian	.3	15.2	4.0	.4	.1	18.2	4418	19.9	13251
Hungarian	.3	13.8	2.0	–	–	15.7	230	19.6	604
Muslim\Bosnian	.4	22.7	13.2	.1	.1	29.2	106	31.0	461
Roma	9.3	43.1	25.8	1.9	3.8	54.8	65	60.2	300
Other	.8	17.3	5.6	.8	.0	20.0	277	22.4	802
Wealth index quintiles									
Poorest	2.9	26.2	10.2	1.1	.9	32.1	321	42.4	924
Second	1.2	22.0	5.4	.5	–	25.5	611	29.9	1691
Middle	.1	17.3	5.1	.6	.4	21.0	1040	22.9	3146
Fourth	.3	15.7	4.7	.5	–	19.1	1404	20.7	4368
Richest	–	10.6	2.5	.2	–	12.7	1721	14.0	5289
Total	.4	15.7	4.5	.4	.1	18.9	5097	21.2	15419

* MICS indicator 95; MDG indicator 32

Table RH.1 Use of contraception

Percentage of women aged 15–49 years currently married or in union who are using (or whose partner is using) a contraceptive method, Serbia, 2005

Area	Percent of women (currently married or in union) who are using														Total	Any modern method	Any traditional method	Any method*	Number of women currently married or in union
	Not using any method	Female sterilization	Male sterilization	Pill	IUD	Inject-ions	Implants	Condom	Female condom	Diaphragm /foam /jelly	LAM	Periodic abstinence	Withdrawal	Other					
Serbia without Roma from Roma settlements	58.6	.2	.0	3.4	6.0	.0	.0	8.6	.2	.4	.3	8.1	13.9	.2	100.0	18.8	22.6	41.4	4767
Roma in Roma settlements	71.9	.3	.1	1.2	1.3	–	–	1.3	–	.0	.3	2.7	20.6	.2	100.0	4.2	23.8	28.1	77
Region	51.8	.5	.0	4.1	7.2	–	.1	11.6	.2	.4	.7	6.9	16.1	.4	100.0	24.2	24.1	48.2	1352
Belgrade	60.4	–	–	3.2	7.8	.1	–	15.1	–	.2	.0	6.6	6.4	.2	100.0	26.4	13.2	39.6	827
West	68.4	.1	–	4.8	7.4	–	–	4.8	–	1.1	.4	5.8	6.6	.6	100.0	18.2	13.4	31.6	554
Central	72.6	.1	–	2.6	4.1	.1	–	5.2	.1	.5	.1	7.6	7.1	–	100.0	12.7	14.8	27.4	823
East	46.5	–	–	2.9	4.6	–	–	6.6	.7	–	.6	17.9	20.1	.1	100.0	14.8	38.7	53.5	451
South-East	55.5	.2	–	2.6	3.8	–	–	3.4	–	–	.1	7.6	26.8	.1	100.0	10.0	34.6	44.5	837
Type of settlement	57.4	.4	.0	4.1	6.2	.0	–	10.6	.1	.4	.2	7.7	12.5	.2	100.0	21.9	20.7	42.6	2514
Rural	60.3	.1	–	2.6	5.7	.0	.0	6.1	.2	.4	.4	8.3	15.6	.3	100.0	15.0	24.7	39.7	2329
Age	73.8	–	–	1.3	1.2	–	–	3.6	–	–	1.5	7.3	11.4	–	100.0	6.0	20.2	26.2	54
20–24	69.2	.2	–	1.8	.8	.4	–	8.4	–	–	–	8.3	9.7	–	100.0	11.6	19.1	30.8	326
25–29	58.3	–	–	4.2	2.4	–	.1	11.0	.5	.3	.8	7.3	14.9	.1	100.0	18.5	23.2	41.7	757
30–34	53.9	.1	–	4.4	6.4	–	–	10.7	.1	.2	.3	8.9	14.9	.1	100.0	21.9	24.2	46.1	1038
35–39	50.9	.5	–	3.7	9.2	–	–	9.1	.2	.7	.2	8.8	16.4	.3	100.0	23.4	25.7	49.1	924
40–44	56.8	.5	–	3.9	5.8	–	–	7.6	–	.6	.1	9.1	15.1	.5	100.0	18.5	24.7	43.2	878
45–49	70.7	–	.0	1.5	7.5	–	–	4.0	–	.2	–	5.6	10.3	.2	100.0	13.1	16.2	29.3	866
Education	66.6	.1	.0	2.2	3.7	–	–	2.4	.1	.3	.5	7.4	16.4	.3	100.0	8.8	24.6	33.4	1116
Secondary	58.6	.1	–	3.3	6.7	.0	–	8.4	.1	.4	.3	8.1	13.7	.2	100.0	19.1	22.3	41.4	2968
University	48.3	.6	–	5.5	6.6	–	.1	17.3	.4	.5	.1	8.4	11.9	.4	100.0	31.0	20.7	51.7	759
Ethnicity of head of the household	59.4	.2	–	3.1	6.1	.0	.0	8.3	.2	.4	.3	7.6	14.2	.2	100.0	18.3	22.3	40.6	4208
Serbian	43.4	1.1	–	5.7	11.0	–	–	19.5	–	–	.8	7.2	11.3	–	100.0	37.3	19.3	56.6	172
Muslim\Bosnian	61.8	.5	–	5.5	3.0	–	–	1.1	–	–	–	24.5	3.7	–	100.0	10.1	28.1	38.2	119
Roma	72.9	.3	.1	.9	1.0	–	–	1.7	–	.0	.3	5.2	17.6	.1	100.0	3.9	23.2	27.1	98
Other	53.1	–	–	6.4	3.3	–	–	10.0	–	–	.9	9.0	16.8	.5	100.0	19.7	27.2	46.9	248
Wealth index quintiles	66.9	.2	.0	2.0	4.0	–	–	3.1	.1	.2	.3	8.7	14.5	.0	100.0	9.6	23.5	33.1	823
Second	61.7	.0	–	2.2	5.0	.1	–	6.0	.2	.4	.4	8.3	15.2	.6	100.0	13.8	24.5	38.3	1006
Middle	57.8	.1	–	3.1	5.4	.1	.1	8.9	.2	.1	.5	8.6	14.9	.3	100.0	17.9	24.3	42.2	1049
Fourth	57.4	.2	–	3.6	5.9	–	–	10.3	–	.4	.3	7.5	14.3	.1	100.0	20.4	22.2	42.6	1020
Richest	51.4	.7	–	6.1	9.4	–	–	13.1	.2	.7	.2	7.0	11.1	.1	100.0	30.2	18.5	48.6	946
Total	58.8	.2	.0	3.4	6.0	.0	.0	8.4	.2	.4	.3	8.0	14.0	.2	100.0	18.6	22.6	41.2	4844

* MICS indicator 21; MDG indicator 19c

Table RH.2

Unmet need for contraception

Percentage of women aged 15–49 years currently married or in union with an unmet need for family planning and percentage of demand for contraception satisfied, Serbia, 2005

Area	Serbia without Roma from Roma settlements	Current use of contraception*	Unmet need for contraception – For spacing	Unmet need for contraception – For limiting	Unmet need for contraception – Total**	Number of women currently married or in union	Percentage of demand for contraception satisfied***	Number of women currently married or in union with need for contraception
Region								
	Roma in Roma settlements	28.1	3.1	29.7	32.8	77	46.1	47
	Vojvodina	48.2	2.7	24.4	27.1	1352	64.1	1018
	Belgrade	39.6	4.9	23.7	28.5	827	58.1	564
	West	31.6	3.0	32.3	35.3	554	47.2	371
	Central	27.4	3.7	28.5	32.3	823	46.0	491
	East	53.5	1.5	19.0	20.5	451	72.3	334
	South-East	44.5	3.4	23.2	26.6	837	62.6	595
Type of settlement								
	Urban	42.6	3.0	23.2	26.2	2514	61.9	1731
	Rural	39.7	3.5	27.3	30.8	2329	56.3	1642
Age								
	15–19	26.2	19.7	4.2	23.8	54	52.4	27
	20–24	30.8	17.4	7.6	25.0	326	55.1	182
	25–29	41.7	6.9	16.6	23.5	757	63.9	493
	30–34	46.1	3.1	23.3	26.4	1038	63.5	752
	35–39	49.1	.5	30.7	31.2	924	61.1	742
	40–44	43.2	.0	32.1	32.1	878	57.4	661
	45–49	29.3	.2	30.0	30.2	866	49.2	515
Education								
	Primary or none	33.4	2.5	31.0	33.5	1116	50.0	747
	Secondary	41.4	3.6	25.0	28.6	2968	59.2	2076
	University	51.7	3.2	17.5	20.7	759	71.5	550
Ethnicity of head of the household								
	Serbian	40.6	3.2	25.4	28.6	4208	58.7	2914
	Hungarian	56.6	5.4	15.2	20.6	172	73.3	132
	Muslim\Bosnian	38.2	6.3	22.5	28.7	119	57.0	79
	Roma	27.1	4.8	32.7	37.5	98	41.9	63
	Other	46.9	1.7	25.8	27.5	248	63.1	184
Wealth index quintiles								
	Poorest	33.1	3.5	32.6	36.1	823	47.8	570
	Second	38.3	2.6	26.0	28.7	1006	57.2	674
	Middle	42.2	3.6	24.4	28.0	1049	60.1	736
	Fourth	42.6	3.6	22.9	26.5	1020	61.7	704
	Richest	48.6	3.0	21.1	24.1	946	66.8	689
Total		41.2	3.3	25.2	28.5	4844	59.1	3373

* MICS indicator 21; MDG indicator 19C

** MICS indicator 98

*** MICS indicator 99

Table RH.3
Antenatal care provider

Percentage distribution of women aged 15–49 who gave birth in the two years preceding the survey by type of personnel providing antenatal care, Serbia, 2005

Area	Person providing antenatal care				Total	Any skilled personnel*	Number of women who gave birth in the preceding two years
	Medical doctor	Nurse/midwife/Auxiliary midwife/House visiting nurse	Relative/Friend/Traditional birth attendant/Other/Missing	No antenatal care received			
Serbia without Roma from Roma settlements	98.1	.6	.7	.7	100.0	98.6	642
Region							
Roma in Roma settlements	85.3	.5	3.1	11.1	100.0	85.8	20
Vojvodina	99.0	.0	.5	.5	100.0	99.0	180
Belgrade	97.5	–	.8	1.7	100.0	97.5	98
West	98.5	.8	–	.7	100.0	99.3	84
Central	94.5	2.0	2.0	1.5	100.0	96.5	122
East	97.3	1.1	.1	1.5	100.0	98.4	62
South-East	98.6	–	.9	.5	100.0	98.6	115
Type of settlement							
Urban	97.2	.9	1.0	.9	100.0	98.1	350
Rural	98.2	.2	.5	1.1	100.0	98.4	312
Age							
15–19	92.7	2.7	.3	4.3	100.0	95.4	22
20–24	97.0	.5	1.0	1.5	100.0	97.5	167
25–29	98.2	.5	.8	.4	100.0	98.7	235
30–34	98.2	.4	.4	1.0	100.0	98.6	163
35–39	98.5	–	1.1	.5	100.0	98.5	66
40–44	(*)	(*)	(*)	(*)	(*)	(*)	8
45–49	(*)	–	–	–	(*)	(*)	0
Education							
Primary or none	93.6	1.0	1.8	3.6	100.0	94.6	144
Secondary	98.6	.5	.6	.3	100.0	99.1	403
University	99.5	.5	–	–	100.0	100.0	114
Ethnicity of head of the household							
Serbian	98.6	.5	.4	.6	100.0	99.0	538
Hungarian	(100.0)	–	–	–	(100.0)	(100.0)	21
Muslim\Bosnian	89.2	1.7	5.6	3.4	100.0	91.0	36
Roma	87.5	.4	4.4	7.7	100.0	87.9	27
Other	98.5	1.5	–	–	100.0	100.0	39
Wealth index quintiles							
Poorest	95.8	.6	1.5	2.1	100.0	96.4	127
Second	97.5	.5	.0	2.0	100.0	98.0	123
Middle	98.3	.4	.5	.9	100.0	98.7	157
Fourth	96.9	1.3	1.8	–	100.0	98.2	139
Richest	100.0	–	–	–	100.0	100.0	116
Total	97.7	.6	.8	1.0	100.0	98.2	662

