

SNAPSHOTS OF KEY FINDINGS



SURINAME MULTIPLE INDICATOR CLUSTER SURVEY 2018





SURINAME

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2018

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Introduction and Objectives

The Suriname Multiple Indicator Cluster Survey (MICS) was carried out in 2018 by the Ministry of Social Affairs and Public Housing in collaboration with the General Bureau of Statistics, as part of the Global MICS Programme. Technical and financial support was provided by the United Nations Children’s Fund (UNICEF) and the government of Suriname.

The Global MICS Programme was developed by UNICEF in the 1990s as an international multi-purpose household survey programme to support countries in collecting internationally comparable data on a wide range of indicators on the situation of children and women. MICS surveys measure key indicators that allow countries to generate data for use in policies, programmes, and national development plans, and to monitor progress towards the Sustainable Development Goals (SDGs) and other internationally agreed upon commitments.

The objective of these SNAPSHOTS is to highlight selected key findings from the Suriname 2018 MICS. The complete Survey Findings Report 2018 and the data are available on mics.unicef.org/surveys.

Suggested citation:

Ministry of Social Affairs and Public Housing 2020. *Snapshots of Suriname Multiple Indicator Cluster Survey 2018, Snapshots of Survey Findings Report*. Paramaribo, Suriname: Ministry of Social Affairs and Public Housing

Cover page:

Cover page pictures are taken by Mr. Hedwig de la Fuente, and depicts various activities during Suriname’s inaugural United Nations Sustainable Development Goals (SDG) Gallery, aimed at localizing and advocacy of the SDG’s in Suriname.

Picture 1: SDG Patterned staircase inside the Historical Museum Fort Zeelandia

Picture 2: Children playing the GO GOALS! SDG Board game

Children’s drawings in this report are part of the national child rights awareness campaign in primary schools in Suriname implemented by the Bureau for Child Rights of the Ministry of Social Affairs and Public Housing with the support of UNICEF Suriname.

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Sample & Survey Characteristics

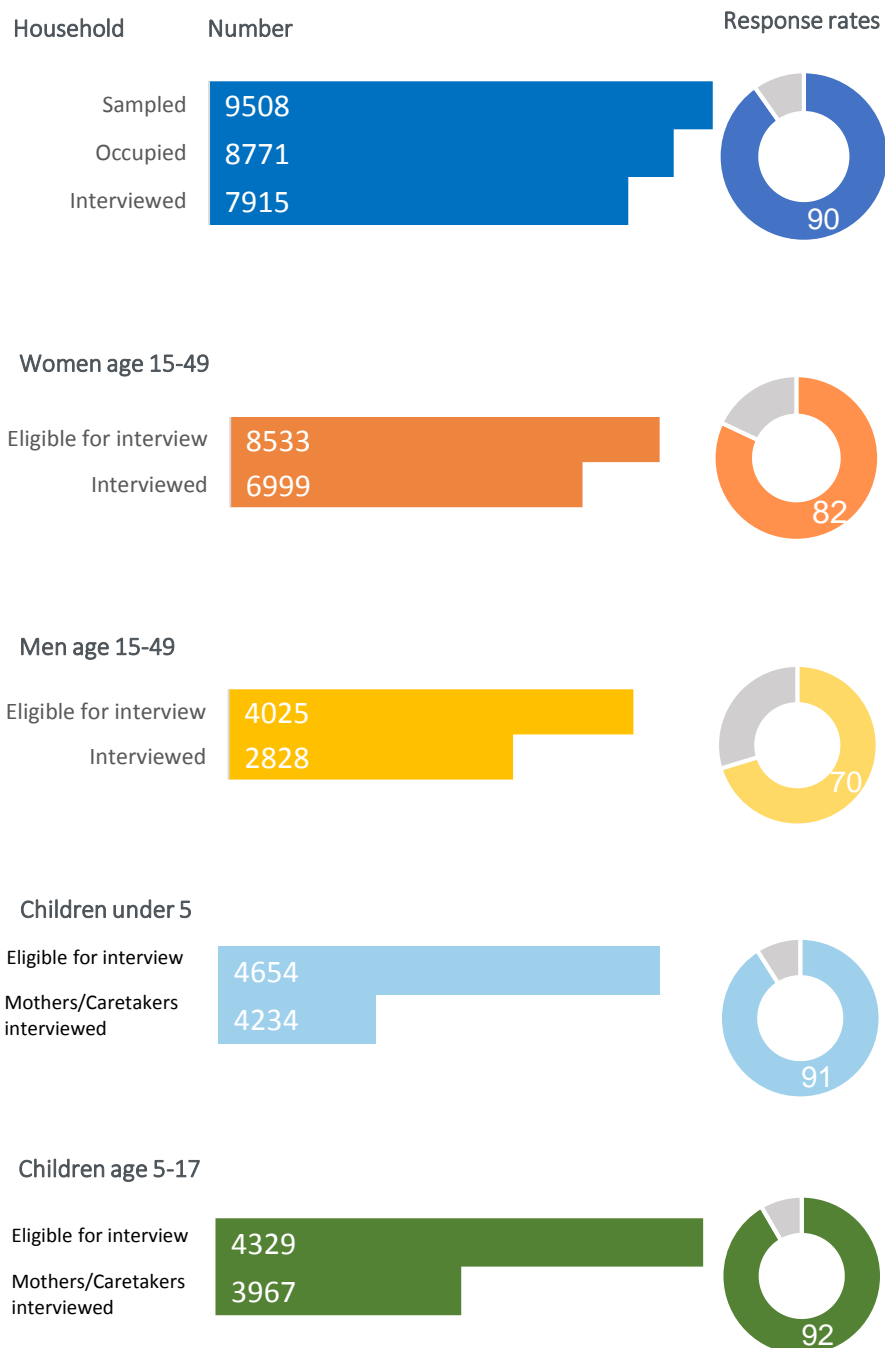


Suriname 2018

Sample & Survey Characteristics

Multiple Indicator
Cluster Surveys

Response Rates



Survey Implementation

Implementing agency
Ministry of Social Affairs and Public Housing

Sample frame
Suriname Population and Housing Census 8th round, 2012

Listing & Mapping
24 July 2017– 25 January 2018

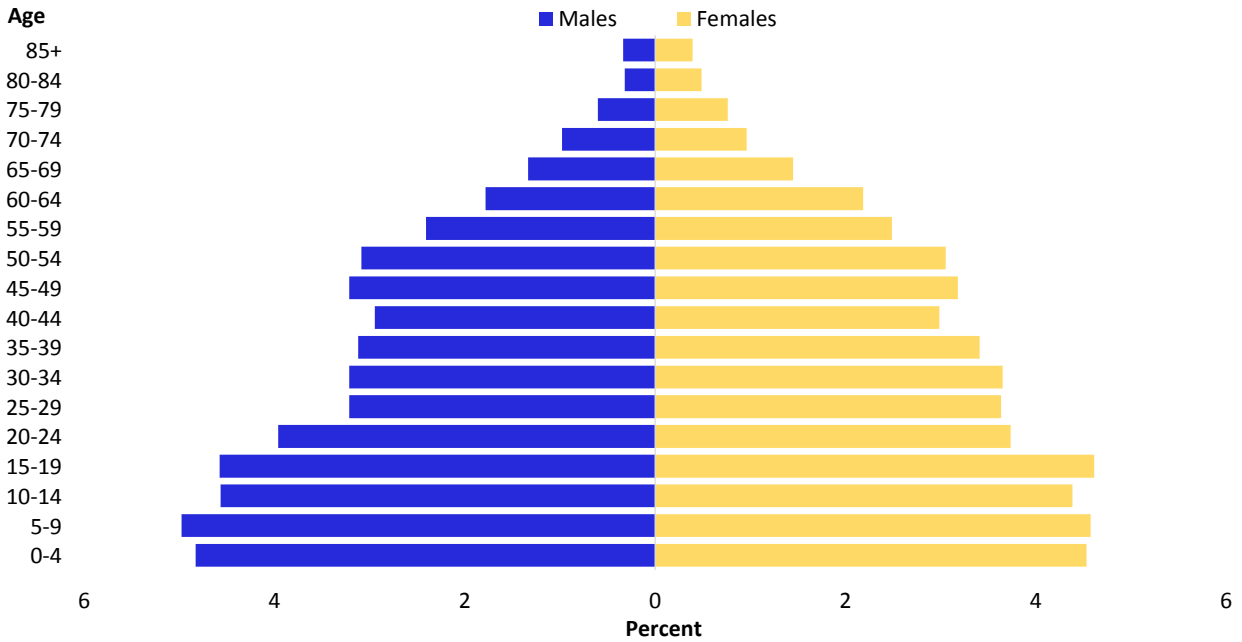
Interviewer training
12 February – 23 March 2018

Fieldwork
27 March – 26 August 2018

Questionnaires
Household
Women age 15-49
Men age 15 – 49
Children under 5
Children age 5-17
Water Quality Testing

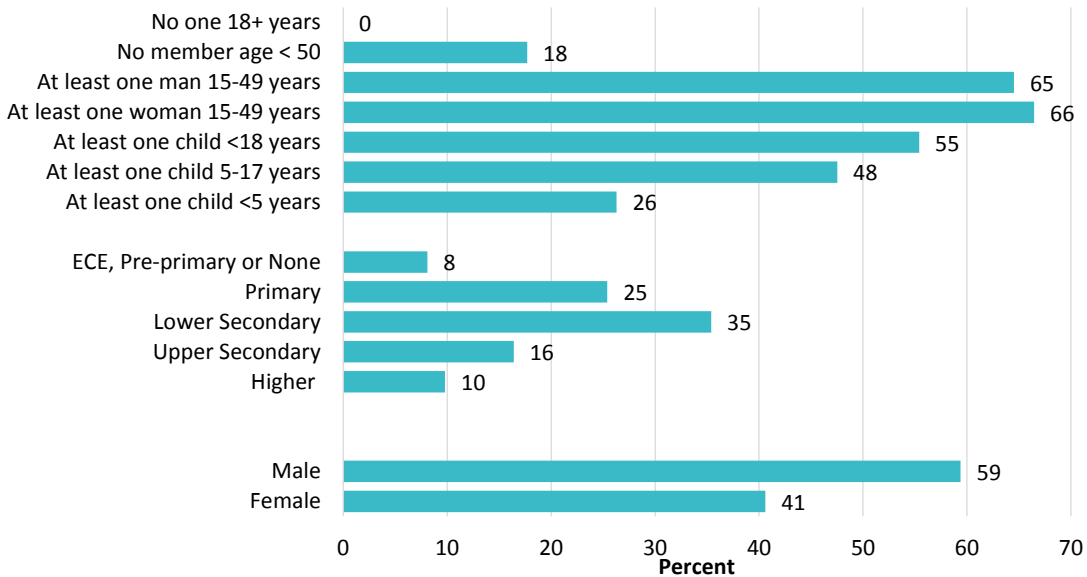
Population Characteristics

Household Population Age & Sex Distribution



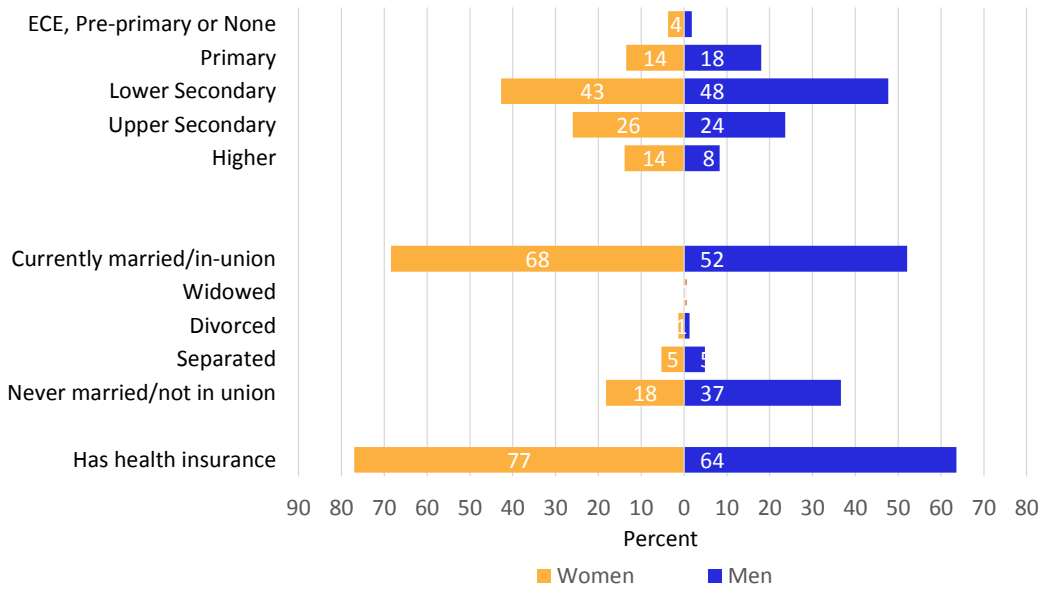
Percent distribution of household population by age group and sex

Household Composition & Characteristics of Head of household



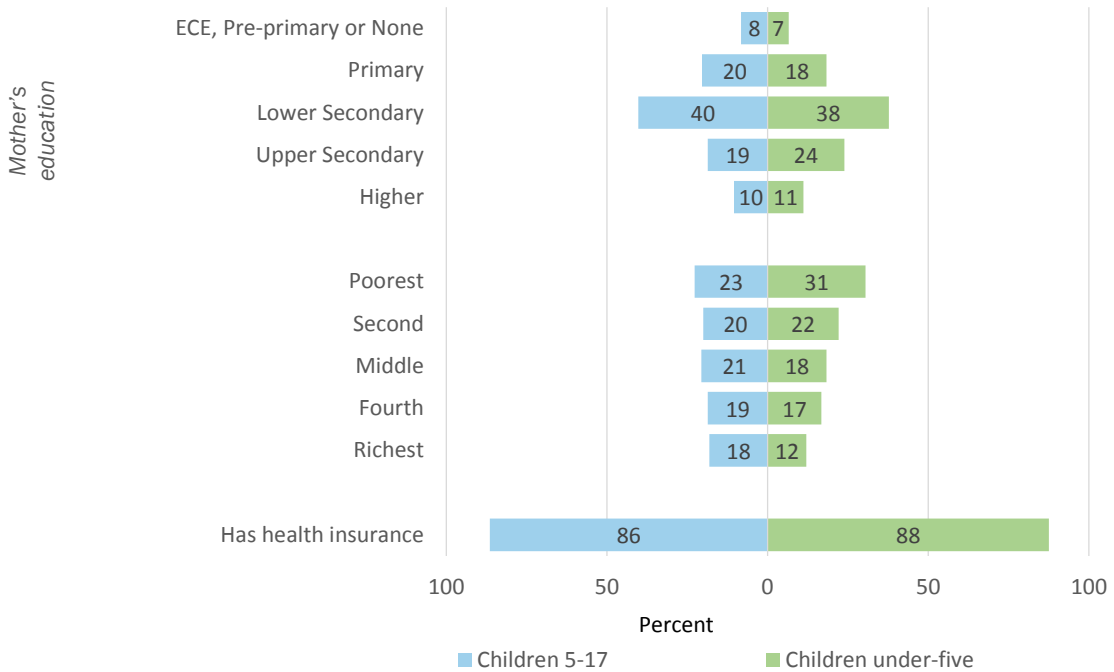
Percent of households by selected characteristics

Women & Men's Profile



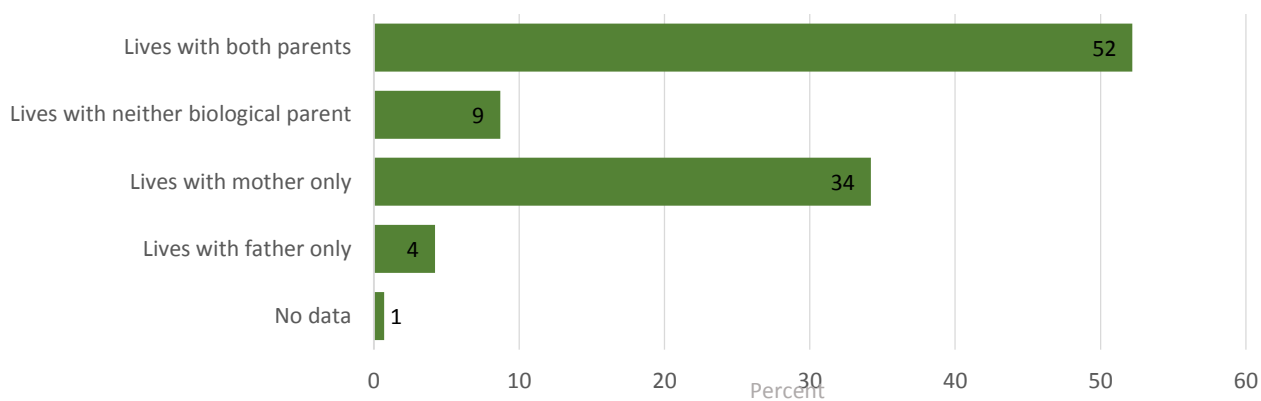
Percent distribution of women and men age 15-49 by background characteristics

Children's Profile



Percent distribution of children age 5-17 and under-five by background characteristics

Children's living arrangements, age 0-17



Percent distribution of children age 0-17 years according to living arrangements

Regional distribution of population (percent)

Region (districts)	Households	Women	Men	Children under 5	Children 5-17
National	100	100	100	100	100
Paramaribo	39	37	42	34	34
Wanica	27	30	27	25	29
Nickerie	6	6	6	5	7
Coronie	1	1	1	1	1
Saramacca	4	4	3	3	4
Commewijne	7	7	7	6	7
Marowijne	3	3	3	5	4
Para	4	5	5	6	5
Brokopondo	4	4	3	8	5
Sipaliwini	4	4	3	7	5

Key Messages Sample Characteristics

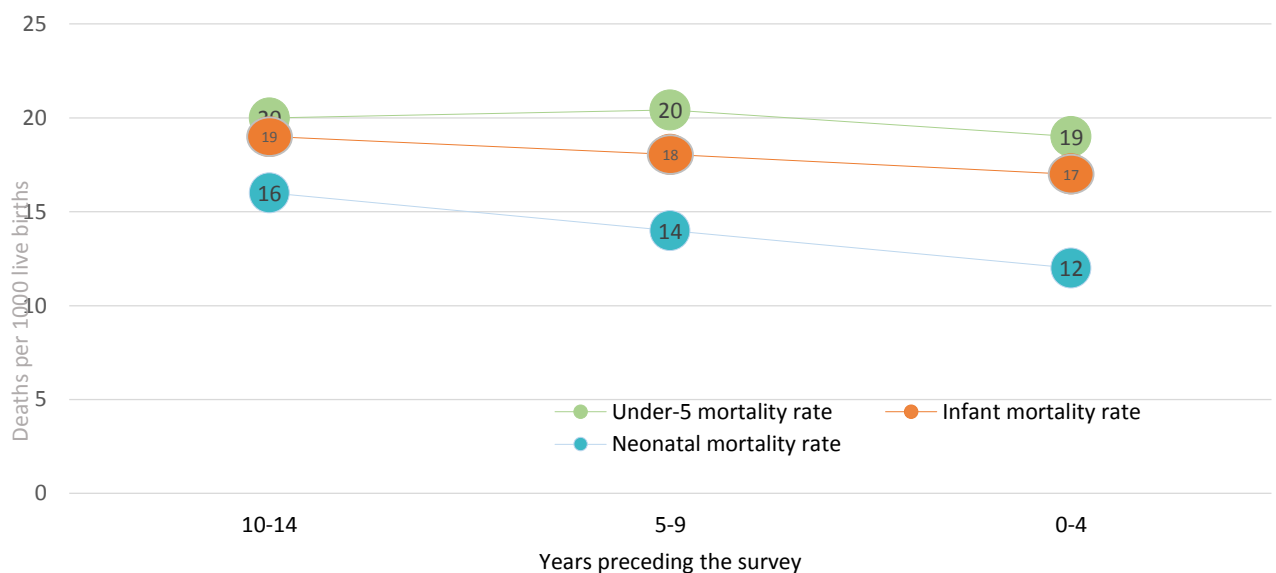
- ✓ The Overall Response Rate of households in the survey was at satisfactory level varying between 70-92%.
- ✓ The response rate for households was 90%, for women 82%, and 70% for men.
- ✓ The response rate for children under 5 years was 91%, and for children aged 5-17 years 92%.
- ✓ There is huge disparity in household distribution by area. Almost 70% of all households are in the urban area of the country.
- ✓ More than one third of the population is younger than 24 year old.
- ✓ 1 out of 4 households has a child under 5 years, and 1 out of 2 households has a child of younger than 18 year.
- ✓ The educational level of the head of the households is as follows: 25% has a primary level, 35% lower secondary level, 26% an upper secondary/higher education level; 10% has no formal educational background.
- ✓ Only 52% of all children younger than 18 are living with both parents, 34% is living with the mother only, 4% with the father only; 9% of all children is living with neither the biological mother or father.
- ✓ The percentage of households headed by females is relatively high at 41%.
- Data from this snapshot can be found in table SR. 1.1, SR. 5.1W, SR.5.1M, SR.5.2, SR.5.3 and SR.2.3 of the Survey Findings Report (MICS 2018).



Child Mortality



Mortality Rates among Children Under-5



Years preceding the survey	Neonatal mortality rate: SDG 3.2.2	Post-neonatal mortality rate	Infant mortality rate	Child mortality rate	Under-5 mortality rate: SDG 3.2.1
0-4	12	5	17	2	19
5-9	14	4	18	2	20
10-14	16	3	19	1	20

Neonatal mortality (NN): probability of dying within the first month of life

Post-neonatal mortality: calculated as difference between infant and neonatal mortality rates

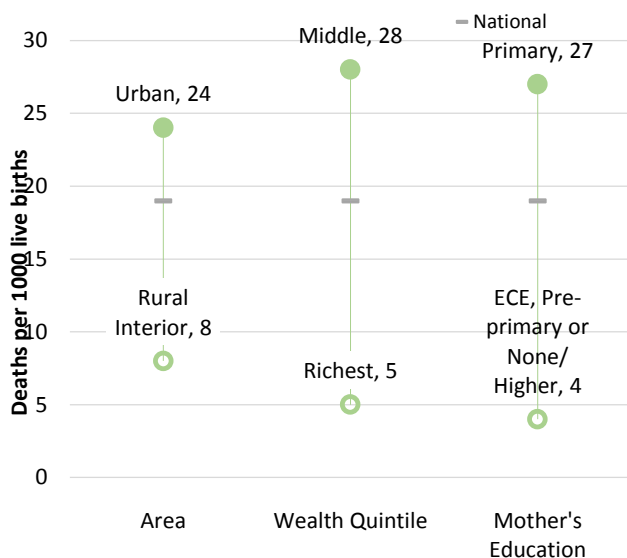
Infant mortality (${}_1q_0$): probability of dying between birth and first birthday

Child mortality (${}_4q_1$): probability of dying between the first and fifth birthday

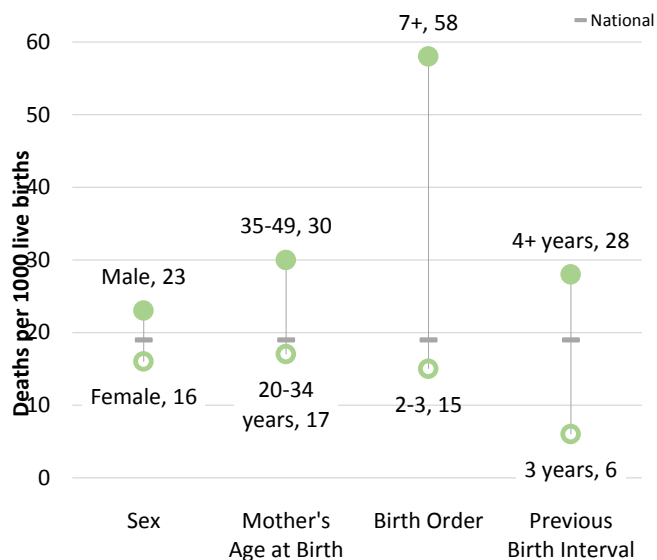
Under-5 mortality (${}_5q_0$): probability of dying between birth and fifth birthday

Child Mortality Disparities

Under-5 mortality rate by socio-economic characteristics & area



Under-5 mortality rate by demographic risk factors



Under-five mortality rates for the five year period preceding the survey, by socio-economic characteristics, area and demographic risk factors

Neonatal & under-5 mortality rates by

Region	Neonatal mortality	Under-5 mortality
National	12	19
Paramaribo	27	37
Wanica	0	11
Nickerie	0	4
Coronie	0	6
Saramacca	1	1
Commewijne	2	7
Marowijne	6	9
Para	16	18
Brokopondo	7	7
Sipaliwini	10	10

Neonatal mortality and under-5 mortality rates (deaths per 1000 live births) for the five year period preceding the survey, by region

Key messages Child Mortality

- ✓ Mortality rate among children under 5 years is 19 per 1000 live births.
 - ✓ The Infant Mortality rate is 17 per 1000 and the Neonatal Mortality rate is 12 children per 1000 live births.
 - ✓ Thus, of the children who die before age 5 years, almost 90% die before the age of one year.
 - ✓ Among the children who die before age 1 year, almost 70% die within the first month of life.
 - ✓ Over the past 15 years, there has been a slight decline in Child Mortality rates. However, the probability of dying before the age of 1 is high.
 - ✓ The Under-5 mortality rate for boys is slightly higher than girls.
 - ✓ Children of women in the age group of 35-49 years, face higher risks for dying before the age of 5 (30 per 1000) compared with women in the age group 20-34 years (17 per 1000).
- Data from this snapshot can be found in table CS.1, CS2, and CS3 of the Survey Findings Report (MICS 2018).

