

DLHS -2

Uttar Pradesh

Reproductive and Child Health

District Level Household Survey 2002-04



International Institute for
Population Sciences
(Deemed University)
Mumbai – 400 088



Ministry of Health & Family
Welfare, Government of India
New Delhi – 110 011



TNS India Private Limited
New Delhi – 110 016

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PREFACE AND ACKNOWLEDGEMENT

Government of India had launched the Reproductive and Child Health (RCH) program to ensure that couples have access to adequate information and services for reproductive health care. As a first step, family planning target has been withdrawn and an effort is being made to provide a package of reproductive services at different levels of health care centres.

Monitoring of the services is also being improved. New indicators are being added to assess quality of services and provision of an integrated reproductive health care service. The District Level Household Survey (DLHS) was initiated by Government of India and financed by the World Bank covering all the districts in the country. For the second time, district level estimates will be available for most of the critical reproductive health indicators. These important initiatives are certainly quite satisfying for all those who are concerned with taking ICPD reproductive health agenda ahead. The project is being coordinated by International Institute for Population Sciences, Mumbai and implemented by a number of consulting agencies.

For the purpose of data collection, uniform questionnaires, sampling design and field procedures were used throughout the country. The survey thus provided comparable data for all the districts in the state. The present report provides salient findings of Uttar Pradesh and covered all the districts. The findings of selected indicators of reproductive and child health services from the state of Uttar Pradesh are presented in the report.

It is believed that the data generated through the survey will meet the requirements of the Programme Administrators and Policy Makers for making effective interventions for providing quality services and achieving multiple objectives.

The DLHS-RCH could not have been successfully completed without cooperation and support from innumerable sources at various stages of the project. Although, it is not possible to acknowledge everyone involved in the survey, several organizations and individuals deserve special mention.

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Dr U V Somayajulu
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New Delhi

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KEY INDICATORS, UTTAR PRADESH

DISTRICT LEVEL HOUSEHOLD SURVEY- REPRODUCTIVE AND CHILD HEALTH, (DLHS-RCH), 2002-04

Sample size			
Households surveyed	72,050		
Currently married women age 15-44	64,207		
Husband's of eligible women	37,463		
Characteristics of households			
Percent rural	68.4		
Percent Hindu	82.0		
Percent Muslim	17.3		
Percent other religion (Sikh)	0.3		
Percent scheduled caste	23.4		
Percent scheduled tribe	0.9		
Percent with electricity	41.5		
Percent with flush toilet.....	23.9		
Percent with no toilet facility	66.7		
Percent living in <i>Kachcha</i> houses.....	28.4		
Percent living in <i>Pucca</i> houses.....	27.1		
Percent with low standard of living	54.2		
Percent with high standard of living.....	20.5		
Percent with iodized salt (15+ppm)	13.7		
Characteristics of currently married women age 15-44 years			
Percent below age 30	54.0		
Percent with age at first cohabitation below age 18	62.8		
Percent illiterate.....	62.3		
Percent having 10 or more years of schooling	15.2		
Percent with illiterate husband.....	27.7		
Percent with husband 10+ years of schooling.....	35.8		
Marriage			
Mean age at marriage for boys.....	21.5		
Mean age marriage for girls.....	18.1		
Percent of boys married below age 21	45.0		
Percent of girls married below age 18	41.4		
Fertility			
Mean children ever born women age 40-44 years	5.4		
Percent of births of order 3 and above ¹	56.9		
Current use of family planning method			
Any method	35.6		
Any modern method	26.2		
Pill	2.5		
IUD	1.6		
Condom	7.3		
Female sterilization.....	14.4		
Male sterilization.....	0.2		
Any traditional method.....	9.4		
Rhythm/safe period.....	6.4		
Withdrawal.....	2.6		
Unmet need for family planning			
Percent with unmet need for spacing	13.3		
Percent with unmet need for limiting	20.3		
Percent with total unmet need	33.6		
Maternal care²			
Percent of women received antenatal check-ups...	57.8		
Antenatal check-up at home.....	10.3		
Antenatal check-up in first trimester	22.0		
Three or more visit for ANC.....	24.6		
Two or more tetanus toxoid injections.....	69.5		
		Adequate Iron folic acid tablets/syrup ³	8.7
		Full antenatal check-up ⁴	4.4
		Delivery characteristics	
		Delivery at home	77.2
		Delivery at government health institutions	8.5
		Delivery at private health institutions.....	13.9
		Delivery attendant by skilled persons ⁵	28.7
		Child health	
		Percent of children whose mother squeezed out milk from her breast ⁶	70.8
		Percent of children ⁷ with diarrhoea ⁸ who received ORS	15.5
		Percentage of women whose child ⁷ with pneumonia ⁸ sought treatment	79.2
		Percent of children who received vaccinations⁹	
		BCG	57.8
		DPT (3 injections).....	36.6
		Polio (3 drops).....	35.9
		Measles	35.4
		All vaccinations ¹⁰	26.4
		No vaccination at all	36.0
		Percentage of women who had	
		Pregnancy complication ²	31.3
		Delivery complication ²	20.2
		Post delivery complication ²	33.5
		Symptoms of RTI/STI.....	35.6
		Problems of vaginal discharge.....	23.4
		Menstruation related problem	15.7
		Awareness of RTI/STI and HIV/AIDS	
		Percent of women who have heard of RTI/STI	29.1
		Percent of women who have heard of HIV/AIDS	34.5
		Utilization of government health services	
		Antenatal care	57.8
		Treatment for pregnancy complication.....	40.6
		Treatment for post-delivery complication	52.2
		Treatment for vaginal discharge.....	32.9
		Treatment for children with diarrhoea	8.5
		Treatment for children with pneumonia.....	9.8
		Quality of family planning services	
		Percent non-users ever advised to adopt the family planning method.....	7.0
		Percent users told about side effects of any method	19.7
		Percent users who received follow-up services any modern method	17.3
		Characteristics of husband of eligible women	
		Percent of husband knowing NSV	43.1
		Percent of men who have heard of RTI/STI.....	38.6
		Percent of men who have heard of HIV/AIDS.....	68.0
		Percentage who had any symptoms of RTI/STI.....	9.2
		Sought treatment for RTI/STI	43.4

¹ For births in past three years, ² For live/still births during three years preceding the survey, ³ 100 or more IFA tablets/Syrup, ⁴ A minimum of three visits for ANC, at least one TT injections and 100 or more IFA tablets/syrup, ⁵ Either institutional delivery or home delivery assisted by Doctor/ANM/nurse, ⁶ Children age below 3 years, ⁷ Last but one living children below age 3 years, ⁸ Last two weeks preceding the survey, ⁹ Last but one living children (age 12-23 months) born during three years preceding the survey. ¹⁰ BCG, three injections of DPT, three drops of polio and measles.

SALIENT FINDINGS

For the assessment of district level Reproductive and Child Health indicators, Government of India proposed to undertake district level household surveys through non-governmental agencies on an annual basis. The District Level Household Survey (DLHS) was the result of government's initiative. In Uttar Pradesh, TNS, India was entrusted the work of carrying out of the survey. The survey for Phase-1 of the DLHS covering 9 districts of the state was conducted during May 2002 to August 2002. The survey for Phase-2 covering the remaining districts of the state was carried out during Feb 2004 to June 2004. The focus of the survey was on: i) Coverage on ante natal care (ANC) and immunization services, ii) Extent of safe deliveries, iii) Contraceptive prevalence rate and unmet need for family planning, iv) Awareness about RTI/STI and HIV/AIDS and v) Utilization of government health services and users' satisfaction. The salient findings of the survey are presented here.

For both the phases together, the data was collected from 72,050 households in Uttar Pradesh. From these households, 64,207 eligible women (usual resident or visitors who stayed in the sample household the night before the interview, currently married women aged 15-44 years whose marriage was consummated) and 37,463 husbands of eligible women were interviewed.

Of the total households interviewed in Uttar Pradesh, nearly 32 percent were from urban areas. There were 82 percent Hindu households, 17 percent Muslim and less than one percent came under other category in the sample. Twenty three percent of the households belonged to scheduled castes and 1 percent scheduled tribes. Twenty eight percent of the households lived in *Kachcha* house and about 45 percent are in *Semi-pacca* and 27 percent are in *pucca* houses. The majority of the households belonged to low economic status (54 percent in low SLI)

About 57 percent of population aged seven and above are literate. Percent illiterate among females is 70 where as it is 43 percent for male. Proportion of non-literate is much higher among the older cohort compared to the younger ones. Nearly 57 percent of eligible women in the state are non-literate, and 11 percent have completed 10 or more years of schooling. In Uttar Pradesh, the level of literacy among the eligible women and their husbands is low. As regards distribution of non-literate women, lesser proportion of younger women below age 30 are illiterate compared to older women age 30 and above, but in case of non-literate husbands across age is more or less uniform, though it is marginally more for husbands below 30 years.

The reporting of the marriages during three years prior to survey gives the mean age at marriage among the boys and girls in the state as 21.5 and 18.1 years respectively. Forty five percent of boys and 41 percent of girls in the state got married before attaining the minimum legal age at marriage of 21 and 18 years respectively. In all the districts, except Bulandshahar, Gautam Buddha Nagar, Kanpur Nagar, Meerut and Saharanpur more than one fifth of boys got married below the legal minimum age at marriage. Except in Balrampur, Maharajganj and Shrawasti, in all the districts less than two third of the girls got married below the legal minimum age at marriage.

Only fourteen percent of the households use cooking salt that is iodized at the recommended level of 15 parts per million or higher level of iodine content whereas more than two fifth of households used salts that are not iodized at all. Lowest proportion of households (12 percent) in Mau used non-iodized salt whereas in Hardoi, the highest proportion of households (78 percent) used non-iodized salt. Except Mau, in all other districts, less than 50 percent of households consume adequately iodized salt, whereas less than one percent of households in Bareilly do so.

On an average, women on the verge of completion of reproductive period have given birth to 5.4 children. The completed fertility in the state varies from the lowest of 4.2 children ever born per women in Lucknow and Saharanpur to the highest of 6.8 children in Shrawasti.

The share of births of order 3 and above in the total births that occurred three years prior to survey is 57 percent. In most of the districts, proportion of higher order births is quite high, ranging from the lowest of around 43 percent in Jhansi, to the highest of about 68 percent in Shahjahanpur.

The data collected on the utilization of ANC services for the women who had their last live/ still birth during three years prior to survey shows that the ANC coverage in the state is high as 58 percent of the women received at least one ante-natal care during pregnancy. About one tenth of the women during their pregnancy were visited by health worker at their residence for providing ANC. Eighteen percent of the women visited private health facilities and 27 percent received ANC from government health facilities. The percent of women who got some kind of ANC during pregnancy range between 22 percent in Balrampur to 89 percent in Ballia. In 8 districts out of 70, 80 percent or more women got some antenatal care.

Though 58 percent of the women in Uttar Pradesh received ANC, only 58, 31 and 29 percent women had check-up of abdomen, urine tested and blood pressure respectively. Forty one percent women received Iron and Folic Acid (IFA) tablets and 70

percent got at least one TT injection. A full package of ANC including minimum three ANC visits, at least one TT injection and 100 or more IFA tablets/Syrup was received by only 4 percent of women.

Minimum three ANC and timing of first check up is crucial for maternal and child care. In Uttar Pradesh, nearly 22 percent of women got ANC in the first trimester and one quarter had minimum three antenatal check-ups. An extent of ANC in first trimester varies from minimum of 8 percent in Kaushambi to the maximum of 42 percent in Lucknow. In Kaushambi, only five percent of women had minimum three ANC whereas in Lucknow more than 47 percent women had got minimum three ANC.

Nearly 22 percent of the total deliveries in Uttar Pradesh were conducted in the health institutions; 6 percentage point up from RCH Round I. The majority of the institutional deliveries were conducted in private institution (14 percent of total deliveries) as against government institutions (9 percent of total deliveries). Only eight percent of the total deliveries, that took place at home, were assisted by midwifery trained persons i.e. doctor/ nurse and ANM. So in all, 29 percent of the deliveries, slightly up from RCH Round I (21 percent), in the state were assisted by skilled personnel. The extent of institutional deliveries varies from the highest of 42 percent in Lucknow to the lowest of 6 percent in Balrampur. In all the districts, comparatively higher proportion of the deliveries took place at home. Safe deliveries were on the similar pattern in all the districts. The percent of the institutional deliveries increases substantially with women's education and economic status, though the variation in the institutional deliveries by women's education is much conspicuous than that by women's economic status.

In Uttar Pradesh, 31, 20 and 34 percent of the women experienced pregnancy, delivery and post delivery complications respectively. About 41 percent of the women sought treatment for the pregnancy and 55 percent for the post-delivery complications. The pregnancy complication varies from the lowest of 16 percent in Jyotiba Phule Nagar to the highest of 48 percent in Deoria. The incidence of all the three types of complications seems to be linked with each other. In the districts where the incidence of pregnancy complications is high, the incidence of delivery and post-delivery complications is also high.

In most of the districts and the state as a whole, the practice of breast feeding is almost universal. However, the practice of initiation of breastfeeding within two hours of birth of the child is not common. In Uttar Pradesh, only 8 percent women started breastfeeding the child within two hours of birth and nearly 83 percent started after one day of birth. There is great deal of variation in the pattern of breastfeeding across the districts. In Kaushambi district only two percent of the women breastfed the child within

two hours of birth. In Ghaziabad and Shahjahanpur district, the percentage is highest (24 and 18 percent respectively).

In Uttar Pradesh 58, 37 and 36 percent of the children received the BCG vaccine, three doses of DPT, Polio and measles vaccine respectively. There is 23 percentage points drop from BCG to measles. It means that large number of children that have contact with services providers are missed out of subsequent services. The complete schedule of immunization including BCG, three doses of DPT and Polio each and measles was received by 26 percent of the children, whereas 36 percent of the children did not receive a single vaccination under routine programme. About 12 percent of the children received supplementation of at least one dose of vitamin A and only 2 percent children received IFA tablets/liquid for iron supplementation.

The extent of complete immunization consisting of BCG, three injections of DPT, three doses of Polio and measles is the lowest in Kaushambi (8 percent) and highest in Deoria (55 percent). In 2 districts (Ballia and Deoria) more than half of the children received complete immunization.

In Uttar Pradesh, 59 percent of the women were aware of diarrhoea management and 13 percent were aware of Oral Rehydration Salt (ORS). During the two week period prior to survey, children of one fifth percent of the women suffered from diarrhoea. And 16 percent women got the children treated for diarrhoea by giving ORS. In comparison to awareness about diarrhoea management, the awareness about danger signs of pneumonia is quite low. Only 23 percent of the women reported awareness about danger signs of pneumonia. Fourteen percent of the women reported that their children suffered from cough, cold and difficulty in breathing in two week period prior to survey and 79 percent sought treatment.

The knowledge of family planning methods is universal in all districts of Uttar Pradesh, with over 99 percent women reporting knowledge of one method or the other. However, the knowledge of any spacing method is marginally low, but the proportion *per se* is quite high (94 percent). The knowledge of any modern methods is also universal in all the districts, though the knowledge of all modern methods is only 61 percent. The proportion knowing all modern methods (males and females' sterilization, IUD, oral pills and condom) varies from about 22 percent in Mirzapur to 88 percent in Kanpur Nagar.

In DLHS, knowledge about No-scalpel vasectomy has been assessed among husbands of eligible women. About forty three percent of the husbands were aware of no-scalpel vasectomy in the state. The proportion of husbands knowing No-scalpel vasectomy varies from about 26 percent in Rae Bareli to 69 percent in Chandauli.

The contraceptive prevalence rate (any methods) in the state is 36 percent, 5 percentage point up from RCH Round I, comprising of prevalence of about 26 percent of modern methods and 9 percent of traditional methods. Fourteen percent of the couples adopted sterilization. The percent users of the two male methods - sterilization and condom is only 8 percent. There has been positive association between contraceptive use and female education, economic development and availability of health facility. The highest contraceptive prevalence is in Jhansi and Mahoba (55 percent) followed by Varanasi (53 percent) and lowest is in Balrampur (18 percent).

In Uttar Pradesh, a total of 34 percent of women are found to have unmet need for family planning, with 20 percent for limiting and 13 percent for spacing. There are no inter-district differences in the pattern of unmet need. The total unmet need varies from 20 percent in Jhansi to 48 percent in Rae Bareli followed by Azamgarh (46 percent).

Only 11 percent of the women in the state reported that either ANM/LHV or health worker visited them at their residence at least once in the past three months. Less than three fourth of women who were visited by ANM felt that ANM had given them sufficient time to discuss health-related matters.

More than fifty eight percent of the districts, less than 10 percent of the women reported the visit of ANM/LHV to their residence. In the 16 districts, 10-15 percent of the women reported visits of ANM/LHV and in the remaining more than 15 percent of the women reported visit of ANM/LHV.

It has been observed that in three months period prior to survey, 54 percent of the eligible women who were required to consult health facility visited any of the government health facilities. Very small proportion of the women who visited the health facility rated facility as excellent. On the other hand, nearly 35 percent of the women who did not visit the government health facility reported government health facility “non-conveniently located” or “time is not suited” as reason.

The district level variation in the utilization of the government health facilities ranges from 7 percent in Ambedaker Nagar to 78 percent in Shahjahanpur. A large percentage of women visited private health facilities (78 percent) with the range being 22 percent in Shahjahanpur to 93 percent in Ambedaker Nagar.

In Uttar Pradesh, 29 and 35 percent of women are aware of RTI/STI and HIV/AIDS respectively. The corresponding level of awareness among husbands of eligible women is 39 and 68 percent. The percent of women who are aware of RTI/STI

and HIV/AIDS is lowest in Shahjahanpur and Hardoi 3 and 11 percent respectively to highest in Sant Ravidas Nagar and Kanpur Nagar 71 and 63 percent respectively. Similarly awareness level of husbands of eligible women of RTI/STI and HIV/AIDS are lowest in Firozabad (9 percent) and in Hardoi (37 percent) to highest in Ghaziabad (63 percent) and in Varanasi (86 percent) respectively. In 40 of the 70 districts, the awareness of HIV/AIDS is below the state figure for women and in 37 districts for husbands of eligible women.

About 36 percent of women and 9 percent of husbands of eligible women in the state reported having at least one symptom of RTI/STI. In most of the districts, the reported prevalence of RTI/STI among husbands was low. The prevalence of RTI/STI is lowest in Hamirpur (20 percent) for women and in Ambedaker Nagar (3 percent) for husbands to highest in Muzaffarnagar (59 percent) for women and in Bareilly (22 percent) for husbands. About 23 percent of women reported vaginal discharge with low in Kaushambi (8 percent) to highest in Moradabad (46 Percent). Thirty three percent of women sought treatment for vaginal discharge problem and 43 percent of husbands sought treatment with at least one symptoms of RTI/STI. It may be noted that in 50 out of 70 districts higher proportion of husbands compared to women sought treatment for their reproductive health problems.

CHAPTER I

INTRODUCTION

1.1 Background and Objectives of the Survey

The Reproductive and Child Health (RCH) programme that has been launched by Government of India (GoI) in 1996-97 is expected to provide quality services and achieve multiple objectives. It ushered a positive paradigm shift from method-oriented, target-based activity to providing client-centred, demand-driven quality services. Also, efforts are being made to reorient provider's attitude at grassroots level and to strengthen the services at outreach levels.

The new approach requires decentralization of planning, monitoring and evaluation of the services. The district being the basic nucleus of planning and implementation of the RCH programme, Government of India has been interested in generating district level data on utilization of the services provided by government health facilities, other than that based on service statistics. It is also of interest to assess people's perceptions on quality of services. Therefore, it was decided to undertake District Level Household Survey (DLHS) under the RCH programme in the country.

The Round I of RCH survey was conducted during the year 1998-99 in two phases (each phase covered half of the districts from all states/union territories) in 504 districts for which International Institute for Population Sciences (IIPS), Mumbai was designated as the nodal agency.

In Round II, survey was completed during 2002-04 in 593 districts as per the 2001 Census. In DLHS-RCH, information about RCH has been collected using a slightly modified questionnaire. In Round II, some new dimensions, such as test of cooking salt to assess the consumption of salt fortified with iodine, collection of blood of children, adolescents and pregnant women to assess the level of anaemia, and measurement of weight of children to assess the nutritional status, were incorporated.

The main focus of the DLHS-RCH has been on the following aspects:

- Coverage of ANC and immunization services
- Proportion of safe deliveries
- Contraceptive prevalence rate
- Unmet need for family planning
- Awareness about RTI/ STI and HIV/AIDS
- Utilization of government health services and users' satisfaction.

For the purpose of conducting DLHS-RCH, all the states and the union territories were grouped into 16 regions. A total of twelve research organizations including Population Research Centres (PRCs) were involved in conducting the survey in 16 regions with IIPS as the nodal agency.

1.2 Survey Design

In Round II, a systematic, multi stage stratified sampling design was adopted. In each district, 40 Primary Sampling Units (PSUs – Villages/Urban Frame Size) were selected with probability proportional to size (PPS) using the 1991 Census data. All the villages were stratified according to population size, and female literacy was used for implicit arrangement within each strata. The number of PSUs in rural and urban areas was decided on the basis of percent of urban population in the district. However, a minimum of 12 urban PSUs were selected in each district in case the percent urban was low. The target sample size in each district was set at 1,000 complete residential households from 40 selected PSUs. In the second stage, within each PSU, 28 residential households were selected with Circular Systematic Random Sampling (CSRS) procedure after house listing. In order to take care of non-response due to various reasons, sample was inflated by 10 percent (i.e. 1,100 households).

For selecting the urban sample, the National Sample Survey Organization (NSSO) provided the list of selected urban frame size (UFS) blocks in the district. The UFS blocks were made available separately for each district for urban areas. The maps of selected blocks were obtained from the NSSO field office located in each state/union-territory.

But in each state, in two districts, the PSUs that were surveyed in Round I of DLHS-RCH (also known as RHS-RCH) were also selected for survey in Round II. This was done in order to measure the changes more accurately. Two districts, one with the highest proportion of safe delivery and another with the lowest proportion of safe delivery among those surveyed during Round I of the survey were selected for this purpose. In all other districts, fresh sample of PSUs were selected.

1.3 House Listing and Sample Selection

The household listing operation was carried out in each of the selected PSU segment prior to the data collection that provided the necessary frame for selecting the households. The household listing operation also involved preparation of location map and layout sketch map of the structures and recording the details of the households in these structures in each selected PSU. This exercise was carried out by independent teams each comprising one lister, one mapper and one supervisor under the overall guidance and monitoring of the survey coordinator of households of the selected regional agencies.

A complete listing of households was carried out in villages with households up to 300. In case of villages with more than 300 households but less than or equal to 600 households, two segments of more or less same size were formed and one segment was selected at random and household listing was carried out. In case of villages with more than 600 households, segments each of about 150 households were formed and two segments were selected for listing using systematic random sampling method.

Small villages with less than 50 households were linked with a nearest village. After combining it with the nearest village, the same sampling procedure was adopted as mentioned above.

For the urban PSUs, the selected UFS blocks needed no segmentation as they were of almost equal size and contained less than 300 households.

No replacement was made if selected household was absent during data collection. However, if a PSU was inaccessible, a replacement PSU with similar characteristics was selected by the IIPS and provided to the regional agency for survey.

1.4 Questionnaire

DLHS-RCH collected information on a various indicators pertaining to RCH that would assist policymakers and programme managers to formulate and implement the goals set for RCH programmes. The International Institute for Population Sciences (IIPS), Mumbai, the Nodal Agency for DLHS–RCH project has made necessary modifications in the two Questionnaires: Households Questionnaire and Women’s Questionnaire and added three more Questionnaires i.e., Husband’s Questionnaire, Village Questionnaire and Health Questionnaire, in consultation with MoHFW and World Bank. These Questionnaires were discussed and finalized in training cum workshop organized at IIPS during the first week of November 2001.

These modified questionnaires had been canvassed for round II of the DLHS–RCH survey, taking into consideration the views of all the regional agencies involved. The house listing teams and the interviewers and the supervisors for the main survey were given rigorous training based on the manuals developed for the purpose by the Nodal Agency.

All the questionnaires were bilingual, with questions in both regional and English language.

The Details of questionnaires are as follows:

Household Questionnaire: The household questionnaire lists all usual residents in each sample household including visitors who stayed in the household the night before the interview. For each listed household member, the survey collected basic information on age, sex, and marital status, relationship to the head of the household, education and the prevalence /incidence of tuberculosis, blindness and malaria. Information was also collected on the main source of drinking water, type of toilet facility, source of lighting, type of cooking fuel, religion and caste of household head and ownership of other durable goods in the household. In addition, a test was conducted to assess whether the household used cooking salt that has been fortified with iodine. Besides, details of

marriages and deaths which happen to usual residents within reference period were collected. Efforts were also made to get information about maternal deaths.

Women Questionnaire: Women questionnaire is designed to collect information from currently married women age 15 – 44 years who are usual residents of the sample household or visitors who stayed in the sample household the night before the interview. The women questionnaire covered the following sections:

Section I: Background Characteristics: In this section the information collected on age, educational status and birth and death history of biological children including still birth, induced and spontaneous abortions.

Section II: Antenatal, Natal and Post natal Care: In this section the questionnaire collect information only from the women who had live birth, still birth, spontaneous or induced abortion during last three years preceding the survey date. The information on whether women received antenatal and postpartum care, who attended the delivery and the nature of complications during pregnancy for recent births were also collected.

Section III: Immunization and childcare: This section gives information about feeding practices, the length of breastfeeding, immunization coverage and recent occurrence of diarrhoea, and pneumonia for young children (below age 3 years).

Section IV: Contraception: This section provides information on knowledge and use of specific family planning methods. Questions were included about reasons for non use, intentions about future use, desire for additional child, sex preference for next child etc.

Section V: Assessment of quality of Government health services and client satisfaction. In this section the questions are targeted to assess the quality of family planning and health services provided by Government health facilities. The information were also collected about the rating of Government health facilities and staffs and reasons for not visiting to government health facilities by eligible woman.

Section VI: Awareness about RTI/STI and HIV/AIDS: In this section the information were collected about women's knowledge of RTI/STI about awareness, Source of knowledge, aware of mode of transmission, curability, symptoms and treatment seeking behaviour. About HIV/AIDS; Awareness, Source of knowledge, aware of mode of transmission and prevention etc were canvassed.

Husband Questionnaire: In DLHS-RCH, round II, husband questionnaire was used to collect information from eligible women's husbands about age, educational status, knowledge and source of knowledge of RTI/STI and HIV/AIDS reported symptoms of RTI/STI and male participation. Apart from these information desires for children, reasons for not using F.P. methods, future intention to use F.P. methods and knowledge about no scalpel vasectomy (NSV) has also been collected.

Health Questionnaire: In DLHS-RCH, round II, a health questionnaire is included. The information collected were on weight of children age 0–71 months old and the blood sample to assess the haemoglobin levels of children age 0–71 months old, adolescents 10–19 years old and pregnant eligible women. This information is useful for assessing the levels of nutrition prevailing in the population and prevalence of anaemia among women, adolescent girls and children.

Village Questionnaire: A village questionnaire is also added in this round of DLHS. The information collected on the availability and accessibility of various facilities in the village especially on accessibility of educational and health facilities.

1.5 Fieldwork and Sample Coverage

The fieldwork for RCH Round II was done in two phases. During Phase I, 9 districts were covered from May 2002 to August 2002 and remaining 9 districts were covered during Phase II from January 2004 to July 2004.

During Round II, a total of 18,785 households were covered. From these surveyed households, 15,614 currently married women (aged 15-44 years) and 10,958 husbands of eligible women were interviewed.

1.6 Data Processing

All the five types of completed questionnaires were brought to the headquarter of regional agencies and data were processed using microcomputers. The process consisted of office editing of questionnaires, data entry, data cleaning and tabulation. Data cleaning included validation, range and consistency checks. For both data entry and tabulation of the data, IIPS developed the software package. The district and state level reports were prepared by regional agency whereas national report is prepared by the nodal agency.

1.7 Sample Weights

In generating district level demographic indicator sample weight for household, women and husband, weight have been used and these for a particular district are based on three selection probabilities f_1^i , f_2^i and f_3^i pertaining to i^{th} PSU of the district. These probabilities are defined as

$$f_1^i = \text{Probability of selection of } i^{\text{th}} \text{ PSU in a district}$$

$$= \frac{(n_r * H_i)}{H}$$

Where, n_r is the number of rural PSU to be selected in a district, H_i refers to the number of household in the i^{th} PSU and $H = \sum H_i$, total number of household in a district.

$f_2^i =$ Probability of selecting segment (s) from segmented PSU
(in case the i^{th} selected PSU is segmented)

$=$ (Number of segments selected after segmentation of PSU) / (number of segment created a PSU)

The value of f_2^i is to be equal to one for un-segmented PSU.

$f_3^i =$ probability of selecting a household from the total listed households of a PSU or in segment(s) of a PSU

$$= \frac{28 * HR_i}{HL_i}$$

Where HR_i is the household response rate of the i^{th} sampled PSU and HL_i is the number of households listed in i^{th} PSU in a district.

For urban PSU, f_1^i is computed either as the ratio of number of urban PSUs to be included from the district to the total number of UFS blocks of the district or as the ratio of urban population of the selected PSU to the total urban population of the district.

The probability of selecting a household from the district works out as;

$$f^i = (f_1^i * f_2^i * f_3^i)$$

The non-normalized household weight for the i^{th} PSU of the district is, $w^i = \frac{1}{f^i}$, while the normalized weight used in the generation of district indicators as

$$n_i^d = \frac{\sum_i n_i}{\sum_i n_i * w^i} * w^i, \quad i=1,2,3,\dots,40.$$

Where n_i is the number of households interviewed in the i^{th} PSU. The weight for women and husband are computed in the similar manner after multiplication of expression for f^i by the corresponding response rate. State weights for households, women and husbands are further derived from the district weights n_i^d for the i^{th} psu in d^{th} district using external control so that for sample results do not deviate from the corresponding information about the population.

Let, $n_s = \sum_i n_i^d$ and $N_I = \sum_i N_i^d$, denote the number of households in the sample and census of a particular state, then state level households weights are work out as;

$$n_i^s = n_i^d * \frac{\left(\frac{n_i^d}{n_s} \right)}{\left(\frac{N_i^d}{N_{sc}} \right)}, \text{ where } n_i^d \text{ household sample in } i^{\text{th}} \text{ district, } n_s \text{ is the total sample}$$

in the state, N_i^d is the census population in the i^{th} district and N_{sc} is the census population in the state.

These households' weights are controlled for rural-urban separately.

Considering sample and census currently married women in 15-44 years and married males above 15 years for specified state by districts and rural-urban residence, state level women and husbands' weights are obtained for estimation of state level indicators.

1.8 Sample Implementation

Table 1.1 shows the period of fieldwork, number of households interviewed and household's response rates. A total of 72,050 households were interviewed, more than two thirds were rural. The overall household response rate – the number of households interviewed per 100 occupied households – was 98 percent. The household response rate was more than 95 percent in every district.

Table 1.1 NUMBER OF HOUSEHOLD INTERVIEWED						
Month and year of fieldwork and number of households interviewed by district, Uttar Pradesh, 2002-04						
State/District	Month and year of field work		Number of households interviewed			Response rate
	From	To	Total	Rural	Urban	
State	-	-	72,050	49,308	22,742	97.8
State-phase I	03/2002	08/2002	-	-	-	-
State-phase II	01/2004	08/2004	-	-	-	-
Agra	05/2002	05/2002	991	577	414	95.7
Azamgarh	05/2002	06/2002	1,037	732	305	98.6
Ballia	05/2002	06/2002	1,044	735	309	98.2
Barabanki	04/2002	07/2002	1,053	743	310	99.2
Bareilly	04/2002	06/2002	990	695	295	95.3
Bijnor	04/2002	06/2002	1,004	717	287	96.5
Budaun	05/2002	06/2002	995	697	298	96.9
Etah	05/2002	05/2002	984	701	283	96.9
Fatehpur	06/2002	06/2002	1,073	749	324	99.0
Firozabad	04/2002	05/2002	1,019	718	301	97.2
Gautam Buddha Nagar	07/2002	08/2002	1,042	676	366	98.2
Ghazipur	04/2002	05/2002	1,073	756	317	99.2
Gorakhpur	06/2002	06/2002	1,038	737	301	98.1
Hardoi	04/2002	04/2002	961	858	103	95.2
Jalaun	06/2002	06/2002	1,035	723	312	98.9
Jaunpur	04/2002	05/2002	1,066	762	304	98.8
Jhansi	07/2002	07/2002	1,021	604	417	97.4
Kannauj	04/2002	05/2002	1,034	730	304	97.5
Kanpur Dehat	06/2002	07/2002	1,059	742	317	99.5
Kanpur Nagar	07/2002	08/2002	991	163	828	96.4
Kheri	04/2002	07/2002	1,081	765	316	99.8
Lalitpur	07/2002	07/2002	1,064	744	320	99.5
Lucknow	06/2002	08/2002	1,036	396	640	97.9
Maharajganj	06/2002	06/2002	1,043	737	306	98.9
Mirzapur	05/2002	05/2002	1,054	731	323	98.7
Pilibhit	05/2002	05/2002	996	712	284	96.4
Pratapgarh	04/2002	05/2002	1,081	754	327	99.7
Rae Bareli	04/2002	05/2002	1,035	727	308	98.9
Rampur	04/2002	06/2002	1,009	712	297	95.7
Saharanpur	03/2002	06/2002	997	705	292	95.3
Shahjahanpur	04/2002	05/2002	1,033	732	301	97.7
Sitapur	04/2002	06/2002	1,076	757	319	99.3
Sonbhadra	05/2002	06/2002	1,027	700	327	97.8
Sultanpur	04/2002	05/2002	1,070	756	314	98.7

Note: Table based on unweighted cases.

(Contd...)

Table 1.1 NUMBER OF HOUSEHOLDS INTERVIEWED (Contd.)						
Month and year of fieldwork and number of households interviewed by district, Uttar Pradesh, 2002-04						
State/District	Month and year of field work		Number of households interviewed			Response rate
	From	To	Total	Rural	Urban	
Aligarh	01/2004	01/2004	1,027	722	305	96.8
Allahabad	06/2004	07/2004	986	706	280	97.1
Ambedaker Nagar	05/2004	06/2004	1,003	706	297	98.0
Auraiya	02/2004	02/2004	1,036	727	309	98.2
Baghpat	03/2004	04/2004	1,028	723	305	97.3
Bahraich	02/2004	03/2004	1,034	733	301	98.1
Balrampur	03/2004	04/2004	1,002	706	296	97.2
Banda	07/2004	07/2004	998	700	298	97.8
Basti	04/2004	05/2004	1,026	732	294	98.1
Bulandshahar	01/2004	01/2004	1,026	719	307	98.7
Chandauli	06/2004	07/2004	1,053	747	306	98.4
Chitrakoot	06/2004	07/2004	1,052	744	308	99.2
Deoria	05/2004	06/2004	1,017	726	291	97.8
Etawah	01/2004	02/2004	1,052	732	320	97.7
Faizabad	05/2004	06/2004	989	724	265	96.0
Farrukhabad	02/2004	03/2004	1,011	711	300	97.3
Ghaziabad	01/2004	01/2004	1,027	475	552	97.9
Gonda	03/2004	04/2004	1,049	737	312	98.9
Hamirpur	07/2004	08/2004	1,037	726	311	98.6
Hathras	01/2004	02/2004	1,049	735	314	98.9
Jyotiba Phule Nagar	03/2004	03/2004	1,034	736	298	97.5
Kaushambi	07/2004	08/2004	984	711	273	96.9
Kushinagar	06/2004	06/2004	1,008	716	292	97.7
Mahoba	07/2004	08/2004	997	693	304	97.9
Mainpuri	02/2004	02/2004	1,040	731	309	98.2
Mathura	01/2004	01/2004	1,060	752	308	99.0
Mau	05/2004	06/2004	1,034	738	296	97.0
Meerut	03/2004	04/2004	1,060	540	520	98.2
Moradabad	02/2004	03/2004	1,042	739	303	98.4
Muzaffarnagar	03/2004	04/2004	1,045	739	306	98.0
Sant Kabir Nagar	04/2004	05/2004	1,009	708	301	98.2
Sant Ravidas Nagar	06/2004	07/2004	1,054	747	307	97.2
Shrawasti	02/2004	03/2004	992	707	285	97.2
Siddharthnagar	04/2004	05/2004	1,019	708	311	96.4
Unnao	07/2004	08/2004	1,042	741	301	98.0
Varanasi	04/2004	05/2004	1,016	628	388	97.2

Note: * Based on unweighted cases.

In the interviewed households, interviews were completed with 64,207 currently married women who are the usual member of the household or stayed night before the household interview and 37,463 husbands of eligible women were also interviewed (Table 1.2). The number of completed interviews per 100 identified eligible women and husbands in the households with completed interviews were 86 and 60 percent respectively. The variation in the women's response rate by district was highest in Kanpur Dehat, Kheri, Sitapur, Baghpat and Muzaffarnagar (91 percent) and lowest in Mau (77 percent), similarly husband's response rate was found to be highest in Gonda (76 percent) and lowest in Kanpur Nagar (48 percent).

Table 1.2 NUMBER OF WOMEN AND HUSBANDS INTERVIEWED

Number of women and husbands interviewed by district, Uttar Pradesh, 2002-04

State/District	Number of women interviewed			Response rate	Number of husbands interviewed			Response rate
	Total	Rural	Urban		Total	Rural	Urban	
State	64,207	45,195	19,012	85.8	37,463	26,161	11,302	60.4
Agra	779	462	317	85.6	460	267	193	53.4
Azamgarh	1,123	842	281	78.9	484	320	164	54.2
Ballia	1,051	750	301	83.0	511	324	187	55.8
Barabanki	860	615	245	87.2	557	412	145	64.2
Bareilly	825	591	234	87.1	580	421	159	65.8
Bijnor	786	556	230	85.9	493	376	117	56.2
Budaun	873	612	261	86.9	563	410	153	60.3
Etah	820	593	227	83.5	505	374	131	54.9
Fatehpur	895	644	251	89.1	492	324	168	61.7
Firozabad	842	602	240	88.1	544	388	156	59.8
Gautam Buddha Nagar	878	587	291	86.4	589	404	185	61.3
Ghazipur	1,089	823	266	86.1	535	408	127	57.8
Gorakhpur	1,061	762	299	86.5	531	338	193	60.3
Hardoi	749	670	79	88.1	479	435	44	61.2
Jalaun	1,012	706	306	85.9	593	419	174	60.8
Jaunpur	1,197	897	300	86.9	546	420	126	59.3
Jhansi	932	570	362	89.1	504	298	206	54.1
Kannauj	829	600	229	86.2	530	391	139	58.6
Kanpur Dehat	870	636	234	90.6	499	360	139	61.2
Kanpur Nagar	780	142	638	90.0	380	68	312	48.2
Kheri	946	698	248	90.6	636	502	134	65.5
Lalitpur	1,010	736	274	88.2	698	537	161	66.3
Lucknow	812	322	490	88.0	477	170	307	58.0
Maharajganj	1,005	727	278	86.9	492	358	134	57.3
Mirzapur	1,017	729	288	88.6	602	391	211	64.6
Pilibhit	858	628	230	87.6	650	488	162	71.7
Pratapgarh	1,056	741	315	87.3	399	274	125	49.1
Rae Bareli	878	612	266	85.3	446	304	142	56.8
Rampur	844	605	239	87.6	557	411	146	61.3
Saharanpur	812	586	226	84.7	462	349	113	50.4
Shahjahanpur	816	570	246	85.4	594	433	161	67.8
Sitapur	982	682	300	91.3	623	465	158	64.1
Sonbhadra	916	669	247	90.3	589	381	208	67.1
Sultanpur	1,007	746	261	87.8	480	383	97	55.4

Note: * Based on unweighted cases.

(Contd..)

Table 1.2 NUMBER OF WOMEN AND HUSBANDS INTERVIEWED (Contd.)

Number of women and husbands interviewed by district, Uttar Pradesh, 2002-04

State/District	Number of women interviewed			Response rate	Number of husbands interviewed			Response rate
	Total	Rural	Urban		Total	Rural	Urban	
Aligarh	834	601	233	89.0	474	350	124	53.0
Allahabad	875	661	214	84.1	544	405	139	68.0
Ambedaker Nagar	1,037	777	260	79.7	609	411	198	70.9
Auraiya	787	552	235	87.1	444	309	135	52.9
Baghpat	922	637	285	91.0	487	336	151	51.7
Bahraich	917	660	257	85.5	634	473	161	73.0
Balrampur	923	667	256	80.2	577	402	175	68.4
Banda	847	606	241	87.1	478	349	129	62.1
Basti	956	712	244	80.5	517	359	158	59.2
Bulandshahar	807	554	253	85.2	462	322	140	52.0
Chandauli	1,130	836	294	81.8	679	496	183	62.8
Chitrakoot	994	732	262	87.6	607	444	163	66.8
Deoria	1,059	792	267	83.8	541	387	154	62.5
Etawah	805	559	246	88.4	453	308	145	52.8
Faizabad	898	672	226	79.0	472	338	134	59.7
Farrukhabad	755	543	212	86.1	430	296	134	52.1
Ghaziabad	877	393	484	89.4	523	244	279	55.6
Gonda	1,014	744	270	83.9	669	458	211	75.6
Hamirpur	847	613	234	86.7	549	394	155	67.5
Hathras	874	617	257	89.7	510	359	151	55.0
Jyotiba Phule Nagar	827	611	216	86.1	512	395	117	56.4
Kaushambi	869	606	263	85.4	544	389	155	70.6
Kushinagar	1,045	775	270	84.8	548	372	176	59.6
Mahoba	753	534	219	86.3	452	317	135	61.1
Mainpuri	806	563	243	87.4	444	311	133	51.3
Mathura	928	660	268	87.1	596	431	165	60.9
Mau	1,050	808	242	77.1	601	430	171	62.7
Meerut	872	451	421	89.7	518	277	241	56.6
Moradabad	803	601	202	87.2	455	355	100	52.4
Muzaffarnagar	875	628	247	91.1	451	324	127	50.0
Sant Kabir Nagar	947	680	267	80.1	514	337	177	69.7
Sant Ravidas Nagar	1,186	892	294	82.1	719	517	202	69.7
Shrawasti	941	683	258	83.3	571	434	137	62.7
Siddharthnagar	988	700	288	79.6	520	342	178	60.9
Unnao	912	659	253	86.1	607	441	166	72.3
Varanasi	1,037	705	332	83.0	672	446	226	67.5

Note: * Based on unweighted cases.

1.9 Basic Demographic Profile of the State

Before presenting the survey results, the basic demographic features of Uttar Pradesh and its districts (as per census, 2001) are presented here.

The state of Uttar Pradesh, located in the northern part of the country with 166 million population in 2001, is the largest state in India in terms of population. The geographical location of the state is quite unique. Garlanded by the Ganga and Yamuna, the two pious rivers of Indian mythology, Uttar Pradesh is surrounded by Bihar in the East, Madhya Pradesh in the South, Rajasthan, Delhi, Himachal Pradesh and Haryana in the west and Uttaranchal in the north and Nepal touches the northern borders of Uttar Pradesh, it assumes strategic importance for Indian defence. In other words, wide range of the Himalayas has bordered this state in the north whereas the southern part is edged by the other Indian states.

The state consists of 70 districts, 300 sub-districts (Blocks) and 1,07,452 villages. The urban areas of the state comprise 704 towns during 2001. Lucknow is the capital of the state.

According to 2001 census, the population of Uttar Pradesh is 166.2 million out of which 87.6 millions are males and 78.6 millions are females. The rural and urban breakup of the population shows that 79.2 percent of the population was enumerated in rural areas and 20.8 percent in urban areas. Keeping pace with the national average, Uttar Pradesh has recorded a slight increase in the decadal growth rate from 25.5 per cent in 1981-91 to 25.9 percent during 1991-2001. Among the districts, Ghaziabad with 47.5 percent has the highest decadal growth rate whereas Baghpat with 13.0 percent has the lowest decadal growth rate of total population during 1991-2001.

Percentage of both Scheduled Caste and Schedule Tribe population have experienced a marginal decline during 1991-2001 and the proportion of scheduled caste and scheduled tribe population in total population of 2001 are 21.1 percent and 0.1 percent respectively. Highest proportion of Scheduled Caste population has been recorded in Sonbhadra district (41.9 per cent) and that of Scheduled Tribe in Kheri (1.2 per cent) and Baghpat has the lowest proportion of Scheduled Caste (10.9 percent) and Chitrakoot has the lowest proportion of Scheduled Tribe (almost zero percent). With a population density of 689 per sq. km., Uttar Pradesh ranks 9th among the states and union territories in India and this figure is more than two times higher than the all India density of 325 persons per square km. Among the districts, Ghaziabad has the highest density (2866 person/sq. km.) and Sonbhadra has the lowest (216 person/sq. km.).

The sex ratio of the total population in the state has improved since 1991 Census from 876 to 898 per 1000 males. Azamgarh has recorded the highest sex ratio (1026) and Shahjahanpur has the lowest (838) within the state.

The literacy rate in the state has improved from 40.7 percent in 1991 to 56.3 percent in 2001 and it is lower than the national average of 64.8 percent. The literacy rate in urban (58.9 percent) is considerably higher in the state than that in rural areas (42.0 percent). Among the districts, Kanpur Nagar has the highest literacy rate of 77.6 percent. Shrawasti has the lowest literacy rate of 34.2 percent. The male literacy for the state is 70.2 percent and the female literacy rate is 42.9 percent. Both the rates have increased from 1991 census to 2001 census.

Table 1.3 BASIC DEMOGRAPHIC INDICATOR

Basic demographic indicator of India, state and districts, Census 2001

India/state/district	Population (in thousand)	Percentage urban	Percentage decadal growth rate ¹	Sex ratio ²	Percentage literate 7+		
					Male	Female	Persons
India	1,028,737	28.0	21.5	933	75.3	53.7	64.8
State	1,66,197	20.8	25.9	898	68.8	42.2	56.3
Agra	3,611	43.3	31.3	852	79.3	48.2	65.0
Aligarh	2,990	28.8	22.1	861	73.2	43.9	59.7
Allahabad	4,942	24.4	26.7	882	77.1	46.6	62.9
Ambedaker Nagar	2,025	8.9	24.3	977	71.9	46.0	59.1
Auraiya	1,179	14.3	14.7	856	81.9	60.1	71.5
Azamgarh	3,951	7.5	26.3	1,026	70.5	42.4	56.2
Baghpat	1,164	19.7	13.0	848	78.6	50.4	65.7
Bahraich	2,384	9.9	29.6	865	46.3	23.3	35.8
Ballia	2,752	9.7	21.7	952	73.6	43.9	58.9
Balrampur	1,685	8	23.1	896	46.3	21.6	34.7
Banda	1,500	15.8	18.5	860	69.9	37.1	54.8
Bara Banki	2,673	9.3	26.4	886	60.1	35.6	48.7
Bareilly	3,599	32.9	27.0	872	59.1	35.1	48.0
Basti	2,069	5.5	22.7	916	68.2	39.0	54.3
Bijnor	3,131	24.3	27.2	896	70.2	47.3	59.4
Budaun	3,069	18.1	25.4	841	49.9	25.5	38.8
Bulandshahr	2,923	23.1	22.2	881	75.6	42.8	60.2
Chandauli	1,640	10.5	28.6	922	75.6	45.5	61.1
Chitrakoot	801	9.9	34.3	872	78.8	51.3	66.1
Deoria	2,730	9.8	25.1	1,003	76.3	43.6	59.8
Etah	2,788	17.3	24.2	847	69.1	40.7	56.2
Etawah	1,340	23	21.6	856	81.2	58.5	70.8
Faizabad	2,088	13.4	23.9	940	70.7	43.4	57.5
Farrukhabad	1,577	21.7	22.8	860	72.4	50.4	62.3
Fatehpur	2,306	10.2	21.4	892	73.1	44.6	59.7
Firozabad	2,046	30.3	33.4	851	77.8	53.0	66.5
Gautam Buddha Nagar	1,191	37.3	35.7	842	82.6	54.6	69.8
Ghaziabad	3,290	55.2	47.5	860	81.0	59.1	70.9
Ghazipur	3,049	7.6	26.2	974	75.5	44.4	60.1
Gonda	2,766	7	25.5	899	56.9	27.3	43.0
Gorakhpur	3,785	19.5	23.4	959	76.7	44.5	61.0
Hamirpur	1,042	16.6	17.9	852	72.8	40.7	58.1
Hardoi	3,397	11.9	23.7	843	65.1	37.6	52.6
Hathras	1,333	19.7	18.3	856	77.2	47.2	63.4
Jalaun	1,456	23.4	19.4	847	79.1	50.7	66.1
Jaunpur	3,911	7.3	21.7	1,021	77.2	43.5	60.0
Jhansi	1,747	40.7	23.2	870	80.1	51.2	66.7
Jyotiba Phule Nagar	1,499	24.5	29.7	885	63.5	35.1	50.2
Kannauj	1,385	16.7	19.6	868	73.4	50.0	62.6
Kanpur Dehat	1,584	6.8	21.6	856	76.8	54.5	66.6

Source: Primary Census Abstract, Series 20, Census of India, 2001. ¹ 1991-2001, ² Females per 1,000 males.

(contd...)

Table 1.3 BASIC DEMOGRAPHIC INDICATOR (Contd...)							
Basic demographic indicator of India, state and districts, Census 2001							
India/state/district	Population (in thousand)	Percentage urban	Percentage decadal growth rate ¹	Sex ratio ²	Percentage literate 7+		
					Male	Female	Persons
India	1,028,737	28.0	21.5	933	75.3	53.7	64.8
State	1,66,197	20.8	25.9	898	68.8	42.2	56.3
Kanpur Nagar	4,137	67.1	27.2	869	82.1	72.5	77.6
Kaushambi	1,295	7	26.7	894	63.5	30.8	48.2
Kheri	3,200	10.7	32.3	875	61.0	35.9	49.4
Kushinagar	2,892	4.5	28.2	961	65.4	30.9	48.4
Lalitpur	977	14.5	30.0	884	64.5	33.3	49.9
Lucknow	3,681	63.6	33.3	891	76.6	61.2	69.4
Maharajganj	2,167	21.8	29.3	933	65.4	28.6	47.7
Mahoba	709	5	21.8	866	66.8	39.6	54.2
Mainpuri	1,593	14.5	21.5	855	78.3	52.7	66.5
Mathura	2,070	28.2	27.0	841	77.6	43.8	62.2
Mau	1,849	19.4	27.9	984	79.0	50.9	64.9
Meerut	3,002	48.4	24.2	871	76.1	54.1	66.0
Mirzapur	2,115	13.5	27.6	897	70.5	39.9	56.1
Moradabad	3,750	30.5	26.5	885	56.7	33.3	45.7
Muzaffarnagar	3,542	25.5	24.6	872	73.1	48.6	61.7
Pilibhit	1,644	17.8	28.1	876	63.8	35.8	50.9
Pratapgarh	2,727	5.2	23.4	983	74.6	42.6	58.7
Rae Bareli	2,872	9.5	23.7	949	69.0	40.4	55.1
Rampur	1,922	24.9	28.0	882	48.6	27.9	39.0
Saharanpur	2,848	25.8	23.4	868	72.3	51.4	62.6
Sant Kabir Nagar	1,425	7	23.6	978	67.9	35.5	51.7
Sant Ravidas Nagar Bhadohi	1,352	12.8	25.5	918	78.0	38.7	59.1
Shahjahanpur	2,549	20.6	28.3	838	60.5	34.7	48.8
Shrawasti	1,175	2.8	27.3	859	47.3	18.8	34.3
Siddharthnagar	2,039	3.8	26.8	946	58.7	28.4	44.0
Sitapur	3,617	11.9	26.6	862	61.0	35.1	49.1
Sonbhadra	1,463	18.8	36.1	896	63.8	34.3	50.0
Sultanpur	3,191	4.7	24.2	980	71.9	41.8	56.9
Unnao	2,700	15.2	22.7	898	67.6	42.4	55.7
Varanasi	3,148	40.1	25.5	908	83.7	48.6	67.1

Source: Primary Census Abstract, Series 20, Census of India, 2001. ¹ 1991-2001, ² Females per 1,000 males.

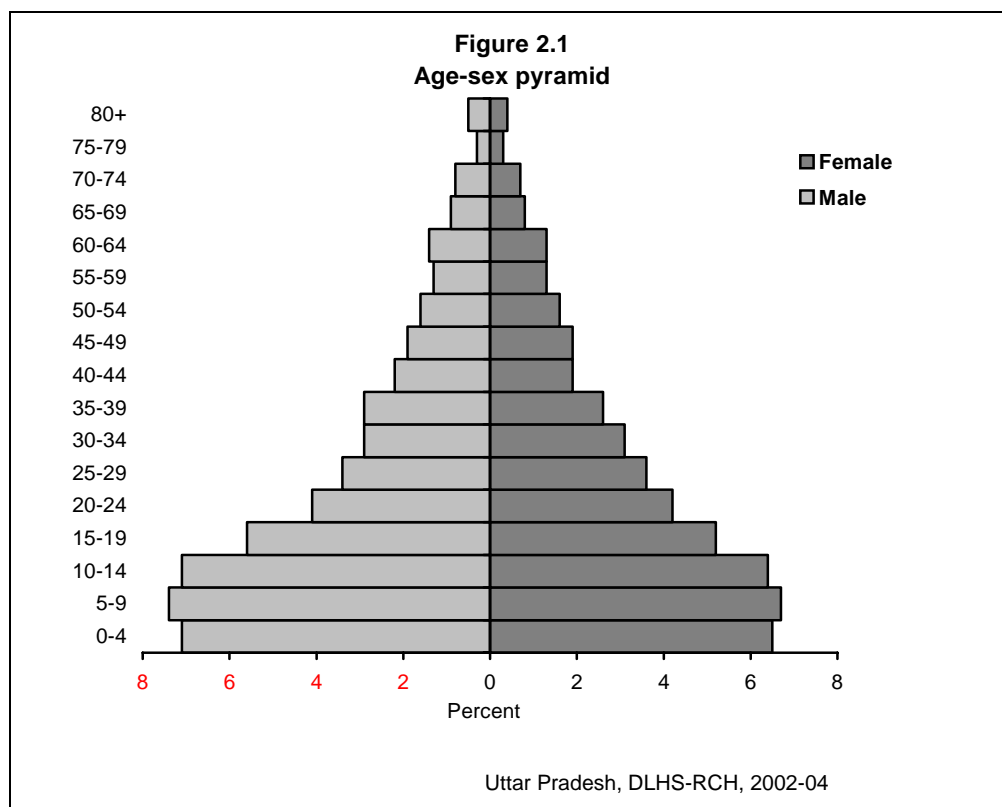
CHAPTER II

BACKGROUND CHARACTERISTICS OF HOUSEHOLD

This chapter provides a socio-economic and demographic profile of households interviewed in the District Level Household Survey-Reproductive and Child Health. Facilities and services such as Health, Education and Communication available in the representative sampled village are also presented here. The *de facto* producer of enumeration is adopted in order to include every individual staying in the sampled Primary Sampling Units (PSU), either a village or an urban area, the night before the survey. The objective of adopting the *de facto* method is to avoid duplication of persons who are in transit.

2.1 Age –Sex Structure

The age-sex distribution of sampled household population classified by residence is presented in Table 2.1. The percent distribution is based on sampled *de facto* population of 4,34,478 persons of whom 69 percent lived in the rural areas of Uttar Pradesh. The state of Uttar Pradesh depicts a young and growing population with 41 percent below the age of 15 years (Figure 2.1). There are more children below 15 years recorded in rural areas (43 percent) compared to those in urban areas (25 percent).



The overall sex ratio of 105 males per 100 females is recorded for the *de facto* population. The sex ratio is more skewed, 107 in favour of males in urban areas compared to 104 in rural areas.