* MICS indicator 20

Table RH.4
Antenatal care

Percentage of pregnant women receiving antenatal care among women aged 15–49 who gave birth in two years preceding the survey and percentage of pregnant women receiving specific care as part of the antenatal care received, Serbia, 2005

		Percentage of pregnant women receiving ANC one or more times during pregnancy*	Percentage of pregnant women who had					Number of women who gave birth in two years preceding survey
			Blood sample taken	Blood pressure measured	Urine specimen taken	Weight measured	Papanicolaou test	
Area	Serbia without Roma from Roma settlements	99.3	96.3	96.1	96.0	94.1	51.6	642
	Roma in Roma settlements	88.9	76.3	76.6	75.5	76.5	26.7	20
Region	Vojvodina	99.5	96.5	97.3	96.9	93.5	52.6	180
	Belgrade	98.3	96.5	97.0	95.6	95.8	80.6	98
	West	99.3	97.6	97.6	98.4	96.8	39.4	84
	Central	98.5	94.4	91.2	92.6	88.9	44.8	122
	East	98.5	96.8	95.9	95.8	94.8	50.0	62
	South-East	99.5	92.8	94.2	93.3	93.5	38.0	115
Type of settlement	Urban	99.1	95.9	95.4	95.7	93.7	53.9	350
	Rural	98.9	95.3	95.7	95.0	93.4	47.4	312
Age	15–19	95.7	90.4	86.6	90.2	86.9	38.7	22
	20–24	98.5	93.5	94.1	94.4	89.0	44.8	167
	25–29	99.6	96.7	95.2	95.8	94.7	52.2	235
	30–34	99.0	97.2	97.0	96.0	95.3	55.4	163
	35–39	99.5	94.6	99.2	95.9	98.2	53.6	66
	40–44	(*)	(*)	(*)	(*)	(*)	(*)	8
	45–49	(*)	(*)	(*)	(*)	(*)	–	0
Education	Primary or none	96.4	87.2	89.1	87.4	87.0	35.9	144
	Secondary	99.7	97.7	97.2	97.8	94.9	53.3	403
	University	100.0	98.9	97.7	96.9	97.0	61.2	114
Ethnicity of head of the household	Serbian	99.4	98.2	97.2	97.6	95.5	54.4	538
	Hungarian	(100.0)	(100.0)	(100.0)	(100.0)	(90.8)	(54.5)	21
	Muslim\Bosnian	96.6	85.7	80.8	81.0	74.5	11.4	36
	Roma	92.3	75.9	76.1	75.4	76.4	28.5	27
	Other	100.0	81.5	96.5	89.0	96.5	51.4	39
Wealth index quintiles	Poorest	97.9	89.6	90.5	88.5	87.8	33.6	127
	Second	98.0	96.3	96.4	95.4	92.9	51.0	123
	Middle	99.1	96.3	96.1	97.7	94.6	52.8	157
	Fourth	100.0	97.2	97.3	97.2	96.2	54.7	139
	Richest	100.0	98.9	97.0	97.6	95.9	62.3	116
Total		99.0	95.6	95.5	95.4	93.5	50.9	662

* MICS indicator 44

Table RH.5 Assistance during delivery

Percentage distribution of women aged 15–49 with a birth in two years preceding the survey by type of personnel assisting at delivery, Serbia, 2005

		Person assisting at delivery							Total	Any skilled personnel*	Delivered in health facility**	Number of women who gave birth in preceding two years
		Medical doctor	Nurse /midwife	Auxiliary midwife	Traditional birth attendant	Relative /friend	Other /missing	No attendant				
Area	Serbia without Roma from Roma settlements	87.8	1.8	9.7	.1	.1	.6	–	100.0	99.2	99.0	642
	Roma in Roma settlements	66.6	2.4	23.9	.9	1.4	3.2	1.5	100.0	92.9	93.3	20
Region	Vojvodina	85.8	2.8	11.1	.1	.1	.1	.1	100.0	99.7	99.3	180
	Belgrade	85.8	2.1	11.8	.1	.1	.1	–	100.0	99.7	99.7	98
	West	93.6	.0	5.5	–	–	.8	–	100.0	99.2	99.2	84
	Central	87.1	1.4	9.0	–	.4	2.0	.0	100.0	97.5	97.5	122
	East	83.3	2.3	14.1	–	–	.1	.2	100.0	99.7	99.8	62
	South-East	87.6	1.4	9.4	.7	.0	.9	.0	100.0	98.4	97.8	115
Type of settlement	Urban	87.5	2.0	9.5	.0	.0	1.0	.0	100.0	98.9	98.7	350
	Rural	86.7	1.6	10.8	.3	.2	.3	.1	100.0	99.1	98.9	312
Age	15–19	91.1	.9	7.5	–	–	.3	.1	100.0	99.6	99.6	22
	20–24	84.5	3.2	11.3	.1	.3	.6	–	100.0	99.0	99.0	167
	25–29	89.2	1.0	8.7	–	.0	1.1	.0	100.0	98.8	98.5	235
	30–34	87.1	1.3	11.1	–	.1	.4	–	100.0	99.5	99.1	163
	35–39	84.7	2.9	10.7	1.2	.1	.1	.2	100.0	98.3	98.3	66
	40–44	(*)	–	(*)	–	–	(*)	(*)	(*)	(*)	(*)	8
	45–49	–	–	(*)	–	–	–	–	(*)	(*)	(*)	0
Education	Primary or none	79.7	3.2	14.7	.7	.2	1.4	.2	100.0	97.5	97.1	144
	Secondary	88.0	1.5	9.8	–	.1	.6	–	100.0	99.2	99.1	403
	University	93.4	1.2	5.4	–	–	–	–	100.0	100.0	100.0	114
Ethnicity of head of the household	Serbian	89.6	1.5	8.5	–	.1	.4	–	100.0	99.5	99.4	538
	Hungarian	(77.9)	(9.2)	(12.9)	–	–	–	–	(100.0)	(100.0)	(100.0)	21
	Muslim\Bosnian	84.9	.1	9.4	–	–	5.6	.1	100.0	94.3	94.3	36
	Roma	61.7	6.9	26.9	.7	.9	2.0	1.0	100.0	95.4	95.7	27
	Other	78.4	–	19.7	1.9	–	–	–	100.0	98.1	96.3	39
Wealth index quintiles	Poorest	83.8	3.1	10.9	.7	.2	1.0	.2	100.0	97.8	97.3	127
	Second	84.9	2.6	12.0	–	.5	.0	–	100.0	99.5	99.5	123
	Middle	85.0	2.2	12.3	–	–	.5	–	100.0	99.5	99.5	157
	Fourth	90.2	.4	7.6	–	–	1.8	–	100.0	98.2	98.2	139
	Richest	92.2	.5	7.3	–	–	–	–	100.0	100.0	99.4	116
Total		87.1	1.8	10.1	.1	.1	.7	.0	100.0	99.0	98.8	662

* MICS indicator 4; MDG indicator 17

** MICS indicator 5

Table CD.1
Family support for learning

Percentage of children aged 0–59 months for whom household members are engaged in activities that promote learning and school readiness, Serbia, 2005

		Percentage of children aged 0–59 months					Number of children aged 0–59 months
		For whom household members engaged in four or more activities that promote learning and school readiness*	Mean number of activities household members engage in with the child	For whom the father engaged in one or more activities that promote learning and school readiness**	Mean number of activities the father engaged in with the child	Living in a household without their natural father	
Area	Serbia without Roma in Roma settlements	85.7	5.1	71.3	2.4	4.7	3647
	Roma in Roma settlements	47.4	3.1	34.7	.8	6.2	130
Sex	Male	83.6	5.0	70.8	2.3	4.7	1917
	Female	85.3	5.1	69.2	2.3	4.9	1860
Region	Vojvodina	88.8	5.3	72.6	2.2	4.4	1052
	Belgrade	87.1	5.2	77.8	3.2	6.1	671
	West	88.3	5.2	71.7	2.6	5.2	427
	Central	80.9	4.8	72.5	2.1	3.7	656
	East	70.9	4.7	73.4	2.6	6.2	337
	South-East	82.6	4.8	52.0	1.5	4.1	634
Type of settlement	Urban	85.5	5.1	73.9	2.6	5.5	2097
	Rural	83.0	5.0	65.3	2.0	3.9	1680
Age	0–23 months	68.8	4.3	65.9	2.0	3.5	1427
	24–59 months	93.9	5.5	72.5	2.5	5.6	2350
Mother's education	Primary or none	71.9	4.4	54.1	1.5	6.4	818
	Secondary	87.2	5.2	72.1	2.4	4.5	2304
	University	90.4	5.4	82.5	3.0	3.8	656
Father's education	Primary or none	72.1	4.4	59.1	1.7	–	685
	Secondary	86.5	5.2	75.6	2.5	–	2415
	University	90.7	5.3	83.7	3.0	–	496
	Father not in household	86.2	5.2	–	–	100.0	181
Ethnicity of head of the household	Serbian	87.0	5.2	73.3	2.5	4.6	3086
	Hungarian	84.1	5.1	64.2	2.1	10.5	111
	Muslim\Bosnian	74.0	4.3	67.8	1.8	4.9	186
	Roma	46.6	3.1	33.8	.8	6.9	166
	Other	85.2	5.0	57.4	1.9	3.3	229
Wealth index quintiles	Poorest	72.7	4.4	53.8	1.6	5.2	656
	Second	83.5	5.0	69.6	2.2	4.2	742
	Middle	84.5	5.1	68.3	2.1	4.8	858
	Fourth	90.6	5.4	74.5	2.6	5.2	830
	Richest	89.0	5.3	82.6	3.0	4.5	690
Total		84.4	5.0	70.0	2.3	4.8	3777

* MICS indicator 46

** MICS Indicator 47

Table CD.2 Learning materials

Percentage of children aged 0–59 months living in households containing learning materials, Serbia, 2005