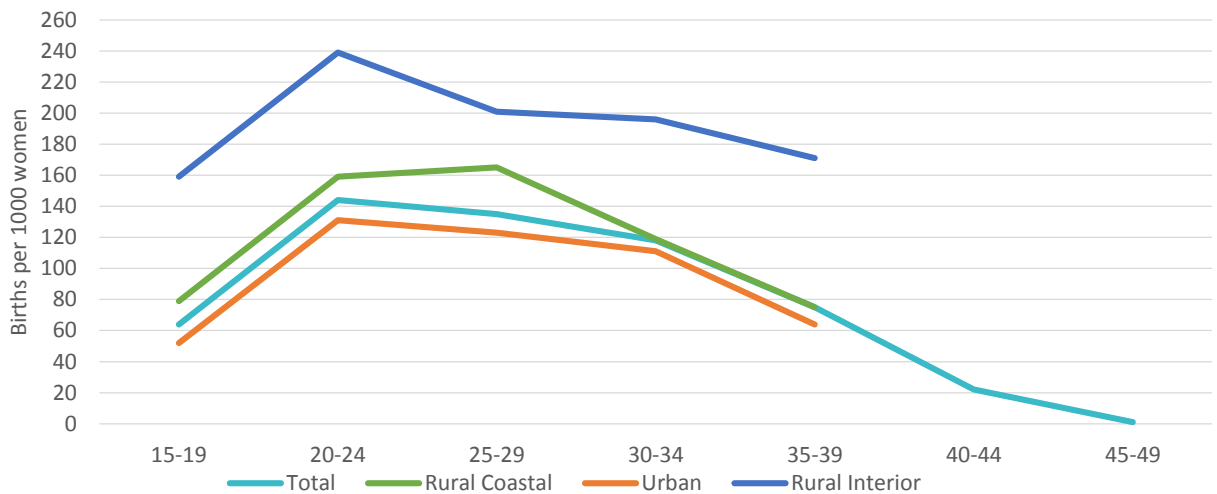


Fertility & Family Planning



Fertility

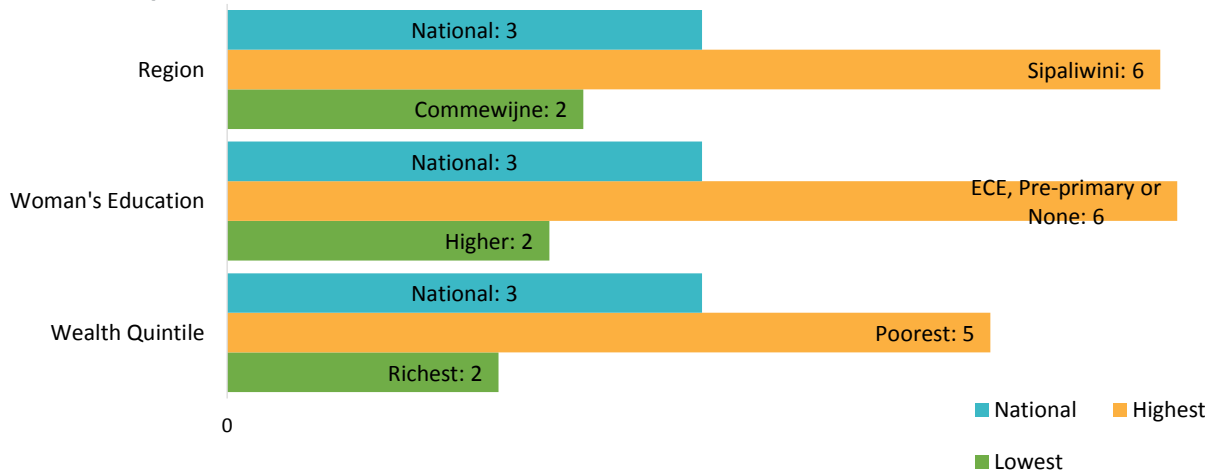
Age Specific Fertility Rates



Age-specific fertility rates (ASFR) are the number of live births in the last 3 years, divided by the average number of women in that age group during the same period, expressed per 1,000 women

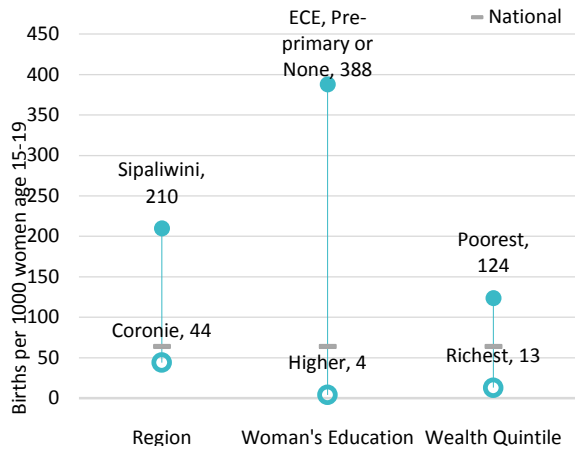
Figures for age groups 40-44 and 45-49 are not shown by area since they are based on less than 25 unweighted cases

Total Fertility Rate



The total fertility rate (TFR) is calculated by summing the age-specific fertility rates (ASFRs) calculated for each of the five-year age groups of women, from age 15 through to age 49

Adolescent Birth Rate: SDG indicator 3.7.2

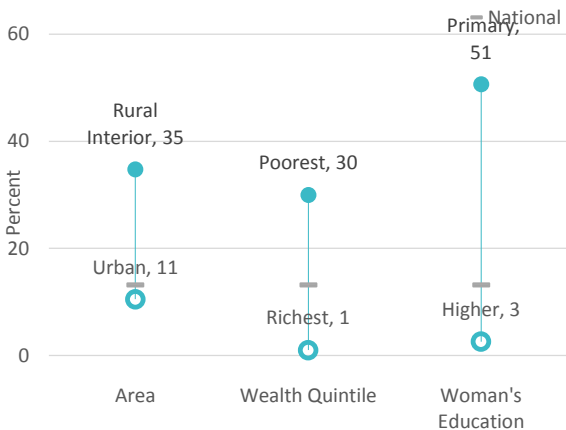


Age-specific fertility rate for girls age 15-19 years (adolescent birth rate) for the three-year period preceding the survey

Adolescent Birth rate SDG 3.7.2 indicator is under target 3.7: By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programs.

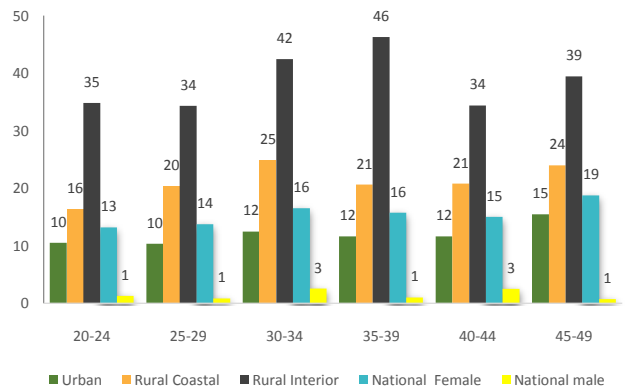
Reducing adolescent fertility through awareness and training on family planning and addressing the multiple factors underlying it are essential for improving sexual and reproductive health and the social and economic well-being of adolescents. Providing information and ensuring that the impact of early marriage on mothers in particular and the society in whole is well understood by young people and the communities they belong to is essential. Preventing births very early in a woman's life is an important measure to improve maternal health and reduce infant mortality.

Early Child Bearing - by Age 18



Percentage of women age 20-24 years who have had a live birth before age 18, by background characteristics

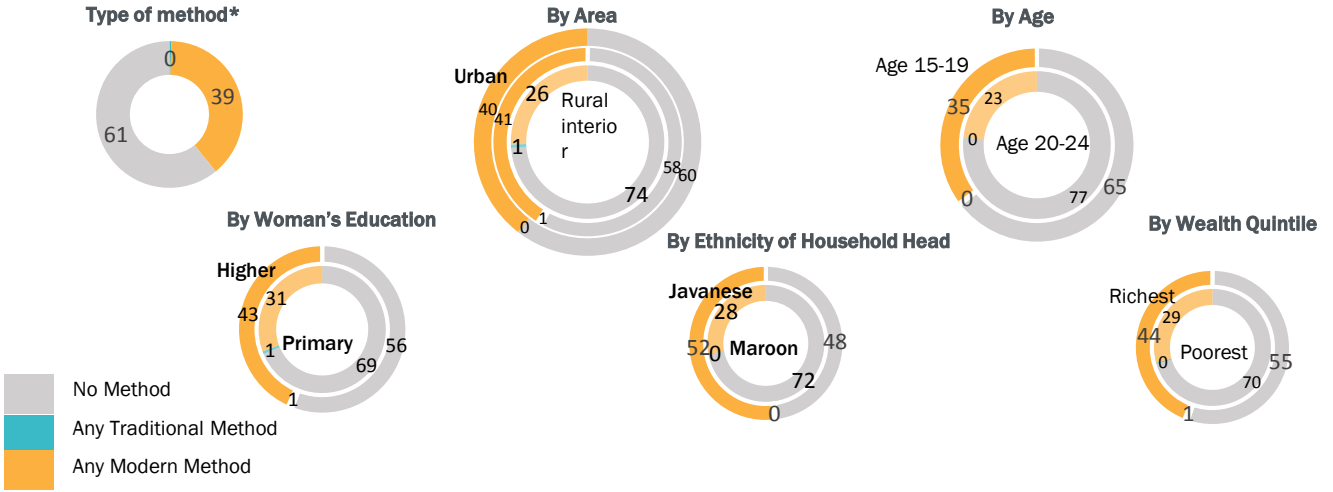
Trends in Early Child Bearing - by Age 18



Percentage of women age 20-49 years who have had a live birth before age 18 by age and region, and percentage of men fathering a live birth before age 18 by age (red bars)

Family Planning

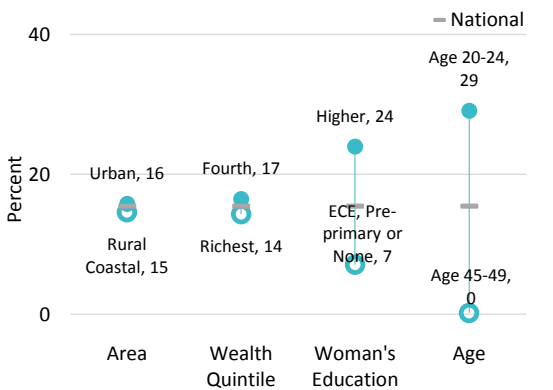
Method of Family Planning by Various Characteristics



Percentage of women age 15-49 years currently married or in union who are using (or whose partner is using) a contraceptive method
 *Modern Methods include female sterilization, male sterilization, IUD, injectables, implants, pills, male condom, Female condom, diaphragm, foam, jelly and contraceptive patch Traditional methods refer to periodic abstinence and withdrawal

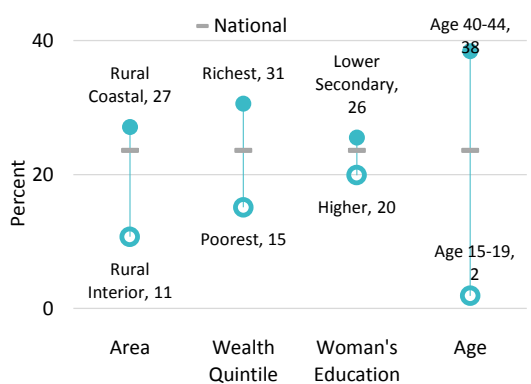
Met Need for Family Planning

Met Need for Family Planning - Spacing



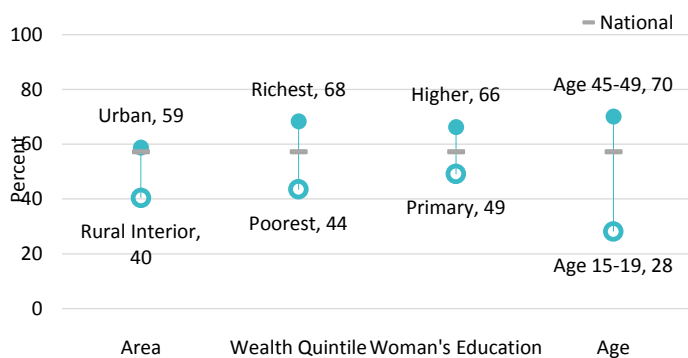
Percentage of women age 15-49 years currently married or in union with an met need for family planning for spacing, by background characteristics

Met Need for Family Planning - Limiting



Percentage of women age 15-49 years currently married or in union with an met need for family planning for limiting, by background characteristics

Percentage of Demand for Family Planning Satisfied with Modern Methods - SDG indicator 3.7.1



The proportion of demand for family planning satisfied with modern methods (SDG indicator 3.7.1) is useful in assessing overall levels of coverage for family planning programmes and services. Access to and use of an effective means to prevent pregnancy helps enable women and their partners to exercise their rights to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so. Meeting demand for family planning with modern methods also contributes to maternal and child health by preventing unintended pregnancies and closely spaced pregnancies, which are at higher risk for poor obstetrical outcomes.

Percentage of demand for family planning satisfied with Modern methods of number of women age 15-49 years currently married or in union with need for family planning

Regional Data on Fertility & Family Planning

Region	Adolescent Birth Rate	Total Fertility Rate	Child bearing before 15*	Child bearing before 18**	Contraception Use of modern method among married / in-union women 15-49 years	Contraception Use of any method among married / in-union women, 15-49 years	Demand for family planning satisfied with modern methods among married / in-union women with need for family planning, 15-49 years
National	64	2.8	1	13	39	39	57
Paramaribo	50	3	1	11	38	39	57
Wanica	53	2	0	8	40	41	60
Nickerie	55	2	1	20	45	45	64
Coronie	44	2	(*)	(*)	35	35	50
Saramacca	62	2	0	14	47	47	67
Commewijne	57	2	0	4	44	44	64
Marowijne	140	5	1	29	28	29	43
Para	83	4	3	19	36	36	48
Brokopondo	129	5	3	(22)	30	31	42
Sipaliwini	210	6	8	(54)	20	21	37

*Percentage of women age 15-19 years who have had a live birth before age 15

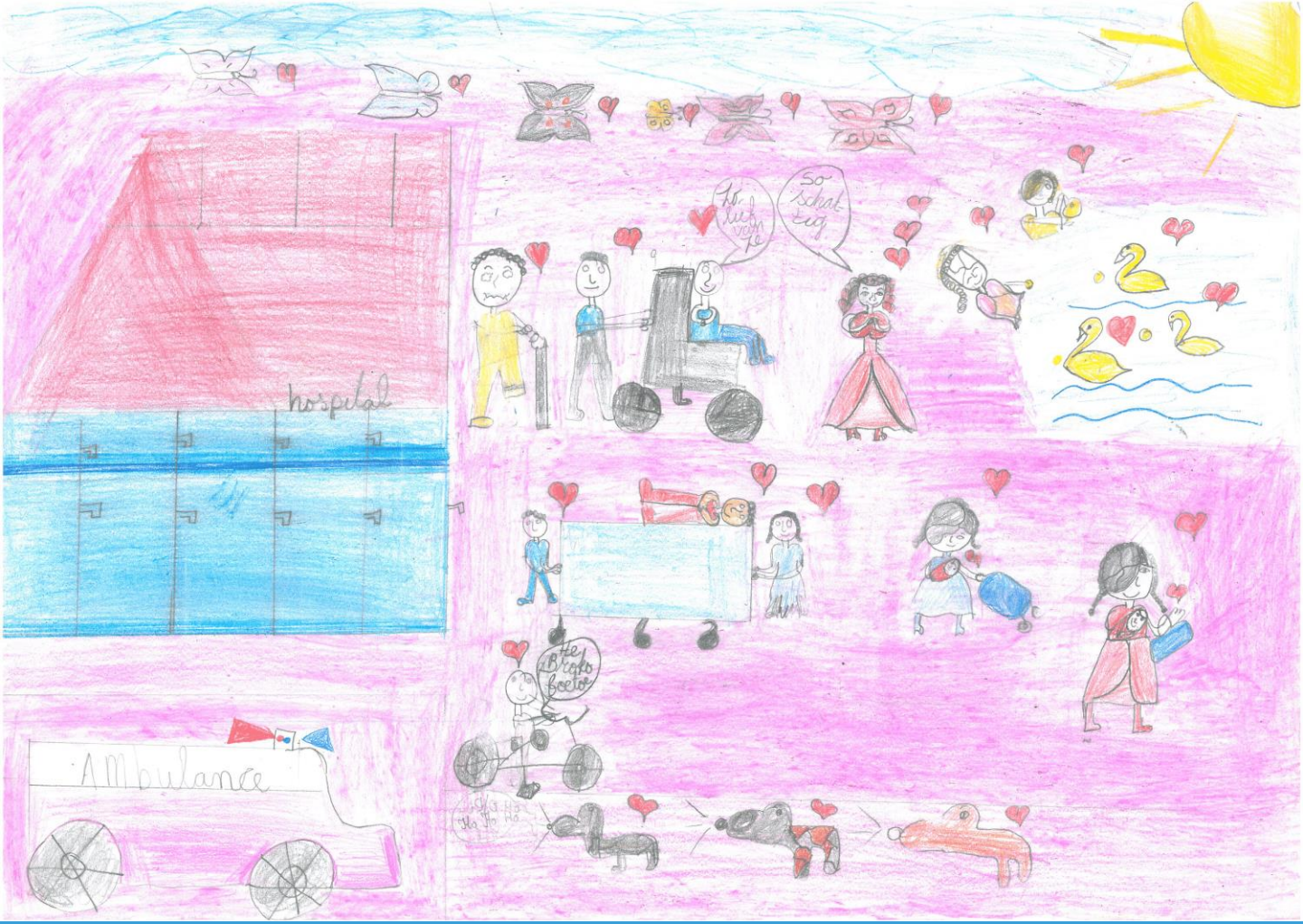
**Percentage of women age 20-24 years who have had a live birth before age 18

Key messages Fertility and Family Planning

- ✓ The total fertility rate is 2.8 births per woman.
- ✓ The fertility rate is the highest in the rural interior area, among women with the lowest educational level and women in the lowest wealth quintile.
- ✓ The interior district Sipaliwini has the highest fertility rate.
- ✓ Adolescent and teenage birth rate is the highest in the interior, among teenagers with lowest educational level (ECE/no schooling, 388 per 1000). 210 births per 1000 in Sipaliwini versus Paramaribo with 50 per 1000.
- ✓ 13% of women (aged 20-24 years) had a live birth before age 18, while 1% had a live birth before age 15.
- ✓ More than one third of married women (39%) use one or more modern methods of contraception.
- ✓ The proportion of women using contraceptives is the highest among women living in urban area, among women with higher levels of education, and among women in the richest wealth quintiles.
- ✓ Only 37% of women aged 15-49 years in the interior district of Sipaliwini is of the opinion that their demand for family planning is satisfied with modern methods, while this is around 60% in the urban area.
- ✓ Adolescents aged 15-19 years use contraceptives much less frequently than older women.
- ✓ 57% of married women are satisfied with modern methods of contraception for family planning.
- ✓ Fertility rates is the highest among women younger than 18 years, among those living in the interior, and women with lowest education levels and living in the poorest wealth quintiles. At the same time, they see their demand for modern contraceptive methods less frequently met than older women and women with a higher level of education and from a higher wealth quintile.
- Data from this snapshot can be found in table TM1.1, TM 2.1, TM2.2W, TM2.3W, TM3.1 and TM3.3 of the Survey Findings Report (MICS 2018).

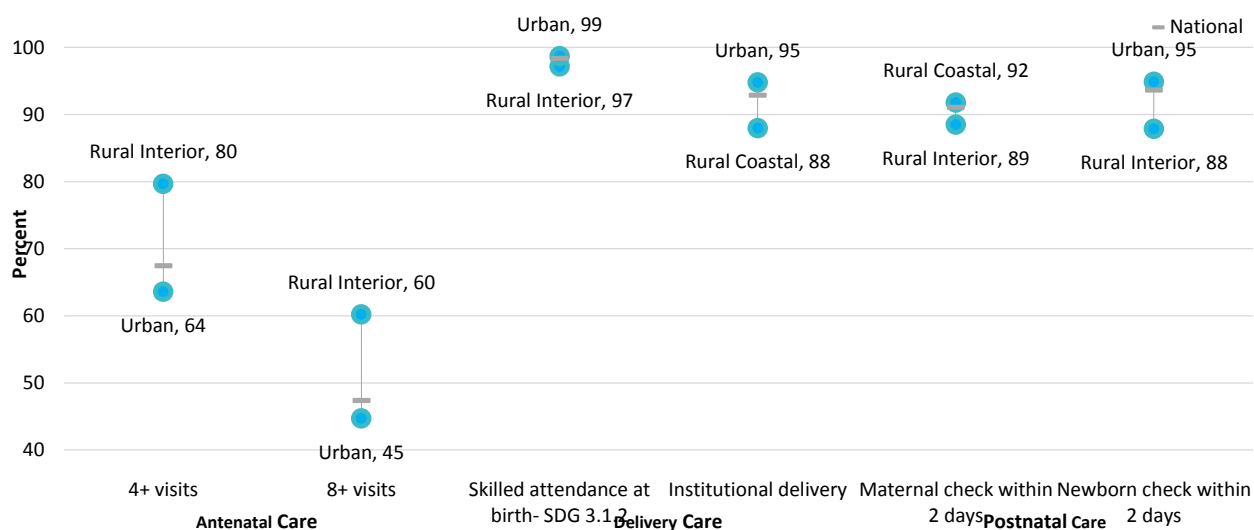


Maternal & Newborn Health



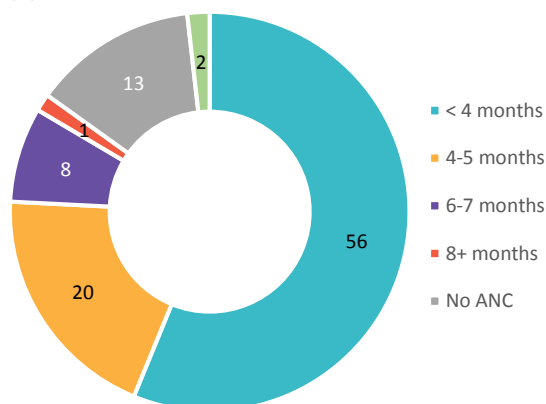
Key Elements of Maternal & Newborn Health

Maternal & Newborn Health Cascade by Area



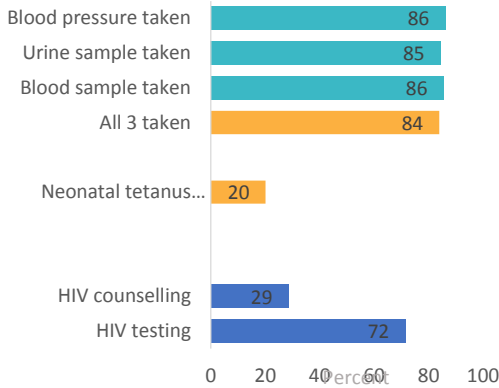
Percentage of women age 15-49 years with a live birth in the last 2 years who were attended during their last pregnancy that led to a live birth at least once by skilled health personnel or at least four times by any provider, who were attended by skilled health personnel during their most recent live birth (SDG 3.1.2), whose most recent live birth was delivered in a health facility, who received a health check while in facility or at home following delivery, or a post-natal care visit within 2 days after delivery of their most recent live and percentage of last live births in the last 2 years who received a health check while in facility or at home following delivery, or a post-natal care visit within 2 days after delivery, by area

Timing of First Antenatal Care Visit



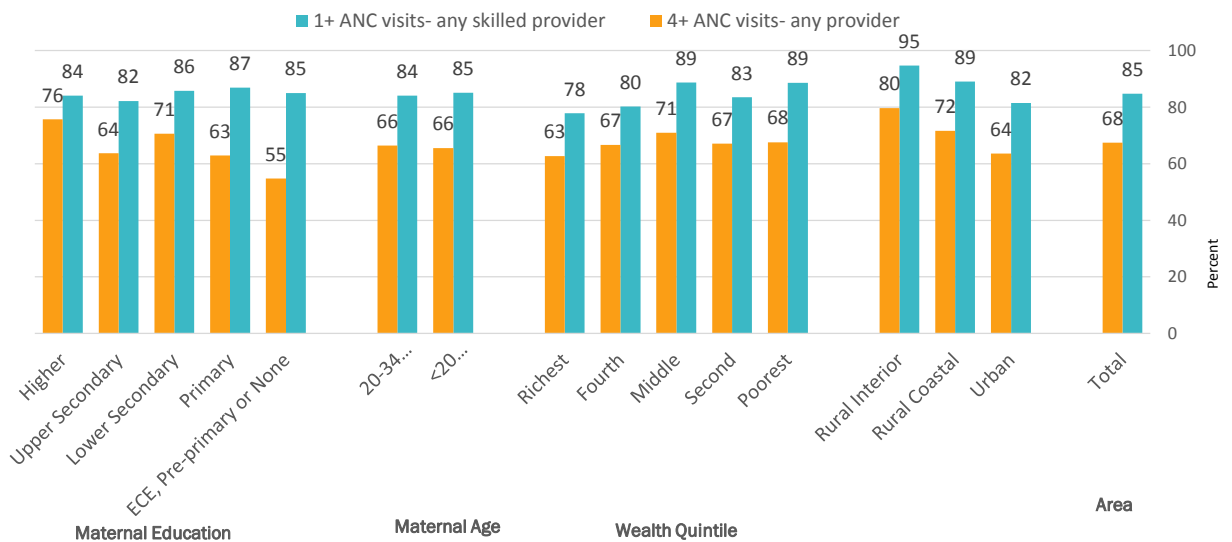
Percentage of women age 15-49 years with a live birth in the last 2 years who were attended during their last pregnancy that led to a live birth at least once by skilled health personnel, by the timing of first ANC visit

Content & Coverage of Antenatal Care Services



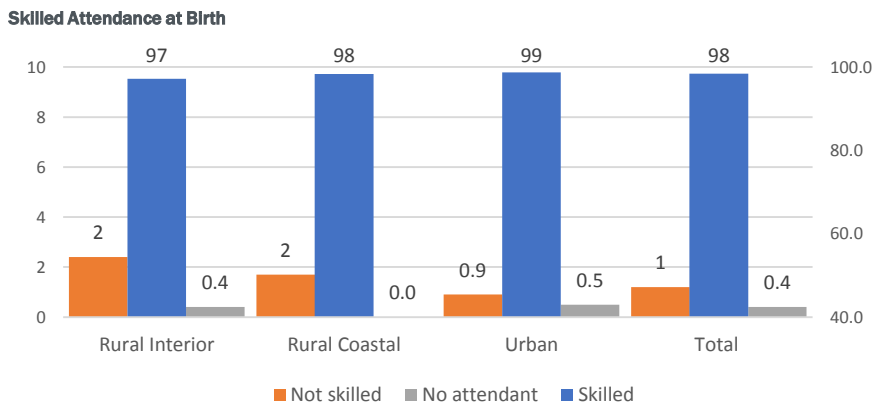
Percentage of women age 15-49 years with a live birth in the last 2 years who had their blood pressure measured and gave urine and blood samples, were given at least two doses of tetanus toxoid vaccine within the appropriate interval, reported that during an ANC visit they received information or counselling on HIV, and reported that they were offered and accepted an HIV test during antenatal care and received their results during the last pregnancy that led to a live birth. In this context, counseling means that someone talked with the respondent about all three of the following topics: 1) babies getting the HIV from their mother, 2) preventing HIV, and 3) getting tested for HIV.