Table 2.1 HOUSING POPULATION BY AGE AND SEX									
Percent distribution of the household population by age and by residence and sex, Uttar Pradesh, 2002-04									
Age	Total			Rural			Urban		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
< 1	2.8	2.8	2.8	3.0	3.0	3.0	2.2	2.1	2.3
1-4	10.8	11.0	10.5	11.6	11.9	11.2	9.0	9.1	9.0
5-9	14.2	14.5	13.9	15.0	15.4	14.6	12.2	12.3	12.2
10-14	13.5	13.8	13.2	13.6	14.2	13.1	13.3	13.1	13.4
15-19	10.8	10.9	10.8	10.3	10.3	10.3	12.1	12.3	11.8
20-24	8.3	7.9	8.6	7.7	7.1	8.2	9.6	9.8	9.4
25-29	7.0	6.6	7.4	6.7	6.2	7.2	7.6	7.4	7.9
30-34	6.0	5.6	6.4	5.8	5.3	6.3	6.5	6.3	6.7
35-39	5.5	5.6	5.4	5.2	5.4	5.1	6.1	6.0	6.1
40-44	4.1	4.2	4.0	3.9	4.0	3.8	4.6	4.9	4.3
45-49	3.8	3.6	4.0	3.6	3.4	3.8	4.2	4.0	4.4
50-54	3.2	3.1	3.3	3.1	3.0	3.2	3.4	3.3	3.4
55-59	2.6	2.5	2.7	2.6	2.5	2.7	2.5	2.6	2.5
60-64	2.7	2.8	2.7	2.8	2.9	2.8	2.5	2.5	2.5
65-69	1.8	1.8	1.7	1.9	1.9	1.8	1.6	1.6	1.6
70-74	1.5	1.6	1.4	1.6	1.7	1.4	1.3	1.3	1.3
75-79	0.6	0.6	0.5	0.6	0.7	0.6	0.5	0.5	0.5
80+	0.9	0.9	0.8	0.9	1.0	0.9	0.7	0.7	0.6
Total percent	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of persons	4,34,478	2,23,285	2,11,192	3,00,632	1,53,964	14,46,667	1,33,847	69,321	64,525
Sex ratio ¹	105	NA	NA	104	NA	NA	107	NA	NA

Note: Table is based on the *de facto* population, i.e. persons who stayed in the household the night before the interview (including both usual resident and visitors)
NA: Not applicable
¹ Male per 100 females

2.2 Household Characteristics

The percent distribution of 72,050 households surveyed in the state of Uttar Pradesh by selected characteristics of the household head and the number of usual household members are shown in Table 2.2. This is based on *de jure*, the usual resident population. Ninety percent of household heads are male invariant of place of residence while only 10 percent are female-headed households. Nearly 67 percent of household heads are in the 30-59 years age group. The median age of household heads is 45 years for the state as a whole and it is same in urban and rural areas. About 11 percent of household heads are younger than 30 years and 22 percent are at least 60 years old. Majority of the household heads are Hindu (82 percent), 17 percent are Muslim, and 1 percent belongs to other religions. Hindus constitute a higher proportion of population in rural areas (87 percent) than in urban areas (71 percent). Only 27 percent of the urban households are Muslim, but only 13 percent of rural households are Muslim.

Table 2.2 HOUSEHOLD CHARACTERISTICS

Percent distribution of the household head by selected characteristics of the household head and household size, according to residence, Uttar Pradesh, 2002-04

Characteristic	Total	Residence	
		Rural	Urban
Sex of the household head			
Male	89.7	89.2	90.9
Female	10.3	10.8	9.1
Age of the household head			
< 30	11.4	12.5	9.1
30-44	37.8	37.1	39.5
45-59	29.2	27.9	31.9
60+	21.6	22.6	19.5
Median age of the household head	45.0	45.3	45.1
Religion of the household head			
Hindu	82.0	87.1	71.0
Muslim	17.3	12.7	27.3
Christian	0.2	0.1	0.4
Sikh	0.3	0.1	0.9
Buddhist	0.0	0.0	0.0
Jain	0.1	0.0	0.3
Zoroastrian	0.0	0.0	0.0
Other	0.0	0.0	0.0
Caste/tribe of the household head			
Scheduled caste	23.4	27.0	15.4
Scheduled tribe	0.9	1.0	0.7
Other backward class	47.4	49.8	42.3
Other #	27.0	21.0	40.1
Don't know	1.2	1.1	1.5
Number of usual members			
1	2.4	2.6	2.2
2	6.3	6.7	5.4
3	8.2	8.2	8.4
4	13.0	12.0	15.3
5	16.1	15.3	17.7
6	16.0	15.9	16.3
7	12.9	13.4	11.7
8	8.6	8.7	8.4
9+	16.4	17.2	14.8
Mean household size	5.7	5.8	5.7
Total percent	100.0	100.0	100.0
Number of households	72,050	49,308	22,742
Note: Table is based on the de jure population Total includes 153 household heads who are not a usual member of the households. # Higher caste (Not belonging to a scheduled caste, a scheduled tribe and an other backward class)			

Twenty-three percent of the households in Uttar Pradesh belong to schedule caste, 1 percent each to schedule tribe and other backward classes while the remaining 76 percent of the households are headed by other castes not under schedule caste, schedule tribe and other backward classes. About twenty eight percent of the household heads belong to schedule caste or tribe in rural areas and it is only 16 percent in urban areas. The overall state average household size is 5.7 persons. The rural-urban differential in average household size is 5.8 in rural areas and 5.7 in urban areas.

2.3 Educational Level of the Household Population

The educational background of Uttar Pradesh presented in this section is based on *de facto* household population. Level of literacy and years of schooling, according to age, sex and residence are shown in Table 2.3.

Table 2.3 EDUCATIONAL LEVEL OF THE HOUSEHOLD POPULATION									
Percent distribution of household population age 7 and above by literacy level and years of schooling, according to age, residence and sex, Uttar Pradesh, 2002-04									
Age	Year of schooling							Total Percent	Number of persons
	Illiterate	Literate but no schooling	1-5	6-8	9-10	11 or more	Missing		
Total									
Male									
7-9	24.4	9.7	64.8	0.7	0.0	0.0	0.3	100.0	18,698
10-14	14.9	1.3	52.7	26.8	4.2	0.0	0.2	100.0	30,914
15-19	18.2	0.2	13.6	24.9	30.6	12.4	0.0	100.0	24,354
20-29	22.5	0.4	10.8	16.5	23.4	26.4	0.0	100.0	32,477
30-39	29.6	0.6	12.1	14.6	19.2	24.0	0.0	100.0	25,037
40-49	33.3	0.5	12.6	13.4	16.9	23.3	0.0	100.0	17,566
50+	49.1	1.2	15.4	10.1	11.4	12.8	0.0	100.0	29,888
Total	27.3	1.7	25.2	16.1	15.4	14.3	0.1	100.0	178,934
Female									
7-9	31.1	8.4	59.5	0.5	0.0	0.0	0.4	100.0	16,942
10-14	23.8	1.1	47.6	23.3	3.8	0.0	0.4	100.0	27,819
15-19	35.4	0.4	14.2	19.9	16.2	14.0	0.0	100.0	22,715
20-29	52.5	0.5	9.9	11.4	8.4	17.2	0.0	100.0	33,841
30-39	66.4	0.4	9.6	8.3	5.5	9.7	0.0	100.0	25,000
40-49	72.0	0.3	9.2	6.2	4.5	7.8	0.0	100.0	16,747
50+	85.1	0.5	6.7	3.2	2.1	2.4	0.0	100.0	27,641
Total	52.6	1.3	20.9	11.1	6.0	7.9	0.1	100.0	170,705
Total									
7-9	27.6	9.1	62.3	0.6	0.0	0.0	0.4	100.0	35,640
10-14	19.1	1.2	50.3	25.1	4.0	0.0	0.3	100.0	58,732
15-19	26.5	0.3	13.9	22.5	23.7	13.1	0.0	100.0	47,069
20-29	37.8	0.4	10.4	13.9	15.8	21.7	0.0	100.0	66,319
30-39	48.0	0.5	10.9	11.4	12.3	16.8	0.0	100.0	50,038
40-49	52.2	0.4	10.9	9.9	10.9	15.7	0.0	100.0	34,314
50+	66.4	0.9	11.2	6.8	6.9	7.8	0.0	100.0	57,529
Total	39.7	1.5	23.1	13.7	10.8	11.1	0.1	100.0	349,640
Note: The table is based on de facto population									
									Contd.

Table 2.3 indicates that, 40 percent of the population aged seven and above are non-literate. The proportion of non-literates is 53 percent for females compared to 27 percent for males. The proportion of non-literate is much higher among the older cohorts compared to the younger ones. For both males and females, going by expected trend, the level of literacy is higher in the younger population than in the older age groups with the exception of the youngest age group of 7-9 years (Figure 2.2).

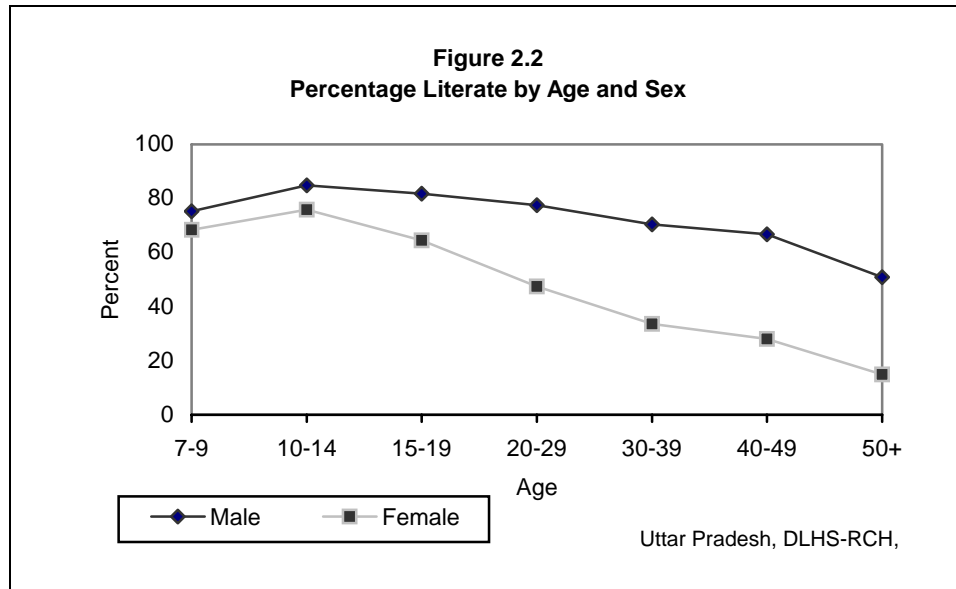


Table 2.3 EDUCATIONAL LEVEL OF THE HOUSEHOLD POPULATION (contd.)									
Percent distribution of household population age 7 and above by literacy level and years of schooling, according to age , residence and sex, Uttar Pradesh, 2002-04									
Age	Non-literate	Literate but no schooling	Years of schooling				Missing	Total Percent	Number of persons
			1-5	6-8	9-10	11 or more			
RURAL									
Male									
7-9	25.3	10.0	63.8	0.6	0.0	0.0	0.3	100.0	13,690
10-14	13.9	1.4	55.1	25.9	3.5	0.0	0.2	100.0	21,834
15-19	17.7	0.2	15.0	26.7	30.7	9.6	0.1	100.0	15,803
20-29	25.2	0.4	11.3	17.5	24.4	21.2	0.0	100.0	20,539
30-39	33.8	0.6	12.9	14.8	19.6	18.4	0.0	100.0	16,474
40-49	39.0	0.6	13.5	13.9	16.8	16.2	0.0	100.0	11,398
50+	56.4	1.1	16.2	10.0	9.5	6.9	0.0	100.0	21,197
Total	30.1	1.8	26.9	16.3	14.7	10.1	0.1	100.0	1,20,935
Female									
7-9	33.5	8.5	57.2	0.4	0.0	0.0	0.4	100.0	12,316
10-14	26.2	1.4	50.3	19.8	2.2	0.0	0.2	100.0	19,146
15-19	41.8	0.4	15.6	20.6	13.5	8.1	0.0	100.0	15,069
20-29	63.3	0.4	10.6	11.1	6.4	8.2	0.0	100.0	22,704
30-39	77.1	0.4	9.6	6.5	3.4	3.1	0.0	100.0	16,696
40-49	83.1	0.3	8.8	4.5	1.8	1.5	0.0	100.0	11,105
50+	92.3	0.4	5.1	1.5	0.4	0.3	0.0	100.0	19,644
Total	60.0	1.4	21.4	9.7	4.1	3.3	0.1	100.0	1,16,681
Total									
7-9	29.2	9.3	60.7	0.5	0.0	0.0	0.4	100.0	26,006
10-14	19.7	1.4	52.8	23.0	2.9	0.0	0.2	100.0	40,980
15-19	29.4	0.3	15.3	23.7	22.3	8.9	0.0	100.0	30,872
20-29	45.2	0.4	10.9	14.1	15.0	14.4	0.0	100.0	43,244
30-39	55.6	0.5	11.2	10.6	11.4	10.7	0.0	100.0	33,171
40-49	60.8	0.4	11.2	9.3	9.4	8.9	0.0	100.0	22,503
50+	73.7	0.8	10.9	5.9	5.1	3.7	0.0	100.0	40,841
Total	44.8	1.6	24.2	13.1	9.5	6.7	0.1	100.0	2,37,617

Contd.

Around 65 percent of males and 60 percent of females in this age group had 1-5 years of schooling. Nearly 25 percent of males have had education for 1-5 years. Females are far behind compared to their male counterparts in this category with a corresponding share of 21 percent. Lesser proportion of females are found in higher education of 9-10 years (6 percent) and 11 or more years (8 percent) compared to the males having corresponding figures of 15 percent and 14 percent respectively. Just about two percent of the total population, two percent of males and one percent of females are found to be literate without any formal schooling.

Table 2.3 EDUCATIONAL LEVEL OF THE HOUSEHOLD POPULATION (Contd.)									
Percent distribution of household population age 7 and above by literacy level and years of schooling, according to age , residence and sex, Uttar Pradesh, 2002-04									
Age	Non-literate	Literate but no schooling	Years of schooling				Missing	Total Percent	Number of persons
			1-5	6-8	9-10	11 or more			
URBAN									
Male									
7-9	22.1	9.1	67.5	0.9	0.0	0.0	0.3	100.0	5,008
10-14	17.1	0.9	46.8	28.9	6.0	0.0	0.3	100.0	9,080
15-19	19.2	0.1	11.2	21.7	30.4	17.4	0.0	100.0	8,551
20-29	17.9	0.3	10.1	14.6	21.8	35.3	0.0	100.0	11,938
30-39	21.4	0.7	10.7	14.1	18.3	34.7	0.0	100.0	8,563
40-49	22.8	0.5	10.9	12.4	17.0	36.4	0.0	100.0	6,169
50+	31.4	1.3	13.4	10.5	16.0	27.4	0.0	100.0	8,691
Total	21.4	1.4	21.6	15.8	16.8	22.9	0.1	100.0	57,999
Female									
7-9	24.9	8.1	65.5	1.0	0.0	0.0	0.5	100.0	4,626
10-14	18.3	0.5	41.8	31.1	7.5	0.0	0.7	100.0	8,672
15-19	22.7	0.3	11.3	18.7	21.6	25.4	0.0	100.0	7,646
20-29	30.4	0.7	8.5	12.1	12.6	35.7	0.0	100.0	11,137
30-39	45.0	0.5	9.6	11.9	9.9	23.2	0.0	100.0	8,304
40-49	50.0	0.4	10.0	9.6	9.9	20.3	0.0	100.0	5,643
50+	67.5	0.9	10.6	7.2	6.2	7.7	0.0	100.0	7,997
Total	36.7	1.2	19.8	14.1	10.3	17.8	0.2	100.0	54,025
Total									
7-9	23.5	8.6	66.5	1.0	0.0	0.0	0.4	100.0	9,634
10-14	17.7	0.7	44.4	30.0	6.7	0.0	0.5	100.0	17,752
15-19	20.8	0.2	11.2	20.3	26.2	21.2	0.0	100.0	16,197
20-29	23.9	0.5	9.3	13.4	17.3	35.5	0.0	100.0	23,076
30-39	33.0	0.6	10.2	13.0	14.2	29.0	0.0	100.0	16,867
40-49	35.8	0.4	10.5	11.0	13.6	28.7	0.0	100.0	11,811
50+	48.7	1.1	12.0	8.9	11.3	17.9	0.0	100.0	16,687
Total	28.8	1.3	20.7	15.0	13.7	20.4	0.1	100.0	1,12,024

An examination of the educational attainment by place of residence revealed that the urban-rural differential was quite pronounced. In urban areas, only 29 percent of the total population is non-literate in comparison to 45 percent of the rural population. The number of non-literate females live in rural areas of Uttar Pradesh accruing a share as high as 60 percent, while non-literate rural males is 30 percent. Prevalence of illiterate is much less in urban areas with figures of 37 percent and 21 percent non-literate females and males respectively. A contrasting feature of rural-urban difference in educational level is that in rural areas most people had 1-5 years of schooling (24 percent), and those who had 10 or more years of schooling was just 7 percent, whereas in urban areas a significant proportion of people (20 percent) had this level of education.

2.4 Marital Status of the Household Population

The DLHS, collected information on the marital status of all household members aged 10 years and above. Table 2.4 shows the percent distribution of household population by marital status of *de facto* household population by age and sex. Seventy-eight percent of females in the age group 20-24 years, followed by 95 percent in the age group 25-29 years, and 94 percent in the age group 30-44 years, are currently married. The proportion

Table 2.4 MARITAL STATUS OF THE HOUSEHOLD POPULATION						
Percent distribution of the household population aged 10 years and above by marital status, according to age and sex , Uttar Pradesh, 2002-04						
Age	Marital status				Total Percent	Number of persons
	Never married	Currently married	Married, gaunna not performed	Widowed/divorced/ Separated		
Male						
10-14	98.5	0.8	0.7	0.0	100.0	30,914
15-19	92.0	4.8	3.0	0.2	100.0	24,354
20-24	58.2	38.3	2.6	0.9	100.0	17,728
25-29	21.2	76.2	0.7	1.9	100.0	14,749
30-44	4.2	92.5	0.1	3.2	100.0	34,521
45-59	1.8	91.0	0.0	7.1	100.0	20,662
60+	2.1	75.4	0.1	22.5	100.0	17,308
Total	42.8	51.9	1.0	4.3	100.0	1,60,236
Female						
10-14	97.1	1.0	1.9	0.0	100.0	27,819
15-19	68.7	25.5	5.3	0.5	100.0	22,715
20-24	19.3	78.4	1.0	1.3	100.0	18,148
25-29	3.2	94.8	0.1	1.9	100.0	15,693
30-44	0.5	94.0	0.0	5.4	100.0	33,374
45-59	0.3	83.7	0.1	15.9	100.0	20,934
60+	0.4	48.8	0.2	50.7	100.0	15,081
Total	30.5	59.5	1.3	8.7	100.0	1,53,763
Total						
10-14	97.8	0.9	1.2	0.0	100.0	58,732
15-19	80.8	14.8	4.1	0.3	100.0	47,069
20-24	38.5	58.6	1.8	1.1	100.0	35,877
25-29	11.9	85.8	0.4	1.9	100.0	30,442
30-44	2.4	93.2	0.1	4.3	100.0	67,895
45-59	1.0	87.3	0.1	11.5	100.0	41,596
60+	1.3	63.0	0.1	35.6	100.0	32,389
Total	36.8	55.6	1.1	6.5	100.0	3,14,000
Note: Table is based on de facto population						

of never married is higher for males (43 percent) than for females (31 percent). The proportion of never married among males declines with increasing age and reaches the lowest by the time they are in the age group 45-59 years. A similar pattern has been observed in the case of females, with the lowest never married proportion for the age group 30-34 years. The proportion of divorced, separated or widowed is negligible and limited to the older ages. Thirty-six percent of women aged 60 years or above are widowed /divorced /separated. Among the *de facto* population aged 10 years and above, 52 percent of males and 60 percent of females are currently married.

2.5 Marriage

Marriage in the household is an important event that reflects the socio-cultural practices of the communities surveyed in DLHS. This section outlines the marriage ceremonies during the three years period prior to the survey. Mean age at marriage by sex and percentage of total marriages which are below legal age at marriage, 21 years for boys and 18 years for girls by residence at the state and at district levels are shown in Table 2.5.

Table 2.5 MARRIAGE				
Mean age at marriage and percentage of marriages below legal at marriage by sex and by districts, Uttar Pradesh, 2002-04				
Place of residence/ District	Mean age at marriage		Percentage of marriage below legal age at marriage	
	Boy	Girl	Boy (<21)	Girl (<18)
State Total	21.5	18.1	45.0	41.4
State Rural	20.6	17.3	54.3	50.7
State Urban	23.7	20.2	21.9	17.8
District				
Agra	21.2	18.5	48.2	27.6
Aligarh	21.8	18.7	39.2	31.6
Allahabad	22.1	18.2	40.6	33.9
Ambedaker Nagar	21.8	19.0	41.8	33.4
Auraiya	22.3	18.3	35.8	28.4
Azamgarh	21.3	17.9	47.8	38.5
Baghpat	21.9	19.1	30.6	23.5
Bahraich	21.5	16.7	49.3	56.2
Ballia	21.2	18.0	46.8	41.1
Balrampur	19.4	16.0	65.1	66.9
Banda	22.8	18.1	34.1	34.0
Barabanki	20.5	17.1	52.9	51.9
Bareilly	21.3	18.5	58.9	37.6
Basti	20.5	17.5	52.2	47.3
Bijnor	22.7	20.3	25.1	10.6
Budaun	21.4	17.5	51.2	56.2
Bulandshahar	22.7	19.2	24.5	24.8
Chandauli	21.0	17.5	50.4	50.0
Chitrakoot	20.0	16.7	64.2	62.2
Deoria	21.2	17.9	50.1	51.0
Etah	22.0	18.3	45.0	55.1
Etawah	22.7	18.4	30.4	31.8
Faizabad	20.8	17.6	49.5	48.7
Farrukhabad	22.0	18.3	44.9	38.1
Fatehpur	22.6	18.4	29.3	38.5
Firozabad	21.6	18.4	41.1	29.3
Gautam Buddha Nagar	23.2	18.5	24.5	34.8
Ghaziabad	22.2	19.6	29.6	9.2
Ghazipur	20.6	17.9	54.5	42.5
Gonda	19.8	16.5	65.7	65.8
Gorakhpur	20.7	16.8	54.9	65.4
Hamirpur	22.4	18.6	37.6	37.6
Hardoi	21.7	17.1	45.1	56.2
Hathras	22.5	18.1	32.0	38.0
Jalaun	21.2	17.8	46.0	42.8
Jaunpur	21.4	17.2	48.5	53.0
Jhansi	21.2	18.0	52.3	53.3
Jyotiba Phule Nagar	21.7	19.1	36.4	24.6
Kannauj	22.9	18.5	35.8	34.3
Kanpur Dehat	22.2	18.7	35.1	30.8
Note: Table based on <i>de jure</i> population. Reference period: - January 1 st , 1999 to survey date for phase-1, and January 1 st , 2001 to survey date for phase-2.				

Contd.

Mean age at marriage for boys and girls in urban areas of Uttar Pradesh is 24 years and 20 years respectively. The corresponding figures in rural areas are 21 years and 17 years. On the whole, as far as Uttar Pradesh is concerned, both boys and girls seem to oblige the legal age marriage, the average age at marriage being 22 years for boys and 18 years for girls. However, one in two boys and nearly two-fifth of the girls got married below the corresponding specified legal age marriage. The proportion is much higher in the rural areas compared to the urban areas of the state.

When it comes to district level variation in mean age at marriage, it is highest in Kanpur Nagar and Lucknow, 24 years for boys and in Bijnor, Ghaziabad, Kanpur Nagar, Lucknow & Meerut, 20 years for girls. The lowest mean age at marriage for boys is 19 years recorded for the district of Balrampur, Maharajganj and Siddharthnager and for the girls, the lowest is 16 years in Maharajganj.

Table 2.5 MARRIAGE (Contd.)				
Mean age at marriage and percentage of marriages below legal at marriage by sex and by districts, Uttar Pradesh, 2002-04				
Place of residence/ District	Mean age at marriage		Percentage of marriage below legal age at marriage	
	Boy	Girl	Boy (<21)	Girl (<18)
Kanpur Nagar	24.0	20.1	21.2	22.9
Kaushambi	21.4	18.2	46.1	35.6
Kheri	20.6	17.9	58.1	48.1
Kushinagar	21.2	17.7	48.0	49.1
Lalitpur	19.7	16.4	69.7	64.0
Lucknow	24.3	20.2	26.8	22.7
Maharajganj	19.2	15.4	66.7	73.6
Mahoba	20.9	17.8	56.5	46.7
Mainpuri	22.5	18.2	33.8	39.8
Mathura	21.4	18.4	41.6	31.1
Mau	21.7	18.5	37.7	34.4
Meerut	23.4	20.2	22.7	9.5
Mirzapur	20.5	16.5	54.5	65.7
Moradabad	21.9	18.8	39.3	28.8
Muzaffarnagar	22.1	19.4	37.5	21.8
Pilibhit	20.6	17.3	54.8	52.4
Pratapgarh	21.0	18.0	47.5	36.6
Rae Bareli	22.3	18.6	32.7	33.0
Rampur	23.0	19.2	33.8	21.1
Saharanpur	23.0	19.7	24.6	13.9
Sant Kabir Nagar	20.5	17.1	54.0	52.8
Sant Ravidas Nagar	19.7	17.2	71.3	57.3
Shahjahanpur	20.8	17.7	51.4	60.8
Shrawasti	18.9	16.1	74.9	66.4
Siddharthnagar	19.2	16.6	61.5	53.8
Sitapur	20.8	17.3	53.5	52.3
Sonbhadra	20.3	16.5	59.8	56.1
Sultanpur	20.1	17.8	59.0	42.6
Unnao	22.7	18.2	38.0	36.0
Varanasi	21.1	17.7	47.8	43.6

Note: Table based on de jure population.
Reference period: - January 1st, 1999 to survey date for phase-1, and January 1st, 2001 to survey date for phase-2.

It is also found that, the percentage of girls who were married below the legal age at marriage was the highest in Maharajganj (74 percent) and the lowest in Ghaziabad (9 percent). In 24 out of 70 districts, more than 50 percent girls got married below the legal age at marriage (see Map-1). In the case of boys, marriages below the legal age at marriage are the highest in Shrawasti district (75 percent) and lowest in Kanpur Nagar (21 percent).

2.6 Morbidity Rates

The DLHS-RCH has collected information on the morbidity status relating to blindness, tuberculosis and malaria of the *de jure* members of the household. Table 2.6 provides prevalence rates.

Table 2.6 MORBIDITY RATES			
Prevalence of blindness, tuberculosis, and malaria, according to place of residence, Uttar Pradesh, 2002-04.			
Morbidity	Total	Residence	
		Rural	Urban
Prevalence rate of blindness			
Male			
Partial	5,403	5,371	5,476
Complete	350	359	329
Night blindness	218	265	113
Female			
Partial	7,168	7,168	7,585
Complete	419	419	349
Night blindness	297	297	123
Persons			
Partial	6,321	6,241	6,489
Complete	373	388	339
Night blindness	230	281	118
Prevalence rate of tuberculosis			
Male	534	560	477
Female	469	496	409
Person	503	529	444
Prevalence rate of malaria ¹			
Male	921	1,094	538
Female	1,104	1,315	631
Person	1,009	1,201	583
Note: All the rates refer to de jure population.			
Prevalence rate per 100, 000 population			
Reference period: - January 1 st , 1999 to survey date for phase-1, and January 1 st , 2001 to survey date for phase-2. ¹ Last two weeks prior to the survey			

Partial, Complete and Night Blindness

The overall prevalence of partial blindness is 6,321 per 100,000 population in the state and is lower in rural areas (6,241 per 100,000) than in urban areas (6,489 per 100,000). It is more among females. The prevalence of complete blindness is 373 per 100,000 population with a rural-urban differential of 388 against 339 per 100,000. Sex

differential in complete blindness is significantly high in females (419) than males (300). The prevalence of night blindness due to vitamin A deficiency is 230 per 100,000 population, and is much higher in rural areas (281) than in urban areas (118).

Tuberculosis

The prevalence of tuberculosis is 503 per 100,000 population, with rural areas having a higher prevalence of 529 compared to 444 per 100,000 in urban areas. The prevalence of TB is higher among males (534 per 100,000) than among females (469 per 100,000).

Malaria

In the DLHS-RCH, household survey respondents were asked to state whether any member of their household suffered from malaria (characterized by recurrent fever with shivering) any time during the two weeks prior the survey. In the state of Uttar Pradesh, 1009 persons per 100,000 population were reported to have suffered from malaria. Rural residents are almost two times more likely to suffer from malaria (1201 per 100,000) than urban residents (583 per 100,000). The reported prevalence of malaria is higher for males than for females.

2.7 Morbidity Rates by Districts

Table 2.7 shows the prevalence of blindness, tuberculosis and malaria in the districts of Uttar Pradesh. The prevalence of partial blindness varies considerably among the districts, the lowest being 1422 per 100,000 in Varanasi and the highest, 14319 per 100,000 in Gautam Buddha Nagar.

Table 2.7 MORBIDITY RATES BY DISTRICTS				
Prevalence of blindness, tuberculosis, and malaria, by district, Uttar Pradesh, 2002-04				
District	Prevalence ¹ of morbidity			
	Partial blindness	Complete blindness	Tuberculosis	Malaria ²
Agra	10,732	180	513	975
Aligarh	5,992	388	546	972
Allahabad	2,598	526	498	563
Ambedaker Nagar	2,653	80	179	409
Auraiya	8,064	268	463	358
Azamgarh	4,394	286	259	544
Baghpat	6,602	405	565	380
Bahraich	5,245	338	471	2,617
Ballia	10,436	351	344	521
Balrampur	4,188	680	311	1,223
Banda	7,554	227	583	1,292
Barabanki	3,448	393	518	377
Bareilly	8,559	494	894	2,724
Basti	3,958	260	530	988
Bijnor	7,078	311	375	2,282
Budaun	11,754	509	656	1,380
Bulandshahar	5,635	425	625	872
Chandauli	2,526	182	301	523
Chitrakoot	2,840	123	401	1,516
Deoria	4,734	68	311	652
Etah	13,363	369	270	2,217
Etawah	5,652	384	259	465
Faizabad	2,377	331	348	846
Farrukhabad	7,370	77	516	181
Fatehpur	8,198	188	558	628
Firozabad	9,063	291	607	553
Gautam Buddha Nagar	14,319	453	686	2,137
Ghaziabad	4,768	231	396	465
Ghazipur	9,149	456	560	394
Gonda	2,862	361	454	2,412
Gorakhpur	5,878	395	395	396
Hamirpur	2,565	685	520	2,147
Hardoi	9,194	355	669	2,084
Hathras	6,610	299	524	713
Jalaun	6,607	524	610	566
Jaunpur	4,226	157	633	648
Jhansi	11,028	353	367	1,088
Jyotiba Phule Nagar	6,638	233	464	641
Kannauj	9,108	170	613	1,196
Kanpur Dehat	7,844	410	837	487

Note: All the rates refer to de jure population.
¹ Prevalence rate per 100, 000 population
Reference period: - January 1st, 1999 to survey date for phase-1, and January 1st, 2001 to survey date for phase-2. ² Last two weeks prior to the survey

Contd.

The districts with a prevalence rate below 2,000 per 100,000 are Mau and Varanasi. The prevalence rate of complete blindness ranges from 67 per 100,000 in Kaushambi to 943 per 100,000 in Meerut. Inter-district variations are substantial for tuberculosis and malaria.

The prevalence rate of tuberculosis is the highest in Moradabad district (950 per 100,000 population) and it is lowest in Ambedakar Nagar (179 per 100,000). In the case

of malaria, the prevalence rate is highest in Bareilly (2,724 per 100,000) and lowest in Farrukhabad (181 per 100,000).

Table 2.7 MORBIDITY RATES BY DISTRICTS (Contd.)				
Prevalence of blindness, tuberculosis, and malaria, by district, Uttar Pradesh, 2002-04				
District	Prevalence ¹ of morbidity			
	Partial blindness	Complete blindness	Tuberculosis	Malaria ²
Kanpur Nagar	6,158	515	370	384
Kaushambi	3,495	67	362	1,489
Kheri	5,098	477	609	1,002
Kushinagar	6,710	254	531	828
Lalitpur	4,710	581	333	1,104
Lucknow	6,516	341	407	560
Maharajganj	11,760	415	596	489
Mahoba	8,340	82	245	1,725
Mainpuri	5,246	309	285	521
Mathura	7,060	367	560	1,210
Mau	1,710	267	215	312
Meerut	6,097	943	597	539
Mirzapur	7,425	590	578	455
Moradabad	6,763	633	950	1,013
Muzaffarnagar	5,601	287	747	740
Pilibhit	11,080	181	579	692
Pratapgarh	4,050	326	326	622
Rae Bareli	4,606	661	491	811
Rampur	7,371	405	554	1,978
Saharanpur	7,853	249	523	1,535
Sant Kabir Nagar	2,949	199	192	676
Sant Ravidas Nagar	3,041	383	455	978
Shahjahanpur	8,938	359	575	1,788
Shrawasti	3,705	505	248	2,212
Siddharthnagar	2,534	245	274	1,122
Sitapur	4,125	500	437	2,108
Sonbhadra	4,663	149	600	1,002
Sultanpur	6,142	533	570	763
Unnao	2,925	154	649	2,101
Varanasi	1,422	182	327	883
Uttar Pradesh	6,321	373	503	1,009

Note: All the rates refer to de jure population.
¹ Prevalence rate per 100, 000 population
Reference period: - January 1st, 1999 to survey date for phase-1, and January 1st, 2001 to survey date for phase-2. ² Last two weeks prior to the survey

Contd.

2.8 Housing Characteristics

This section describes the availability of basic amenities in the state. Table 2.8 presents the percent distribution of households by selected housing characteristics. Forty-two percent of the households in Uttar Pradesh have electricity connection and it is much more in urban areas (82 percent) than in rural areas (23 percent).

As regards household source of drinking water, one-fourth (27 percent) of the households get drinking water through taps, while 64 percent drink water from hand pumps/ bore-wells, and 8 percent drink water from wells. About 51 percent of households in urban areas get piped water for drinking, whereas in rural areas, only 16 percent of the households have such provision.

When it comes to sanitation facility, only 24 percent of the households have flush toilets, while 7 percent have pit based toilets or latrines, 2 percent depend on shared toilets and nearly 67 percent of the households have no toilet facility at all. There is a large rural-urban difference; 87 percent of rural households have no toilet facility, compared to just 22 percent of urban households.

DLHS-RCH has also collected data on type of fuel used in the households for cooking. Twenty percent of the households used liquid petroleum gas or electricity for cooking in Uttar Pradesh. About 60 percent of households rely on fire wood, 2 percent on kerosene, and 18 percent use other types of fuel for cooking. The use of liquid petroleum gas/electricity for cooking is reported more in urban areas (55 percent), and that of firewood or other sources for cooking is reported more in rural areas.

There is considerable variation in the quality of housing. On the basis of building material, type of floor, walls and roof, households are categorised into *kachcha*, semi-*pucca* and *pucca*. More than one-fourth of the households are living in *kachcha* houses, 45 percent in semi *pucca* houses and 27 percent in *pucca* houses. Sixty-five percent of urban households live in *pucca* houses compared to 10 percent of rural households.

The possession of consumer durable goods is an indication of a household's socio-economic status. Table 2.8 shows that majority of the households in the state own bicycle (69 percent), an electric fan (42 percent), radio/transistor (30 percent) and television (34 percent).

Table 2.8 HOUSING CHARACTERISTICS			
Percent distribution of the household by housing characteristics and percentage of households owing selected durable goods, according to residence, Uttar Pradesh, 2002-04			
Housing characteristic	Total	Residence	
		Rural	Urban
Electricity			
Yes	41.5	23.1	81.5
No	58.5	76.9	18.5
Source of drinking water			
Tap inside	16.7	6.0	40.0
Tap shared public	10.0	9.5	11.0
Hand pump/ bore well	63.5	71.6	46.1
Well covered	0.5	0.6	0.2
Well uncovered	7.7	10.7	1.1
River	0.0	0.0	0.0
Pond	0.0	0.0	0.0
Spring	0.0	0.0	0.0
Other	1.5	1.5	1.5
Sanitation facility			
Own flush toilet	23.9	6.9	60.8
Own pit toilet / latrine	7.1	5.0	11.6
Shared toilet of any type	1.9	0.7	4.5
Public / community toilet	0.4	0.1	1.1
No toilet facility	66.7	87.2	22.1
Main type of fuel used for cooking			
Liquid petroleum gas/ electricity	20.3	4.2	55.3
Kerosene	2.2	1.0	4.8
Wood	59.5	71.8	32.8
Other	18.0	23.0	7.2
Type of house			
Kachcha	28.4	38.3	7.1
Semi - pucca	44.5	52.1	28.1
Pucca	27.1	9.6	64.8
Household assets			
Fan	42.2	24.3	80.9
Radio/transistor	30.4	26.3	39.1
Sewing machine	27.4	16.9	50.0
Television	34.4	19.9	65.8
Telephone	9.5	3.5	22.6
Bicycle	68.8	71.8	62.4
Motor cycle/ scooter	13.3	8.0	24.7
Car / Jeep	2.0	1.0	4.1
Tractor	2.8	3.7	0.8
Standard of living index			
Low	54.2	71.5	16.7
Medium	25.3	22.3	31.8
High	20.5	6.2	51.6
Number of households	72,048	49,305	22,742

Other durable goods found in the surveyed households are telephone (10 percent), sewing machine (27 percent), and motorcycle or scooter (13 percent). Car/jeep and tractor each are owned by two percent of households in Uttar Pradesh. Ownership of most of the consumer durable items is more among the urban households than among the rural households. However, a higher proportion of households in rural areas than in urban areas own a bicycle.

Considering household amenities, such as, source of drinking water, type of house, source of lighting, fuel for cooking, toilet facility and ownership of durable goods, a composite measure, standard of living index (SLI) is made for classification of households. The standard of living index is calculated as by adding the following scores;

Source of drinking water: 3 for Tap (own), 2 for Tap (shared), 1 for hand pump and well, and 0 for other;

Type of house: 4 for *pucca*, 2 for *semi-pucca*, and 0 for *kachcha*;

Source of lighting: 2 for electricity, 1 for kerosene, and 0 for other;

Fuel for cooking: 2 for LPG gas/electricity, 1 for kerosene and 0 for other;

Toilet facility: 4 for own flush toilet, 2 for own pit toilet, 2 for shared toilet and 0 for no toilet;

Ownership for items: 4 each for car and tractor, 3 each for television, telephone and motorcycle/scooter, and 2 each for fan, radio/transistor, sewing machine and bicycle.

The total of the scores may vary from the lowest of a 0 to maximum of 40. On the basis of total score, households are divided into three categories as;

- a) Low – if total score is less than or equal to 9,
- b) Medium – if total score is greater than 9 but less than or equal to 19 and
- c) High – if total score is greater than 19.

As per the standard of living index, more than half of the households come under the low standard of living category, 25 percent of households to medium standard of living, and 20 percent of the households to high standard of living.

The proportion of sample households with medium and high standard of living is comparatively higher in urban areas than in rural areas, and the proportion of households with a low standard of living is much higher in rural households (72 percent) than in urban households (17 percent) in the state of Uttar Pradesh.

2.9 Housing Characteristics by Districts

All districts in Uttar Pradesh are not uniform in terms of basic amenities and possession of consumer durables. Table 2.9 presents an inter-district comparison of housing characteristics. Two fifth of households have electricity (40 percent). The household with electricity is highest in Kanpur Nagar (76 percent). Eighty percent or more of households used piped water or water from a hand pump for drinking in most districts.

Largely the districts in Uttar Pradesh have inadequate toilet facility, in 7 of the 70 districts more than 50 percent of the households have toilet facilities and it is the least in Hardoi district (12 percent).

In Kanpur Nagar and Lucknow districts the percentage of households using liquid petroleum gas/electricity for cooking is more than 50 percent and in the rest of the districts, it is relatively low ranging between 4.5 to 42.9 percent. The percentage of households living in *pucca* houses is quite low in all the districts of Uttar Pradesh. In 33 of the 70 districts, more than one-fourth of the households live in *pucca* houses. Guatam Buddha Nagar, Kanpur Nagar and Lucknow are the only districts where more than half of the households (54, 59 and 53 percent respectively) live in *pucca* houses. Three-fourth of the households in Shrawasti are having low standard of living index (SLI), which is the highest among all districts whereas lowest is observed in Guatam Buddha Nagar, Gaziabad and Kanpur Nagar (24 percent each). Hardoi is found to be the lowest and Lucknow has high SLI.

Table 2.9 HOUSING CHARACTERISTICS BY DISTRICT

Selected housing characteristics by district, Uttar Pradesh, 2002-04

Districts	Percentage of households:							
	With electricity	With drinking water ¹	With toilet facility	Using Liquid petroleum gas/ electricity	Living in pucca house	Low	Medium	High
Agra	71.3	90.5	33.8	25.7	41.9	34.5	36.1	29.4
Aligarh	43.8	98.4	36.8	20.1	29.6	50.7	29.1	20.2
Allahabad	45.6	70.1	28.8	23.2	25.6	57.3	21.0	21.8
Ambedaker Nagar	43.1	99.6	30.6	13.5	19.3	55.7	26.8	17.5
Auraiya	24.4	84.9	21.7	11.8	13.3	71.3	17.3	11.4
Azamgarh	58.0	98.0	25.7	15.4	23.0	57.3	27.0	15.6
Baghpat	53.5	98.3	46.7	19.1	24.4	31.6	40.5	28.0
Bahraich	29.8	95.7	29.0	13.3	15.2	68.2	18.5	13.3
Ballia	46.4	97.7	28.3	11.9	24.4	59.6	26.9	13.5
Balrampur	34.9	95.0	25.9	12.2	25.2	65.2	21.4	13.4
Banda	29.0	87.4	33.7	12.9	18.7	66.4	18.2	15.4
Barabanki	34.6	85.8	27.6	18.8	20.0	61.5	22.3	16.3
Bareilly	32.5	99.2	40.4	21.3	23.4	58.1	21.6	20.2
Basti	38.6	99.5	23.7	24.7	25.0	60.2	20.3	19.5
Bijnor	48.9	99.5	43.5	18.5	30.6	40.2	35.8	24.1
Budaun	22.4	95.6	32.6	13.7	20.5	65.5	20.6	13.9
Bulandshahar	41.3	96.9	41.3	21.6	30.9	44.2	33.9	21.9
Chandauli	50.1	79.0	34.7	26.2	31.0	46.8	25.8	27.4
Chitrakoot	30.0	71.8	22.1	14.1	18.6	71.0	13.2	15.8
Deoria	30.5	99.8	25.3	15.7	26.7	60.5	23.6	15.9
Etah	28.6	88.8	25.0	19.3	28.9	58.3	24.2	17.5
Etawah	42.4	83.7	32.5	20.3	28.0	54.2	26.1	19.7
Faizabad	22.0	95.8	23.9	17.8	19.4	60.1	23.6	16.2
Farrukhabad	33.1	98.3	24.6	16.1	16.1	62.6	23.3	14.1
Fatehpur	27.8	76.1	31.0	18.2	24.8	62.0	18.0	20.0
Firozabad	53.8	97.2	27.3	16.1	32.2	50.1	32.6	17.3
Gautam Buddha Nagar	71.3	98.9	51.4	42.9	53.5	24.0	32.2	43.8
Ghaziabad	64.8	98.8	60.6	39.1	45.8	23.8	40.2	36.0
Ghazipur	40.6	90.5	24.9	13.8	25.7	59.9	23.2	16.9
Gonda	30.2	98.4	23.0	18.4	21.7	63.8	21.3	14.9
Gorakhpur	48.8	99.6	28.3	21.3	24.5	56.4	23.0	20.6
Hamirpur	32.2	92.0	36.4	17.2	21.9	58.0	22.7	19.3
Hardoi	11.5	85.0	12.0	4.5	7.5	82.0	13.1	4.8
Hathras	40.9	87.4	26.0	16.3	34.7	48.2	34.4	17.4
Jalaun	42.9	89.4	36.7	15.3	22.9	58.0	23.0	19.0
Jaunpur	52.9	81.2	24.0	13.8	27.9	55.6	27.0	17.4
Jhansi	54.2	77.6	32.3	22.9	29.2	51.8	25.7	22.4
Jyotiba Phule Nagar	40.3	96.4	43.6	14.8	24.7	48.1	32.0	20.0
Kannauj	25.9	85.2	28.6	12.4	18.9	62.8	23.6	13.6
Kanpur Dehat	34.3	91.3	32.0	15.3	18.2	61.5	24.8	13.7

Note: ¹That is piped or from a hand pump/bore well, well covered

Contd.

Table 2.9 HOUSING CHARACTERISTICS BY DISTRICT (Contd.)								
Selected housing characteristics by district, Uttar Pradesh, 2002-04								
Districts	Percentage of households:							
	With electricity	With drinking water ¹	With toilet facility	Using Liquid petroleum gas/ electricity	Living in pucca house	Low	Medium	High
Kanpur Nagar	76.4	93.0	70.0	50.2	58.7	23.9	31.8	44.2
Kaushambi	28.2	85.5	20.6	9.5	13.3	68.0	19.9	12.1
Kheri	29.0	96.3	30.6	14.4	21.7	66.5	20.8	12.7
Kushinagar	28.4	99.8	25.9	14.6	26.2	62.8	22.0	15.2
Lalitpur	35.0	76.2	19.8	13.0	17.7	67.0	20.0	13.1
Lucknow	65.8	94.9	58.9	51.2	52.7	33.3	19.0	47.7
Maharajganj	34.7	99.8	15.6	7.1	16.8	68.9	22.4	8.7
Mahoba	25.1	59.9	28.2	13.7	20.9	65.1	20.5	14.4
Mainpuri	41.6	81.3	26.4	17.6	24.5	56.1	26.2	17.7
Mathura	53.1	78.5	31.4	19.3	37.1	35.3	41.2	23.6
Mau	42.1	99.4	28.9	15.0	22.1	49.8	35.2	14.9
Meerut	58.0	96.3	58.9	28.7	36.0	28.0	38.7	33.2
Mirzapur	30.0	73.1	22.4	15.3	26.1	63.4	20.3	16.3
Moradabad	36.8	92.2	43.3	16.3	24.8	53.8	28.4	17.8
Muzaffarnagar	56.1	99.8	50.9	23.9	30.7	32.9	40.9	26.2
Pilibhit	33.1	99.4	33.2	15.2	22.5	57.0	26.6	16.3
Pratapgarh	38.3	79.8	18.4	15.0	19.9	62.5	22.2	15.3
Rae Bareli	34.3	80.1	25.1	14.3	19.1	65.0	19.6	15.3
Rampur	42.2	97.5	52.0	18.8	31.8	46.5	31.0	22.5
Saharanpur	66.4	98.9	48.0	24.6	37.0	28.4	37.0	34.6
Sant Kabir Nagar	38.9	99.2	16.2	11.6	14.9	64.6	24.1	11.3
Sant Ravidas Nagar	30.1	76.0	28.4	22.6	30.6	51.6	28.5	19.8
Shahjahanpur	34.8	95.5	36.8	14.9	21.1	54.5	29.3	16.2
Shrawasti	23.5	91.1	20.1	7.1	14.8	75.6	15.4	9.0
Siddharthnagar	20.4	99.0	19.2	11.0	18.8	69.5	21.2	9.3
Sitapur	22.9	84.7	19.3	11.1	13.1	73.2	16.8	10.1
Sonbhadra	40.5	70.6	28.8	18.3	26.5	63.2	15.3	21.5
Sultanpur	24.0	84.8	22.5	19.1	21.5	64.0	17.7	18.3
Unnao	19.5	84.8	22.7	14.8	15.2	65.2	22.4	12.4
Varanasi	66.5	80.6	42.5	33.8	41.2	36.9	33.0	30.1
Uttar Pradesh	41.5	90.8	33.3	20.3	27.1	54.2	25.3	20.5

Note: ¹That is piped or from a hand pump/bore well, well covered

2.10 Iodization of Salt

Consumption of salt fortified with iodine is recommended to avoid miscarriages, brain disorders, cretinism and retarded psychomotor development. As per the Prevention of Food Adulteration Act, 1988, the minimum iodine content of edible salt is 30 parts per million (PPM) at the manufacturing level.

In the DLHS-RCH survey, each interviewer was provided with a test kit to measure the level of iodine content of salt consumed by the surveyed households. The test results (Table 2.10) are classified by degree of ionization of salt and categorised by background characteristics. It is observed that nearly 14 percent of households used salt

Table 2.10 IODIZATION OF SALT						
Percent distribution of household heads by degree of iodization of salt, according to selected background characteristics, Uttar Pradesh, 2002-04						
Background characteristic	Not iodised	7ppm	15+ppm	Other ¹	Total percent	Number of households
Place of Residence						
Rural	49.7	26.9	10.5	12.9	100.0	49,308
Urban	22.0	30.3	20.6	27.1	100.0	22,742
Education of the household heads						
Non-literate	47.5	28.4	9.9	14.2	100.0	31,472
0-9@ years	41.8	28.4	13.4	16.3	100.0	22,941
10 and above	28.0	26.8	20.8	24.4	100.0	17,627
Religion of household head						
Hindu	41.8	27.5	13.6	17.1	100.0	59,085
Muslim	37.8	30.1	13.6	18.5	100.0	12,485
Christian	18.1	42.8	16.3	22.9	100.0	123
Sikh	9.6	32.1	24.1	34.2	100.0	248
Jain	18.6	31.5	26.5	23.4	100.0	84
Other	(51.7)	(10.3)	(17.2)	(20.7)	100.0	25
Caste/tribe of the household head#						
Scheduled caste	46.7	28.1	10.0	15.2	100.0	16,848
Scheduled tribe	47.6	26.8	7.9	17.8	100.0	676
Other backward class	42.2	28.7	13.1	16.1	100.0	34,188
Other	32.8	27.1	18.4	21.7	100.0	19,458
Standard of living index						
Low	51.0	27.5	8.8	12.7	100.0	39,031
Medium	38.7	27.8	15.7	17.8	100.0	18,217
High	17.2	29.5	24.0	29.3	100.0	14,802
Total	40.9	28.0	13.7	17.4	100.0	72,050
Note: Ppm: Parts per million						
@ Literate persons with no years of schooling are also included. # Total number of cases may not add upto N due to do not know and missing cases. ¹ Includes salt not at home, salt not tested, refused and missing cases.						
() Based on less than 50 unweighted cases						

that contained a minimum recommended 15 ppm or higher level of iodine content whereas 41 percent of households used salt that is not iodized at all and another 28 percent used salt, which was inadequately iodized.

In rural areas, 50 percent of households against 22 percent in urban areas used non-iodized salt. Percentage of households using inadequately iodized salt is less in rural areas (27%) than urban areas (30%). Number of households using non-iodized or inadequately iodized salt is closely associated with the educational level of the household head. Nearly one-fifth of households headed by persons who had more than 10 years of schooling reported the use of adequately iodized salt. Consumption of adequately iodised salt among households of other caste is 18 percent, followed by 13 percent in other backward class households and among scheduled caste and scheduled tribe, it is less than 10 percent of households.

Differential in the consumption of properly iodized salt is more pronounced when analysed by religion of the household head and standard of living index. Percentage of households using adequately iodized salt is only 14 percent among Muslims households and Hindu households, whereas the corresponding figure for Christian and other religion households is 16 percent and 17 percent respectively and the highest is observed in Jains. Again, households with low standard of living are more likely to use non-iodized salt compared to households with medium or high standard of living index. While 51 percent of households with low standard of living used non-iodized salt, only 17 percent households with a high standard of living fall in this category. The number of households with a high standard of living using adequately iodized salt is thrice of those with a low standard of living.

2.11 Iodization of Salt by Districts

Table 2.11 shows district level variation in the percent distribution of households by level of iodization of salt used in the households. Mau has the lowest proportion of households (12 percent) using non-iodized salt, whereas Hardoi has the highest proportion of households (78 percent) using non-iodized salt. Percentage of households using inadequately iodized salt is the highest (56 percent) in Etawah and the lowest in Lalitpur (6 percent). Around 14 percent of the households in the state used adequately iodized salt, the highest being in the district of Mau (55 percent) whereas Bareilly and Budaun districts recorded only one percent of adequate use of iodised salt.

Table 2.11 IDOIZATION OF SALT BY DISTRICT				
Percent distribution of household heads by degree of idoization of salt by district, Uttar Pradesh, 2002-04				
District	Not idoized	7ppm	15+ppm	Other ¹
Agra	54.9	32.0	4.8	8.3
Aligarh	28.4	39.3	20.6	11.7
Allahabad	30.2	29.4	38.6	1.9
Ambedaker Nagar	20.4	46.7	32.1	0.8
Auraiya	51.1	30.6	5.8	12.6
Azamgarh	33.9	19.7	13.1	33.4
Baghpat	30.9	48.4	11.2	9.6
Bahraich	22.1	50.8	24.9	2.2
Ballia	33.5	24.0	12.6	29.8
Balrampur	25.1	39.2	32.5	3.2
Banda	47.4	32.6	18.8	1.2
Barabanki	45.6	16.9	6.8	30.7
Bareilly	63.5	23.8	0.8	12.0
Basti	24.8	42.4	31.2	1.5
Bijnor	64.1	19.6	3.5	12.8
Budaun	62.7	10.2	1.0	26.1
Bulandshahar	22.3	50.3	22.5	4.9
Chandauli	23.5	39.6	35.2	1.6
Chitrakoot	46.1	34.3	16.7	3.0
Deoria	15.1	45.1	37.3	2.5
Etah	65.8	16.1	2.5	15.6
Etawah	26.4	56.0	7.0	10.6
Faizabad	17.3	46.5	34.4	1.8
Farrukhabad	52.1	31.9	2.8	13.3
Fatehpur	61.3	11.7	2.0	25.0
Firozabad	56.3	16.0	12.7	15.0
Gautam Buddha Nagar	26.8	50.8	3.7	18.7
Ghaziabad	19.1	33.8	34.0	13.1
Ghazipur	33.8	15.1	8.8	42.3
Gonda	17.8	44.6	35.1	2.5
Gorakhpur	43.6	10.5	5.6	40.2
Hamirpur	38.4	35.8	23.4	2.4
Hardoi	77.9	5.9	5.7	10.5
Hathras	52.0	20.8	11.6	15.5
Jalaun	61.4	14.5	3.4	20.7
Jaunpur	42.5	17.3	5.9	34.2
Jhansi	43.7	10.2	6.8	39.3
Jyotiba Phule Nagar	39.8	38.1	7.1	14.9
Kannauj	69.8	10.5	1.9	17.8
Kanpur Dehat	65.0	12.4	2.7	19.9

Note: Ppm: Parts per million. ¹ Includes salt not at home, salt not tested, refused and missing cases.

Contd.

Table 2.11 IDOIZATION OF SALT BY DISTRICT (Contd.)
Percent distribution of household heads by degree of idoization of salt by district, Uttar Pradesh, 2002-04

District	Not idoized	7ppm	15+ppm	Other ¹
Kanpur Nagar	34.5	7.3	3.5	54.7
Kaushambi	45.3	27.5	24.1	3.1
Kheri	53.1	15.8	6.9	24.3
Kushinagar	23.5	36.1	39.0	1.5
Lalitpur	54.3	6.4	5.9	33.4
Lucknow	36.4	6.8	5.1	51.7
Maharajganj	47.9	21.6	7.3	23.2
Mahoba	43.5	39.8	14.5	2.3
Mainpuri	53.0	33.1	5.7	8.3
Mathura	38.5	34.7	14.7	12.1
Mau	12.0	31.1	54.6	2.3
Meerut	36.5	44.3	7.7	11.5
Mirzapur	32.6	33.4	5.4	28.6
Moradabad	45.0	33.6	5.4	16.0
Muzaffarnagar	31.3	33.2	21.4	14.1
Pilibhit	64.3	14.4	2.3	19.0
Pratapgarh	47.6	11.9	5.4	35.1
Rae Bareli	47.5	12.4	6.3	33.7
Rampur	69.5	17.3	1.7	11.4
Saharanpur	54.1	34.6	3.4	7.9
Sant Kabir Nagar	19.6	45.9	33.0	1.5
Sant Ravidas Nagar	24.4	46.1	27.8	1.6
Shahjahanpur	66.8	13.8	5.2	14.3
Shrawasti	26.2	43.4	28.3	2.1
Siddharthnagar	16.3	49.1	32.2	2.4
Sitapur	39.6	18.5	7.9	34.0
Sonbhadra	34.5	20.8	9.0	35.7
Sultanpur	47.2	15.4	5.2	32.2
Unnao	45.5	35.1	17.4	2.0
Varanasi	29.1	27.0	40.9	3.0
Uttar Pradesh	40.9	28.0	13.7	17.4

Note: Ppm: Parts per million. ¹ Includes salt not at home, salt not tested, refused and missing cases.

2.12 Availability of Facility and Services to the Rural Population

The DLHS-RCH collected information about surveyed village from knowledgeable persons such as, the 'Sarpanch' or 'Pradhan', (village head) or other village officials or other persons including 'teacher' in the villages on health and educational facilities and other services available in the village. One important aspect was on the distance of the village, if not available within the village, from various types of education facilities, including primary school, middle school, secondary school, higher secondary school, college, *Gurujee* scheme and 'Madarsa'. Further information on the distance of the village, if not available within the village, from various types of health facility, including sub-centres, primary health centres (PHCs), community health centres/ Rural Hospitals (CHCs/RHs), Government dispensary, hospital, private clinic or hospitals and health facilities of Indian System of Medicine (ISM).