Area	3 or more non-children's books*	Median number of non-children's books	3 or more children's books**	Median number of children's books	Child plays with					3 or more types of plaything***	Number of children aged 0–59 months
					Household objects	Objects and materials found outside the home	Homemade toys	Toys that came from a store	No playthings mentioned		
Serbia without Roma in Roma settlements	77.5	10.0	81.4	10.0	31.1	29.7	20.0	89.3	5.1	20.9	3647
Roma in Roma settlements	26.7	0.0	22.9	0.0	36.5	37.4	25.6	58.1	13.4	19.1	130
Sex											
Male	75.7	10.0	78.3	10.0	28.6	32.0	21.1	88.6	5.0	20.5	1917
Female	75.7	10.0	80.4	10.0	33.9	27.9	19.2	87.9	5.7	21.2	1860
Region											
Vojvodina	69.5	10.0	84.6	10.0	38.5	31.9	15.3	89.7	3.7	22.0	1052
Belgrade	90.2	10.0	87.0	10.0	20.4	9.7	18.3	85.8	4.3	8.1	671
West	71.7	10.0	75.6	10.0	28.4	32.8	26.4	93.3	2.6	22.5	427
Central	68.8	10.0	68.9	7.0	26.2	26.6	14.7	90.2	6.0	16.9	656
East	82.0	10.0	76.3	10.0	36.4	52.3	35.2	81.9	9.9	36.6	337
South-East	77.3	10.0	77.5	10.0	35.1	37.9	23.8	86.4	8.0	27.1	634
Type of settlement											
Urban	80.0	10.0	83.3	10.0	30.0	26.7	18.9	88.6	5.4	18.9	2097
Rural	70.3	10.0	74.4	10.0	32.8	34.0	21.7	87.9	5.3	23.4	1680
Age											
0–23 months	68.3	10.0	66.9	7.0	24.9	15.2	11.7	79.0	13.8	11.2	1427
24–59 months	80.2	10.0	86.9	10.0	35.1	38.9	25.3	93.9	.2	26.7	2350
Mother's education											
Primary or none	53.7	4.0	53.0	3.0	32.2	31.2	21.4	78.1	8.2	20.0	818
Secondary	79.4	10.0	84.6	10.0	30.3	29.7	19.0	91.1	4.6	20.9	2304
University	90.1	10.0	93.7	10.0	33.5	29.4	22.6	91.1	4.4	21.9	656
Ethnicity of head of the household											
Serbian	81.0	10.0	85.0	10.0	31.8	31.6	21.1	89.7	4.7	22.1	3086
Hungarian	69.6	10.0	73.5	10.0	44.9	33.1	15.9	86.8	3.9	26.5	111
Muslim\Bosnian	53.6	5.0	40.1	1.0	6.1	4.8	3.8	84.0	12.5	1.8	186
Roma	28.8	0.0	25.8	0.0	33.7	28.8	20.0	62.3	11.7	13.9	166
Other	58.9	10.0	77.0	10.0	35.4	28.2	23.0	91.4	4.6	22.4	229
Wealth index quintiles											
Poorest	54.0	5.0	50.4	3.0	37.8	40.4	23.6	77.1	8.0	25.7	656
Second	71.9	10.0	74.4	7.0	33.8	35.1	20.0	89.6	5.6	25.2	742
Middle	75.2	10.0	83.4	10.0	27.7	25.8	21.3	90.7	4.7	18.8	858
Fourth	83.8	10.0	90.1	10.0	30.3	27.6	16.8	92.8	3.4	19.3	830
Richest	91.4	10.0	94.2	10.0	28.0	22.6	19.8	89.1	5.8	16.3	690
Total	75.7	10.0	79.3	10.0	31.2	30.0	20.2	88.3	5.4	20.9	3777

* MICS indicator 49

** MICS indicator 48

*** MICS indicator 50

Table CD.3
Children left alone or with other children

Percentage of children aged 0–59 months left in the care of other children under the age of 10 or left alone in the past week, Serbia, 2005

		Left in the care of children under the age of 10 in past week	Left alone in the past week	Left with inadequate care in past week*	Number of children aged 0–59 months
Area	Serbia without Roma in Roma settlements	6.7	4.6	8.5	3647
	Roma in Roma settlements	15.9	6.4	17.5	130
Sex	Male	5.7	4.8	7.8	1917
	Female	8.4	4.5	9.9	1860
Region	Vojvodina	5.0	1.7	5.2	1052
	Belgrade	10.5	7.3	11.0	671
	West	10.1	5.5	10.4	427
	Central	5.0	6.5	10.5	656
	East	6.6	5.4	9.5	337
	South-East	7.1	3.7	9.4	634
Type of settlement	Urban	6.8	3.6	8.0	2097
	Rural	7.3	6.0	9.9	1680
Age	0–23	5.2	3.5	6.6	1427
	24–59	8.1	5.3	10.2	2350
Mother's education	Primary or none	9.3	4.8	11.0	818
	Secondary	6.4	4.7	8.3	2304
	University	6.5	4.5	8.1	656
Ethnicity of head of the household	Serbian	6.7	4.8	8.5	3086
	Hungarian	5.2	1.3	5.2	111
	Muslim\Bosnian	12.0	6.6	15.7	186
	Roma	11.9	5.8	14.6	166
	Other	5.2	1.9	5.2	229
Wealth index quintiles	Poorest	10.2	6.9	13.9	656
	Second	4.8	2.9	6.0	742
	Middle	6.3	4.4	8.4	858
	Fourth	6.6	5.3	8.4	830
	Richest	7.7	3.9	8.1	690
Total		7.0	4.6	8.8	3777

* MICS indicator 51

Table ED.1 Early childhood education

Percentage of children aged 36–59 months who are attending some form of organised early childhood education programme and percentage of first graders who attended pre-school, Serbia, 2005

		Percentage of children aged 36–59 months currently attending early childhood education*	Number of children aged 36–59 months	Percentage of children attending first grade who attended pre-school programme in previous year**	Number of children attending first grade
Area	Serbia without Roma in Roma settlements	33.4	1500	89.5	280
	Roma in Roma settlements	3.9	49	62.0	5
Sex	Male	33.1	774	86.7	151
	Female	31.8	774	91.7	134
Region	Vojvodina	34.4	437	93.9	75
	Belgrade	56.9	307	(86.8)	59
	West	29.4	150	95.3	25
	Central	21.7	253	79.5	43
	East	18.3	143	(91.3)	32
	South-East	20.5	260	88.0	52
Type of settlement	Urban	45.2	908	89.5	157
	Rural	14.4	641	88.4	128
Age of child	36–47 months	28.0	754	na	0
	48–59 months	36.7	795	na	0
	7 years	na	0	89.0	285
Mother's education	Primary or none	7.4	303	82.1	67
	Secondary	33.1	970	89.2	173
	University	57.6	275	(99.0)	45
Ethnicity of head of the household	Serbian	35.3	1294	88.6	228
	Hungarian	(26.8)	38	(*)	14
	Muslim\Bosnian	14.9	63	(*)	10
	Roma	2.8	57	60.6	6
	Other	26.2	97	(93.1)	27
Wealth index quintiles	Poorest	7.4	236	76.9	55
	Second	11.9	310	93.9	64
	Middle	25.6	332	89.9	47
	Fourth	45.9	367	91.4	62
	Richest	64.1	304	91.9	56
Total		32.5	1548	89.0	285

* MICS indicator 52

** MICS indicator 53

Na Non applicable

Table ED.2

Primary school entry

Percentage of children of primary school entry age attending grade 1, Serbia, 2005

		Percentage of children of primary school entry age currently attending grade 1*	Number of children of primary school entry age
Area	Serbia without Roma in Roma settlements	94.4	337
	Roma in Roma settlements	66.2	9
Sex	Male	92.9	183
	Female	94.5	163
Region	Vojvodina	94.4	89
	Belgrade	91.3	68
	West	(98.3)	31
	Central	93.0	54
	East	94.5	40
	South-East	92.7	64
Type of settlement	Urban	92.5	190
	Rural	95.0	156
Age in the calendar year 2005	7	93.6	346
Mother's education	Primary or none	89.3	82
	Secondary	95.0	211
	University	(95.1)	52
Ethnicity of head of the household	Serbian	93.5	277
	Hungarian	(*)	14
	Muslim\Bosnian	(99.0)	15
	Roma	66.7	10
	Other	(98.0)	30
Wealth index quintiles	Poorest	89.0	73
	Second	96.7	72
	Middle	98.9	58
	Fourth	90.7	79
	Richest	94.3	64
Total		93.6	346

* MICS indicator 54

Table ED.3 Primary school net attendance ratio

Percentage of children of primary school age attending primary school or secondary school (NAR), Serbia, 2005

		Male		Female		Total	
		Net attendance ratio*	Number of children	Net attendance ratio*	Number of children	Net attendance ratio*	Number of children
Area	Serbia without Roma in Roma settlements	99.0	1326	99.1	1275	99.1	2602
	Roma in Roma settlements	76.0	34	71.1	34	73.6	68
Region	Vojvodina	98.1	365	99.1	381	98.6	747
	Belgrade	97.7	244	97.1	206	97.4	450
	West	99.9	158	99.6	151	99.8	309
	Central	98.9	227	99.5	197	99.2	424
	East	98.7	131	97.7	122	98.2	253
	South-East	98.3	236	97.2	251	97.8	487
Type of settlement	Urban	98.3	738	98.5	669	98.4	1407
	Rural	98.7	623	98.3	639	98.5	1262
Age in the calendar year 2005	7	94.0	183	94.5	163	94.2	346
	8	99.7	143	98.6	137	99.1	280
	9	99.2	194	99.5	169	99.4	363
	10	99.5	164	99.4	187	99.5	352
	11	99.8	175	99.5	169	99.6	345
	12	99.5	174	99.1	165	99.3	339
	13	98.8	173	98.5	150	98.7	323
	14	97.6	155	98.1	168	97.8	322
Mother's education	Primary or none	95.6	298	95.6	345	95.6	642
	Secondary	99.1	844	99.5	745	99.3	1589
	University	99.8	219	99.0	219	99.4	438
Ethnicity of head of the household	Serbian	99.0	1149	99.1	1074	99.0	2223
	Hungarian	(100.0)	48	(100.0)	60	100.0	108
	Muslim\Bosnian	98.9	43	99.0	47	99.0	91
	Roma	79.2	42	76.5	38	77.9	80
	Other	100.0	78	98.5	89	99.2	167
Wealth index quintiles	Poorest	95.1	271	95.8	298	95.5	569
	Second	99.9	261	98.0	262	99.0	522
	Middle	99.7	278	99.8	243	99.8	521
	Fourth	98.3	282	99.5	252	98.9	533
	Richest	99.2	269	99.4	255	99.3	524
Total		98.5	1361	98.4	1309	98.4	2669

* MICS indicator 55; MDG indicator 6

Table ED.4
Secondary school net attendance ratio

Percentage of children of secondary school age attending secondary or higher school (NAR), Serbia, 2005

		Male		Female		Total	
		Net attendance ratio*	Number of children	Net attendance ratio*	Number of children	Net attendance ratio*	Number of children
Area	Serbia without Roma in Roma settlements	82.4	598	88.9	634	85.8	1232
	Roma in Roma settlements	14.1	17	5.9	15	10.2	32
Region	Vojvodina	81.7	187	86.7	181	84.2	368
	Belgrade	82.3	87	89.4	112	86.3	198
	West	85.8	78	91.3	60	88.2	137
	Central	79.8	88	90.8	114	86.0	202
	East	76.8	49	83.9	65	80.8	113
	South-East	76.4	126	80.8	118	78.5	244
Type of settlement	Urban	83.8	343	90.8	360	87.3	703
	Rural	76.5	271	82.2	289	79.5	561
Age in the calendar year 2005	15	90.8	155	93.9	191	92.5	346
	16	87.1	145	91.4	142	89.2	287
	17	86.4	146	87.7	165	87.1	312
	18	60.4	168	73.2	151	66.4	319
Mother's education	Primary or none	70.9	112	80.1	120	75.6	232
	Secondary	95.3	243	97.4	261	96.4	504
	University	(93.2)	70	(100.0)	73	96.7	143
	Mother not in household	81.6	41	70.4	66	74.7	107
Ethnicity of head of the household	Serbian	82.5	513	89.2	537	85.9	1050
	Hungarian	(*)	35	(*)	23	(84.0)	58
	Muslim\Bosnian	(73.5)	16	(*)	12	(74.7)	28
	Roma	12.8	17	16.7	18	14.8	35
	Other	(91.0)	34	87.3	60	88.6	93
Wealth index quintiles	Poorest	64.5	125	64.3	119	64.4	244
	Second	72.7	121	84.5	127	78.7	248
	Middle	85.7	124	93.4	163	90.1	287
	Fourth	90.4	138	92.5	111	91.3	248
	Richest	89.5	107	97.5	129	93.9	236
Total		80.6	615	87.0	649	83.8	1264

* MICS indicator 56

Table ED.4w

Secondary school age children attending primary school

Percentage of children of secondary school age attending primary school, Serbia, 2005