Coverage of Antenatal Care by Various Characteristics



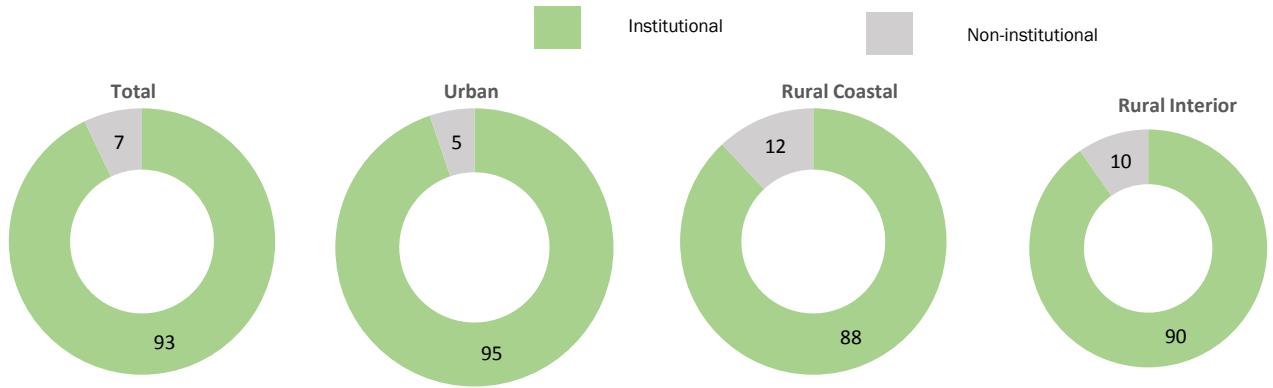
Percentage of women age 15-49 years with a live birth in the last 2 years who were attended during their last pregnancy that led to a live birth at least once by skilled health personnel or at least four times by any provider

Coverage of Skilled Attendance at Birth & Institutional Delivery by Area

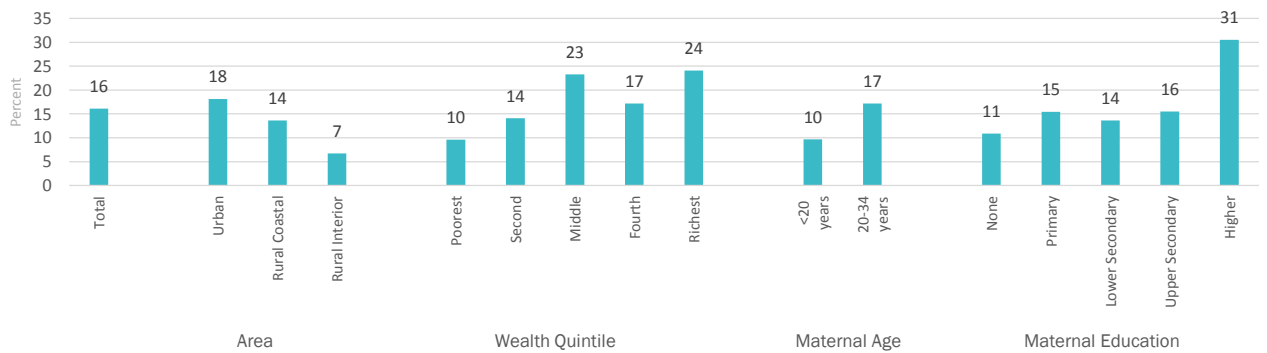


Percentage of women age 15-49 years with a live birth in the last 2 years who were attended by skilled health personnel during their most recent live birth and percentage whose most recent live birth was delivered in a health facility (institutional delivery) by area

Institutional Delivery

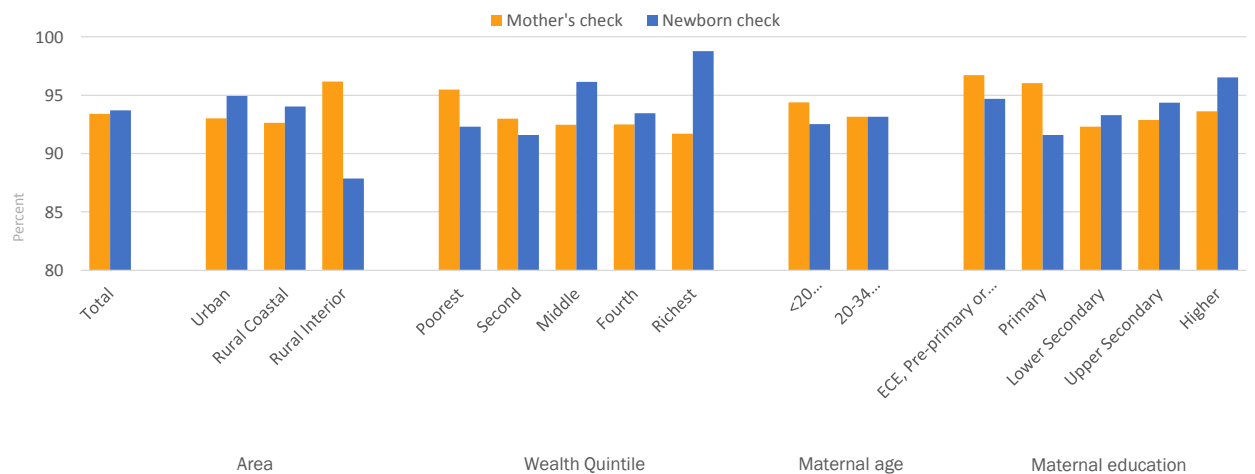


Caesarian Section by Various Characteristics



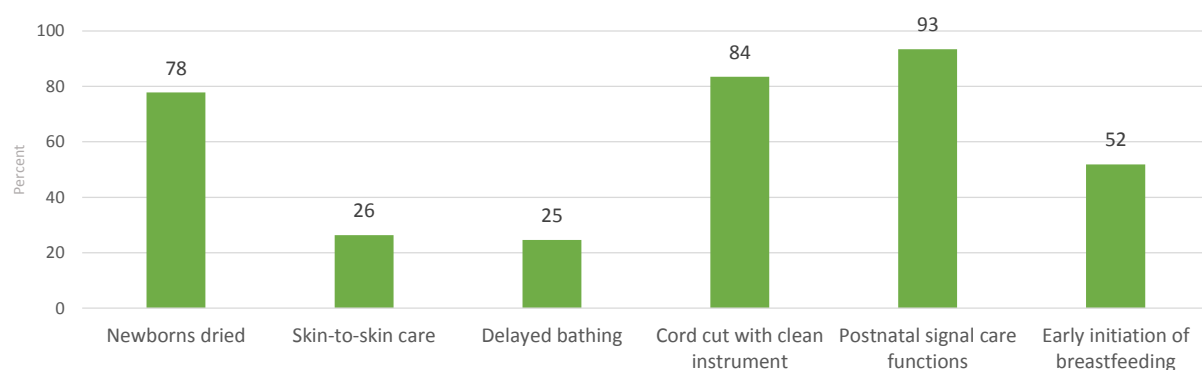
Percentage of women age 15-49 years with a live birth in the last 2 years whose most recent live birth was delivered by caesarian section by various characteristics

Postnatal Care within 2 Days of Birth by Various Characteristics



Percentage of women age 15-49 years with a live birth in the last 2 years who received a health check while in facility or at home following delivery, or a post-natal care visit within 2 days after delivery of their most recent live and percentage of last live births in the last 2 years who received a health check while in facility or at home following delivery, or a post-natal care visit within 2 days after delivery, by various characteristics

Coverage of Newborn Care



Among the last live-birth in the last 2 years, percentage who were dried after birth; percentage who were given skin to skin contact; percentage who were bathed after 24 hours of birth; percentage where the umbilical cord was cut with a new blade or boiled instrument; percentage where nothing harmful was applied to the cord; percentage where the newborn received a least 2 postnatal signal care functions within 2 days after birth; and percentage of women with a live birth in the last 2 years who put their last newborn to the breast within one hour of birth, by various characteristics

Regional Data on Maternal and Newborn Cascade

Region	ANC: At least 1 visit (skilled provider)	ANC: At least 4 visits (any provider)	Skilled Attendance at Birth	Institutional Delivery	Postnatal Care for Mother <2 days	Postnatal Care for Newborn <2 days
National	85	68	98	93	91	94
Paramaribo	81	60	98	95	92	95
Wanica	82	69	99	93	90	95
Nickerie	85	72	99	96	93	96
Coronie	(*)	(*)	(*)	(*)	(*)	(*)
Saramacca	95	83	95	95	92	93
Commewijne	83	63	100	99	94	95
Marowijne	84	63	97	60	92	92
Para	92	72	100	98	92	95
Brokopondo	99	84	98	92	89	88
Sipaliwini	90	74	96	88	89	87

(*) Figures that are based on less than 25 unweighted cases

For indicator definitions, see earlier charts

Key Messages Maternal and Newborn Health

- ✓ The vast majority of deliveries in Suriname are in health facilities. 99% of women aged 15-49 years were attended by skilled health personnel during their most recent life birth in a health facility. In the rural interior, the coverage is slightly lower: 97% and in the rural coastal: 98%.
- ✓ Just a bit over half of the women (56%) had their first antenatal care visit (ANC) in a health facility within the first 3 months of the pregnancy, 20% by their 4-5 month, and 8% by 6-7 months of pregnancy. Only 1% had the first ANC over 8 months of pregnancy.
- ✓ The highest number of women reporting to have at least 4 antenatal care visits are from the interior, namely 80%, while 64 % of women in the urban area reported to have at least 4 antenatal care visits.
- ✓ The percentage of women aged 15-49 years with a live birth in the last 2 years that never had ANCs during their last pregnancy is 13%.
- ✓ Among those women who have given birth to a child during the two years preceding the survey, around 80% reported to have provided a blood sample, had their blood pressure checked and had their urine specimen taken. However, only 20% reported to have received the neonatal tetanus protection and 72% reported to have been tested for HIV.
- ✓ It is noteworthy that more than 90% of mothers in the interior received care after delivery. The percentage for the health checks for the newborn is lower. The percentages for both the mothers' check and the health check for the newborn is slightly higher for the urban area.
- ✓ At national level, about 16% of the women had a C-section.
- ✓ The incidence of a C-section is relatively higher among those with a higher education, a higher wealth status and those living in the urban areas.
- ✓ 31% of mothers with high school and university education reported to have undergone a C-section, while this percentage is 24% for mothers from the richest wealth quintile.
- ✓ Skin to skin care and delayed bathing occurred in respectively 26% and 25% of the cases.
- Data from this snapshot can be found in table TM.4.1, TM.4.2, TM.4.3, TM.5.1, TM.6.1, TM.6.2, TM.8.2, TM.8.4, TM.8.5, TM.8.6, TM.8.7, TM8.9 TM.11.5, TC.6.9 and TC.7.1 of the Survey Findings Report (MICS 2018).



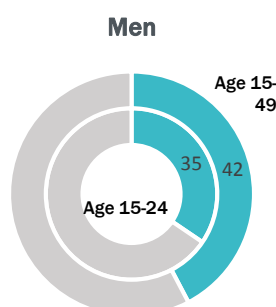
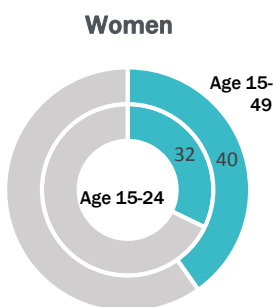
HIV & Sexual Behaviours



HIV indicators

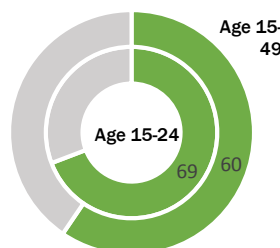
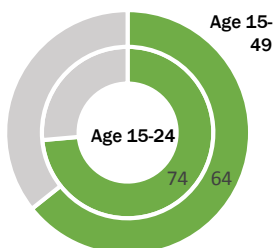
Knowledge

Percent who know of the two ways of HIV prevention (having only one faithful uninfected partner and using a condom every time), who know that a healthy looking person can be HIV-positive, and who reject the two most common misconceptions, and any other local misconception



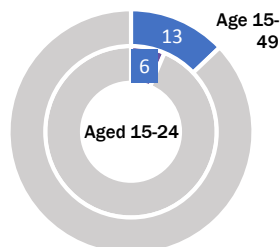
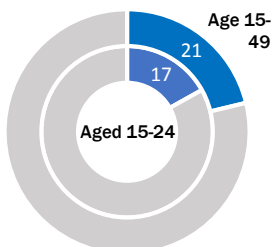
Stigma

Percent of those who report discriminatory attitudes towards people living with HIV, including 1) would not buy fresh vegetables from a shopkeeper or vendor who is HIV-positive and 2) think children living with HIV should not be allowed to attend school with children who do not have HIV



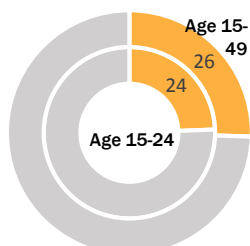
Testing

Percent who have been tested for HIV in the last 12 months and know the result



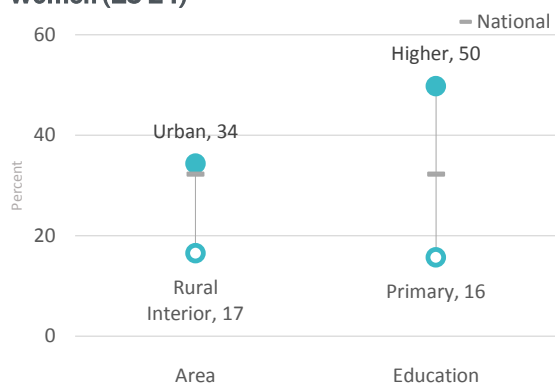
Testing during Antenatal Care

Percent of women who during their antenatal care for their last pregnancy were offered an HIV test, accepted and received results, and received post-test health information or counselling related to HIV

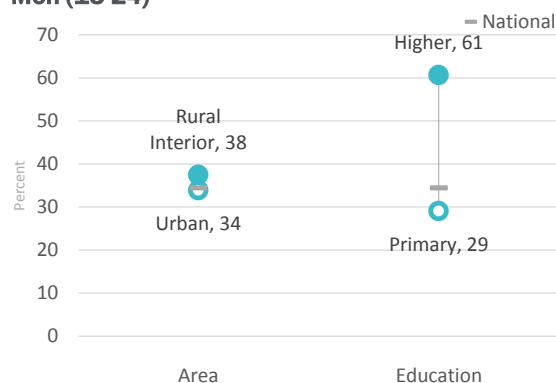


HIV Indicators by Key Characteristics

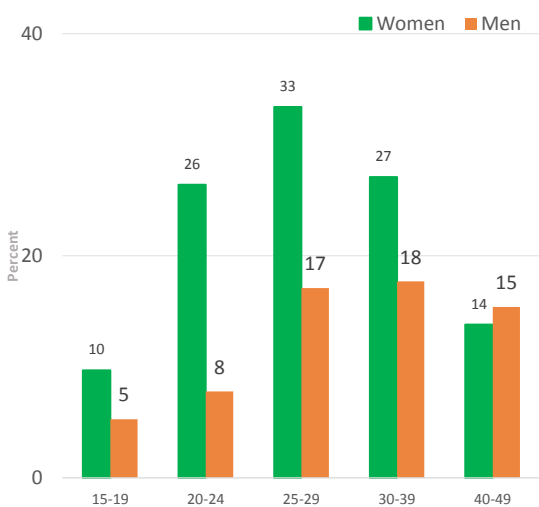
Knowledge among Adolescent Girls & Young Women (15-24)



Knowledge among Adolescent Boys & Young Men (15-24)



Tested for HIV in last 12 months



Percent age 15-49 who have been tested for HIV in the last 12 months and know the result

District level Data on HIV Counseling and Testing

	Men who tested in last 12 months	Women who tested in last 12 months	Women testing at ANC	Women HIV testing and counseling/information during ANC
National	14	22	71	26
Paramaribo	17	27	73	26
Wanica	12	19	71	23
Nickerie	7	10	67	20
Coronie	19	28	(*)	(*)
Saramacca	18	16	76	22
Commewijne	8	16	67	22
Marowijne	14	29	72	29
Para	12	21	70	21
Brokopondo	12	29	75	38
Sipaliwini	14	24	57	27

Tested in last 12 months: percent age 15-49 who have been tested in the last 12 months and know the result

HIV testing during ANC: percent of women age 15-49 who during their last antenatal care for their last pregnancy were offered an HIV test and were tested for HIV during antenatal care, and received the results

HIV counseling and testing during ANC: percent of women age 15-49 who during their last antenatal care for their last pregnancy were offered an HIV test, accepted and received results, and received post-test health information or counselling related to HIV

(*) Figures that are based on less than 25 unweighed cases

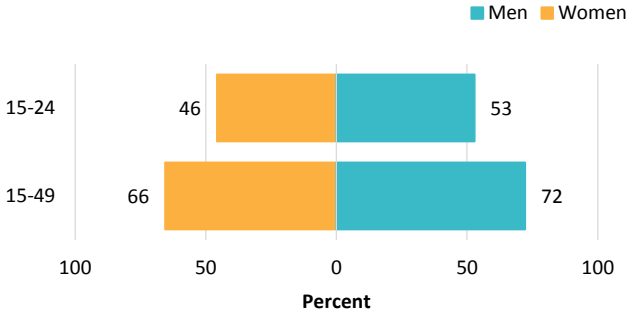
Key Messages HIV and Sexual Behavior

- ✓ Less than 50% of all women and men aged 15–49 has comprehensive knowledge about HIV/AIDS and just around one third has the knowledge about HIV prevention.
- ✓ Stigmatization is high among both men and women. The percentage of women and men aged 15-49 years who report discriminatory attitudes towards people living with HIV, is around 60-64%.
- ✓ HIV knowledge among Adolescent Girls & Young Women (aged 15-24 years) is low in both rural and urban areas; About one third of all young women and men in the urban areas have comprehensive knowledge about HIV.
- ✓ HIV testing is low among both men and women. The percentage of men (15-49 years) who have been tested for HIV in the past 12 months is around 13%; for women this is 21%. For young men (aged 15-24 years) this is even lower namely 6%, while for their female peers, this is 17%.
- ✓ About 26% of women were HIV-tested during their antenatal care.
- Data from this snapshot can be found in tables TM10.1M, TM10.1W, TM10.2M, TM10.2W, TM11.1M, TM11.1W, TM11.3M, TM11.3W, TM11.4M, TM11.4W, TM11.5, TM11.6M and TM11.6W of the Survey Findings Report (MICS 2018).



Sexual Behaviour by Key Characteristics

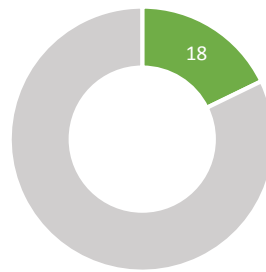
Sexually Active in the last 12 months



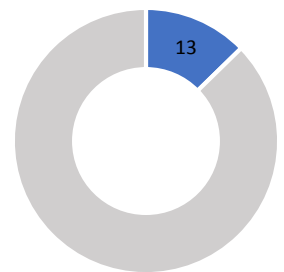
In many settings, sexual behavior can be considered a risk factor for health and social issues. These include reproductive health, HIV and other sexually transmitted infections, and gender equality and empowerment. An understanding of the population's sexual behavior patterns can inform both disease prevention and health promotion programmes.

Young People who had Sex Before Age 15

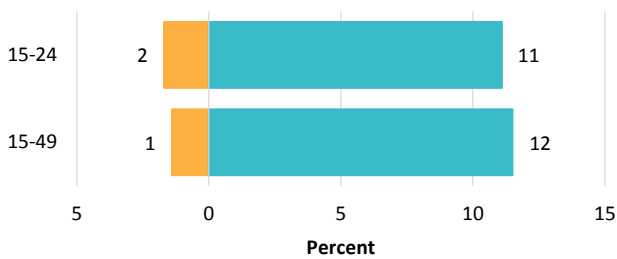
Adolescent boys & young men 15-24



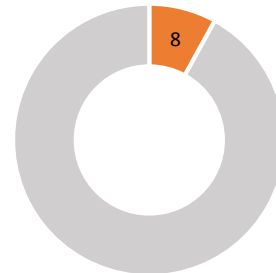
Adolescent girls & young women 15-24



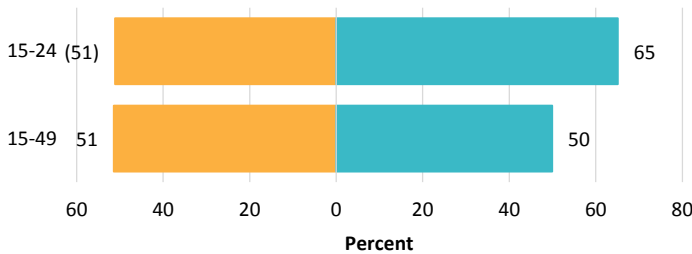
Sex with Multiple Partners in the last 12 months



Girls 15-19 who Report Sex with Partner 10 years or older in the last 12 months



Condom Use with Multiple partners



Sexually active: Percent of women and men age 15-24 and 15-49 who had sexual intercourse within the last 12 months

Multiple partners: Percent of women and men age 15-24 and 15-49 of those who had sex with more than 1 partner in the last 12 months

Condom use: Percent of women and men age 15-24 and 15-49 who had more than one sexual partner in the last 12 months reporting that a condom was used the last time they had sex

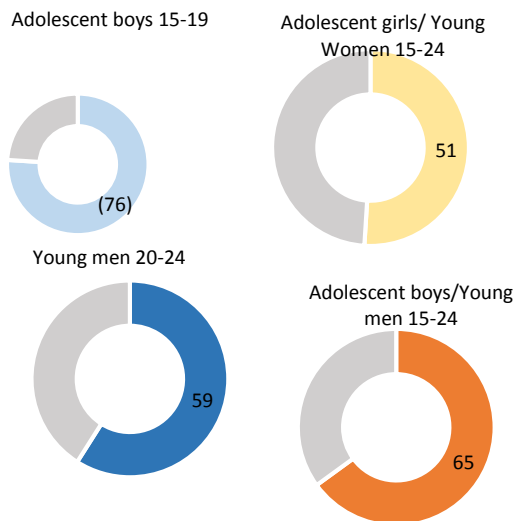
Sex before age 15: Percent of women and men age 15-24 who had sex before age 15

Sex with man 10 years or older: Percent of adolescent girls age 15-19 who had sex in the last 12 months who report having had sex with a man 10 or more years older in the last 12 months

() Figures that are based on 25-49 unweighted cases

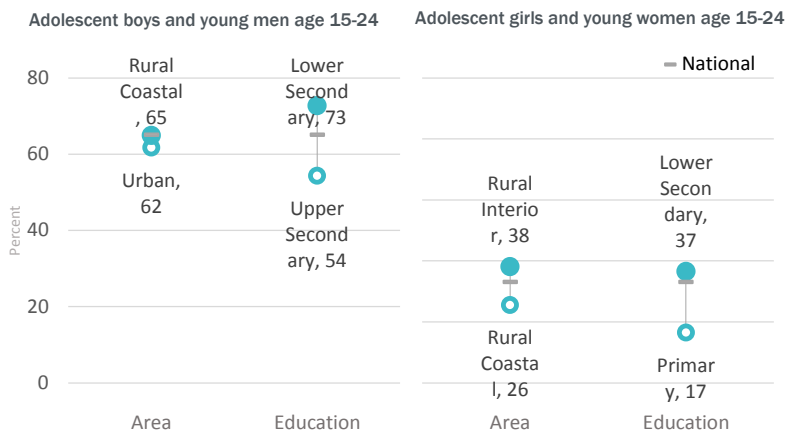
Sexual Behavior by Key Characteristics

Condom Use among Young People with Multiple Sex Partners



Percent of adolescents and young people age 15-24 who had more than one sexual partner in the last 12 months reporting that a condom was used the last time they had sex. The age categories 15-19 and 20-24 for girls and young women cannot be shown separately due to low response, which consist of lower than 25 unweighted cases for each category.

Condom Use among Young People with Non-regular partners

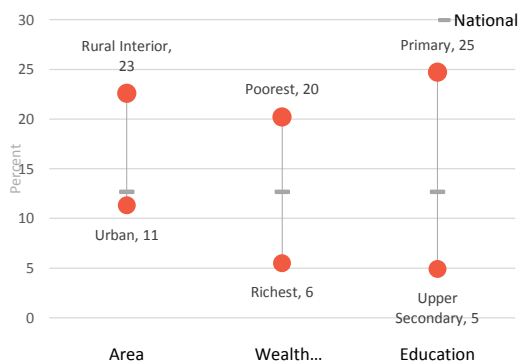


Percent of adolescents and young people age 15-24 reporting the use of a condom during the last sexual intercourse with a non-marital, non-cohabiting partner in the last 12 months (MICS indicator TM.28 - Condom use with non-regular partners). Only categories with 25 or more unweighted cases are considered for these inequality illustrations.

NOTE: percent of adolescents and young people age 15-24 who had more than one sexual partner in the last 12 months reporting that a condom was used the last time they had sex cannot be shown due to the number of less than 25 unweighted cases for the respective categories

Regional Data on Sexual Behavior

Sex before Age 15 among Adolescent Girls & Young Women 15-24



Percent of adolescent girls and young women age 15-24 who had sex before age 15. Only categories with 25 or more unweighted cases are considered for these inequality illustrations.