Table 2.12 gives the distance of surveyed villages from an education facility. The unit of analysis is usual residence of rural population. Majority of the rural residents (92 percent) (the *de jure* rural population) in the state live in villages that have a primary

school, 42 percent live in villages with middle school and 16 percent of the rural population live in villages with secondary schools and one-fourth of them with *Gurujee* scheme. Higher secondary schools are available for 12 percent of the rural population. More than one-fourth of the rural population live in villages, which have *Madarassas*. Only three percent of the surveyed villages have a college. As regards the distribution of educational institutions within 5 kilometres distance from of the village, it can be seen that 48 percent of the villages have middle school, 46 percent have secondary school, 40 percent have higher secondary school and 32 percent have a '*Madarassa*' within this distance. For 61 percent of the villages, the college is more than 10 kilometres away and *madarassa* is available at this distance for 16 percent of the villages.

Table 2.12 DISTANCE FROM THE NEAREST EDUCATION FACILITY						
Percent distribution of rural household population by distance from the nearest education facility, Uttar Pradesh, 2002-04						
Education facility	Within village	Distance from the village:			Don't know/missing	Total percent
		< 5 km	5-9 km	10+ km		
Primary School	92.0	7.4	0.5	0.1	0.1	100.0
Middle School	42.3	47.5	9.0	1.0	0.2	100.0
Secondary School	16.4	45.9	29.0	8.6	0.2	100.0
Higher Secondary School	11.5	39.6	34.2	14.6	0.1	100.0
College	2.6	12.5	24.0	60.6	0.2	100.0
Gurujee Scheme	23.4	22.0	6.5	17.8	30.3	100.0
Madarsa	27.3	31.8	15.6	15.8	9.5	100.0

Note: Table based on rural de jure population

Table 2.13 DISTANCE FROM THE NEAREST HEALTH FACILITY						
Percent distribution of rural household population by distance from the nearest health facility, Uttar Pradesh, 2002-04						
Health facility	Within village	Distance from the village:			Don't know/missing	Total percent
		< 5 km	5-9 km	10+ km		
Rural household population						
Sub-centre	31.6	41.4	16.0	8.7	2.3	100.0
Primary health centre	12.1	34.9	32.5	19.9	0.6	100.0
Either sub-centre or PHC	34.9	43.5	15.2	6.1	0.3	100.0
Community health centre/Referral hospital	4.0	19.1	29.4	45.8	1.8	100.0
Government dispensary	5.5	22.8	25.3	43.6	2.7	100.0
Government hospital	2.8	12.9	19.4	64.0	0.9	100.0
Private clinic	38.3	35.2	17.5	8.6	0.5	100.0
Private hospital	4.3	24.5	30.0	40.9	0.3	100.0
ISM health facility	13.8	22.0	16.9	31.1	16.2	100.0

Note: Table based on rural de jure population

Table 2.13 summarises the availability of health facilities within the surveyed villages and provides information on the distance between the villages and the nearest health facility. About 32 percent of the rural population live in villages with Sub-centres. Only 12 percent of the rural household population live in a village with a primary health centre, though the proportion of villages having facilities of either Sub-centre or primary health centre is 35 percent. The proportion of rural population with other health facilities is 4 percent for CHCs/RHs, 6 percent for Government dispensary, 3 percent for Government hospitals, 38 percent for private clinics, 4 percent for private hospitals and 14 percent for Indian System of Medicine.

Table 2.14 AVAILABILITY OF SERVICES	
Percentage of rural residents living in villages that have selected services, Uttar Pradesh, 2002-04	
Services	Percentage of rural residents
Anganwadi centre	66.6
Anganwadi worker	62.3
Private doctor	59.5
Visiting doctor	34.9
Homeopathic doctor	12.7
Village health guide	23.4
Trained birth attendant	36.0
Traditional healer	35.4
Dai	64.9

Note: Table based on rural de jure population

The proportion of rural population located within a distance of 5 kilometres from health facilities is 41 percent for sub-centres, 35 percent for primary health centres, 19 percent for CHCs/RHs, 23 percent for a Government dispensary, 13 percent for Government hospitals, 35 percent for private clinic, 25 percent for private hospitals and 22 percent for ISM health facilities. Distance of particular health facilities is beyond 10 kilometres from surveyed villages in the case of Government hospitals (64 percent) and for private hospitals, (41 percent).

Table 2.14 shows the proportion of rural residents in the state that live in the villages with various health services. Almost 67 percent of rural residents live in villages that have an *anganwadi*, (a nursery school for children age 3-6 years) and at the same time 62 percent of rural households live in villages with *anganwadi* workers (*Anganwadi* workers provide integrated child development services) are available.

About three-fifth of the rural residents live in villages that have a private doctor, 35 percent live in villages with a visiting doctor, 13 percent with a homeopathy doctor, 23 percent with a village health guide, 36 percent with a trained birth attendant and 35 percent with a traditional healer. Little less than two-third of the rural residents live in villages that have a *Dai* (*Dai* provides the services for the delivery).

2.13 Availability of Education Facility and Health Services by Districts

Table 2.15 shows the availability of education and health facilities for the rural population within the surveyed villages by districts in Uttar Pradesh. In the districts of Aligarh, Auraiya, Baghpat, Ballia, Banda, Chitrakoot, Gaziabad, Hauripur, Jalaun, Jhansi, Jyotiba Phule Nagar, Kanpur Dehat, Kanpur Nagar, Kheri, Lalitpur, Meerut, Muzaltarnagar, Rae Bareli and Shahjahanpur, all the rural population have access to primary schools. In the state of Uttar Pradesh, 92 percent of the rural population live in villages having primary schools. Around 32 percent of the rural population in the state have sub-centres within the village, with the highest coverage of 61 percent in Rae Bareli and the lowest of 2 percent of the population in Etah.

There are some districts with no PHCs within the village. These districts include Ambedkar Nagar, Basti, Pratapgarh and Shrawasti. Highest availability of PHCs within the village is found in Muzaftar Nagar (32 percent). In Ballia, one-fourth of all the households in the rural area have access to at least one government health facility including sub-centre, primary health centre, community health centre or referral hospital, government hospital and government dispensary within the village.

Table 2.15 AVAILABILITY OF FACILITY AND SERVICES BY DISTRICT							
Selected facility and services of rural household population within village by district, Uttar Pradesh, 2002-04							
Percentage of rural household population with:							
Districts	Primary or middle school	Sub-centre	PHCs	Any government health facility ¹	Doctor ²	TBA ³	Angan-wadi worker
Agra	90.2	29.9	11.2	38.9	64.7	35.5	42.2
Aligarh	100.0	11.5	9.5	15.1	73.8	34.2	92.9
Allahabad	83.0	27.2	15.6	27.2	89.1	42.1	63.5
Ambedaker Nagar	88.5	43.8	0.0	43.8	74.7	36.0	57.6
Auraiya	100.0	9.2	3.2	12.4	60.1	22.5	59.8
Azamgarh	97.0	28.6	18.5	37.7	73.2	47.5	35.1
Baghpat	100.0	31.9	22.4	31.9	87.9	31.3	12.5
Bahraich	94.4	28.0	7.4	35.5	68.8	6.1	79.8
Ballia	100.0	63.3	18.6	75.5	86.4	32.9	88.5
Balrampur	88.5	37.8	3.7	43.0	38.9	10.9	79.0
Banda	100.0	32.3	20.0	39.8	71.0	11.7	71.9
Barabanki	95.8	26.5	7.2	33.5	45.4	21.9	84.5
Bareilly	93.9	7.5	3.8	9.3	86.8	41.0	7.7
Basti	75.1	30.4	0.0	30.4	63.5	42.3	82.4
Bijnor	91.5	24.7	9.0	28.1	91.9	34.1	73.3
Budaun	79.6	12.3	1.1	12.3	61.0	32.6	26.4
Bulandshahar	96.5	33.2	1.6	34.8	89.0	38.0	48.8
Chandauli	95.9	51.9	26.8	51.9	89.9	45.1	82.4
Chitrakoot	100.0	41.9	14.1	41.9	53.8	33.7	80.5
Deoria	86.2	35.3	9.0	38.3	73.6	37.4	44.5
Etah	89.1	1.7	3.3	5.0	73.2	11.2	48.3
Etawah	97.3	45.9	20.2	60.4	69.4	37.0	86.3
Faizabad	96.5	60.4	4.5	60.4	82.2	45.3	71.3
Farrukhabad	91.2	18.3	6.4	18.3	61.0	12.2	81.4
Fatehpur	86.0	57.9	16.2	57.9	81.6	17.9	75.4
Firozabad	95.4	27.1	29.7	35.5	65.7	44.0	51.1
Gautam Buddha Nagar	94.3	15.2	24.8	36.2	75.6	41.1	40.4
Ghaziabad	100.0	42.9	21.3	62.9	90.2	42.1	92.9
Ghazipur	80.1	35.1	9.9	51.1	59.3	28.2	58.4
Gonda	85.5	42.8	16.7	50.4	64.8	38.6	85.4
Gorakhpur	89.7	18.0	3.7	25.1	72.2	41.1	25.4
Hamirpur	100.0	58.4	18.3	58.4	71.6	23.7	88.8
Hardoi	95.1	34.7	14.4	40.7	69.0	37.6	55.5
Hathras	83.2	18.2	7.9	20.7	65.5	37.1	67.1
Jalaun	100.0	38.7	24.8	54.7	42.5	30.8	90.2
Jaunpur	96.3	17.4	13.4	28.0	75.6	38.9	53.5
Jhansi	100.0	58.8	12.8	64.1	66.0	34.9	90.0
Jyotiba Phule Nagar	100.0	38.9	5.8	41.7	95.0	23.4	39.0
Kannauj	96.6	25.9	21.0	35.5	81.6	72.6	27.1
Kanpur Dehat	100.0	26.5	11.9	46.2	31.4	17.9	21.0

Note: ¹ Includes sub-center, primary health center, community health center or referral hospital, government hospital, and government dispensary within the village ² Either private or visiting doctor ³ Trained birth attendant

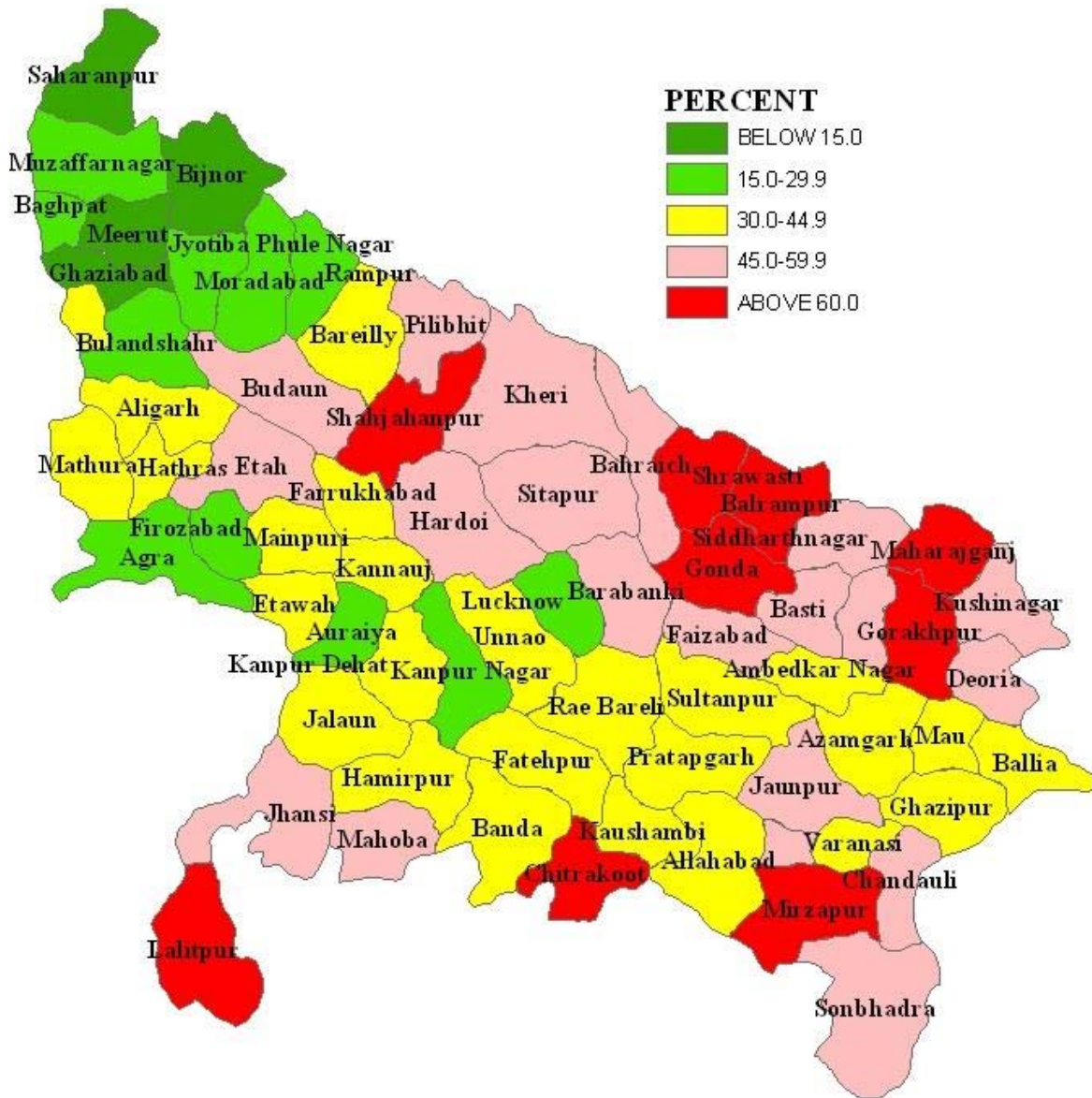
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Table 2.15 AVAILABILITY OF FACILITY AND SERVICES BY DISTRICT (Contd..)							
Selected facility and services of rural household population within village by district, Uttar Pradesh, 2002-04							
Districts	Percentage of rural household population with:						
	Primary or middle school	Sub-centre	PHCs	Any government health facility ¹	Doctor ²	TBA ³	Angan-wadi worker
Kanpur Nagar	100.0	39.7	24.1	51.7	62.8	24.1	88.0
Kaushambi	92.4	19.9	3.9	19.9	76.5	10.7	68.2
Kheri	100.0	32.1	10.3	37.9	77.6	31.0	77.6
Kushinagar	96.9	37.1	20.3	40.7	75.8	21.3	91.2
Lalitpur	100.0	52.1	21.4	54.3	71.1	74.2	65.7
Lucknow	86.5	40.9	4.6	40.9	73.4	21.5	79.9
Maharajganj	89.8	42.9	3.5	42.9	82.7	52.1	89.5
Mahoba	96.8	43.2	9.9	50.6	88.6	37.8	77.9
Mainpuri	94.4	4.1	8.7	12.8	65.3	49.1	24.0
Mathura	97.0	20.9	11.8	20.9	61.3	27.5	39.2
Mau	82.7	17.8	8.1	17.8	67.5	54.2	94.1
Meerut	100.0	46.0	22.7	59.6	100.0	62.6	8.0
Mirzapur	85.6	38.2	9.4	42.3	73.6	37.0	48.8
Moradabad	94.1	26.9	7.3	33.9	96.5	53.7	58.7
Muzaffarnagar	100.0	36.5	32.0	49.2	95.0	48.8	53.0
Pilibhit	97.7	16.9	15.0	24.9	96.0	47.1	4.8
Pratapgarh	100.0	15.8	0.0	33.9	60.9	40.8	68.2
Rae Bareli	100.0	60.7	18.0	66.4	67.2	21.6	87.5
Rampur	94.1	20.1	10.9	20.1	78.9	42.3	65.7
Saharanpur	92.2	26.8	25.6	38.0	91.3	35.3	63.3
Sant Kabir Nagar	75.0	41.7	11.3	42.8	79.3	24.7	68.4
Sant Ravidas Nagar	70.9	17.0	10.1	17.0	74.4	8.7	82.2
Shahjahanpur	100.0	39.1	24.9	39.1	63.6	40.9	32.9
Shrawasti	92.3	11.3	0.0	26.2	59.5	13.5	81.1
Siddharthnagar	81.9	31.6	3.9	47.9	58.3	31.9	78.8
Sitapur	81.8	43.0	7.8	52.2	62.6	50.6	66.2
Sonbhadra	96.9	52.1	11.6	54.8	44.5	38.3	67.1
Sultanpur	86.8	26.0	17.1	39.6	68.4	42.6	71.5
Unnao	92.3	38.6	9.3	46.8	84.6	31.9	74.6
Varanasi	96.5	40.2	12.2	44.2	88.8	66.5	97.5
Uttar Pradesh	92.0	31.6	12.1			36.0	66.6

Note: ¹ Includes sub-center, primary health center, community health center or referral hospital, government hospital, and government dispensary within the village ² Either private or visiting doctor ³ Trained birth attendant

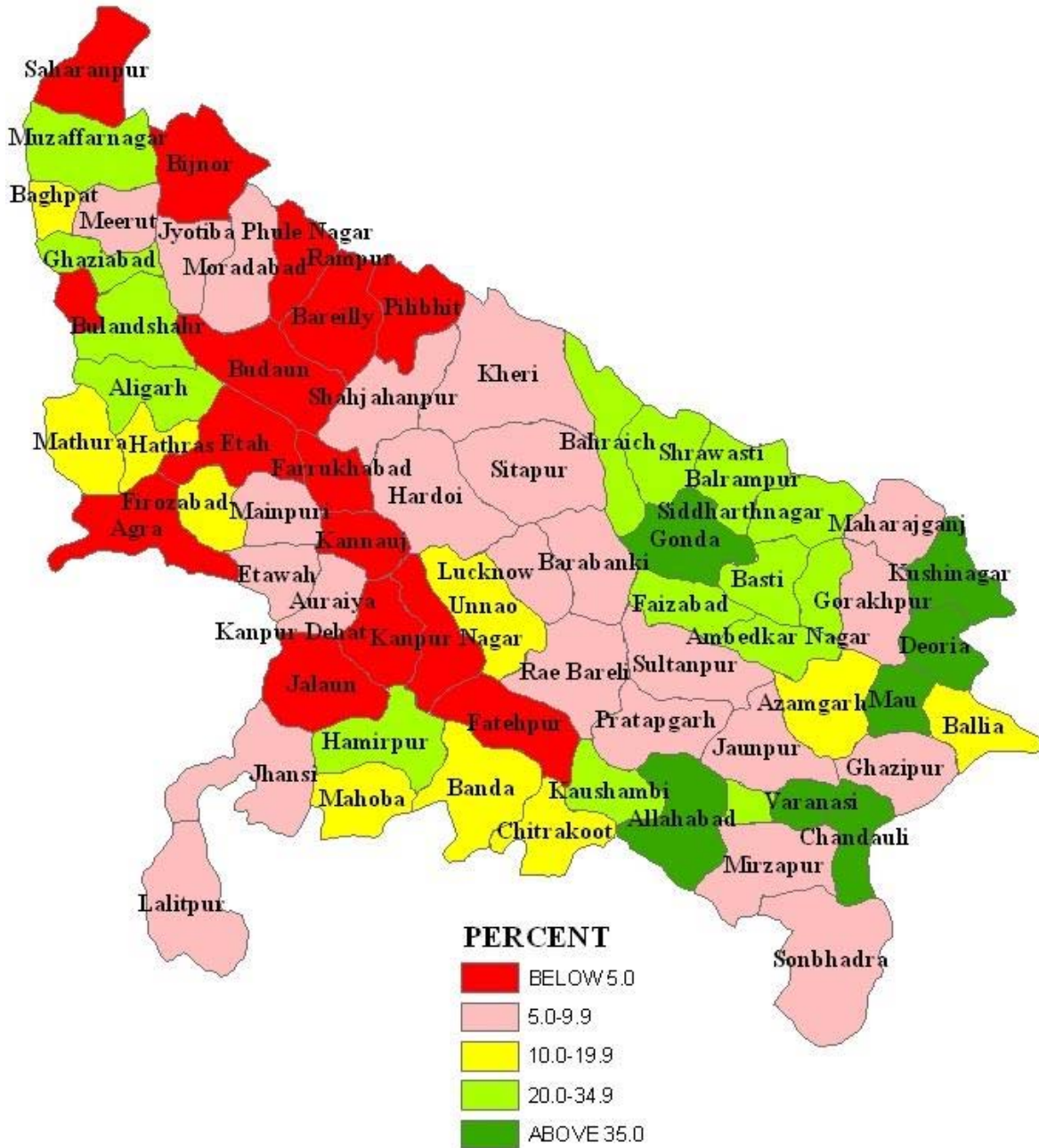
In Meerut, all the rural population are visited either by private doctor or by visiting doctors, whereas less than one-third of households visited either private or visiting doctor. Highest number of rural population (74 percent) are attended by trained birth assistants in Lalitpur, while only 6 percent of rural population, availed themselves of such a provision in Bahraich. A visit by *anganwadi* worker to rural households is highest (98 percent) in Varanasi and the lowest in Pilibhit (5 percent).

MAP-1
Percent Girl Marrying Below Legal Age at Marriage



MAP-2

Percentage of Households Using Salt that Contains 15 ppm Level of Iodine



CHAPTER III

CHARACTERISTICS OF WOMEN, HUSBANDS AND FERTILITY

The Reproductive and Child Health (RCH) programme is targeted towards the underprivileged sections of the population, particularly, women and children. The utilization of RCH services provided across the country depends to a large extent on the characteristics of women, their husbands and episodes of pregnancies, miscarriages, abortions, number of children born to them and survival status of children. Age of woman, marital duration, educational attainment, social background and living standard are important factors, which influence reproductive and child health. With this in view, the DLHS-RCH data were collected on demographic characteristics, such as current age, age at consummation of marriage and number of pregnancies, live births and surviving children from eligible women respondents of selected representative households. Information regarding household background characteristics was collected using a separate household questionnaire that covered religion and caste of head of household, type of house, source of drinking water and possession of consumer durables. Fertility preference of women in terms of timing and desire for additional children in comparison to the number of living children provides information on the need for reproductive and child health services.

This chapter provides a comprehensive outline of distribution of currently married women by present age, age at consummation of marriage, duration of marriage, complete years of schooling, pregnancy episodes, children ever born and children surviving, along with social and economic characteristics of households the women represent.

3.1 Background Characteristics of Women

The percent distribution of currently married women in the reproductive age group 15-44 years by residence, religion and caste of head of household, economic standard of household and other demographic characteristics are shown in Table 3.1. A sample of 64,207 eligible women represents the state of Uttar Pradesh in DLHS-RCH and nearly two-third of these women are drawn from rural areas. About 63 percent of the currently married women are in the age range of 20-34 years and a similar age distribution is observed both for urban and rural areas. Age at consummation of marriage, particularly in rural areas is found to be very low with as many as 71 percent of the women having cohabited before 18 years of age, while it is 43 percent in urban areas. Looking at the distribution of marital duration, it is noted that about 39 percent of the women across the state are married for more than 15 years.

Among the sample 64,207 representative women in Uttar Pradesh, Hindus and Muslims constitute 82 percent and 17 percent respectively. More Hindu women are found in rural areas (87 percent) than in urban areas (71 percent). The presence of women belonging to other religious groups is insignificant in proportional and absolute terms. Twenty two percent of the women belong to scheduled castes, one percent to scheduled tribes and 48 percent to other backward classes. More than one fourth of the sample

women (28 percent) belong to a general caste other than scheduled caste/tribe and other backward class. In rural areas, there are more women belonging to scheduled caste, scheduled tribe and other backward classes than in urban areas, while more women from other castes are found in urban areas. There is a clear rural-urban differential in the educational attainment of women. For the state of Uttar Pradesh, 62 percent of women are non-literate and women of this literacy category constitute 71 percent in rural areas, while it is just 42 percent in urban areas.

Table 3.1 BACKGROUND CHARACTERISTICS OF WOMEN			
Percent distribution of currently married women aged 15-44 by selected background characteristics, according to residence, Uttar Pradesh, 2002-04			
Background characteristic	Total	Residence	
		Rural	Urban
Age group			
15-19	10.4	12.5	5.4
20-24	21.8	23.0	19.0
25-29	21.8	21.1	23.3
30-34	19.4	18.6	21.3
35-39	15.5	14.3	18.5
40-44	11.2	10.6	12.5
Age at consummation of marriage			
Below 18 years	62.8	71.3	42.8
18 years & above	37.2	28.7	57.2
Marital duration			
0-4	20.9	20.9	20.9
5-9	20.3	20.6	19.5
10-14	20.0	19.7	20.6
15+	38.8	38.8	39.0
Religion			
Hindu	82.4	87.2	71.0
Muslim	17.0	12.6	27.4
Christian	0.1	0.1	0.3
Sikh	0.3	0.1	0.9
Jain	0.1	0.0	0.3
Caste/tribe			
Scheduled caste	22.1	24.8	15.6
Scheduled tribe	0.9	0.9	0.7
Other backward class	48.4	50.8	42.5
Other #	27.6	22.5	39.7
Don't know	1.1	1.0	1.4
Education (Years of schooling)			
Non-literate	62.3	71.0	41.5
0-9@ years	22.5	21.1	25.6
10 years & above	15.2	7.8	32.8
Husband's education (Years of schooling)			
Non-literate	27.7	30.2	21.6
0-9@ years	35.6	37.4	31.2
10 years & above	35.8	31.2	46.7
Don't know	1.0	1.1	0.5
Standard of living index			
Low	51.0	66.2	14.9
Medium	27.1	25.6	30.9
High	21.8	8.2	54.2
Number of women	64,207	45,196	19,011
Note: # Not belonging to a scheduled caste, scheduled tribe and an other backward class.			
@ Literate persons with no year of schooling are included.			

Around 23 percent of women across the state have completed 0-9 years of schooling. Only a handful, 8 percent of rural women have completed 10 or more years of schooling compared to 33 percent of urban women. Men are more literate than their spouses. In Uttar Pradesh, 28 percent of the husbands of eligible women are non-literate and the corresponding figure is 30 percent in rural areas and 22 percent in urban areas. The DLHS-RCH includes data on materials used for floor, walls and roof of the housing structure along with status of possession of a list of durables and these are utilized to construct a composite index of household standard of living. Households are further classified as those with low, medium and high standard of living. Fifty one percent of women in the state live in low standard of living households and this is 66 percent in rural areas and 15 percent in urban areas. Majority of women across the state live in households categorised as medium and high standard of living. In urban areas, 54 percent of women belong to high standard of living households and the corresponding figure is just 8 percent in rural areas.

3.2 Educational Level of Women

Table 3.2 provides details of educational level of eligible women in terms of classification by years of schooling, and selected background characteristics, such as place of residence, religion, caste and husbands' education. As regards distribution of non-literate women, it is observed that a lesser proportion of younger women below 30 years of age are non-literate compared to older women above 30 years. This age divide remains true even among literate women. A distinct pattern of educational attainment of women is that maximum of them attended schooling either for 1-5 years or 6-8 years and not many had 11 or more years of schooling. For the women in the age group 15-19 years, 13 percent and 14 percent of them had 1-5 years and 6-8 years of schooling respectively, while only 4 percent had 11 or more years of schooling. Among the senior women in the age group 40-44 years, distribution by year of schooling is 11 percent, 7 percent, 5 percent and 9 percent of them having attended school for 1-5, 6-8, 9-10 and 11 or more years of schooling respectively.

There is a significant rural-urban differential in the level of education of women in Uttar Pradesh. About 71 percent of rural eligible women are non-literate and 10 percent, 9 percent, 5 percent and 4 percent of the women have 1-5, 6-8, 9-10 and 11 or more years of schooling respectively. The corresponding figures in urban areas are 42 percent non-literate and 10 percent, 13 percent, 12 percent and 24 percent respectively. More Muslim women (72 percent) are non-literate compared to Hindu women (61 percent), Christian women (34 percent) and women belonging to other religious communities (19 percent). For literate eligible women from all religious communities, maximum of them have either 1-5 or 6-8 years of schooling. The proportion of Hindu women with 1-5 years of schooling is 10 percent and the same is 9 percent for Muslim women, 13 percent for Christian women and 8 percent for women from other religions. Among the literate Muslim women, hardly 6 percent of them have 11 or more years of schooling, while 11 percent of literate Hindu women have attained this level of education.

Table 3.2 LEVEL OF EDUCATION OF ELIGIBLE WOMEN

Percent distribution of currently married women aged 15-44 by years of schooling, according to selected background characteristics, Uttar Pradesh, 2002-04

Background characteristic	Non-literate	Literate but no schooling	Years of schooling				Missing	Total percent	Number of women
			1-5 years	6-8 years	9-10 years	11 or more years			
Age group									
15-19	61.6	0.2	12.9	13.8	7.0	4.4	0.0	100.0	6,662
20-24	57.3	0.3	9.9	13.1	8.5	10.8	0.0	100.0	14,019
25-29	59.3	0.4	9.3	10.4	7.7	12.8	0.0	100.0	13,974
30-34	65.2	0.5	9.4	8.6	6.2	10.1	0.0	100.0	12,435
35-39	66.1	0.3	9.8	8.5	5.5	9.8	0.0	100.0	9,953
40-44	68.1	0.2	11.0	7.0	4.8	8.9	0.0	100.0	7,163
Place of residence									
Rural	71.0	0.3	10.4	9.2	4.8	4.4	0.0	100.0	45,196
Urban	41.5	0.5	9.5	13.1	11.8	23.6	0.0	100.0	19,011
Religion									
Hindu	60.5	0.2	10.3	11.1	7.2	10.7	0.0	100.0	52,900
Muslim	72.4	1.0	9.4	6.9	4.7	5.7	0.0	100.0	10,925
Christian	33.8	3.0	13.4	1.2	21.3	27.3	0.0	100.0	77
Sikh	17.0	0.0	4.1	5.5	19.1	54.3	0.0	100.0	218
Jain	2.3	0.0	3.6	5.0	7.4	81.7	0.0	100.0	66
Caste/tribe #									
Scheduled caste	78.8	0.3	7.3	6.9	3.7	3.1	0.0	100.0	14,188
Scheduled tribe	81.3	0.3	6.7	3.6	3.9	4.1	0.1	100.0	551
Other backward class	69.1	0.4	10.2	9.4	5.1	5.8	0.0	100.0	31,046
Other	36.1	0.3	12.5	15.0	12.6	23.4	0.0	100.0	17,717
Husband's education									
Non-literate	92.0	0.2	4.0	2.4	0.9	0.4	0.0	100.0	17,763
Literate but no schooling	78.7	8.6	5.9	3.7	1.5	1.3	0.2	100.0	259
1-5 years	78.8	0.4	12.3	5.7	1.9	0.8	0.0	100.0	7,270
6-8 years	66.6	0.3	14.0	12.7	4.2	2.3	0.0	100.0	9,843
9-10 years	51.4	0.3	15.0	17.1	10.1	6.1	0.0	100.0	13,568
11 or more years	25.0	0.3	9.4	14.5	15.3	35.4	0.0	100.0	14,880
Total	62.3	0.3	10.1	10.3	6.8	10.1	0.0	100.0	64,207

Note: Total includes 20 women belonging to other religions, 8 women with missing information and 616 women who do not know about her husband's education and 20 woman with other religion were not shown separately. # Total number may not add up to N due to don't know and missing cases.

The uneven level of educational attainment by caste can be noted from the recorded proportion of non-literate women among scheduled caste (79 percent), scheduled tribe (81 percent), other backward class (69 percent) and other caste or tribe (36 percent). The literate women belonging to different castes or tribes are concentrated more in the range of 1-5 to 6-8 years of schooling. The husband's education is an important characteristic, which has strong association with the education of eligible women. As many as 92 percent of women whose husbands are non-literate are also non-literate, while only 25 percent of women whose husbands have 11 or more or years of schooling are non-literate. Thirty five percent of literate women educated for 11 or more years of schooling have husbands who have the same level of education.

3.3 Background Characteristics of Husbands of Eligible Women

In DLHS-RCH husbands of eligible women were also interviewed. The response rate for husbands is relatively low compared to that of eligible women. Selected background characteristics of husbands are shown in Table 3.3. Across the state of Uttar Pradesh, husbands are mostly in the age group 25-34 years. Fewer husbands are 45 years or older. In Uttar Pradesh, 83 percent of the husbands are Hindus, 16 percent are Muslims and presence of other religious groups is insignificant. Twenty two percent of husbands in the state belong to the scheduled caste and it is little more in rural areas (25 percent) than in urban areas (16 percent). Nearly 48 percent of the husbands belong to other backward class. In urban areas husbands from other backward class constitute 43 percent, while it is 51 percent in rural areas. As regards educational characteristics of the husbands of surveyed eligible women, 39 percent of them have completed 0-9 years of schooling and the proportion of non-literate husband ranges from 22 percent in urban areas to 32 percent in rural areas, while the overall state figure is 29 percent.

Table 3.3 BACKGROUND CHARACTERISTICS OF MEN			
Percent distribution of husband of eligible women by selected background characteristics, according to residence, Uttar Pradesh, 2002-04			
Background characteristic	Total	Residence	
		Rural	Urban
Age group			
< 25	13.8	16.1	8.5
25-34	38.8	38.9	38.6
35-44	34.8	33.0	38.8
45 +	12.6	12.0	14.1
Religion			
Hindu	83.3	88.1	72.2
Muslim	16.1	11.8	26.2
Christian	0.2	0.1	0.3
Sikh	0.3	0.1	0.9
Jain	0.1	0.0	0.3
Caste/tribe #			
Scheduled caste	22.4	25.2	15.8
Scheduled tribe	0.9	1.0	0.6
Other backward class	48.1	50.5	42.6
Other	27.6	22.3	39.8
Don't know	1.0	0.9	1.1
Education (Years of schooling)			
Non-literate	28.7	31.7	21.6
0-9@ years	39.2	41.1	34.6
10 years & above	32.1	27.1	43.8
Standard of living index			
Low	50.0	65.5	14.1
Medium	27.1	25.6	30.3
High	22.9	8.8	55.5
Number of living children			
0	13.1	13.5	12.2
1	13.4	13.1	14.1
2	18.3	16.5	22.3
3	18.8	18.5	19.5
4+	36.4	38.3	31.9
Number of Men	37,463	26,161	11,302

Note: # Not belonging to a scheduled caste, scheduled tribe and an other backward class.
 @ Literate persons with no year of schooling are included.

The proportion of husbands living in households classified as low, medium and high standard of living index are 50 percent, 27 percent and 23 percent respectively. In rural areas, 66 percent of the husbands live in low standard of living households compared to 14 percent in urban areas. This is complementary in the case of husbands living in high standard of living households, 56 percent in urban and 9 percent in rural. In terms of household standard of living composition, those living in medium standard of living dominate in urban (30 percent) and in rural (26 percent) husbands live in low standard of living households. Around 18 percent of husbands across the state reported to have two living children. Less number of husbands in urban areas (14 percent) reported to have one living child, while more husbands in rural areas (17 percent) have two living children. More than a half of the husbands of rural eligible women have more than three living children and it is 57 percent for husbands of urban eligible women.

3.4 Educational Level of Husbands of Eligible Women

Educational levels in categories of years of schooling classified by age, place of residence, religion and caste/tribe of husbands of eligible women are shown in Table 3.4. The distribution of non-literate husbands across age is more or less uniform, though it is marginally less for husbands below 25 years (25 percent) and other than 45 years (35 percent) compared to 26 percent and 32 percent for husbands in the age groups 25-34 years and 35-44 years respectively. Among the literate husbands, irrespective of their age at the time of survey most of them have 1-8 years of schooling - 32 percent of those below 25 years and 26 percent of those above 45 years of age. As expected, few of the younger husbands (16 percent) below 25 years have 11 or more years of schooling compared to 22 percent of those above 45 years. As in the case of eligible women, 46 percent of Muslim husbands are non-literate while the corresponding non-literate husbands of Hindu and other religions are 25 percent and 14 percent respectively. The proportion of husbands of Hindu, Muslim and other religions who have 11 or more years of schooling constitute 24 percent, 10 percent and 58 percent respectively. Most of the literate Muslim husbands (17 percent) have completed 1-5 years of schooling and the corresponding figure is 11 percent and 6 percent respectively for Hindu and other religions husbands. Educational attainment of husbands of eligible women varies according to the caste/tribe they belong. There are more non-literate husbands belonging to scheduled tribes (57 percent) followed by scheduled caste husbands (38 percent). Among the scheduled caste and scheduled tribe husbands, 20 percent and 19 percent of them have 9 or more years of schooling. The literacy level of other backward classes is comparable with that of husbands from castes other than scheduled tribe, scheduled caste and other backward classes. Among the husbands belonging to other backward classes, 31 percent of them are non-literate and 40 percent of them have 9 or more years of schooling.

Table 3.4 LEVEL OF EDUCATION OF MEN									
Percent distribution of husbands of eligible women by years of schooling, according to selected background characteristics, Uttar Pradesh, 2002-04									
Background characteristic	Non-literate	Literate but no schooling	Years of schooling				Missing	Total percent	Number of men
			1-5 years	6-8 years	9-10 years	11 or more years			
Age group									
< 25	25.0	0.2	11.3	20.3	26.9	16.3	0.0	100.0	5,177
25-34	25.5	0.4	11.9	16.3	21.8	24.1	0.0	100.0	14,546
35-44	31.5	0.3	12.9	14.5	17.9	22.8	0.0	100.0	13,022
45+	34.6	0.4	12.9	13.4	17.2	21.5	0.0	100.0	4,717
Place of residence									
Rural	31.7	0.4	12.9	16.2	21.4	17.4	0.0	100.0	26,161
Urban	21.6	0.2	10.9	15.1	18.7	33.5	0.0	100.0	11,302
Religion									
Hindu	25.4	0.3	11.3	16.3	22.3	24.4	0.0	100.0	31,200
Muslim	46.0	0.7	17.4	14.0	11.4	10.3	0.1	100.0	6,035
Christian	37.5	2.7	12.2	4.3	18.5	24.8	0.0	100.0	59
Sikh	6.1	0.0	6.0	9.4	29.0	49.6	0.0	100.0	120
Other	(8.3)	(0.0)	(0.0)	(9.5)	(23.8)	(58.3)	(0.0)	(100.0)	49
Caste/tribe #									
Scheduled caste	38.3	0.3	14.6	16.2	17.3	13.1	0.0	100.0	8,389
Scheduled tribe	56.5	0.2	14.3	9.8	11.3	8.0	0.0	100.0	331
Other backward class	31.0	0.4	13.8	17.0	20.2	17.5	0.0	100.0	18,026
Other	15.5	0.2	7.6	13.7	24.2	38.8	0.0	100.0	10,340
Total	28.7	0.3	12.3	15.9	20.6	22.2	0.0	100.0	37,463
Note: # Total number may not add upto N due to don't know and missing cases. () Based on less than 50 unweighed cases									

3.5 Children Ever Born and Surviving

In DLHS-RCH, currently married women in the age group of 15-44 years were asked about the children ever born alive and the number of children surviving. Table 3.5 shows mean children ever born and mean surviving children by selected background characteristics and sex of children. A look at the mean children ever born by age of the women reveals that older women had more average live births than the younger women. On an average, women in the reproductive age group have given birth to more male children than female children and similar sex differential is also noted when it comes to mean surviving children. Completed fertility, that is, mean children ever born to women in the age group 40-44 years is 5.4 for the state of Uttar Pradesh and it comprises an average of 2.8 male children and 2.6 female children. Out of the 3.7 mean children ever born to women in the 40-44 year age group, an average of 4.5 children survived. By sex of children, out of 2.8 mean numbers of males, 2.4 survived on the average and the corresponding mean number of females surviving was 2.1 out of 2.6.

Women with longer marital duration have higher mean children ever born. On the average, women who are married for 15 or more years have 5.1 children ever born and on the average 4.3 of them are surviving. There is a clear rural-urban divide in terms of mean children ever born with 3.4 children in rural areas and 3.1 children in urban areas.

The mean children ever born to women who are Hindu, Muslim, Christian and other religions are 3.2, 3.9, 2.1 and 4.5 respectively. The corresponding mean surviving children is respectively 2.7, 3.4, 2.6 and 4.2 for these religious groups. The average children ever born also vary by caste/tribe of the eligible women. For women belonging to scheduled caste, the mean children ever born is 3.5, for the scheduled tribe is 3.6, other backward classes is 3.4 and other castes is 3.0. For all religious groups, the mean number of surviving children is slightly less than 3 shared almost by one and half surviving male and one and half surviving female children on the average.

Table 3.5 CHILDREN EVER BORN AND LIVING							
Mean children ever born (CEB) and children surviving (CS) by selected background characteristics of currently married women aged 15-44 years, Uttar Pradesh, 2002-04							
Background characteristic	Mean children ever born			Mean children surviving			Number of women
	Total	Male	Female	Total	Male	Female	
Age group (years)							
15-19	0.6	0.3	0.3	0.5	0.3	0.2	6,662
20-24	1.7	0.9	0.8	1.5	0.8	0.7	14,019
25-29	3.1	1.6	1.5	2.7	1.4	1.3	13,974
30-34	4.3	2.2	2.0	3.7	2.0	1.8	12,435
35-39	5.0	2.6	2.4	4.2	2.2	2.0	9,953
40-44	5.4	2.8	2.6	4.5	2.4	2.1	7,163
Marital duration							
0-4	0.7	0.4	0.3	0.6	0.3	0.3	13,421
5-9	2.3	1.2	1.1	2.0	1.1	1.0	13,006
10-14	3.6	1.9	1.7	3.2	1.7	1.5	12,844
15+	5.1	2.7	2.4	4.3	2.3	2.0	24,936
Residence							
Rural	3.4	1.8	1.6	2.9	1.5	1.4	45,196
Urban	3.1	1.6	1.5	2.8	1.4	1.3	19,011
Religion							
Hindu	3.2	1.7	1.5	2.7	1.4	1.3	52,900
Muslim	3.9	2.0	1.9	3.4	1.8	1.7	10,925
Christian	2.9	1.6	1.3	2.6	1.5	1.1	77
Sikh	2.2	1.1	1.1	2.1	1.1	1.0	218
Jain	2.3	1.1	1.1	2.1	1.1	1.0	66
Caste/tribe #							
Scheduled caste	3.5	1.8	1.7	2.9	1.5	1.4	14,188
Scheduled tribe	3.6	1.8	1.8	3.0	1.5	1.5	551
Other backward class	3.4	1.8	1.6	2.9	1.5	1.4	31,046
Other	3.0	1.6	1.4	2.6	1.4	1.2	17,717
Education							
Non-literate	3.8	2.0	1.8	3.2	1.7	1.5	39,991
0-9@ years	2.8	1.4	1.3	2.5	1.3	1.2	14,418
10 years & above	2.0	1.1	1.0	1.9	1.0	0.9	9,785
Standard of living index							
Low	3.6	1.9	1.7	3.0	1.6	1.4	32,769
Medium	3.2	1.7	1.5	2.8	1.5	1.3	17,432
High	2.6	1.4	1.3	2.4	1.3	1.2	14,006
All women	3.3	1.7	1.6	2.8	1.5	1.3	64,207
Note: # Total number may not add upto N due to don't know and missing cases. Table includes 13 women with missing information on education and 20 women with religion not shown separately. @ Literate women with no year of schooling are included.							

The mean children ever born is higher for non-literate women (3.8) than women who have completed 0-9 years of schooling (2.8) and 10 or more years of schooling (2.0). The mean number of surviving children for women corresponding to these educational levels is 3.2, 2.5 and 1.9 respectively. Further the mean children ever born for women classified into low, medium and high standard of living by SLI is 3.6, 3.2 and 2.6 respectively. For the state of Uttar Pradesh, the DLHS-RCH shows inverse association between mean children ever born and educational attainment of women and also the level of household economic comfort.

3.6 Completed Fertility by District

The level of completed fertility as measured by mean children, ever born to women of 40-44 years by districts in Uttar Pradesh together with mean number of surviving children is shown in Table 3.6. On the average, women on the verge of completing reproductive period have given birth to 5.4 children in their reproductive life of which 4.8 children are surviving on the average. Completed fertility in Uttar Pradesh varies from the low of 4.2 mean children ever born for Lucknow to the highest of 6.8 children in Shrawasti district. Completed fertility in terms of mean children ever born is high in the districts of Shrawasti (6.8), Siddharthnagar (6.6), Sant Kabir Nagar (6.4), Balrampur (6.5), Saharapur (6.4), Bahraich (6.2), Citrakoot (6.3), Farukhabad (6.3) and Bareilly (6.1). With the exception of 10 out of 70 districts, mean children ever born in all other districts of Uttar Pradesh is more than 5 children. It is also true that in most of the districts mean number of male children is more than the mean of female children born to women in the 40-44 year age group. Firozabad (5.2) and Sant Ravidas Nagar (5.2) recorded highest mean number of surviving children. Looking at the absolute difference between mean children ever born and mean number of surviving children, it seems that infant and child mortality is quite high and varies among districts in Uttar Pradesh.

Table 3.6 COMPLETED FERTILITY BY DISTRICT

Mean children ever born (CEB) and children surviving (CS) to currently married women aged 40-44 by district, Uttar Pradesh, 2002-04

District	Mean children ever born			Mean children surviving		
	Total	Male	Female	Total	Male	Female
Agra	5.3	3.0	2.3	4.7	2.7	2.0
Aligarh	5.8	3.0	2.7	4.7	2.5	2.2
Allahabad	5.7	3.1	2.6	4.4	2.3	2.0
Amedkar Nagar	5.1	2.6	2.5	4.3	2.2	2.1
Auraiya	5.4	2.9	2.4	4.5	2.6	2.0
Azamgarh	5.4	2.6	2.7	4.7	2.3	2.4
Baghpat	4.7	2.6	2.0	4.1	2.3	1.8
Bahraich	6.2	3.3	2.9	5.0	2.8	2.2
Ballia	5.0	2.8	2.2	4.1	2.4	1.7
Balrampur	6.5	3.3	3.2	5.1	2.6	2.5
Banda	5.9	3.0	2.9	4.7	2.4	2.3
Barabanki	5.6	2.9	2.7	4.6	2.5	2.1
Bareilly	6.1	3.0	3.1	4.7	2.3	2.4
Basti	5.5	2.8	2.7	4.6	2.3	2.2
Bijnor	5.1	2.6	2.5	4.6	2.3	2.3
Budaun	5.9	3.2	2.7	4.7	2.7	2.0
Bulandshar	5.5	2.8	2.7	4.8	2.5	2.4
Chanduali	5.3	2.7	2.6	4.5	2.3	2.2
Chitrakoot	6.3	3.3	3.0	5.0	2.6	2.4
Deoria	5.4	2.7	2.6	4.6	2.3	2.3
Eathawah	5.8	3.1	2.7	4.7	2.6	2.1
Etah	5.6	3.4	2.3	4.6	2.8	1.9
Faizabad	5.6	2.8	2.8	4.4	2.2	2.2
Farukhabad	6.3	3.4	2.8	4.9	2.7	2.3
Fatehpur	4.8	2.6	2.2	3.9	2.1	1.8
Firozabad	5.8	3.1	2.7	5.2	2.8	2.4
Gautambudha Nagar	4.8	2.5	2.3	4.1	2.2	1.9
Ghazibad	4.9	2.6	2.3	4.3	2.3	2.0
Ghazipur	5.5	2.7	2.8	4.7	2.2	2.4
Gonda	5.8	3.1	2.7	4.6	2.5	2.1
Gorakhpur	5.2	2.6	2.5	4.3	2.2	2.1
Hamirpur	5.3	2.6	2.7	4.0	2.1	2.0
Hardoi	5.8	3.1	2.7	4.8	2.6	2.2
Hathras	5.8	3.1	2.7	4.9	2.7	2.3
Jalaun	4.9	2.5	2.5	3.9	2.0	2.0
Jaunpur	5.2	2.6	2.6	4.4	2.2	2.2
Jhansi	4.8	2.6	2.2	3.8	2.1	1.7
Jyotiba Phule Nagar	5.4	2.8	2.6	4.5	2.3	2.1
Kannuaz	5.5	3.1	2.3	4.5	2.6	1.9
Kanpur Dehat	5.2	2.7	2.5	4.2	2.3	1.9

Contd.

Table 3.6 COMPLETED FERTILITY BY DISTRICT (Contd.)

Mean children ever born (CEB) and children surviving (CS) to currently married women aged 40-44 by district, Uttar Pradesh, 2002-04

District	Mean children ever born			Mean children surviving		
	Total	Male	Female	Total	Male	Female
Kanpur Nagar	4.5	2.4	2.1	4.0	2.2	1.8
Kaushambhi	6.4	3.3	3.2	4.6	2.5	2.1
Kheri	5.7	2.8	3.0	4.6	2.4	2.3
Kushinagar	5.1	2.7	2.4	4.5	2.4	2.0
Lalitpur	6.0	3.1	2.9	4.5	2.5	2.1
Lucknow	4.2	2.2	2.0	3.7	1.9	1.8
Maharajganj	5.4	3.1	2.3	4.3	2.5	1.8
Mahoba	5.3	2.7	2.5	4.0	2.1	1.9
Mainpuri	5.2	2.6	2.6	4.3	2.3	2.0
Mathura	5.4	2.7	2.7	4.5	2.3	2.2
Mau	5.0	2.7	2.4	4.4	2.4	2.1
Merrut	5.4	2.7	2.7	4.8	2.4	2.4
Mirzapur	5.3	2.7	2.6	4.4	2.3	2.1
Moradabad	5.9	3.2	2.7	4.9	2.7	2.2
Muzzaffarnagar	5.2	2.5	2.6	4.4	2.2	2.3
Pilibhit	5.5	3.1	2.4	4.7	2.7	2.0
Pratapgarh	5.4	2.9	2.5	4.6	2.5	2.1
Rai Bareli	5.2	2.6	2.6	4.3	2.2	2.1
Rampur	6.0	3.1	2.9	5.0	2.7	2.4
Saharanpur	4.2	2.5	1.7	3.7	2.2	1.5
Sant Kabir Nagar	6.4	3.2	3.2	5.2	2.7	2.5
Sant Ravidas Nagar	6.0	3.2	2.7	4.8	2.7	2.1
Shahjahanapur	4.8	2.5	2.3	4.3	2.3	2.1
Shrawasti	6.8	3.6	3.2	4.9	2.6	2.3
Sidhrath Nagar	6.6	3.3	3.4	5.2	2.6	2.6
Sitapur	6.0	3.2	2.8	4.7	2.5	2.2
Sonbhadra	5.3	2.7	2.6	4.4	2.2	2.2
Sulatanpur	5.2	2.8	2.5	4.3	2.3	2.1
Unnao	5.6	2.9	2.8	4.3	2.3	2.0
Varanashi	5.4	2.9	2.5	4.5	2.5	2.0
Uttar Pradesh	5.4	2.8	2.6	4.5	2.4	2.1

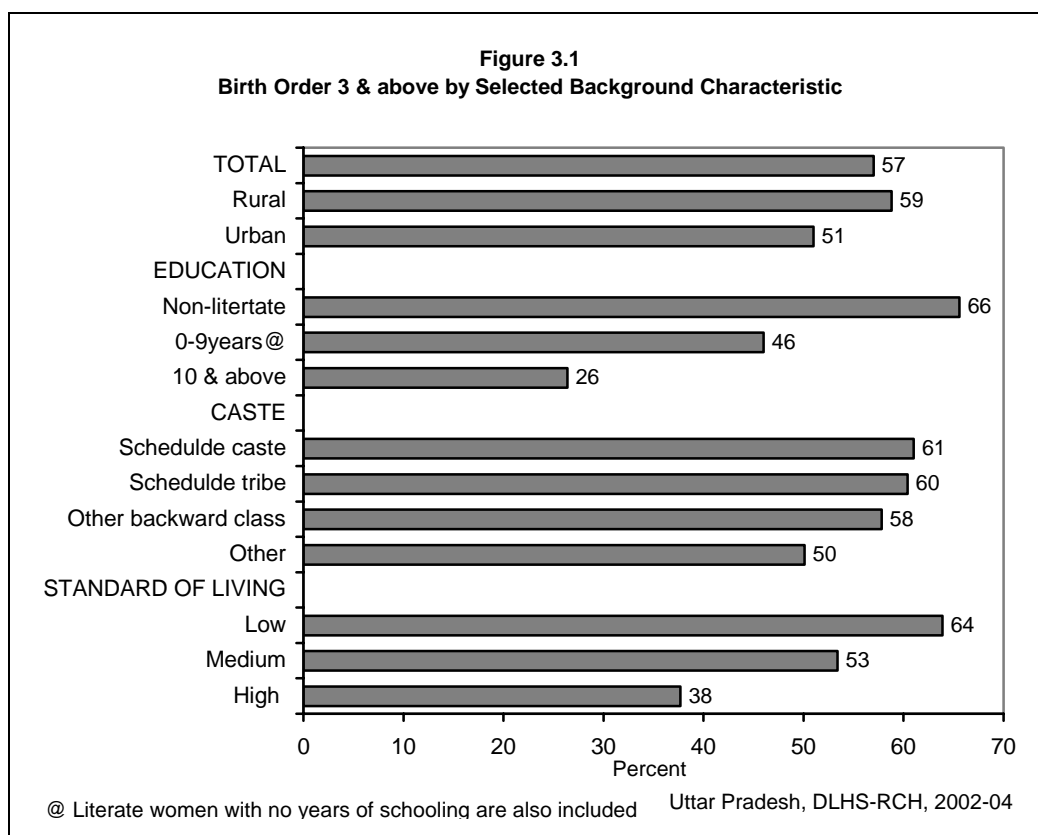
3.7 Birth Order

Birth order distribution by selected background characteristics of women are provided in Table 3.7 and Figure 3.1. This distribution can be used as a measure of fertility in the absence of formal measures of fertility, such as, crude birth rate and total fertility rate.

Table 3.7 BIRTH ORDER						
Percent distribution of births during three years preceding the survey by birth order by selected background characteristics, Uttar Pradesh, 2002-04						
Background characteristic	Birth order				Total percent	Number of births
	1	2	3	4+		
Age of women						
15-19	72.6	23.6	3.3	0.4	100.0	3,219
20-24	36.5	34.3	18.9	10.4	100.0	12,086
25-29	9.4	19.7	25.5	45.4	100.0	10,574
30-34	2.3	5.7	10.4	81.7	100.0	6,169
35-39	0.7	2.5	5.3	91.6	100.0	2,678
40-44	0.7	1.3	2.4	95.5	100.0	812
Place of residence						
Rural	21.2	20.0	16.7	42.1	100.0	26,560
Urban	25.3	23.4	16.2	35.1	100.0	8,977
Education (Years of schooling)						
Non-literate	16.9	17.4	16.2	49.4	100.0	23,894
0-9@ years	28.5	25.5	18.5	27.5	100.0	7,417
10 years & above	41.5	32.1	15.0	11.4	100.0	4,217
Religion						
Hindu	23.3	21.8	17.0	37.8	100.0	28,200
Muslim	17.6	16.9	15.0	50.6	100.0	7,205
Sikh	46.1	27.1	12.2	14.6	100.0	77
Other	28.2	39.5	16.9	15.4	100.0	56
Caste/tribe #						
Scheduled caste	20.1	19.0	16.9	44.1	100.0	8,729
Scheduled tribe	19.9	19.6	18.1	42.3	100.0	356
Other backward class	21.5	20.6	16.0	41.8	100.0	17,770
Other	26.4	23.5	17.4	32.7	100.0	8,233
Standard of living index						
Low	18.1	18.1	16.3	47.6	100.0	20,277
Medium	24.4	22.2	16.6	36.8	100.0	9,708
High	33.7	28.7	17.5	20.2	100.0	5,551
Total	22.2	20.9	16.6	40.3	100.0	35,537
Note: Total includes 8 births with missing information on mother's education. # Total number of births may not add upto N due to don't know and missing cases						

For the state of Uttar Pradesh, 22 percent of the births born in the three years period preceding the survey were of first order, 21 percent of second order and the remaining 57 percent were of order 3 and higher order births. By current age of eligible women, more than 90 percent of births to women in the age group 35-39 years and 40-44 years are 4 and higher order births. For women of 15-19 years, 73 percent births are of first order and 24 percent births are of second order. In the case of eligible women in urban areas, 57 percent of the births are of 3 and higher whereas this order births

constitute 59 percent for rural women indicating that higher order births are more concentrated in rural areas. Of the total births born to non-literate women, 66 percent are 3 and higher order births, followed by 46 percent for women with 0-9 years of schooling and 26 percent for women who had 10 or more years of schooling. In short, births to non-literate women are of higher order whereas much lower order births occurred to women who completed 10 or more years of schooling. Looking at the religion differential in birth order distribution, it is observed that 66 percent of births born to Muslim women are 3 and higher order births. For Hindu and women from other religions, the 3 and higher order births constitute 55 percent and 32 percent respectively. The occurrence of births of order 3 and above is more among scheduled tribe (60 percent) than among scheduled caste (61 percent), other backward classes (58 percent) and other castes (50 percent) women. Incidence of births of order 3 and above for women classified by household standard of living index are 38 percent for high, 53 percent for medium and 64 percent for low living standard households women.