		Male		Female		Total	
		Percent attending primary school	Number of children	Percent attending primary school	Number of children	Percent attending primary school	Number of children
Area	Serbia without Roma in Roma settlements	1.6	598	1.2	634	1.4	1232
	Roma in Roma settlements	8.5	17	8.6	15	8.5	32
Region	Vojvodina	1.9	187	.2	181	1.1	368
	Belgrade	2.2	87	1.7	112	1.9	198
	West	3.7	78	3.2	60	3.5	137
	Central	.1	88	1.6	114	.9	202
	East	4.0	49	.1	65	1.8	113
	South-East	.3	126	2.2	118	1.3	244
Type of settlement	Urban	1.8	343	.4	360	1.1	703
	Rural	1.7	271	2.5	289	2.1	561
Age in the calendar year 2005	15	3.3	155	3.6	191	3.5	346
	16	1.5	145	1.3	142	1.4	287
	17	1.2	146	.0	165	.6	312
	18	1.0	168	–	151	.5	319
Mother's education	Primary or none	2.3	112	3.6	120	3.0	232
	Secondary	.6	243	1.6	261	1.1	504
	University	4.8	70	–	73	2.3	143
	Mother not in household	4.0	41	.3	66	1.7	107
Ethnicity of head of the household	Serbian	1.8	513	1.2	537	1.5	1050
	Hungarian	–	35	–	23	–	58
	Muslim\Bosnian	.4	16	4.3	12	2.1	28
	Roma	7.6	17	6.7	18	7.1	35
	Other	.0	34	1.1	60	.7	93
Wealth index quintiles	Poorest	1.8	125	3.2	119	2.5	244
	Second	2.8	121	1.5	127	2.1	248
	Middle	.1	124	.9	163	.6	287
	Fourth	1.2	138	1.4	111	1.3	248
	Richest	3.1	107	–	129	1.4	236
Total		1.8	615	1.3	649	1.5	1264

Table ED.5
Children reaching grade 5

Percentage of children entering first grade of primary school
who eventually reach grade 5, Serbia, 2005

		Percent attending 2 nd grade who were in 1 st grade last year	Percent attending 3 rd grade who were in 2 nd grade last year	Percent attending 4 th grade who were in 3 rd grade last year	Percent attending 5 th grade who were in 4 th grade last year	Percent who reach grade 5 of those who enter 1 st grade*
Area	Serbia without Roma in Roma settlements	100.0	100.0	100.0	99.8	99.8
	Roma in Roma settlements	99.6	100.0	99.1	98.6	97.3
Sex	Male	100.0	100.0	100.0	99.6	99.6
	Female	100.0	100.0	100.0	100.0	99.9
Region	Vojvodina	100.0	100.0	100.0	99.4	99.3
	Belgrade	100.0	100.0	100.0	100.0	100.0
	West	100.0	100.0	100.0	100.0	100.0
	Central	100.0	100.0	100.0	100.0	100.0
	East	100.0	100.0	100.0	99.9	99.9
	South-East	100.0	100.0	99.9	100.0	99.9
Type of settlement	Urban	100.0	100.0	100.0	99.7	99.6
	Rural	100.0	100.0	100.0	100.0	100.0
Mother's education	Primary or none	100.0	100.0	99.9	99.9	99.7
	Secondary	100.0	100.0	100.0	99.7	99.7
	University	100.0	100.0	100.0	100.0	100.0
	Mother not in household	.	.	.	100.0	.
Ethnicity of head of the household	Serbian	100.0	100.0	100.0	99.8	99.8
	Hungarian	100.0	100.0	100.0	100.0	100.0
	Muslim\Bosnian	100.0	100.0	100.0	100.0	100.0
	Roma	99.7	100.0	99.3	98.7	97.7
	Other	100.0	100.0	100.0	100.0	100.0
Wealth index quintiles	Poorest	100.0	100.0	99.9	99.0	98.9
	Second	100.0	100.0	100.0	100.0	100.0
	Middle	100.0	100.0	100.0	100.0	100.0
	Fourth	100.0	100.0	100.0	100.0	100.0
	Richest	100.0	100.0	100.0	100.0	100.0
Total		100.0	100.0	100.0	99.8	99.8

* MICS Indicator 57 ; MDG Indicator 7

Table ED.6

Primary school completion and transition to secondary education

Primary school completion rate and transition rate to secondary education, Serbia, 2005

		Net primary school completion rate*	Number of children of primary school completion age	Transition rate to secondary education**	Number of children who were in the last grade of primary school the previous year
Area	Serbia without Roma in Roma settlements	92.1	315	97.2	351
	Roma in Roma settlements	28.1	7	(77.4)	2
Sex	Male	90.7	155	97.5	158
	Female	90.7	168	96.7	195
Region	Vojvodina	91.4	102	96.4	107
	Belgrade	85.7	62	(97.4)	59
	West	(96.1)	38	(98.7)	44
	Central	93.4	54	(98.8)	40
	East	(83.1)	21	(*)	31
	South-East	91.3	46	94.6	72
Type of settlement	Urban	91.2	190	97.9	204
	Rural	89.9	132	96.0	149
Mother's education	Primary or none	73.1	80	90.3	85
	Secondary	96.1	184	100.0	184
	University	(97.5)	58	(100.0)	59
	Mother not in household	—	0	(*)	23
Ethnicity of head of the household	Serbian	92.1	262	97.8	293
	Hungarian	(*)	23	(*)	15
	Muslim\Bosnian	(*)	7	(*)	8
	Roma	22.7	7	(87.4)	3
	Other	(*)	24	(94.2)	34
Wealth index quintiles	Poorest	77.7	71	87.3	65
	Second	91.8	51	100.0	67
	Middle	94.6	69	99.5	91
	Fourth	95.2	64	97.8	70
	Richest	(95.1)	67	(100.0)	59
Total		90.7	322	97.1	353

* MICS indicator 59; MDG indicator 7b

** MICS indicator 58

Table ED.7
Education gender parity

Ratio of girls to boys attending primary education and ratio of girls to boys attending secondary education, Serbia, 2005

		Primary school net attendance ratio (NAR), girls	Primary school net attendance ratio (NAR), boys	Gender parity index (GPI) for primary school NAR*	Secondary school net attendance ratio (NAR), girls	Secondary school net attendance ratio (NAR), boys	Gender parity index (GPI) for secondary school NAR*
Area	Serbia without Roma in Roma settlements	99.1	99.0	1.00	88.9	82.4	1.08
	Roma in Roma settlements	71.1	76.0	.94	5.9	14.1	.42
Sex	Male	—	98.5	—	—	80.6	—
	Female	98.4	—	—	87.0	—	—
Region	Vojvodina	99.1	98.1	1.01	86.7	81.7	1.06
	Belgrade	97.1	97.7	.99	89.4	82.3	1.09
	West	99.6	99.9	1.00	91.3	85.8	1.06
	Central	99.5	98.9	1.01	90.8	79.8	1.14
	East	97.7	98.7	.99	83.9	76.8	1.09
	South-East	97.2	98.3	.99	80.8	76.4	1.06
Type of settlement	Urban	98.5	98.3	1.00	90.8	83.8	1.08
	Rural	98.3	98.7	1.00	82.2	76.5	1.07
Mother's education	Primary or none	95.6	95.6	1.00	80.1	70.9	1.13
	Secondary	99.5	99.1	1.00	97.4	95.3	1.02
	University	99.0	99.8	.99	100.0	93.2	1.07
	Mother not in household	—	—	—	70.4	81.6	.86
Ethnicity of head of the household	Serbian	99.1	99.0	1.00	89.2	82.5	1.08
	Hungarian	100.0	100.0	1.00	93.2	78.1	1.19
	Muslim\Bosnian	99.0	98.9	1.00	76.4	73.5	1.04
	Roma	76.5	79.2	.97	16.7	12.8	1.30
	Other	98.5	100.0	.98	87.3	91.0	.96
Wealth index quintiles	Poorest	95.8	95.1	1.01	64.3	64.5	1.00
	Second	98.0	99.9	.98	84.5	72.7	1.16
	Middle	99.8	99.7	1.00	93.4	85.7	1.09
	Fourth	99.5	98.3	1.01	92.5	90.4	1.02
	Richest	99.4	99.2	1.00	97.5	89.5	1.09
Total		98.4	98.5	1.00	87.0	80.6	1.08

* MICS indicator 61; MDG indicator 9

Table ED.8 Adult literacy

Percentage of women aged 15–24
that are literate, Serbia, 2005

		Percentage literate*	Percentage not known	Number of women aged 15–24 years
Area	Serbia without Roma from Roma settlements	96.4	2.8	1881
	Roma in Roma settlements	52.4	1.2	35
Region	Vojvodina	95.8	2.2	550
	Belgrade	95.9	2.5	387
	West	98.0	1.2	211
	Central	96.7	2.9	325
	East	93.7	5.4	171
	South-East	92.6	3.9	272
Type of settlement	Urban	94.5	3.2	1056
	Rural	96.8	2.3	860
Education	Primary or none	78.1	13.8	387
	Secondary	100.0	–	1143
	University	100.0	–	386
Age	15–19	92.9	5.0	938
	20–24	98.1	.7	978
Ethnicity of head of the household	Serbian	96.6	2.6	1636
	Hungarian	95.2	4.8	80
	Muslim\Bosnian	98.2	–	45
	Roma	59.6	4.9	46
	Other	94.8	4.1	109
Wealth index quintiles	Poorest	90.5	3.7	298
	Second	97.1	1.6	393
	Middle	97.0	2.4	447
	Fourth	95.8	3.7	388
	Richest	95.9	2.9	390
Total		95.6	2.8	1916

* MICS indicator 60; MDG indicator 8

Table CP.1 Birth registration

Percentage distribution of children aged 0–59 months according to whether birth is registered and reasons for non-registration, Serbia, 2005

Area	Birth is registered*	Don't know if birth is registered	Number of children aged 0–59 months	Birth is not registered because			Total	Number of children 0–59 months without birth registration
				Costs too much	Must travel too far	Doesn't know where to register		
Serbia without Roma in Roma settlements	99.0	.3	3647	–	(*)	(*)	(*)	23
Roma in Roma settlements	95.4	.7	130	(*)	(*)	(*)	(*)	5
Sex								
Male	99.0	.4	1917	(*)	(*)	(*)	(*)	12
Female	98.8	.3	1860	(*)	(*)	(*)	(*)	16
Region								
Vojvodina	99.2	.0	1052	–	(*)	(*)	(*)	8
Belgrade	97.8	1.1	671	(*)	(*)	(*)	(*)	7
West	99.4	.6	427	–	–	–	–	0
Central	99.8	.2	656	–	–	–	–	0
East	99.8	.0	337	–	–	–	(*)	1
South-East	97.8	.3	634	(*)	(*)	(*)	(*)	12
Type of settlement								
Urban	99.0	.4	2097	(*)	(*)	(*)	(*)	14
Rural	98.8	.3	1680	–	(*)	(*)	(*)	14
Age								
0–11 months	96.1	.3	654	(*)	(*)	(*)	(*)	24
12–23 months	99.5	.4	773	–	(*)	–	(*)	1
24–35 months	99.9	.0	802	–	(*)	(*)	(*)	1
36–47 months	99.4	.5	754	–	(*)	(*)	(*)	1
48–59 months	99.2	.5	795	(*)	(*)	(*)	(*)	2
Mother's education								
Primary or none	97.8	.6	818	(*)	(*)	(*)	(*)	13
Secondary	99.3	.3	2304	–	–	–	(*)	10
University	98.9	.4	656	–	(*)	(*)	(*)	5
Ethnicity of head of the household								
Serbian	99.1	.3	3086	–	(*)	(*)	(*)	18
Hungarian	98.7	–	111	–	–	–	(*)	1
Muslim/Bosnian	99.8	–	186	–	–	(*)	(*)	0
Roma	95.7	1.5	166	(*)	(*)	(*)	(*)	5
Other	97.9	.7	229	–	–	(*)	–	3
Wealth index quintiles								
Poorest	97.5	.6	656	(*)	(*)	(*)	(*)	12
Second	99.2	.2	742	–	(*)	(*)	(*)	5
Middle	99.1	.5	858	–	–	–	(*)	3
Fourth	99.5	.3	830	–	–	(*)	–	1
Richest	98.9	.2	690	–	–	–	(*)	6
Total	98.9	.4	3777	1.1	8.2	18.3	72.5	100.0
								28

* MICS indicator 62

Note: Figures for unregistered births are not shown in the table since there is a very low number of observations.