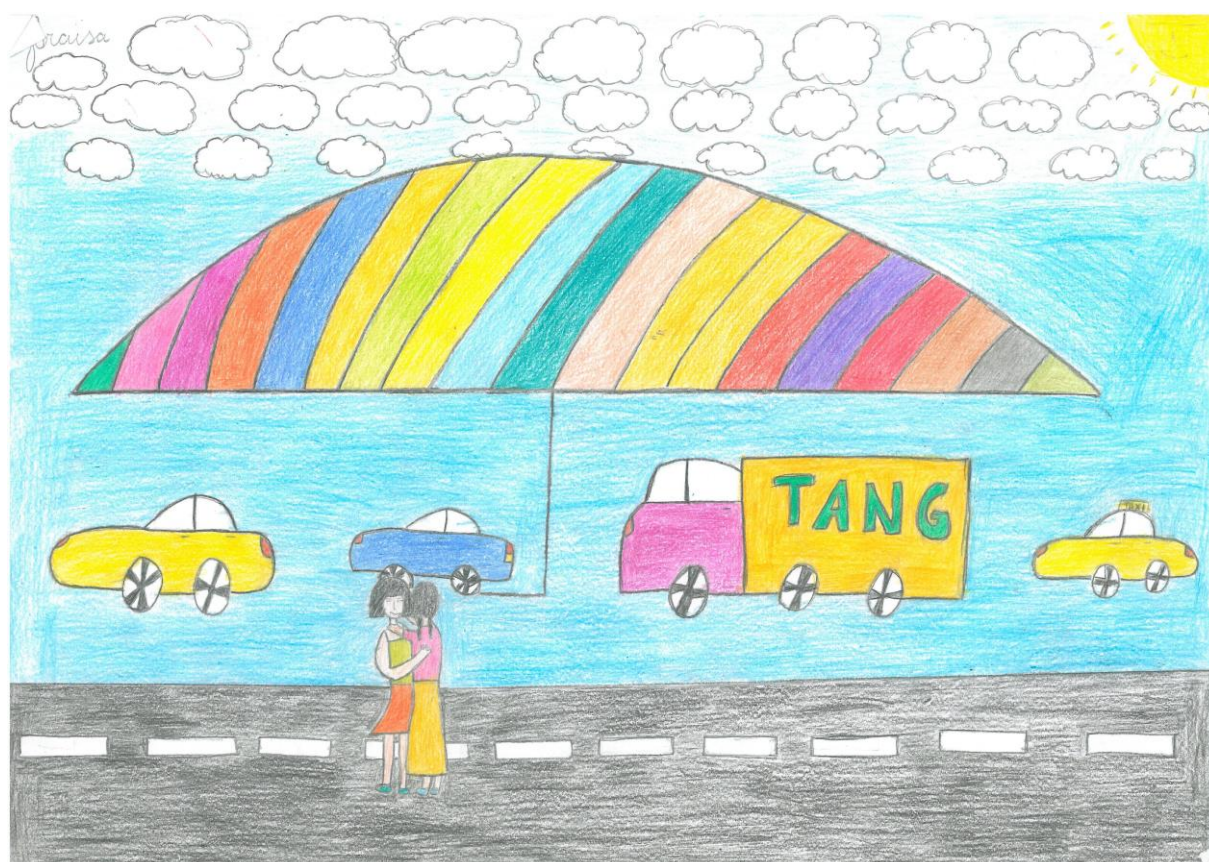
	Men 15-24		Women 15-24	
	Sex before 15	Condom use with NON-regular sex partner	Sex before 15	Condom use with Non-regular sex partner
National	18	66	13	33
Paramaribo	20	71	10	39
Wanica	16	54	13	32
Nickerie	12	(54)	10	12
Coronie	(*)	(*)	(6)	(*)
Saramacca	(4)	(*)	14	28
Commewijne	9	(70)	9	(12)
Marowijne	25	(75)	18	22
Para	14	(80)	18	28
Brokopondo	(37)	(65)	17	41
Sipaliwini	(21)	(58)	31	32

() Figures that are based on 25 -49 unweighted cases

(*) Figures that are based on less than 25 unweighted cases

Key Messages Sexual Behavior

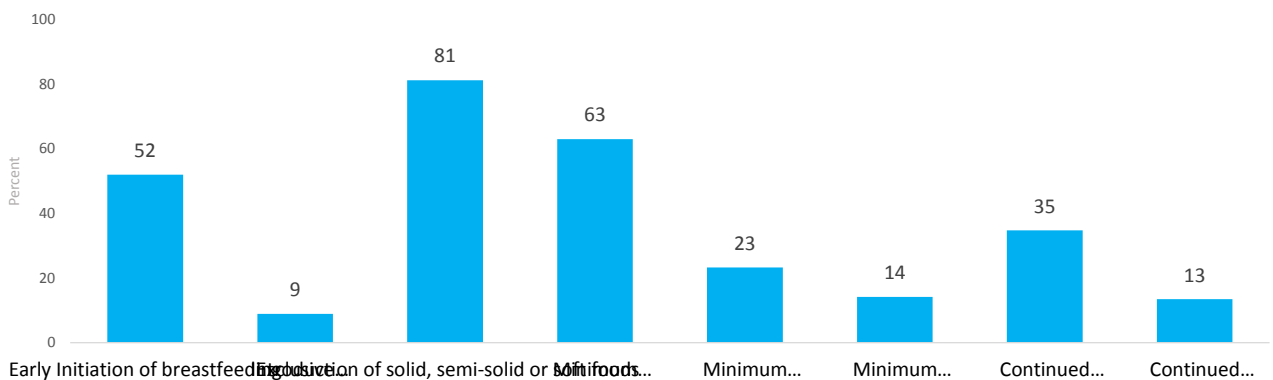
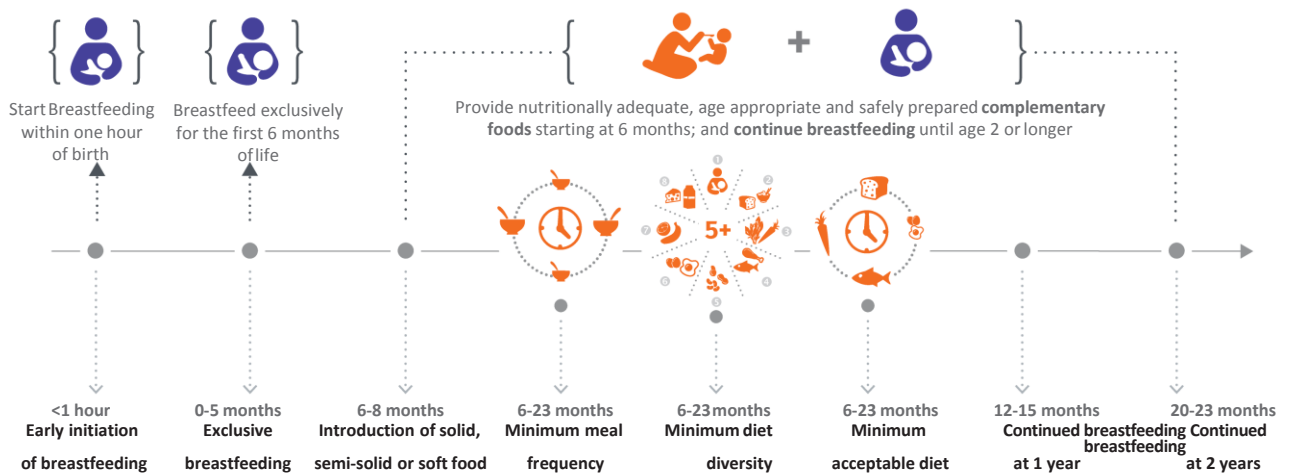
- ✓ 18% of men aged 15-24 years report having sex before age 15, and for young women this percentage is 13.
 - ✓ 8% of teenage girls aged 15-19 report having sex with a partner 10 years or older in the last year.
 - ✓ For both men and women (aged 15-49 years) reporting sex with multiple partners, condom use was around 50%.
 - ✓ Condom use among young men (15-24 years) who had sex in the last 12 months with a non-regular partner is higher (66%) compared to their female peers (33%).
 - ✓ Women having sex with a non-regular partner using a condom is the highest in the urban area and the lowest in rural coastal.
 - ✓ Sex before age 15 among young women is the highest for those living in the Interior, or girls with a lower educational background and for those belonging to the poorest wealth quintile.
- Data from this snapshot can be found in tables TM10.1M, TM10.1W, TM10.2M, TM10.2W, TM11.1M, TM11.1W, TM11.3M, TM11.3W, TM11.4M, TM11.4W, TM11.5, TM11.6M and TM11.6W of the Survey Findings Report (MICS 2018).



Infant & Young Child Feeding (IYCF)



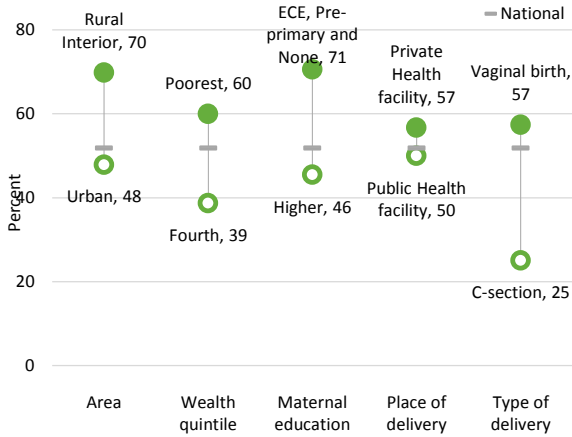
Infant & Young Child Feeding



Early initiation: percentage of newborns put to breast within 1 hour of birth; **Exclusive breastfeeding:** percentage of infants aged 0-5 months receiving only breastmilk; **Introduction to solids:** percentage of infants aged 6-8 months receiving solid or semi-solid food; **Minimum diet diversity:** percentage of children aged 6-23 months receiving 5 of the 8 recommended food groups; **Minimum meal frequency:** percentage of children aged 6-23 months receiving the recommended minimum number of solid/liquid feeds as per the age of child; **Minimum acceptable diet:** percentage of children aged 6-23 months receiving the minimum diversity of foods and minimum number of feeds; **Continued breastfeeding at 1 year:** percentage of children aged 12-15 months who continue to receive breastmilk; **Continued breastfeeding at 2 years:** percentage of children aged 20-23 months who continue to receive breastmilk.

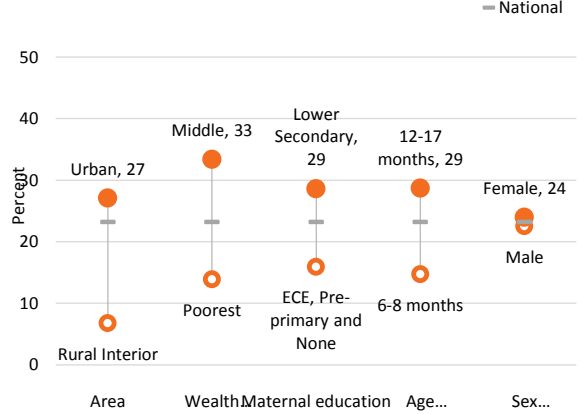
IYCF: Equity

Early Initiation of Breastfeeding



Percent of newborns put to the breast within one hour of birth, by background characteristics

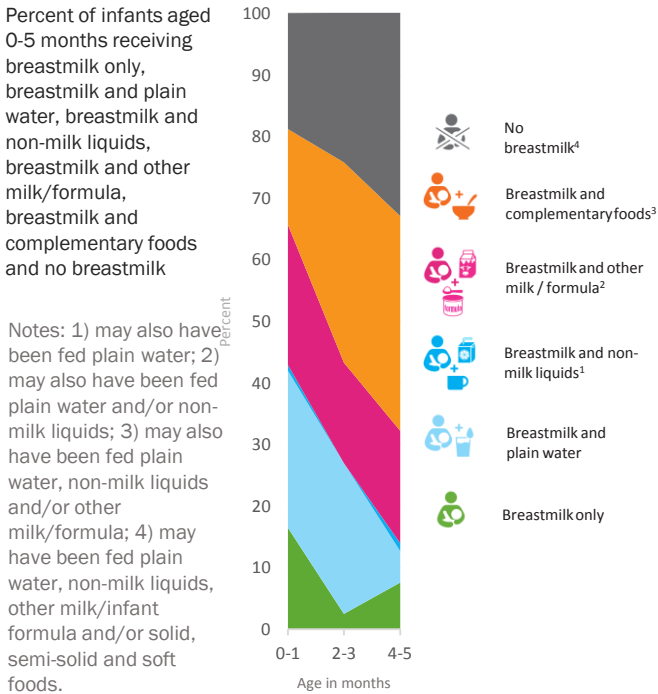
Minimum Diet Diversity



Percent of children aged 6-23 months that were fed food from at least 5 out of 8 food groups, by background characteristics

IYCF: What are the Youngest Infants Fed?

Liquids or foods consumed by infants 0-5 months old



Regional Data

Region	Early Initiation of breastfeeding	Minimum Diet Diversity
National		
Paramaribo	43	29
Wanica	52	26
Nickerie	60	23
Coronie	(*)	(*)
Saramacca	49	31
Commewijne	48	20
Marowijne	66	30
Para	51	15
Brokopondo	65	8
Sipaliwini	75	5

Percent of newborns put to the breast within one hour of birth, and per cent of children aged 6-23 months that were fed food from at least 5 out of 8 food groups by geographic region

(*) Figures that are based on less than 25 unweighted cases

Key Messages Infant & Young Child Feeding (IYCF)

- ✓ The survey shows that 52% of newborns were put to breast within 1 hour of birth, however the initiation of breastfeeding in case of a C-section is lower (25%).
- ✓ The highest rates of early initiation of breastfeeding is shown among women in the rural interior with the lowest level of well-being, among mothers with the lowest education level and from the lowest wealth quintile.
- ✓ Only 10% percent of infants aged 0-5 months are exclusively breastfed.
- ✓ The survey shows that 81% of the children start receiving solid or semi-solid food at 6-8 months.
- ✓ The percentage of children aged 12-15 months who continue to receive breastmilk (continued breastfeeding at 1 year) is 35%, while continued breastfeeding at 2 years is much lower: 13%.
- ✓ Diet diversity (minimum of 5 out of 8 food groups) is the highest in the urban area, among families in the richest wealth quintile and among mothers with higher education.
- ✓ Sipaliwini is the district with the highest early initiation of breastfeeding (75%), but also with the lowest diet diversity (5%).
- ✓ Paramaribo, the country's capital, on the other hand shows the contrary: early initiation of breastfeeding is 43%, the lowest among all districts. The minimum diet diversity for Paramaribo is 29%.
- Data from this snapshot can be found in tables TC.7.1, TC.7.2, TC.7.3, TC.7.5, TC.7.6, TC.7.7 of the Survey Findings Report (MICS 2018).



Nutritional Status of Children

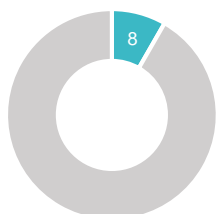


Anthropometric Malnutrition Indicators

Stunting: SDG 2.2.1



Stunting refers to a child who is too short for his or her age. Stunting is the failure to grow both physically and cognitively and is the result of chronic or recurrent malnutrition.

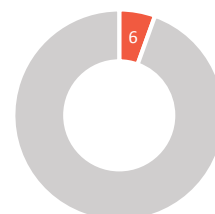


Percentage children under-5 who are stunted

Wasting: SDG 2.2.2



Wasting refers to a child who is too thin for his or her height. Wasting, or acute malnutrition, is the result of recent rapid weight loss or the failure to gain weight. A child who is moderately or severely wasted has an increased risk of death, but treatment is possible.

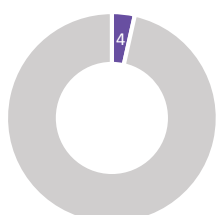


Percentage children under-5 who are wasted

Overweight: SDG 2.2.2



Overweight refers to a child who is too heavy for his or her height. This form of malnutrition results from expending too few calories for the amount consumed from food and drinks and increases the risk of noncommunicable diseases later in life.

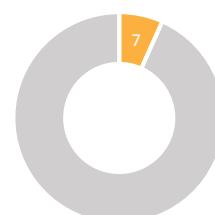


Percentage children under-5 who are overweight

Underweight

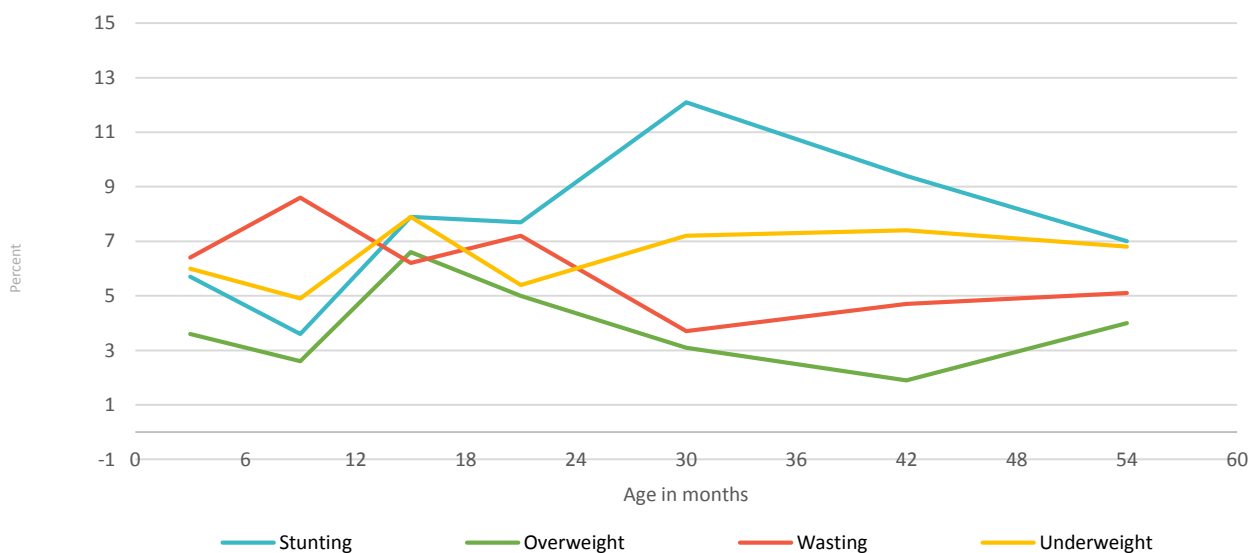


Underweight is a composite form of undernutrition that can include elements of stunting and wasting (i.e. an underweight child can have a reduced weight for their age due to being too short for their age and/or being too thin for their height).



Percentage children under-5 who are underweight

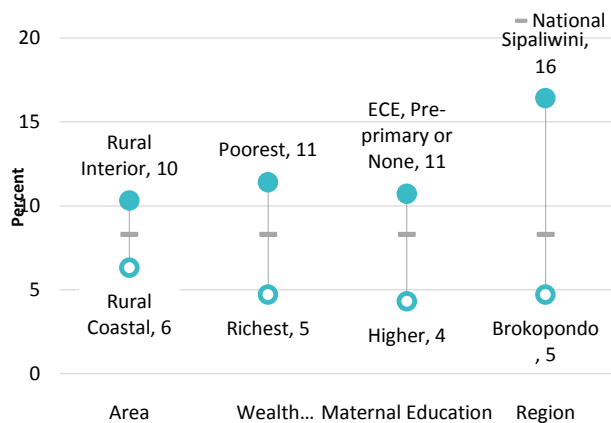
Anthropometric Malnutrition Indicators by Age



Percentage children who are underweight, stunted, wasted and overweight, by age in months

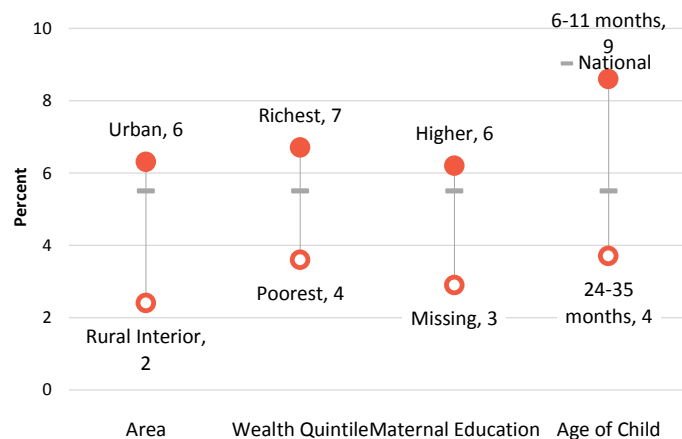
Nutritional Status of Children: Disaggregates

Stunting: SDG 2.2.1



Percentage of under 5 children who are stunted, by background characteristics

Wasting: SDG 2.2.2



Percentage of under 5 children who are wasted, by background characteristics

Regional Data on Stunting, Overweight & Wasting

	Stunting: SDG 2.2.1	Overweight: SDG 2.2.2	Wasting	
	% stunted (moderate and severe)	% overweight (moderate and severe)	% wasted (moderate and severe, SDG 2.2.2)	% wasted (severe)
National	8	4	6	1
Paramaribo	8	3	5	1
Wanica	8	3	6	1
Nickerie	9	3	15	1
Coronie	8	13	1	0
Saramacca	5	2	7	1
Commewijne	9	4	9	4
Marowijne	5	3	3	0
Para	7	10	4	0
Brokopondo	5	4	2	0
Sipaliwini	16	3	3	1

Key Messages Nutritional Status of Children

- ✓ The anthropometric indicators for malnutrition for children under 5 are below 10%: Stunting: 8%, Wasting: 6%, Overweight: 4% and Underweight: 7%.
- ✓ Malnutrition by age (0-59 months) shows an almost steady trend, around 7-8% with an increase around month 30 for stunting and a drop for overweight around month 42.
- ✓ The highest incidence of stunting is found among households in the rural interior area, the poorest households and households with the lowest educational level, while their peers in the urban, the richest wealth quintile and the higher educated ones, face the lowest incidence of stunting.
- ✓ District Sipaliwini has the highest prevalence of stunting, Coronie for overweight, Nickerie for wasted (moderate and severe), while Commewijne has the highest severe wasted under 5 children.
- Data from this snapshot can be found in table TC. 8.1 of the Survey Findings Report (MICS 2018).

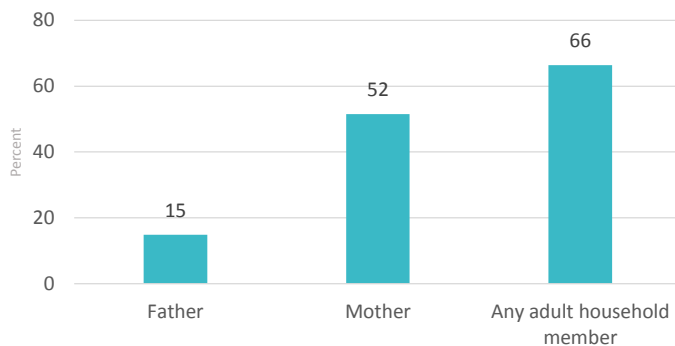


Early Childhood Development



Support for Learning

Early Stimulation & Responsive Care



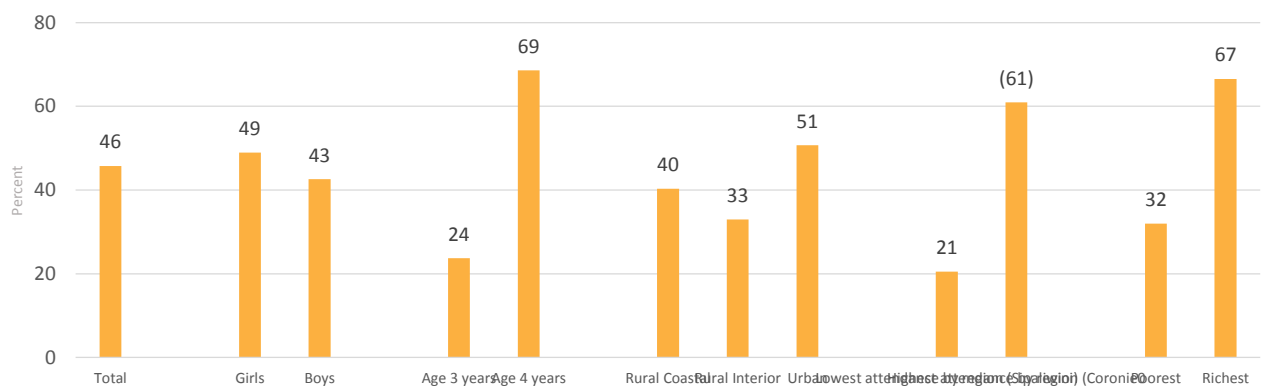
Percentage of children age 2-4 years with whom the father, mother or adult household members engaged in activities that promote learning and school readiness during the last three days

Note: Activities include: reading books to the child; telling stories to the child; singing songs to the child; taking the child outside the home; playing with the child; and naming, counting or drawing things with the child

Early childhood, which spans the period up to 8 years of age, is critical for cognitive, social, emotional and physical development. During these years, a child's newly developing brain is highly plastic and responsive to change. Optimal early childhood development requires a stimulating and nurturing environment, access to books and learning materials, interactions with responsive and attentive caregivers, adequate nutrients, access to good quality early childhood education, and safety and protection. All these aspects of the environment contribute to developmental outcomes for children.

Children facing a broad range of risk factors including poverty; poor health; high levels of family and environmental stress and exposure to violence, abuse, neglect and exploitation; and inadequate care and learning opportunities face inequalities and may fail to reach their developmental potential. Investing in the early years is one of the most critical and cost-effective ways countries can reduce gaps that often place children with low social and economic status at a disadvantage.

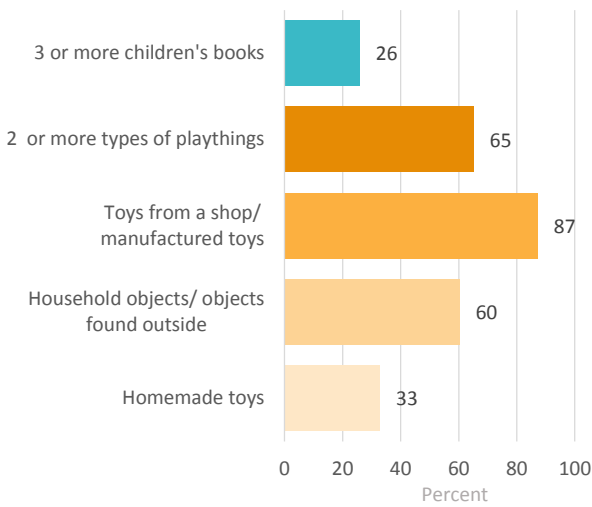
Attendance at Early Childhood Education Programmes



Percentage of children aged 36-59 months attending an early childhood education program, by background characteristics
() Figures that are based on 25-49 unweighted cases

Learning Materials & Child Supervision

Access to Play & Learning Materials



Percentage of children under age five according to their access to play and learning materials

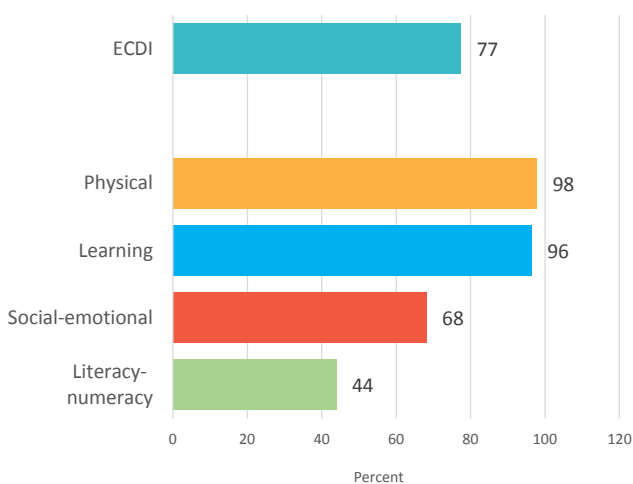
Inadequate supervision of children

Region	Left in inadequate supervision
National	6
Paramaribo	7
Wanica	3
Nickerie	3
Coronie	3
Saramacca	5
Commewijne	5
Marowijne	5
Para	5
Brokopondo	7
Sipaliwini	10

Percentage of children under age five left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once in the last week, by region

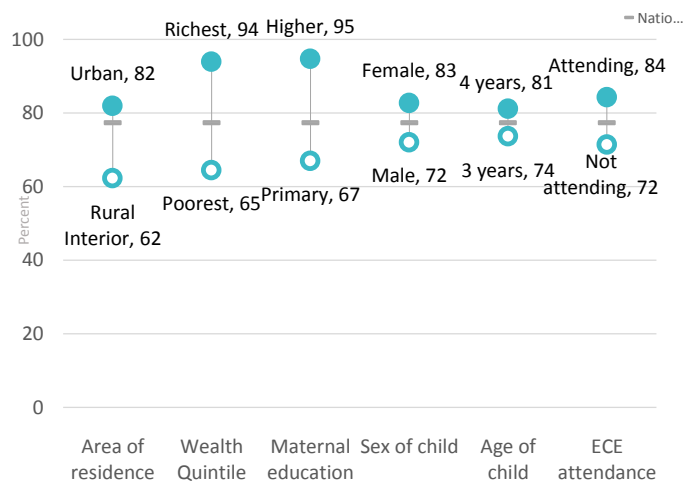
Early Childhood Development Index (ECDI)

ECDI: Total Score & Domains, SDG 4.2.1



ECDI: Early Childhood Development Index; percentage of children age 3-4 years who are developmentally on track in literacy-numeracy, physical, social-emotional, and learning domains

ECDI: Disaggregates



ECDI by various characteristics
ECE = early childhood education

Key Messages Early Childhood Development

- ✓ Early stimulation and responsive care for children aged 2–4 years carried out mainly by any adult household member is 66%, followed by the mother (52%). The father’s participation is very low at 15%.
- ✓ Attendance in ECE program is highest among girls, children of 4 years old, children from urban areas and children from the richest wealth quintile.
- ✓ The vast majority of children under 5 years have access to toys from the store (87%), 2 or more types of playthings (65%), household items including objects found outside (60%) and a lower percentage of children have access to homemade toys (33%) and 3 or more playbooks (26%).
- ✓ 72% of children aged 3-4 years were developmentally on track in at least 3 of 4 domains. Physical development and learning are quite high (98% & 96%), while the literacy-numeracy rate is much lower, 44%.
- ✓ The percentage of children under 5 years that were left alone or were under the supervision of other children younger than 10 years of age is highest in Sipaliwini (8%) followed by Paramaribo (7%) and Brokopondo (7%).
- Data from this snapshot can be found in tables TC10.1, LN1.1, TC10.2, TC10.3, and TC11.1 of the Survey Findings Report (MICS 2018).