3.8 Birth Order by District

Table 3.8 and Figure 3.2 shows the birth order distribution by district in Uttar Pradesh. The proportion of births of order 3 and above ranges from the lowest of 43 percent in Jhansi to the highest of 68 percent in Shajahanpur. The districts, which have lower proportion of births of order 3 and above, are Baghpat (49 percent), Chandauli (47 percent), Guantam Buddha Nagar (49 percent), Gaziabad (49 percent), Gorakpur (50 percent), Kanpur Nagar (49 percent) and Lucknow (50 percent). The districts, which can

be classified as having higher proportion of births of order 3 and above, are Chitrakoot (62 percent), Balrampur (62 percent), Bareilly (66 percent), Budaun (67 percent), Etah (63 percent), Farrukhabad (62 percent), Kaushambi (67 percent), Gonde (62 percent), Hardoi (66 percent), Maradabad (64 percent) and Siddharthnagar (65 percent). The remaining districts fall midway between these districts in terms of incidence of births of order 3 and above.

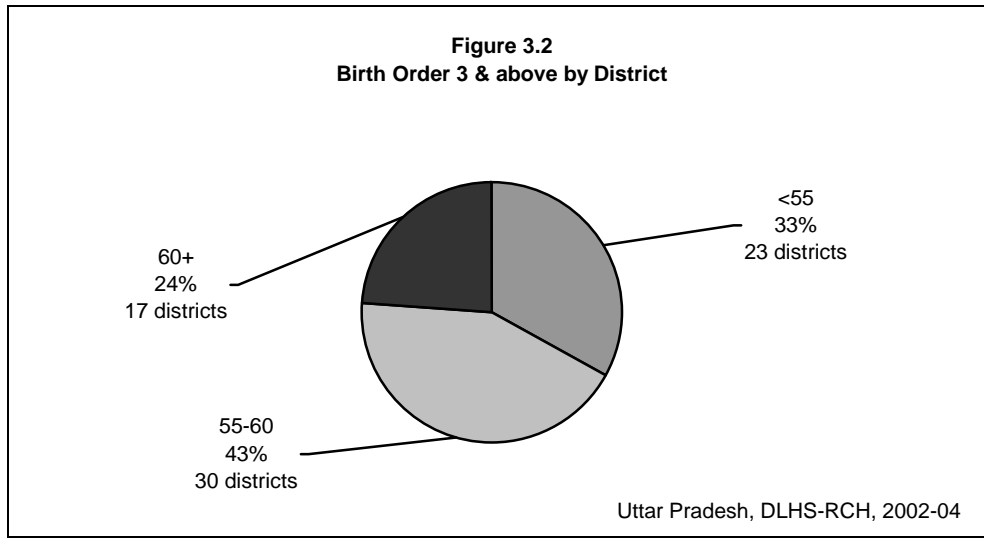


Table 3.8 BIRTH ORDER BY DISTRICT

Percent distribution of births during three years preceding the survey by birth order, according to district, Uttar Pradesh, 2002-04

District	Birth order			
	1	2	3	4+
Agra	20.6	21.3	14.4	43.7
Aligarh	21.8	23.9	14.2	40.1
Allahabad	23.1	19.9	13.2	43.8
Ambedaker Nagar	25.9	18.0	18.9	37.1
Auraiya	23.3	19.4	15.0	42.2
Azamgarh	23.7	21.0	18.5	36.8
Baghpat	29.1	22.0	13.7	35.1
Bahraich	21.0	22.0	17.7	39.4
Ballia	23.2	22.6	18.2	36.0
Balrampur	20.2	17.8	15.1	46.9
Banda	22.5	22.0	17.2	38.3
Barabanki	22.1	20.9	18.5	38.5
Bareilly	15.3	18.8	14.5	51.5
Basti	21.2	20.9	19.4	38.6
Bijnor	18.9	21.0	14.2	45.8
Budaun	20.0	13.5	12.1	54.4
Bulandshahar	25.2	23.3	15.3	36.1
Chandauli	28.0	24.7	18.8	28.5
Chitrakoot	19.7	18.8	16.1	45.4
Deoria	23.4	25.0	19.9	31.7
Etah	15.9	21.4	17.2	45.4
Etawah	25.1	21.8	16.8	36.3
Faizabad	18.3	21.4	18.5	41.7
Farrukhabad	19.6	18.4	16.4	45.7
Fatehpur	22.2	20.5	13.6	43.6
Firozabad	19.0	21.6	16.8	42.6
Gautam Buddha Nagar	25.6	25.9	16.2	32.3
Ghaziabad	25.7	25.1	14.1	35.1
Ghazipur	25.3	22.7	18.8	33.1
Gonda	18.0	20.3	14.1	47.6
Gorakhpur	27.7	22.6	18.3	31.4
Hamirpur	23.1	22.2	19.7	35.1
Hardoi	18.6	15.2	16.0	50.2
Hathras	21.7	20.5	13.9	43.9
Jalaun	25.6	22.8	16.7	34.9
Jaunpur	26.2	21.9	14.6	37.3
Jhansi	29.9	27.0	16.7	26.4
Jyotiba Phule Nagar	20.5	18.6	18.3	42.6
Kannauj	20.0	21.4	16.2	42.3
Kanpur Dehat	22.6	19.2	20.6	37.6

Contd.

Table 3.8 BIRTH ORDER BY DISTRICT (Contd.)
Percent distribution of births during three years preceding the survey by birth order, according to district, Uttar Pradesh, 2002-04

District	Birth order			
	1	2	3	4+
Kanpur Nagar	24.2	27.4	16.6	31.9
Kaushambi	16.3	17.1	14.3	52.3
Kheri	20.7	17.2	15.4	46.6
Kushinagar	24.1	21.6	19.2	35.1
Lalitpur	22.7	22.3	15.3	39.8
Lucknow	28.0	22.2	15.5	34.2
Maharajganj	22.9	23.5	19.6	34.1
Mahoba	24.8	20.9	16.8	37.4
Mainpuri	20.8	21.4	14.6	43.1
Mathura	20.3	22.3	22.4	35.0
Mau	23.1	22.8	18.5	35.7
Meerut	20.3	21.4	16.0	42.3
Mirzapur	22.6	22.2	16.3	38.9
Moradabad	18.0	18.4	16.5	47.2
Muzaffarnagar	21.5	19.7	15.9	42.9
Pilibhit	22.7	16.8	17.1	43.4
Pratapgarh	23.9	20.4	18.8	36.9
Rae Bareli	20.8	20.8	21.5	37.0
Rampur	20.8	21.1	15.9	42.3
Saharanpur	24.1	18.2	14.3	43.4
Sant Kabir Nagar	19.9	20.6	15.3	44.2
Sant Ravidas Nagar	20.8	21.7	19.3	38.2
Shahjahanpur	16.2	15.8	19.8	48.2
Shrawasti	22.6	20.2	17.5	39.7
Siddharthnagar	18.3	16.9	14.8	50.1
Sitapur	22.5	18.5	14.8	44.2
Sonbhadra	22.5	19.8	16.0	41.7
Sultanpur	24.3	22.5	16.1	37.1
Unnao	22.2	21.4	16.4	40.0
Varanasi	26.6	20.6	16.5	36.4
Uttar Pradesh	22.2	20.9	16.6	40.3

3.9 Fertility Preference

The distribution of currently married women desiring additional children and preferred sex of additional children by number of living children of the women is shown vividly in Table 3.9 and Figure 3.3. Out of the 7,934 women with no living child, 23 percent are currently pregnant and 3 percent are using spacing methods, while 61 percent want to have children within two years, 3 percent want to have children after two years, 4 percent are undecided about the timing of birth and one percent desired not to have any children. Among the currently married women, the desire for additional children dwindles down with increasing number of living children. As many as 19 percent of the women having one living child are using spacing methods, 33 percent of them want additional children within two years, 12 percent after two years, 2 percent are undecided about the timing of the next child, 4 percent of them want no more additional children and less than one percent are sterilized. Use of permanent as well as temporary means of contraception tends to be accelerated with number of living children. In the state of Uttar Pradesh, out

of the 64,207 surveyed representative women, 18 percent desired to have additional children within two years, 4 percent after two years, 20 percent want no more children, 12 percent are currently pregnant and 36 percent are using either terminal or temporary contraceptive methods. A total of 18,890 women want additional children irrespective of the number of living children. Out of 5,686 women who have no living children and desire for additional children, 21 percent want a boy as the first child, 2 percent desired for girl, for 56 percent, the sex of the child is immaterial and 22 percent leave it to God. With increasing number of living children, male is the dominating preferred sex of the next child though a sizeable proportion of women desiring additional children expressed that the sex of the child was immaterial.

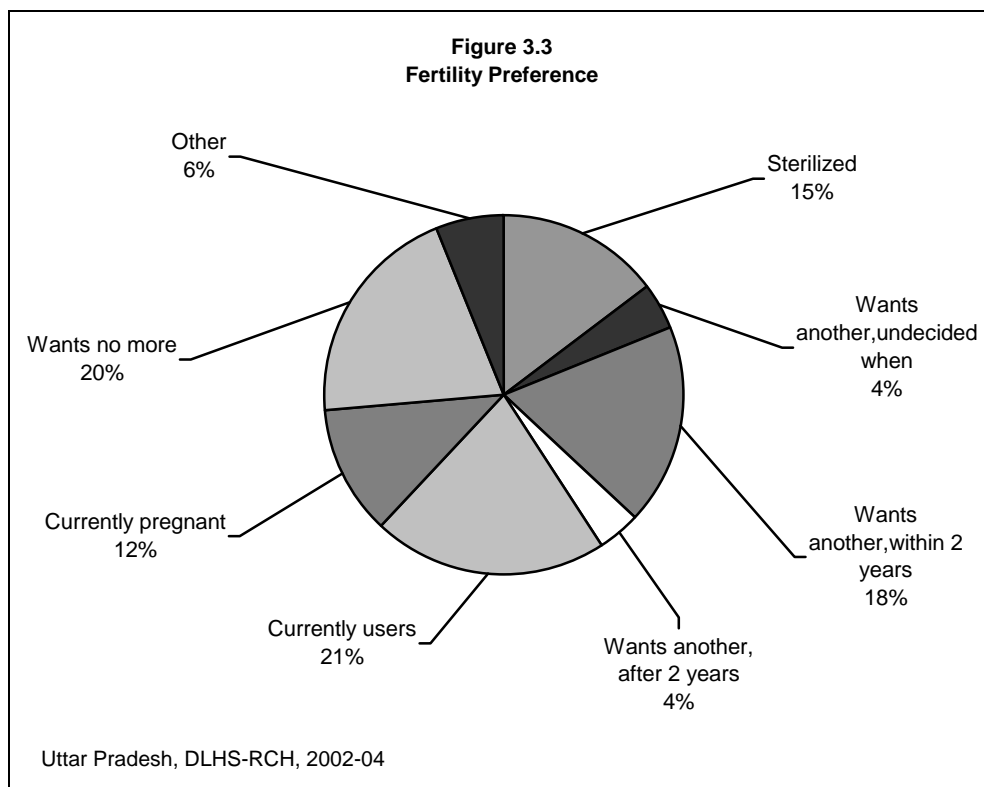


Table 3.9 FERTILITY PREFERENCE						
Percent distribution of currently married women by desire for children, according to number of living children, Uttar Pradesh, 2002-04						
Desire for children	Number of living children					Total
	0	1	2	3	4+	
Desire for additional child						
Wants another soon ¹	61.4	33.3	16.5	9.7	4.8	18.2
Wants another later ²	3.4	11.8	5.8	3.1	1.3	3.9
Want another, undecided when	4.4	9.8	6.3	3.8	1.8	4.2
Undecided	1.4	1.5	1.7	1.3	0.9	1.2
Up to God	1.0	0.9	1.7	2.1	2.4	1.9
Want no more	0.8	4.0	15.5	20.4	32.8	20.3
Sterilized	0.1	0.2	9.6	23.1	21.9	14.6
Currently users ³	3.2	18.7	28.5	25.0	22.4	21.0
Currently pregnant	22.8	18.5	12.9	9.2	7.2	11.8
Declared infecund	1.4	1.3	1.6	2.3	4.5	2.9
Missing	0.1	0.0	0.0	0.0	0.0	0.0
Total percent	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	7,934	8,251	10,488	10,477	27,057	64,207
Preferred sex of additional children						
Boy	20.6	34.4	45.0	50.1	47.9	36.0
Girl	2.1	8.6	9.5	7.2	6.3	6.3
Doesn't matter	55.7	37.1	24.7	22.0	18.4	35.8
Upto God	21.6	19.8	20.7	20.6	27.5	21.8
Missing	0.1	0.0	0.1	0.0	0.0	0.1
Total percent	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	5,686	4,727	3,346	2,101	3,030	18,890

Note: ¹ Wants next births within 2 years. ² Wants to delay next birth for 2 or more years. ³ Other than sterilization

3.10 Pregnancy Outcomes

Table 3.10 shows distribution of pregnancy outcomes including live birth, stillbirth, induced abortion and spontaneous abortion by district in Uttar Pradesh. For the state as a whole, 91 percent of pregnancy ends in live births, 3 percent in induced abortions, 5 percent in spontaneous abortion and 2 percent in stillbirth. More pregnancies in rural areas end in live births (91 percent) than in urban areas (89 percent), while the incidence of induced abortion is more in urban areas (5 percent) than in rural areas (2 percent). The proportion of pregnancies ending in live births ranges from 83 percent in Kanpur Dehat to 97 percent in Auraiya. The district on the lower side of pregnancies ending in live births includes Gorakhpur, Kanpur Nagar and Kaushambhi with 86 percent of pregnancies in these districts ending in live births. Agra, Auraiya, Bareilly, Firozabad and Sultanpur are the other districts with more than 95 percent of pregnancies ending in live births. The incidence of stillbirth is highest in Hardoi (5 percent) followed by Gonda (4 percent) and almost nil in Agra. Induced abortion is higher in the districts of Kanpur Nagar (7 percent), Allahabad (7 percent) and Varanasi (6 percent). Spontaneous abortion is least in Hardoi, about one percent and highest in Unnao (8 percent). In terms of incidence of induced abortion and spontaneous abortion, Etah is moderate.

Table 3.10 OUTCOMES OF PREGNANCY

Percent distribution of all pregnancies of currently married women aged 15-44 years by their outcomes three year preceding the survey currently married women, according to districts, Uttar Pradesh, 2002-04

Districts	Live birth	Stillbirth	Induced abortion	Spontaneous abortion	Missing	Total percent
State-Rural	91.3	2.2	2.1	4.4	0.0	100.0
State-Urban	89.0	1.5	4.5	4.9	0.0	100.0
State-Total	90.7	2.0	2.7	4.5	0.0	100.0
Agra	95.4	0.0	1.6	3.0	0.0	100.0
Aligarh	90.5	0.9	3.3	5.4	0.0	100.0
Allahabad	84.2	2.1	6.7	7.0	0.0	100.0
Amedkar Nagar	89.8	2.3	3.3	4.6	0.0	100.0
Auraiya	96.9	0.5	0.8	1.7	0.0	100.0
Azamgarh	91.5	1.7	2.0	4.9	0.0	100.0
Baghpat	93.8	0.0	1.7	4.5	0.0	100.0
Bahraich	88.7	2.8	3.9	4.6	0.0	100.0
Ballia	89.6	2.8	3.0	4.5	0.0	100.0
Balrampur	92.9	2.7	1.5	3.0	0.0	100.0
Banda	89.7	2.7	1.2	6.4	0.0	100.0
Barabanki	93.1	2.7	0.7	3.4	0.0	100.0
Bareilly	95.3	2.2	0.6	1.2	0.7	100.0
Basti	87.4	3.4	3.5	5.7	0.0	100.0
Bijnor	92.5	1.7	3.1	2.6	0.0	100.0
Budaun	89.6	3.1	2.3	5.1	0.0	100.0
Bulandshar	91.4	1.1	3.4	3.8	0.2	100.0
Chanduali	89.6	0.3	5.6	4.4	0.0	100.0
Chitrakoot	90.9	1.5	1.9	5.7	0.0	100.0
Deoria	86.3	1.6	4.2	7.8	0.0	100.0
Eathawah	91.0	1.2	2.8	5.0	0.0	100.0
Etah	88.8	2.9	4.1	4.2	0.0	100.0
Faizabad	90.1	3.1	1.3	5.6	0.0	100.0
Farukhabad	90.3	0.7	3.6	5.4	0.0	100.0
Fatehpur	92.0	2.0	3.7	2.3	0.0	100.0
Firozabad	96.2	0.4	1.5	1.9	0.0	100.0
Gautambudha Nagar	91.9	0.8	2.2	5.1	0.0	100.0
Ghazibad	92.0	1.0	2.4	4.6	0.0	100.0
Ghazipur	91.2	1.1	1.8	5.9	0.0	100.0
Gonda	88.4	4.1	2.7	4.8	0.0	100.0
Gorakhpur	85.9	3.2	5.6	5.2	0.0	100.0
Hamirpur	89.5	1.4	4.1	5.0	0.0	100.0
Hardoi	93.8	4.9	0.2	1.1	0.0	100.0
Hathras	90.3	0.5	3.0	6.3	0.0	100.0
Jalaun	88.3	2.0	4.5	5.2	0.0	100.0
Jaunpur	93.0	1.9	1.7	3.4	0.0	100.0
Jhansi	92.3	2.1	1.4	4.2	0.0	100.0
Jyotiba Phule Nagar	89.3	1.7	4.0	4.9	0.0	100.0
Kannuaz	88.4	1.8	1.6	8.2	0.0	100.0
Kanpur Dehat	83.6	3.0	6.0	7.4	0.0	100.0

Contd.

Table 3.10 OUTCOMES OF PREGNANCY (Contd.)						
Percent distribution of all pregnancies of currently married women aged 15-44 years by their outcomes three year preceding the survey currently married women, according to districts, Uttar Pradesh, 2002-04						
Districts	Live birth	Stillbirth	Induced abortion	Spontaneous abortion	Missing	Total percent
Kanpur Nagar	85.6	1.1	7.0	6.2	0.0	100.0
Kaushambhi	85.4	3.7	4.6	6.3	0.0	100.0
Kheri	91.1	2.7	2.7	3.4	0.0	100.0
Kushinagar	89.5	1.6	2.4	6.5	0.0	100.0
Lalitpur	92.0	2.3	1.6	4.1	0.0	100.0
Lucknow	87.1	2.3	4.8	5.8	0.0	100.0
Maharajganj	89.7	2.2	4.2	3.9	0.0	100.0
Mahoba	92.4	1.4	2.5	3.7	0.0	100.0
Mainpuri	91.9	0.3	2.4	5.4	0.0	100.0
Mathura	88.8	1.0	3.2	7.1	0.0	100.0
Mau	89.6	2.5	2.4	5.5	0.0	100.0
Merrut	91.0	1.9	1.9	5.2	0.0	100.0
Mirzapur	93.1	2.0	1.6	3.3	0.0	100.0
Moradabad	92.1	1.6	1.1	4.7	0.6	100.0
Muzzaffarnagar	92.7	1.2	1.3	4.8	0.0	100.0
Pilibhit	94.3	3.3	0.5	1.9	0.0	100.0
Pratapgarh	91.0	2.1	2.5	4.4	0.0	100.0
Rai Bareli	93.8	2.5	1.9	1.8	0.0	100.0
Rampur	93.4	2.6	1.3	2.7	0.0	100.0
Saharanpur	93.5	1.9	1.8	2.7	0.1	100.0
Sant Kabir Nagar	87.6	1.9	3.6	6.9	0.0	100.0
Sant Ravidas Nagar	87.3	0.9	5.8	6.0	0.0	100.0
Shahjahanapur	93.8	3.5	0.2	2.5	0.0	100.0
Shrawasti	91.3	2.7	2.2	3.8	0.0	100.0
Sidhrath Nagar	90.5	3.0	1.7	4.9	0.0	100.0
Sitapur	94.8	1.3	0.5	3.3	0.0	100.0
Sonbhadra	89.2	1.8	2.8	6.1	0.0	100.0
Sulatanpur	96.1	1.0	1.4	1.5	0.0	100.0
Unnao	83.8	2.5	5.3	8.4	0.0	100.0
Varanashi	87.1	1.9	6.2	4.8	0.0	100.0

CHAPTER IV

MATERNAL HEALTH CARE

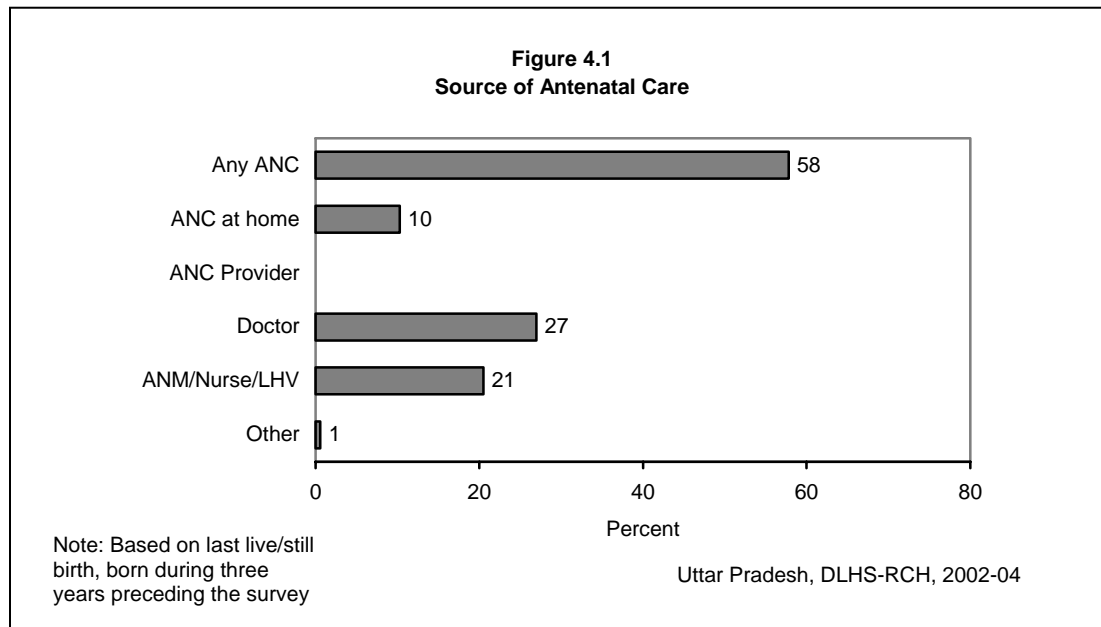
Provisions of maternal health care services to ensure safe motherhood is one of the major components of the Reproductive and Child Health (RCH) programme. The RCH programme services for antenatal care, includes at least three antenatal care visits, iron prophylaxis for pregnant and lactating women, at least one dose of tetanus toxoid vaccine, detection and treatment of anaemia in mothers, and management and referral of high-risk pregnancies, natal care, that is encouragement of safe delivery, post-natal care, and management of unwanted pregnancies. In rural areas, the government delivers reproductive health and other health services through its network of Sub-Centres (SCs), Primary Health Centres (PHCs) and other health facilities. In addition, pregnant women and children can get services from private maternity homes, hospitals, private practitioners, and in some case non-governmental organisations (NGOs) and trust hospitals. In urban areas, reproductive health services are available mainly through government or municipal hospitals, Urban Health Posts (UHPs), Urban Family Welfare Centres (UFWCs), hospitals and nursing homes operated by NGOs, and private nursing and maternity homes.

The National Population Policy (NPP), 2000 adopted by the Government of India (Ministry of Health and Family Welfare, 2000) reiterates the Government's commitments to the safe motherhood programme within the wider context of reproductive health. Among the national socio-demographic goals for 2010 specified by the policy, several goals pertain to safe motherhood that 80 percent of all deliveries should take place in institutions by 2010, hundred percent deliveries should be attended by trained personnel, and the maternal mortality ratio should be reduced to a level below 100 per 100,000 live births. Empowering women for improved health and nutrition is one of the 12 strategic themes identified in the policy to be pursued either as stand-alone programmes or as intersectoral programmes.

In DLHS-RCH Phase-I, to all the eligible women who had their last pregnancy after January 1, 1999 a separate section on the status of maternal health and utilisation of maternal health care services was canvassed. In Phase-II, the same section was canvassed to all the eligible women who had their last pregnancy after January 1, 2001. The women whose last pregnancy terminated into live/still birth were asked about the details of antenatal, natal and post-natal care they received; pregnancy, delivery and post-delivery complications they suffered from and the treatment seeking behaviour in case of complications. Women whose last pregnancy terminated into abortion, either spontaneous or induced, were asked about the utilisation of safe abortion services and the post-abortion complications they experienced. This chapter presents information on antenatal, natal and postnatal care received by women whose last pregnancy had terminated during the three years preceding the survey as live birth or as stillbirth.

4.1 Antenatal Check-Ups

Women who had given a birth during the three years preceding the survey were asked whether they had gone for antenatal check-ups outside the home, and if they had, what type of service provider had given them the check-ups. They were also asked whether any health worker had visited them at home to provide antenatal check-ups. Table 4.1 and Figure 4.1 present the percentage of women who had given birth during the three years preceding the survey, and information regarding the antenatal check-ups they had by source of antenatal check-ups according to some selected background characteristics. Results show that more than half women received antenatal check-ups during the three years preceding the survey, slightly more than RCH Round I (percent). One fourth of women received antenatal check-ups from doctors, and 21 percent from ANM/Nurse/LHV. One out of every ten women received antenatal check-ups at the doorstep from the ANMs or health worker.



Antenatal check-ups are more common among younger women age below 35 years than among older women, and it is more common among those women who had given their first birth. The percentage of women who received antenatal check-up was comparatively higher in urban areas (73 percent) than in rural areas (53 percent), and the percentage of women who received antenatal check-ups from doctors is much higher in urban areas (50 percent) than in rural areas (19 percent), and on the other hand an 21 percent of rural women received antenatal check-ups from auxiliary nurse midwife, nurse or LHVs, the same for women in urban areas is 20 percent. Forty-eight percent of non-literate women received antenatal check-ups, more than four-fifth of women (88 percent) who had completed high school received antenatal check-ups for their last pregnancy that terminated into births (either live or still birth) during the three years preceding the survey.

Table 4.1 ANTENATAL CHECK-UP

Percentage of women* who received any antenatal check-up (ANC) during pregnancy by source of antenatal provider, according to selected background characteristics, Uttar Pradesh, 2002-04

Background characteristic	Any ¹ antenatal check-up	Antenatal check-up only at home by ANM	Health personnel providing ANC ²				Number of women
			Doctor	ANM/ Nurse/ LHV	Other health professional	Other ³	
Age group							
Less than 20 years	60.9	11.2	22.9	27.0	0.1	0.5	2,826
20-34 years	59.1	10.1	28.6	20.4	0.2	0.4	24,928
35 years & above	46.1	11.1	18.6	16.1	0.0	0.4	3,382
Children ever born							
1	72.0	9.0	39.2	24.1	0.1	0.3	6,305
2	66.2	10.0	33.7	22.6	0.4	0.2	6,384
3	58.9	10.8	26.4	21.5	0.1	0.6	5,262
4+	46.2	11.0	18.1	17.2	0.1	0.4	13,005
Residence							
Rural	52.7	12.5	19.4	20.8	0.1	0.4	23,283
Urban	73.0	3.9	49.5	19.7	0.3	0.3	7,854
Education							
Non-literate	48.0	11.3	17.2	19.3	0.2	0.4	20,846
0-9 @ years	71.6	10.6	35.5	25.6	0.1	0.4	6,424
10 years & above	88.4	4.5	65.9	18.4	0.3	0.3	3,858
Religion							
Hindu	59.1	11.2	26.1	21.8	0.2	0.3	24,863
Muslim	52.1	7.1	29.8	15.2	0.1	0.5	6,149
Sikh	91.9	4.5	65.9	22.2	0.0	4.9	70
Other	81.5	0.7	62.9	17.9	0.0	0.0	55
Caste/tribe#							
Scheduled caste	54.4	11.8	18.8	23.4	0.1	0.5	7,691
Scheduled tribe	45.8	10.6	17.2	17.5	0.0	1.7	315
Other backward class	54.8	10.4	24.7	19.9	0.2	0.3	15,500
Other	69.3	8.5	41.6	19.2	0.2	0.3	7,249
Standard of living index							
Low	47.9	12.5	14.4	20.9	0.1	0.4	17,893
Medium	63.3	9.3	32.5	21.7	0.2	0.4	8,266
High	84.7	4.4	63.4	17.2	0.5	0.2	4,978
Availability of health facility⁴ in the village							
No	50.4	12.4	18.8	19.2	0.1	0.4	14,582
Yes	56.6	12.6	20.4	23.4	0.2	0.4	8,701
Total	57.8	10.3	27.0	20.5	0.2	0.4	31,137

Note: * Women who had their last live/still birth since 1-1-1999/1-1-2001. Total includes 181 women with zero parity and 7 with missing information on education who were not shown separately. ¹ Antenatal check-ups either at home or outside from home at health facility. ² Antenatal check-ups outside home and percentage add more than 100.0 due to multiple responses. ³ Other also includes trained and untrained *dai*. # Total figure may not add to N due to do not know and missing cases. @ Literate women with no years of schooling are also included. ⁴ Includes sub-centre, primary health centre, community health centre or referral hospital, government hospital, and government dispensary within the village.

The proportion of women who received antenatal check-ups from a doctor, increased steadily with the level of education and the standard of living index. Seventeen percent non-literate women as compared to 66 percent having education of more than 10 years received ANC from doctors. Similarly, 14 percent women belonging to households with a low standard of living against 63 percent of that from a high standard of living fall in this category. The proportion of Hindu women who received antenatal check-ups from doctors (26 percent) was less than that of Muslim women (30 percent), and 'other' religion women (63 percent). Forty-two percent of women from the 'other castes' category received antenatal check-ups from doctors, while it was 19 percent for scheduled caste women, and 17 percent for scheduled tribe women, and for women from other backward classes, it was 25 percent. Women from scheduled tribes were more likely to receive antenatal check-ups from auxiliary nurse midwives, or LHVs. Eighteen percent of scheduled tribe women received antenatal check-ups from ANMs, while it was 23 percent among scheduled castes, 20 percent among other backward class women, and 19 percent of women from the 'other' castes category.

4.2 Antenatal Check-Ups at Health Facility

DLHS-RCH asked women who had a birth during the three years preceding the survey whether women had received antenatal check-ups, and if they had, from where they had availed such services.

Table 4.2 PLACE OF ANTENATAL CHECK-UP									
Percentage of women* who received any antenatal check-ups (ANC) during pregnancy by source and place of antenatal check-ups, according to selected background characteristics, Uttar Pradesh, 2002-04									
Background characteristic	Antenatal check-up only at home	Place of antenatal check-ups ¹							Number of women
		Government ² health facility	Private ³ health facility	PHC	SC	ISM ⁴ facility			
						Govt.	Private	Other	
Age group									
Less than 20 years	11.2	31.5	16.1	18.6	18.1	0.0	2.2	2.5	2,826
20-34 years	10.1	27.2	19.3	13.0	10.5	0.3	3.5	2.5	24,928
35 years & above	11.1	21.5	11.7	14.3	13.6	0.1	3.0	2.8	3,382
Children ever born									
1	9.0	31.9	28.5	12.5	9.2	0.2	4.1	1.9	6,305
2	10.0	30.5	22.5	12.9	10.7	0.5	4.0	2.5	6,384
3	10.8	29.0	17.1	13.9	11.8	0.1	2.8	2.1	5,262
4+	11.0	22.1	11.3	15.2	14.1	0.2	2.5	3.3	13,005
Residence									
Rural	12.5	25.8	12.5	18.5	16.9	0.2	2.3	3.1	23,283
Urban	3.9	30.5	34.9	5.4	2.2	0.3	5.2	1.5	7,854
Education									
Non-literate	11.3	23.5	11.1	15.8	16.8	0.1	2.4	3.3	20,846
0-9 @ years	10.6	35.5	23.2	14.5	8.7	0.3	3.1	1.9	6,424
10 years & above	4.5	31.5	48.0	7.5	2.3	0.5	5.8	1.5	3,858
Religion									
Hindu	11.2	28.1	17.5	15.0	12.7	0.2	3.2	2.6	24,863
Muslim	7.1	22.5	20.1	8.6	6.8	0.3	3.9	2.0	6,149
Sikh	4.5	11.7	70.0	0.0	0.0	0.0	2.1	4.5	70
Other	0.7	30.8	47.3	3.2	0.0	0.0	2.5	0.9	55
Caste/tribe#									
Scheduled caste	11.8	27.8	12.1	16.7	18.7	0.0	2.7	3.4	7,691
Scheduled tribe	10.6	22.7	8.9	19.5	15.9	0.0	3.3	4.9	315
Other backward class	10.4	25.7	16.7	15.2	11.6	0.4	3.1	2.6	15,500
Other	8.5	29.4	28.6	9.1	6.0	0.2	4.2	1.7	7,249
Standard of living index									
Low	12.5	24.4	9.2	20.0	20.5	0.1	1.5	3.7	17,893
Medium	9.3	31.1	20.7	12.8	7.6	0.2	3.4	1.7	8,266
High	4.4	29.3	46.2	4.6	1.6	0.6	6.2	1.6	4,978
Availability of health facility⁵ in the village									
No	12.4	23.8	12.4	17.5	15.5	0.2	2.2	3.4	14,582
Yes	12.6	29.2	12.8	19.9	19.0	0.3	2.5	2.7	8,701
Total	10.3	27.0	18.2	13.7	11.5	0.3	3.3	2.5	31,137

Note: * Women who had their last live/still birth since 1-1-1999/1-1-2001.
Note: Total includes 181 women with zero parity and 7 women with missing information on education who were not shown separately. # Total figure may not add to N due to do not know and missing cases.
@ Literate women with no years of schooling are also included.
¹Antenatal check-ups outside home and percentage add more than 100.0 due to multiple responses. ² Includes sub-centre, primary health centre, community health centre or rural hospital, urban health centre/ urban health post/ urban family welfare centre, government hospital or dispensary. ³ Includes Private hospital/clinic or non-governmental hospital/ trust hospital or clinic. ⁴ Indian system of medicine. ⁵ Includes sub-centre, primary health centre, community health centre or referral hospital, government hospital, and government dispensary within the village.

Table 4.2 shows the percentage of women who had received antenatal check-ups during pregnancy by place. During pregnancy, women received antenatal check-ups from

multiple sources such as, health workers providing ANC at home, Government health facility, private health facility, and at Indian System of medicine etc. Women who received antenatal check-ups both at home and outside the home are categorised as having received care outside the home. Around 27 percent of women received antenatal check-ups at Government health facility, including 14 percent through primary health centre and 12 percent through sub-centre, and 18 percent at a private health facility. Other than this, less than one percent of women reported that they had received antenatal check-ups at the Government Indian system of medicine, and 3 percent at private Indian system of medicine. As mentioned above women availed antenatal check-ups from multiple sources. Women who were visited by an ANM might have also visited government and/or private health facilities including Indian system of medicine.

Younger women were more likely to receive antenatal-check-ups at government health facilities (32 percent) than older women 27 percent for age 20-34 and 22 percent for age 35 and above. Twenty six percent women from rural areas availed government health facilities for antenatal check-ups that were much lesser than women in urban areas (31 percent), and a high proportion of women (35 percent) from urban areas availed private health facilities for antenatal check-ups than women from rural areas (13 percent). It may be mentioned that less than one fifth of the women from rural areas (17 percent) and younger women aged below 20 years (18 percent) received antenatal check-ups at sub centre. This indicates that the services are reaching the target population, particularly through the public sector. A comparatively higher proportion of women who received antenatal check-ups at Government health facilities are non-literate, Hindu, scheduled caste or tribe, living in households with a low standard of living and women from those villages where health facilities are not available.

4.3 Antenatal Check-Ups by District

Table 4.3 indicates the antenatal coverage in Uttar Pradesh that ranges from the highest of 89 percent in Ballia to the lowest of 22 percent in Balrampur. Almost ninety percent of all districts where less than 80 percent of women got some kind of antenatal check-ups for their last births during the three years preceding the survey. Antenatal check-ups received from doctor was low in Phlibhit (11 percent), and Hardoi (12 percent), and in almost all (90 percent) of the districts less than two-fifth of the women received antenatal check-ups from doctor and it is highest in Ghaziabad (50 percent) followed by Kanpur Nagar (45 percent). In 3 out of 70 districts, Ballia (48 percent), Ghazipur (53 percent), and Pratapgarh (45 percent) more than two fifth of women received antenatal check-ups by ANM/Nurse/LHV.

The extent of utilisation of government health facilities for antenatal check-ups was higher than that of private health facilities. The range of antenatal check-ups coverage through government facilities was highest in Ghazipur (58 percent) to the lowest of 11 percent in Sant Ravidas Nagar, and only in one district Kanpur Nagar more than one-third of the women visited private health facility. In Uttar Pradesh, 8 percent pregnant women in Ghaziabad district availed the Indian system of medicine (either government or private) for an antenatal check-up, which is the highest among all other

Table 4.3 ANTENATAL CHECK-UPS BY DISTRICT

Percentage of women* who received any antenatal care (ANC), by source and place of antenatal check-ups by district, Uttar Pradesh, 2002-04

District	Any ¹ antenatal check-up	Antenatal check-up only at home by ANM	Health personnel providing ANC		Place of antenatal check-ups		
			Doctor	ANM/ Nurse	Government ² health facility	Private ³ health facility	ISM ⁴ facility
Agra	60.0	16.7	28.6	14.5	22.5	18.3	2.6
Aligarh	52.2	11.4	28.9	12.5	18.9	20.0	0.7
Allahabad	32.0	2.0	19.4	10.8	12.2	17.8	0.0
Ambedaker Nagar	39.2	2.6	26.3	10.1	14.5	22.6	0.0
Auraiya	65.8	29.8	24.7	12.6	24.5	8.3	1.2
Azamgarh	82.0	6.5	36.8	39.0	47.0	25.7	1.8
Baghpat	71.2	14.7	38.9	18.1	29.2	27.4	0.8
Bahraich	29.4	2.2	18.9	9.1	15.2	12.2	0.3
Ballia	88.8	14.1	25.9	47.7	50.5	22.6	1.8
Balrampur	22.2	1.5	15.0	5.7	10.8	9.5	0.5
Banda	30.6	7.4	19.3	4.2	12.5	10.7	0.0
Barabanki	64.6	11.5	24.1	28.3	35.6	14.1	1.5
Bareilly	43.4	18.7	17.3	7.2	15.1	7.7	1.5
Basti	54.1	7.9	36.3	10.5	21.7	24.5	0.0
Bijnor	60.0	7.6	39.3	11.9	27.3	19.3	4.6
Budaun	36.4	11.6	15.2	10.1	15.8	8.0	0.9
Bulandshahar	55.0	8.3	38.0	8.3	23.5	21.9	2.7
Chandauli	45.0	0.1	30.6	14.7	21.2	24.9	0.0
Chitrakoot	22.8	2.4	15.4	4.4	13.4	7.0	0.0
Deoria	42.8	1.8	37.4	4.2	16.6	23.1	1.8
Etah	40.3	8.2	22.6	10.0	19.4	10.4	1.7
Etawah	68.4	21.5	25.8	20.8	21.6	16.4	2.2
Faizabad	44.5	1.9	30.0	13.2	20.5	23.3	0.0
Farrukhabad	61.4	28.6	23.3	10.0	19.9	13.2	0.3
Fatehpur	72.1	19.9	18.6	33.5	38.8	9.9	0.2
Firozabad	38.9	11.3	21.4	5.5	11.5	9.3	6.7
Gautam Buddha Nagar	68.8	6.7	38.9	20.6	37.5	23.4	1.0
Ghaziabad	67.9	4.0	49.6	14.2	33.1	28.5	8.3
Ghazipur	87.3	12.1	22.3	52.7	57.8	16.4	0.8
Gonda	36.0	1.2	24.7	10.7	15.4	19.6	0.0
Gorakhpur	84.7	9.9	40.9	33.9	39.1	33.0	3.3
Hamirpur	31.8	4.3	23.7	4.4	19.4	7.8	0.0
Hardoi	48.1	18.8	11.5	17.3	22.5	3.8	0.6
Hathras	73.6	18.4	33.1	22.1	32.2	24.4	0.3
Jalaun	67.7	26.7	17.1	24.9	26.4	14.2	0.3
Jaunpur	78.6	7.3	32.9	39.5	46.7	22.4	1.7
Jhansi	79.2	22.1	23.9	33.6	37.2	17.2	0.2
Jyotiba Phule Nagar	69.4	19.4	22.8	27.1	27.0	18.5	0.5
Kannauj	43.2	15.2	17.7	10.6	18.7	6.7	2.7
Kanpur Dehat	75.0	29.2	15.7	29.8	28.5	14.7	0.0

Note: * Women who had last live/still birth during three years preceding the survey. ¹ Antenatal check-ups either at home or health facility. ² Includes sub-centre, primary health centre, community health centre or rural hospital, urban health centre/ urban health post/ urban family welfare centre, government hospital or dispensary. ³ Includes Private hospital/clinic or non-governmental hospital/ trust hospital or clinic. ⁴ Either government or private Indian system of medicine.

Contd.

districts. In 4 out of 70 districts, more than 5 percent of women availed such services through the Indian system of medicine.

Table 4.3 ANTENATAL CHECK-UPS BY DISTRICT (Contd.)							
Percentage of women* who received any antenatal care (ANC), by source and place of antenatal check-ups by district, Uttar Pradesh, 2002-04							
District	Any ¹ antenatal check-up	Antenatal check-up only at home by ANM	Health personnel providing ANC		Place of antenatal check-ups		
			Doctor	ANM/ Nurse	Government ² health facility	Private ³ health facility	ISM ⁴ facility
Kanpur Nagar	87.3	7.1	45.1	34.7	34.4	35.5	4.0
Kaushambi	23.2	1.6	12.7	8.8	11.3	10.7	0.0
Kheri	59.2	16.6	21.1	22.2	28.4	13.1	0.9
Kushinagar	48.1	6.2	34.6	7.2	20.1	21.3	0.7
Lalitpur	82.5	28.8	25.1	28.9	37.6	11.5	1.1
Lucknow	84.7	4.0	43.6	37.2	46.4	31.6	1.7
Maharajganj	82.8	21.4	22.0	39.8	41.2	18.4	1.1
Mahoba	34.4	2.8	21.8	9.7	20.8	10.1	0.0
Mainpuri	66.0	20.1	18.5	27.5	29.2	16.6	0.0
Mathura	58.4	11.3	32.5	14.6	25.5	13.8	7.1
Mau	51.4	2.8	34.3	14.7	17.2	32.0	0.0
Meerut	77.9	11.2	37.1	29.8	29.5	34.6	1.1
Mirzapur	56.9	5.1	24.9	26.8	31.4	17.4	1.1
Moradabad	59.3	16.0	22.9	20.2	18.1	20.0	1.4
Muzaffarnagar	69.9	17.0	40.4	13.1	23.2	30.2	0.2
Pilibhit	38.0	9.4	11.3	17.7	20.3	7.6	0.8
Pratapgarh	77.2	9.9	21.4	45.3	48.3	13.4	2.5
Rae Bareli	68.3	15.5	28.3	24.4	40.0	11.7	0.8
Rampur	44.0	9.5	24.9	9.6	16.0	14.2	4.4
Saharanpur	48.7	6.5	35.0	5.9	14.6	21.0	8.1
Sant Kabir Nagar	46.6	3.3	29.2	13.6	21.5	21.8	0.0
Sant Ravidas Nagar	32.0	2.2	24.0	5.9	10.5	19.6	0.0
Shahjahanpur	52.0	15.1	21.2	13.4	27.0	4.6	4.4
Shrawasti	25.7	2.6	13.3	9.9	12.1	10.7	0.0
Siddharthnagar	40.2	3.2	24.9	12.5	16.5	20.7	0.0
Sitapur	56.7	17.2	21.5	19.1	29.4	9.7	0.9
Sonbhadra	60.3	11.5	16.5	31.8	28.7	14.4	1.1
Sultanpur	78.1	10.6	27.9	39.7	46.4	17.1	2.7
Unnao	32.0	2.9	15.6	12.8	18.7	10.1	0.0
Varanasi	47.0	2.2	36.7	8.0	11.9	32.5	0.0
Uttar Pradesh	57.8	10.3	27.0	20.5	27.0	18.2	1.7

Note: * Women who had last live/still birth during three years preceding the survey. ¹ Antenatal check-ups either at home or health facility. ² Includes sub-centre, primary health centre, community health centre or rural hospital, urban health centre/ urban health post/ urban family welfare centre, government hospital or dispensary. ³ Includes Private hospital/clinic or non-governmental hospital/ trust hospital or clinic. ⁴ Either government or private Indian system of medicine.

4.4 Reasons for Not Seeking Antenatal Check-Ups

Table 4.4 shows the percentage of women who had given live/still births during the three years preceding the survey and who did not receive any antenatal check-ups by the main reason for not seeking check-ups according to residence and availability of health facility in the village. Sixty-one percent of women stated that it was not necessary to have an antenatal check-up. It was surprising to see that a higher proportion of urban women (66 percent) than rural women (60 percent) felt that it was not necessary to have an antenatal check-up. Sixty-two percent of the women stated that an antenatal check-up was not necessary in villages with a health facility whereas 59 percent of women from those

villages where a health facility is not available fall in this category. About 8 percent of women felt that it was not customary to go for an antenatal check-up. Other factors contributing to non-use of antenatal care were that it costs too much (9 percent), it was situated too far, or there was no transportation (4 percent), no time to go and family did not allow to avail antenatal care (6 percent each), and 10 percent reported lack of knowledge of these services. Less than one percent of the women reported 'poor quality of services' as the main reason. There is no differential found on "availability of health facility in the village" among those women who reported that they had no time to go for an antenatal check-up.

Table 4.4 REASONS FOR NOT SEEKING ANTENATAL CHECK-UPS					
Percentage of women* who did not receive any antenatal check-up by the main reason for not receiving an antenatal check-up, according to residence and availability of health facility in the village, Uttar Pradesh, 2002-04					
Reason	Total	Residence		Availability of health facility ¹ in the village	
		Rural	Urban	No	Yes
Not Necessary	60.5	59.6	65.5	58.5	61.6
Not customary	7.5	7.4	8.4	7.5	7.1
Cost too much	8.6	8.6	8.8	8.4	8.9
Health facility too far/ No transport	4.0	4.6	0.8	5.4	3.2
Poor quality service	0.6	0.6	0.5	0.7	0.4
No time to go	5.8	6.4	2.9	6.4	6.4
Family did not allow	6.0	6.5	3.5	6.6	6.4
Lack of knowledge	10.2	10.7	7.7	11.2	9.7
Other	3.7	3.7	4.0	3.5	3.9
Number of women	13,115	10,997	2,118	7,231	3,766

Note: * Women who had their last live/still birth since 1-1-1999/1-1-2001.
¹ Includes sub-centre, primary health centre, community health centre or referral hospital, government hospital, and government dispensary within the village.
Note: percentage may add more than 100.0 due to multiple response

4.5 Components of Antenatal Check-ups

Women who received any kind of antenatal check-ups were asked whether they received each of the several components of antenatal check-ups at least once during their pregnancy. Table 4.5 presents the percentage of women who received specific components of check-ups by residence. Except for X-ray (which are not recommended as a standard component of antenatal care), all of the measurements and tests are part of essential obstetric care or are required for monitoring high-risk pregnancies.

Twenty percent of women were weighted, 23 percent had their blood pressure checked, and 58 percent had an abdominal examination as the part of the antenatal check-ups. Other common components of antenatal check-ups were blood test (39 percent), urine test (31 percent), the measurement of height (6 percent), internal examination (17 percent), and breast examination (5 percent). About 14 percent of women had a sonogram or ultrasound, 2 percent had an X-ray and only one percent of women reported that they had amniocentesis test. All of these measurements or procedures were performed more often during antenatal check-ups in urban areas than in rural areas.

The type of advice received by women who had antenatal check-ups for last live/still births during three years preceding the survey is also presented in Table 4.5. Advice on diet was given to 62 percent of urban women as compared to 39 percent of rural women and 46 percent in general. One fifth of the women received advice on danger signs of pregnancy. Women were less likely to receive advice on delivery care (16 percent), on breastfeeding (8 percent), and on newborn care (10 percent). Advice on family planning was given to 6 percent of rural women and 8 percent of urban women.

Table 4.5 COMPONENTS OF ANTENATAL CHECK-UPS			
Percentage of women* who received an antenatal check-up by specific components of antenatal check-up, according to residence, Uttar Pradesh, 2002-04			
Components of antenatal check-ups	Total	Rural	Urban
Antenatal measurements/tests			
Weight measured	19.5	12.0	35.4
Height measured	6.1	3.5	11.5
Blood pressure checked	22.7	14.7	39.7
Blood tested	28.8	18.6	50.8
Urine tested	31.2	20.9	53.1
Abdomen examined	57.9	51.9	70.6
Internal examined	16.6	11.9	26.8
Breast examined	5.0	3.8	7.6
X-ray	2.4	1.5	4.1
Sonography /ultrasound	14.4	8.5	26.9
Amniocentesis	0.7	0.4	1.4
Antenatal advice			
Diet	46.2	38.8	62.2
Danger signs of pregnancy	19.2	14.7	29.0
Delivery care	16.4	12.2	25.2
Breast feeding	8.4	6.0	13.6
New born care	10.1	7.6	15.4
Family planning	5.6	4.6	7.8
Number of women who received any antenatal check-up	18,011	12,275	5,736
Note: * Women who had their last live/still birth since 1-1-1999/1-1-2001			

4.6 Antenatal Care Services

In India, the Reproductive and Child Health Programme includes all pregnant women should be registered in the first 12-16 weeks (Ministry of Health and Family Welfare, 1997). Accordingly the first antenatal check-up should take place latest during the first trimester of the pregnancy. It also includes the provision of at least three antenatal care visits, at least one tetanus toxoid injection, and supplementary iron in the form of IFA tablets daily for 100 days. To assess whether the women had received all the care during pregnancy, information was collected regarding number of antenatal visits, timing of the first visit, received tetanus toxoid injection and supplement iron folic acid tablets. The results are presented in Table 4.6. In Uttar Pradesh, one fourth of the women received at least three antenatal check-ups and 13 percent had four or more check-ups. At least three antenatal check-ups were received by 40 percent of women in urban areas compared with 19 percent of women in rural areas. Number of visits for antenatal care varies by education, children ever born, religion, caste and standard of living index. Sixteen percent of non-literate, 31 percent literate women (educated below high school) and 58 percent of women who had 10 or more years of schooling visited for minimum three antenatal care. Parity of women is negatively associated with antenatal check-ups. About one third of women with parity one received three antenatal check-ups compared to less than one fifth of the women with parity 4 and above.

Table 4.6 ANTENATAL CARE

Percent distribution of women who had live/still births during three years preceding the survey by number of antenatal check-ups, the stage of pregnancy at the time of first check-up, the number of tetanus toxoid injections received and were given iron folic acid (IFA) tablets/syrup during pregnancy, and percentage who received full antenatal check-ups by some selected background characteristics, Uttar Pradesh, 2002-04

Antenatal care indicators	Total	Residence		Education			Children ever born			
		Rural	Urban	Non-literate	0-9@ years	10 years & above	1	2	3	4+
Number of ANC visits										
No visit	42.1	47.2	27.0	52.0	28.4	11.6	27.9	33.8	41.1	53.7
1	9.7	10.3	7.8	9.7	11.3	7.2	11.1	10.1	9.5	8.8
2	23.5	23.0	24.9	21.9	28.8	23.0	25.0	25.3	25.6	21.0
3	12.0	11.2	14.3	10.3	15.6	15.1	16.1	13.3	11.6	9.5
4+	12.7	8.2	26.0	6.0	15.8	43.0	19.9	17.5	12.2	6.9
Missing	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0
Stage of pregnancy at the time of the first antenatal check-up										
No antenatal check-up	42.1	47.2	27.0	52.0	28.4	11.6	27.9	33.8	41.1	53.7
First trimester	22.0	17.3	35.8	14.3	28.8	51.9	32.4	27.7	21.4	14.1
Second trimester	27.3	27.5	26.9	25.6	33.0	27.5	30.7	30.2	28.6	23.7
Third trimester	8.6	8.0	10.3	8.1	9.8	9.0	9.0	8.3	8.8	8.4
Missing	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0
Women who received TT										
No TT	30.2	33.6	20.3	38.7	17.9	4.9	17.9	21.4	28.2	41.5
1	8.0	8.7	5.9	9.3	6.5	3.8	8.6	8.3	7.0	7.9
2+	61.5	57.4	73.5	51.8	75.2	90.9	73.2	70.0	64.7	50.3
Do not remember/missing	0.3	0.2	0.3	0.2	0.4	0.4	0.3	0.3	0.1	0.3
Women who received IFA tablets/syrup										
No IFA/syrup	53.2	54.9	48.2	60.9	44.0	27.1	41.2	46.9	52.1	62.8
Received but not consumed	6.2	6.8	4.3	6.2	6.9	5.3	6.5	6.1	7.6	5.5
Consumed one IFA per day	26.2	25.6	28.1	22.2	31.1	39.7	32.1	30.0	26.2	21.4
Received 100+ IFA tablets/syrup	8.7	6.8	14.4	5.5	10.1	23.7	13.0	10.6	8.8	5.7
Percentage of women who received full ¹ antenatal check-ups	4.4	2.8	9.0	1.9	5.3	16.2	7.8	6.0	4.1	2.0
Number of women	31,137	23,283	7,854	20,846	6,424	3,858	6,305	6,384	5,262	13,005

Note: Total includes 181 women with zero parity and 7 women with missing information on education who were not shown separately.

@ Literate women with no years of schooling are also included.

¹ At least three visits for antenatal check-ups, at least one TT injection received and were given adequate amount of IFA tablets/syrup.

Contd.

Table 4.6 ANTENATAL CARE (contd)

Percent distribution of women who had live/still births during three years preceding the survey by number of antenatal check-ups, the stage of pregnancy at the time of first check-up, the number of tetanus toxoid injections received and iron and were given iron folic acid (IFA) tablets/syrup during pregnancy, and percentage who received full antenatal check-ups by some selected background characteristics, Uttar Pradesh, 2002-04

Antenatal care indicators	Religion				Caste#				Standard of living index			Availability of health facility ² in the village	
	Hindu	Muslim	Sikh	Other	Schedule caste	Schedule Tribe	Other backward class	Other	Low	Medium	High	No	Yes
Number of ANC visits													
No visit	40.9	47.8	8.1	18.5	45.6	54.2	45.1	30.7	52.1	36.6	15.2	49.6	43.3
1	10.0	8.5	5.8	1.0	10.4	10.4	9.8	8.8	10.4	9.8	7.2	10.3	10.4
2	24.4	19.9	11.3	21.5	24.1	18.9	23.3	23.8	21.8	26.7	24.1	22.2	24.5
3	12.1	11.6	22.1	17.9	11.8	9.4	11.4	13.5	10.0	14.1	15.6	10.5	12.3
4+	12.6	12.1	52.7	41.1	8.0	7.1	10.3	23.1	5.6	12.7	37.9	7.4	9.4
Missing	0.0	0.1	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.1	0.0	0.0	0.1
Stage of pregnancy at the time of the first antenatal check-up													
No antenatal check-up	40.9	47.8	8.1	18.5	45.6	54.2	45.1	30.7	52.1	36.6	15.2	49.6	43.3
First trimester	22.1	20.9	55.4	42.6	17.3	11.6	19.4	33.0	13.9	23.9	47.9	16.1	19.3
Second trimester	28.6	22.1	25.1	33.7	28.8	25.9	26.8	27.4	26.1	29.9	27.7	26.4	29.4
Third trimester	8.4	9.1	11.5	5.2	8.3	8.2	8.6	8.9	7.9	9.5	9.2	7.9	8.0
Missing	0.0	0.1	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.1	0.0	0.0	0.1
Women who received TT													
No TT	28.6	37.2	6.2	13.3	34.4	44.0	32.0	21.2	38.2	26.0	8.8	35.3	30.8
1	8.3	7.0	1.8	4.0	9.5	10.4	8.1	6.0	9.6	6.6	4.4	9.1	8.0
2+	62.8	55.5	92.0	82.8	56.0	44.5	59.6	72.6	51.9	67.2	86.3	55.4	60.8
Do not remember/missing	0.3	0.3	0.0	0.0	0.1	1.0	0.3	0.2	0.2	0.2	0.5	0.2	0.3
Women who received IFA tablets/syrup													
No IFA/syrup	51.0	62.7	30.7	32.2	54.5	63.6	56.3	43.8	58.6	52.2	35.6	57.2	51.1
Received but not consumed	6.5	5.0	2.1	3.8	6.5	3.6	6.3	5.8	6.5	6.4	4.8	6.3	7.6
Consumed one IFA per day	27.6	20.1	47.8	43.6	26.0	25.1	24.5	30.9	23.9	26.4	34.3	24.5	27.3
Received 100+ IFA tablets/syrup	9.3	6.0	23.1	19.5	6.9	4.6	7.3	14.0	5.4	8.8	20.6	6.8	6.8
Percentage of women who received full ¹ antenatal check-ups	4.6	3.0	23.1	16.7	3.2	1.9	3.4	7.9	1.8	4.0	14.2	2.7	3.1
Number of women	24,863	6,149	70	55	7,691	315	15,500	7,249	17,893	8,266	4,978	14,582	8,701

Note: # Total figure may not add to N due to don't know and missing cases.