Table CP.2 Child labour

Percentage of children aged 5–14 who are involved
in child labour activities by type of work, Serbia, 2005

		Working outside household		Household chores for 28+ hours/week	Working for family business	Total child labour*	Number of children aged 5–14 years
		Paid work	Unpaid work				
Area	Serbia without Roma in Roma settlements	.2	3.1	.1	1.2	4.3	3306
	Roma in Roma settlements	1.9	3.7	.3	2.8	7.0	84
Sex	Male	.4	3.0	.0	1.4	4.5	1744
	Female	.2	3.1	.1	1.0	4.4	1646
Region	Vojvodina	.6	3.6	.0	.5	4.4	936
	Belgrade	.0	1.1	.0	1.1	2.3	606
	West	.5	3.4	.1	1.2	5.1	391
	Central	–	6.4	.0	.8	6.6	528
	East	.1	.3	.0	1.6	2.0	313
	South-East	.3	2.5	.2	2.5	5.5	616
Type of settlement	Urban	.3	2.8	.1	.4	3.3	1810
	Rural	.3	3.4	.0	2.1	5.7	1580
Age	5–11 years	.3	4.3	.0	1.6	6.0	2391
	12–14 years	.2	.0	.2	.3	.7	999
School participation	Yes	.2	3.2	.0	1.2	4.5	3134
	No	.8	1.7	.3	1.6	3.9	256
Mother's education	Primary or none	.9	2.4	.2	2.7	5.7	801
	Secondary	.1	3.2	–	.8	4.1	2024
	University	–	3.5	.0	.4	3.7	564
Ethnicity of head of the household	Serbian	.1	3.0	–	.9	3.9	2831
	Hungarian	1.3	6.3	–	–	7.6	127
	Muslim\Bosnian	1.5	6.0	–	.1	7.6	121
	Roma	2.7	2.8	.3	3.3	6.5	97
	Other	.8	.8	.3	5.1	6.2	213
Wealth index quintiles	Poorest	1.2	5.6	.2	2.1	8.4	688
	Second	.2	3.2	.0	2.1	5.5	657
	Middle	.0	2.5	–	.4	2.9	692
	Fourth	–	1.7	.1	.9	2.7	680
	Richest	.0	2.4	–	.5	2.6	673
Total		.3	3.1	.1	1.2	4.4	3390

* MICS indicator 71

Table CP.3
Labourer students and student labourers

Percentage of children aged 5–14 years who are labourer students and student labourers, Serbia, 2005

		Percentage of children in child labour	Percentage of children attending school	Number of children aged 5–14	Percentage of child labourers who are also attending school*	Number of child labourers aged 5–14	Percentage of students who are also involved in child labour**	Number of students aged 5–14
Area	Serbia without Roma in Roma settlements	4.3	93.1	3306	94.8	144	4.4	3078
	Roma in Roma settlements	7.0	67.3	84	58.0	6	6.1	56
Sex	Male	4.5	91.7	1744	91.1	78	4.4	1600
	Female	4.4	93.2	1646	95.8	72	4.5	1534
Region	Vojvodina	4.4	94.0	936	95.4	41	4.5	880
	Belgrade	2.3	90.2	606	(81.2)	14	2.0	547
	West	5.1	94.3	391	(96.8)	20	5.2	369
	Central	6.6	91.7	528	(95.2)	35	6.9	484
	East	2.0	92.4	313	(*)	6	2.0	290
	South-East	5.5	91.8	616	91.7	34	5.5	565
Type of settlement	Urban	3.3	92.4	1810	92.0	60	3.3	1673
	Rural	5.7	92.5	1580	94.3	89	5.8	1461
Age	5–11 years	6.0	89.8	2391	94.5	143	6.3	2148
	12–14 years	.7	98.7	999	(70.3)	7	.5	986
Mother's education	Primary or none	5.7	88.4	801	88.4	46	5.7	708
	Secondary	4.1	93.6	2024	94.5	83	4.1	1895
	University	3.7	94.1	564	(*)	21	4.0	531
Ethnicity of head of the household	Serbian	3.9	93.1	2831	95.3	111	4.0	2636
	Hungarian	7.6	96.7	127	(*)	10	7.9	123
	Muslim\Bosnian	7.6	85.4	121	(*)	9	8.8	103
	Roma	6.5	71.2	97	54.1	6	5.0	69
	Other	6.2	94.9	213	(*)	13	5.7	202
Wealth index quintiles	Poorest	8.4	89.7	688	89.3	58	8.4	617
	Second	5.5	91.5	657	(96.9)	36	5.8	602
	Middle	2.9	91.6	692	(95.2)	20	3.0	634
	Fourth	2.7	96.0	680	(*)	18	2.8	652
	Richest	2.6	93.5	673	(*)	18	2.5	629
Total		4.4	92.5	3390	93.4	150	4.5	3134

* MICS indicator 72

** MICS indicator 73

Table CP.4 Child discipline

Percentage of children aged 2–14 according to method of disciplining the child, Serbia, 2005

Area	Percentage of children 2–14 years of age who experience							Mother /caretaker believes that the child needs to be physically punished	Number of children aged 2–14 years***
	Only non-violent discipline	Psychological punishment	Minor physical punishment	Severe physical punishment	Any psychological or physical punishment*	No discipline or punishment	Missing		
Serbia without Roma from Roma settlements	19.8	61.3	51.1	6.7	72.5	6.3	1.4	6.0	2665
Roma in Roma settlements	7.6	75.7	63.4	20.6	81.4	10.0	1.0	21.4	51
Sex									
Male	18.9	62.6	53.1	8.4	73.7	6.1	1.3	6.9	1397
Female	20.3	60.4	49.4	5.4	71.6	6.6	1.5	5.7	1319
Region									
Vojvodina	23.0	68.9	42.5	4.5	74.3	2.0	.7	7.4	757
Belgrade	27.4	49.6	45.1	4.6	60.8	9.2	2.7	5.6	524
West	18.8	61.0	58.9	6.8	74.3	5.9	1.0	8.5	296
Central	13.8	59.3	53.7	6.6	75.3	9.5	1.4	4.9	428
East	19.0	59.1	59.7	7.6	76.7	2.7	1.6	7.4	251
South-East	11.3	66.8	61.4	13.8	77.9	9.6	1.1	4.7	461
Urban	20.8	58.8	49.5	5.8	70.6	6.8	1.8	4.7	1524
Rural	18.0	65.1	53.6	8.5	75.4	5.8	.9	8.4	1193
Age									
2–4 years	18.2	59.6	63.4	6.5	75.6	5.7	.5	7.9	632
5–9 years	18.0	62.5	58.5	7.9	75.0	6.4	.6	6.1	1007
10–14 years	21.9	61.8	37.6	6.4	68.8	6.6	2.6	5.7	1078
Mother's education									
Primary or none	18.0	63.7	53.2	9.0	73.4	7.1	1.4	11.6	561
Secondary	18.6	62.6	53.4	7.1	74.2	5.9	1.3	5.4	1668
University	24.8	55.4	42.1	3.9	66.6	7.0	1.6	3.6	487
Ethnicity of head of the household									
Serbian	19.6	60.7	51.1	6.4	72.3	6.7	1.4	5.7	2322
Hungarian	23.5	66.9	38.9	2.4	71.5	3.4	1.7	4.6	98
Muslim\Bosnian	8.5	66.5	80.5	15.1	88.7	1.5	1.2	16.7	80
Roma	6.2	80.3	70.3	22.4	85.5	7.4	.8	20.5	62
Other	27.9	60.8	39.4	7.6	65.3	5.4	1.5	6.3	154
Wealth index quintiles									
Poorest	14.0	69.0	53.5	13.8	77.4	7.1	1.6	12.0	474
Second	17.1	64.2	56.7	5.9	77.4	5.1	.5	7.8	512
Middle	18.0	60.6	56.2	6.4	74.2	6.5	1.3	4.7	574
Fourth	20.2	61.1	48.8	5.4	72.1	6.1	1.6	4.5	583
Richest	27.5	54.5	42.5	4.4	63.7	6.9	1.9	3.9	574
Total	19.6	61.6	51.3	7.0	72.7	6.3	1.4	6.3	2716

* MICS indicator 74

** Table is based on children aged 2–14 randomly selected during fieldwork (one child selected per household, if any children in the age range) for whom the questions on child discipline were administered.

Table CP.5
Early marriage

Percentage of women aged 15–49 in marriage or union before their 15th birthday,
percentage of women aged 20–49 in marriage or union before their 18th birthday,
percentage of women aged 15–19 years currently married or in union, Serbia, 2005

		Percentage married before age 15*	Number of women aged 15–49 years	Percentage married before age 18*	Number of women aged 20–49 years	Percentage of women 15–19 years married /in union**	Number of women aged 15–19 years
Area	Serbia without Roma from Roma settlements	.6	7415	7.9	6498	5.0	918
	Roma in Roma settlements	12.4	101	45.9	81	40.9	20
Region	Vojvodina	.3	2080	7.4	1811	4.7	269
	Belgrade	.6	1554	4.3	1370	2.0	183
	West	.6	842	11.2	754	5.5	88
	Central	.8	1218	9.1	1057	4.1	161
	East	2.1	644	14.5	549	13.9	95
	South-East	1.0	1178	9.3	1037	9.3	141
Type of settlement	Urban	.4	4269	4.7	3756	3.1	513
	Rural	1.2	3247	13.3	2822	9.0	425
Age	15–19	.5	938	–	0	5.8	938
	20–24	.6	978	5.8	978	–	0
	25–29	.4	1161	6.9	1161	–	0
	30–34	1.1	1251	8.7	1251	–	0
	35–39	1.2	1069	9.5	1069	–	0
	40–44	.4	1064	8.1	1064	–	0
	45–49	.9	1056	10.9	1056	–	0
Education	Primary or none	2.9	1539	27.3	1270	11.4	269
	Secondary	.3	4439	5.1	3791	3.6	648
	University	–	1538	.6	1517	–	21
Ethnicity of head of the household	Serbian	.6	6550	7.7	5773	5.0	777
	Hungarian	–	277	10.2	235	(*)	42
	Muslim\Bosnian	.2	167	14.0	149	(1.7)	18
	Roma	12.0	125	44.3	100	38.3	25
	Other	.0	397	5.8	321	5.9	76
Wealth index quintiles	Poorest	2.5	1163	19.1	995	14.9	168
	Second	.6	1442	11.5	1253	7.4	189
	Middle	.7	1649	8.1	1418	3.3	230
	Fourth	.2	1567	4.4	1410	2.2	156
	Richest	.2	1695	2.6	1501	2.1	195
Total		.8	7516	8.4	6578	5.8	938

* MICS indicator 67

** MICS indicator 68

Table CP.6
Spousal age difference

Percentage distribution of currently married/in union women aged 15–19 and 20–24, according to the age difference with their husband or partner, Serbia, 2005