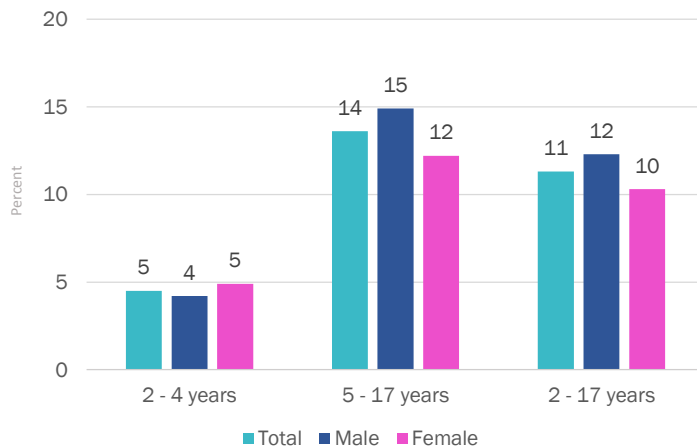


Child Functioning



Child Functioning: Levels & Domains

Child Functioning Levels by Age-Group



Children with disabilities are among the most marginalized groups in society. Facing daily discrimination in the form of negative attitudes, and lack of adequate policies and legislation, children with disabilities are effectively barred from realizing their rights to health, education, and even survival. Children with disabilities are often likely to be among the poorest members of the population and are less likely to attend school, access medical services, or have their voices heard in society. Discrimination against and exclusion of children with disabilities also puts them at a higher risk of physical and emotional abuse or other forms of neglect, violence and exploitation.

The Convention on the Rights of the Child (UNICEF, 1989) and the more recent Convention on the Rights of Persons with Disabilities (UN, 2006) explicitly state the rights of children with disabilities on an equal basis with other children.

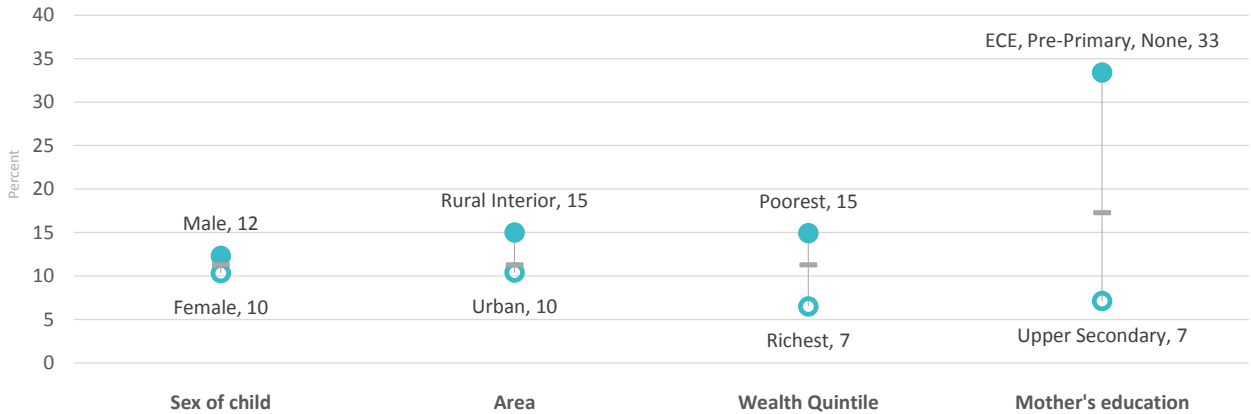
These Conventions focus on the disparities faced by children with disabilities and call for improvements in their access to services, and in their participation in all aspects of life. In order to achieve these goals, there is a need for cross-nationally comparable, reliable data.

Child Functioning Domains

National	Seeing	Hearing	Walking	Fine Motor	Communication	Learning	Playing	Controlling Behavior	Self care	Remembering	Concentrating	Accepting Change	Making Friends	Anxiety	Depression
2-4 years	0.1	0.1	0.1	0.0	1.3	0.9	0.4	2.7	N/A	N/A	N/A	N/A	N/A	N/A	N/A
5-17 years	0.5	0.1	1.9	N/A	1.0	2.2	N/A	3.8	0.7	1.6	0.8	2.8	1.4	4.4	2.0

Percentage of children age 2–17 years with functional difficulty in at least one domain, by domain of difficulty at national level
N/A- Not Applicable

Child Functioning: Inequalities



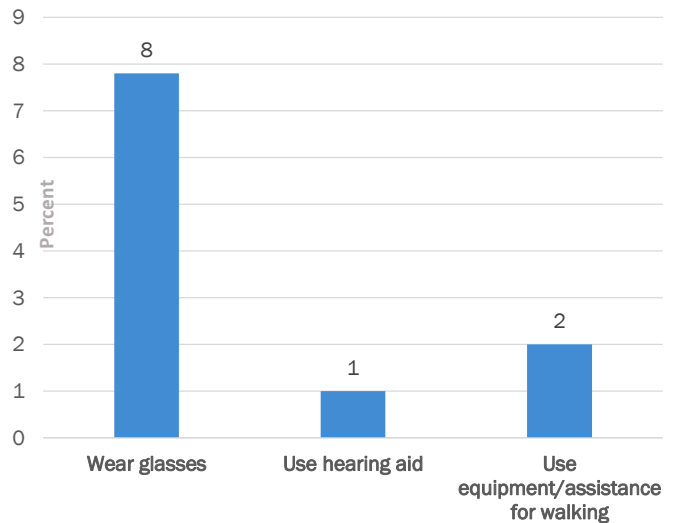
Percentage of children age 2-17 years with functional difficulty in at least one domain

Regional Data on Child Functioning

Region	2-4 years	5-17 years	2-17 years
National	5	14	11
Paramaribo	6	14	12
Wanica	6	11	9
Nickerie	0	7	6
Coronie	1	19	16
Saramacca	3	11	9
Commewijne	3	10	8
Marowijne	1	14	10
Para	3	19	15
Brokopondo	2	25	19
Sipaliwini	5	14	11

Percentage of children age 2-17 years with functional difficulty in at least one domain, by region

Children who use Assistive Devices & have Functional Difficulties



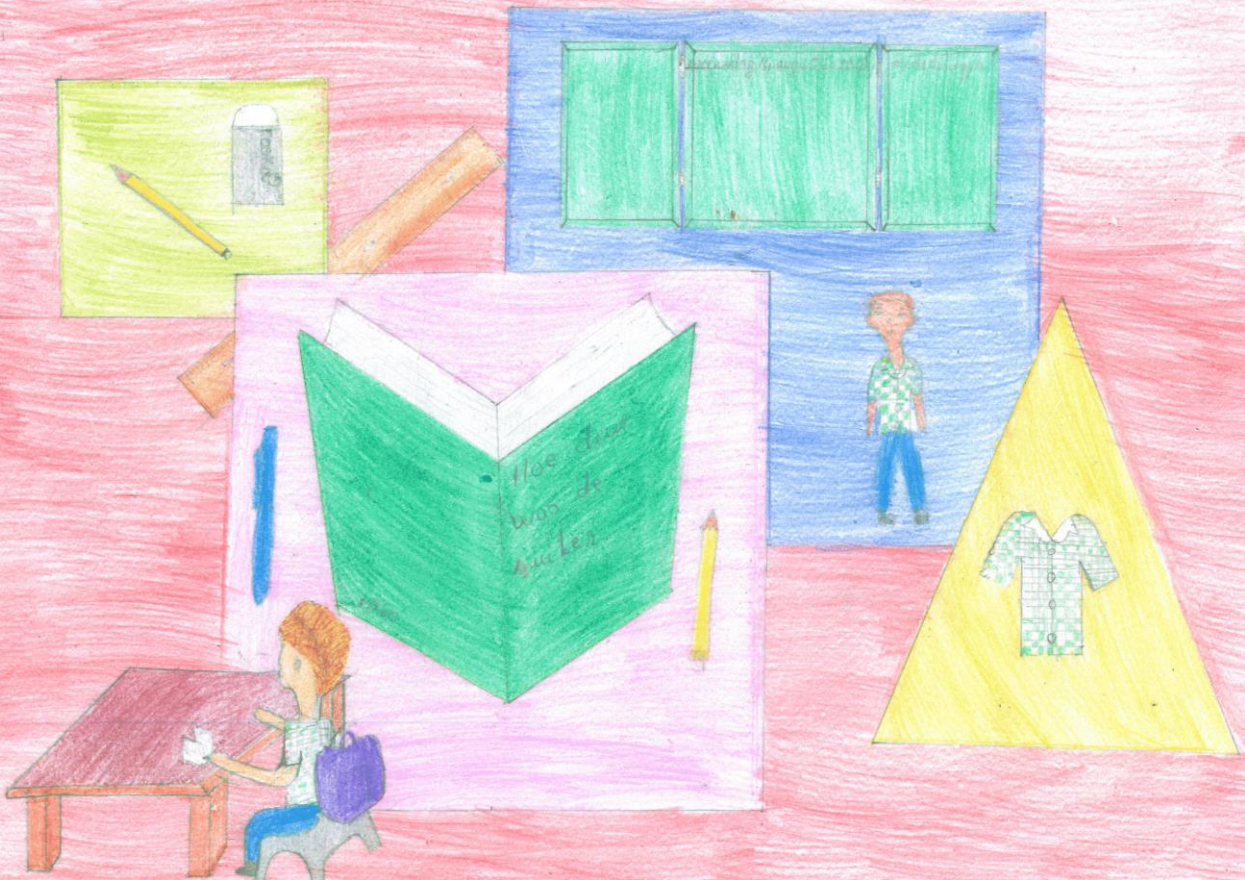
Percentage of children age 2-17 years with difficulties seeing when wearing glasses among those who wear glasses, percentage of children age 2-17 years with hearing when using a hearing aid among those who use a hearing aid, and percentage of children age 2-17 years with difficulties walking when using equipment or receiving assistance among those who use equipment or receive assistance walking

Key Messages Child Functioning

- The percentage of children aged 2–17 years with functional difficulty in at least one domain is about 11% at national level.
- Boys have a slightly higher incidence of functional difficulty (12%) than girls (10%).
- The incidence of functioning difficulty for children aged 2-4 years is around 5 percent at national level.
- Children aged 5-17 years have more functional difficulties due to anxiety (4 %), followed by controlling behavior (4 %) and accepting change (3%).
- Functional difficulties by physical disability as seeing and hearing are the domains with the relatively lowest percentage (respectively 0.5 and 0,1 %)
- Inequality: percentage of children aged 2-17 years with functional difficulty in at least one domain is 15% for the poorest wealth quintile and 7% for the richest; 33% for children with no information on mothers' education level versus 7% for those with an upper secondary level education .
- Data from this snapshot can be found in tables EQ1.1, EQ1.2, and EQ1.3 of the Survey Findings Report (MICS 2018).

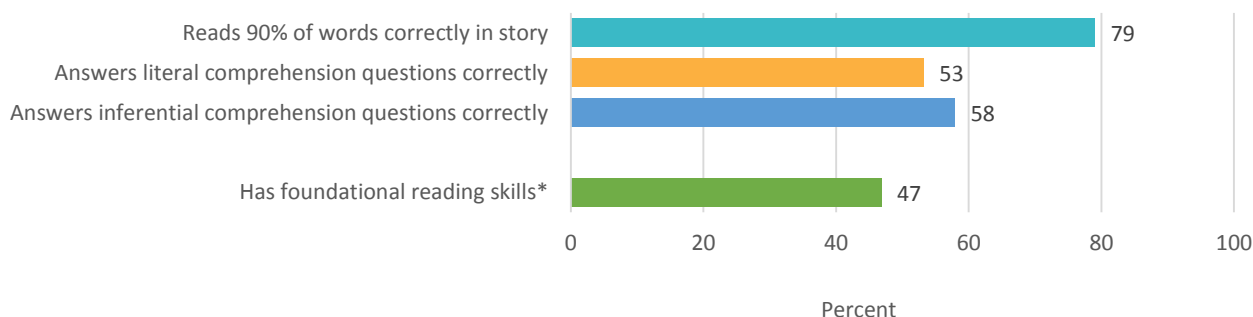


Early Grade Learning & Parental Involvement



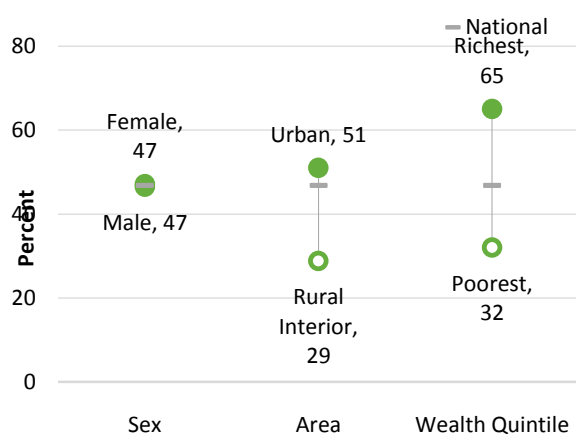
Early Grade Learning

Foundational Reading Skills: SDG 4.1.1.(a) (I: reading)



*Percentage of children age 7-14 who can 1) read 90% of words in a story correctly, 2) Answer three literal comprehension questions, 3) Answer two inferential comprehension questions

Disaggregates in Foundational Reading Skills



Regional Data on Foundational Reading Skills

Region	Boys	Girls	Total
National	47	47	47
Paramaribo	53	51	52
Wanica	54	46	50
Nickerie	48	68	57
Coronie	(*)	(*)	(40)
Saramacca	(45)	51	48
Commewijne	56	50	53
Marowijne	18	33	26
Para	35	47	40
Brokopondo	(35)	28	32
Sipaliwini	16	(37)	24

() Figures that are based on 25-49 unweighted cases

(*) Figures that are based on less than 25 unweighted cases

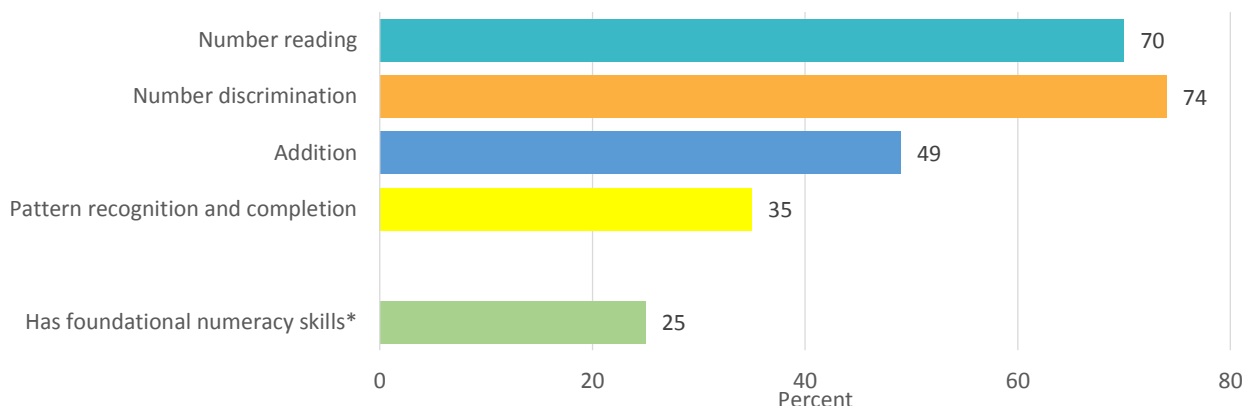
Key Messages Early Grade Learning & Parental Involvement

- ✓ Reading and numerical skills of children aged 7-14 years is as follows: about 80% can read 90% of words in a story correctly, but only 47% have appropriate foundational reading skills.
- ✓ Foundational reading skills for boys are equal to girls, 47%.
- ✓ Children living in the interior (29%) or those who belong to the poorest wealth quintile (32%) have the lowest foundational reading skills versus those living in the urban (51%) or belonging to the richest group (65%) with the highest reading skills.
- ✓ 70% of the children can read numbers, but only 25% have (the age appropriate) foundational numerical skills.
- ✓ Foundational numerical skills are 2 percent points higher for girls than boys.
- ✓ Children living in the interior have the lowest foundational numerical skills.
- ✓ About 90% of the parents received a report card from the school.
- ✓ Although 27% report that the school has a governing body open to parents, only 15% of parents attend a meeting called by the school management.
- ✓ 81% of the parents attend meetings with teachers to discuss their children's progress and 29% were involved in celebration, sport- or school activities.
- ✓ More than 50% of the children receive help at home for schoolwork, and more than 70% reads books or books are read to them.
- ✓ About 70% of the richest children have more than 3 books to read at home, while only 32% of the poorest have this number.
- ✓ 19% of children living in the rural interior have more than 3 books, while about 60% of the children in the urban have more than 3 books.
- Data from this snapshot can be found in table LN.3.1, LN.3.3, LN.4.1 and LN.4.2 of the Survey Findings Report (MICS 2018).



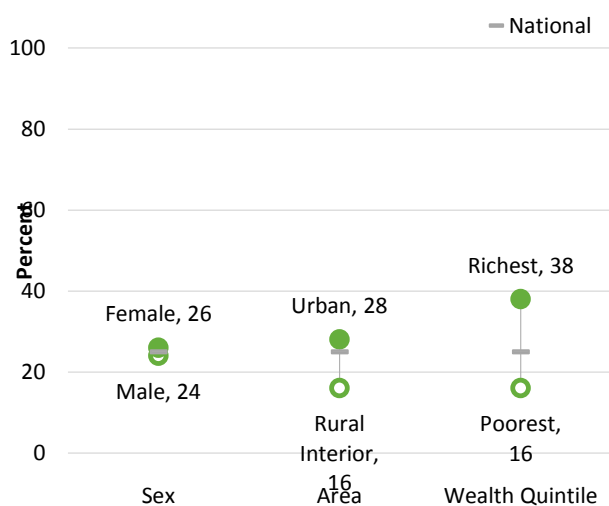
Early Grade Learning

Foundational Numeracy Skills: SDG 4.1.1.(a) (ii: numeracy)



*Percentage of children age 7-14 who can successfully perform 1) a number reading task, 2) a number discrimination task, 3) an addition task and 4) a pattern recognition and completion task

Disaggregates in Foundational Numeracy Skills



Regional Data on Foundational Numeracy Skills

Region	Boys	Girls	Total
National	24	26	25.0
Paramaribo	22	30	26
Wanica	35	24	30
Nickerie	11	42	24
Coronie	(*)	(*)	(29)
Saramacca	(27)	29	28
Commewijne	23	34	28
Marowijne	6	22	14
Para	21	14	18
Brokopondo	(19)	20	19
Sipaliwini	15	(3)	11

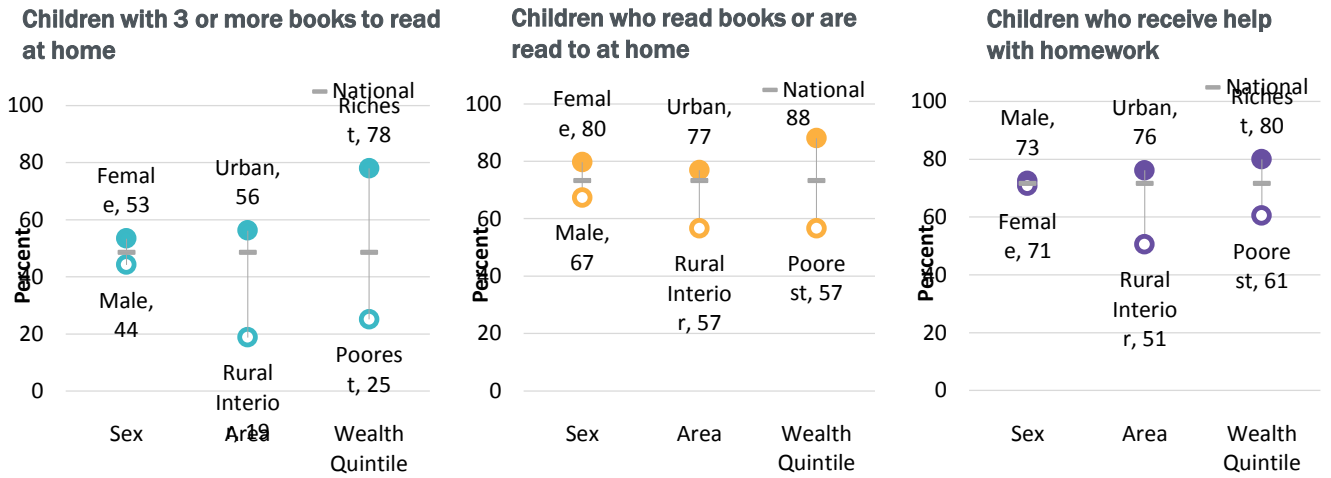
() Figures that are based on 25-49 unweighted cases

(*) Figures that are based on less than 25 unweighted cases

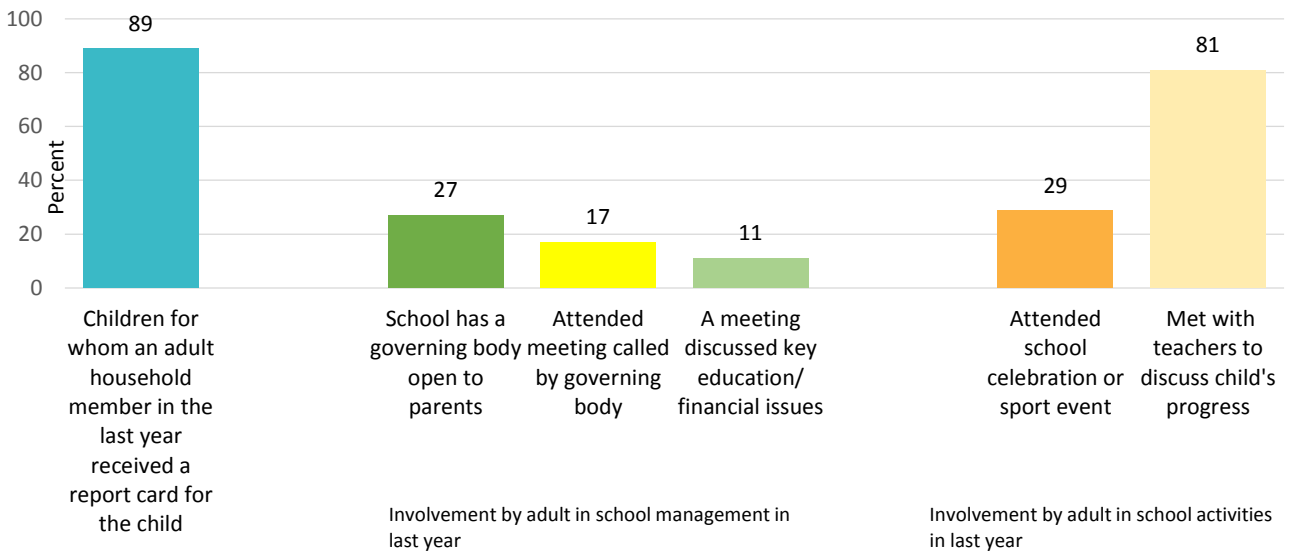
Reading & Numeracy Skills Data in MICS

- The Foundational Learning module adopts a direct assessment method for children's early learning in reading and mathematics at the level of Grade 2 in primary education. This contributes to SDG4.1.1.(a) Global Indicator.
- For the Foundational Learning module, one child age 7 to 14 (inclusively) is randomly selected in each household.
- The content of reading assessment is customized in each country, ensuring that the vocabulary used are part of the Grade 2 reading textbook. This ensures national question relevance in terms of vocabulary and cultural appropriateness). The questions on mathematics are based on universal skills needed for that grade level.
- As MICS also collects data on school attendance and numerous individual and household characteristics, such as location, household socio-economic status, and ethnicity, the most marginalized sub-populations of children can be identified for support to improve learning outcomes.

Parental Involvement: Learning Environment at Home



Parental Involvement: Support for learning at School

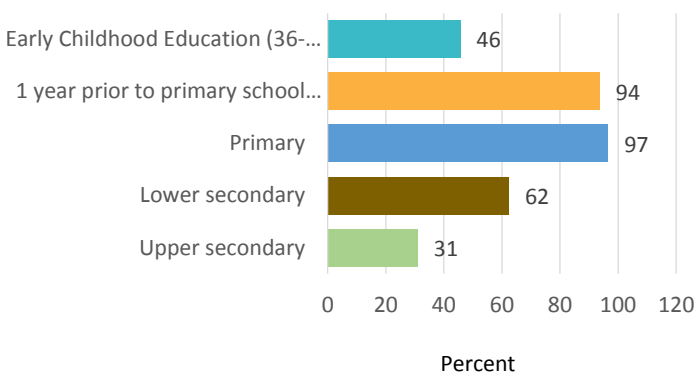


Education



Attendance Rates & Inequalities

School Net Attendance Rates (adjusted)



School Net Attendance Rates (adjusted)

Early childhood education (LN1.1): Percentage of children age 36-59 months who are attending early childhood education;

Participation rate in organized learning : Percentage of children of age one year before official primary school entry age (as of the beginning of school year) who are attending early childhood education or primary school;

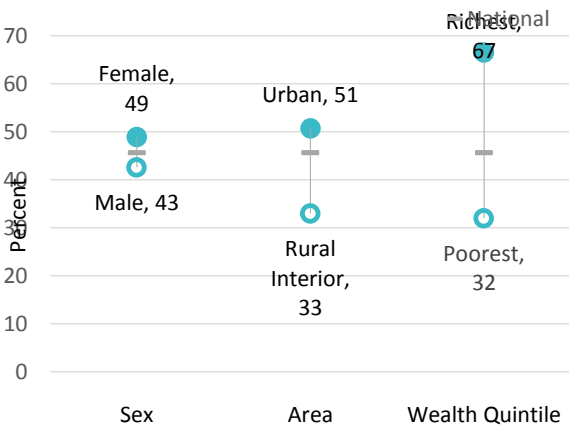
Primary school: Percentage of children of primary school age (as of the beginning of school year) who are attending primary or secondary school;

Lower secondary: Percentage of children of lower secondary school age (as of the beginning of the current or most recent school year) who are attending lower secondary school or higher;

Upper secondary: Percentage of children of upper secondary school age (as of the beginning of the current or most recent school year) who are attending upper secondary school or higher

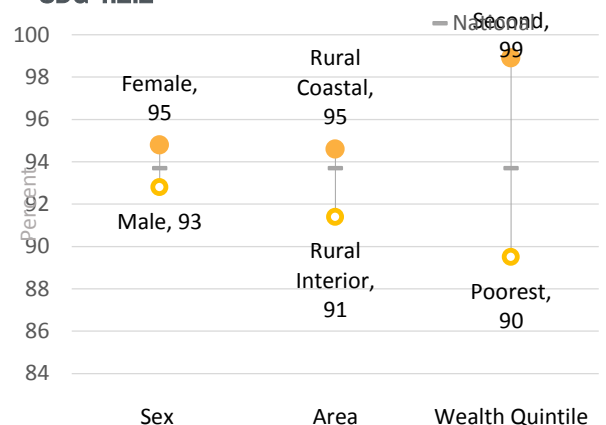
Inequalities in Attendance in Early Childhood Education (including pre-primary schooling) & Participation in Organized Learning

Net Attendance Rate for Early Childhood Education



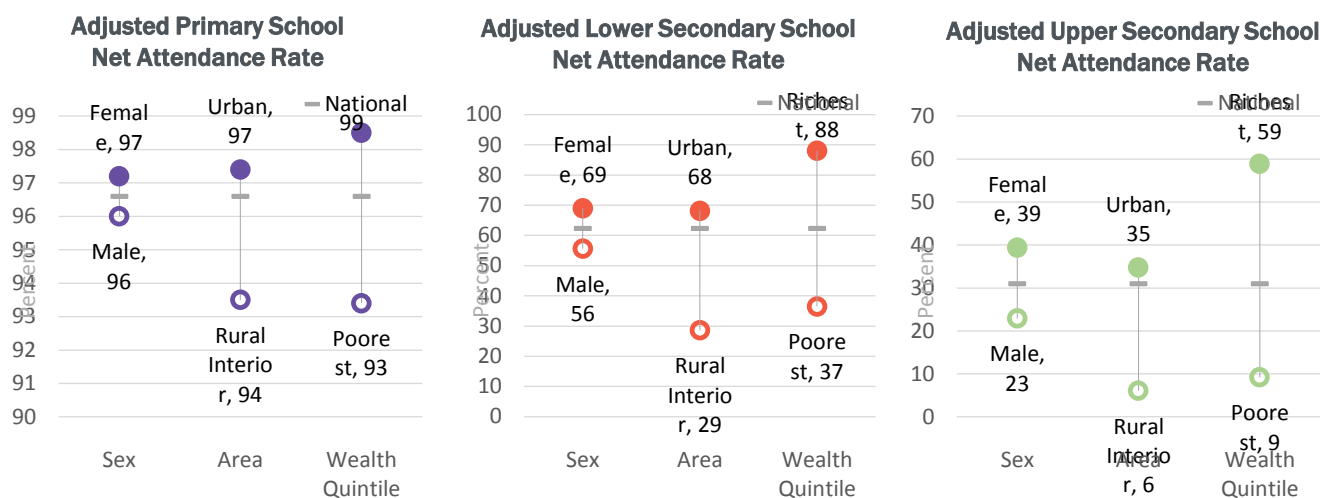
Percentage of children age 36-59 months who are attending early childhood education including pre-primary education.