¹ At least three visits for antenatal check-ups, at least one TT injection received and was given adequate amount of IFA tablets/syrup.

² Includes sub-center, primary health center, community health center or referral hospital, government hospital, and government dispensary within the village

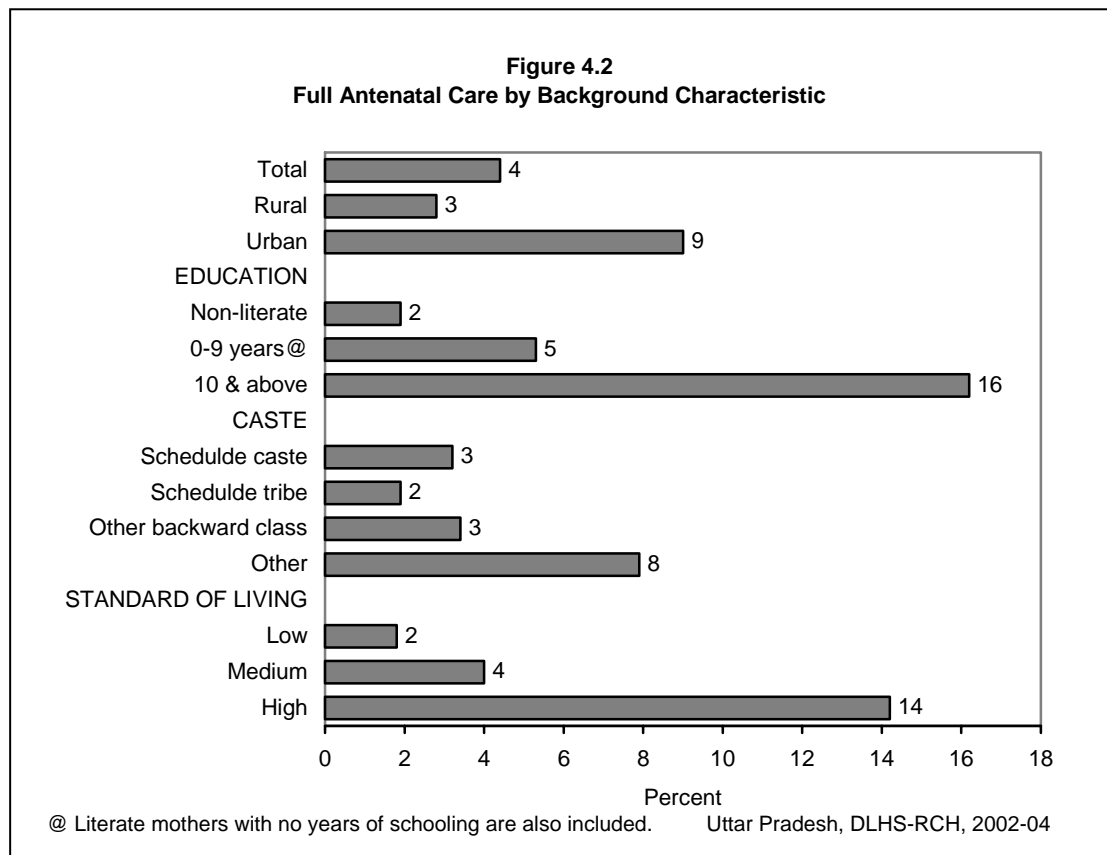
Hindu women (25 percent) were more likely to have at least three visits for antenatal check-ups than Muslim women (24 percent) and women from 'other' religions (59 percent). Coverage is substantially lower for women from scheduled tribes (17 percent) than to women of other than scheduled tribe (20-37 percent). Having three or more antenatal visits also increased with the standard of living-16 percent for women with a low standard of living, 27 percent for women with a medium standard of living and 54 percent for women with a high standard of living. Availability of health facility in the village does not make any difference to the minimum three visits for antenatal check-ups.

Data on timing of first antenatal check-ups shows that about one fifth of the women received their first antenatal check-up in the first trimester of pregnancy, and another 27 percent received their first check-up in the second trimester, and 9 percent of women received their first check-up in the third trimester. A relatively higher proportion of women in the urban areas (36 percent) as compared to those in rural areas (17 percent) had a check-up in the first trimester of pregnancy. The first antenatal check-up in the first trimester has steadily increased with education. Fourteen percent of non-literate women had undergone their first antenatal check-up in the first trimester, and 52 percent of women who had completed at least 10 years of schooling received their first antenatal check-up in the first trimester. One third of the women (32 percent) with parity-1 were visited in first trimester and only fourteen percent of women with parity- four and above had undergone antenatal check-up in first trimester. Muslim women were less likely to go for first antenatal check-up in first trimester of their pregnancy as compared to Hindu and women of other religion, and only twelve percent of scheduled tribe women were visited in first trimester for first antenatal check-ups compared with 17 percent of scheduled caste women, 19 percent of other backward class of women and 33 percent women from 'other' caste category. Fourteen percent of women with low standard of living, 24 percent with medium standard of living, and 48 percent of women with high standard of living respectively had undergone their first antenatal check-up in the first trimester of their pregnancy period

Nutritional deficiencies in women are often exacerbated during pregnancy because of the additional nutrient requirements of foetal growth; therefore a pregnant woman needs six times more iron than a non-pregnant woman. The information on receiving iron folic acid tablets/syrup during pregnancy is also collected. Table 4.6 shows that women in Uttar Pradesh received IFA supplements for more than two-fifth (41 percent) of the last birth during three years preceding the survey. The coverage of IFA tablets is relatively higher in urban areas (47 percent) than in rural areas (39 percent). IFA coverage is much below for non-literate women, women with medium standard of living, scheduled caste and tribe women, and women of higher parity. IFA coverage is also higher among 'other' religion women (67 percent) than Hindu (43 percent) and Muslim (31 percent) women. Again, during pregnancy in the last three years preceding the survey, only 9 percent of women received 100 or more IFA, 7 percent in rural areas and 14 percent in urban areas. Intake of 100 or more IFA is positively associated with education and standard of living index and negatively

associated with parity. Women from other religions and other backward classes received 100 or more IFA than their counterparts. Such a large difference in receiving IFA or intake of 100 or more IFA tablets/syrup is not found while analysing the situation by availability of health facility in the village.

For the last live birth or stillbirth during the three years preceding the survey, women were asked whether they were given tetanus toxoid injection to prevent them and their baby from getting tetanus. Table 4.6 shows that eighty six percent of the women received two or more tetanus toxoid injections. Coverage of two or more TT injections is slightly higher in urban areas (74 percent) than that in rural areas (57 percent). The coverage of at least one tetanus toxoid injection for Hindu women (71 percent) is more than that for Muslim women (63 percent) and women from other religions (87 percent). Coverage of at least one tetanus toxoid injection is lowest for scheduled tribe (55 percent), compared to scheduled caste (66 percent), other backward classes (68 percent), and for 'other' caste category women (79 percent). Non-literate women received at least one tetanus toxoid injection for 61 percent of their last birth, where as literate women with 9 years of schooling received at least one tetanus toxoid injection for 82 percent, and women who had completed 10 years or more of schooling received at least one tetanus toxoid injection for 95 percent of their last birth. Ninety one percent of women with a high standard of living received at least one tetanus toxoid injection, and 62-74 percent women with low or medium standard of living received at least one tetanus toxoid injection for their last live/still birth. The coverage varies inversely by parity. At least one tetanus toxoid injection was received by 82 percent women of Parity-1 compared to 58 percent of Parity 4 and above.



The percentage of women who received full antenatal care (that is, at least three antenatal check-ups, and at least one tetanus toxoid injection and supplementary iron in the form of IFA tablets daily for 100 days as recommended by the RCH programme) has been presented in Figure 4.2. Only 4 percent of women in Uttar Pradesh received full antenatal care. Coverage of full antenatal care is low for non-literate women, women with higher parity, Muslim women, women from scheduled tribe, women with a low standard of living, and women from those villages where health facilities are not available. Full antenatal coverage was also lower in rural areas (3 percent) than in urban areas (9 percent).

4.7 Antenatal Care Indicator by District

Table 4.7 shows the percentage of women who had given live/still birth during the three years preceding the survey who received different types of antenatal care; (the percentage who received antenatal check-up in the first trimester of pregnancy, the percentage who received at least three antenatal check-ups, the percentage who received at least one tetanus toxoid injection, the percentage given 100 or more iron folic acid tablets/syrup, and the percentage who received full antenatal care services) by district.

Table 4.7 ANTENATAL CARE INDICATORS BY DISTRICT

Percentage of women* who received different type of antenatal care by district, Uttar Pradesh, 2002-04

District	Percentage that received an antenatal check-up in the first trimester of pregnancy	Percentage that received three or more antenatal check-ups	Percentage that received at least one tetanus toxoid injection	Percentage that received adequate amount of IFA ¹	Percentage that received full ² antenatal check-ups
Agra	20.8	26.7	68.8	9.6	4.7
Aligarh	23.0	26.3	51.8	7.4	4.2
Allahabad	14.2	14.2	58.3	4.5	2.3
Ambedaker Nagar	19.7	16.3	75.4	5.5	3.1
Auraiya	21.9	19.7	71.9	13.6	2.9
Azamgarh	17.4	37.4	81.2	7.7	4.5
Baghpat	31.8	25.7	74.9	17.3	5.9
Bahraich	16.3	11.2	66.2	14.1	4.5
Ballia	30.7	45.5	88.3	10.4	6.0
Balrampur	10.2	9.7	64.0	4.4	2.3
Banda	11.1	12.4	58.4	6.5	4.0
Barabanki	21.8	22.9	60.6	4.2	1.0
Bareilly	12.3	16.4	69.4	15.0	3.6
Basti	22.8	20.1	78.8	8.9	5.7
Bijnor	23.7	29.5	72.1	11.4	6.2
Budaun	11.3	11.6	48.5	6.5	3.9
Bulandshahar	26.4	29.6	56.1	10.9	4.9
Chandauli	20.3	19.0	82.4	9.7	6.1
Chitrakoot	10.0	9.6	52.4	6.0	2.5
Deoria	21.6	17.7	90.1	6.5	4.9
Etah	15.4	14.8	50.8	2.9	0.4
Etawah	27.1	27.1	74.3	8.5	3.6
Faizabad	20.5	17.9	74.4	8.5	3.1
Farrukhabad	16.3	16.2	59.6	12.1	5.2
Fatehpur	19.6	28.5	70.9	8.2	4.8
Firozabad	12.5	12.0	64.3	10.1	1.2
Gautam Buddha Nagar	30.6	34.1	79.0	16.6	12.9
Ghaziabad	35.4	39.3	67.3	19.0	12.3
Ghazipur	26.3	33.8	85.6	12.0	6.8
Gonda	19.1	15.2	71.8	6.6	2.7
Gorakhpur	28.4	42.0	86.6	12.8	8.5
Hamirpur	13.5	9.5	78.6	6.4	3.5
Hardoi	19.3	16.7	59.5	13.8	3.8
Hathras	29.0	27.3	67.3	6.4	3.1
Jalaun	19.6	24.9	64.9	6.7	2.4
Jaunpur	24.5	31.1	75.7	6.5	3.4
Jhansi	30.4	33.9	77.3	9.8	7.0
Jyotiba Phule Nagar	16.5	28.4	66.5	9.4	7.1
Kannauj	15.9	16.0	60.0	4.8	2.3
Kanpur Dehat	26.6	23.8	74.7	4.5	3.6

Note: * Women who had their last live/still birth since 1-1-1999/1-1-2001

¹ 100 or more iron folic acid tablets including syrup² At least three visits for antenatal check-ups, at least one TT injection received and adequate amount of IFA.

Contd.

Table 4.7 ANTENATAL CARE INDICATORS BY DISTRICT (Contd.)					
Percentage of women* who received different type of antenatal care by district, Uttar Pradesh, 2002-04					
District	Percentage that received an antenatal check-up in the first trimester of pregnancy	Percentage that received three or more antenatal check-ups	Percentage that received at least one tetanus toxoid injection	Percentage that received adequate amount of IFA ¹	Percentage that received full ² antenatal check-ups
Kanpur Nagar	41.6	45.1	83.4	7.8	5.3
Kaushambi	7.5	5.4	43.7	4.6	1.7
Kheri	20.5	23.1	56.5	4.3	1.8
Kushinagar	18.1	20.3	81.4	7.0	3.4
Lalitpur	24.2	30.4	79.7	7.4	3.5
Lucknow	41.8	46.5	83.4	16.2	11.6
Maharajganj	28.3	34.8	80.1	8.5	4.8
Mahoba	13.3	12.1	66.4	7.6	3.6
Mainpuri	26.8	25.3	65.3	6.4	3.5
Mathura	26.0	23.7	63.9	15.2	6.6
Mau	23.3	20.9	86.6	7.3	3.7
Meerut	36.4	30.1	74.7	11.4	5.9
Mirzapur	18.4	20.9	54.7	6.0	2.8
Moradabad	17.7	26.2	56.4	5.5	2.3
Muzaffarnagar	32.5	30.6	67.9	7.2	4.7
Pilibhit	8.8	19.1	60.9	7.7	5.6
Pratapgarh	28.2	30.9	76.1	7.2	4.3
Rae Bareli	23.5	26.3	66.4	1.1	0.7
Rampur	17.4	18.1	62.3	6.8	2.7
Saharanpur	21.9	29.2	69.8	12.5	7.9
Sant Kabir Nagar	17.4	17.4	78.0	7.2	2.5
Sant Ravidas Nagar	15.7	10.7	70.1	5.4	2.1
Shahjahanpur	16.8	15.5	65.0	17.5	4.3
Shrawasti	12.7	9.0	65.5	4.6	1.8
Siddharthnagar	17.8	14.2	82.9	8.9	2.9
Sitapur	21.6	23.2	53.7	5.7	2.8
Sonbhadra	21.9	19.7	62.8	5.2	2.6
Sultanpur	28.3	34.8	73.7	3.6	1.6
Unnao	12.2	9.2	67.1	6.6	1.7
Varanasi	24.4	26.2	79.1	8.9	7.5
Uttar Pradesh	22.0	24.7	69.5	8.7	4.4

Note: * Women who had their last live/still birth since 1-1-1999/1-1-2001
¹ 100 or more iron folic acid tablets including syrup
² At least three visits for antenatal check-ups, at least one TT injection received and adequate amount of IFA

The utilisation of antenatal care services differs from district to district. In 2 out of 70 districts, viz., Kanpur Nagar and Lucknow more than 40 percent of the women received their first antenatal check-up in the first trimester of pregnancy. The percentage of women who received at least three visits for antenatal check-ups ranges from 5 percent in Kaushambi to 47 percent in Lucknow. All districts except Ballia, Gorakhpur, Kanpur Nagar and Lucknow recorded the coverage of at least three visits of ANC as less than 40 percent (see Map-3). There has been good coverage of tetanus toxoid injection in all the districts, ranging from 44 to 90 percent, but on the other hand, performance regarding receipt of 100 or more IFA is poor. In all the districts, the value ranges from 1 to 19 percent, and it is lowest in Rae Bareli. The percentage of women who received full antenatal care ranges from less than one percent in Etah to

13 percent in Gautam Buddha Nagar. In 43 of 70 districts, coverage of full antenatal care is below that of the state average.

4.8 Pregnancy Complications and Treatment

Complications during pregnancy may affect both women's health and the outcome of the pregnancy adversely. Early detection of complications during pregnancy and their management are important components of the safe motherhood programme. In the survey, all the eligible women who had given last live or still birth during the three years preceding the survey were asked if at any time during the pregnancy, they had experienced any of the following pregnancy-related problems such as swelling of hands and feet, paleness, visual disturbance, vaginal bleeding, convulsions, weak or no movement of foetus, abnormal position of foetus, and other problems. All the information is based on women's self-reporting which is presented in Table 4.8 and Figure 4.3.

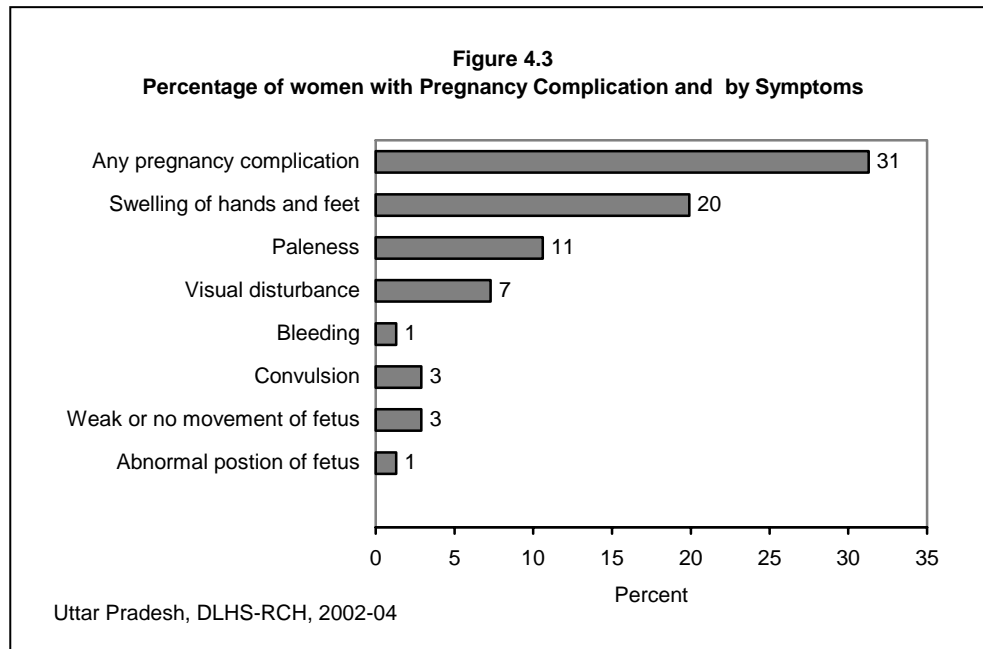


Table 4.8 PREGNANCY COMPLICATIONS

Percentage of women who had live/still births during three years preceding the survey by pregnancy complication and type of complication during pregnancy by some selected background characteristics, Uttar Pradesh, 2002-04

Background characteristic	Percentage of women with any pregnancy complication	Type of pregnancy complication;								Number of women
		Swelling of hands and feet	Paleness	Visual disturbances	Bleeding	Convulsion	Weak or no movement of foetus	Abnormal position of foetus	Other	
Age group (years)										
15-19	32.6	20.2	11.4	7.9	1.1	3.1	2.5	1.9	5.1	2,826
20-24	30.8	19.2	10.1	6.4	1.1	2.7	3.4	1.5	5.6	9,975
25-29	32.5	20.4	10.3	6.9	1.4	3.2	2.6	1.2	5.4	9,290
30-34	30.2	19.6	11.0	8.0	1.3	3.0	2.9	1.2	5.2	5,663
35-39	31.0	21.0	11.7	9.4	2.2	2.6	2.7	1.0	4.9	2,545
40-44	29.6	20.0	12.6	10.9	2.1	3.0	3.5	0.8	3.8	837
Children ever born										
1	33.3	22.6	10.3	4.9	1.1	2.2	3.3	1.9	5.4	6,305
2	29.5	17.9	9.4	6.3	1.2	2.7	2.7	1.4	4.9	6,384
3	31.1	18.9	10.4	7.1	1.2	2.8	2.7	1.3	5.8	5,262
4+	31.2	19.8	11.5	9.2	1.5	3.5	2.9	1.0	5.2	13,005
Residence										
Rural	30.8	18.6	10.8	8.1	1.5	3.3	3.0	1.4	5.3	23,283
Urban	33.0	23.8	10.3	5.0	0.9	1.9	2.8	1.2	5.3	7,854
Standard of living index										
Low	31.0	18.7	11.3	9.1	1.4	3.5	2.8	1.2	5.3	17,893
Medium	30.5	19.7	10.5	5.9	1.0	2.5	3.0	1.3	5.4	8,266
High	33.9	24.5	8.5	3.4	1.5	1.7	3.3	1.7	5.2	4,978
Received any ANC										
Yes	35.2	22.2	11.9	7.3	1.6	3.0	3.7	1.9	6.4	18,011
No	26.1	16.8	8.9	7.4	0.9	2.9	1.9	0.5	3.7	13,115
Total	31.3	19.9	10.6	7.3	1.3	2.9	2.9	1.3	5.3	31,137
Note: Total include 181 women with zero parity, 11 with missing information on received any ANC who were not shown separately @ Literate women with no years of schooling are also included.										

About 32 percent of the women experienced at least one pregnancy related problem. The proportion was lower among rural women (31 percent) than among urban women (33 percent). Women aged 30 years and above, and women with higher parity faced at least one pregnancy related problem more than younger women and women with low parity. This proportion is relatively higher among women who had received some kind of antenatal care during the pregnancy. Thirty five percent of women who had an antenatal check-up reported that they had experienced at least one problem during their pregnancy while 26 percent of women did not receive any antenatal check-up during their pregnancy. The major problems reported were 'swelling of hand and feet' (20 percent), 'paleness' (11 percent), and 'visual disturbance' (7 percent). Only 1 percent reported 'abnormal position of foetus', and 'vaginal bleeding' and 3 percent reported 'convulsions', and 'weak or no movement of foetus'. Swelling of hands and feet is more common among older women, women with parity-1 and women with high a standard of living. The percentage of women who were more anaemic belonging to the age group 30-34 years, and 40-44 years, women from rural areas, women with a low standard of living and women who received any kind of antenatal care during the pregnancy. Anaemia, visual disturbance, and convulsion increased steadily with increase of parity, whereas women with parity-1 reported vaginal bleeding, weak or no movement of foetus and abnormal position of foetus more. The younger women (15-19 years of age) were more likely to report convulsion and abnormal position of foetus as pregnancy complications.

Women who reported at least one pregnancy related complication were asked whether they had consulted someone or had sought treatment for their problem and also the source of treatment. Table 4.9 shows the percentage of women who had pregnancy complications who obtained advice or had sought treatment by source of treatment according to residence and availability of health facility in the village. Forty one percent of women reported that they had obtained advice or consulted someone for their problem. The proportion was higher among urban women (48 percent) than among rural women (38 percent), and 39 percent of women sought treatment from those villages where health facility was available as compared to 37 percent of women with non-availability of health facility within the village.

Among women who sought treatment for pregnancy complications, 28 percent visited a government health facility including a primary health centre (8 percent) and sub-centre (3 percent). More than half of them visited a private health facility, and 5 percent had gone to a facility with the Indian system of medicine, while another 8 percent obtained advice from another health facility. The proportion of women who visited a private health facility is higher in urban areas (68 percent) than in rural areas (59 percent). Among women who sought treatment, 78 percent went to a doctor and 15 percent to an auxiliary nurse midwife or nurse or LHV, and another 5 percent to someone else. Eighty-six percent of these women in urban areas, and 75 percent in rural areas were examined by a doctor, whereas ANM/Nurse/LHV examined 18 percent women in rural areas and 10 percent in urban areas.

Table 4.9 TREATMENT FOR PREGNANCY COMPLICATIONS					
Percentage of women* who had any pregnancy complication, sought treatment and source of treatment according to residence and availability of health facility in the village, Uttar Pradesh, 2002-04					
Treatment and source	Total	Residence		Availability of health facility ⁵ in the village	
		Rural	Urban	No	Yes
Percentage of women sought treatment who had any pregnancy complication	40.6	37.8	48.2	37.0	39.2
Number of women	9,761	7,166	2,595	4,405	2,761
Percentage sought treatment at health facility					
Government health facility ¹	27.8	29.7	23.8	29.1	30.7
Primary health centre	7.5	10.1	1.8	9.0	11.9
Sub centre	3.1	4.0	1.1	3.9	4.2
Private health facility ²	62.1	59.4	67.7	60.4	58.0
ISM ³ facility	4.8	4.3	5.8	4.8	3.6
Other	7.5	9.3	3.6	9.1	9.6
Percent distribution of women who obtained treatment from					
Doctor	78.3	74.6	86.4	75.1	74.0
ANM/nurse/midwife/LHV	15.2	17.6	9.9	17.0	18.5
Other ⁴	5.4	7.0	1.9	7.0	7.1
Missing	1.1	0.7	1.8	0.9	0.5
Total percent	100.0	100.0	100.0	100.0	100.0
Number of women	3,962	2,712	1,250	1,629	1,083
Note: ¹ Include municipal hospital, dispensary, urban health centre/urban health post/urban family welfare centre, community health centre/rural hospital, primary health centre and sub centre					
² Include private hospital/clinic and non-governmental organization/ trust hospital					
³ Either government or private Indian system of medicine					
⁴ Other include Dai trained or untrained, other health professional and ISM practitioner					
⁵ Includes sub-centre, primary health centre, community health centre or referral hospital, government hospital, and government dispensary within the village					

4.9 Delivery Care

4.9.1 Place of Delivery

One of the important thrusts of the Reproductive and Child Health Programme is to encourage deliveries under proper hygienic conditions under the supervision of trained health professionals. The provision of delivery services in the government health institutions is one of the components of the RCH programme. For each live/still birth during three years preceding the survey, DLHS-RCH asked the women where (place) their children were born, who assisted during the deliveries in case of home deliveries, characteristics of delivery, and any problems that occurred during the delivery. Table 4.10 and Figure 4.4 present the place of delivery. Less than one tenth of the births (9 percent) took place in government health institutions, 14 percent in private health institutions, and a large proportion of births (77 percent) took place at home. About two fifth of the deliveries in urban areas and sixteen percent of the deliveries in rural areas took place in health institutions.

Table 4.10 PLACE OF DELIVERY							
Percent distribution of women who had given live/still births during three years preceding the survey, by place of delivery, according to selected background characteristics, Uttar Pradesh, 2002-04							
Background characteristics	Health institutions					Total percent	Number of women
	Public	Private	Home	Other	Missing		
Age group (in years)							
Below 20	9.7	11.0	78.9	0.4	0.0	100.0	2,826
20-34	8.8	14.8	76.1	0.4	0.0	100.0	24,928
35 and above	5.9	9.6	83.9	0.5	0.1	100.0	3,382
Children ever born							
1	13.6	24.4	61.7	0.3	0.0	100.0	6,305
2	9.7	17.7	72.2	0.4	0.0	100.0	6,384
3	7.9	12.7	79.0	0.5	0.0	100.0	5,262
4+	5.6	7.2	86.8	0.4	0.0	100.0	13,005
Residence							
Rural	7.2	8.8	83.6	0.4	0.0	100.0	23,283
Urban	12.6	28.9	58.2	0.2	0.1	100.0	7,854
Education							
Non-literate	6.0	7.0	86.7	0.4	0.0	100.0	20,846
0-9@ years	11.0	16.9	71.7	0.4	0.0	100.0	6,424
10 years & above	18.3	46.4	34.7	0.5	0.0	100.0	3,858
Religion							
Hindu	9.0	13.6	77.0	0.4	0.0	100.0	24,863
Muslim	6.7	14.2	78.8	0.2	0.1	100.0	6,149
Sikh	10.4	65.6	24.0	0.0	0.0	100.0	70
Other	7.3	43.5	48.9	0.3	0.0	100.0	55
Caste#							
Scheduled caste	6.6	7.9	85.1	0.4	0.0	100.0	7,691
Scheduled tribe	5.5	7.2	87.3	0.0	0.0	100.0	315
Other backward class	7.9	11.9	79.8	0.4	0.0	100.0	15,500
Other	12.2	25.0	62.4	0.3	0.1	100.0	7,249
Standard of living index							
Low	5.8	5.9	87.9	0.4	0.0	100.0	17,893
Medium	10.3	13.8	75.4	0.4	0.1	100.0	8,266
High	15.5	42.9	41.4	0.2	0.0	100.0	4,978
Number of antenatal check-ups							
No check-up	3.9	5.4	90.3	0.4	0.0	100.0	13,115
1	8.8	12.2	78.4	0.6	0.0	100.0	3,021
2	10.1	13.7	75.9	0.3	0.0	100.0	7,318
3	11.6	17.4	70.6	0.3	0.0	100.0	3,733
4+	17.9	40.7	41.0	0.4	0.0	100.0	3,939
Delivery characteristics							
Normal	7.5	10.8	81.3	0.4	0.0	100.0	29,084
Caesarean	24.1	69.5	6.2	0.2	0.0	100.0	1,270
Assisted	23.2	39.3	37.1	0.4	0.0	100.0	775
Availability of health facility¹ in the village							
No	6.8	8.8	84.0	0.5	0.0	100.0	14,582
Yes	7.8	8.8	82.9	0.4	0.0	100.0	8,701
Total	8.5	13.9	77.2	0.4	0.0	100.0	31,137

Note: Total includes 181 women with zero parity, 7 with missing information on education, 11 on number of ANC visits and 8 on delivery characteristics who were not shown separately. # Total figure may not add to N due to do not know and missing cases. @ Literate women with no years of schooling are also included.
¹ Includes sub-centre, primary health centre, community health centre or referral hospital, government hospital, and government dispensary within the village

Deliveries in health facilities in Uttar Pradesh rose from percent in Round-I to 22 percent in Round-II.

The proportion of births occurring in health institutions is higher for young women under 35 years (21-24 percent) than for women aged 35 years and above (16 percent). Institutional deliveries, particularly in private health facilities, increase sharply with education and the standard of living. Thirteen percent of the births to non-literate women and 65 percent births to literate women who had completed at least 10 or more years of schooling took place at health institutions. Women with a high standard of living were more likely to give birth in health institutions than women with a low standard of living (Figure 4.4). The proportion of institutional deliveries decreases as parity increases from parity one (38 percent) to parity four and above (13 percent). Institutional delivery is much lower for Muslim women (21 percent) than for Hindus (23 percent) and other religion women (51 percent). Only 13 percent births of women from scheduled-tribes are institutional deliveries as compared to 15 percent of births to women from scheduled-castes, 20 percent to other backward classes and 37 percent of births to women from the 'other' caste category. Institutional deliveries are more common among women who had four or more antenatal check-ups (59 percent) than among who had fewer antenatal check-ups (21-29 percent). Institutional deliveries are least prevalent among births to women who did not receive any antenatal check-ups (9 percent). As expected, a large proportion of births occurred through caesarean section (94 percent), and 63 percent of assisted deliveries took place at health institutions. At the same time, 6 percent of caesarean deliveries and 37 percent of assisted deliveries took place at home. Seventeen percent of births took place at health institutions in the village with availability of health facility compared to 16 percent of births from villages without any health facility.

4.9.2 Assistance During Home Delivery

Table 4.11 shows distribution of assistance during home delivery by selected background characteristics. Generally, assistance during delivery can be provided by medical staff (doctors, ANM/nurse/LHV, TBA, un-trained *dai*) and relatives/friends. If more than one type of attendant assisted during the delivery, then only the most qualified person is considered. In the last three years, only 2 percent of home deliveries were attended by doctors, six percent by ANM or nurse or LHV, 6 percent by trained birth attendants, 51 percent by untrained *dais*, 34 percent were attended by relatives and friends and 1 percent of home deliveries were not attended by anyone (Figure 4.4). Overall, health professionals attended 8 percent of deliveries that took place at home. The percentage of births (home delivery) attended by health professionals do not differ much by woman's age. About 8-10 percent of births were attended by health professional for women age below 20 and 20-34 years and only 6 percent of births for women age 35 and above were attended by health professionals. In rural areas, 7 percent of births were attended by health professionals as compared to 15 percent of that in urban areas. The percentage of births attended by health professionals decreased steadily with increase in parity of women.

Births to literate women who had completed 10 or more years of schooling which were attended by health professionals is five times higher than those of non-literate women. About one tenth (11 percent) of home deliveries to women with a medium standard of living and 5 percent of deliveries to women with a low standard of living were attended by health

professionals. Home deliveries are more or less same to be attended by health professionals among Hindu women (8 percent) and Muslim women (7 percent). Only 6 percent

Table 4.11 ASSISTANCE DURING HOME DELIVERY AND SAFE DELIVERY

Percent distribution of women who had given live/still births during three years preceding the survey, by assistance during home delivery, and percentage of safe delivery, according to selected background characteristics, Uttar Pradesh, 2002-04

Background characteristics	Attendant assisting during home delivery ¹						Number of women	Percentage of safe ² delivery
	Doctor	ANM/ Nurse/ LHV	TBA	Un- trained dai	Relative / friends	None		
Age group (in years)								
Below 20	2.0	7.5	5.8	39.5	43.9	1.4	2,229	28.2
20-34	2.0	6.3	6.3	51.4	32.9	1.0	18,964	29.9
35 and above	1.2	4.3	5.6	52.8	33.8	2.3	2,836	20.1
Children ever born								
1	2.5	9.9	7.1	47.3	32.5	0.8	3,889	45.6
2	2.4	7.2	6.5	49.7	33.5	0.7	4,611	34.3
3	1.9	6.3	6.5	49.0	35.5	0.8	4,154	27.0
4+	1.5	4.4	5.7	52.7	34.1	1.7	11,283	17.9
Residence								
Rural	1.6	4.9	4.6	49.3	38.2	1.4	19,459	21.4
Urban	3.3	11.7	13.0	55.5	16.0	0.5	4,571	50.3
Education								
Non-literate	1.5	3.9	5.4	51.7	36.0	1.4	18,074	17.7
0-9@ years	2.5	10.6	7.3	48.8	30.0	0.8	4,609	37.3
10 years & above	4.8	21.2	13.4	39.6	20.2	0.7	1,339	73.8
Religion								
Hindu	1.9	6.4	5.4	48.3	36.7	1.3	19,143	29.0
Muslim	1.8	5.1	9.4	59.1	23.6	1.0	4,842	26.4
Other	(6.3)	(12.5)	(21.9)	(31.3)	(28.1)	(0.0)	27	(60.6)
Caste#								
Scheduled caste	1.6	4.8	5.7	47.0	39.5	1.3	6,544	19.9
Scheduled tribe	1.8	4.1	5.0	45.0	42.3	1.8	275	17.8
Other backward class	1.9	5.9	5.8	50.8	34.3	1.3	12,362	26.0
Other	2.5	9.3	8.2	52.8	26.4	0.9	4,520	44.6
Standard of living index								
Low	1.4	4.0	4.6	48.1	40.4	1.6	15,733	16.4
Medium	2.3	8.3	8.0	57.1	23.6	0.7	6,236	32.2
High	4.8	16.3	13.2	48.7	16.6	0.2	2,060	67.1
Number of antenatal check-ups								
No check-up	1.4	2.9	4.9	48.6	40.6	1.6	11,839	13.1
1	1.8	6.5	5.3	48.3	37.0	1.1	2,370	27.5
2	2.2	7.8	6.9	55.3	27.0	0.8	5,556	31.4
3	2.1	10.8	8.4	52.2	25.8	0.8	2,636	38.1
4+	5.1	16.6	10.7	48.0	18.9	0.6	1,617	67.5
Delivery characteristics								
Normal	1.3	6.0	6.2	50.9	34.3	1.2	23,658	24.2
Caesarean	11.0	19.7	3.7	50.5	13.7	1.3	79	95.5
Assisted	50.4	12.8	6.9	16.8	12.8	0.3	288	85.9
Availability of health facility³ in the village								
No	1.8	3.8	3.8	51.5	37.7	1.5	12,243	20.2
Yes	1.3	6.7	5.9	45.7	39.2	1.3	7,215	23.3
Total	1.9	6.2	6.2	50.5	34.0	1.2	24,029	28.7

Note: Total includes 92 women with zero parity, 7 with missing information on education, 11 on number of ANC visits and 5 in delivery characteristics who were not shown separately. Total includes 17 Sikh women who were not shown separately.

@ Literate women with no years of schooling are also included.

Total figure may not add to N due to do not know and missing cases

¹ If the respondent mentioned more than one attendant, only the most qualified attendant is shown

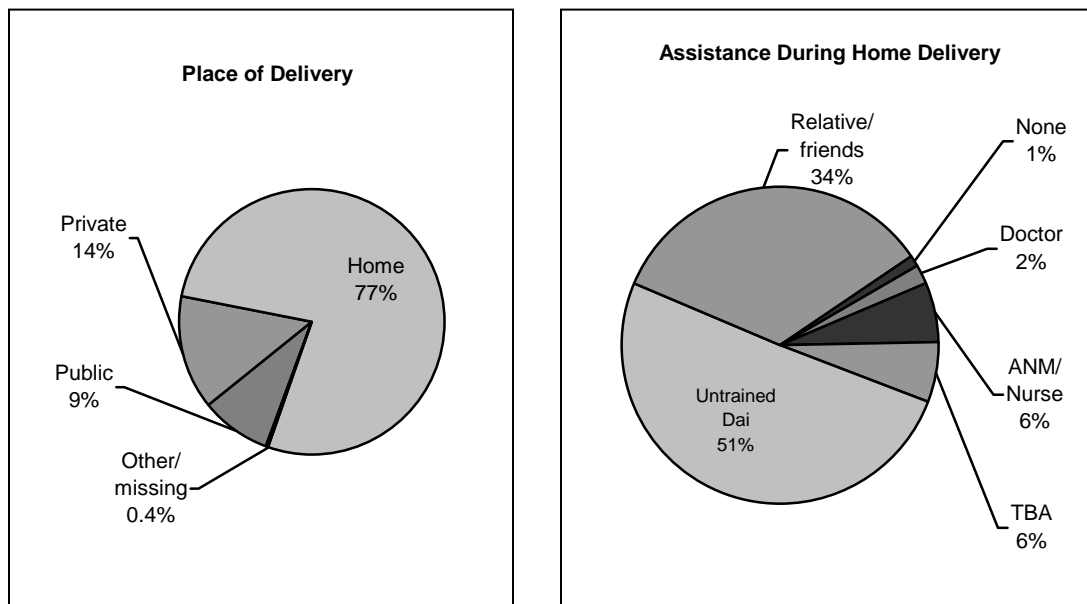
² Either institutional delivery or home delivery assisted by doctor/ANM/Nurse/LHV

³ Includes sub-centre, primary health centre, community health centre or referral hospital, government hospital, and government dispensary within the village

() Based on less than 50 unweighted cases

of births to women from scheduled castes, 6 percent to scheduled tribes, 8 percent to other backward classes and 12 percent to women belonging to 'other castes' category were attended by health professionals. Four percent of home deliveries to women who did not have any antenatal check-ups were attended by health professionals compared to 22 percent of home deliveries to women who had four or more antenatal check-ups. About 7 percent of home deliveries that were normal were attended by health professionals, which differ substantially to births by either caesarean section or assisted (31-63 percent), but the result should be interpreted with caution due to the small number of cases. Seven percent home deliveries were attended by health professionals in villages with non-availability of a health facility as well as in villages with availability of a health facility.

Figure 4.4
Place of Delivery and Assistance During Delivery



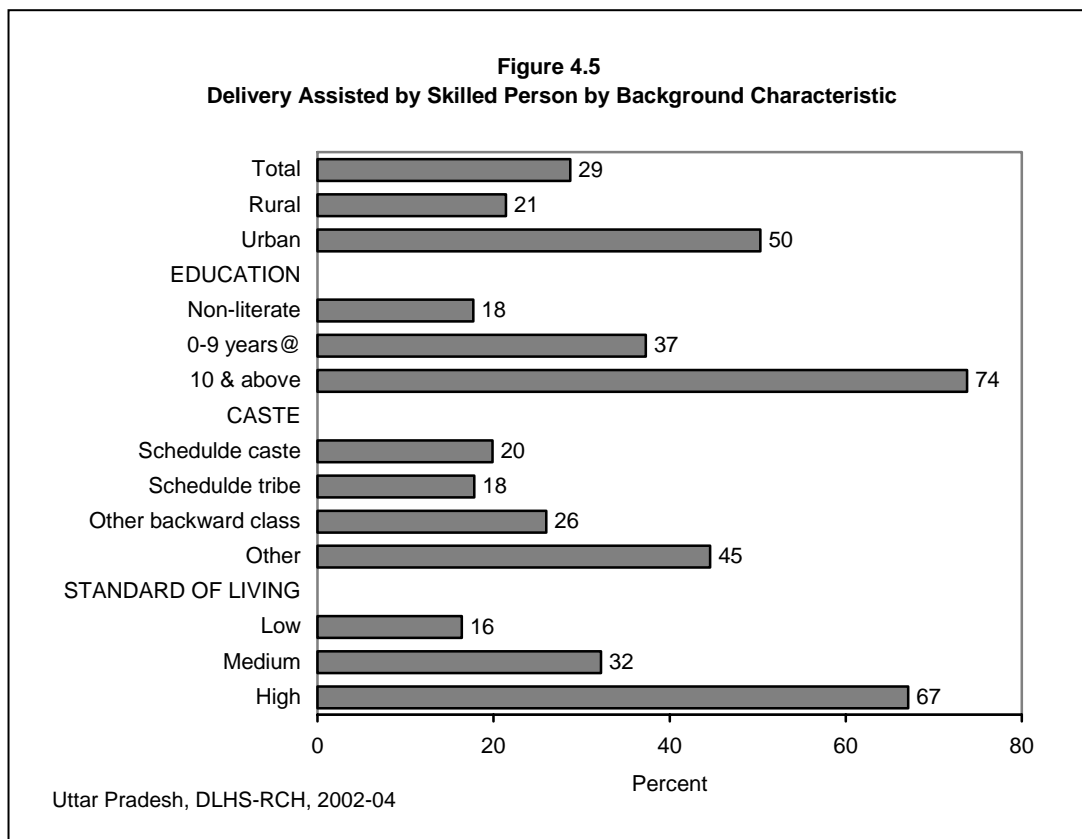
Note: Percentage may add more than 100.0 due to rounding

Uttar Pradesh, DLHS-RCH, 2002-04

4.9.3 Delivery Assisted by Skilled Persons

The extent of safe deliveries varied substantially by background characteristics of women (Table 4.11 and Figure 4.5). More than half of the births (29 percent) were safe in Uttar Pradesh. In urban areas, half (50 percent) of the deliveries were safe as against little more than two fifth (21 percent) in rural areas. About 28-30 percent of the deliveries were safe for younger women aged below 35 than to elderly women (20 percent). The proportion of

safe deliveries was much higher among other religions women (61 percent) than among Muslim and Hindu women (26-29 percent). Only 18 percent of births to women from scheduled-tribe were safe deliveries, compared to 20 percent to women from scheduled-castes, 26 percent to women from other backward classes, and 45 percent of births to women from 'other castes' category. Proportion of safe deliveries decreases as parity rises from 1 (46 percent) to 4 and above (18 percent). Safe deliveries were least prevalent among women who did not receive any antenatal check-ups (13 percent), and it is most prevalent among women who had four or more antenatal check-ups (68 percent). The proportion of safe deliveries increased sizeably with woman's education and standard of living. Only eighteen percent of non-literate women had safe deliveries whereas its prevalence is 74 percent among women who had completed at least high school. Proportion of safe deliveries increased two times with shift from low standard of living to medium standard of living and again from medium to high standard of living. Women with a high standard of living had 67 percent safe deliveries compared to 32 percent of women with a medium standard of living and 16 percent with a low standard of living. As compared to women who had caesarean and assisted deliveries (86-96 percent) only 24 percent of women with normal deliveries are safe deliveries. The proportion of safe deliveries was slightly higher in villages with a health facility than to women from those villages where health facilities are not available.



4.10 Reasons for Not Going to Health Institutions for Delivery

Table 4.12 shows the percentage distribution of women who did not deliver in health institutions in the three years preceding the survey. The main reason for not going to health institutions has been presented according to residence and availability of health facility in the village. A little less than three fifth (59 percent) of the women stated that it was not necessary to deliver in health institutions. Slightly higher proportion of urban women (62 percent) than rural women (58 percent) felt so. Also, 60 percent of women stated that it was not necessary to deliver in health institutions when their villages were equipped with health facilities, when compared to 58 percent of women from villages where a health facility is not available. About 5 percent of the women felt that it was not customary to deliver in health institutions. Other factors contributing for not going to health institutions for delivery were, 'it costs too much' (8 percent), 'no transportation' or 'health facility is too far' (1 percent), 'no time to go' (4 percent), 'family did not allow' (11 percent), 'better care at home' (4 percent), and 'other' (less than one percent). About 5 percent reported lack of knowledge regarding the delivery facilities. Three percent women did not opt for institutional delivery due to poor quality of services. The corresponding figure is 4 percent in urban areas and 3 percent in rural areas. It needs to be mentioned that 5 percent of women from villages with a health facility reported lack of knowledge as a reason for not having delivery at home.

Table 4.12 REASONS FOR NOT GOING TO HEALTH INSTITUTIONS FOR DELIVERY					
Percent distribution of women who had given last live/still birth at home during three years preceding the survey by the main reason for not going to health institution for delivery, according to residence and availability of health facility in the village, Uttar Pradesh, 2002-04					
Reason	Total	Residence		Availability of health facility ¹ in the village	
		Rural	Urban	No	Yes
Not Necessary	59.1	58.4	62.3	57.5	59.9
Not customary	4.6	4.6	4.8	4.7	4.4
Cost too much	7.7	8.2	5.6	8.1	8.4
Health facility too far/ No transport	1.4	1.5	1.0	1.7	1.2
Poor quality service	3.2	3.1	3.6	3.0	3.2
No time to go	3.8	3.7	4.0	3.8	3.7
Family did not allow	11.3	11.4	10.8	12.0	10.5
Better care at home	3.6	3.8	2.7	4.1	3.3
Lack of knowledge	4.9	5.0	4.4	4.9	5.1
Other	0.3	0.3	0.4	0.2	0.4
Total percent	100.0	100.0	100.0	100.0	100.0
Number of women	24,029	19,459	4,571	12,243	7,215

Note: ¹ Includes sub-centre, primary health centre, community health centre or referral hospital, government hospital, and government dispensary within the village.

4.11 Delivery Characteristics by District

Table 4.13 shows the delivery characteristics by district; institutional delivery (delivery in government or private health institutions), home delivery and attendant assistance during home delivery for last live/still births to women during the three years preceding the survey. The proportion of institutional delivery is lowest in Balrampur (6 percent) followed by Hardoi and Kannauj (8 percent each) and it is highest in Lucknow (42 percent).

Table 4.13 DELIVERY CHARACTERISTICS BY DISTRICTS				
Place of delivery, assistance during home deliveries, and percentage of safe deliveries by district, Uttar Pradesh, 2002-04				
Districts	Percentage of women who had institutional delivery	Percentage of women who had delivery at home	Home delivery assisted by skilled ¹ persons	Percentage of safe ² delivery
Agra	32.9	67.1	4.2	35.8
Aligarh	25.7	74.0	8.6	32.0
Allahabad	20.0	79.5	5.8	24.6
Ambedaker Nagar	26.6	73.4	10.5	34.3
Auraiya	11.1	88.6	5.7	16.1
Azamgarh	32.6	67.3	15.2	42.8
Baghpat	26.0	74.0	4.0	28.9
Bahraich	10.0	90.0	7.5	16.8
Ballia	33.5	65.8	22.2	48.1
Balrampur	6.3	93.6	4.8	10.8
Banda	8.7	91.1	12.0	19.6
Barabanki	24.1	75.9	10.9	32.4
Bareilly	9.6	90.4	3.0	12.3
Basti	23.3	75.8	8.4	29.7
Bijnor	28.7	71.1	4.7	32.1
Budaun	13.2	85.6	5.1	17.6
Bulandshahar	23.3	76.7	3.0	25.6
Chandauli	30.7	67.1	10.6	37.7
Chitrakoot	8.8	91.2	13.9	21.5
Deoria	28.8	70.7	12.1	37.4
Etah	22.3	77.4	6.2	27.1
Etawah	16.8	83.0	12.9	27.5
Faizabad	30.5	69.1	7.3	35.6
Farrukhabad	14.7	84.5	10.5	23.6
Fatehpur	21.3	78.1	5.4	25.6
Firozabad	22.8	77.2	2.3	24.6
Gautam Buddha Nagar	35.2	64.8	11.1	42.4
Ghaziabad	36.6	63.4	8.0	41.7
Ghazipur	24.4	75.3	21.8	40.8
Gonda	16.9	82.4	8.2	23.6
Gorakhpur	20.7	78.7	5.8	25.3
Hamirpur	19.3	80.4	11.6	28.6
Hardoi	7.6	92.2	0.8	8.4
Hathras	27.3	72.1	14.9	38.1
Jalaun	22.7	77.2	12.1	32.0
Jaunpur	24.9	74.4	16.4	37.1
Jhansi	31.8	68.2	10.1	38.7
Jyotiba Phule Nagar	18.1	81.9	6.0	23.0
Kannauj	7.6	91.8	3.6	10.8
Kanpur Dehat	19.5	80.2	5.7	24.1

Note: *Table includes last live/still birth since 1-1-1999/1-1-2001.
¹ Includes Doctor/ANM/Nurse. ² Either institutional delivery or home delivery assisted by skilled person.

Contd.

Table 4.13 DELIVERY CHARACTERISTICS BY DISTRICTS (Contd.)				
Place of delivery, assistance during home deliveries, and percentage of safe deliveries by district, Uttar Pradesh, 2002-04				
Districts	Percentage of women who had institutional delivery	Percentage of women who had delivery at home	Home delivery assisted by skilled ¹ persons	Percentage of safe ² delivery
Kanpur Nagar	36.8	62.4	9.2	42.5
Kaushambi	13.5	86.1	4.4	17.3
Kheri	15.2	84.8	5.7	20.0
Kushinagar	26.5	73.1	9.5	33.4
Lalitpur	23.9	75.2	7.1	29.2
Lucknow	42.0	57.4	11.9	48.8
Maharajganj	14.3	85.4	8.1	21.3
Mahoba	25.8	74.0	8.1	31.8
Mainpuri	21.5	78.5	5.1	25.5
Mathura	30.4	67.8	9.8	37.1
Mau	27.5	71.0	14.9	38.1
Meerut	27.6	71.7	9.6	34.5
Mirzapur	20.9	78.5	11.3	29.8
Moradabad	18.5	81.5	4.2	22.0
Muzaffarnagar	23.7	76.2	4.2	26.9
Pilibhit	9.6	90.3	2.3	11.7
Pratapgarh	25.0	74.9	16.3	37.2
Rae Bareli	19.4	80.6	9.6	27.1
Rampur	17.7	82.3	4.2	21.2
Saharanpur	24.2	75.8	2.7	26.2
Sant Kabir Nagar	18.9	81.0	9.5	26.6
Sant Ravidas Nagar	23.2	76.7	11.6	32.1
Shahjahanpur	13.0	87.0	3.2	15.8
Shrawasti	8.7	90.6	9.9	17.6
Siddharthnagar	14.7	84.6	5.7	19.5
Sitapur	19.5	80.1	4.8	23.4
Sonbhadra	15.8	82.0	9.4	23.5
Sultanpur	26.7	73.1	12.5	35.8
Unnao	11.3	86.8	10.0	20.1
Varanasi	36.4	62.9	12.9	44.5
Uttar Pradesh	22.4	77.2	8.1	28.7

Note: *Table includes last live/still birth since 1-1-1999/1-1-2001.
¹ Includes Doctor/ANM/Nurse. ² Either institutional delivery or home delivery assisted by skilled person.

Compared to delivery in a public health facility, delivery in a private health facility is more common in all the districts of Uttar Pradesh. A little more than one fifth of births are institutional delivery in the state, but in 58 of 70 districts, more than 70 percent of the births took place at home and Balrampur and Hardoi had more than 92 percent of home deliveries. Except Ballia and Gazipur district, less than one fifth of home deliveries were attended by a health professional. The extent of safe deliveries also varies by district, in more than 50 percent of districts, the proportion of safe deliveries is below state average, it ranges from 8 percent in Hardoi to 49 percent in Lucknow. The proportion of safe deliveries is less than 20 percent in thirteen districts i.e. Auraiya, Bahraich, Balrampur, Banda, Bareilly, Budaun, Hardoi, Kannauj, Kaushambi, Pilibhit, Shahjahanpur, Shrawasti and Siddharthnagar (see Map-4).

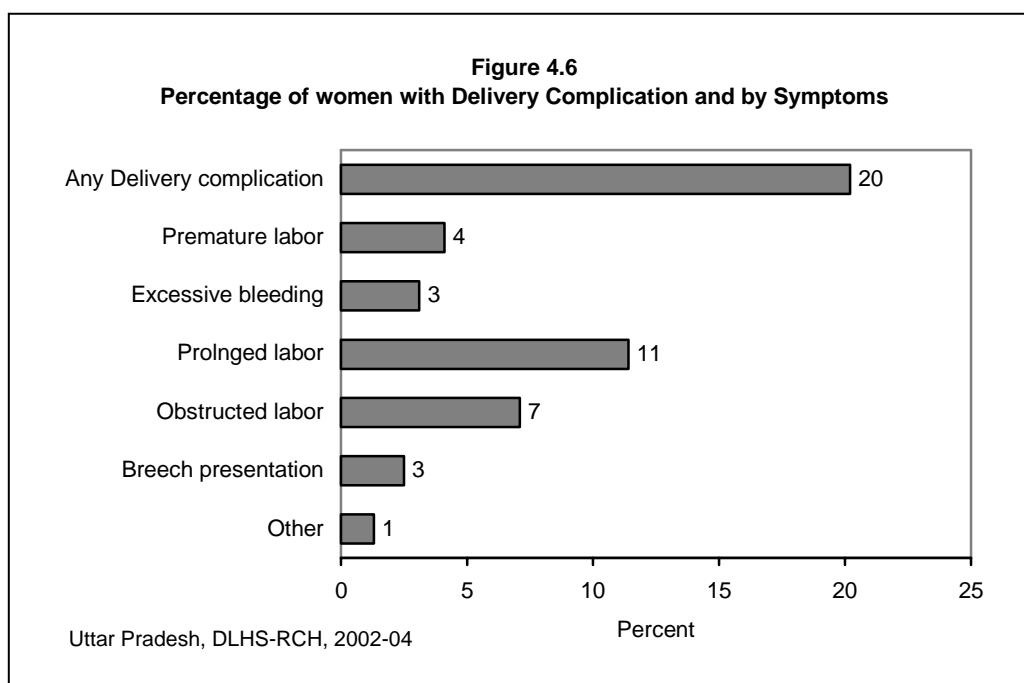
4.12 Complications During Delivery

Complications during delivery include ‘premature labour’, ‘obstructed labour’, ‘prolonged labour (more than 12 hours)’, ‘breech presentations’, ‘excessive bleeding during delivery’ and ‘other problems’ at the time of delivery reported by women during the three years preceding the survey. One fourth of the women experienced at least one problem during delivery (Table 4.14 and Figure 4.6). The proportion of women who had delivery complications is higher among urban women (23 percent) than among rural women (20 percent). Younger women below the age of 20 years, and women with low parity (1-2) reported more at least one delivery related problem than older women aged 35 years and above and women with higher parity. This proportion is relatively higher among women who had received some kind of antenatal care during their pregnancy. Fourteen percent of women who did not have any antenatal check-up reported that they experienced at least one problem during their pregnancy when compared to 22-32 percent of women who had received some kind of antenatal check-up. Among women who had assisted or caesarean delivery, 59-68 percent reported experiencing such problems, and 17 percent women with normal deliveries also cited complications during delivery. A relatively higher proportion of women who delivered in health institutions (36-43 percent) faced at least one delivery complication compared to those who delivered at home or other places (14-20 percent).

Table 4.14 DELIVERY COMPLICATIONS								
Percentage of women who had given last live/still births during three years preceding the survey by delivery complication, according to selected background characteristics, Uttar Pradesh, 2002-04								
Background characteristics	Any delivery complication	Type of delivery complication;						Number of women
		Premature labour	Excessive bleeding	Prolonged labour	Obstructed labour	Breech presentation	Other	
Age group (in years)								
Below 20	24.9	6.4	3.3	14.5	8.8	2.9	1.4	2,826
20-34	20.1	3.9	3.1	11.3	7.1	2.5	1.3	24,928
35 and above	17.7	3.9	3.0	9.9	5.6	1.8	1.3	3,382
Children ever born								
1	29.0	6.1	3.6	15.6	12.2	4.2	2.1	6,305
2	19.8	4.2	3.0	11.2	6.7	2.2	1.6	6,384
3	17.1	3.4	2.8	9.5	5.2	1.8	1.0	5,262
4+	17.0	3.2	2.8	10.0	5.2	1.9	0.9	13,005
Residence								
Rural	19.5	4.1	3.1	11.5	6.4	2.2	1.2	23,283
Urban	22.5	4.3	3.0	11.3	9.0	3.3	1.8	7,854
Number of antenatal check-ups								
No check-up	14.3	3.2	2.1	7.7	4.8	1.3	1.0	13,115
1	22.1	6.1	4.1	11.2	8.1	2.3	1.8	3,021
2	21.8	3.7	3.0	14.3	6.7	2.7	1.1	7,318
3	24.5	4.0	4.0	15.5	7.9	3.1	1.5	3,733
4+	31.6	6.9	4.9	14.8	13.7	5.4	2.4	3,939
Delivery characteristics								
Normal	17.1	3.6	2.6	10.2	5.0	1.6	0.9	29,084
Caesarean	67.7	11.9	10.0	27.2	40.6	17.1	6.4	1,270
Assisted	59.1	12.7	11.5	30.6	29.6	12.0	8.1	775
Place of delivery								
Government sector	36.4	7.5	7.0	19.0	15.5	5.7	2.8	2,659
Private sector	42.9	10.2	6.0	20.4	19.5	7.1	3.6	4,324
Home	14.4	2.7	2.1	9.0	3.9	1.3	0.8	24,029
Other	19.5	8.2	4.1	10.9	9.2	0.5	3.3	118
Total	20.2	4.1	3.1	11.4	7.1	2.5	1.3	31,137

Note: Table include 181 women with zero parity, 11 with missing information on number of ANC visits, 8 on delivery characteristics and 6 on place of delivery who were not shown separately.