	Area	Percentage of currently married/in union women aged 15–19 whose husband or partner is					Number of women aged 15–19 years currently married/in union	Percentage of currently married/in union women aged 20–24 whose husband or partner is					Number of women aged 20–24 years currently married/in union		
		Total						Total							
		Younger	0–4 years older	5–9 years older	10+ years older*	Husband /partner's age unknown		Younger	0–4 years older	5–9 years older	10+ years older*	Husband /partner's age unknown			
	Serbia without Roma from Roma settlements	–	(17.9)	(52.7)	(29.4)	–	(100.0)	46	4.0	45.8	35.6	14.0	.6	100.0	315
	Roma in Roma settlements	4.7	62.8	21.7	8.7	2.1	100.0	8	13.1	55.2	25.1	5.1	1.4	100.0	11
Region	Vojvodina	.5	30.2	22.4	46.7	.2	100.0	13	5.4	51.6	32.6	10.4	.0	100.0	91
	Belgrade	(1.9)	(80.4)	(12.8)	(4.9)	–	(100.0)	4	8.6	44.4	31.6	15.3	–	100.0	43
	West	(*)	(*)	(*)	(*)	–	(*)	5	3.9	41.2	44.6	10.2	–	100.0	46
	Central	–	(*)	(*)	(*)	–	(*)	7	1.0	39.7	40.2	19.2	–	100.0	68
	East	(.9)	(10.0)	(50.7)	(38.1)	(.3)	(100.0)	13	4.9	46.4	25.5	19.1	4.1	100.0	34
Type of settlement	South-East	.4	16.7	80.8	1.3	.8	100.0	13	2.6	51.6	34.3	9.8	1.7	100.0	44
	Urban	2.0	48.9	27.7	21.0	.5	100.0	16	2.6	50.5	31.8	13.9	1.2	100.0	122
	Rural	.2	14.5	56.5	28.6	.2	100.0	38	5.3	43.6	37.3	13.6	.3	100.0	204
	15–19	.7	24.6	48.1	26.3	.3	100.0	54	–	–	–	–	–	–	0
	20–24	–	–	–	–	–	–	0	4.3	46.2	35.2	13.7	.7	100.0	326
Education	Primary or none	1.2	22.3	44.8	31.0	.5	100.0	31	5.7	35.5	34.5	22.5	1.8	100.0	84
	Secondary	–	(27.5)	(52.4)	(20.1)	–	(100.0)	23	4.2	48.3	35.5	11.7	.3	100.0	218
Ethnicity of head of the household	University	–	–	–	–	–	–	0	–	(*)	(*)	–	–	(*)	23
	Serbian	–	(19.8)	(56.4)	(23.9)	–	(100.0)	39	3.4	46.6	34.8	14.7	.5	100.0	270
	Hungarian	–	(*)	(*)	–	–	(*)	1	(*)	(*)	(*)	–	–	(*)	15
	Muslim\Bosnian	–	(*)	(*)	–	–	(*)	0	(.0)	(46.4)	(36.4)	(16.6)	(.6)	(100.0)	14
	Roma	4.1	51.4	36.7	6.0	1.8	100.0	9	13.8	56.6	25.9	3.3	.5	100.0	16
Wealth index quintiles	Other	–	–	–	(*)	–	(*)	4	–	(*)	(*)	(*)	(*)	(*)	11
	Poorest	1.4	20.4	47.4	30.1	.7	100.0	25	9.1	38.8	35.6	14.6	1.9	100.0	79
	Second	(.2)	(14.3)	(72.0)	(13.5)	–	(100.0)	14	4.0	39.9	39.1	17.0	–	100.0	75
	Middle	–	(*)	(*)	(*)	–	(*)	8	2.4	53.2	33.9	10.5	–	100.0	91
	Fourth	–	(*)	(*)	–	–	(*)	3	2.4	52.9	31.7	12.0	1.0	100.0	62
Total	Richest	–	(*)	–	(*)	–	(*)	4	–	(45.6)	(36.3)	(17.8)	(.2)	(100.0)	19
		.7	24.6	48.1	26.3	.3	100.0	54	4.3	46.2	35.2	13.7	.7	100.0	326

* MICS indicator 69

Table CP.7
Attitudes toward domestic violence

Percentage of women aged 15–49 who believe a husband is justified in beating his wife/partner under various circumstances, Serbia, 2005

		Percentage of women aged 15–49 who believe a husband is justified in beating his wife						Number of women aged 15–49
		When she goes out without telling him	When she neglects the children	When she argues with him	When she refuses sex with him	When she burns the food	For any of these reasons*	
Area	Serbia without Roma from Roma settlements	1.7	5.2	1.7	.9	.6	5.8	7415
	Roma in Roma settlements	19.9	29.9	19.6	14.1	10.5	35.5	101
Region	Vojvodina	1.1	2.5	1.1	.9	.7	3.0	2080
	Belgrade	.7	2.2	.9	.4	.5	2.5	1554
	West	2.1	10.8	2.7	1.5	1.3	11.7	842
	Central	2.1	7.7	1.7	.8	.8	8.2	1218
	East	1.6	2.6	1.2	.2	.1	3.1	644
	South-East	5.3	11.3	4.6	2.7	1.1	12.4	1178
Type of settlement	Urban	1.3	4.0	1.3	.8	.4	4.4	4269
	Rural	2.9	7.7	2.7	1.5	1.1	8.6	3247
Age	15–19	.9	4.5	.9	.7	.4	5.1	938
	20–24	2.0	5.7	1.6	.9	.7	6.7	978
	25–29	2.1	6.1	2.3	1.3	.8	6.6	1161
	30–34	1.5	4.6	1.6	1.1	.6	4.8	1251
	35–39	2.0	5.6	2.1	.7	.4	6.1	1069
	40–44	2.4	6.2	1.7	.8	.8	7.2	1064
	45–49	2.7	6.2	3.1	2.1	1.6	7.2	1056
Marital/Union status	Currently married/in union	2.6	7.0	2.7	1.4	.9	7.8	4844
	Formerly married/in union	1.6	4.2	.7	.6	.5	4.7	451
	Never married/in union	.7	2.8	.5	.5	.4	3.2	2221
Education	Primary or none	6.4	12.0	6.4	2.9	2.4	13.6	1539
	Secondary	1.0	5.0	.9	.7	.4	5.4	4439
	University	.5	.8	.3	.3	.1	1.1	1538
Ethnicity of head of the household	Serbian	1.2	4.4	1.2	.8	.5	4.8	6550
	Hungarian	1.2	1.7	2.1	.3	.7	4.0	277
	Muslim\Bosnian	11.5	36.0	11.3	6.1	4.1	37.9	167
	Roma	19.1	26.4	18.7	12.3	8.1	32.6	125
	Other	5.6	7.7	3.2	1.3	.9	8.6	397
Wealth index quintiles	Poorest	5.7	13.2	6.3	3.1	2.3	14.9	1163
	Second	2.7	7.6	2.4	1.4	1.1	8.5	1442
	Middle	1.8	5.5	1.3	1.1	.5	6.2	1649
	Fourth	.3	2.5	.6	.1	.0	2.7	1567
	Richest	.4	1.5	.3	.3	.3	1.5	1695
Total		2.0	5.6	1.9	1.1	.7	6.2	7516

* MICS indicator 100

Table CP.8
Child disability

Percentage of children aged 2–9 with disability reported by their mother or caretaker according to the type of disability, Serbia, 2005

Area	Percentage of children aged 2–9 years with reported disability											Number of children aged 2–9 years	Cannot name at least one object	Number of children aged 2 years
	Delay in sitting or standing or walking	Difficulty seeing, either in the day-time or at night	Appears to have difficulty hearing	No understanding of instructions	Difficulty in walking, moving, weakness or stiffness	Have fits, become rigid, lose consciousness	Not learning to do things like other children his/her age	Not speaking, cannot be understood in words	Appears mentally backward, dull, or slow	Percentage of children 2–9 years of age with at least one reported disability*	Number of children aged 2–9 years			
Serbia without Roma in Roma settlements	.7	1.7	.5	3.3	.6	.8	3.7	5.2	1.3	11.0	2559	3.3	2248	311
Roma in Roma settlements	1.5	4.0	1.2	9.4	1.9	2.4	5.2	8.4	4.6	23.0	69	4.6	60	9
Region														
Vojvodina	1.2	3.4	1.3	4.6	1.2	1.3	2.5	3.1	2.3	11.0	702	5.6	613	89
Belgrade	.4	.9	.3	3.1	.7	.7	3.0	4.9	1.2	10.4	499	3.8	439	60
West	–	1.7	–	4.6	–	1.3	2.6	4.2	.9	12.3	285	1.2	243	41
Central	–	.7	.1	.7	.1	.1	3.7	7.2	.7	9.7	418	2.8	360	58
East	.3	1.3	–	8.4	.3	.3	5.8	5.6	.7	15.5	247	1.1	224	23
South-East	1.4	1.3	.5	1.2	1.0	.9	6.0	7.6	1.3	11.3	477	2.4	427	49
Urban	.4	1.4	.3	3.5	.5	.3	2.7	3.6	.8	9.5	1425	3.0	1253	172
Rural	1.0	2.1	.8	3.4	.8	1.4	5.0	7.3	2.0	13.4	1203	3.6	1055	148
Age of child														
2–4	.4	.6	.2	3.4	.5	.3	3.3	4.5	1.0	10.0	929	5.7	610	320
5–6	.8	.9	.1	3.0	.6	1.1	4.2	5.8	1.2	10.6	716	2.2	716	–
7–9	.8	3.4	1.1	3.8	.9	1.1	3.8	5.6	1.8	13.0	982	2.6	982	–
Mother's education														
Primary or none	1.1	2.3	.4	4.9	1.1	1.8	4.5	6.7	2.7	15.4	577	5.1	505	73
Secondary	.7	1.5	.7	3.1	.6	.6	3.7	5.3	1.2	10.3	1597	3.0	1405	192
University	–	1.7	.1	2.7	.3	.5	3.1	3.5	.1	9.6	453	2.0	398	55
Ethnicity of head of the household														
Serbian	.6	1.7	.6	3.1	.6	.8	4.0	5.4	1.2	11.0	2177	3.5	1921	256
Hungarian	2.4	4.2	–	8.1	2.4	1.7	4.0	7.7	4.8	18.2	88	4.3	76	–
Muslim/Bosnian	.1	.1	–	1.3	.1	.4	.2	.5	1.1	3.5	110	1.3	91	19
Roma	1.2	3.3	1.0	8.8	1.5	2.0	3.8	6.4	3.3	18.9	82	3.7	70	12
Other	1.1	1.0	–	4.3	1.1	.3	2.6	5.0	.7	12.3	172	2.0	151	21
Wealth index quintiles														
Poorest	1.0	2.3	.5	4.6	1.1	1.7	6.1	9.6	2.3	17.1	470	3.7	420	50
Second	.7	2.5	.6	3.4	.7	1.1	3.0	4.8	1.5	10.8	536	4.0	468	69
Middle	.9	1.1	.7	3.7	.7	.3	4.7	5.8	1.7	12.0	567	3.7	490	77
Fourth	.5	1.1	.8	3.4	.5	.7	2.6	3.0	.8	9.0	548	2.0	478	70
Richest	.3	1.8	–	2.2	.4	.4	2.6	3.7	.6	8.2	507	3.1	453	54
Total	.7	1.7	.5	3.4	.7	.8	3.8	5.3	1.4	11.3	2628	3.3	2308	320

* MICS indicator 101

Table HA.1
Knowledge of preventing HIV transmission

Percentage of women aged 15–49 who know the main ways of preventing HIV transmission, Serbia, 2005