Participation Rate in Organized Learning (1 Year Prior to Primary Entry Age): SDG 4.2.2



Percentage of children attending an early childhood education programme, or primary education (adjusted net attendance ratio), who are one year younger than the official primary school entry age at the beginning of the school year

Inequalities in Attendance Rates



Percentage of children of primary school age (as of the beginning of school year) who are attending primary or secondary school

Percentage of children of lower secondary school age (as of the beginning of the current or most recent school year) who are attending lower secondary school or higher

Percentage of children of upper secondary school age (as of the beginning of the current or most recent school year) who are attending upper secondary school or higher

Regional Data for Net Attendance Rates (adjusted)

Region	Early Childhood Education (including pre-primary education)	Participation rate in organized learning	Primary	Lower Secondary	Upper Secondary
National	46	94	97	62	31
Paramaribo	55	94	96	67	34
Wanica	48	94	99	67	35
Nickerie	38	91	99	78	38
Coronie	(61)	(*)	96	64	(13)
Saramacca	41	99	96	72	33
Commewijne	33	100	98	75	41
Marowijne	36	89	94	55	10
Para	47	91	96	56	24
Brokopondo	44	(93)	97	37	7
Sipaliwini	20	90	90	18	5

() Figures that are based on 25-49 unweighted cases

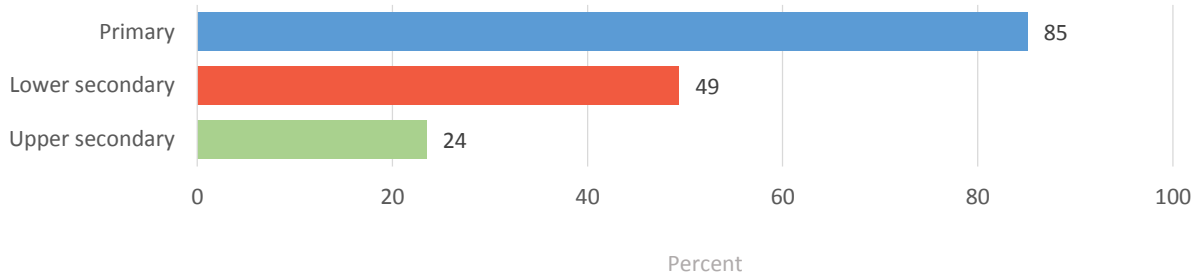
(*) Figures that are based on less than 25 unweighted cases

Key Messages Education

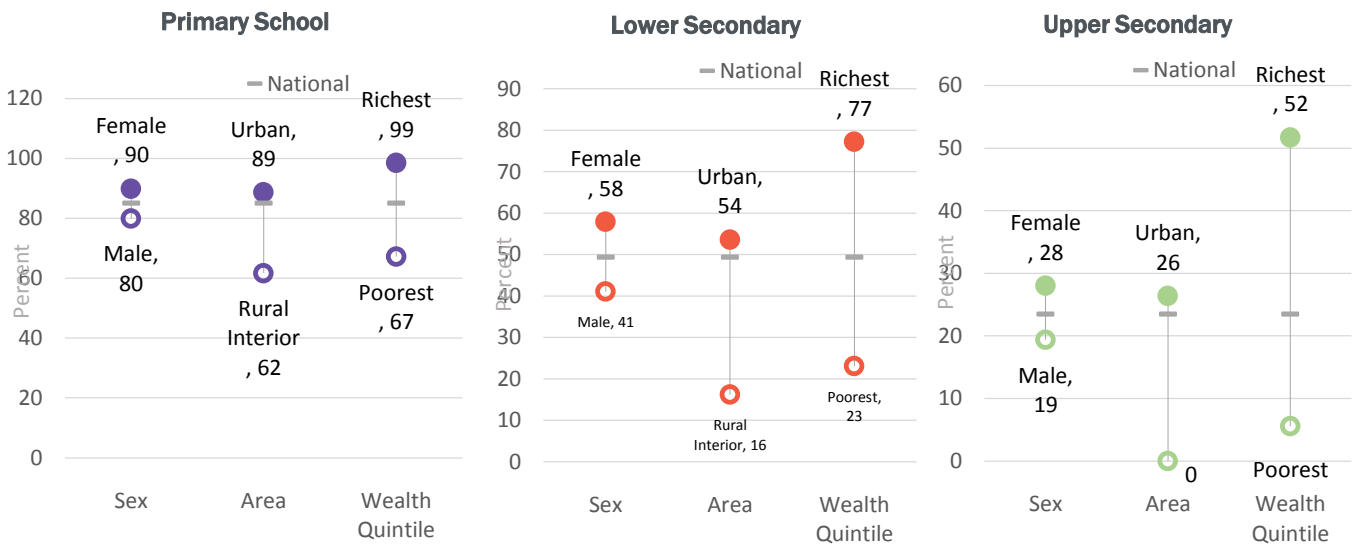
- ✓ The attendance rate in early childhood education among children aged 36-59 months is 46%. Organized early childhood at 36 months is not mandatory in Suriname.
- ✓ There is a higher participation rate in organized learning programs (1 year before the age of enrollment in primary school) at 94%.
- ✓ 97% of children attend primary schools however a decrease in attendance is observed at lower secondary school level (64%) and further down to upper secondary school level (31%).
- ✓ The highest participation rate in organized learning was recorded in Commewijne (100%) and the lowest in Marowijne (89%).
- ✓ The highest attendance rate in primary school was recorded for Wanica and Nickerie, and for the lower secondary school the highest rate was for Nickerie (78%).
- ✓ The lowest attendance rate at upper secondary level is found in the districts Sipaliwini (5%) and Brokopondo (7%). This is not surprising since these districts do not have schools at this level.
- Data from this snapshot can be found in table LN.1.1, LN.1.2, LN.2.3, LN.2.4, LN.2.5, LN.2.6, and LN.2.7 of the Survey Findings Report (MICS 2018).



Completion Rates



Inequalities in Completion Rates



Percentage of children who age 3 to 5 years above the intended age for the last grade of primary school who have completed primary education

Percentage of children who age 3 to 5 years above the intended age for the last grade of lower secondary school who have completed lower secondary education

Percentage of children or youth who age 3 to 5 years above the intended age for the last grade of upper secondary school who have completed upper secondary education

Regional Data In Completion Rates

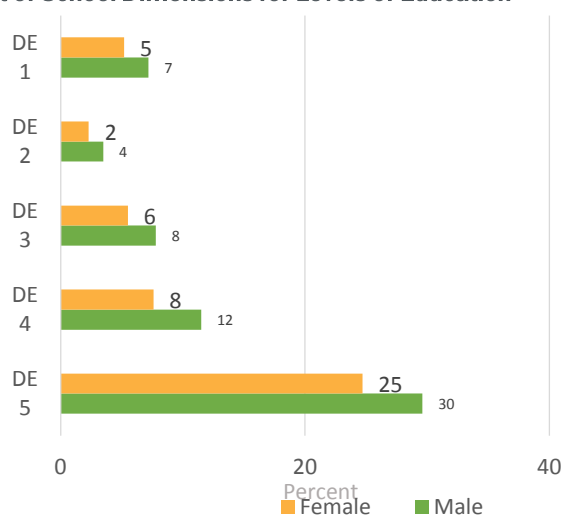
Region	Primary	Lower Secondary	Upper Secondary
National	85	49	23
Paramaribo	90	51	32
Wanica	85	56	22
Nickerie	95	50	16
Coronie	(87)	(53)	(*)
Saramacca	84	49	28
Commewijne	97	67	27
Marowijne	83	23	5
Para	82	40	13
Brokopondo	65	18	(0)
Sipaliwini	57	13	(0)

() Figures that are based on 25-49 unweighted cases

(*) Figures that are based on less than 25 unweighted cases

Out of School Rates

Out of School Dimensions for Levels of Education



Dimension 1: Children not attending an early childhood education programme or primary education

Dimension 2: Children of primary school age who are not in primary or secondary school

Dimension 3: Children of lower secondary school age who are not in primary or secondary school

Dimension 4: Children who are in primary school but at risk of dropping out (overage by 2 or more years)

Dimension 5: Children who are in lower secondary school but at risk of dropping out (overage by 2 or more years)

SDG Summary for Education

SDG	MICS Indicator	Definition & Notes	Value
4.1.4	LN.8 a,b,c	Completion rate (primary education, lower secondary, upper secondary education)	85%/49%/24%
4.1.5	LN.6 a,b,c	Out-of-school rate (primary education, lower and upper secondary education)	3%/7%/28%
4.1.6	LN.10 a,b,	Percentage of children over-age for grade (primary education, lower secondary education)	10%/27%
4.2.2	LN.2	Participation rate in organized learning (one year before the official primary entry age), by sex	M:93%/F:95%
4.5.1	LN.5 a	Parity indices (female/male, rural Interior/urban, bottom/top wealth quintiles) for primary adjusted net attendance rate	1.01/0.96/0.96
4.5.1	LN.5 b	Parity indices (female/male, rural Interior/urban, bottom/top wealth quintiles) for lower secondary adjusted net attendance rate	1.24/0.42/0.41

Key Messages Out of School rates

- ✓ Completion rates are higher at the primary education level with 85% and progressively decreasing at the lower secondary and upper secondary level with respectively 49% and 24%.
- ✓ The disparities in completion rates increases as children transit from primary to lower secondary and on to upper secondary education level.
- ✓ Completion rates are higher for children living in urban areas and those belonging to the richest wealth quintile compared to their peers in the rural areas and the poorest wealth quintile.
- ✓ The attendance rate at national level is decreasing by level of education: attendance rate for primary school is about 92%, followed by lower secondary with less than 70% and upper secondary with less than 35%.
- ✓ The out of school rate is the highest for males (30%) at dimension 5 (children who are in lower secondary school but at risk of dropping out (overage by 2 or more years)).
- Data from this snapshot can be found in table LN.1.1, LN.1.2, LN.2.3, LN.2.4, LN.2.5, LN.2.6, and LN.2.7 of the Survey Findings Report (MICS 2018).



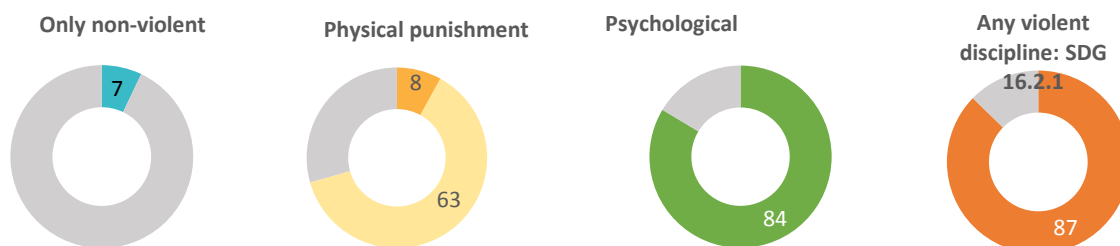
Child Discipline



Child Discipline

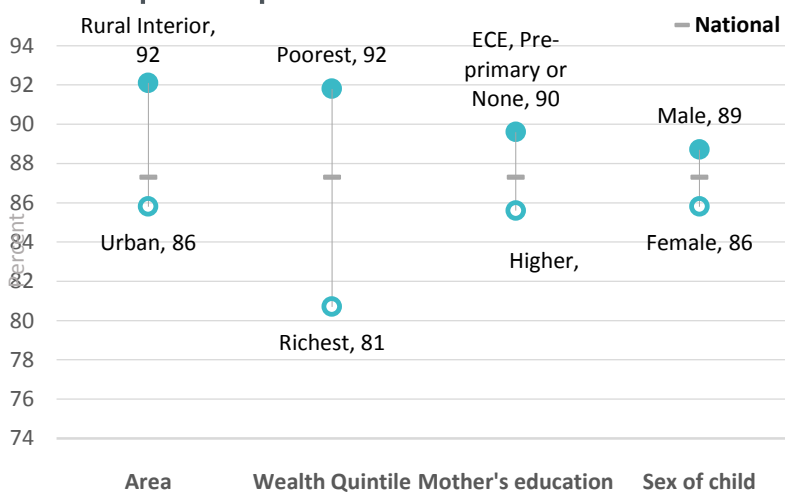
Child Discipline

Types of Child Discipline



Percentage of children age 1 to 14 years who experienced any discipline in the past month, by type

Violent Discipline: Inequalities



Physical punishment: Shaking, hitting or slapping a child on the hand/arm/leg, hitting on the bottom or elsewhere on the body with a hard object, spanking or hitting on the bottom with a bare hand, hitting or slapping on the face, head or ears, and hitting or beating hard and repeatedly.

Severe physical punishment: Hitting or slapping a child on the face, head or ears, and hitting or beating a child hard and repeatedly.

Psychological aggression: Shouting, yelling or screaming at a child, as well as calling a child offensive names such as 'dumb' or 'lazy'.

Violent discipline: Any physical punishment and/or psychological aggression.

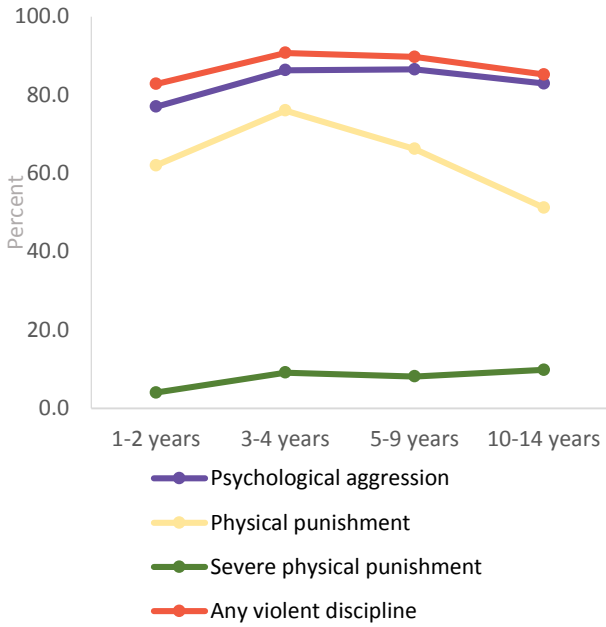
Percentage of children aged 1 to 14 years who experienced any violent discipline in the past month, by background characteristics

Key Messages Child Discipline

- ✓ The incidence of violent child discipline is very high in Suriname: 88 percent of children aged 2-14 years were subjected to at least one form of violent psychological or physical punishment by household members.
- ✓ Physical punishment is around 71% and psychological aggression around 84%.
- ✓ 9 out of 10 children aged 1 to 14 years experienced violent disciplining in the past month.
- ✓ 8 out of 10 children aged 1 to 14 year experienced shouting, yelling or screaming, as a form of discipline.
- ✓ 8 out of 100 were severely disciplined by hitting, slapping, beating repeatedly on the face, head, ears or body.
- ✓ Only 7 out of 100 children under age 15 were disciplined in a NON-violent way.
- ✓ The incidence of violent discipline is higher (89%) for boys than girls (86%). 92% for those living in a poor household versus 81% for those living in the richest households.
- ✓ For each type of violent disciplining, the highest incidence is found for children aged 3-4 years and slightly decreases for the following age groups.
- ✓ 24 percent of the respondents think that physical punishment is necessary for disciplining, while 63% of the children under 15 year experienced any physical punishment in the last month.
- ✓ The respondents (24%) who justify child discipline by physical punishment are almost evenly distributed by sex (21-24 %) and age group (23- 27%).
- ✓ Comparison by educational level shows a higher incidence among those with no education (38%), the poorest quintile (32% versus the richest with an incidence of 18%) and those living in the rural interior area (43% versus 18% for the rural coastal area).
- Data from this snapshot can be found in tables PR2.1 and PR2.2 of the Survey Findings Report (MICS 2018).

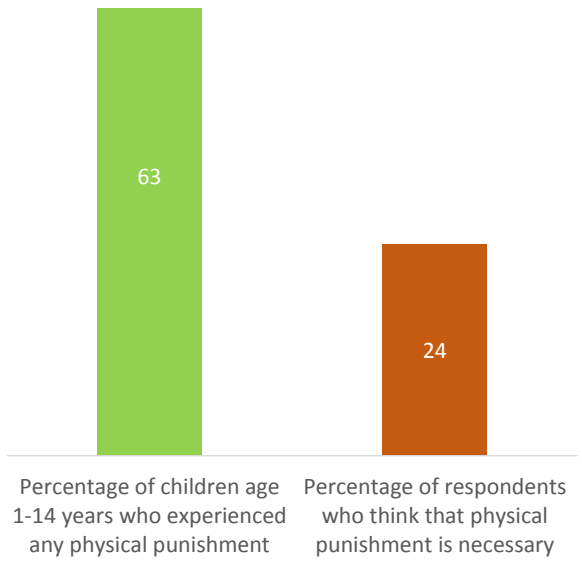


Violent Discipline: Age Patterns

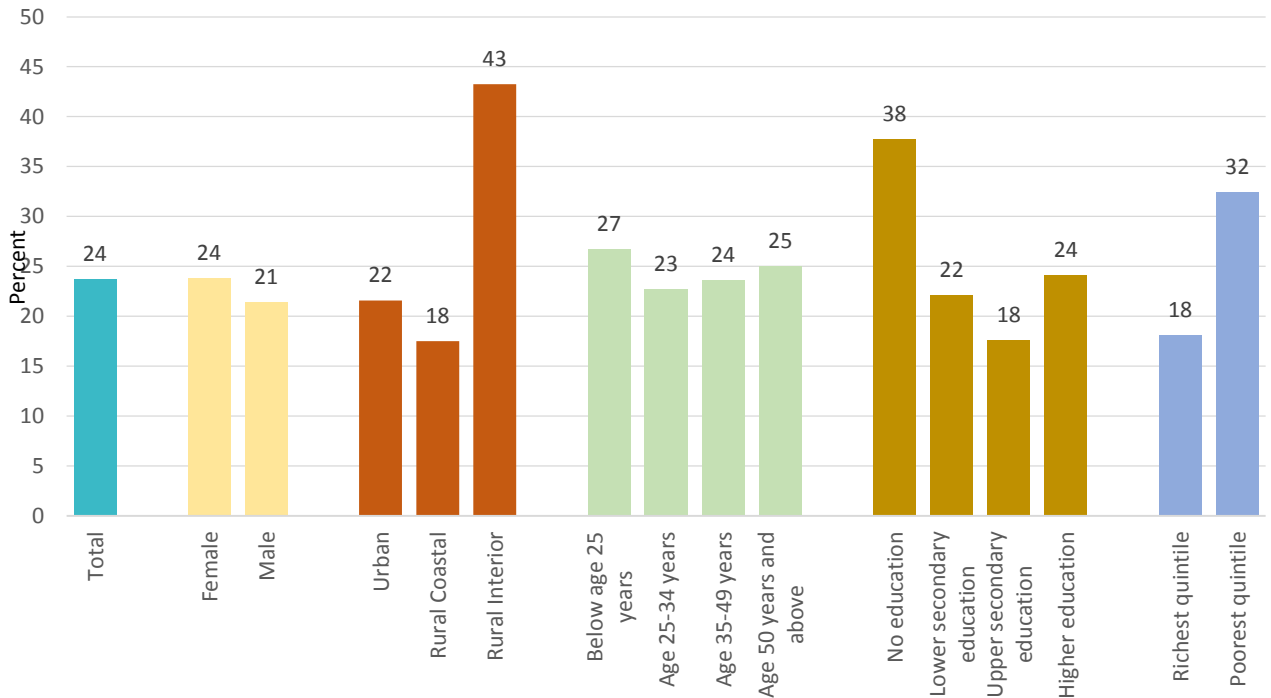


Percentage of children age 1 to 14 years who experienced any violent discipline in the past month, by type and by age

Physical Punishment: Attitudes & Experiences



Attitudes to Physical Punishment



Percentage of respondents to the child discipline module who think that physical punishment is necessary to raise or educate children, by their background characteristics

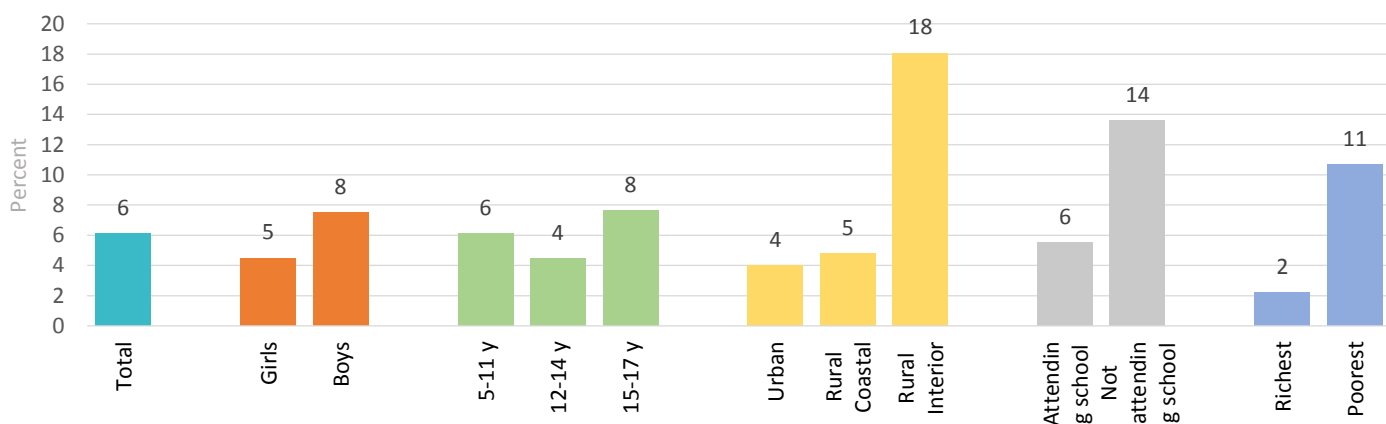
Child Labor



Child Labor

Child Labor: Levels & Disaggregates

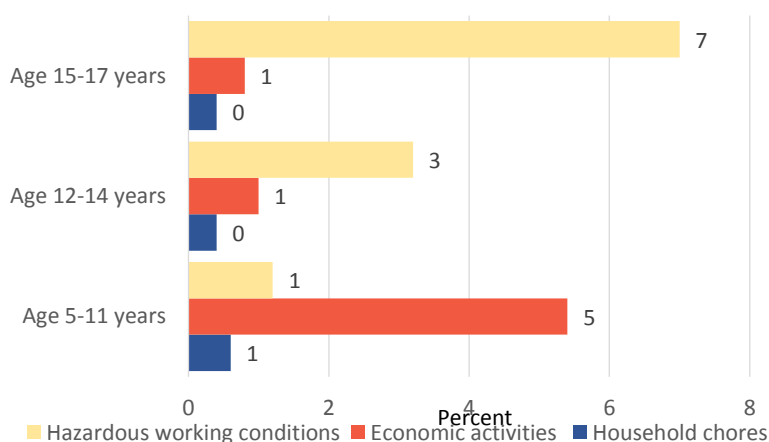
Child Labor for Age 5-17 years: SDG 8.7.1*



Percentage of children age 5 to 17 years engaged in child labor, by background characteristics

*Estimates from MICS of child labor are different from those in the SDG database for indicator 8.7.1, as the database excludes the hazardous work component and applies a threshold of 21 hours for household chores for children age 5-14 and no threshold for household chores for children age 15-17

Types of Child Labor



Definition of Child Labor

Age 5 to 11 years: At least 1 hour of economic work, 28 hours of unpaid household services per week or hazardous working conditions.

Age 12 to 14 years: At least 14 hours of economic work, 28 hours of unpaid household services per week or hazardous working conditions.

Age 15 to 17 years: At least 43 hours of economic or unpaid household services per week or hazardous working conditions.

Economic activities include paid or unpaid work for someone who is not a member of the household, work for a family farm or business. Household chores include activities such as cooking, cleaning or caring for children, as well as collecting firewood or fetching water.

Percentage of children age 5 to 17 years engaged in child labor, by type of activity and by age

Note: These data reflect the proportions of children engaged in the activities at or above the age specific thresholds outlined in the definitions box.

Key Messages Child Labor

- ✓ Overall, 6% of children aged 5-17 years in Suriname are engaged in child labor.
- ✓ The percentage of child labor is higher among boys (8%) than among girls (5%) and higher in the age category 15-17 years (8%) compared to other age categories.
- ✓ The proportion of children engaged in labor is substantially higher in rural interior areas (18%) than in urban areas (4%) and in rural coastal areas (5%).
- ✓ The probability for children to be engaged in child labor is higher for those who are not attending school (14%) compared to those who are attending schools (6%).
- ✓ Children from the poorest households are 5 times more likely to be engaged in child labor than children from the richest households.
- ✓ Share of children aged 15-17 involved in hazardous working conditions is higher compared to other age groups.
- ✓ District level breakdown shows the highest rate of child labor in district Coronie (28%) followed by Sipaliwini (24%) and Brokopondo (12%).
- Data from this snapshot can be found in tables PR3.1, PR 3.2 and PR3.3 of the Survey Findings Report (MICS 2018).