The major problems reported were ‘prolonged labour’ (11 percent), ‘obstructed labour’ (7 percent), ‘premature labour’ (4 percent), and ‘excessive bleeding’ (3 percent). Only 3 percent reported ‘breech presentation’, and one percent reported ‘other’ problems related to delivery. Premature labour, prolonged labour, obstructed labour and breech presentation are more common among younger women, and women with low parity. Rural women were more likely to report delivery complications such as prolonged labour and excessive bleeding, whereas premature labour, obstructed labour and breech presentation are more prevalent among urban women. Premature labour, excessive bleeding, prolonged labour and other health problems related to delivery were more among women whose last delivery was assisted with instruments, and obstructed labour and breech presentation were more likely among those who had a caesarean during the three years preceding the survey. Women whose recent delivery was performed in



medical institutions were more likely to report premature labour, prolonged labour, breech presentation and obstructed labour compared with place of delivery other than medical institutions.

4.13 Post Delivery Complications and Treatment

Table 4.15 and Figure 4.7 present information about women who faced complications after delivery according to some selected background characteristics. The incidence of post delivery complications judged by any of the following during the first six-weeks of delivery- ‘high fever’, ‘lower abdominal pain’, ‘foul smelling vaginal discharge’, ‘excessive bleeding’, ‘convulsion’, ‘severe headache’, and ‘other’ problems. Thirty four percent of women reported that they faced any of the problems during the first six weeks after their delivery. The proportion of women who cited at least one post delivery complication is higher in rural areas (35 percent) than in urban areas (28 percent). Younger women of below 20 years, and women with higher parity (4 and over), had their deliveries assisted with instruments, and those whose deliveries took place at ‘other places’, and those whose deliveries at home were attended by TBA and relative/friends are more prone to report at least one post delivery related problem.

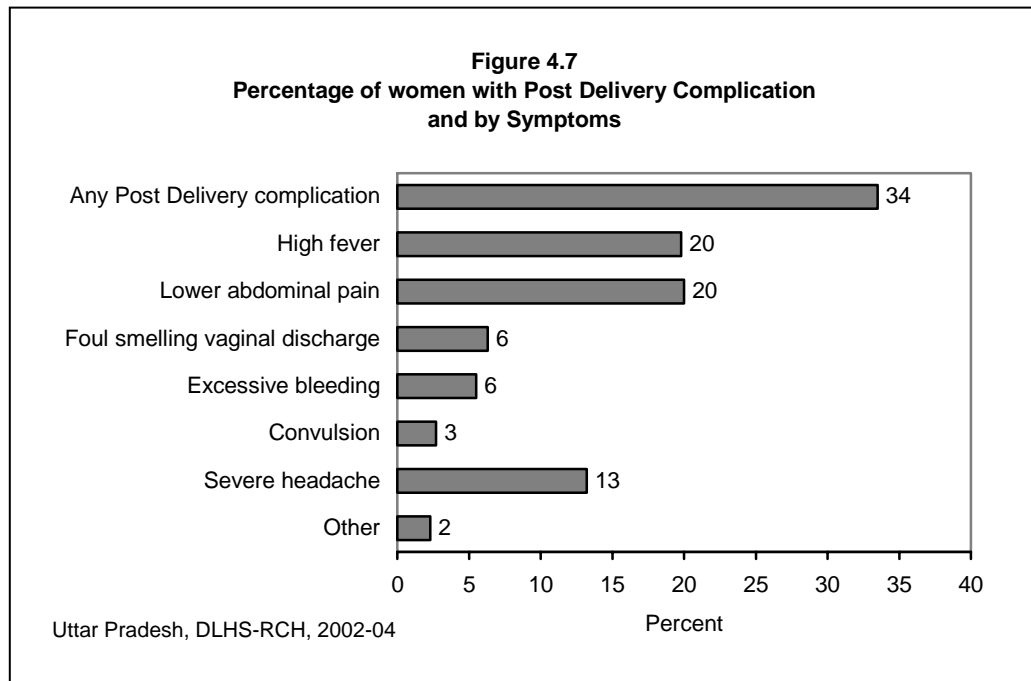
Table 4.15 POST DELIVERY COMPLICATIONS

Percentage of women who had given last live/still births during three years preceding the survey by post delivery complication, according to selected background characteristics, Uttar Pradesh, 2002-04

Background characteristics	Type of post delivery complication;								Number of women
	Any post delivery complication	High fever	Lower abdominal pain	Foul smelling vaginal discharge	Excessive bleeding	Convulsion	Severe headache	Other	
Age									
Below 20	36.2	22.7	19.5	6.4	6.0	3.3	14.3	2.6	2,826
20-34	33.3	19.4	20.1	6.2	5.3	2.6	13.1	2.2	24,928
35 and above	32.6	19.9	19.6	7.3	6.4	2.7	13.3	2.8	3,382
Children ever born									
1	32.0	19.6	17.0	5.2	5.0	2.4	12.2	2.4	6,305
2	31.5	17.1	18.8	5.9	4.7	2.3	11.9	1.8	6,384
3	33.3	19.0	20.8	6.2	6.0	2.6	12.4	2.3	5,262
4+	34.9	21.4	21.4	7.0	5.9	2.9	14.5	2.5	13,005
Residence									
Rural	35.3	21.2	21.1	6.9	5.8	3.1	14.2	2.4	23,283
Urban	28.0	15.6	16.6	4.4	4.5	1.5	10.3	1.9	7,854
Delivery characteristics									
Normal	33.1	19.7	19.7	6.3	5.4	2.6	13.2	2.2	29,084
Caesarean	38.6	20.5	25.0	6.6	7.8	2.7	15.3	2.9	1,270
Assisted	38.7	20.2	21.7	4.4	7.8	5.4	11.7	5.5	775
Place of delivery									
Government sector	33.1	18.2	19.4	6.0	5.5	2.6	12.4	2.6	2,659
Private sector	31.9	15.9	19.7	6.0	6.4	2.6	12.0	2.6	4,324
Home	33.8	20.6	20.0	6.4	5.3	2.7	13.5	2.2	24,029
Other	42.5	27.5	29.5	14.0	10.1	3.1	18.1	4.7	118
Assistance during home delivery									
Doctor	33.8	17.9	19.7	6.0	6.5	2.8	10.9	3.4	461
ANM/Nurse/LHV	35.0	20.2	20.0	4.9	7.5	3.1	13.0	2.8	1,482
TBA	37.2	22.0	23.5	8.9	7.4	3.5	16.3	2.1	1,488
Untrained dai	31.0	18.4	18.9	6.4	4.7	1.8	11.6	1.5	12,132
Relative/friends	36.8	23.7	21.0	6.0	5.5	3.7	15.9	3.0	8,167
None	35.7	22.3	20.7	9.8	7.0	3.6	15.4	3.1	294
Total	33.5	19.8	20.0	6.3	5.5	2.7	13.2	2.3	31,137

Note: Table include 181 women with zero parity, and 8 missing cases on delivery characteristics, 6 on place of delivery and 5 on assistance during who were not shown separately.

Women reported high fever and lower abdominal pain (20 percent each), severe head ache (13 percent), foul smelling vaginal discharge and excessive vaginal bleeding (6 percent each), and convulsion (3 percent). Only two percent of women reported other problems. Rural-urban differences in all symptoms of postpartum complication are large. All the postpartum complications, except foul smelling vaginal discharge, excessive bleeding and other post delivery complications are more prevalent among older women aged 35 years and above than among women below 20 years. The symptoms of postpartum complications increased steadily with increased parity. There are minimal differences in the likelihood of having different symptoms in the postpartum period by place of delivery. Women who had the last delivery at home and were not assisted by anyone were more likely to have lower abdominal pain and high fever. Symptoms like



high fever and severe headache are more common for women who delivered at home assisted by a relative/friend than for women whose home deliveries were assisted by doctor, ANM/nurse/LHV, trained birth attendant and untrained *dai*.

Women who reported at least one complication during the postpartum period were asked whether they had consulted or sought treatment for their problems and also the source of treatment. Table 4.16 shows the percentage of women who had post delivery complications and who sought treatment by source of treatment according to residence and availability of health facility in the village. Fifty five percent of women reported that they had obtained advice or had consulted someone for their problems. The proportion was higher among urban women (62 percent) than among rural women (53 percent), and 55 percent of women sought treatment from those villages where health facility was available as compared to 52 percent of women who did not have a health facility within the village.

Table 4.16 TREATMENT FOR POST DELIVERY COMPLICATIONS					
Percentage of women who had last live/still births during three years preceding the survey and who had any post delivery complication, sought treatment for the problems, and source of treatment according to residence and availability of health facility in the village, Uttar Pradesh, 2002-04					
Treatment and source	Total	Residence		Availability of health facility ⁵ in the village	
		Rural	Urban	No	Yes
Percentage of women sought treatment who had any post delivery complication	55.2	53.3	62.0	52.3	55.0
Number of women	10,423	8,221	2,202	5,167	3,054
Percentage sought treatment at health facility					
Government health facility ¹	13.3	13.1	13.9	12.6	13.8
Primary health centre	3.4	3.9	1.6	3.5	4.6
Sub centre	1.5	1.8	0.5	1.7	2.0
Private health facility ²	66.1	63.7	73.6	63.2	64.6
ISM ³ facility	3.5	3.5	3.5	4.0	2.6
Other	18.4	21.1	9.7	21.7	20.1
Percent distribution of women who obtained treatment from					
Doctor	81.8	81.5	82.8	80.9	82.4
ANM/nurse/midwife/LHV	8.3	7.5	10.7	7.6	7.3
Other health professionals ⁴	3.9	4.1	3.2	4.1	4.1
Other	6.0	6.9	3.2	7.4	6.2
Missing	0.0	0.0	0.0	0.0	0.0
Total percent	100.0	100.0	100.0	100.0	100.0
Number of women	5,749	4,384	1,365	2,703	1,681
Note: ¹ Include municipal hospital, dispensary, urban health centre/urban health post/urban family welfare centre, community health centre/rural hospital, primary health centre and sub centre					
² Include private hospital/clinic and non-governmental organization/ trust hospital					
³ Either government or private Indian system of medicine					
⁴ Other health professionals include Dai (trained or untrained), relative/friends and ISM practitioner					
⁵ Includes sub-centre, primary health centre, community health centre or referral hospital, government hospital, and government dispensary within the village					

Among women who sought treatment for complications in the postpartum period, only 13 percent visited a government health facility including primary health centre (3 percent each) and sub-centre (2 percent). Two third of women visited a private health facility, and 4 percent went to a facility with the Indian system of medicine (either government or private) and another 18 percent obtained advice from other health facilities. The proportion of women who visited a government health facility is relatively higher in urban areas (14 percent) than in rural areas (13 percent). Further, the proportion of women seeking treatment from a private health facility is more among women who belonged to villages with availability of health facility within the village. Among women who sought treatment, 82 percent preferred to go to a doctor and 8 percent visited an auxiliary nurse midwife or nurse or LHV, 4 percent went to other health professionals,

and 6 percent went to some one else. Eighty three percent of these women in urban areas, and 82 percent in rural areas went to a doctor, whereas a visit to an ANM/nurse/LHV was 8 percent in rural areas and 11 percent in urban areas. There are also differences by availability of health facilities and non-availability of health facilities in the village. Eighty two percent of women who belonged to villages with availability of health facilities were seen by doctor compared to 81 percent of women belonging to villages with non-availability of health facilities.

4.14 Obstetric Morbidity by District

The extent of health problems/ complications women suffer during pregnancy, delivery and post delivery period indicates the state of obstetric morbidity. Table 4.17 presents the incidence of pregnancy, delivery and post delivery complications and treatment seeking behaviour in case of pregnancy and post delivery complications by district. As mentioned earlier, in the state, 31 percent, 20 percent and 34 percent of the women experienced pregnancy, delivery and post delivery complications respectively. About 41 percent of the women sought treatment for pregnancy complications and 55 percent for post delivery complications. In fourth fifth of districts, a minimum of one fourth of the women experienced at least one of the symptoms of pregnancy complications.

Table 4.17 PREGNANCY, DELIVERY AND POST DELIVERY COMPLICATIONS					
Extent of pregnancy, delivery and post delivery complications and treatment seeking behaviour by districts, Uttar Pradesh, 2002-04					
District	Percentage of women ¹				
	Who had complication during pregnancy	Sought ² treatment for pregnancy complication	Who had delivery complication	Who had post delivery complication	Sought ³ treatment for post delivery complication
Agra	18.3	31.4	14.2	12.2	61.8
Aligarh	28.0	44.6	26.2	28.5	53.8
Allahabad	34.0	49.2	16.1	24.3	70.6
Ambedaker Nagar	37.2	38.9	17.9	30.2	68.0
Auraiya	24.5	42.8	36.1	31.2	57.8
Azamgarh	36.9	39.5	19.0	32.5	51.6
Baghpat	24.8	44.6	30.8	31.0	56.2
Bahraich	45.3	41.8	31.2	59.2	55.7
Ballia	32.1	50.6	23.1	27.9	62.5
Balrampur	32.8	46.5	19.2	41.8	70.8
Banda	26.9	40.3	13.1	30.5	58.1
Barabanki	43.8	34.2	32.9	47.0	45.0
Bareilly	17.9	29.4	12.7	31.6	43.9
Basti	30.1	46.4	17.1	31.6	56.5
Bijnor	32.2	40.9	17.9	29.5	50.5
Budaun	29.7	35.4	17.7	33.5	34.7
Bulandshahar	23.9	48.6	25.6	31.0	50.6
Chandauli	36.2	57.4	14.6	24.0	80.2
Chitrakoot	31.5	25.1	8.7	35.8	62.6
Deoria	47.6	53.8	21.4	45.2	72.9
Etah	25.5	29.9	17.2	29.5	40.1
Etawah	27.0	58.6	37.5	27.7	64.4
Faizabad	35.0	53.0	18.3	41.7	72.2
Farrukhabad	29.8	31.5	42.7	43.4	46.9
Fatehpur	24.2	42.5	16.4	27.2	62.2
Firozabad	19.3	31.0	6.5	8.0	43.1
Gautam Buddha Nagar	24.9	32.5	15.2	9.3	66.4
Ghaziabad	46.3	50.7	32.5	33.5	53.3
Ghaziipur	38.8	50.5	19.7	32.5	64.8
Gonda	42.2	46.7	13.8	52.6	68.9
Gorakhpur	31.5	32.6	20.3	31.3	53.2
Hamirpur	29.3	26.4	13.3	19.7	61.5
Hardoi	20.8	22.6	10.4	30.8	29.0
Hathras	28.3	51.9	31.0	36.0	53.8
Jalaun	31.0	35.0	18.2	29.0	44.6
Jaunpur	34.6	37.8	23.8	39.9	44.1
Jhansi	30.2	44.8	23.5	33.4	53.7
Jyotiba Phule Nagar	15.5	33.1	21.4	17.3	39.7
Kannauj	27.9	31.5	21.9	43.1	52.1
Kanpur Dehat	32.9	29.7	28.1	38.3	44.0

Note: ¹ Women who had last live/still birth during three years preceding the survey. ² Women who reported at least one complication of pregnancy. ³ Women who reported at least one post delivery complication.

Contd.

In a few districts like, Bahraich (45 percent), Ghaziabad (46 percent) and Deoria (48 percent), the incidence of pregnancy complications is comparatively higher than other districts. The incidence of post delivery complication is higher than that of pregnancy and delivery complications. The percentage of women who experienced at least one type of delivery complication ranges from 4 percent in Pilibhit to 43 percent in Farrukhabad, and incidence of post delivery complication varies from 8 percent in Firozabad to 59 percent

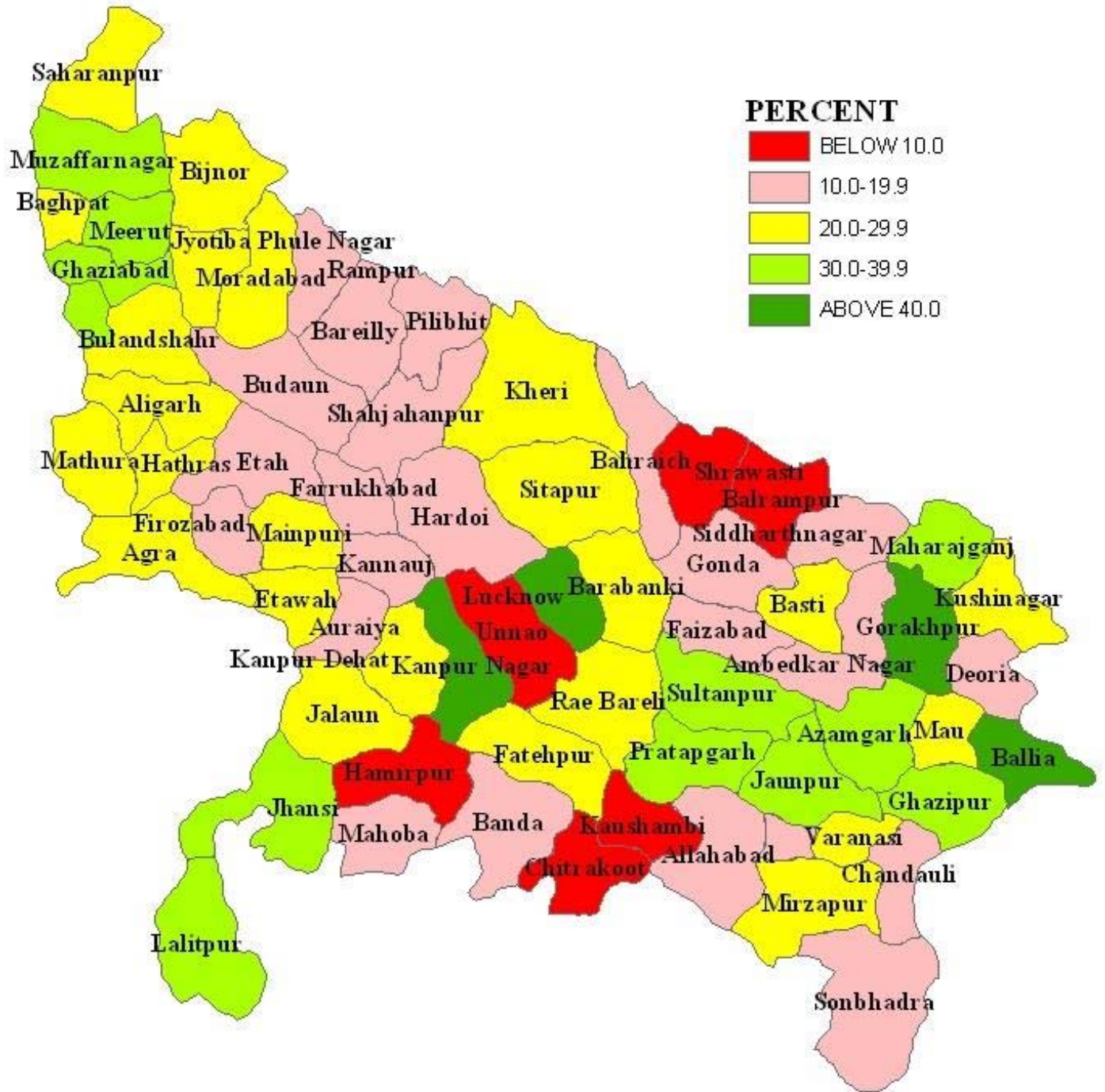
Table 4.17 PREGNANCY, DELIVERY AND POST DELIVERY COMPLICATIONS (Contd.)					
Extent of pregnancy, delivery and post delivery complications and treatment seeking behaviour by districts, Uttar Pradesh, 2002-04					
District	Percentage of women ¹				
	Who had complication during pregnancy	Sought ² treatment for pregnancy complication	Who had delivery complication	Who had post delivery complication	Sought ³ treatment for post delivery complication
Kanpur Nagar	37.0	35.0	20.5	33.4	58.7
Kaushambi	25.6	43.0	15.4	19.8	60.5
Kheri	43.0	32.0	20.3	46.5	54.2
Kushinagar	27.6	41.1	30.1	38.7	59.9
Lalitpur	25.5	25.2	10.6	22.4	41.1
Lucknow	39.5	41.6	27.4	42.2	65.0
Maharajganj	35.3	39.7	21.1	42.0	66.9
Mahoba	27.2	39.8	13.5	19.9	51.3
Mainpuri	21.3	44.2	26.2	26.5	37.4
Mathura	30.1	36.0	24.1	30.8	47.9
Mau	35.2	57.3	16.5	34.8	85.5
Meerut	28.3	48.4	19.6	22.7	62.3
Mirzapur	28.6	35.6	17.4	26.6	45.9
Moradabad	21.6	36.9	22.7	25.1	52.3
Muzaffarnagar	31.5	43.6	28.0	36.4	64.9
Pilibhit	17.6	35.5	4.3	27.9	25.7
Pratapgarh	29.1	51.5	20.8	42.6	60.1
Rae Bareli	32.8	29.3	25.2	44.2	42.9
Rampur	24.2	41.6	16.2	29.0	42.8
Saharanpur	27.2	36.4	20.3	30.2	45.5
Sant Kabir Nagar	37.1	53.2	16.7	35.0	78.9
Sant Ravidas Nagar	33.9	49.6	12.1	28.7	71.5
Shahjahanpur	19.5	44.1	6.8	28.6	41.1
Shrawasti	32.4	44.5	19.0	42.3	51.4
Siddharthnagar	41.8	37.8	13.6	51.2	75.1
Sitapur	44.4	33.6	30.7	45.2	37.3
Sonbhadra	33.2	32.2	20.3	42.2	41.0
Sultanpur	27.9	44.8	18.0	30.2	47.7
Unnao	40.1	44.8	17.1	39.0	77.8
Varanasi	33.3	54.0	17.3	27.0	75.6
Uttar Pradesh	31.3	40.6	20.2	33.5	55.2

Note: ¹ Women who had last live/still birth during three years preceding the survey. ² Women who reported at least one complication of pregnancy. ³ Women who reported at least one post delivery complication.

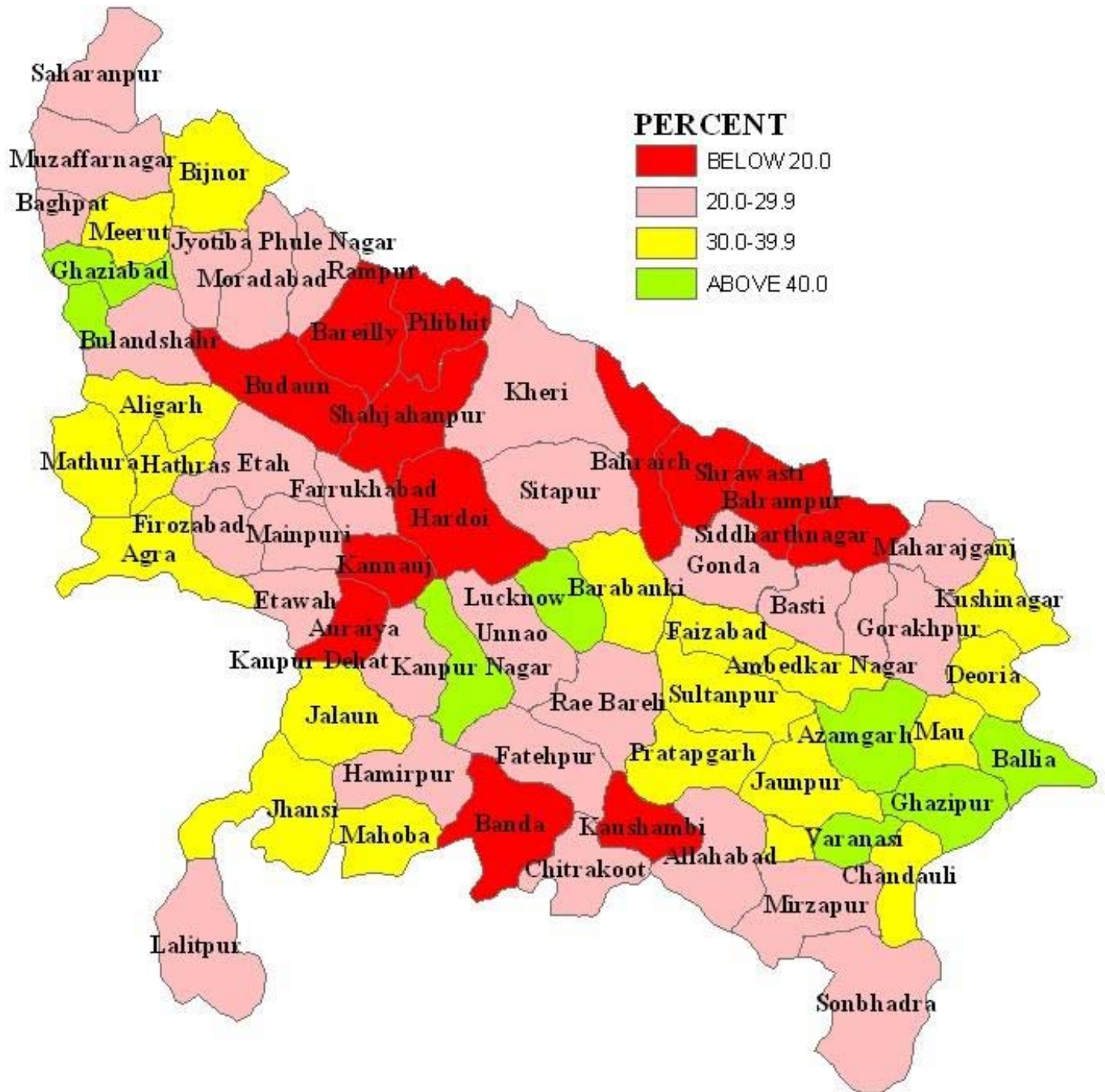
in Bahraich. The incidence of all three types of complications seems to be linked with each other in varying proportions.

In most of the districts of Uttar Pradesh about half of the women received some kind of antenatal care. In spite of a large proportion of women having contact with a doctor or any other health workers during the antenatal period, in all the districts (except Chandauli, Etawah and Mau) less than 55 percent of the women sought treatment for pregnancy complication. Similarly, among women who experienced at least one symptoms of postpartum complication, the proportion seeking treatment also varies across the districts, ranging from 26 percent in Pilibhit to 86 percent in Mau.

MAP-3
Percentage of Women Received Three or More Antenatal Check-Ups



MAP-4
Percentage of Delivery Attended by Skilled Person



CHAPTER V

CHILD CARE AND IMMUNIZATION

Child health services under the Reproductive and Child Health (RCH) programme include health education to mothers on breast-feeding and services for immunization, Vitamin A supplements and Iron prophylaxis, treatment of diarrhoea and Acute Respiratory Infections (ARIs). The District Level Household Survey (DLHS) covered all the currently married women whose last surviving child was born during the three years preceding the survey, and information on those breastfeeding currently and duration of breastfeeding. They were also asked about awareness of diarrhoea management and danger signs of pneumonia and practices followed in case of episodes of diarrhoea and ARI among the children. Data on immunization, administering Vitamin A supplements and Iron prophylaxis was collected for the last two living children born after January 1, 1999/2001. This chapter presents an analysis of the data collected on the above aspects.

5.1 Breastfeeding

Educating mothers on correct breastfeeding practices and child nutrition is one of the components of the RCH programme. Infant feeding practices have significant effects on the health of both mothers and children. Mothers are affected through the influence of breastfeeding on the period of postpartum infertility, and hence on fertility levels and the length of birth intervals. These effects vary according to the duration and intensity of breastfeeding. Proper infant feeding, starting from the time of birth, is important for the physical and mental development of the child. Breastfeeding improves the nutritional status of young children and reduces morbidity and mortality. Breast milk not only provides important nutrients, but also protects the child against infection. The timing and type of supplementary foods introduced in an infant's diet have significant effect on the child's nutritional status.

As recommended by the World Health Organization (WHO), breastfeeding should be initiated immediately after birth and should be continued upto a minimum of six months. The WHO also suggests that the yellowish milk, known as colostrum, should be given to the baby because it provides protection against certain infections. Afterwards, it has to be supplemented with other semi-solid and solid foods at the proper time intervals.

Table 5.1 shows the breastfeeding practices among children born during the three years preceding the survey in Uttar Pradesh. Although, the practice of breastfeeding is common in Uttar Pradesh, the initiation of breastfeeding within two hours of the birth of the child is not always followed. Only eight percent of the children were breastfed within two hours of birth, and 17 percent were breastfed within one day of birth (including those who were breastfed within two hours of birth), while 83 percent of children were breastfed after one day of birth. As shown in Figure 5.1, about 9 percent of the children were breastfed within one day of birth but after two hours of birth, 47 percent were breastfed after the first day of birth but before 3 days, and 35 percent children were put to

the breast after three days. One percent of the children were never breastfed. Seventy one percent of the women who gave birth to children during the three years preceding the survey squeezed the first milk from the breast before they began breastfeeding. Not more than 15 percent of children in any of the socio-economic groups shown in Table 5.1 were breastfed within two hours of birth. Only five percent of children from scheduled tribe were breastfed within two hours of birth, and 8 percent of children from scheduled castes were breastfed within one day of birth. Women who reside in rural areas, women who have had less school education or non-literate and women who live in households with a low or medium standard of living are much less likely to start breastfeeding their children early. A large proportion of children from rural areas (85 percent), Muslim children (84 percent), children from scheduled tribes (88 percent), children of non-literate mothers (86 percent), and children from households with a low standard of living (87 percent) were put to the breast after one day of birth.

Table 5.1 INITIATION OF BREASTFEEDING					
Percentage of children under age 3 whose mother started breastfeeding within two hours of births, within one day of birth, and after one day of birth and percentage whose mother squeezed the first milk from her breast before breastfeeding by selected background characteristics, Uttar Pradesh, 2002-04					
Background characteristic	Percentage started breastfeeding			Percentage whose mother squeezed first milk from breast	Number of children
	Within two hours of birth	Within one day of birth ¹	After one day of birth		
Residence					
Rural	7.1	14.7	84.6	70.8	21,082
Urban	10.3	22.0	76.3	70.6	7,158
Mother's education					
Non-literate	6.3	13.4	85.8	72.7	18,772
0-9@ years	8.9	18.2	80.8	70.6	5,887
10 and above	14.6	30.3	67.8	60.6	3,574
Religion					
Hindu	8.3	16.9	82.2	70.7	22,486
Muslim	6.4	15.1	83.7	70.9	5,640
Other	9.3	25.8	70.0	64.5	114
Caste/tribe#					
Scheduled caste	7.6	15.4	83.8	70.2	6,964
Scheduled tribe	4.7	10.8	87.6	74.0	285
Other backward class	7.4	15.6	83.6	72.1	14,061
Other	9.6	20.1	78.5	67.9	6,600
Standard of living index					
Low	6.0	12.5	86.9	72.6	16,002
Medium	9.0	18.5	80.3	70.6	7,666
High	12.8	27.6	70.7	64.6	4,572
Total	7.9	16.6	82.5	70.8	28,240
Note: Table based on youngest living child born during the three years preceding the survey					
Table includes 7 children with missing information on mother's education who were not shown separately					
¹ Includes children whose mother started breastfeeding within two hours of births					
@ Literate mother with no years of schooling are included. #Total figure may not add to N due to do not know and missing cases.					

The custom of squeezing the first milk from the breast before breastfeeding is widely practised in every group, but it is slightly higher among the mothers of scheduled tribe children, children with Muslim and Hindu religion, and children whose mothers are

Non-literate. Children who live in households with a high standard of living are less likely than children in other households to have mothers who squeezed the first milk from the breast before breastfeeding. There is no Rural-Urban differential of the custom of squeezing the first milk from the breast before breastfeeding. Mothers of children born in the three years preceding the survey were asked whether the child had been fed breast milk exclusively and if so, what the duration was. Here it needs to be mentioned that exclusive breastfeeding includes breastfeeding the child without giving it anything including water. Results are shown in Table 5.2.

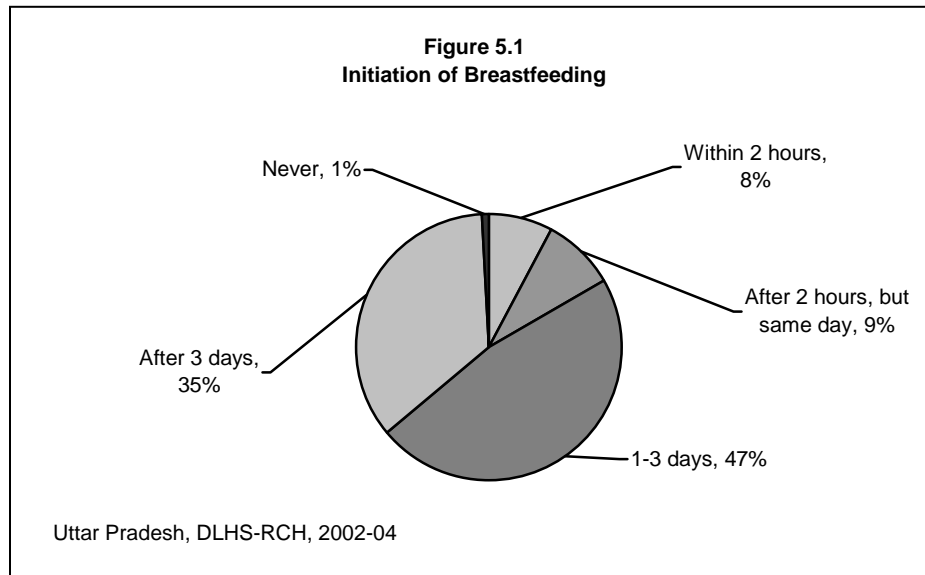


Table 5.2 EXCLUSIVE BREASTFEEDING BY CHILD'S AGE
Percentage of children under age 3 years by exclusive breastfeeding and child's age in month, Uttar Pradesh, 2002-04

Age in months	Status of exclusive breastfeeding			Number of children
	Exclusive breastfeeding	At least 4 months	At least 6 months	
<2	53.2	*	*	1,367
2-3	50.2	*	*	1,991
4-5	34.9	53.4	*	2,083
6-7	25.2	61.9	36.5	2,253
8-9	14.3	61.0	35.1	2,222
10-11	8.8	57.2	32.6	1,531
12-13	7.0	56.8	36.6	1,623
14-15	4.9	58.3	37.2	1,531
16-17	2.3	55.7	32.7	1,674
18-19	2.1	58.0	32.5	1,682
20-21	1.4	55.9	32.4	1,600
22-23	1.2	53.2	30.7	1,377
24-25	2.5	55.4	35.8	1,414
26-27	1.9	55.4	33.0	1,207
28-29	1.5	58.5	38.7	1,181
30-31	1.4	55.2	32.2	1,243
32-33	1.6	57.6	34.6	1,215
34-35	1.1	50.6	31.7	1,045
< 4 months	51.4	*	*	3,358
4-6 months	32.2	55.4	*	3,220
7-9 Months	17.3	62.3	36.3	3,339

Note: Table based on youngest living child born during the three years preceding the survey

In Uttar Pradesh, more than a half of children under four months of age are exclusively breastfed. The percentage of infants exclusively breastfed drops steadily from 53 percent for children under 2 months of age to 35 percent for children who are 4-5 months old. About 55 percent of children in the age group 4-6 months were exclusively breastfed up to 4 months and 36 percent of children in the age group 7-9 months are exclusively breastfed upto 6 months.

5.1.1 Breastfeeding by Districts

Table 5.3 shows that in all the districts of Uttar Pradesh, except Ghaziabad, not more than 20 percent of the children were put to the breast within two hours of birth. Less than 2 percent of the children were breastfed within two hours of birth in Kaushambi, Budaun and Sant Ravidas Nagar districts. In districts other than Bulandshahar, Ghaziabad and Mathura, more than two third of the children were put to the breast after one day of birth. In 4 of the 70 districts, the mothers of less than 50 percent children squeezed the first milk before breastfeeding.

Table 5.3 BREASTFEEDING BY DISTRICT

Percentage of children under age 3 who started breastfeeding within two hours of births, within one day of birth and after one day of birth, percentage whose mother squeezed the first milk from her breast before breastfeeding and percentage of children who exclusively breastfeed by District, Uttar Pradesh, 2002-04

District	Percentage started breastfeeding			Percentage whose mother squeezed first milk from breast	Exclusive breastfeeding ²
	Within two hours of birth	Within one day of birth ¹	After one day of birth		
Agra	6.1	18.4	80.2	71.2	61.1
Aligarh	10.7	23.0	74.8	72.0	57.1
Allahabad	2.6	8.8	90.0	83.2	5.7
Ambedaker Nagar	3.6	13.7	86.1	58.0	7.1
Auraiya	5.6	11.0	88.3	96.0	45.8
Azamgarh	7.7	16.4	83.3	56.7	11.7
Baghpat	4.6	13.4	85.6	75.9	42.5
Bahraich	7.1	13.6	86.0	66.4	25.0
Ballia	11.4	21.3	77.6	57.6	32.9
Balrampur	4.3	13.3	86.1	45.9	21.2
Banda	7.0	11.6	87.9	89.8	12.1
Barabanki	6.7	13.6	85.7	74.4	18.1
Bareilly	6.0	12.7	86.7	84.0	79.5
Basti	6.7	12.5	87.1	51.8	16.0
Bijnor	11.5	20.7	76.7	71.1	66.6
Budaun	1.9	3.1	94.6	89.4	70.9
Bulandshahar	17.5	34.6	64.0	61.3	68.1
Chandauli	5.6	13.6	85.9	54.2	7.2
Chitrakoot	9.8	15.7	83.3	76.9	3.6
Deoria	9.6	22.7	76.8	51.5	6.0
Etah	2.0	8.9	89.3	88.8	77.1
Etawah	6.3	12.9	84.8	90.6	57.2
Faizabad	5.6	12.0	87.1	62.2	4.0
Farrukhabad	4.2	7.5	91.7	94.8	55.5
Fatehpur	3.6	10.0	89.6	92.2	10.3
Firozabad	2.5	10.8	88.7	84.4	69.3
Gautam Buddha Nagar	17.4	31.9	67.3	66.9	75.2
Ghaziabad	23.7	38.4	60.9	59.0	68.9
Ghaziabad	8.6	16.2	82.9	52.4	17.0
Gonda	4.9	8.8	90.3	59.8	9.0
Gorakhpur	9.8	28.9	71.0	59.0	28.5
Hamirpur	6.0	18.8	81.2	75.6	3.9
Hardoi	13.1	17.8	81.8	81.9	60.4
Hathras	5.2	13.1	85.1	78.6	65.7
Jalaun	6.3	15.2	84.8	88.1	8.1
Jaunpur	10.5	19.3	80.1	71.2	8.0
Jhansi	9.0	20.8	78.2	81.1	5.5
Jyotiba Phule Nagar	5.3	11.9	87.7	79.5	74.7
Kannauj	4.8	7.9	90.5	88.1	80.3
Kanpur Dehat	4.8	11.2	88.4	91.1	5.6

Note: Table based on youngest living child born during the three years preceding the survey
¹ Includes children who started breastfeeding within two hours of births. ² Based on youngest children age 6 months and older at the time of survey and breastfeed exclusively 6 months or more as mother reported.

Contd.

Table 5.3 BREASTFEEDING BY DISTRICT (Contd.)					
Percentage of children under age 3 who started breastfeeding within two hours of births, within one day of birth and after one day of birth, percentage whose mother squeezed the first milk from her breast before breastfeeding and percentage of children who exclusively breastfeed by District, Uttar Pradesh, 2002-04					
District	Percentage started breastfeeding			Percentage whose mother squeezed first milk from breast	Exclusive breastfeeding ²
	Within two hours of birth	Within one day of birth ¹	After one day of birth		
Kanpur Nagar	8.9	21.2	78.2	80.5	2.0
Kaushambi	1.5	3.8	94.7	89.2	4.1
Kheri	5.8	8.7	89.8	75.0	20.3
Kushinagar	13.0	23.5	76.1	61.7	22.1
Lalitpur	5.3	17.8	82.0	87.5	6.1
Lucknow	6.0	16.5	82.7	79.1	9.9
Maharajganj	10.1	22.9	76.4	58.4	33.9
Mahoba	6.8	16.8	83.2	86.9	5.9
Mainpuri	5.4	10.0	88.9	80.4	73.8
Mathura	14.9	41.5	56.3	56.0	64.5
Mau	5.9	11.8	87.6	61.8	14.6
Meerut	5.2	14.6	83.4	70.8	62.6
Mirzapur	5.2	11.1	88.4	72.1	11.9
Moradabad	7.6	16.9	82.4	64.5	72.4
Muzaffarnagar	5.8	16.4	82.2	79.9	46.6
Pilibhit	11.9	13.1	86.2	83.4	58.2
Pratapgarh	9.9	13.9	85.4	74.9	12.9
Rae Bareli	5.3	9.8	88.8	75.3	28.6
Rampur	16.3	30.7	67.5	78.5	64.8
Saharanpur	14.4	28.6	69.4	58.0	68.7
Sant Kabir Nagar	5.0	15.4	84.3	41.7	17.9
Sant Ravidas Nagar	1.9	7.3	91.7	76.1	3.5
Shahjahanpur	17.8	26.1	73.9	81.1	64.6
Shrawasti	2.8	8.5	90.2	45.7	37.3
Siddharthnagar	4.4	11.9	87.3	38.2	5.3
Sitapur	9.5	17.9	81.9	72.5	19.0
Sonbhadra	11.2	18.6	81.0	65.5	18.7
Sultanpur	10.3	18.4	80.0	61.4	14.9
Unnao	2.8	7.8	91.6	86.0	4.8
Varanasi	4.3	11.2	88.4	67.4	14.1
Uttar Pradesh	7.9	16.6	82.5	70.8	36.3

Note: Table based on youngest living child born during the three years preceding the survey
¹ Includes children who started breastfeeding within two hours of births. ² Based on youngest children age 6 months and older at the time of survey and breastfeed exclusively 6 months or more as mother reported.

There is a great deal of variation in the extent of exclusive breastfeeding for six months. It is highest in Kannauj (80 percent) and lowest in Kanpur Nagar (2 percent).

5.2 Immunization of Children

The immunization of children against six serious but preventable diseases namely, tuberculosis, diphtheria, pertusis, poliomyelitis and measles is the main component of the child survival programme. As part of the National Health Policy, the National Immunization Programme is being implemented on a priority basis. The Government of India initiated the Expanded Programme on Immunization (EPI) in 1978 with the

objective of reducing morbidity, mortality and disabilities among children from six diseases.

The Universal Immunization Programme (UIP) was introduced in 1985-86 with the objective of covering at least 85 percent of all infants against the six vaccine preventable diseases by 1990. This scheme has been introduced in every district of the country. The standard immunization schedule developed for the child immunization programme specifies the age at which each vaccine should be administered and the number of doses to be given. Routine vaccinations received by infants and children are usually recorded on a vaccination card that is issued for the child.

In the first phase of Round II, all the women with last and last but one living child born after January 1, 1999 were asked whether the child/children had received the vaccination against polio, tuberculosis (BCG), diphtheria, whooping cough (pertussis), tetanus (DPT) and measles, and for the second phase, the reference period was from January 1, 2001. For Polio and DPT, further information on polio at birth and number of doses was asked. Children who received BCG, three doses of DPT and polio (excluding polio 0) and measles are considered to be fully vaccinated. Information on the source of immunization for last dose and in case where immunization was not given, the reason for not giving immunization was also compiled.

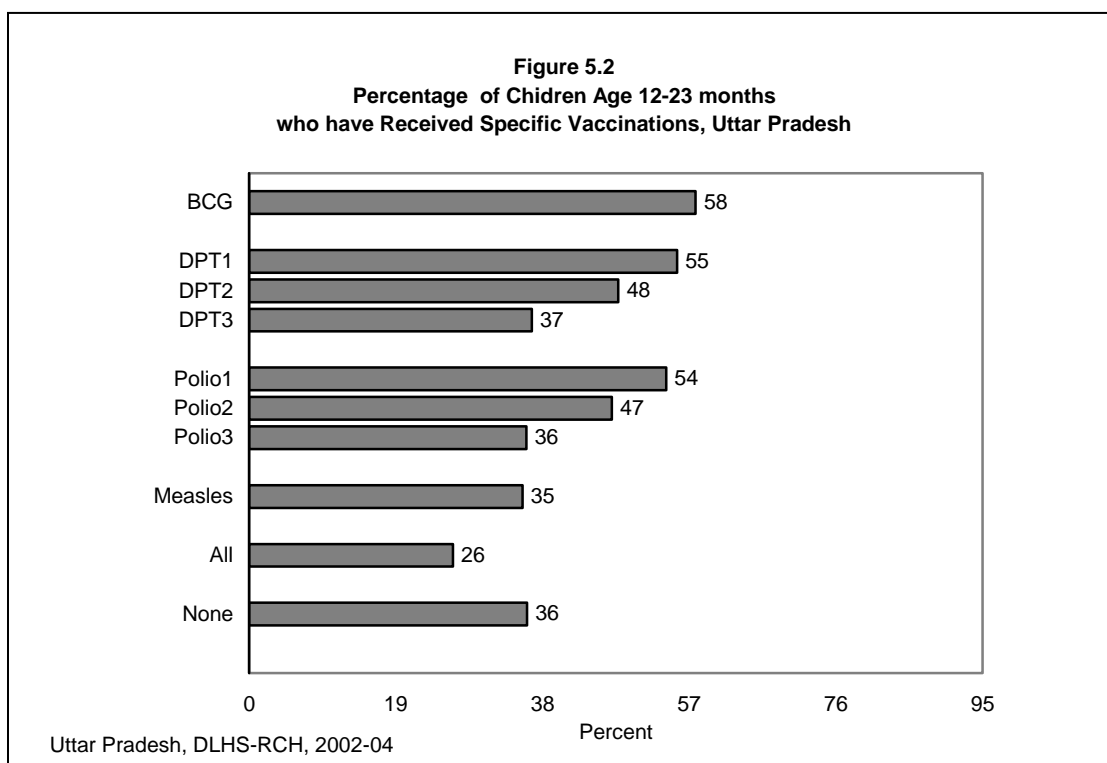
Table 5.4, Figures 5.2 and 5.3 present vaccination coverage rates for children in the age group 12-25 months. Only 27 percent of the children are fully vaccinated, and around 36 percent have not received any routine vaccination. Coverage of each vaccination except Polio 0 is much higher than the percentage fully vaccinated. BCG, the first dose of DPT and Polio vaccine has each been given to more than a half of children (Figure 5.3). Only 37 percent of the children have received three doses of DPT and 36 percent of the children received 3 doses of Polio, and only 35 percent of the children have been vaccinated against measles. Moreover, not all children who begin the DPT and polio vaccination series go on to complete them. The differences between the percentage of children receiving the first and third doses is 18-percentage points for DPT and polio.

There has been some improvement in full vaccination coverage in Uttar Pradesh since the time of Round I in 1998-99. These data indicate that despite the progress that has been made in immunization coverage for children in Uttar Pradesh, coverage levels are still low and a large proportion of children who received some early vaccinations dropped out of the programme before receiving all of the recommended vaccinations.

Table 5.4 VACCINATION OF CHILDREN												
Percentage of children aged 12-23 months who received vaccination according to some selected background characteristics, Uttar Pradesh, 2002-04												
Background characteristic	Polio 0	BCG	DPT			Polio			Measles	Full ¹ vaccination	No vaccination	Number of children
			1	2	3	1	2	3				
Residence												
Rural	12.8	55.4	53.5	45.0	32.8	51.9	44.1	32.2	32.4	22.8	37.3	7,639
Urban	33.6	64.7	60.7	56.1	47.8	60.0	55.5	46.9	44.2	37.0	32.2	2,613
Sex of the child												
Male	19.2	60.1	58.4	50.9	39.2	56.6	49.6	38.1	37.6	28.4	33.5	5,423
Female	16.9	55.2	52.0	44.3	33.7	51.1	44.1	33.4	32.9	24.2	38.8	4,829
Birth order												
1	28.3	67.3	65.5	58.0	47.0	64.0	56.8	46.4	45.3	35.5	26.2	2,272
2	21.4	64.8	62.4	53.4	41.4	61.1	52.9	40.7	41.4	31.3	28.6	2,164
3	17.5	60.5	58.3	51.0	37.7	56.4	50.3	36.8	36.3	27.1	33.3	1,727
4+	11.0	47.6	44.8	37.9	27.8	43.7	37.1	27.2	26.4	18.6	46.4	4,089
Mother's education												
Non-literate	9.6	47.0	44.5	36.2	24.9	43.3	35.7	24.7	24.3	16.3	45.6	6,832
0-9@ years	23.4	72.4	70.0	62.8	51.3	68.0	61.2	49.3	47.3	36.9	22.4	2,155
10 years and above	55.2	91.1	89.1	85.1	75.0	88.1	83.8	73.8	75.3	63.4	6.9	1,264
Religion												
Hindu	18.7	61.2	58.9	51.1	39.0	57.4	50.1	38.1	38.0	28.4	32.4	8,161
Muslim	14.8	43.5	41.0	34.1	26.8	40.1	34.1	26.8	24.5	18.4	50.6	2,052
Other	(40.0)	(84.0)	(84.0)	(84.0)	(68.0)	(84.0)	(82.0)	(68.0)	(66.0)	(54.0)	(16.0)	40
Caste/tribe#												
Scheduled caste	12.2	53.7	51.4	43.2	30.9	49.9	42.0	30.1	28.4	20.0	39.3	2,473
Scheduled tribe	17.8	35.9	37.4	24.8	21.6	33.2	24.4	22.1	22.0	16.4	55.0	91
Other backward class	15.1	54.4	52.8	45.2	34.1	51.5	44.4	33.3	32.8	24.2	38.7	5,184
Other	31.2	70.3	66.0	59.2	48.7	64.5	58.4	48.1	49.0	38.1	25.6	2,371
Standard of living index												
Low	9.0	49.1	47.8	39.0	27.1	46.4	38.2	26.6	26.8	18.3	43.1	5,774
Medium	18.1	61.3	57.6	51.2	40.1	56.8	50.8	39.4	37.5	28.1	33.5	2,,868
High	51.0	82.4	78.3	73.6	64.6	76.4	72.0	63.1	62.5	52.8	14.6	1,610
Total	18.1	57.8	55.4	47.8	36.6	54.0	47.0	35.9	35.4	26.4	36.0	10,253

Note: Table includes only last and last but one living child born since 1.1.1999/1.1.2001. Total includes 3 children with missing information sex, 31 on birth order, and 76 on mother's education were not shown separately. @ Literate mothers with no years of schooling are included. # Total figure may not add to N due to do not and missing cases. ¹ BCG, three injection of DPT, three doses of Polio (excluding Polio 0) and measles. () Based on less than 50 unweighted cases.

The data indicates that the coverage of each type of vaccine is more in urban areas than in rural areas. A little below than one fourth of the children in rural areas had received all the recommended vaccinations by the time of the survey, compared with 37 percent in urban areas. Differentials in rural-urban against polio 0 may be observed from the table. Thirty four percent of the children had received polio vaccine at the time of birth in urban areas whereas just below half of it received the same in the rural areas.



Male children (28 percent) are more likely than female children (24 percent) to be fully vaccinated. Male children are also much more likely than female children to have received most of the individual vaccinations. The relationship between vaccination coverage and birth order is consistently negative for almost all the vaccinations. A large majority of first order births occur to younger women who are more likely than older women to utilize child health care services. As with the use of child health care services, there is a positive relationship between mother's education and children's vaccination coverage. Only 16 percent children of non-literate mothers are fully vaccinated compared to 37 percent of children with mothers' education below high school and 63 percent of mothers who have at least completed high school. Hindu children are much more likely than Muslim children to have received each of the recommended vaccinations. Children from other Castes are more likely to have BCG, DPT-1, DPT-2, DPT-3, Polio-1, Polio-2, Polio-3 and measles vaccinations than their counterparts. The standard of living index of the household has a strong positive relationship with vaccination coverage. Fifty three percent of children from households with a high standard of living are fully vaccinated, whereas only 18 percent of children are from households with a low standard of living.

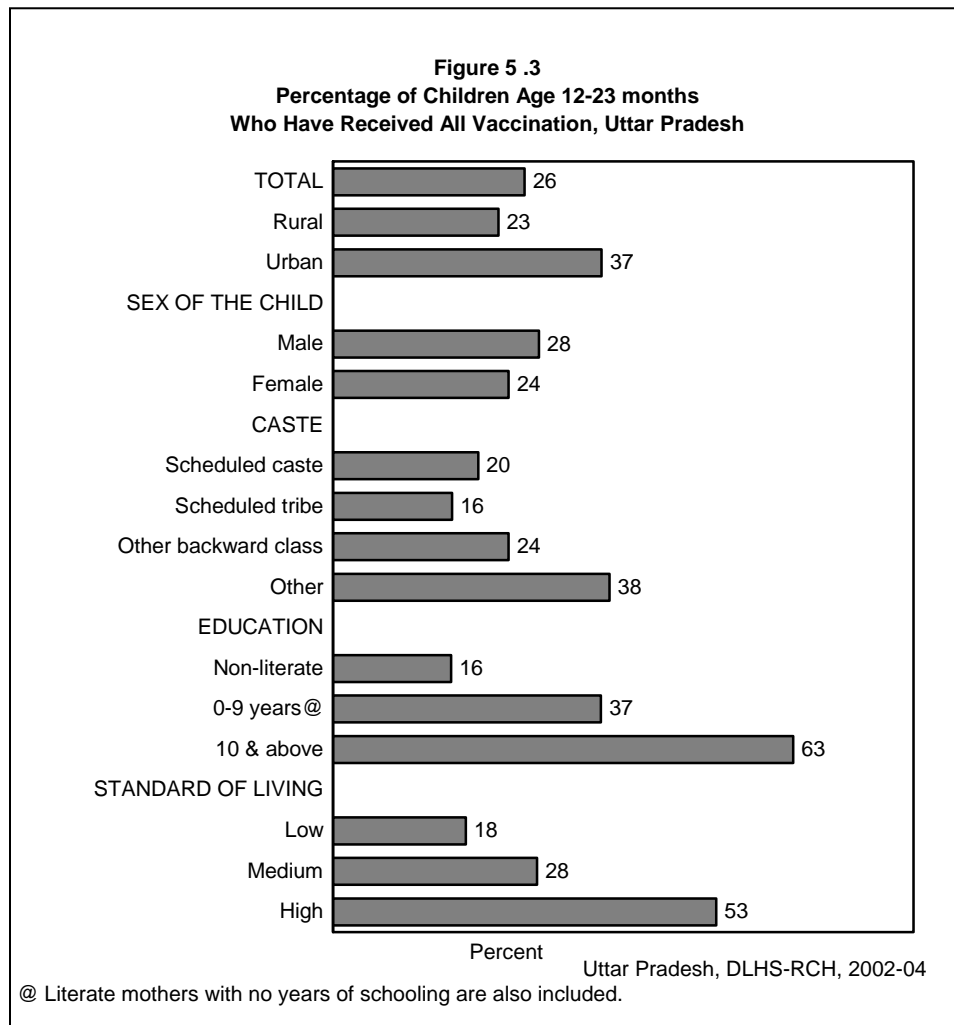


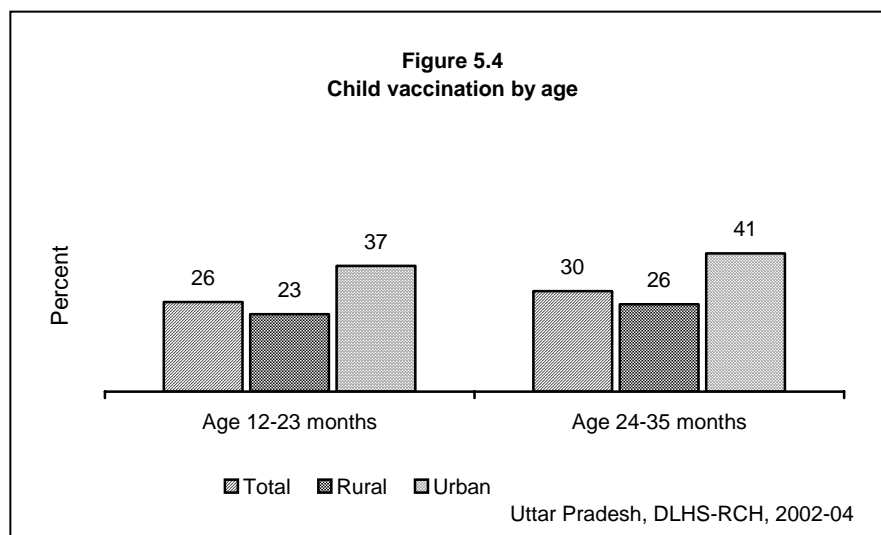
Table 5.5 shows the percentage of children in the age group 12-23 months and 24-35 months with a vaccination card, and the percentage who received various vaccinations during the first year of life by current age of children and place of residence. The interviewer was shown this vaccination card.