	Heard of AIDS	Percentage who know transmission can be prevented by			Knows all three ways	Knows at least one way	Doesn't know anyway	Number of women	
		Having only one faithful uninfected sexual partner	Using a condom every time	Abstaining from sex					
Area	Serbia without Roma from Roma settlements	98.1	67.2	86.3	50.5	36.3	91.8	8.2	7415
Region	Roma in Roma settlements	72.2	33.8	39.3	23.5	13.9	49.5	50.5	101
	Vojvodina	98.9	73.0	90.4	50.4	38.3	95.4	4.6	2080
	Belgrade	98.9	71.0	91.0	54.4	38.6	96.0	4.0	1554
	West	98.5	73.8	87.0	60.0	47.1	93.1	6.9	842
	Central	99.3	55.4	79.4	59.1	40.1	84.0	16.0	1218
Type of settlement	East	97.9	66.7	84.1	42.8	31.8	89.9	10.1	644
	South-East	91.9	56.6	76.6	31.7	18.7	84.3	15.7	1178
	Urban	98.2	71.0	90.5	51.7	38.5	94.8	5.2	4269
	Rural	97.1	61.1	79.3	48.1	32.7	86.4	13.6	3247
	Age	15–19	97.1	65.5	86.7	53.8	37.9	91.3	8.7
Age	20–24	99.0	69.8	88.4	51.5	39.5	94.1	5.9	978
	25–29	99.2	69.8	88.0	50.2	37.7	92.7	7.3	1161
	30–34	97.8	68.3	86.5	48.5	35.3	92.2	7.8	1251
	35–39	97.5	68.9	86.8	49.3	36.2	92.0	8.0	1069
	40–44	96.9	63.7	82.3	48.6	32.4	88.0	12.0	1064
Education	45–49	96.5	60.5	80.7	49.8	33.3	87.9	12.1	1056
	Primary or none	90.6	50.1	67.3	45.2	29.0	76.1	23.9	1539
	Secondary	99.5	70.3	89.4	50.7	37.0	94.3	5.7	4439
	University	99.8	73.1	93.4	53.4	39.9	97.4	2.6	1538
	Ethnicity of head of the household	98.6	67.5	87.0	50.0	36.1	92.1	7.9	6550
Wealth index quintiles	Hungarian	99.7	72.0	91.3	56.6	40.8	97.9	2.1	277
	Muslim\Bosnian	97.9	73.1	83.1	61.7	48.6	92.1	7.9	167
	Roma	79.5	40.0	49.6	35.3	21.8	60.1	39.9	125
	Other	87.3	55.9	72.9	47.4	30.0	81.5	18.5	397
	Poorest	94.0	53.2	69.1	46.5	30.4	77.6	22.4	1163
Total	Second	96.3	64.0	82.9	51.0	35.9	89.4	10.6	1442
	Middle	98.1	66.4	87.5	52.4	36.3	93.1	6.9	1649
	Fourth	99.0	72.0	90.3	46.1	35.1	94.5	5.5	1567
	Richest	100.0	73.7	93.3	53.4	40.4	97.1	2.9	1695
		97.7	66.7	85.7	50.1	36.0	91.2	8.8	7516

Table HA.2 Identifying misconceptions about HIV/AIDS

Percentage of women aged 15–49 who know the main ways of preventing HIV transmission, Serbia, 2005

		Percentage who know that			Reject two most common misconceptions and know a healthy-looking person can be infected	HIV cannot be transmitted by supernatural means	HIV can be transmitted by sharing needles	Number of women
		HIV cannot be transmitted by sharing food	HIV cannot be transmitted by mosquito bites	A healthy looking person can be infected				
Area	Serbia without Roma from Roma settlements	79.2	67.1	77.0	51.7	90.4	93.2	7415
	Roma in Roma settlements	28.0	27.6	34.2	10.1	43.9	57.9	101
Region	Vojvodina	81.7	70.7	84.1	57.9	90.5	93.7	2080
	Belgrade	85.0	79.1	77.6	61.8	95.2	96.7	1554
	West	77.2	65.2	82.2	53.5	85.5	94.3	842
	Central	72.3	54.9	73.6	42.4	88.0	91.1	1218
	East	78.3	68.6	56.1	36.1	92.8	92.5	644
	South-East	72.0	54.5	71.3	40.6	84.4	86.4	1178
Type of settlement	Urban	84.1	72.8	81.1	58.6	93.5	95.1	4269
	Rural	71.3	58.3	70.3	41.3	84.8	89.6	3247
Age	15–19	82.2	72.4	79.5	58.4	89.2	93.6	938
	20–24	83.0	70.8	82.5	58.3	92.3	95.3	978
	25–29	80.5	69.3	80.9	54.1	91.1	94.3	1161
	30–34	80.2	67.0	78.9	52.8	91.6	92.8	1251
	35–39	78.9	65.7	72.7	48.8	90.4	91.9	1069
	40–44	75.1	62.6	72.6	45.6	89.1	91.3	1064
	45–49	70.0	58.6	68.0	40.6	84.1	89.9	1056
Education	Primary or none	53.9	48.3	55.0	27.8	70.2	79.2	1539
	Secondary	82.7	67.6	79.2	51.9	93.5	95.5	4439
	University	91.1	81.7	90.0	72.3	98.4	98.3	1538
Ethnicity of head of the household	Serbian	80.3	67.4	77.0	52.1	91.3	93.8	6550
	Hungarian	84.6	65.4	89.7	57.5	92.0	94.4	277
	Muslim\Bosnian	58.3	60.5	71.6	35.4	76.0	92.6	167
	Roma	37.5	31.2	37.0	11.6	53.1	64.8	125
	Other	67.4	66.6	73.2	49.0	79.1	83.2	397
Wealth index quintiles	Poorest	56.9	45.3	57.0	26.4	75.2	81.2	1163
	Second	72.6	59.8	71.7	41.9	85.0	91.2	1442
	Middle	79.5	66.5	79.5	51.2	91.1	93.8	1649
	Fourth	87.9	73.5	82.8	59.3	94.8	95.5	1567
	Richest	88.9	80.4	85.1	68.3	97.7	98.3	1695
Total		78.5	66.5	76.5	51.1	89.7	92.7	7516

Table HA.3
Comprehensive knowledge
of HIV/AIDS transmission

Percentage of women aged 15–49 who have comprehensive knowledge of HIV/AIDS transmission, Serbia, 2005

		Knows 2 ways to prevent HIV transmission	Correctly identify 3 misconceptions about HIV transmission	Have comprehensive knowledge (identify 2 prevention methods and 3 misconceptions)*	Number of women
Area	Serbia without Roma from Roma settlements	63.4	51.7	37.8	7415
	Roma in Roma settlements	25.6	10.1	5.4	101
Region	Vojvodina	69.5	57.9	45.2	2080
	Belgrade	67.4	61.8	44.4	1554
	West	69.9	53.5	45.8	842
	Central	52.8	42.4	26.9	1218
	East	62.3	36.1	28.5	644
	South-East	50.9	40.6	24.2	1178
Type of settlement	Urban	67.8	58.6	43.6	4269
	Rural	56.3	41.3	29.3	3247
Age	15–19	63.3	58.4	43.0	938
	20–24	64.9	58.3	41.6	978
	15–24	64.1	58.4	42.3	1916
	25–29	66.4	54.1	39.9	1161
	30–34	64.6	52.8	39.1	1251
	35–39	65.5	48.8	37.2	1069
	40–44	59.2	45.6	32.8	1064
	45–49	55.6	40.6	28.7	1056
Education	Primary or none	44.9	27.8	19.1	1539
	Secondary	66.6	51.9	38.4	4439
	University	69.9	72.3	53.0	1538
Ethnicity of head of the household	Serbian	63.9	52.1	38.5	6550
	Hungarian	67.8	57.5	39.1	277
	Muslim\Bosnian	66.6	35.4	30.7	167
	Roma	32.6	11.6	6.6	125
	Other	50.0	49.0	30.8	397
Wealth index quintiles	Poorest	48.1	26.4	18.6	1163
	Second	59.6	41.9	30.7	1442
	Middle	62.7	51.2	36.8	1649
	Fourth	68.7	59.3	44.2	1567
	Richest	70.6	68.3	50.3	1695
Total		62.9	51.1	37.4	7516

* MICS Indicator 82; MDG Indicator 19b

Table HA.4 Knowledge of mother-to-child HIV transmission

Percentage of women aged 15–49 who correctly identify means of HIV transmission from mother to child, Serbia, 2005

		Know HIV can be transmitted from mother to child	Percentage who know HIV can be transmitted				Did not know any specific way	Number of women
			During pregnancy	At delivery	Through breastmilk	All three ways*		
Area	Serbia without Roma from Roma settlements	87.3	85.5	74.2	62.6	57.2	10.8	7415
	Roma in Roma settlements	50.1	49.4	45.3	45.2	42.0	22.1	101
Region	Vojvodina	90.7	89.3	78.5	56.8	53.7	8.2	2080
	Belgrade	88.4	85.8	68.4	57.9	50.0	10.5	1554
	West	87.8	86.5	83.1	76.5	73.8	10.7	842
	Central	81.3	79.0	70.6	62.5	57.4	18.0	1218
	East	87.1	85.8	72.9	60.6	52.5	10.9	644
	South-East	82.8	81.2	70.1	68.8	62.3	9.1	1178
	Type of settlement	Urban	89.8	87.7	75.6	63.2	57.0	8.4
Rural		82.9	81.6	71.5	61.3	57.0	14.2	3247
Age	15–19	83.1	82.0	69.7	63.5	57.6	14.1	938
	20–24	87.9	85.3	73.9	61.5	56.0	11.1	978
	25–29	89.2	87.2	76.5	63.4	58.6	10.0	1161
	30–34	87.2	85.0	74.4	63.2	57.7	10.6	1251
	35–39	88.7	86.9	74.8	60.9	55.3	8.8	1069
	40–44	86.3	84.7	74.1	62.8	57.5	10.6	1064
	45–49	84.8	83.5	72.6	61.1	56.1	11.7	1056
Education	Primary or none	69.8	68.6	60.2	53.8	49.6	20.8	1539
	Secondary	89.9	88.1	75.4	63.4	57.7	9.5	4439
	University	94.8	92.7	82.9	68.0	62.4	5.1	1538
Ethnicity of head of the household	Serbian	87.6	86.0	74.8	62.5	57.4	11.0	6550
	Hungarian	93.2	92.2	78.6	67.8	62.4	6.6	277
	Muslim\Bosnian	80.6	77.0	63.9	67.3	56.8	17.4	167
	Roma	56.5	54.0	45.1	44.0	39.9	23.0	125
	Other	80.9	77.1	68.7	59.9	52.9	6.4	397
Wealth index quintiles	Poorest	74.5	73.4	66.2	58.3	54.6	19.5	1163
	Second	83.6	82.3	72.3	62.9	58.4	12.7	1442
	Middle	87.6	85.9	72.8	62.8	57.2	10.4	1649
	Fourth	91.7	89.9	77.7	62.7	57.6	7.3	1567
	Richest	92.6	90.0	77.9	63.9	56.8	7.3	1695
Total		86.8	85.0	73.8	62.4	57.0	10.9	7516

* MICS indicator 89

Table HA.5
Attitudes towards people living with HIV/AIDS

Percentage of women aged 15–49 who have heard of AIDS who express
a discriminatory attitude towards people living with HIV/AIDS, Serbia, 2005