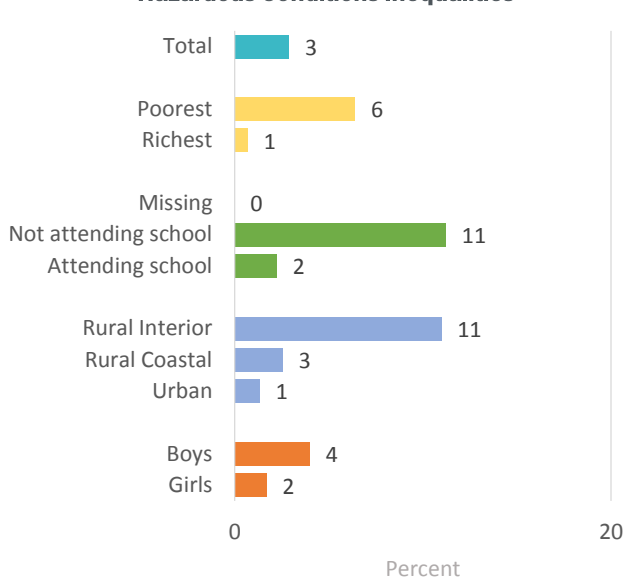
Inequalities in Child Labor & Hazardous Conditions

Child Labor Inequalities



Percentage of children age 5 to 17 years engaged in child labor, by type of activity and by sex

Hazardous Conditions Inequalities



Percentage of children age 5 to 17 years working under hazardous conditions, by background characteristics
(* Figures that are based on less than 25 unweighted cases)

Regional Data on Child Labor

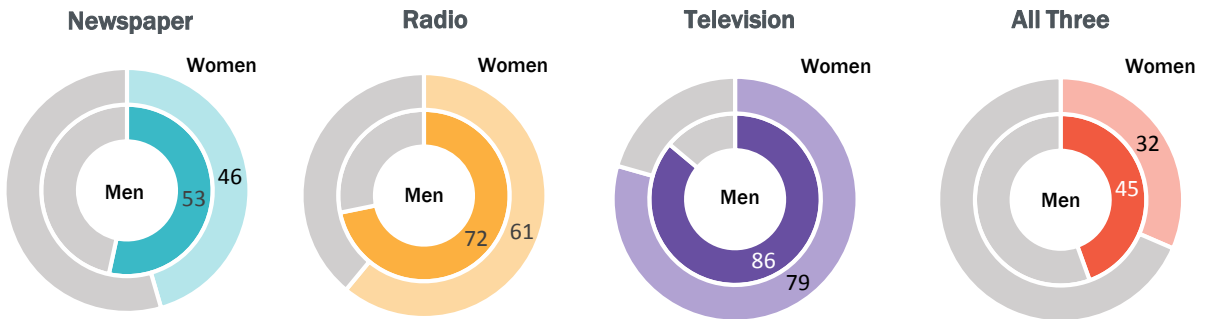
Region	Total Child Labor
National	6
Paramaribo	4
Wanica	4
Nickerie	4
Coronie	28
Saramacca	3
Commewijne	2
Marowijne	5
Para	4
Brokopondo	12
Sipaliwini	24

Percentage of children age 5 to 17 years engaged in child labor, by region

Mass Media, Communications & Internet



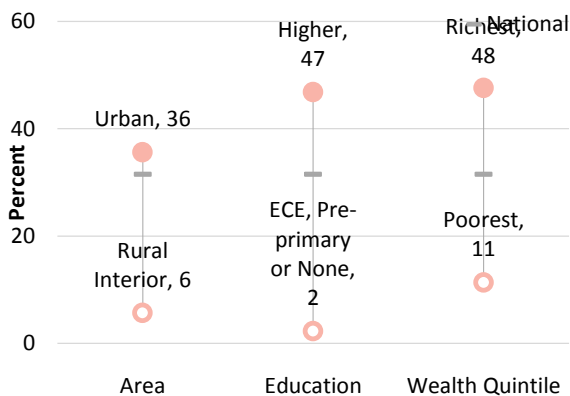
Exposure to Mass Media



Percentage of women & men age 15-49 years who are exposed to specific mass media (newspaper, radio, television) on a weekly basis and percentage of women & men age 15-49 who are exposed to all three on a weekly basis

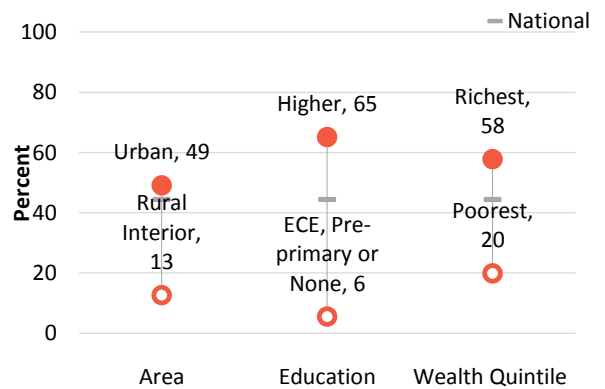
Inequalities in Access to Mass Media

Women with Access to Newspaper, Radio & Television Weekly



Percentage of women age 15-49 years who are exposed to newspaper, radio, and television on a weekly basis

Men with Access to Radio, Newspapers & Television Weekly



Percentage of women age 15-49 years who are exposed to newspaper, radio, and television on a weekly basis

Key Messages Mass Media, Communications & Internet

- ✓ The percentage of women & men aged 15-49 years who are exposed to specific mass media on a weekly basis is the lowest for newspaper and the highest for television.
- ✓ Men are more exposed to mass media than women. 45% report exposure to newspaper, radio and television at least once a week compared to 32% of women. For both men and women living in the interior or belonging to the poorest wealth quintile, the exposure to all 3 mass media is low. For men, the percentage is under 20% and for women lower than 11%.
- ✓ Almost every household has at least a member with a mobile phone, about one third has a computer at home and about half of the households has internet at home. These possession rates decreases gradually for districts in the rural coastal areas and even more for households in the interior.
- ✓ Internet use (79%), mobile use (96%) and computer use (40-42%) is equally among men and women.
- ✓ Internet use is highest among women and men living in the urban area, belonging to the richest quintile or those with the highest educational level.
- ✓ There is almost no difference in ICT skills among men and women age 15-49 years. 33% of men (or women) is able to carry out at least one of the listed ICT related activities.
- Data from this snapshot can be found in table SR9.1W, SR9.1M, SR 9.2, SR9.3W, SR9.3M, SR9.4W and SR9.4M of the Survey Findings Report (MICS 2018).



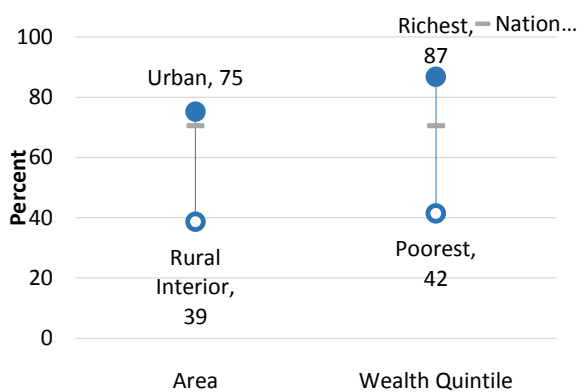
Household Ownership of Information & Communication Technology (ICT) Equipment & Internet at Home

Region	Radio	Television	Telephone-Fixed line	Telephone-Mobile	Computer	Internet at Home
National	71	88	37	97	38	52
Paramaribo	77	92	54	97	50	63
Wanica	73	92	32	98	38	52
Nickerie	71	91	45	96	37	50
Coronie	84	88	34	97	22	42
Saramacca	66	89	33	96	27	46
Commewijne	76	93	29	97	34	50
Marowijne	49	76	6	94	14	30
Para	64	78	15	98	26	37
Brokopondo	46	65	8	95	10	23
Sipaliwini	32	42	2	91	5	22

Percentage of households which own a radio, television-fixed line, telephone- mobile, computer and that have access to the internet at home

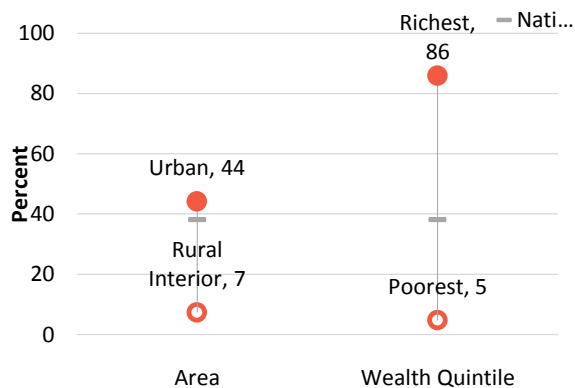
Inequalities in Household Ownership of ICT Equipment & Internet at Home

Household Ownership of a Radio



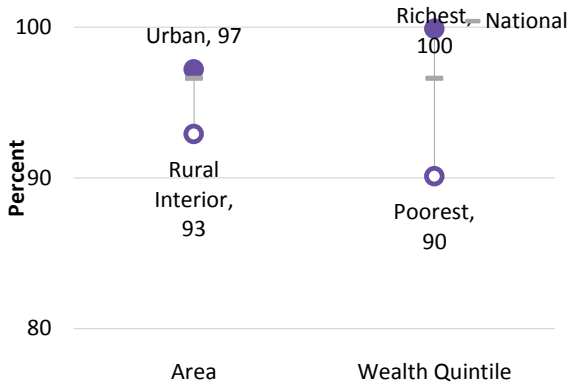
Percentage of households with a radio at home

Household Ownership of a Computer



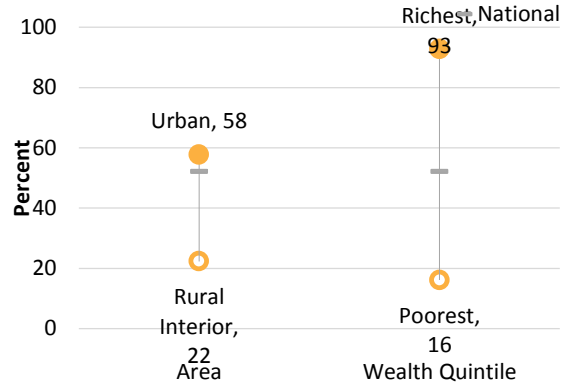
Percentage of households with a computer at home

Household Ownership of a Mobile Telephone



Percentage of households with mobile telephone

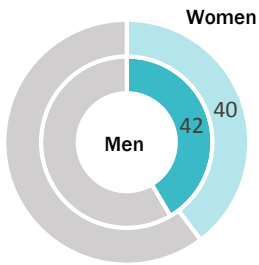
Households with Internet



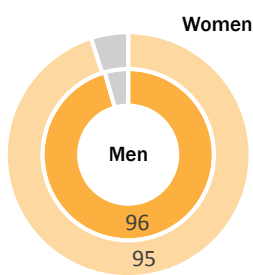
Percentage of households with access to the internet at home

Use of Information & Communication Technology

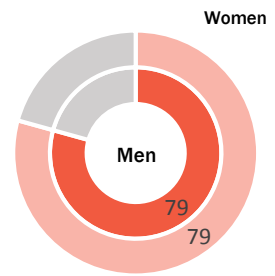
Computer Use



Mobile Phone Use



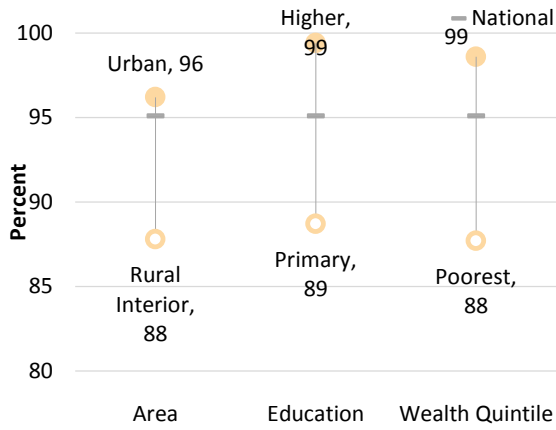
Internet Use: SDG17.8.1



Percentage of women and men age 15-49 years who during the last 3 months used a computer, used a mobile phone and used the internet

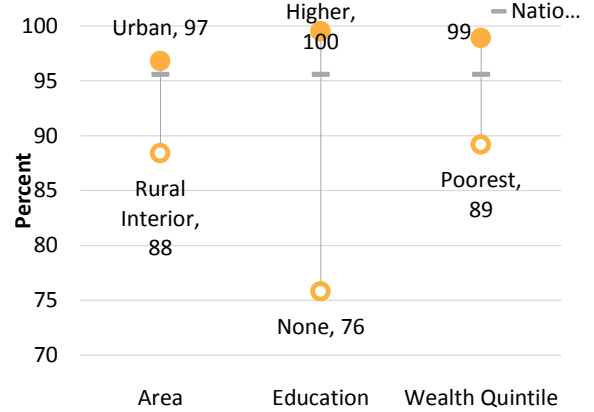
Disparities in Use of Information & Communication Technology

Disparities in Mobile Phone Use among Women



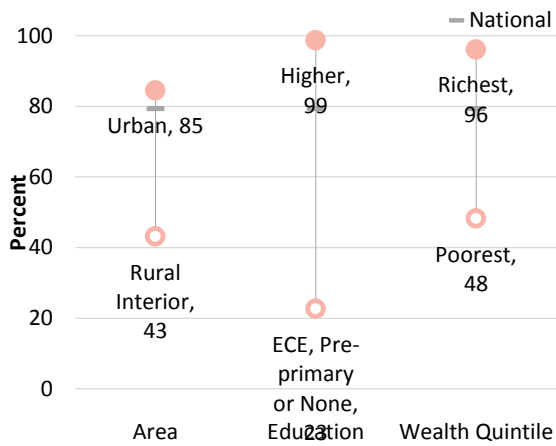
Percentage of women age 15-49 years who during the last 3 months used a mobile phone

Disparities in Mobile Phone Use among Men



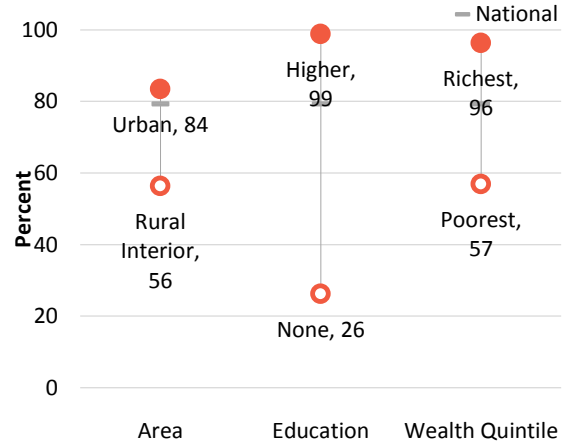
Percentage of men age 15-49 years who during the last 3 months used a mobile phone

Disparities in Internet Use among Women: SDG17.8.1



Percentage of women age 15-49 years who used the internet in the last 3 months

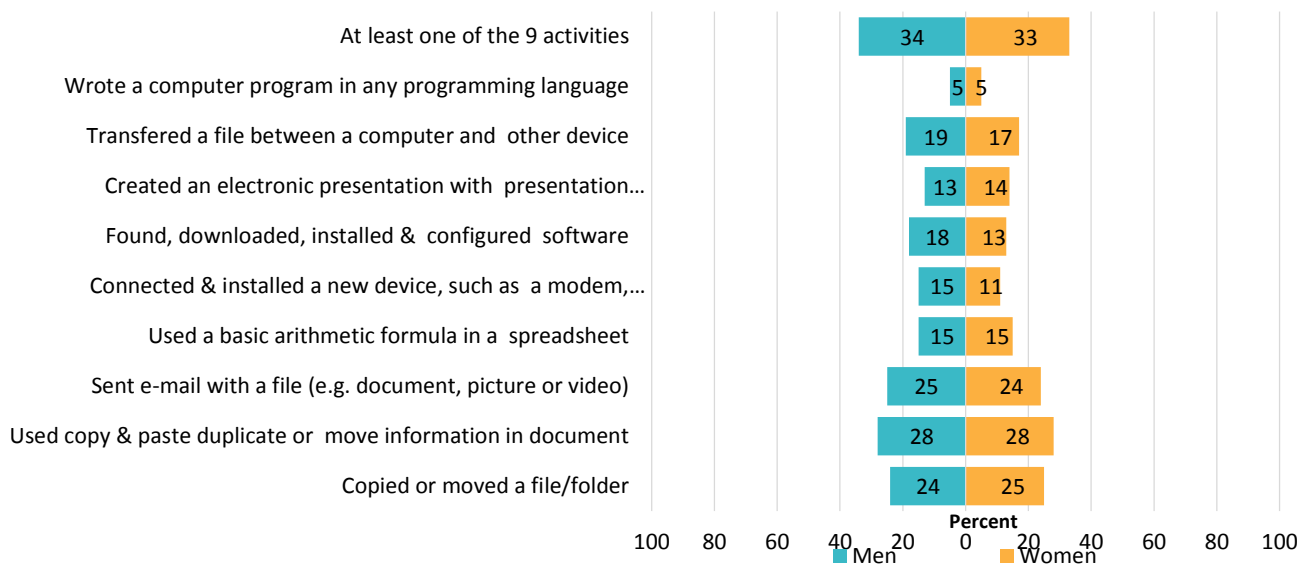
Disparities in Internet Use among Men: SDG17.8.1



Percentage of men age 15-49 years who used the internet in the last 3 months

Information & Communication Technology (ICT) Skills

Specific Computer Skills



Percentage of women and men age 15-49 years who in the last 3 months have carried out specific computer related activities and the percentage who have carried out at least one of these activities

Regional Data on ICT Use & Skills among Women

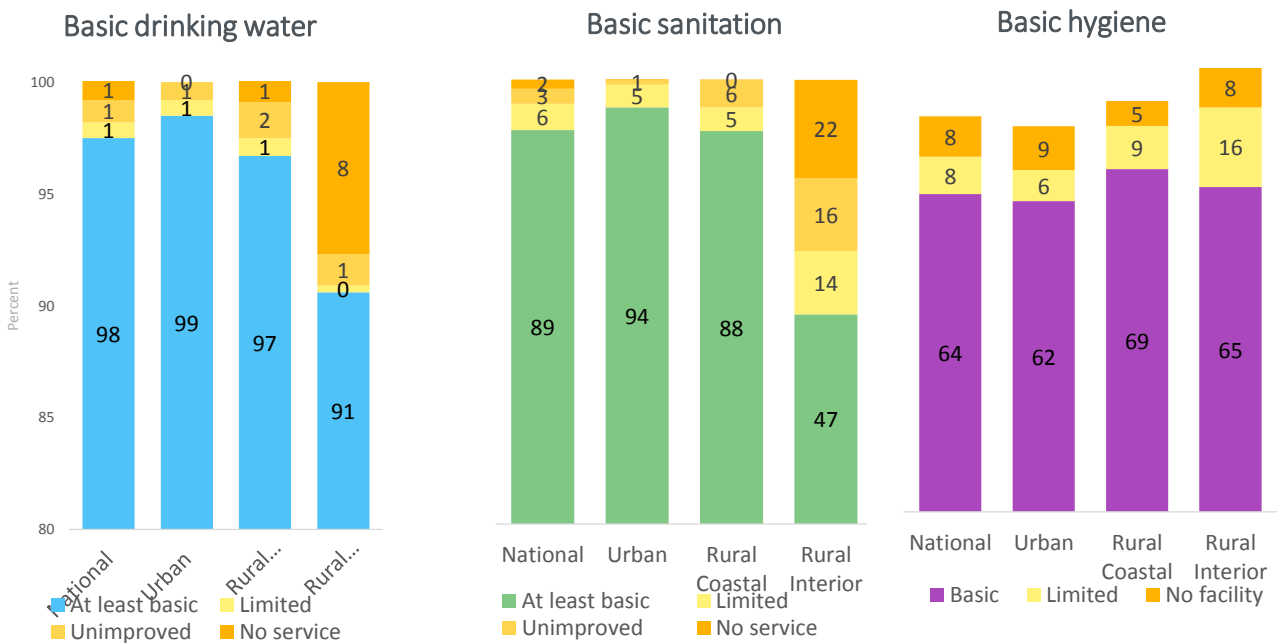
Region	Computer Use	Mobile Phone Use	Internet Use	Performed at Least 1 computer-related activity
National	40	95	79	33
Paramaribo	55	97	88	44
Wanica	37	95	81	32
Nickerie	40	94	81	29
Coronie	40	91	70	33
Saramacca	31	96	77	25
Commewijne	30	96	82	26
Marowijne	15	90	65	11
Para	25	92	66	18
Brokopondo	12	89	50	9
Sipaliwini	6	87	35	4

Percentage of women age 15-49 years who during the last 3 months used a computer, used a mobile phone and used the internet and percentage who performed at least 1 computer-related activity

Drinking Water Sanitation & Hygiene (WASH)



Basic Drinking Water, Sanitation & Hygiene Services



Percent of population by drinking water, sanitation and hygiene coverage (rounded figures)

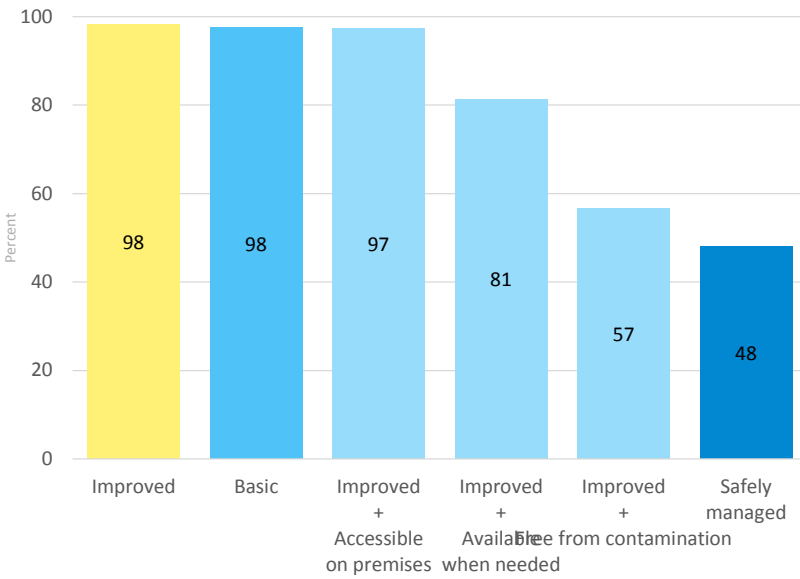
Drinking water ladder: **At least basic** drinking water services (SDG 1.4.1) refer to an improved source, provided collection time is not more than 30 minutes for a roundtrip including queuing. Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, and include: piped water, boreholes or tubewells, protected dug wells, protected springs, rainwater, and packaged or delivered water. **Limited** refers to an improved source more than 30 minutes roundtrip. **Unimproved** sources include unprotected dug wells and unprotected springs. **No service** refers to the direct collection of water from surface waters such as rivers, lakes or irrigation channels.

Sanitation ladder: **At least basic** sanitation services (SDG 1.4.1) refer to the use of improved facilities which are not shared with other households. Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush to piped sewer system, septic tanks or pit latrines; ventilated improved pit latrines, composting toilets or pit latrines with slabs. **Limited** sanitation service refers to an improved facility shared with other households. **Unimproved** sanitation facilities include flush/pour flush to an open drain, pit latrines without a slab, hanging latrines and bucket latrines. **No service** refers to the practice of open defecation.

Hygiene ladder: A **basic** hygiene service (SDG 1.4.1 & SDG 6.2.1) refers to the availability of a handwashing facility on premises with soap and water. Handwashing facilities may be fixed or mobile and include a sink with tap water, buckets with taps, tippy-taps, and jugs or basins designated for handwashing. Soap includes bar soap, liquid soap, powder detergent, and soapy water but does not include ash, soil, sand or other handwashing agents. **Limited** hygiene service refers to a facility lacking water and/or soap. **No facility** means there is no handwashing facility on the household's premises.

Safely Managed Drinking Water Services: SDG 6.1.1

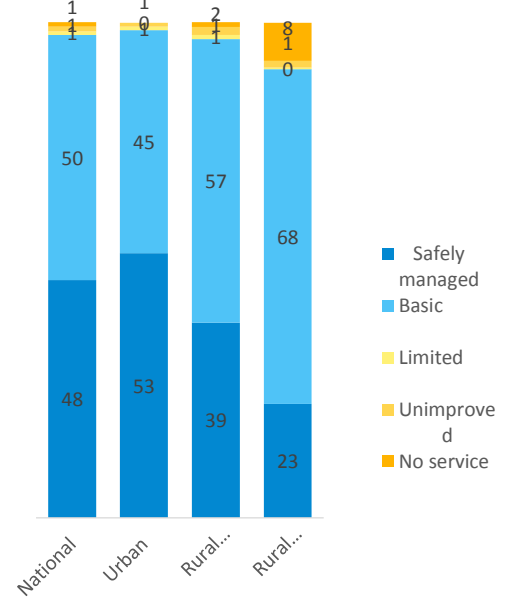
Improved, basic & safely managed drinking water



Percent of population using improved, basic and safely managed drinking water services

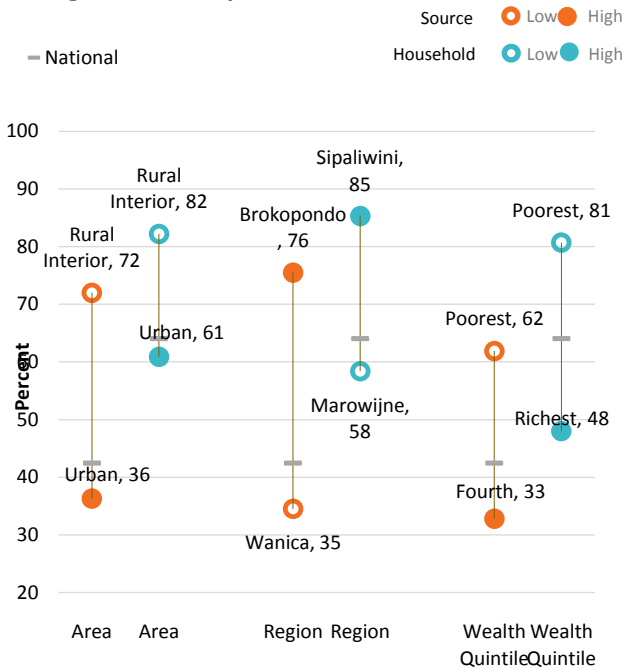
Safely managed (SDG 6.1) are improved sources: accessible on premises, available when needed, free from contamination

Drinking water coverage by area



Percent of population by drinking water coverage

Drinking Water Quality at Source & Home

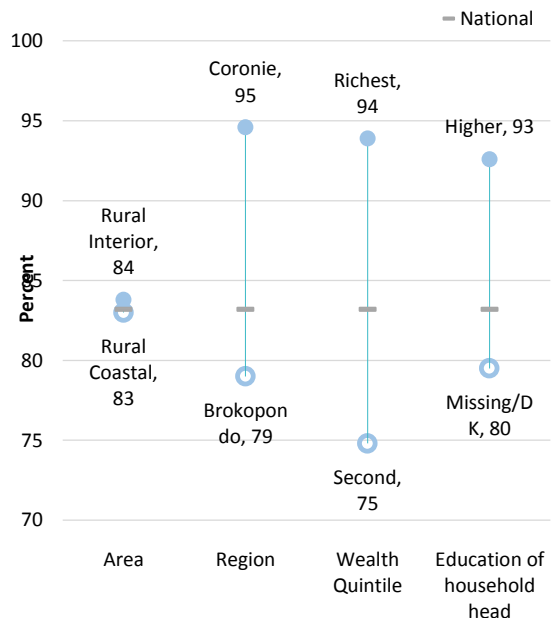


Definitions

Percent of population using drinking water sources with *E. coli* (orange) and proportion with *E. coli* in drinking water in household drinking water (teal).