The proportion of children fully vaccinated by age 12 months increased slightly from 26 percent for children in the age group 12-23 months to 30 percent for children in the age group 24-35 months. A rural-urban differential for the coverage of full vaccination is also observed. Twenty third percent of children in the age group 12-23 months are fully vaccinated against 26 percent of children in the age group 24-35 months in rural areas, and this gap is much wider in urban areas (Figure 5.4). Only 37 percent of children in the age group 12-23 months had received all vaccinations in urban areas compared to 41 percent with children in the age group 24-35 months. Younger children

aged 12-23 months are more likely to receive each type of vaccine except Polio-3, DPT-3 and measles.

Table 5.5 CHILDHOOD VACCINATION RECEIVED BY 12 MONTHS OF AGE						
Percentage of children age 12-23 months and 24-35 months with a vaccination card that shown to the interviewer and percentage who received specific vaccinations by 12 months of age according to residence, Uttar Pradesh, 2002-04						
Vaccination status	Total		Rural		Urban	
	12-23 months	24-35 months	12-23 months	24-35 months	12-23 months	24-35 months
Vaccination card shown to interviewer	13.6	10.0	12.3	8.3	17.3	14.5
Percentage vaccinated by 12 months of age						
Polio 0	18.1	17.4	12.8	11.4	33.6	34.0
BCG	57.8	57.8	55.4	55.0	64.7	65.5
DPT injection						
No DPT	43.7	43.5	45.4	45.7	38.8	37.3
1	7.5	6.0	8.6	6.9	4.6	3.7
2	11.2	9.9	12.2	10.9	8.3	7.2
3	36.6	39.1	32.8	35.1	47.8	50.5
Don't remember/missing	0.9	1.4	1.0	1.4	0.6	1.4
Polio doses						
No Polio	44.4	44.4	46.4	46.7	38.8	38.1
1	7.0	5.4	7.9	5.9	4.6	3.8
2	11.2	10.3	12.0	11.4	8.6	7.2
3	36.1	38.1	32.3	34.1	47.2	49.1
Don't remember/missing	1.3	1.9	1.5	1.9	0.8	1.7
Measles	35.4	39.8	32.4	36.8	44.2	48.3
Full ¹ vaccination	26.4	29.6	22.8	25.7	37.0	40.7
No vaccination at all	36.0	35.1	37.3	36.9	32.2	30.0
Number of children	10,253	10,639	7,639	7,821	2,613	2,819

Note: Table includes only last and last but one living child born since 1.1.1999/1.1.2001
¹ BCG, three injection of DPT, three doses of Polio (excluding Polio 0) and measles



5.3 Source of Immunization

Table 5.6 gives the percent distribution of children under three years of age who have received any vaccination by the source of last vaccine, according to place of residence and availability of health facilities in the village. The sub-centre is the primary provider of childhood vaccinations in Uttar Pradesh. Most of the children (66 percent) were immunized at the government health facilities and only six percent at private health facilities. Further, among the children immunized, one fourth of them had received vaccination from the government/municipal hospital, 19 percent received from sub-centre and 18 percent from community health centre or from primary health centre. The percentage of children receiving vaccination from the private sector is considerably lower in rural areas (7 percent) than in urban areas (28 percent). Even in urban areas, however, 62 percent of children received their vaccination from the government health facility. Children from those villages where health facilities are available are slightly more likely to receive vaccination from the government health facility.

Table 5.6 SOURCE OF CHILDHOOD VACCINATION					
Percent distribution of children under age 3 who have received any vaccination by source of last vaccination, according to place of residence and availability of health facilities in the village, Uttar Pradesh, 2002-04					
Source of vaccination	Total	Residence		Availability of health facility ¹ in the village	
		Rural	Urban	No	Yes
Government health sector					
Government/municipal hospital	24.5	17.7	42.2	18.7	16.2
Community/primary health centre	18.3	20.3	13.1	18.9	22.4
Sub-centre	19.0	24.1	5.6	21.7	27.8
RCH/MCP camp	3.8	4.9	1.0	5.9	3.5
Private health sector					
Private hospital	5.3	2.3	13.4	2.4	2.1
Private doctor	7.5	4.8	14.7	5.1	4.2
ISM ² health facility	0.9	0.6	1.9	0.6	0.5
Other	19.4	24.0	7.3	25.0	22.4
Do not remember	1.0	1.2	0.6	1.3	0.9
Missing	0.2	0.2	0.2	0.3	0.1
Total percent	100.0	100.0	100.0	100.0	100.0
Number of children	19,136	13,853	5,283	8,357	5,496
Note: Table includes last and last but one living children born in the three years preceding the survey					
¹ Includes sub-centre, primary health centre, Community health centre or referral hospital, government hospital, and government dispensary within the village					
² Either government or private health facility of Indian System of Medicine					

5.4 Reason for Not Immunizing the Children

Table 5.7 presents the percent distribution of children under the age of three years who did not receive any vaccination by reason as reported by the mother according to place of residence and availability of health facilities in the village. About 31 percent of the children did not receive any vaccination because the mothers of children were unaware of the need for immunization, and 11 percent of children were not vaccinated, as the

mothers feel that they were too young. The other reasons for not immunizing the children as reported by the mothers were place or time of vaccination was not known (14 percent), place or time of vaccination was inconvenient (8 percent), fear of side effects (7 percent), no faith in vaccination (4 percent) and ANM absent/ vaccine not available (11 percent), and other reasons (6 percent). The percentage of children who did not receive any vaccination is considerably lower in rural areas (29 percent) than in urban areas (36 percent), as they were unaware of the need for immunization as reported by their mothers. Children from those villages where health facilities are available are less likely to report that they were unaware of the need for immunization as compared to those villages where health facilities are not available. Where health facilities were available, fear of side effects and no faith in immunization were reported more as reasons for not immunizing the children compared to the areas without having the same.

Table 5.7 REASON FOR NOT GIVING VACCINATION					
Percent distribution of children under age 3 who did not receive any vaccination by reason reported by mother for not giving vaccination, according to place of residence and availability of health facilities in the village, STATE, 2002-04					
Reason	Total	Residence		Availability of health facility ¹ in the village	
		Rural	Urban	No	Yes
Unaware of need for immunization	30.5	28.9	35.8	29.7	27.3
Place/time unknown	13.5	14.1	11.4	13.9	14.5
Place/time inconvenient	7.7	8.5	5.0	9.2	7.1
Fear of side effect	6.9	6.7	7.3	5.9	8.3
No faith in Immunization	3.9	3.5	5.2	3.1	4.3
ANM absent/vaccine not available	10.5	12.0	5.3	12.8	10.5
Long waiting time	0.3	0.4	0.2	0.4	0.2
Child too young	11.1	10.7	12.4	10.8	10.4
Family problems ²	9.3	8.4	12.5	8.1	9.1
Other	5.9	6.2	4.6	5.4	7.9
Total percent	100.0	100.0	100.0	100.0	100.0
Number of children	13,150	10,188	2,962	6,723	3,466

Note: Table includes last and last but one living children born in the three years preceding the survey
¹ Includes sub-centre, primary health centre, Community health centre or referral hospital, government hospital, and government dispensary within the village
² Includes mother too busy, family problems, including illness of mother, and illness of child

5.5 Vitamin A and IFA Supplements

Vitamin A deficiency is one of the most common nutritional deficiency disorders in the world, affecting more than 250 million children worldwide (Bolem et. al., 1997). The child survival programme also includes administration of five doses of Vitamin A for prevention of night blindness and distribution of IFA for iron supplement. In Round II, mothers of children born during the three years before the survey were asked whether their children had received a dose of Vitamin A and IFA tablets/syrup. Those who said that their children had received a dose of Vitamin A and IFA tablets/syrup were further asked how many doses were given. Table 5.8 shows the percentage of children in the age group 12-35 months who received at least one dose of Vitamin A and IFA tablets/syrup by selected background characteristics. In the state of Uttar Pradesh as a whole, 12

Table 5.8 VITAMIN A AND IFA SUPPLEMENTATION FOR CHILDREN			
Percentage of children age 12-35 months who have received at least one dose of Vitamin A and iron folic acid tablets/syrup, according to selected background characteristics, Uttar Pradesh, 2002-04			
Background characteristic	Percentage who received at least one dose of vitamin A	Percentage who received iron folic acid tablets/syrup	Number of children
Age of the child			
12-23 months	11.1	2.6	10,253
24-35 months	11.9	2.3	10,639
Sex of the child			
Male	12.4	2.7	11,027
Female	10.5	2.2	9,865
Birth order			
1	16.1	3.8	4,550
2	13.6	2.6	4,348
3	12.2	2.7	3,518
4+	7.7	1.5	8,473
Residence			
Rural	10.1	2.0	15,460
Urban	15.5	3.7	5,432
Mother's education			
Non-literate	7.4	1.4	13,969
0-9 years@	15.4	3.0	4,319
10 years and above	27.0	7.0	2,599
Religion			
Hindu	12.7	2.4	16,539
Muslim	6.6	2.2	4,276
Other	27.2	16.8	78
Caste/tribe #			
Scheduled caste	9.6	1.6	5,072
Scheduled tribe	9.2	0.9	187
Other backward class	10.8	2.0	10,478
Other	15.4	4.3	4,907
Standard of living index			
Low	8.4	1.6	11,737
Medium	11.2	2.3	5,752
High	22.7	5.6	3,403
Availability of health facility in the village¹			
Yes	11.3	2.4	5,757
No	9.4	1.8	9,703
Total	11.5	2.4	20,892
Note: Table includes last and last but one living children born in the three years preceding the survey. Total include includes 6 women with missing information on education who are not shown separately @ Literate mother with no years of schooling are also included here. # Total figure may not add to N due to do not know and missing cases. ¹ Includes sub-centre, primary health centre, Community health centre or referral hospital, government hospital, and government dispensary within the village.			

percent of the children received at least one dose of Vitamin A, and only seven percent received IFA tablets/syrup. This indicates that a large number of children in Uttar Pradesh did not receive Vitamin A supplement and very few children received IFA tablets/syrup supplementation.

Children in the age group 24-35 months are more likely to receive at least one dose of Vitamin A but it is observed reversely that children in age group 12-23 months are more likely to receive IFA tablets/syrup than children in the age group 24-35 months. Male children are more likely to receive Vitamin A and IFA tablets/syrup than female children. Children living in urban areas, children whose mother completed high school and above, children living in households with a high standard of living, and children living in those villages where health facilities are available are more likely to receive a dose of Vitamin A and IFA tablets/syrup. Children of birth order 4 or above are much less likely than children of birth order 1, 2 or 3 to receive any dose of vitamin A and IFA tablets/syrup. Similarly, children from Scheduled Tribes are less likely to receive at least one dose of Vitamin A and a dose of IFA tablets/syrup than other caste category.

5.6 Immunization Coverage by District

The coverage of vaccination rates for all vaccines for children in the age group 12-23 months in each district is presented in Table 5.9. There are inter-district differentials in the coverage for different vaccinations, and for children receiving all vaccinations and those that did not receive any vaccination at all. The percentage of children who are fully vaccinated ranges from 8 percent in Kaushambi to 55 percent in Deoria. In fifty percent of total districts, the coverage of full immunization is below one fourth (see Map-5) and is below the state average of 26 percent. More than two third of children in Kaushambi district were not vaccinated at all, and in thirty two districts, the percentage of children not vaccinated is higher than the state average. In nearly all the districts, fewer children have received the measles vaccine than any of the other vaccinations. The coverage of polio drops at the time of birth varies from the lowest in Balrampur (6 percent) to the highest in Rae Bareli (37 percent).

Table 5.9 CHILDHOOD VACCINATION BY DSITRICT

Percentage of children age 12-23 months with a vaccination card that shown to the interviewer and percentage who received specific vaccinations by district, Uttar Pradesh, 2002-04

District	Percentage vaccinated							At least one dose of Vitamin A
	Polio 0	BCG	DPT3	Polio3	Measles	Full ¹	None	
Agra	21.3	61.3	37.1	37.1	38.1	31.5	37.9	6.2
Aligarh	19.6	54.0	28.8	28.1	30.9	25.3	40.1	5.2
Allahabad	13.7	42.1	28.1	28.1	27.3	18.8	52.5	7.5
Ambedaker Nagar	10.5	67.3	42.9	42.0	43.1	29.5	23.7	12.2
Auraiya	9.6	55.9	37.1	37.1	41.7	32.0	37.7	12.7
Azamgarh	7.5	56.9	45.9	45.4	35.7	30.8	33.0	15.0
Baghpat	20.9	65.4	39.2	33.3	35.7	25.6	33.2	20.1
Bahraich	8.0	60.9	27.0	27.4	36.3	21.2	33.6	8.9
Ballia	24.7	75.0	60.5	59.8	58.5	51.6	18.8	21.3
Balrampur	5.8	45.0	23.2	23.2	28.9	16.3	42.7	6.9
Banda	13.1	43.6	19.2	19.2	24.2	15.4	51.8	7.8
Barabanki	17.5	47.4	27.2	27.2	28.0	22.5	46.3	13.5
Bareilly	11.4	44.5	35.6	35.1	30.9	23.8	50.3	1.2
Basti	20.9	74.5	50.3	50.6	45.9	35.0	17.3	9.7
Bijnor	26.7	66.3	50.7	50.9	47.0	36.9	30.1	14.2
Budaun	10.9	41.4	20.6	20.6	21.8	17.5	57.3	0.9
Bulandshahar	26.9	63.3	39.3	37.2	39.8	29.1	33.0	9.0
Chandauli	14.6	64.3	46.2	46.2	40.6	33.9	28.7	18.7
Chitrakoot	9.3	53.6	24.3	24.3	24.2	18.2	42.9	2.9
Deoria	21.2	84.7	64.6	63.9	68.0	55.3	12.8	4.3
Etah	16.7	40.5	18.0	17.0	22.3	12.2	57.8	4.0
Etawah	20.7	64.7	35.8	34.1	36.0	25.6	31.9	8.9
Faizabad	19.1	70.1	43.7	43.8	45.5	31.2	24.0	14.4
Farrukhabad	13.8	48.6	22.0	22.0	24.1	19.4	49.8	10.9
Fatehpur	13.7	56.7	39.7	40.8	36.0	27.3	32.9	18.1
Firozabad	12.4	42.2	25.9	26.3	26.9	22.1	57.3	7.2
Gautam Buddha Nagar	28.1	70.6	55.5	57.7	53.3	46.7	27.7	12.5
Ghaziabad	29.9	59.8	33.3	30.8	38.8	22.9	30.9	13.0
Ghazipur	11.7	64.8	36.5	36.2	38.5	27.2	29.8	28.7
Gonda	8.3	52.1	35.2	32.9	35.1	26.6	38.6	10.5
Gorakhpur	14.7	74.1	56.7	54.3	52.9	43.0	19.1	18.1
Hamirpur	11.0	75.5	44.0	44.0	42.6	34.5	18.9	15.1
Hardoi	14.8	46.7	28.3	22.6	27.2	18.3	49.3	0.9
Hathras	21.6	57.8	30.5	30.5	38.1	26.5	35.8	13.1
Jalaun	14.3	56.8	25.3	22.7	22.0	12.3	37.1	9.0
Jaunpur	16.8	54.7	40.3	39.6	36.9	28.4	34.4	15.7
Jhansi	17.1	70.2	32.9	33.4	33.8	24.5	23.4	25.3
Jyotiba Phule Nagar	9.2	53.9	26.7	28.0	27.6	21.2	40.5	5.5
Kannauj	9.1	52.2	35.9	35.3	32.7	25.0	43.5	7.1
Kanpur Dehat	10.1	66.1	37.9	36.4	36.1	29.7	27.2	14.5

Note: Table includes only last and last but one living child born since 1.1.1999/1.1.2001

¹ BCG, three injection of DPT, three doses of Polio (excluding Polio 0) and measles

Contd.

Table 5.9 CHILDHOOD VACCINATION BY DSITRICT (Contd)								
Percentage of children age 12-23 months with a vaccination card that shown to the interviewer and percentage who received specific vaccinations by district, Uttar Pradesh, 2002-04								
District	Percentage vaccinated							At least one dose of Vitamin A
	Polio 0	BCG	DPT3	Polio3	Measles	Full ¹	None	
Kanpur Nagar	29.9	79.1	65.1	66.2	47.8	44.2	18.3	26.8
Kaushambi	8.1	29.3	12.3	12.3	14.7	8.2	67.4	4.0
Kheri	18.1	41.5	27.5	26.3	25.1	17.2	50.3	21.9
Kushinagar	23.6	78.2	57.9	57.5	44.0	38.8	17.4	10.2
Lalitpur	15.5	58.4	30.4	30.7	25.6	23.3	37.7	14.3
Lucknow	30.6	69.1	46.4	45.0	51.9	41.5	25.6	27.8
Maharajganj	9.1	64.2	48.9	47.1	40.5	32.8	26.5	14.8
Mahoba	24.4	64.7	22.0	22.0	25.1	14.1	27.4	11.4
Mainpuri	20.3	64.3	39.1	38.4	28.5	19.4	30.4	6.7
Mathura	22.1	49.8	19.6	17.9	22.7	13.1	40.6	14.1
Mau	14.5	56.5	44.5	45.1	38.0	31.7	33.7	9.4
Meerut	24.3	62.8	35.7	34.1	34.5	27.9	33.0	7.6
Mirzapur	23.2	45.9	34.6	34.9	28.6	22.0	41.8	14.8
Moradabad	18.0	51.1	29.2	29.2	18.2	13.4	41.7	3.8
Muzaffarnagar	20.2	64.8	32.3	33.1	28.0	24.9	34.0	11.5
Pilibhit	12.1	41.7	23.6	23.1	24.8	16.2	49.8	0.5
Pratapgarh	25.6	65.4	37.3	36.5	46.5	29.2	29.8	15.0
Rae Bareli	37.1	69.4	35.2	36.0	42.5	24.4	24.7	16.2
Rampur	14.5	37.2	20.0	21.5	23.2	13.3	58.3	4.3
Saharanpur	19.8	61.6	42.6	45.6	42.0	30.2	30.6	10.1
Sant Kabir Nagar	8.6	59.5	32.4	32.9	36.3	20.9	32.7	12.9
Sant Ravidas Nagar	9.7	52.8	38.1	37.8	27.6	25.0	42.1	9.5
Shahjahanpur	15.9	47.8	42.1	41.9	31.0	22.2	42.4	2.0
Shrawasti	7.8	51.3	19.9	20.6	31.0	16.7	44.0	11.3
Siddharthnagar	11.1	67.3	46.9	46.5	45.9	36.3	23.6	18.0
Sitapur	12.5	37.5	18.8	16.0	21.3	10.9	48.3	8.3
Sonbhadra	10.0	54.9	32.5	31.3	32.0	24.8	40.8	24.0
Sultanpur	35.7	63.1	42.3	34.8	38.6	24.9	25.6	16.4
Unnao	8.8	54.7	31.6	31.6	36.2	26.4	40.0	15.3
Varanasi	31.4	64.3	48.5	48.8	42.7	39.0	30.6	8.1
Uttar Pradesh	18.1	57.8	36.6	35.9	35.4	26.4	36.0	11.5

Note: Table includes only last and last but one living child born since 1.1.1999/1.1.2001
¹ BCG, three injection of DPT, three doses of Polio (excluding Polio 0) and measles

District wise variations in the percentage of children who received at least one dose of Vitamin A are also shown in Table 5.9. The percentage of children in the age group 12-35 months who received at least one dose of Vitamin 'A' supplements ranges from one percent in Pilibhit to 29 percent in Ghazipur. Fifty percent of the districts stand out as having below the state average to receive at least one dose of Vitamin A.

5.7 Child Morbidity and Treatment

This section discusses the awareness, prevalence and treatment of diarrhoea and acute respiratory infection (ARI). Mothers of surviving children born during the three years preceding the survey were asked if their children suffered from cough and cold or diarrhoea during the two weeks preceding the survey, and if so, the type of treatment that had been given. Accuracy of all these measures is affected by the reliability of the mother's recall of when the diseases occurred.

5.7.1 Awareness of Diarrhoea

Diarrhoea is a major killer disease of children under five years of age. Deaths from acute diarrhoea are mostly due to dehydration resulting from loss of water and electrolytes. An attempt was made to collect data on awareness of diarrhoea management and the practice followed during the episode of diarrhoea. This has been presented in Table 5.10.

In Uttar Pradesh, 57 percent of the mothers with births three years preceding the survey were aware of what to do when a child had diarrhoea, as compared to 67 percent in Round I, and 13 percent were aware of ORS, which was seven percent points down from Round I. Twenty nine percent of the women were aware of salt and sugar solution. Some of the women also reported that they would continue normal food (3 percent), continue breastfeeding (2 percent), and give plenty of fluids (5 percent), and about 41 percent of women did not know what to give a child who had diarrhoea. As expected, knowledge of ORS is higher among urban women (30 percent) than rural women (8 percent), and among high school and above educated women (48 percent) as compared to non-literate women (6 percent). Women belonging to Schedule Tribes (6 percent) are less likely to know about ORS than women belonging to other caste groups (25 percent). Forty percent of women with children having a high standard of living know about ORS and it declines to 14 percent for women with a medium standard of living and 5 percent with a low standard of living. Knowledge of ORS is more among middle age groups and among younger women than among older women. Women from villages with availability of health facilities are more aware of diarrhoea management than women from other villages.

Table 5.10 AWARENESS OF DIARRHOEA								
Percentage of women who are aware of diarrhoea management, type of practice followed if child gets diarrhoea, and percentage of women whose child suffered ¹ from diarrhoea by selected background characteristics, STATE, 2002-04								
Background characteristic	Knowledge of diarrhoea management	Type of practices to be followed if child gets diarrhoea*					Do not know	Number of women
		Give ORS	Salt and sugar solution	Continue normal food	Continue breastfeeding	Give plenty of fluids		
Age								
15-24	56.3	12.3	27.1	2.7	2.0	3.9	42.4	12,306
25-34	61.3	14.8	31.5	3.2	2.3	5.2	38.2	14,649
35-44	55.3	9.5	25.6	2.1	1.8	3.5	44.1	3,257
Residence								
Rural	53.1	7.5	22.7	2.3	1.8	3.5	46.0	22,461
Urban	74.6	30.0	47.6	4.6	3.2	7.3	24.6	7,750
Mother's education								
Non-literate	50.4	5.6	18.7	1.8	1.5	2.9	48.5	20,045
0-9@ years	66.9	16.3	39.4	3.5	2.2	4.8	32.2	6,289
10 and above	87.6	48.0	66.1	7.2	4.9	12.3	12.2	3,870
Religion								
Hindu	57.2	12.8	27.9	3.0	2.2	4.5	41.8	24,096
Muslim	63.6	14.4	33.2	2.5	1.7	4.5	36.2	5,991
Other	87.0	41.3	61.2	8.2	9.5	13.9	13.5	124
Caste/tribe#								
Scheduled caste	51.8	8.1	21.9	2.6	2.2	3.3	47.1	7,405
Scheduled tribe	50.3	6.4	21.1	0.5	1.9	1.7	45.4	311
Other backward class	57.0	10.4	26.5	2.6	1.8	3.7	41.9	15,013
Other	69.6	24.7	42.4	4.0	2.8	7.5	30.3	7,123
Standard of living index								
Low	49.8	4.9	18.3	1.9	1.7	2.9	49.0	17,110
Medium	63.3	14.1	34.1	3.0	2.0	4.6	36.0	8,129
High	81.2	40.3	57.9	6.3	3.7	9.9	18.5	4,972
Availability of health facility² in the village								
Yes	53.6	8.5	24.1	2.0	1.6	3.9	44.9	8,420
No	52.8	6.9	21.8	2.4	1.9	3.3	46.7	14,042
Total	58.6	13.2	29.1	2.9	2.1	4.5	40.5	30,211

Note: Table based on women with living children born since 01.01.1999 for phase - I /01.01.2001 for phase - II. ¹ Last two weeks prior to survey.
 @ Literate mother with no years of schooling are included. # Total figure may not add to N due to do not know and missing cases.
² Includes sub-centre, primary health centre, Community health centre or referral hospital, government hospital, and government dispensary within the village. Total includes 7 women with missing information on education who are not shown separately

5.7.2 Treatment of Diarrhoea

During the two weeks before the survey, 20 percent of the women reported that their children suffered from diarrhoea (Table 5.11). Women, whose children had diarrhoea, were further asked about treatment with ORS, any other medical treatment and source of treatment. About 16 percent of the women mentioned that they gave ORS therapy, and 73 percent of the women said that their child had been treated at health facility. Use of ORS for the treatment of childhood diarrhoea in Uttar Pradesh is two times higher among urban women than among rural women.

No significant change was observed in usage of ORS for the treatment of childhood diarrhoea among women from those villages with health facilities and without health facility.

Table 5.11 TREATMENT OF DIARRHOEA					
Percentage of women who sought treatment whose child suffered from diarrhoea and by source of treatment, according to place of residence and availability of health facility in the village, STATE, 2002-04					
Sought treatment/ source of treatment	Total	Residence		Availability of health facility ² in the village	
		Rural	Urban	Yes	No
Percentage of women whose child suffered ¹ from diarrhoea	19.7	20.6	17.3	20.6	20.6
Number of women	30,211	22,461	7,750	8,420	14,042
Percentage of women whose child suffered ¹ from diarrhoea treated with ORS	15.5	12.6	25.7	12.6	12.6
Percentage of women whose child suffered ¹ from diarrhoea sought treatment	73.4	72.0	78.2	72.8	71.5
Number of women	5,962	4,621	1,341	1,735	2,886
Source of treatment					
Government health facility					
Hospital/dispensary	3.9	2.9	7.0	2.8	2.9
UHC/UHP/UFWC	0.1	0.1	0.0	0.1	0.1
CHC/ Rural hospital	1.3	1.5	0.8	1.4	1.5
Primary health centre	2.4	2.8	1.4	3.9	2.1
Sub centre	1.1	1.3	0.1	0.9	1.6
Private health facility					
NGO/Trust hospital/clinic	0.7	0.4	1.6	0.3	0.5
Private hospital clinic	75.3	74.9	76.6	76.0	74.2
ISM ³ facility	7.0	5.8	10.9	4.9	6.4
Home remedy	7.5	8.2	5.4	7.7	8.5
Other	5.3	6.0	3.1	5.9	6.2
Percent distribution of women who seek treatment by					
Doctor	89.7	88.4	93.6	88.4	88.5
ANM/Nurse/LHV	1.9	2.2	1.2	1.6	2.6
Dai (trained or untrained)	0.2	0.2	0.1	0.5	0.1
Relative/friends	1.4	1.6	0.5	1.6	1.7
Chemist/medical shop	5.7	6.2	4.1	6.9	5.8
ISM practitioner	1.1	1.3	0.6	0.0	1.4
Missing	0.0	0.1	0.0	0.0	0.1
Total percent	100.0	100.0	100.0	100.0	100.0
Number of women	4,374	3,325	1,049	1,263	2,062
Note: Table based on women with living children born since 01.01.1999 for phase - I /01.01.2001 for phase - II. ¹ Last two weeks prior to survey. ² Includes sub-centre, primary health centre, Community health centre or referral hospital, government hospital, and government dispensary within the village. ³ Either government or private health facility of Indian System of Medicine					

Among those mothers whose children suffered from diarrhoea during the last two weeks before the survey and those women who consulted or obtained advice, about three

fourth of women visited private hospitals/clinics and 7 percent of women treated their children through the Indian System of Medicine.

5.7.3 Awareness of Pneumonia

Another major killer disease among infants and children is Acute Respiratory Infections (ARI) including pneumonia. Early diagnosis and treatment with antibiotics can prevent a large proportion of ARI/pneumonia deaths. An attempt was made to understand the awareness level of pneumonia, and the proportion of children who had suffered from pneumonia during the last two weeks before the survey and their health seeking behaviour. This is presented in Table 5.12. It was found that a low proportion (58 percent) of women with births three years preceding the survey in Uttar Pradesh were aware of danger signs of pneumonia. The figure was highly reduced from 67 percent in Round I. A relatively high proportion of women in urban areas (62 percent) were aware of the danger signs of pneumonia as compared to women from rural areas (57 percent). Knowledge of danger signs of pneumonia is higher among older women (61 percent), women from other religion (74 percent), other castes category (63 percent), highly educated women (70 percent), women living in high standard of living household (68 percent), and women living in those villages without health facilities (58 percent).

Women, who were aware of the danger signs of pneumonia, were further asked about different types of signs of pneumonia. Most of the women mentioned about 'Chest in-drawing' (85 percent), 'difficulty in breathing' (58 percent), 'wheezing / whistling' (35 percent), 'pain in chest and productive cough' (30 percent), 'rapid breathing' (22 percent), 'condition get worse than before' (20 percent), 'not able to drink or take a feed' (14 percent), and 'excessive drowsy and difficulty in keeping awake' (7 percent).

5.7.4 Treatment of Pneumonia

About 14 percent of women reported that their child had suffered from pneumonia during two weeks before the survey; the corresponding figure was 15 percent in rural areas and 13 percent in urban areas (Table 5.13). The incidence of pneumonia varies little with availability of health facilities in the villages.

Table 5.13 also shows that the percentage of women whose children suffered from ARI symptoms in the last two weeks before the survey who sought advice/treatment and taken to a health facility or provider. Seventy nine percent of women received some advice or treatment whose children were ill with ARI. This percentage is relatively low in rural areas (77 percent) than in urban areas (86 percent) and village without health facilities (77 percent) than village with health facility (78 percent).

Among them who got advice for children ill with ARI, 75 percent of women visited private hospital/clinic, and only 5 percent went to government hospital/dispensary, whereas 4 percent of them obtained treatment through Indian System of Medicine.

Table 5.12 AWARENESS OF PNEUMONIA											
Percentage of women who are aware of danger signs of pneumonia by signs by selected background characteristics and availability of health facility in the village, State , 2002-04											
Background Characteristic	Percentage of women aware of danger signs of pneumonia	Number of women	Danger signs of ARI							Number of women	
			Difficulty in breathing	Chest in-drawing	Not able to drink or take a feeding	Excessive drowsy and difficulty in keeping awake	Pain in chest and productive cough	Conditions get worse than before	Wheezing/whistling		Rapid breathing
Age											
15- 24	53.7	12,306	57.5	82.3	12.9	7.0	29.5	19.4	33.3	19.7	6,611
25-34	61.4	14,649	59.0	85.6	14.1	7.4	30.1	19.9	36.5	22.4	8,999
35-44	59.8	3,257	57.6	87.0	14.1	7.5	27.6	20.7	37.8	24.8	1,,948
Residence											
Rural	56.6	22,461	55.8	83.0	11.9	6.0	28.8	19.3	35.2	21.5	12,721
Urban	62.4	7,750	64.8	88.4	18.4	10.5	31.7	21.1	36.1	22.0	4,837
Mother's education											
Non-literate	55.8	20,045	54.6	84.9	12.0	6.6	27.7	18.8	34.1	20.1	11,192
0-9@ years	58.2	6,289	61.3	83.1	14.5	7.0	31.3	21.7	36.0	22.8	3,659
10 and above	69.8	3,870	69.7	84.7	19.5	10.0	35.3	21.7	40.4	26.3	2,701
Religion											
Hindu	56.6	24,096	58.2	83.2	13.4	7.1	29.6	20.2	35.5	22.1	13,645
Muslim	63.8	5,991	58.4	89.1	14.4	7.7	29.3	18.6	35.0	19.8	3,821
Other	73.9	124	63.8	92.7	19.7	9.5	42.2	19.6	47.6	32.6	92
Caste/tribe#											
Scheduled caste	54.8	7,405	57.3	83.8	12.7	6.9	29.5	20.2	33.3	21.2	4,056
Scheduled tribe	53.6	311	61.4	81.0	12.6	7.4	25.1	21.8	39.1	16.4	167
Other backward class	57.5	15,013	56.8	83.4	12.9	6.6	28.0	20.1	35.5	20.5	8,639
Other	63.0	7,123	61.3	86.9	15.7	8.4	32.7	18.8	37.1	24.1	4,490
Standard of living index											
Low	54.2	17,110	54.6	83.1	11.2	5.8	27.4	18.8	34.4	21.2	9,270
Medium	60.5	8,129	58.9	85.3	13.0	7.1	30.9	18.9	36.0	20.9	4,922
High	67.7	4,972	67.6	87.2	21.4	11.3	33.7	23.9	37.6	24.0	3,367
Availability of health facility² in the village											
Yes	55.1	14,042	55.6	81.1	11.1	5.0	28.9	18.8	34.3	22.3	8,420
No	57.6	8,420	55.9	84.1	12.3	6.6	28.7	19.7	35.7	21.0	14,042
Total	58.1	30,211	58.3	84.5	13.7	7.2	29.6	19.8	35.4	21.6	17,558

Note: Table based on women with living children born since 01.01.1999 for phase - I /01.01.2001 for phase - II. ¹ Last two weeks prior to survey. Table includes 20 missing information on awareness of pneumonia. Total includes 7 women missing information on education who are not shown separately.
 @ Literate mother with no years of schooling are included. # Total figure may not add to N due to do not know and missing cases.
² Includes sub-centre, primary health centre, Community health centre or referral hospital, government hospital, and government dispensary within the village

Table 5.13 TREATMENT OF PNEUMONIA					
Percentage of women who sought treatment whose child suffered ¹ from cough and cold and source of treatment, according to place of residence and availability of health facility in the village, STATAE, 2002-04					
Sought treatment/ source of treatment	Total	Residence		Availability of health facility ² in the village	
		Rural	Urban	Yes	No
Percentage of women whose child suffered from cough, cold and difficulty in breathing	14.0	14.5	12.6	13.8	14.9
Number of women	30,211	22,461	7,750	8,420	14,042
Percentage of women sought treatment whose child suffered from cough and cold	79.2	77.2	86.0	78.0	76.7
Number of women	4,234	3,253	980	1,164	2,089
Source of treatment					
Government health facility					
Hospital/dispensary	4.6	3.6	7.7	3.3	3.7
UHC/UHP/UFWC	0.1	0.1	0.0	0.1	0.1
CHC/ Rural hospital	1.4	1.8	0.4	1.7	1.8
Primary health centre	2.9	3.5	0.9	4.4	3.0
Sub centre	1.1	1.2	0.7	0.9	1.3
Private health facility					
NGO/Trust hospital/clinic	1.1	0.8	2.1	0.8	0.8
Private hospital clinic	74.9	74.5	76.2	73.3	75.1
ISM ³ facility	4.3	3.7	6.3	2.7	4.2
Home remedy	7.6	8.1	6.2	8.4	7.9
Other	4.0	4.9	1.5	5.8	4.3
Percent distribution of women who seek treatment by					
Doctor	88.7	87.2	93.1	86.6	87.5
ANM/Nurse/LHV	1.9	2.2	1.0	2.5	2.0
<i>Dai</i> (trained or untrained)	0.3	0.3	0.4	0.5	0.2
Relative/friends	2.6	2.9	1.7	2.4	3.2
Chemist/medical shop	3.6	3.7	3.2	4.3	3.4
ISM practitioner	0.8	1.0	0.0	1.0	1.0
Other	2.2	2.7	0.5	2.8	2.7
Total percent	100.0	100.0	100.0	100.0	100.0
Number of women	3,354	2,511	843	909	1,602
Note: Table based on women with living children born since 01.01.1999 for phase - I /01.01.2001 for phase - II.					
¹ Last two weeks prior to survey..					
² Includes sub-centre, primary health centre, Community health centre or referral hospital, government hospital, and government dispensary within the village					
³ Either government or private health facility of Indian System of Medicine					

5.7.5 Awareness of Diarrhoea, ORS and Pneumonia and Incidence of Diarrhoea and Pneumonia by District

Table 5.14 presents the knowledge of diarrhoea management, knowledge of ORS, and incidence of diarrhoea by district. Although knowledge of diarrhoea management is high in almost all districts, knowledge about ORS is low. Knowledge of ORS is also not common, and it is lowest in Siddharthnagar (3 percent). Women in Etah, Gonda and Sant Ravidas Nagar also have

relatively low level of knowledge of ORS. The incidence of diarrhoea is 20 percent in the state as a whole and it varies from 6 percent in Farrukhabad to 42 percent in Etah. Table 5.14 also shows differentials in the awareness of danger signs of pneumonia and incidence of pneumonia. In comparison to awareness about diarrhoea management, the awareness of danger signs of pneumonia is not that much low. The lowest is found in Pratapgarh (22 percent) and highest in Meerut (91 percent). Incidence of ARI symptoms is comparatively high in many of the districts in Uttar Pradesh. It is highest in Ghaziabad (41 percent) followed by Bulandshahar (35 percent) Bahraich (34 percent), and lowest in Unnao (2 percent), Chandauli and Hamirpur (3 percent each).

Table 5.14 KNOWLEDGE OF DIARRHOEA MANAGEMENT AND PNEUMONIA BY DISTRICT					
Percentage of women by awareness of diarrhoea management, ORS, danger signs of pneumonia and whose child had suffered from diarrhoea and pneumonia during last two weeks prior to survey by district, India, 2002-04					
District	Percentage of women aware of		Percentage of women whose child suffered ¹ from diarrhoea	Percentage of women aware of danger signs of pneumonia	Percentage of women whose child suffered ¹ from pneumonia
	Diarrhoea Management	ORS			
Agra	52.1	15.3	19.9	47.4	5.6
Aligarh	71.6	24.9	22.3	74.9	27.7
Allahabad	58.6	9.7	15.2	47.5	4.6
Ambedaker Nagar	68.5	7.1	22.0	48.8	7.1
Auraiya	76.8	17.8	7.9	70.0	13.8
Azamgarh	37.4	5.9	15.7	47.7	7.4
Baghpat	73.3	24.8	11.0	91.3	8.5
Bahraich	62.7	10.5	20.9	77.5	33.7
Ballia	60.5	9.9	16.4	75.5	8.9
Balrampur	64.8	7.5	21.9	61.7	12.5
Banda	27.4	9.0	13.0	49.7	10.7
Barabanki	60.5	20.1	27.9	33.9	17.2
Bareilly	40.9	7.9	30.9	52.8	18.4
Basti	39.6	11.6	26.2	57.2	17.2
Bijnor	54.2	21.7	17.7	58.0	19.0
Budaun	68.6	5.6	35.7	54.6	18.4
Bulandshahar	75.0	30.5	21.9	74.8	34.9
Chandauli	77.3	13.7	7.2	81.6	2.7
Chitrakoot	55.4	7.0	12.3	76.1	5.6
Deoria	58.4	7.5	22.8	74.5	9.9
Etah	70.5	4.1	42.1	52.1	21.1
Etawah	57.6	18.1	19.1	63.2	24.7
Faizabad	53.3	13.9	24.7	50.7	8.1
Farrukhabad	57.8	13.2	6.4	65.3	14.0
Fatehpur	54.9	14.3	19.9	27.5	18.7
Firozabad	42.1	9.2	21.3	28.8	11.1
Gautam Buddha Nagar	69.8	19.9	12.5	75.7	4.2
Ghaziabad	79.2	44.2	22.6	76.2	40.6
Ghazipur	54.9	6.3	15.1	70.9	9.5
Gonda	44.7	4.4	27.9	71.0	17.4
Gorakhpur	48.0	10.5	12.8	55.6	9.1
Hamirpur	44.0	9.6	11.3	40.0	3.0
Hardoi	36.0	9.1	19.5	58.5	5.5
Hathras	72.6	16.4	17.9	90.7	24.9
Jalaun	52.4	7.1	18.8	23.6	9.4
Jaunpur	52.7	7.5	15.8	43.2	9.2
Jhansi	41.7	13.4	15.2	49.0	6.0
Jyotiba Phule Nagar	72.9	6.1	11.9	85.2	13.1
Kannauj	66.9	8.3	31.0	40.7	22.3
Kanpur Dehat	66.5	14.1	28.0	28.2	9.9

Note: Table based on women with last and last but one living children born since 01.01.1999 /01.01.2001. ¹ Last two weeks prior to survey.

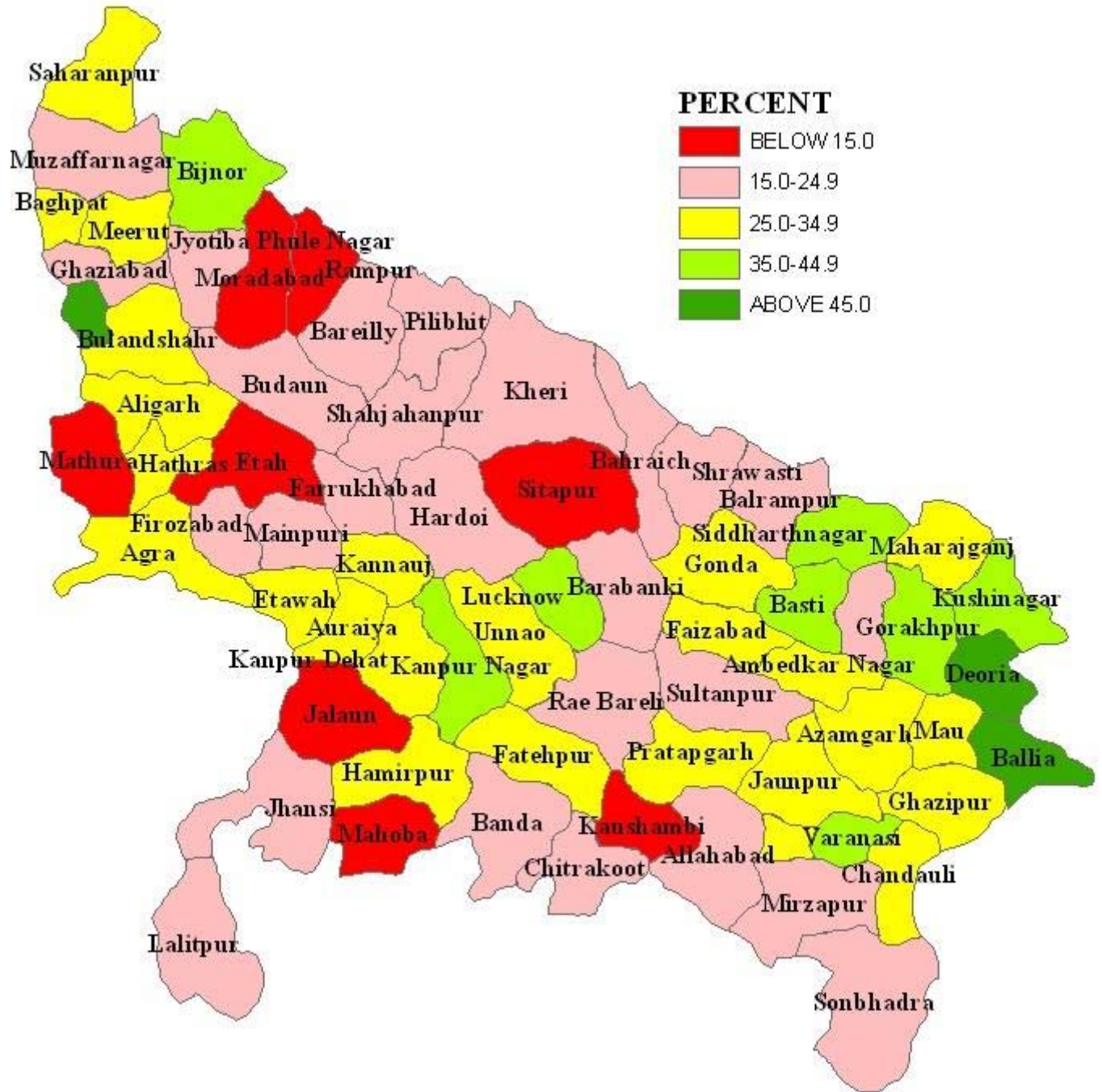
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Table 5.14 KNOWLEDGE OF DIARRHOEA MANAGEMENT AND PNEUMONIA BY DISTRICT (Contd.)					
Percentage of women by awareness of diarrhoea management, ORS, danger signs of pneumonia and whose child had suffered from diarrhoea and pneumonia during last two weeks prior to survey by district, Uttar Pradesh, 2002-04					
District	Percentage of women aware of		Percentage of women whose child suffered ¹ from diarrhoea	Percentage of women aware of danger signs of pneumonia	Percentage of women whose child suffered ¹ from pneumonia
	Diarrhoea Management	ORS			
Kanpur Nagar	69.7	17.6	13.0	29.5	8.2
Kaushambi	35.6	6.8	13.7	29.3	7.0
Kheri	70.2	16.0	31.8	71.6	18.6
Kushinagar	38.7	12.9	15.7	61.1	17.4
Lalitpur	65.0	9.5	18.6	60.5	6.6
Lucknow	83.8	29.3	12.4	60.5	6.0
Maharajanj	48.9	14.6	12.6	66.2	4.7
Mahoba	31.8	7.4	15.5	46.5	6.3
Mainpuri	66.6	10.6	13.0	86.9	19.9
Mathura	59.5	11.5	19.7	89.7	27.9
Mau	73.5	7.8	8.6	77.2	4.1
Meerut	78.2	24.7	22.2	91.4	8.0
Mirzapur	63.2	6.5	17.3	46.7	18.0
Moradabad	72.6	13.2	10.6	90.3	17.1
Muzaffarnagar	67.3	18.9	19.8	82.0	13.6
Pilibhit	79.1	5.8	27.9	52.8	6.2
Pratapgarh	53.8	8.1	22.8	22.4	17.0
Rae Bareli	84.6	20.5	17.4	41.1	20.3
Rampur	47.8	9.9	30.2	54.1	26.2
Saharanpur	47.7	14.2	19.7	50.3	26.8
Sant Kabir Nagar	53.8	8.2	21.7	68.6	12.3
Sant Ravidas Nagar	56.9	4.9	20.5	53.8	6.9
Shahjahanpur	59.7	14.7	25.5	50.8	6.5
Shrawasti	57.7	5.1	16.1	76.7	27.0
Siddharthnagar	30.4	3.1	23.8	51.7	5.9
Sitapur	58.2	11.0	25.6	61.1	17.5
Sonbhadra	44.3	9.3	12.2	38.2	15.1
Sultanpur	36.4	10.7	21.0	35.8	20.4
Unnao	74.0	8.2	15.2	41.7	2.0
Varanasi	88.0	13.5	13.2	72.2	7.2
Uttar Pradesh	58.6	13.2	19.7	58.1	14.0

Note: Table based on women with last and last but one living children born since 01.01.1999 /01.01.2001. ¹ Last two weeks prior to survey.

Under the RCH programme, the government health facilities are strengthened to provide treatment of ARI. However, the percentage of women who visited to a government health facility for treatment of their children sick with ARI symptoms was very low.

MAP-5
Percentage of Children (Age 12-23 months) Who Have Received Full Vaccination



CHAPTER VI

FAMILY PLANNING

The Reproductive and Child Health Programme has been implemented with a new philosophy and direction to meet the health care needs of women and children. It envisages the provision of couples to control their fertility and have sexual relations free from the fear of pregnancy. Provision of free contraceptive services to all the needy couples is one of the components of the RCH programme. In DLHS-RCH a separate section on family planning was canvassed to all the eligible women to assess the knowledge and practice of various family planning methods. The information on source of currently adopted contraceptive method, source of supply of the method and health problems related to contraceptive use were collected from current users. The current non-users were asked about the past status of contraceptive use, reason for not using contraceptives currently and future intention to adopt a family planning method.

An attempt was made to understand why male methods of family planning especially that of vasectomy was not in common use. The husbands of sampled eligible women were asked about the contraceptive method they would recommend to a couple who was not desirous of any additional children. They were also asked about the reasons for not preferring male methods and their knowledge about the no-scalpel vasectomy. This chapter presents the results of data on contraceptive practices collected from both the sampled women and their husbands.

6.1 Knowledge of Family Planning Methods

Lack of knowledge of various contraceptive choices can be a major barrier to promotion and use of contraceptives among couples. In DLHS-RCH information on knowledge of contraceptives was obtained by asking a question, "Which are the family planning methods you know?" to each sampled eligible woman. The knowledge of no-scalpel vasectomy was also asked to the husbands of eligible women. If the respondent did not recognise the name of the family planning method, he was given a brief description on how the particular method was to be used. The DLHS-RCH assesses the knowledge of female sterilisation, male sterilisation including NSV, IUD, Pills, condom and traditional methods along similar lines.

The extent of knowledge of contraceptive methods among currently married women for specific methods and selected background characteristics are shown in Table 6.1 and Figure 6.1. Knowledge of any method including any modern contraceptive method is almost universal in the state of Uttar Pradesh. The knowledge of any method and any modern method do not vary much by residence. The knowledge of modern spacing method among currently married women is around 94 percent, and slightly higher among the women with an urban residence. There are large differentials in knowledge of all modern methods with respect to the aforesaid background

characteristics. For instance, 55 percent of women from rural areas are aware about all modern methods compared to 74 percent of their urban counterparts.

Table 6.1 KNOWLEDGE OF CONTRACEPTIVE METHODS					
Percentage of currently married women age 15-44 years who know any contraceptive method by specific method and selected background characteristics, Uttar Pradesh, 2002-04.					
Contraceptive methods	Total	Residence		Availability of health facility in the village ³	
		Rural	Urban	No	Yes
Any method	99.5	99.3	99.7	99.3	99.4
Any modern method	99.3	99.1	99.7	99.0	99.2
Any modern spacing method ¹	94.2	92.8	97.6	92.2	93.7
All modern methods ²	60.6	54.8	74.3	53.6	56.7
Female sterilization	98.6	98.3	99.4	98.1	98.5
Tubectomy	84.4	83.2	87.1	81.5	86.0
Laparoscopy	47.4	45.3	52.6	42.5	49.6
Male sterilization	80.7	77.9	87.3	77.1	79.1
Vasectomy	49.4	47.9	53.0	45.9	51.1
No-scalpel vasectomy	30.8	26.4	41.2	24.9	29.0
IUD/Loop	76.3	71.3	88.1	70.9	71.9
Pills	90.0	87.8	95.4	87.3	88.6
Daily	68.5	66.2	74.1	64.4	69.0
Weekly	37.7	32.3	50.3	32.3	32.4
Condom/Nirodh	81.9	79.1	88.7	77.8	81.0
Sponge (today)	8.0	5.9	13.2	5.7	6.1
Injectables	50.0	50.6	48.5	48.4	54.0
Norplant	3.7	3.2	4.8	3.1	3.6
Contraceptive herbs	19.7	19.7	19.7	18.6	21.6
Any traditional method	55.3	56.2	53.2	56.4	55.9
Any other Indian system of medicinal contraceptives	2.8	2.6	3.3	2.3	3.0
Number of women	64,207	45,196	19,011	27,854	17,342

Note: ¹ Include IUD, pills and condom. ² Include Female sterilization, Male sterilization, IUD, pills and condom
³ Includes sub-centre, primary health centre, community health centre or referral hospital, government hospital, and government dispensary within the village.

Female sterilisation is the most widely known method of all contraceptive methods in Uttar Pradesh followed by Pills. Overall, 99 percent of currently married women are aware of female sterilization and 81 percent knew about male sterilization. There is no rural - urban difference in knowledge of female sterilization and male sterilization. Slightly higher proportion of urban women (53 percent) know about male sterilization as compared to 48 percent of rural women. There are differentials in spacing methods such as IUD/Loop, Pill and condom users with respect to the background characteristics. The best-known spacing methods are Pills (90 percent) and condoms (82 percent). Only 76 percent of women know about the IUD/Loop. There is a large differential in knowledge of spacing methods by residence, as only 79 percent of the rural women know condom compared to 89 percent of urban women. Knowledge of the modern spacing methods, Pill and IUD was reported by 88 and 71 percent of rural women respectively while the corresponding figure in urban areas is 95 and 88 percent respectively of eligible women respondents. The knowledge of these spacing methods remains low as compared to knowledge of sterilization.

In Uttar Pradesh, more than 55 percent of the women are aware of a traditional method and three percent are also aware of other contraceptives of the Indian System of Medicine. It is also observed that women from villages with a health facility are slightly more aware about modern spacing methods.

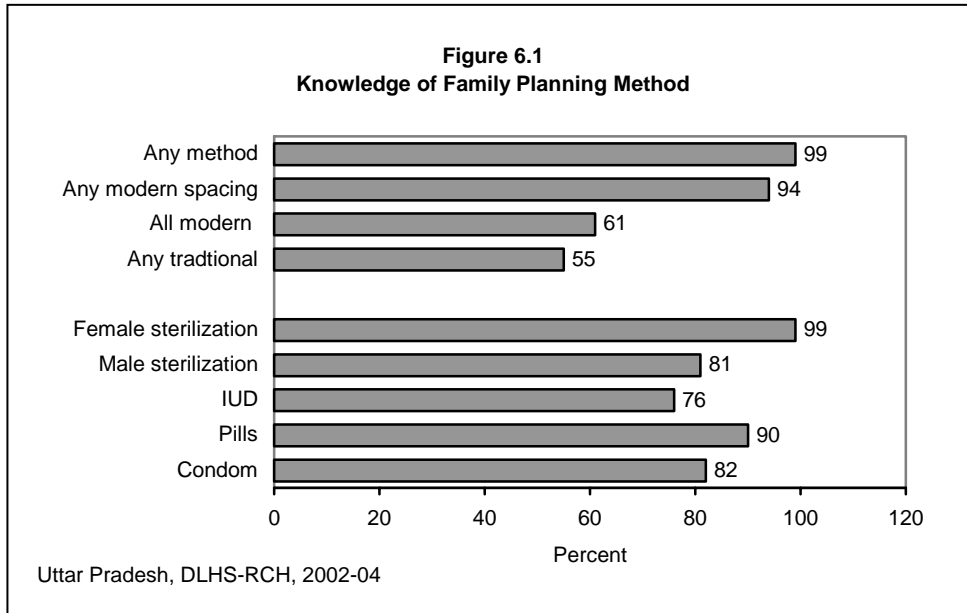


Table 6.2 KNOWLEDGE OF CONTRACEPTIVE METHODS BY DISTRICT

Percentage of currently married women age 15-44 years who know any contraceptive method by specific method and district, Uttar Pradesh, 2002-04

Districts	Any method	Any modern ¹ method	Any modern spacing ² method	All modern ³ methods	Male sterilization	Female sterilization	IUD	Pill	Condom/Nirodh	Any traditional method
Agra	99.6	99.6	86.8	55.6	81.3	99.1	74.1	81.3	75.9	41.4
Aligarh	99.9	99.9	99.5	77.0	92.0	99.9	89.2	96.9	91.6	58.4
Allahabad	100.0	100.0	98.6	76.2	95.4	99.9	82.5	97.5	91.0	86.4
Ambedaker Nagar	99.9	99.9	98.2	75.8	91.3	99.9	84.0	95.1	92.9	88.8
Auraiya	99.9	99.1	98.6	85.6	96.3	98.7	90.9	97.5	93.8	85.4
Azamgarh	100.0	99.9	96.9	61.7	80.0	99.9	78.7	93.5	85.7	57.4
Baghpat	100.0	100.0	98.9	82.8	95.9	99.8	94.0	98.3	88.9	73.1
Bahraich	99.5	98.9	89.9	48.8	74.1	97.4	63.1	85.1	69.4	73.7
Ballia	99.8	99.8	94.1	66.9	85.7	99.8	77.4	88.2	86.3	41.2
Balrampur	99.7	99.7	94.7	51.9	79.6	98.9	67.9	86.4	81.8	67.6
Banda	100.0	100.0	97.2	75.9	94.3	100.0	81.8	95.4	88.2	84.0
Barabanki	99.4	97.8	91.9	50.5	79.2	95.3	62.9	86.1	77.3	46.4
Bareilly	97.9	97.5	83.1	37.2	62.6	95.9	57.3	76.0	65.2	10.8
Basti	100.0	99.8	93.4	43.1	74.0	99.0	60.1	89.0	69.9	72.1
Bijnor	97.8	97.8	83.3	35.8	60.5	95.4	56.6	77.4	66.4	22.7
Budaun	99.0	98.8	91.3	48.5	77.4	98.4	74.4	86.7	70.8	51.9
Bulandshahar	98.7	98.7	95.9	59.7	84.0	98.3	82.4	89.5	76.8	40.3
Chandauli	100.0	100.0	98.9	82.6	94.6	100.0	90.5	96.5	94.1	74.1
Chitrakoot	100.0	100.0	99.4	76.0	96.0	100.0	80.6	98.5	93.2	94.3
Deoria	100.0	100.0	97.7	68.4	88.4	99.8	77.8	95.4	90.4	95.0
Etah	98.4	98.3	91.6	44.7	61.5	96.9	78.0	83.9	76.8	55.9
Etawah	99.9	99.9	98.5	73.3	88.0	98.9	89.0	95.8	91.2	75.4
Faizabad	99.8	99.5	97.5	69.0	84.5	99.5	79.4	95.3	90.5	94.0
Farrukhabad	100.0	100.0	99.7	83.7	96.3	100.0	90.2	98.7	95.3	76.1
Fatehpur	99.6	99.6	94.5	52.5	68.6	99.5	75.8	92.5	77.7	34.4
Firozabad	99.3	99.3	88.3	52.9	68.6	98.9	76.5	83.7	74.0	26.3
Gautam Buddha Nagar	100.0	100.0	96.4	69.6	90.6	100.0	83.3	90.8	86.9	42.5
Ghaziabad	99.1	98.7	95.2	58.3	79.0	97.2	80.3	87.8	80.9	37.2
Ghazipur	99.9	99.8	95.2	65.3	84.6	99.8	81.1	91.4	83.9	50.7
Gonda	100.0	99.8	95.1	65.8	84.7	99.6	80.5	90.5	83.7	82.0
Gorakhpur	99.5	99.5	96.0	69.9	85.8	98.8	80.9	93.6	87.4	60.7
Hamirpur	100.0	100.0	98.8	76.1	95.0	100.0	82.2	92.7	95.1	90.1
Hardoi	98.7	98.5	80.9	29.5	55.5	95.7	58.9	70.1	63.8	10.8
Hathras	100.0	99.9	96.7	78.4	93.6	99.5	87.4	94.2	90.5	57.9
Jalaun	100.0	99.9	95.6	66.3	84.1	99.4	77.3	91.2	86.6	80.5
Jaunpur	99.6	99.6	97.1	62.2	75.8	99.4	84.3	92.9	86.9	61.8
Jhansi	100.0	100.0	95.1	65.0	85.2	100.0	77.3	88.6	87.5	47.1
Jyotiba Phule Nagar	100.0	100.0	97.3	79.7	91.4	99.9	91.0	94.3	92.8	58.7
Kannauj	98.0	96.0	88.0	41.9	60.1	94.5	69.0	81.1	69.9	38.0
Kanpur Dehat	99.4	99.3	97.2	74.4	85.6	99.1	87.0	94.9	90.9	85.7

Note: ¹ Includes female sterilization, male sterilization, IUD, pills and condom. ² Includes IUD pills and condom. ³ Includes female sterilization & male sterilization & IUD & pills and condom

Contd.