		Percentage of women who						Number of women who have heard of AIDS
		Would not care for a family member who was sick with AIDS	If a family member had HIV would want to keep it a secret	Believe that a female teacher with HIV should not be allowed to work	Would not buy food from a person with HIV/AIDS	Agree with at least one discriminatory statement	Agree with none of the discriminatory statements*	
Area	Serbia without Roma from Roma settlements	2.2	24.5	36.5	50.0	63.3	36.7	7272
	Roma in Roma settlements	6.6	21.4	70.8	77.2	84.5	15.5	73
Region	Vojvodina	3.0	27.4	30.8	41.3	58.0	42.0	2057
	Belgrade	1.0	21.3	29.2	41.7	54.5	45.5	1536
	West	1.6	21.8	46.8	57.0	66.8	33.2	829
	Central	3.0	24.2	37.1	51.6	64.5	35.5	1209
	East	.8	25.6	43.0	61.5	75.2	24.8	631
	South-East	3.1	24.7	47.7	66.3	76.6	23.4	1083
Type of settlement	Urban	1.8	24.1	31.4	45.1	58.2	41.8	4191
	Rural	2.9	24.8	44.0	57.3	70.6	29.4	3154
Age	15–19	1.5	31.6	30.9	46.3	63.3	36.7	911
	20–24	2.6	27.1	32.6	45.0	61.2	38.8	968
	25–29	2.3	23.8	37.9	49.1	64.0	36.0	1151
	30–34	2.6	22.0	34.2	47.7	61.0	39.0	1223
	35–39	2.7	22.1	37.4	50.5	63.4	36.6	1042
	40–44	1.8	22.4	40.4	55.2	64.7	35.3	1031
	45–49	2.2	23.5	44.1	58.3	67.6	32.4	1019
Education	Primary or none	3.4	27.8	52.8	62.7	75.0	25.0	1395
	Secondary	2.2	24.1	36.5	51.0	64.2	35.8	4414
	University	1.5	22.4	23.3	37.0	51.4	48.6	1535
Ethnicity of head of the household	Serbian	2.1	23.1	36.1	49.6	62.4	37.6	6459
	Hungarian	2.1	46.0	29.4	48.8	71.3	28.7	276
	Muslim\Bosnian	2.6	30.8	57.6	73.1	81.9	18.1	163
	Roma	7.9	20.6	65.9	70.7	78.9	21.1	99
	Other	3.2	29.6	39.3	47.3	65.1	34.9	346
Wealth index quintiles	Poorest	2.5	24.0	50.0	62.4	72.8	27.2	1093
	Second	2.7	24.4	42.1	56.1	68.8	31.2	1390
	Middle	2.8	27.3	39.2	52.2	66.8	33.2	1616
	Fourth	2.1	24.1	30.8	44.8	58.8	41.2	1551
	Richest	1.3	22.3	27.3	40.9	54.5	45.5	1695
Total		2.3	24.4	36.8	50.3	63.5	36.5	7345

* MICS Indicator 86

Table HA.6

Knowledge of a facility for HIV testing

Percentage of women aged 15–49 who know where to get an HIV test, percentage of women who have been tested and, of those tested the percentage who have been told the result, Serbia, 2005

		Know a place to get tested*	Have been tested**	Number of women	If tested, have been told result	Number of women who have been tested for HIV
Area	Serbia without Roma from Roma settlements	70.0	7.1	7415	83.8	528
	Roma in Roma settlements	21.4	1.2	101	(*)	1
Region	Vojvodina	65.1	3.7	2080	89.5	77
	Belgrade	85.8	13.7	1554	81.1	212
	West	66.6	5.4	842	(72.1)	45
	Central	68.4	3.0	1218	(87.1)	37
	East	80.8	17.1	644	87.8	110
	South-East	52.0	4.1	1178	(84.9)	48
Type of settlement	Urban	77.2	8.9	4269	87.5	379
	Rural	59.0	4.6	3247	74.3	151
Age	15–19	66.0	2.2	938	(*)	21
	20–24	73.0	6.8	978	80.0	67
	25–29	73.2	8.4	1161	82.9	98
	30–34	71.2	9.9	1251	88.2	124
	35–39	69.3	9.2	1069	87.1	98
	40–44	68.4	5.9	1064	(85.1)	62
	45–49	63.6	5.7	1056	(79.6)	60
Education	Primary or none	42.6	3.2	1539	78.5	50
	Secondary	71.8	7.1	4439	81.2	314
	University	89.2	10.8	1538	90.2	166
Ethnicity of head of the household	Serbian	72.2	7.6	6550	83.9	501
	Hungarian	60.1	1.6	277	(*)	4
	Muslim\Bosnian	40.3	1.5	167	(*)	3
	Roma	25.7	4.1	125	(91.5)	5
	Other	55.2	4.1	397	(*)	16
Wealth index quintiles	Poorest	45.9	3.7	1163	71.8	43
	Second	59.2	3.6	1442	74.6	51
	Middle	66.7	6.3	1649	77.7	103
	Fourth	78.4	9.2	1567	82.5	144
	Richest	88.4	11.1	1695	93.2	188
Total		69.4	7.0	7516	83.7	529

* MICS Indicator 87

** MICS Indicator 88

Table HA.7
HIV testing and counselling
covered during antenatal care

Percentage of women aged 15–49 who gave birth in the two years preceding the survey who were offered HIV testing and counselling with their antenatal care, Serbia, 2005

		Percentage of women who				Number of women who gave birth in two years preceding the survey
		Received antenatal care from a health professional for last pregnancy	Were provided information about HIV prevention during ANC visit*	Were tested for HIV during ANC visit	Received results of HIV test during ANC visit**	
Area	Serbia without Roma from Roma settlements	98.5	14.6	10.2	9.2	642
	Roma in Roma settlements	85.8	2.4	2.0	1.5	20
Region	Vojvodina	99.0	9.5	4.2	4.2	180
	Belgrade	97.5	19.3	12.8	12.2	98
	West	99.3	15.1	10.5	8.9	84
	Central	96.0	14.9	8.1	7.1	122
	East	98.4	32.1	35.3	32.1	62
	South-East	98.6	6.4	4.5	3.3	115
Type of settlement	Urban	97.9	15.2	10.7	10.0	350
	Rural	98.4	13.3	9.1	7.8	312
Age	15–19	95.4	8.9	15.9	9.5	22
	20–24	97.5	15.4	10.6	9.8	167
	25–29	98.7	13.6	8.7	7.8	235
	30–34	98.6	16.4	11.2	10.0	163
	35–49	97.7	10.9	8.1	8.1	74
Education	Primary or none	94.2	10.3	7.4	6.8	144
	Secondary	99.1	13.9	9.5	8.1	403
	University	100.0	20.6	14.7	14.7	114
Ethnicity of head of the household	Serbian	99.0	16.4	11.3	10.2	538
	Hungarian	(100.0)	(6.5)	(3.2)	(3.2)	21
	Muslim\Bosnian	91.0	.2	1.7	–	36
	Roma	87.9	4.2	6.7	6.6	27
	Other	98.5	8.6	5.1	5.1	39
Wealth index quintiles	Poorest	96.4	11.7	8.7	7.0	127
	Second	98.0	12.3	6.7	5.7	123
	Middle	98.7	14.9	10.2	8.9	157
	Fourth	97.8	15.0	11.8	11.3	139
	Richest	100.0	17.4	12.5	11.9	116
Total		98.2	14.3	10.0	8.9	662

* MICS indicator 90

** MICS indicator 91

Table HA.8
Sexual behaviour that increases risk of HIV infection

Percentage of young women aged 15–19 who had sex before age 15, percentage of young women aged 20–24 who had sex before age 18, and percentage of young women aged 15–24, who had sex with a man 10 or more years older, Serbia, 2005

		Percentage of women aged 15–19 who had sex before age 15*	Number of women aged 15–19 years	Percentage of women aged 20–24 who had sex before age 18	Number of women aged 20–24 years	Percentage who had sex in the 12 months preceding the survey with a man 10 or more years older**	Number of women who had sex in the 12 months preceding the survey
Area	Serbia without Roma from Roma settlements	.8	918	18.6	963	7.4	879
	Roma in Roma settlements	16.0	20	50.8	15	6.0	21
Region	Vojvodina	1.3	269	26.5	281	6.4	283
	Belgrade	1.4	183	23.3	204	5.0	196
	West	.9	88	13.2	123	9.4	95
	Central	.4	161	9.8	164	9.5	130
	East	.4	95	20.2	76	13.8	79
	South-East	1.8	141	13.8	131	5.3	117
Type of settlement	Urban	.9	513	18.2	543	6.2	492
	Rural	1.4	425	20.3	435	8.7	408
Age	15–19	1.1	938	na	0	10.6	190
	20–24	na	0	19.2	978	6.5	709
Education	Primary or none	2.7	269	41.8	118	20.2	138
	Secondary	.5	648	17.3	495	6.2	505
	University	–	21	14.3	365	2.8	256
Ethnicity of head of the household	Serbian	1.0	777	16.4	859	7.0	773
	Hungarian	–	42	(38.7)	37	(8.1)	41
	Muslim\Bosnian	(.4)	18	(16.9)	28	(14.0)	16
	Roma	11.7	25	61.9	21	4.1	28
	Other	.1	76	(42.7)	34	(12.5)	41
Wealth index quintiles	Poorest	2.2	168	26.8	130	12.1	127
	Second	.3	189	14.9	204	8.2	179
	Middle	1.0	230	20.1	217	6.1	200
	Fourth	1.3	156	17.4	231	7.3	206
	Richest	1.0	195	19.5	196	4.9	188
Total		1.1	938	19.2	978	7.4	900

* MICS indicator 84

** MICS indicator 92

Na Not applicable

Table HA.9

Condom use at last high-risk sexual encounter

Percentage of young women aged 15–24 who had high risk sex in the previous year and who used a condom at last high risk sex, Serbia, 2005

Area	Ever had sex	Had sex in the last 12 months	Had sex with more than one partner in the last 12 months	Number of women aged 15–24	Percent who had sex with non-marital, non-cohabiting partner*	Number of women aged 15–24 who had sex in last 12 months	Percent who used a condom at last sex with a non-marital, non-cohabiting partner**	Number of women aged 15–24 years who had sex in last 12 months with a non-marital, non-cohabiting partner
Serbia without Roma from Roma settlements	52.2	46.7	2.4	1881	62.1	879	74.6	545
Region								
Roma in Roma settlements	65.7	60.0	2.6	35	7.6	21	(22.0)	2
Vojvodina	59.8	51.4	4.4	550	67.4	283	67.8	191
Belgrade	57.1	50.6	1.8	387	78.8	196	87.5	154
West	47.8	45.0	2.4	211	47.0	95	(85.9)	45
Central	44.3	40.0	.6	325	47.7	130	(71.4)	62
East	51.0	46.3	2.5	171	43.5	79	(*)	34
South-East	45.6	42.9	1.6	272	51.9	117	(61.8)	61
Type of settlement								
Urban	52.6	46.6	3.2	1056	73.3	492	73.1	361
Rural	52.4	47.4	1.4	860	45.6	408	77.1	186
Age								
15–19	23.7	20.3	.5	938	73.2	190	86.6	139
20–24	80.1	72.5	4.2	978	57.4	709	70.3	407
Education								
Primary or none	38.3	35.7	1.6	387	19.5	138	(55.2)	27
Secondary	50.2	44.2	1.6	1143	56.9	505	72.2	288
University	73.7	66.4	5.9	386	90.7	256	79.5	232
Ethnicity of head of the household								
Serbian	52.6	47.3	2.0	1636	62.7	773	75.6	485
Hungarian	60.7	51.7	10.5	80	(71.5)	41	(*)	29
Muslim\Bosnian	39.7	35.2	.1	45	(24.1)	16	(*)	4
Roma	67.9	60.8	3.3	46	10.1	28	(38.2)	3
Other	43.5	37.8	4.1	109	(62.3)	41	(*)	26
Wealth index quintiles								
Poorest	47.2	42.6	1.1	298	27.7	127	(36.9)	35
Second	50.9	45.5	3.0	393	54.9	179	82.2	98
Middle	49.3	44.7	.7	447	53.5	200	82.8	107
Fourth	59.9	53.1	3.2	388	69.5	206	63.8	143
Richest	54.4	48.3	4.0	390	86.8	188	81.8	164
Total	52.5	47.0	2.4	1916	60.8	900	74.4	547

* MICS indicator 85

** MICS indicator 83; MDG indicator 19a

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