Water Quality Testing response rates for Household and Source testing are 71% and 68% respectively

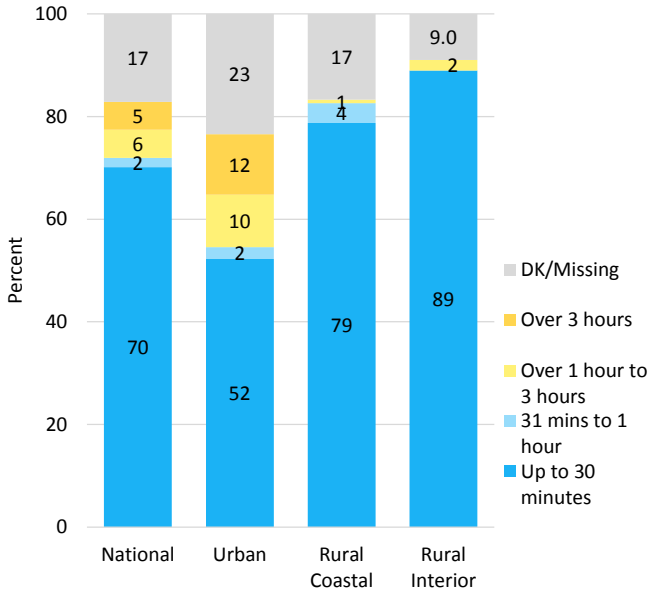
Availability of Drinking Water



Percent of population using drinking water sources with sufficient drinking water in the last month

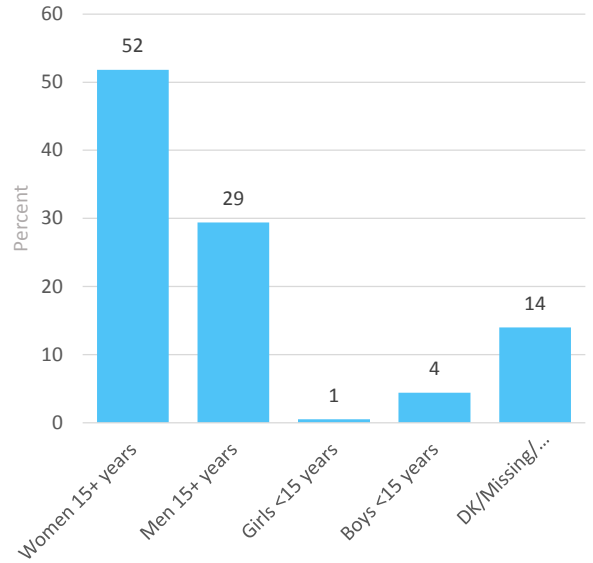
Accessibility of Water & Sanitation Facilities

Time Spent Each Day Collecting Water



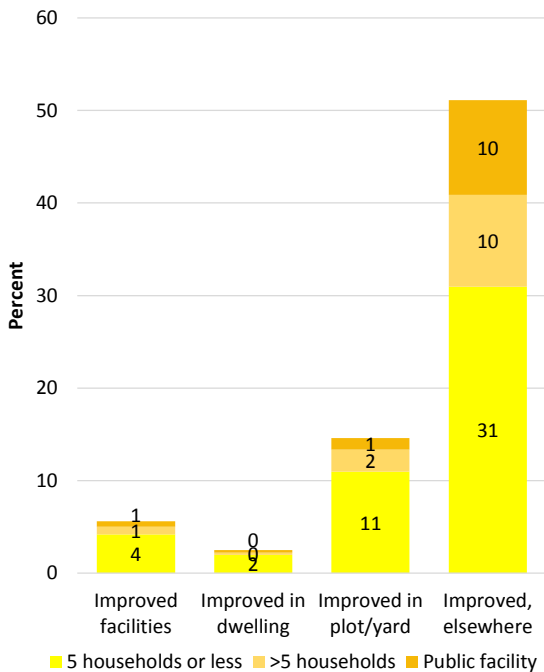
Percent of population by mean time person primarily responsible for water collection spends collecting water each day in households without water on premises

Who Primarily Collects Water for the Household



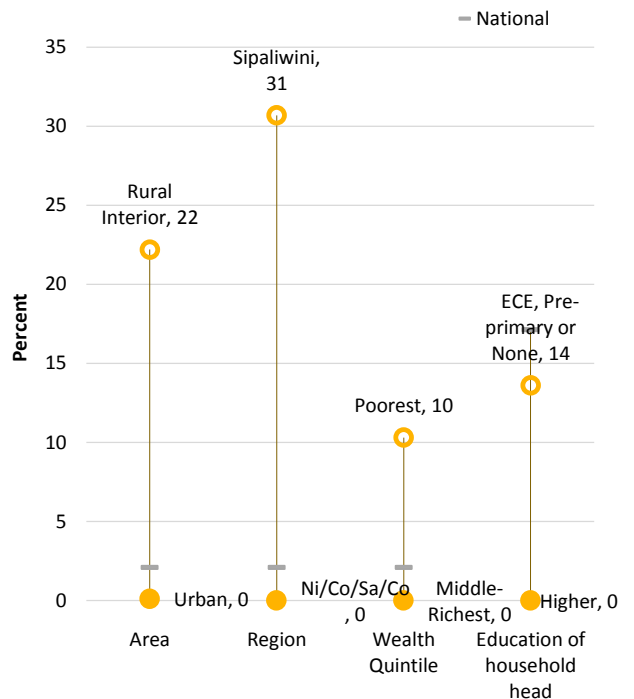
Percent of population by gender and age of person primarily responsible for collecting drinking water in households without water on premises

Sanitation Accessibility & Privacy



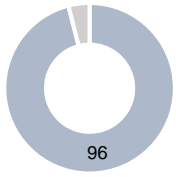
Percent of the population sharing improved sanitation facilities, by location of sanitation facility

Open Defecation

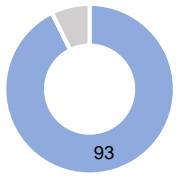


Percent of the population practising open defecation, by background characteristics

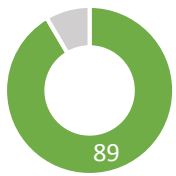
Menstrual Hygiene Management



Women with a private place to wash & change at home



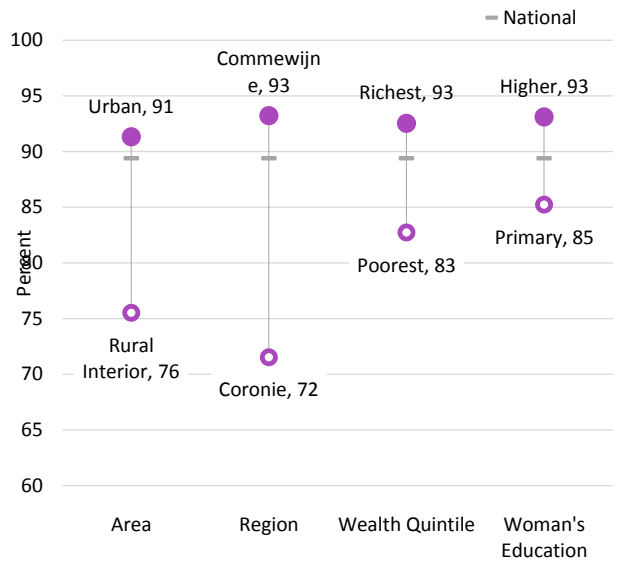
Women with appropriate materials



Women with appropriate materials & a private place to wash & change at home

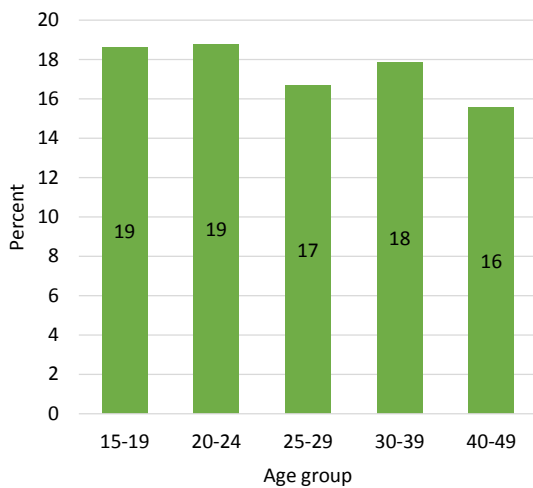
Denominator for all 3 indicators: women age 15-49 who reported menstruating in the last 12 months

Inequities in Access to Appropriate Materials & Private Place to Wash & Change at Home



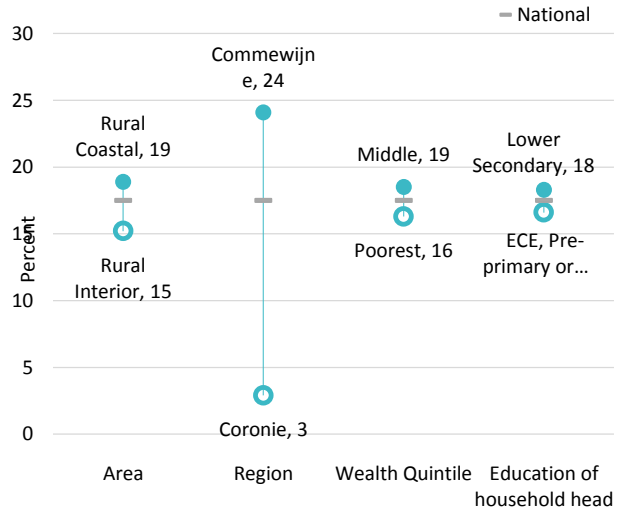
Percent of women age 15-49 using appropriate menstrual hygiene materials with a private place to wash and change while at home, among women reporting menstruating in the last 12 months

Exclusion from Activities during Menstruation



Percent of women who did not participate in social activities, school or work due to their last menstruation in the last 12 months, by age, among women reporting menstruating in the last 12 months

Exclusion from Activities during Menstruation by Various Characteristics



Percent of women who did not participate in social activities, school or work due to their last menstruation in the last 12 months, by residence, wealth quintile, education and region, among women reporting menstruating in the last 12 months

Key Messages WASH/ Menstrual hygiene

- ✓ **Basic drinking water.** At national level 98% of the population has access to basic drinking water. The rural interior area has the lowest level of access (91%). Only 57% of the households are using drinking water free from contamination.
- ✓ **Basic sanitation services.** At national level 89% of households make use of improved sanitation facilities which are not shared with other households. There is a high inequality by area: 94% for urban households versus 47% for the interior. Furthermore, 22% of the interior households has no sanitation and 16% of the existing sanitation is classified as unimproved. There is still high level of open defecation in the interior district Sipaliwini; at least one third of the households.
- ✓ **Basic hygiene.** The availability of a handwashing facility on premises with soap and water at national level and by area is about 65%. About 8% of the households did not have a place to wash hands using soap.
- ✓ Comparing various population subgroups show that the poorest households and households where the heads have the lowest educational level, have the lowest access to basic drinking water, while households belonging to the richest quintile or household where the heads have the highest educational level, have relatively higher access to water.
- ✓ Nationally 96% of women in households indicate they have a private place at home to change and wash during their menstruation.
- ✓ Nationally, 93% of women indicate that they use appropriate material during menstruation and 89% indicate they have a private place and appropriate material. This percentage is just 76% for the rural interior.
- ✓ Around 19% of women across all ages indicate to have been excluded from activities during their menstruation. These percentages do not vary a lot based on the region, educational level and wealth quintile.
- Data from this snapshot can be found in tables WS1.1 to WS4.2 of the Survey Findings Report (MICS 2018).



Gender Equality

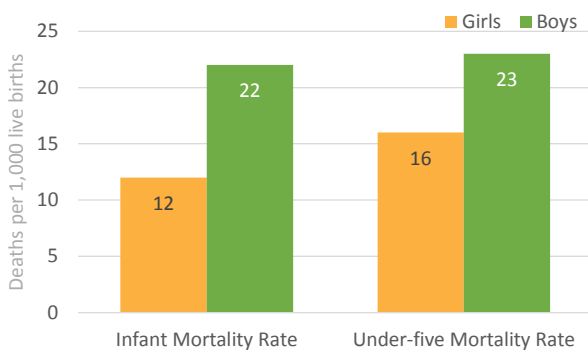


Gender equality means that girls and boys, women and men, enjoy the same rights, resources, opportunities and protections. Investments in gender equality contribute to lifelong positive outcomes for children and their communities and have considerable inter-generational payoffs because children's rights and well-being often depend on women's rights and well-being. This snapshot shows key dimensions of gender equality during the lifecycle. It is organized around: 1) the first decade of life (0-9 years of age) when gender disparities are often small, particularly in early childhood; 2) the second decade of childhood (10-19 years of age) when gender disparities become more pronounced with the onset of puberty and the consolidation of gender norms; and 3) adulthood, when gender disparities impacts both the wellbeing of women and girls and boys.

Every Girl & Boy Survives & Thrives: The First Decade of Life

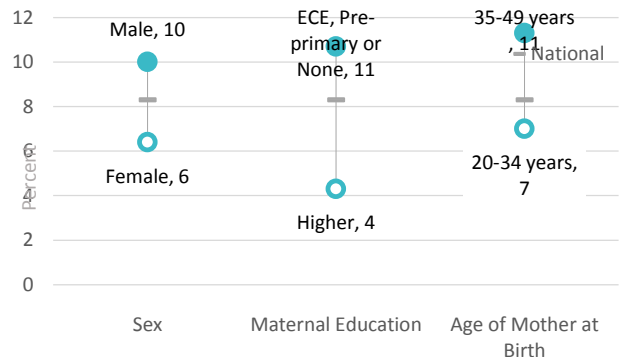
physical and cognitive development. Generally, girls tend to have better biological endowments than boys for survival to age five, and thus higher survival chances under natural circumstances. However, gender discrimination against girls can affect survival, resulting in higher than expected female mortality. Similarly, stunting rates are typically lower among girls than boys, potentially due to the higher risk for preterm birth among boys, which is inextricably linked with lower birth weight. However, children with mothers who gave birth at a young age or who have no education may be more likely to be malnourished. Children with restricted cognitive development during early life are at risk for later neuropsychological problems, poor school achievement, early school drop-out, low-skilled employment, and poor care of their own children. Stimulation and interaction with parents and caregivers can jumpstart brain development and promote well-being in early childhood. This is also the period of development when gender socialization, or the process of learning cultural roles according to one's sex,

Mortality Rates among Children Under-5, SDG 3.2.1 Sex Disaggregate



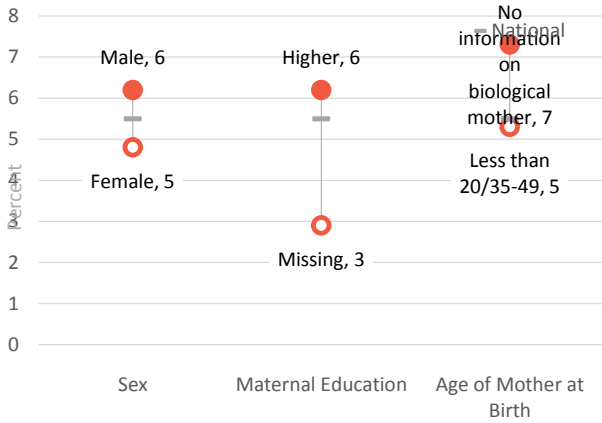
Infant mortality: probability of dying between birth and the first birthday
Under-five mortality: the probability of dying between birth and the fifth birthday

Malnutrition: Stunting (Moderate & Severe) among Children Under-5, SDG 2.2.1

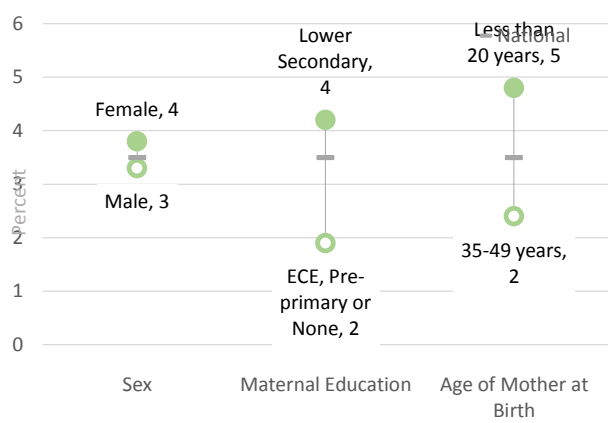


Stunting refers to a child too short for his or her age

Malnutrition: Wasting (Moderate & Severe) among Children Under-5, SDG 2.2.2



Malnutrition: Overweight (Moderate & Severe) among Children Under-5, SDG 2.2.2

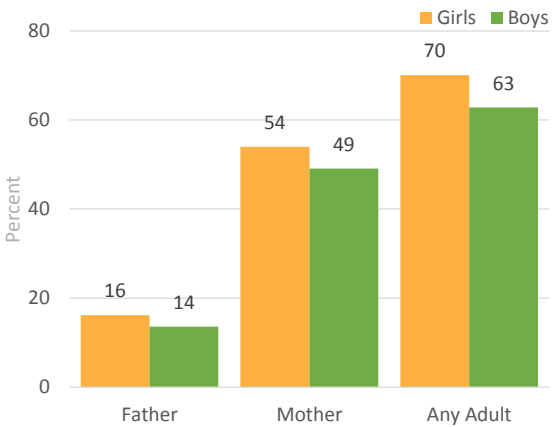


Wasting refers to a child who is too thin for his or her height

Overweight refers to a child who is too heavy for his or her height

Every Girl & Boy Survives & Thrives: The First Decade of Life

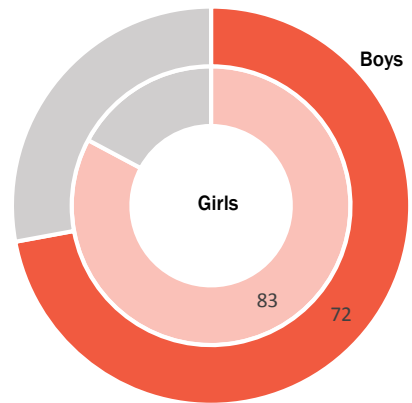
Early Stimulation & Responsive Care by Adults



Percentage of children age 2-4 years with whom adult household members engaged in activities that promote learning and school readiness during the last three days, by person interacting with child and sex of child.

Note: Activities include: reading books to the child; telling stories to the child; singing songs to the child; taking the child outside the home; playing with the child; and naming, counting or drawing things with the child

Early Childhood Development Index, SDG 4.2.1

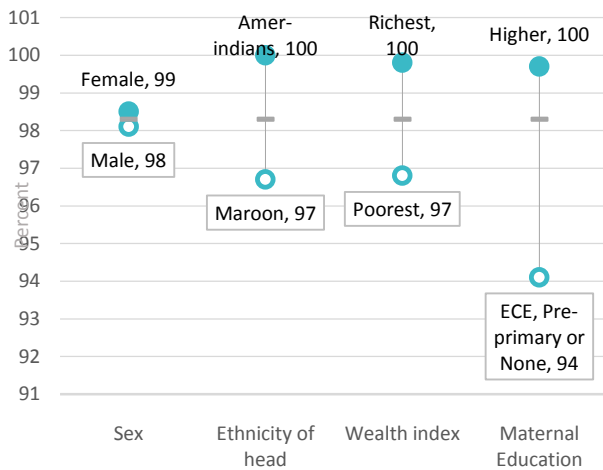


Percentage of children age 3-4 years who are developmentally on track in at least 3 of the following 4 domains: literacy-numeracy, physical, social-emotional, and learning domains, by sex

Every Girl & Boy Is Protected From Violence & Exploitation: The First Decade of Life

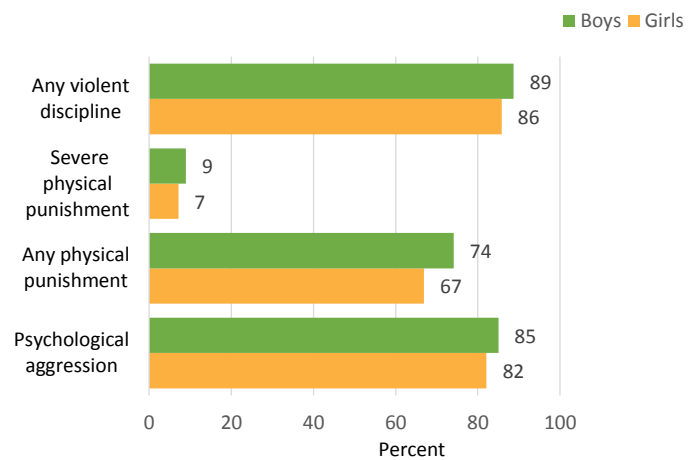
Registering children at birth is the first step in securing their recognition before the law, safeguarding their rights, and ensuring that any violation of these rights does not go unnoticed. While vitally important for both girls and boys, the implications of low birth registration rates for girls are significant, rendering them more vulnerable to certain forms of exploitation they are at greater risk of, including child marriage and international trafficking. Although average birth registration rates are similar for girls and boys, children with mothers who have no education may be less likely to have their births registered. While girls and boys face similar risks of experiencing violent discipline -which includes physical punishment and psychological aggression- by caregivers in the home, gender inequality and domestic violence are among the factors associated with an elevated risk of violence against both girls and boys.

Birth Registration, SDG 16.9.1 Sex Disaggregate



Percentage of children under age 5 whose births are registered, by sex and maternal education level

Violent Discipline, SDG 16.2.1 Sex & Age Disaggregate



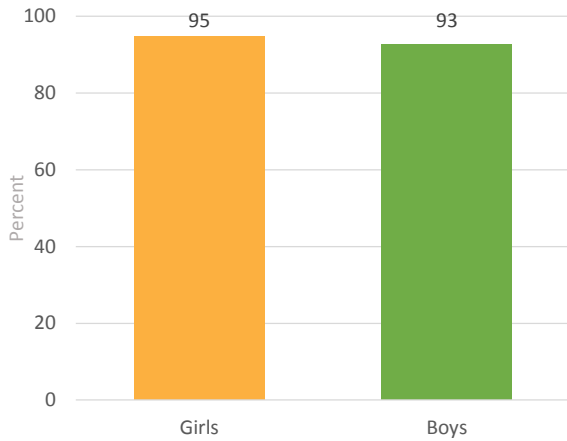
Percentage of children age 1-14 years who experienced violent discipline in the past month, by sex
Note: The age group 1-14 spans the first and second decades of life.

Every Girl & Boy Learns: The First Decade of Life

Investment in good quality early childhood education services prior to entering school improves learning outcomes for children. It also enhances the efficiency of the school system by reducing repetition and drop-out and improving achievement, especially among girls and marginalized groups. Primary education provides the foundation for a lifetime of learning. Considerable progress has been made in achieving universal education and closing the gender gap but gender disparities to the disadvantage of girls still exist in some countries. Further, girls still comprise the majority of the world's out-of-school population.

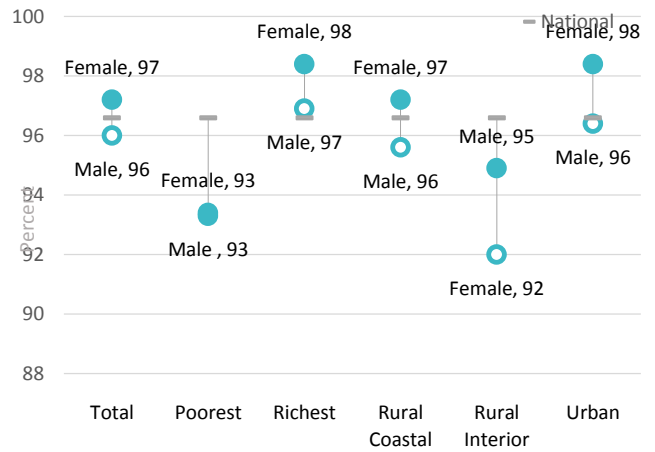
Note: Because children of primary school age range from 6-14 years, these indicators include some children in their second decade of life.

Participation Rate in Organized Learning, SDG 4.2.2



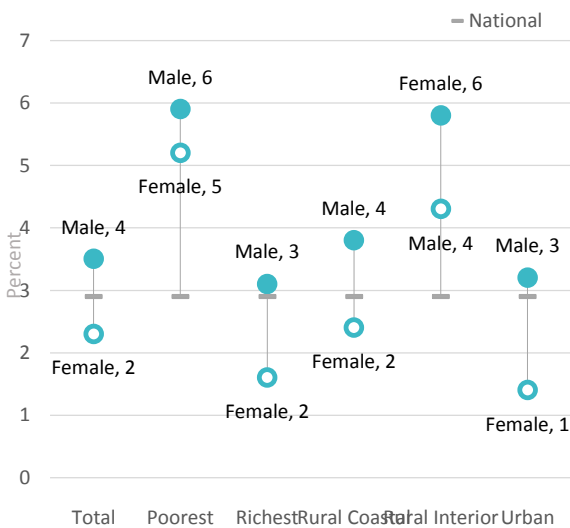
Percent distribution of children age one year younger than the official primary school entry age at the beginning of the school year, by attendance to education, and attendance to an early childhood education programme or primary education (adjusted net attendance ratio), by sex

Primary School Attendance



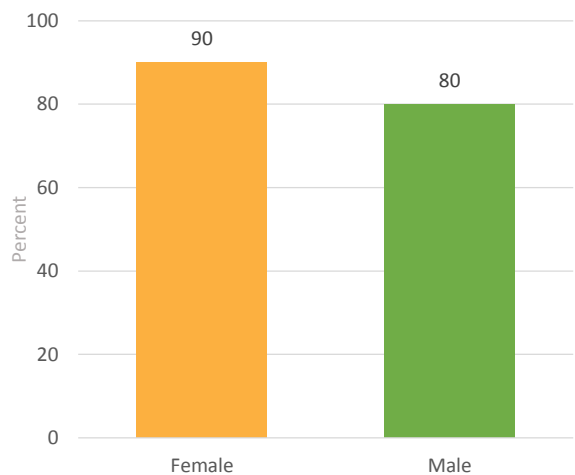
Percentage of children of primary school age attending primary or secondary school (adjusted net attendance ratio), by wealth quintile and urban/rural residence

Children of Primary School Age Out of School



Percentage of children of primary school age not attending either primary or secondary school, by wealth quintile and area

Primary Completion



Percentage of children who age 3 to 5 years above the intended age for the last grade of primary school who have completed primary education, by sex

Key Messages Gender Equality

- ✓ Infant mortality rate is higher among boys (22) than among girls (12).
- ✓ Under-5 mortality rate is higher among boys (23) than among girls (16).
- ✓ Malnutrition indicators stunting and wasting for under-5 children is higher among boys than girls, but overweight among girls is higher than among boys.
- ✓ Early stimulation and responsive care given by fathers is 15%, about 50% by mothers, and about 70% by an adult in the household.
- ✓ ECD index for children 3-4 years is 82% for girls and 72% for boys.
- ✓ Birth registration for boys and girls are almost equal and very high: 98-99%.
- ✓ Participation rate in a learning organization is around 95% for girls and 93% for boys. Primary school attendance for boys and girls is almost equal and around 95-96%, with no particular difference by area or wealth status of the household.
- ✓ Primary school completion rate is higher among girls (90 %) than boys (80%).
- ✓ Percentage of primary school age children out of school is 4% for boys and 2% for girls. This occurrence is higher among children of poor households and those living in the interior (4-6%).
- ✓ For rural interior, the percentage of girls out of school (6%) is higher than for boys (4%), where as in the other regions, boys are more likely to be out of school than girls.
- Data from this snapshot can be found in table CS.3, TC.8.1, TC.10.1, TC.11.1, PR.1.1., PR.2.1., LN.1.2, LN.2.3, LN.2.4, LN.2.6, LN.2.7, TM.3.1, TM.3.2, TM.3.3, TM3.4, TM.2.3W, TM.11.1W, TM.11.1M, SR.10.1W, SR.10.1M, SR4.1W, SR.4.3, SR.6.1W, SR.6.1M, PR.8.1W, PR.8.1M, 5.1W, PR.2.2, PR.5.1, PR.5.3, EQ.3.1W, EQ.3.1M, PR.7.1W, PR.7.1M, EQ.5.1W, EQ.5.1M, SR.9.3.W, SR.9.3M, EQ.2.1W, EQ.2.1M, WS.4.1, WS.4.2, WS 1.3 and WS 1.4 of the Survey Findings Report (MICS 2018).