Table 6.2 KNOWLEDGE OF CONTRACEPTIVE METHODS BY DISTRICT (Contd.)										
Percentage of currently married women age 15-44 years who know any contraceptive method by specific method and district, Uttar Pradesh, 2002-04										
Districts	Any method	Any modern ¹ method	Any modern spacing ² method	All modern ³ methods	Male sterilization	Female sterilization	IUD	Pill	Condom /Nirodh	Any traditional method
Kanpur Nagar	99.9	99.9	99.6	87.6	92.6	99.9	95.2	98.6	96.5	79.5
Kaushambi	99.8	99.7	97.7	74.2	92.6	99.7	82.8	96.7	89.1	86.8
Kheri	99.7	99.7	96.3	60.2	81.7	99.2	80.7	92.9	82.8	33.1
Kushinagar	99.8	99.8	93.7	65.4	95.5	99.5	71.7	91.2	83.3	68.3
Lalitpur	98.9	98.8	94.9	63.1	83.9	98.8	75.7	93.4	86.9	60.8
Lucknow	99.9	99.9	99.3	81.6	94.8	99.8	90.5	98.0	92.0	41.6
Maharajganj	99.5	99.5	96.6	66.6	90.5	99.5	78.2	90.2	87.0	41.4
Mahoba	100.0	100.0	98.3	73.7	98.0	100.0	77.5	94.0	94.9	90.9
Mainpuri	100.0	100.0	98.8	72.6	94.0	100.0	87.2	96.3	87.2	52.6
Mathura	99.9	99.9	97.3	67.8	85.9	99.9	83.5	95.7	85.7	62.7
Mau	100.0	100.0	96.2	65.5	88.4	99.9	76.4	91.4	89.0	76.9
Meerut	100.0	100.0	98.6	71.3	93.9	99.7	93.1	96.8	79.9	51.8
Mirzapur	98.8	98.8	85.0	22.3	40.3	98.0	53.1	79.0	57.5	21.7
Moradabad	100.0	100.0	98.4	80.3	93.8	99.8	88.3	97.0	92.4	63.2
Muzaffarnagar	100.0	99.7	98.9	82.2	88.4	99.1	91.3	97.8	96.0	74.7
Pilibhit	99.1	99.1	81.7	35.1	60.3	98.0	58.1	76.7	58.6	2.1
Pratapgarh	99.3	97.9	93.0	62.6	82.4	96.1	73.7	87.1	83.0	72.0
Rae Bareli	96.5	96.3	89.1	37.9	66.7	93.5	50.2	86.1	68.8	8.8
Rampur	97.9	97.5	89.1	34.9	53.9	93.1	64.3	85.2	68.1	19.1
Saharanpur	95.6	95.4	80.8	30.4	54.5	90.2	47.3	75.3	59.5	18.8
Sant Kabir Nagar	100.0	100.0	97.4	68.0	84.2	99.7	81.8	94.5	89.1	83.4
Sant Ravidas Nagar	100.0	100.0	97.9	71.0	89.1	99.7	79.9	95.1	90.0	93.3
Shahjahanpur	99.0	99.0	81.6	27.4	46.7	98.1	53.6	74.8	57.3	2.6
Shrawasti	98.8	98.6	89.7	50.3	80.8	98.2	65.1	84.0	73.3	72.4
Siddharthnagar	99.8	99.7	95.7	60.4	82.2	99.5	74.3	93.0	83.9	88.1
Sitapur	99.4	99.4	97.0	53.1	76.8	98.7	74.1	92.6	82.6	34.2
Sonbhadra	99.4	98.4	87.4	50.1	82.6	98.2	64.4	83.0	70.1	69.9
Sultanpur	99.8	99.8	96.2	25.2	61.3	98.9	57.6	85.1	73.7	29.9
Unnao	100.0	100.0	99.6	80.3	91.4	100.0	87.0	98.6	96.8	76.0
Varanasi	100.0	100.0	98.0	73.4	87.2	100.0	86.2	95.6	91.3	67.3
Uttar Pradesh	99.5	99.3	94.2	60.6	80.7	98.6	76.3	90.0	81.9	55.3

Note: ¹ Includes female sterilization, male sterilization, IUD, pills and condom. ² Includes IUD pills and condom. ³ Includes female sterilization & male sterilization & IUD & pills and condom

6.1.1 Knowledge of Family Planning Methods by Districts

Table 6.2 shows the knowledge of contraceptive methods by districts in Uttar Pradesh. In all the districts more than 96 percent of women know about contraceptives including modern methods. A large differential is noticed in the knowledge of all modern methods by district. The awareness ranges from 22 percent in Mirzapur to 88 percent in Kanpur Nagar district. There is not much variation in the knowledge of female sterilization, which is the lowest in Saharanpur (90 percent) and the highest, in 11 districts (100 percent). Knowledge about IUD/Loop and condom are 47 and 57 percent respectively in Saharanpur and Shahjahanpur districts, whereas the same is around 95 percent in Kanpur Nagar and 97 in Unnao district respectively. As for any traditional method, awareness is 95 percent in Deoria district and the least in Pilibhit district (2 percent).

6.1.2 Knowledge of No-Scalpel Vasectomy (NSV)

Knowledge of no-scalpel vasectomy among the husbands of currently married women in the state of Uttar Pradesh is shown in Table 6.3. More than two fifth (43 percent) of the husbands know about the no-scalpel vasectomy. In rural areas, 38 percent of husbands know about NSV compared to 55 percent in urban areas. For women residing in villages with a health facility, 39 percent of their husbands are aware of No-scalpel vasectomy and it is 37 percent for those living in villages without health facilities. Among the husbands who know about NSV, 71 percent reported that NSV is simpler than a conventional family planning method, 44 percent feel that NSV does not lead to any complication and 34 percent reported that NSV does not affect a man's sexual performance. Only 32 percent of the husbands in villages with a health facility reported that, NSV does not affect sexual performance compared to 31 percent of husbands in villages without a health facility.

Table 6.3 KNOWLEDGE OF NO-SCALPEL VASECTOMY (NSV)					
Husbands knowledge of NSV by residence and availability of health facility in the village, Uttar Pradesh, 2002-04					
Knowledge of NSV	Total	Residence		Availability of health facility in the village ¹	
		Rural	Urban	No	Yes
Percentage of husband who had knowledge about NSV	43.1	37.9	55.1	37.3	39.0
Number of husbands	37,463	26,161	11,302	16,102	10,060
Who know that NSV is simpler than conventional vasectomy	70.5	71.8	68.4	71.2	72.7
Who feel that NSV does not lead to any complication	43.8	41.9	46.9	42.1	41.6
Who feel that NSV does not affect man's sexual performance	34.4	31.2	39.5	30.6	32.2
Number of husbands	16,146	9,924	6,223	6,000	3,924

Note: ¹ Includes sub-centre, primary health centre, community health centre or referral hospital, government hospital, and government dispensary within the village.

6.1.3 Knowledge of No-Scalpel Vasectomy (NSV) by Districts

No-scalpel vasectomy awareness by districts in Uttar Pradesh is provided in Table 6.4. The districts in which at least 50 percent of husbands know about NSV are Baghpat (50 percent), Basti (54 percent), Chandauli (69 percent), Gautam Buddha Nagar (51 percent), Ghaziabad (53 percent), Gorakhpur (53 percent), Kanpur Nagar (56 percent), Kushinagar (51 percent), Lucknow (58 percent), Mainpuri (52 percent), Mau (54 percent), Meerut (59 percent), Unnao (51 percent) and Varanasi (69 percent). Only 26 percent of the husbands in Rae Bareli district know about the no-scalpel vasectomy. That NSV does not lead to any complications was reported by 66 percent of the husbands in Etawah district, followed by 61 percent in Saharanpur, Baghpat and Lalitpur (60 percent each), and only 22 percent in Faizabad. The proportion who reported that the NSV does not affect a

man's sexual performance was highest (57 percent) in Baghpat district and the lowest in Ambedaker Nagar (16 percent).

Table 6.4 NO-SCALPEL VASECTOMY BY DISTRICT				
Percentage of husband of eligible women by knowledge of NSV by district, Uttar Pradesh, 2002-04				
Districts	Knowledge about NSV	NSV is simpler than conventional method	Who reported NSV does not lead to any complication	Who reported NSV does not affect man's sexual performance
Agra	45.7	71.9	56.6	38.1
Aligarh	33.8	82.5	59.5	50.5
Allahabad	47.0	82.2	50.6	20.6
Ambedaker Nagar	41.3	76.0	46.6	15.8
Auraiya	42.3	80.8	59.3	48.0
Azamgarh	42.7	75.2	37.3	28.3
Baghpat	50.1	85.1	60.2	57.1
Bahraich	38.9	73.2	46.7	28.9
Ballia	45.1	73.7	48.9	28.6
Balrampur	47.1	63.7	39.2	32.7
Banda	48.8	58.3	47.2	33.4
Barabanki	34.5	72.3	33.2	34.2
Bareilly	29.8	59.8	40.7	29.7
Basti	54.2	76.8	42.0	38.8
Bijnor	42.0	72.7	50.2	42.3
Budaun	34.5	76.2	51.5	32.8
Bulandshahar	43.9	71.9	47.2	33.8
Chandauli	68.9	70.5	22.4	30.5
Chitrakoot	28.9	77.8	36.8	41.2
Deoria	45.5	72.0	41.8	46.6
Etah	38.2	69.9	44.3	24.9
Etawah	46.9	85.2	65.6	39.6
Faizabad	42.6	65.4	21.7	26.6
Farrukhabad	40.8	85.6	58.0	50.8
Fatehpur	37.7	77.3	49.8	51.6
Firozabad	33.1	63.9	56.0	41.0
Gautam Buddha Nagar	50.9	77.7	43.9	31.5
Ghaziabad	52.9	75.4	46.4	41.2
Ghazipur	38.2	67.7	39.1	38.6
Gonda	42.4	78.5	24.5	25.0
Gorakhpur	53.0	57.7	36.0	34.7
Hamirpur	41.7	73.9	35.3	36.8
Hardoi	28.4	52.8	37.8	23.9
Hathras	48.1	69.1	41.1	29.0
Jalaun	43.5	64.7	42.4	44.7
Jaunpur	39.1	70.0	48.3	45.3
Jhansi	38.8	75.5	46.1	37.0
Jyotiba Phule Nagar	43.9	67.0	36.4	25.5
Kannauj	41.3	77.5	42.6	35.4
Kanpur Dehat	42.3	73.3	51.3	39.8

Contd.

Table 6.4 NO-SCALPEL VASECTOMY BY DISTRICT (Contd.)				
Percentage of husband of eligible women by knowledge of NSV by district, Uttar Pradesh, 2002-04				
Districts	Knowledge about NSV	NSV is simpler than conventional method	Who reported NSV does not lead to any complication	Who reported NSV does not affect man's sexual performance
Kanpur Nagar	55.7	60.5	35.3	28.5
Kaushambi	34.8	85.0	53.8	24.7
Kheri	29.8	71.1	29.3	26.7
Kushinagar	50.2	57.2	38.0	37.8
Lalitpur	30.2	83.5	60.1	38.5
Lucknow	57.9	73.8	54.6	52.3
Maharajganj	40.0	69.5	46.7	30.1
Mahoba	38.4	64.0	55.6	32.8
Mainpuri	52.2	68.6	40.3	27.7
Mathura	45.2	62.9	34.4	24.3
Mau	54.2	64.4	25.5	25.2
Meerut	58.5	62.2	38.8	27.9
Mirzapur	43.7	77.7	54.4	47.8
Moradabad	39.9	64.4	42.9	31.0
Muzaffarnagar	42.1	76.3	55.9	53.2
Pilibhit	42.0	52.3	41.9	36.1
Pratapgarh	49.8	79.1	34.0	24.9
Rae Bareli	25.8	77.5	48.1	30.0
Rampur	31.5	74.2	52.3	43.0
Saharanpur	39.5	77.2	61.0	49.0
Sant Kabir Nagar	44.4	65.7	43.0	28.5
Sant Ravidas Nagar	42.9	71.5	28.8	34.2
Shahjahanpur	42.0	60.4	48.5	39.6
Shrawasti	33.6	62.8	34.2	29.0
Siddharthnagar	37.6	72.6	22.4	27.7
Sitapur	29.2	75.4	44.1	24.2
Sonbhadra	46.6	72.7	48.7	35.8
Sultanpur	38.1	67.2	30.7	30.2
Unnao	50.7	81.7	54.0	29.4
Varanasi	68.5	61.7	28.3	28.8
Uttar Pradesh	43.1	70.5	43.8	34.4

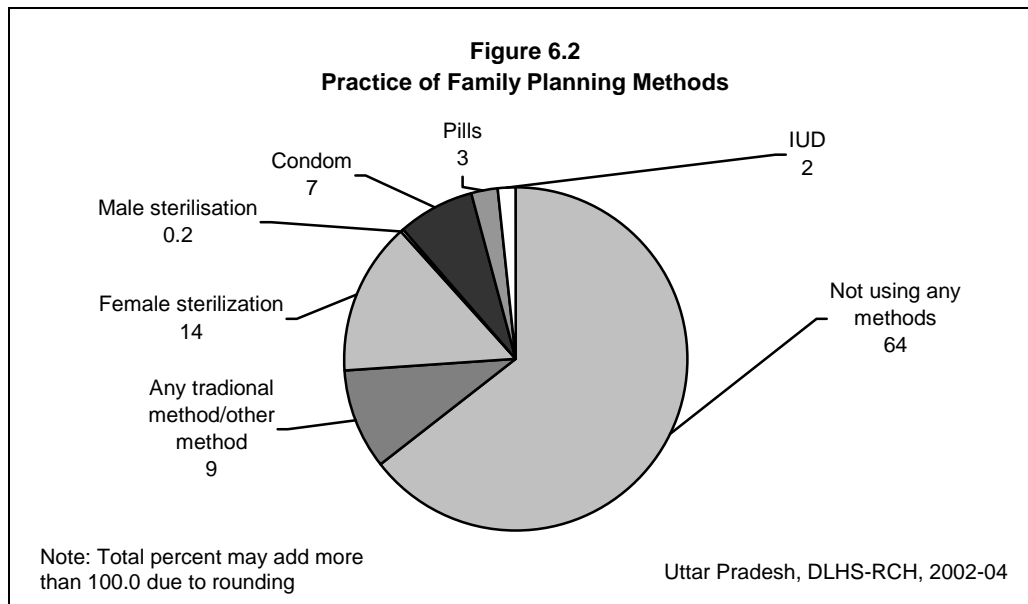
6.2 Current use of Family Planning Methods

Table 6.5 and Figure 6.2 provide the information on current use of family planning methods for currently married women in Uttar Pradesh. At the time of DLHS-RCH, 36 percent of currently married women were using some method of contraception, 7 percentage points up from Round I. Current contraceptive use is slightly higher in urban areas (47 percent) than in rural areas (31 percent). Use of modern method is reported by 26 percent of the women, the breakdown of which is 14 percent for permanent methods and 11 percent for spacing methods. Among the users of sterilization methods, most prefer female sterilization, which invalidates the use of male sterilization (0.2 percent).

Table 6.5 CONTRACEPTIVE PREVALENCE RATE													
Percentage of currently married women age 15-44 years currently using any contraceptive method by selected background characteristics, Uttar Pradesh, 2002-04													
Method	Any method	Any modern ¹ method	Any modern spacing method ²	Any sterilization	Male sterilization	Female sterilization	IUD/ Loop	Pill	Condom / Nirodh	Any traditional method ³	Rhythm/ periodic abstinence	Withdrawal	Number of women
Residence													
Rural	30.7	21.4	7.2	14.0	0.1	13.9	1.0	1.7	4.5	9.3	6.5	2.3	45,196
Urban	47.3	37.5	21.3	16.0	0.3	15.7	2.9	4.3	14.1	9.7	6.1	3.2	19,011
Education													
Non-literate	29.8	20.8	6.7	13.9	0.2	13.7	0.7	1.7	4.3	9.0	6.5	2.0	39,991
0-9@ years	40.3	30.4	13.0	17.3	0.2	17.1	1.8	2.8	8.4	9.8	6.4	2.9	14,418
10 years & above	52.5	41.9	28.1	13.5	0.3	13.2	4.7	5.4	18.1	10.5	5.8	4.3	9,785
Religion													
Hindu	37.0	27.3	10.5	16.5	0.2	16.3	1.6	2.5	6.5	9.7	6.6	2.7	52,900
Muslim	27.9	19.9	14.6	5.1	0.1	5.0	1.2	2.6	10.9	8.0	5.6	2.0	10,925
Christian	55.3	51.0	22.3	28.7	0.0	28.7	5.3	4.2	12.8	4.3	2.4	1.8	77
Sikh	63.3	49.3	33.7	15.5	0.0	15.5	3.7	2.8	27.2	14.1	4.8	7.7	218
Jain	71.9	67.8	51.1	16.8	0.4	16.4	13.7	3.9	33.4	4.1	1.8	2.3	66
Caste/tribe#													
Scheduled caste	28.0	19.2	6.8	12.2	0.2	12.0	0.7	1.8	4.3	8.9	6.2	2.2	14,188
Scheduled tribe	28.3	19.6	5.5	14.0	0.0	14.0	0.9	0.7	3.9	8.7	6.3	2.1	551
Other backward class	33.9	24.0	9.6	14.1	0.2	14.0	1.3	2.1	6.2	9.9	7.1	2.4	31,046
Other	45.2	36.0	18.1	17.7	0.2	17.4	2.7	3.7	11.7	9.2	5.5	3.2	17,717
Standard of living index													
Low	26.7	17.3	4.9	12.2	0.1	12.0	0.6	1.2	3.1	9.4	6.9	2.1	32,769
Medium	37.4	28.4	12.5	15.7	0.2	15.6	1.5	3.0	8.1	9.0	5.8	2.6	17,432
High	54.3	44.2	25.0	19.0	0.4	18.5	4.0	4.8	16.2	10.1	6.0	3.7	14,006
Availability of health facility in the village ⁴													
No	30.2	20.8	6.8	13.7	0.1	13.6	0.9	1.7	4.3	9.4	6.7	2.3	27,854
Yes	31.6	22.5	7.8	14.5	0.2	14.3	1.2	1.8	4.8	9.1	6.3	2.4	17,342
Total	35.6	26.2	11.4	14.6	0.2	14.4	1.6	2.5	7.3	9.4	6.4	2.6	64,207

Note: ¹ Include Female sterilization, Male sterilization, IUD, Pills and Condom. ² Include IUD, Pills and Condom. ³ Include Rhythm/Periodic abstinence, Withdrawal and Other traditional method. ⁴ Includes sub-centre, primary health centre, community health centre or referral hospital, government hospital, and government dispensary within the village. Note: Total includes 13 and 20 cases missing information on women education and other religion were not shown separately.

The use of traditional methods is reported by 9 percent of the women of whom 3 percent are using withdrawal and 6 percent follow the rhythm or periodic abstinence practice. The rural-urban differential is not visible in the case of traditional methods, where 10 percent of the urban women are using this means of contraception compared to 9 percent of the rural women.



Current use of contraception is high among women of other castes (45 percent each) than among scheduled caste women (28 percent). The current use is also high among the women who have 10 or more years of schooling (53 percent) than the women who have less than 10 years of schooling (40 percent) and also among non-literate women (30 percent). Similarly, current contraceptive use varies positively with respect to the standard of living of the women, increasing the prevalence rate from 27 percent to 54 percent for women from the lowest to the highest standard of living households. The availability of the health facility in the village is an important factor in motivating eligible women to use contraceptives. Around two third of the women living in villages with a health facility are currently under contraception and this is higher than the women from villages deprived of a health facility (30 percent). The current use of the traditional method is also higher among women with a higher education level and with a high standard of living than their counterparts not on par with these categories of women.

6.2.1 Current Use of Family Planning Methods by Districts

Table 6.6 presents a picture of current contraceptive use in the districts of Uttar Pradesh. The contraceptive use is a couple concept as family planning methods can be used either by women or by their husbands. In most of the districts, the current use of contraception was reported by less than one fourth of the eligible women except seven districts namely Azamgarh, Shahjahanpur, Siddharthnagar and Sitapur (23 percent each), Kheri (22 percent), Hardoi (21 percent), and Balrampur (18 percent) (see Map-6). The state figure

Table 6.6 CONTRACEPTIVE PREVALENCE RATES BY DISTRICTS

Percentage of currently married women age 15-44 years currently using any contraceptive method by districts, Uttar Pradesh, 2002-04

Districts	Any method	Any modern method ¹	Any modern spacing method ²	Male sterilization	Female sterilization	IUD	Pill	Condom/Nirodh	Any traditional method ³
Agra	37.7	30.8	11.5	0.3	18.9	1.0	3.3	7.2	6.9
Aligarh	39.8	29.3	17.3	0.2	11.3	3.5	4.0	9.9	10.5
Allahabad	40.5	30.4	8.7	0.2	21.5	1.6	0.6	6.5	10.1
Ambedaker Nagar	35.7	21.9	9.1	0.1	12.5	0.8	1.8	6.5	13.8
Auraiya	45.7	24.5	10.8	0.1	13.2	1.5	2.0	7.2	21.2
Azamgarh	22.8	14.3	4.1	0.0	10.1	1.1	1.2	1.9	8.5
Baghpat	51.1	40.6	18.4	0.1	21.6	3.0	5.5	9.8	10.5
Bahraich	28.3	16.5	9.9	0.0	6.6	1.6	1.1	7.2	11.8
Ballia	31.5	25.9	7.8	0.3	17.6	1.2	2.5	4.0	5.6
Balrampur	17.9	11.2	8.2	0.0	2.8	0.8	2.1	5.3	6.6
Banda	39.5	24.0	10.4	0.2	13.5	1.0	1.4	8.0	15.4
Barabanki	27.1	18.8	10.2	0.0	8.5	1.5	1.5	7.2	8.3
Bareilly	27.5	23.2	11.7	0.0	10.3	1.3	4.9	5.5	4.3
Basti	35.5	21.5	10.6	0.1	10.8	1.2	3.1	6.2	14.0
Bijnor	43.5	38.8	22.0	0.5	15.9	3.0	4.9	14.1	4.7
Budaun	29.9	20.2	11.6	0.0	8.5	1.5	3.5	6.7	9.6
Bulandshahar	41.5	32.5	17.9	0.1	14.5	3.5	3.8	10.7	8.9
Chandauli	44.7	33.0	7.5	0.4	25.0	2.6	1.5	3.4	11.7
Chitrakoot	41.6	27.8	5.8	0.0	22.0	1.0	0.7	4.2	13.8
Deoria	41.4	22.3	8.1	0.0	13.7	0.5	0.7	6.9	19.1
Etah	34.9	21.5	14.7	0.3	6.2	1.3	2.9	10.5	13.4
Etawah	51.6	29.6	15.3	0.1	13.9	1.4	2.8	11.1	22.0
Faizabad	36.7	20.3	9.4	0.3	10.3	0.5	1.3	7.6	16.4
Farrukhabad	33.8	18.1	11.9	0.0	5.3	1.5	3.3	7.1	15.7
Fatehpur	30.9	18.8	8.2	0.2	10.0	1.5	2.3	4.3	12.1
Firozabad	34.6	24.9	15.0	0.0	9.3	3.6	4.3	7.1	9.6
Gautam Buddha Nagar	51.6	43.2	18.4	0.3	24.5	4.3	2.6	11.5	8.3
Ghaziabad	44.5	36.4	17.2	0.2	18.6	3.6	3.3	10.3	8.1
Ghazipur	32.4	27.1	7.4	0.4	19.4	1.9	1.5	4.0	5.3
Gonda	28.7	17.0	10.3	0.0	6.6	0.8	1.9	7.6	11.8
Gorakhpur	37.0	27.0	6.9	0.5	19.5	0.9	2.2	3.9	10.0
Hamirpur	51.0	32.0	8.1	0.5	23.2	0.2	0.8	7.1	19.0
Hardoi	21.3	18.0	11.5	0.3	6.0	1.1	1.9	8.5	3.2
Hathras	36.2	21.8	10.6	0.3	10.7	1.4	3.2	5.9	14.5
Jalaun	49.2	38.7	10.5	0.0	28.2	1.8	1.7	7.0	10.7
Jaunpur	29.0	23.0	4.8	0.2	18.0	0.6	1.9	2.3	6.0
Jhansi	55.1	51.1	7.1	0.3	43.7	0.2	1.0	6.0	4.0
Jyotiba Phule Nagar	34.4	25.7	15.5	0.1	9.6	2.3	2.0	11.2	8.7
Kannauj	29.8	20.9	14.1	0.1	6.6	1.6	3.1	9.4	8.9
Kanpur Dehat	42.2	21.6	12.6	0.2	8.7	1.1	2.1	9.4	20.6

Note: ¹ Include Female sterilization, Male sterilization, IUD, Pills and Condom. ² Include IUD, Pills and Condom. ³ Include Rhythm/Periodic abstinence, Withdrawal and Other traditional method

Contd.

of current spacing methods use is 11 percent and it ranges from 4 percent in Azamgarh district to 22 percent in Bijnor. The variation in contraceptive prevalence at district level is basically due to the variation in the use of spacing methods while both modern uses do not show much variation across districts but not in case of traditional contraceptive.

Table 6.6 CONTRACEPTIVE PREVALENCE RATES BY DISTRICTS (Contd.)

Percentage of currently married women age 15-44 years currently using any contraceptive method by districts, Uttar Pradesh, 2002-04

Districts	Any method	Any modern ¹ method	Any modern spacing ² method	Male sterilization	Female sterilization	IUD	Pill	Condom/Nirodh	Any traditional ³ method
Kanpur Nagar	47.8	32.3	21.5	0.1	10.3	2.6	5.1	13.7	15.5
Kaushambi	29.2	18.0	5.6	0.3	12.2	0.9	0.7	4.0	11.2
Kheri	21.7	18.9	9.2	0.0	9.5	2.0	2.1	5.1	2.8
Kushinagar	41.4	30.7	10.4	0.2	20.0	0.6	2.7	7.1	10.7
Lalitpur	39.9	29.7	5.9	0.4	23.3	0.4	1.1	4.3	10.3
Lucknow	42.5	32.3	16.2	0.1	16.0	2.4	2.3	11.5	10.0
Maharajganj	29.5	25.8	6.4	0.0	19.3	1.1	2.4	3.0	3.7
Mahoba	54.8	38.3	11.7	0.2	26.3	0.5	0.6	10.5	16.6
Mainpuri	29.8	16.1	9.4	0.0	6.5	1.3	1.4	6.8	13.7
Mathura	36.6	27.2	8.4	0.0	18.1	1.5	2.5	4.4	9.4
Mau	39.6	23.9	6.1	0.3	17.5	1.0	1.2	3.9	15.7
Meerut	45.0	37.7	19.1	0.1	18.2	2.4	3.3	13.4	7.2
Mirzapur	38.1	33.5	6.2	0.4	26.5	1.7	1.8	2.8	4.6
Moradabad	34.6	24.1	14.4	0.4	9.0	2.0	1.8	10.7	10.5
Muzaffarnagar	43.1	31.0	17.9	0.1	12.5	2.2	3.6	12.1	12.0
Pilibhit	29.4	27.2	12.5	0.2	14.1	1.9	2.8	7.9	2.2
Pratapgarh	33.1	24.5	8.2	0.2	15.9	1.2	0.9	6.1	8.6
Rae Bareli	25.9	20.6	11.0	0.0	9.6	1.0	3.0	7.0	5.3
Rampur	34.2	29.7	19.8	0.4	9.5	2.4	4.1	13.2	4.6
Saharanpur	42.8	40.5	21.6	0.2	18.6	1.8	7.4	12.4	2.4
Sant Kabir Nagar	27.8	17.0	7.3	0.0	9.4	0.8	2.0	4.5	10.8
Sant Ravidas Nagar	44.6	28.7	5.7	0.0	22.9	2.0	1.3	2.4	16.0
Shahjahanpur	23.0	21.0	11.0	0.3	9.6	1.1	2.7	7.2	2.0
Shrawasti	27.6	14.2	6.0	0.2	7.5	1.0	2.0	3.0	13.4
Siddharthnagar	23.4	10.9	5.1	0.1	5.0	0.4	1.5	3.3	12.4
Sitapur	22.7	18.9	8.8	0.7	9.4	0.7	1.5	6.5	3.8
Sonbhadra	35.0	28.0	6.2	0.2	21.2	0.6	1.8	3.9	7.0
Sultanpur	26.9	21.9	9.9	0.0	11.5	1.2	2.1	6.6	5.0
Unnao	34.8	20.9	9.5	0.1	11.1	0.9	2.1	6.5	14.0
Varanasi	52.8	41.9	9.3	0.5	32.0	2.0	1.8	5.4	10.8
Uttar Pradesh	35.6	26.2	11.4	0.2	14.4	1.6	2.5	7.3	9.4

Note: ¹ Include Female sterilization, Male sterilization, IUD, Pills and Condom² Include IUD, Pills and Condom³ Include Rhythm/Periodic abstinence, Withdrawal and Other traditional method

The pattern of use of contraceptive methods in Uttar Pradesh is different from the general existing pattern in India. The contraceptive prevalence rate of 9 percent for traditional methods in the state is much lower than that in other states in the country. The use of oral Pills exceeds 5 percent in the districts of Baghpat, Kanpur Nagar and Saharanpur. The districts in which the use of condom is more than 13 percent are in Bijnor, Kanpur Nagar, Meerut and Rampur.

6.2.2 Current Use and Ever Use of Family Planning Methods by Women

Table 6.7 provides information on current contraceptive use and ever use of contraception by age and number of surviving children, living sons and daughters. The current use of any method of contraception among currently married women in the 15-19 years age group is 7 percent and this attains a peak of 53 percent in the age group of 35-

Table 6.7 USE OF CONTRACEPTION BY WOMEN

Percentage of currently married women in 15-44 years by current use and ever use of contraception according to selected demographic characteristics, Uttar Pradesh, 2002-04

Demographic Characteristic	Percentage of women/husbands using				Percentage of women/husbands by contraceptive status		Number of women
	Any modern ¹ method	Any traditional ² method	Any method	Not using any method	Ever used	Never used	
Age-group							
15-19	3.0	4.2	7.2	92.7	11.1	88.8	6,662
20-24	12.0	6.9	18.8	81.2	26.1	73.9	14,019
25-29	26.7	9.1	35.7	64.3	44.1	55.9	13,974
30-34	37.5	11.5	49.0	51.0	56.6	43.4	12,435
35-39	40.0	12.8	52.9	47.1	59.8	40.2	9,953
40-44	35.8	11.6	47.4	52.6	54.2	45.8	7,163
Surviving children							
0	1.6	1.6	3.2	96.8	5.7	94.3	8,665
1	11.6	7.7	19.4	80.6	26.4	73.6	9,282
2	29.4	10.2	39.6	60.4	47.5	52.5	11,990
3 or more	35.3	11.6	46.8	53.2	54.8	45.2	34,270
Surviving sons							
0	6.8	4.6	11.4	88.6	16.4	83.6	16,733
1	24.0	9.9	33.9	66.1	42.2	57.8	18,366
2 or more	38.7	11.9	50.6	49.4	58.1	41.9	29,108
Surviving daughters							
0	16.9	6.3	23.2	76.8	28.2	71.8	20,033
1	31.5	9.9	41.5	58.5	48.8	51.2	19,935
2 or more	29.5	11.6	41.1	58.9	49.6	50.4	24,240
All women	26.2	9.4	35.6	64.4	42.7	57.3	64,207

Note: ¹ Include Female sterilization, Male sterilization, IUD, Pills and Condom. ² Include Rhythm/Periodic abstinence, Withdrawal and Other traditional method.

39 years. A similar age pattern of contraceptive use is also observed both in case of modern and traditional methods. The use of traditional method is 13 percent for the women aged 35-39 years and 12 percent for the women aged 40-44 years and it is least (4 percent) for the women in younger age groups 15-19 years. The use of modern methods ranges from 3 percent for women in the age group 15-19 years to 40 percent for women in the age group 35-39 years.

It is crucial to understand the association between the number of living children and contraceptive use. The contraceptive use is high among the women who have three or more surviving children in Uttar Pradesh. The use of any method of contraception is 51 percent for the women who have two or more sons and is higher than the women who have two or more daughters (41 percent). The same trend can be observed in the case of use of any modern method which is 39 percent for the women who have two or more surviving sons and it is higher than the women who have two or more daughters (30 percent).

6.2.3 Current Use and Ever Use of Family Planning Methods as Reported by Husbands

Information pertaining to current use of family planning methods among the husbands of currently married women in Uttar Pradesh by age and number of surviving children, sons and daughters are given in Table 6.8. The current use of any method of contraception among the husbands (aged below 25 years) of currently married women is 16 percent and it gradually picks up with the age of husband, to a peak of 54 percent in the age group, 35-44 years. Similar age patterns of contraceptive use are observed in the case of modern methods. Among the husbands in the age group of 45 years and above, the use of traditional methods is 10 percent and it is least (4 percent) among the husbands in the younger age group of below 25 years. The use of modern methods ranges from 11 percent for husbands below 25 years of age to 43 percent for the husbands in the age group 35-44 years.

Table 6.8 USE OF CONTRACEPTION BY MEN					
Percentage of husband of currently married women by current use and ever use of contraception by selected demographic variables, Uttar Pradesh, 2002-04					
Demographic Characteristic	Percentage of husbands/women using				Number of men
	Any modern ¹ method	Any traditional ² method	Any method	Not using any method	
Age-group					
<25	11.3	4.7	16.1	83.9	5,177
25-34	31.1	7.1	38.2	61.8	14,546
35-44	42.8	11.2	54.0	45.9	13,022
45+	38.3	10.4	48.7	51.2	4,717
Surviving children					
0	4.7	1.5	6.1	93.9	4,916
1	19.3	6.8	26.1	73.9	5,027
2	37.9	8.7	46.7	53.3	6,840
3 or more	42.0	10.8	52.8	47.1	20,681
Surviving sons					
0	11.9	3.8	15.6	84.4	9,339
1	32.9	9.1	41.9	58.0	10,453
2 or more	45.0	11.0	55.9	44.0	17,672
Surviving daughters					
0	22.5	5.8	28.3	71.7	11,391
1	40.4	8.5	48.9	51.1	11,462
2 or more	36.3	10.9	47.2	52.7	14,610
All men	33.3	8.6	42.0	58.0	37,463
Note: ¹ Include Female sterilization, Male sterilization, IUD, Pills and Condom.					
² Include Rhythm/Periodic abstinence, Withdrawal and Other traditional method.					

6.3 Reasons for Not Using Male Methods

The DLHS-RCH asked husbands of currently married women about the contraceptive methods that he or his wife was using currently. The husbands who were not using male methods were further asked the reasons for it. Table 6.9 provides the information about

reasons for not using male contraceptive methods in Uttar Pradesh. Among all the husbands interviewed, 46 percent reported about female methods. Reporting of female methods is higher in rural areas (49 percent) than in urban areas (42 percent). The reasons cited for not preferring the male methods are greater popularity of female methods (44 percent), fear of weakness (43 percent), other reasons (10 percent), fear of operation (4 percent), fear of method failure and lack of sexual pleasure (3 percent each). Only one percent reported fear of impotency as one of the reasons for not using male methods. However, there is not much rural-urban differential in the reasons for not using male methods, except in the case of fear of weakness and popularity of female methods. The expression for fear of weakness is higher in rural areas (48 percent) than in urban areas (33 percent). Popularity of female methods as a reason for not using male methods of contraception is more in urban areas (52 percent) than in rural areas (40 percent).

Table 6.9 REASONS FOR NOT USING MALE METHODS			
Percentage of husbands with their choice of family planning methods and reasons for not accepting male methods according to residence, Uttar Pradesh, 2002-04			
Female method users and reason for not accepting male methods	Total	Residence	
		Rural	Urban
Percentage of husband who have reported female methods	46.3	49.3	41.5
Number of men	15,727	9,709	6,018
Reasons for not accepting male methods*	1.1	1.2	0.9
Fear of impotency	2.6	2.4	3.0
Lack of sexual pleasure	2.7	2.1	3.9
Fear of method failure	4.1	4.5	3.3
Fear of operation	42.6	47.6	32.8
Fear of weakness	44.1	40.0	51.9
Female methods are more popular	9.9	9.2	11.2
Other			
Number of men	7,281	4,784	2,497

Note: * Percentages may add to more than 100.0 because multiple responses could be recorded.

6.4 Source of Contraceptive Methods

To assess the various sources of contraceptive methods, DLHS-RCH collected information on source of obtaining methods. Table 6.10 and Figure 6.3 show the percent distribution of current users of modern contraceptives by source of contraceptives. Family planning methods and services in Uttar Pradesh are provided primarily through a network of government hospitals. The services are also provided by private hospitals and clinics, as well as non-governmental organisations (NGOs). Modern spacing methods like IUD, Pill and condom are available through both the government and private sectors. Government/municipal hospitals are the main source for female sterilization (54 percent) followed by community health centres or primary health centres (26 percent), family planning camps or RCH camp (6 percent) and private hospital (10 percent). Among the IUD users, 34 percent got the service from the government/municipal hospital as source, 30 percent from the private hospital, 14 percent from private doctors, 9 percent from the community health centres and 2 percent from sub-centre. It is found that the chemist is the main source for Pills (76 percent) and condom (79 percent).

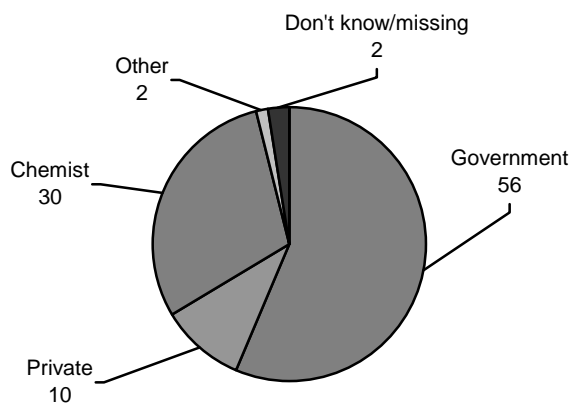
Table 6.10 SOURCE OF MODERN CONTRACEPTIVE METHODS

Percent distribution of current users of modern contraceptive methods by method and source of supply, Uttar Pradesh, 2002-04

Source	Contraceptive method					All modern methods ¹
	Female sterilization	Male sterilization	IUD/ Loop	Pills	Condom / Nirodh	
Government medical centre	87.5	78.0	48.2	15.8	10.1	56.4
Government/Municipal hospital	54.1	58.4	34.1	6.5	4.1	34.3
CHC/PHC	26.2	17.9	8.9	2.5	1.4	15.8
Sub-centre	0.5	0.0	2.3	2.0	1.2	0.9
Government doctor	0.2	0.0	0.2	0.1	0.1	0.2
Government nurse/ ANM	0.1	0.0	2.5	3.5	2.2	1.2
Family planning/RCH camp	6.4	1.8	0.3	0.1	0.2	3.6
Out reach/MCP clinic in village	0.0	0.0	0.0	0.3	0.4	0.1
Mobile clinic	0.0	0.0	0.0	0.9	0.5	0.2
Private medical centre	11.2	13.5	49.4	3.4	1.1	9.9
Private hospital	9.8	10.7	30.0	0.9	0.6	7.5
Private doctor	1.0	2.7	14.1	2.0	0.4	1.7
Private nurse	0.4	0.0	5.3	0.5	0.1	0.6
Chemist	NA	NA	NA	76.0	79.0	29.6
Other	0.8	3.7	1.9	2.1	3.1	1.7
Do not know	0.4	3.7	0.4	2.6	6.6	2.4
Missing	0.0	1.1	0.1	0.1	0.1	0.0
Total percent	100.0	100.0	100.0	100.0	100.0	100.0
Number of users	9,254	126	999	1,603	4,700	16,682

Note: ¹ Includes female sterilization, male sterilization, IUD, Pills or condom. CHC: Community health centre, PHC: Primary health centre. NA: Not applicable.

Figure 6.3
Source of Family Planning Among Current
Users of Modern Contraceptive Methods



Uttar Pradesh, DLHS-RCH, 2002-04

Note: Total percent may add more than 100.0 due to rounding

6.5 Problems with Current Use of Contraceptive Methods

Women who were using a modern contraceptive method were asked if they had experienced any problems related with the current methods they are using. Table 6.11 shows the percentage of current contraceptive users who reported specific health problems, treatment seeking behaviour and their satisfaction about the method. The analysis of the method specific problems reveals that 20 percent of the sterilized women have problem with the contraceptive methods in use. The most common problems experienced by the sterilized women are body ache or backache (50 percent), white discharge (44 percent), weakness or inability to work (29 percent), dizziness (18 percent), excessive bleeding and irregular periods (12 percent each), cramps (11 percent) and nausea or vomiting (4 percent). With regard to the modern spacing methods, 9 percent and 11 percent of women had problems in using Pills and IUD respectively. The most common problems of Pill users were dizziness (46 percent), weakness or inability to work (30 percent), body ache or backache (21 percent), white discharge (19 percent), irregular periods (17 percent), nausea or vomiting (9 percent) and excessive bleeding (8 percent).

Table 6.11 HEALTH PROBLEMS WITH CURRENT USE OF CONTRACEPTION			
Percentage of women informed about side effects, had side effects with the method by use of method, Uttar Pradesh, 2002-04			
Health problems/side effect	Type of method		
	Female sterilizations	IUD/loop	Pill
Women who were informed about all the available methods	18.3	100.0	0.0
Women who were informed about the side effects before adoption of the method	24.1	36.2	18.1
Women who had side effect/health problem due to use of contraceptive method	19.9	11.2	9.4
Number of current users	9,254	999	1,603
Type of health problems/side effects¹			
Weakness/inability to work	28.7	13.3	29.6
Body ache/ backache	49.9	45.3	20.5
Cramps	10.8	5.2	4.8
Weight gain	9.9	8.4	2.9
Dizziness	18.0	11.5	46.2
Nausea/vomiting	3.6	2.4	8.6
Breast tenderness	2.5	0.9	0.9
Irregular periods	11.8	11.1	16.6
Excessive bleeding	12.4	36.2	8.3
Spotting	2.3	9.4	1.5
White discharge	43.7	20.0	19.0
Other	0.0	1.4	0.3
Number of users with side effects	1,841	112	150

Note: ¹ Percentages may add to more than 100.0 because multiple problems could be recorded.

6.6 Treatment for Health Problems with Current Use of Contraception

The study of respondents who sought treatment for contraceptive related health problems reveals that 58 percent of the sterilized women sought treatment and 54 percent and 31 percent in the case of IUD and Pills respectively. Regarding the satisfaction about the method, 92 percent of the sterilized women reported satisfaction with sterilization. In the case of spacing methods, 94 percent of women using Pills and IUD were satisfied with the respective methods.

Those women who had sought treatment for contraceptive use related problems, majority of them have taken treatment from private hospitals/clinics. For female sterilization related health problems, 54 percent had taken treatment from private hospitals/clinics, 20 percent from government hospitals/dispensaries, 11 percent from chemist/medical shop, 8 percent from primary health centres and 5 percent from Indian System of Medicine health facilities. Private hospital/clinic is the source of treatment for 60 percent of women who had health problem in using IUD and the corresponding figures for the same source of treatment among Pill users is 70 percent.

Table 6.12 FOLLOW-UP VISITS AND SOUGHT TREATMENT FOR HEALTH PROBLEMS WITH CURRENT USE OF CONTRACEPTION			
Percentage of women who had follow-up visit, satisfied with current method, and sought treatment with side effect with the method by use of method, Uttar Pradesh, 2002-04			
Health problems/side effect	Type of method		
	Female sterilizations	IUD/loop	Pill
Women who had follow up visit by health worker after adoption of method	28.1	8.6	4.7
Women who are satisfied with method of current use	91.6	94.0	94.2
Number of current users	9,254	999	1,603
Women who sought treatment for the health problem	58.4	54.1	30.5
Number of women with side effects	1,841	112	150
Source of treatments			
Government health facility			
Government hospital/dispensary	20.4	23.1	16.2
UHC/UHP/UFWC	0.6	1.0	0.0
CHC/Rural hospital	3.3	0.8	0.0
PHC	7.5	3.9	1.8
Sub-centre	1.6	2.0	0.0
Out reach/MCP clinic in village	0.2	0.0	0.0
Private health facility			
NGO/trust hospital clinic	0.4	0.0	0.0
Private hospital/clinic	53.9	60.1	69.8
ISM health facility ¹	4.9	1.6	3.0
Chemist/Medical shop	10.8	7.6	7.9
Home remedy	1.8	1.1	1.3
Other	3.2	0.0	0.0
Number of women with side effects	1,076	61	46

Note: ¹ Either government or Private.

6.7 Advice to Non-Users to Use Contraception

Information about non-users who were advised by the ANM/health worker to adopt contraceptives and their future intention to use by preferred method according to their background characteristics are presented in Table 6.13. In DLHS-RCH currently married women who were not using any method of contraception, were asked about advice given by ANM/health worker for adoption of any contraceptive method. It is evident that 7 percent of the women were advised by ANM/health worker to adopt any family planning method in Uttar Pradesh.

Table 6.13 ADVICE ON CONTRACEPTIVE USE					
Percentage of current non-users* who were advised by the ANM/health worker to use contraception by suggested method according to place of residence and availability of health facility in the village, Uttar Pradesh, 2002-04					
Advise/future intension to use	Total	Residence		Availability of health facility in the village ¹	
		Rural	Urban	No	Yes
Percentage of current non-users advised by ANM/health worker to use of contraceptive method	7.0	7.2	6.3	6.6	8.3
Number of non-users	39,500	30,031	9,470	18,658	11,373
Percent distribution of women who were advised by method					
Female sterilization	49.8	55.0	31.1	55.1	54.9
Male sterilization	5.4	4.5	8.7	5.8	2.8
IUD/loop	11.8	9.4	20.3	9.0	9.9
Pill	20.8	20.9	20.8	20.3	21.6
Condom/Nirodh	10.0	8.4	15.8	8.3	8.6
Rhythmic /periodic abstinence	0.2	0.3	0.2	0.3	0.2
Withdrawal	0.1	0.1	0.2	0.0	0.2
Other	1.6	1.3	2.7	1.3	1.4
Missing	0.2	0.1	0.2	0.0	0.3
Total percent	100.0	100.0	100.0	100.0	100.0
Number of non-users	2,767	2,169	598	1,224	945
Note: * Exclude women in menopause or those who have undergone hysterectomy.					
¹ Includes sub-centre, primary health centre, community health centre or referral hospital, government hospital, and government dispensary within the village.					

The contraceptive method recommended by ANM/health worker is dominated by female sterilization (50 percent) and Pill (21 percent). Only 22 percent were advised either to adopt IUD/loop or Condom/Nirodh as spacing methods. Male sterilization has been advised to 5 percent. This pattern of advice also emerges irrespective of residence and availability of health facility in the village.

6.7.1 Future Intentions

Among the non-users, 27 percent of women have expressed their intention to use any method of contraception in the future. There is no difference observed in rural-urban (27 percent each) women who have expressed their intention to use any method of contraception in the future.

Table 6.14 FUTURE INTENTION TO USE						
Percentage of current non-users* who were intended to use contraception in future by preferred method according to place of residence, Uttar Pradesh, 2002-04						
Future intention to use/method	Women			Husband		
	Total	Rural	Urban	Total	Rural	Urban
Percentage of respondents who intend to use contraceptive in future	27.3	27.4	26.8	29.8	29.6	30.4
Number of non-users	39,500	30,031	9,470	21,325	16,143	5,182
Percent distribution of non-user who were preferred to use family methods by preferred method						
Female sterilization	49.2	50.1	46.5	46.7	47.7	43.7
Male sterilization	0.8	0.7	1.0	4.3	4.3	4.2
IUD/copper-T/loop	4.7	4.0	7.1	4.6	4.9	3.7
Oral pills	24.1	24.9	21.7	11.0	11.8	8.5
Condom/Nirodh	6.5	5.3	10.5	22.8	20.2	30.5
Rhythm/periodic abstinence	2.5	2.7	1.9	3.0	2.9	3.4
Withdrawal	0.8	0.9	0.4	0.4	0.4	0.7
Other	11.3	11.4	10.8	7.1	7.8	4.8
Missing	0.1	0.1	0.1	0.1	0.0	0.5
Total percent	100.0	100.0	100.0	100.0	100.0	100.0
Number of non-users	10,754	8,217	2,537	6,355	4,778	1,577

Note: * Exclude women who are in menopause or those who have undergone hysterectomy.

Among the women who intended to use permanent methods of contraception, 49 percent preferred female sterilization whereas only one percent of the women preferred male sterilization. In case of temporary methods, the preferred methods by women are oral Pills (24 percent), condoms (7 percent), IUD (5 percent), rhythm/periodic abstinence (3 percent), withdrawal (1 percent), and other methods (11 percent).

Thirty percent of the husbands intended to use contraception in the future and they are equally distributed among rural and urban. Method wise choice in intention to use contraception is dominated by female sterilization (47 percent), followed by condom/nirodh (23 percent), pills (11 percent), IUD (5 percent), rhythm/periodic abstinence (3 percent) and other method (7 percent)

6.7.2 Future Intention to Use Among Women by Number of Living Children

Currently married women who were not using any contraceptive method at the time of survey were asked about their intentions to use a method in the future. Those women who intended to use contraceptives in the future were further asked about the preferred methods. This type of information aids the managers and programmers to identify the potential groups of future users and to provide the type of contraceptives that are likely to be in demand. Table 6.15 provides the information on intention to use contraception in future according to number of living children and residence background in Uttar Pradesh. Among the current non-users, around 9 percent of the women intended to use contraception within the next twelve months. Only 5 percent of women wanted to use

Table 6.15 FUTURE USE OF CONTRACEPTION BY NUMBER OF LIVING CHILDREN						
Percent distribution of currently married women* who were not currently using any contraceptive method by intention to use in the future, according to number of living children and residence, Uttar Pradesh, 2002-04						
Intention to use in the future	Number of living children					Total
	0	1	2	3	4+	
Total						
Intends to use in next 12 months	0.9	4.5	10.2	12.7	14.7	8.8
One to two years	1.0	3.0	5.4	7.0	7.8	5.0
More than two years	13.2	19.0	16.5	12.8	8.4	13.4
Does not intend to use	29.9	28.2	31.3	35.8	42.9	34.3
Not yet decided	55.0	45.3	36.6	31.6	26.2	38.4
Missing	0.1	0.0	0.0	0.0	0.0	0.0
Total percent	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	8,255	7,342	7,007	5,775	11,121	39,500
Rural						
Intends to use in next 12 months	0.8	3.7	9.0	12.2	14.9	8.6
One to two years	0.9	3.0	5.6	7.0	7.6	5.0
More than two years	13.5	19.7	16.9	13.1	8.8	13.8
Does not intend to use	29.0	28.1	31.4	34.6	41.6	33.7
Not yet decided	55.8	45.4	37.0	33.0	27.0	38.9
Missing	0.0	0.0	0.0	0.1	0.0	0.0
Total percent	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	6,087	5,523	5,294	4,470	8,657	30,031
Urban						
Intends to use in next 12 months	1.0	6.9	13.7	14.7	13.9	9.7
One to two years	1.3	3.0	4.9	6.8	8.6	4.9
More than two years	12.3	16.9	15.3	11.6	6.7	12.2
Does not intend to use	32.6	28.5	30.8	40.1	47.3	36.3
Not yet decided	52.7	44.7	35.3	26.8	23.4	36.8
Missing	0.1	0.0	0.0	0.0	0.0	0.0
Total percent	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	2,168	1,819	1,713	1,306	2,464	9,470

Note: * Exclude women who are in menopause or those who have undergone hysterectomy.

within one to two years whereas 13 percent reported their intention to use contraceptives after two years. About 38 percent are not sure of their intention to use, where as 34 percent women reported no intention to use. The intention of using contraception is high among the women who have two or more living children compared to the women who have either one or no living children. More than half of the women (55 percent) who have no living children reported that they are yet to decide about the use of contraceptives.

6.8 Reasons for Discontinuation and Non-Use of Contraception

Currently married non-pregnant women who were not using any contraceptive method at the time of survey were categorised as past users and never users according to their contraceptive experience. In DLHS-RCH, women who had discontinued contraceptive use were asked about the main reason for discontinuation. The survey also asked women who had never used contraceptives about the main reason for not doing so. Table 6.16

shows the main reason for not using contraceptives among both the past never users and current non users. Among the past users, around 40 percent of the women mentioned that they discontinued the use because they had wanted child, other reasons (20 percent), method failed/became pregnant (12 percent), weakness/inability to work (6 percent), irregular periods (3 percent) and method was inconvenient (3 percent). For urban women, 11 percent reported method failure/become pregnant due to discontinuation. In urban areas, 16 percent of women reported other reason for discontinuing the use and where as the same is 22 percent among rural women.

Table 6.16 REASONS FOR DISCONTINUATION OF CONTRACEPTION			
Percent distribution of women who were past users (current non-users) by reason for discontinuation of the contraceptive method according to place of residence, Uttar Pradesh, 2002-04			
Reasons	Total	Place of residence	
		Rural	Urban
Reason for discontinuation			
Wanted child	39.9	38.4	42.7
Method failed/became pregnant	12.4	13.2	10.9
Supply not available	3.0	3.1	2.9
Difficult to get method	1.1	1.3	0.5
Weakness/inability to work	5.8	5.4	6.5
Body ache/ Backache	1.4	1.1	1.9
Cramps	0.6	0.8	0.4
Weight gain	0.7	0.3	1.4
Dizziness	2.8	2.7	3.0
Nausea/vomiting	0.9	0.7	1.3
Breast tenderness	0.2	0.3	0.0
Irregular periods	3.2	2.7	4.2
Excessive bleeding	2.1	2.4	1.7
Spotting	0.3	0.3	0.2
White discharge	0.7	0.6	0.8
Lack of pleasure	2.1	1.6	2.9
Method was inconvenient	3.1	3.3	2.6
Other	19.5	21.5	15.8
Missing	0.2	0.1	0.3
Total percent	100.0	100.0	100.0
Number of past users	4,551	2,974	1,576

6.8.1 Reasons for Not Using Contraceptive Methods

DLHS asked women and husbands who are currently not using any contraception and main reasons why they were not currently using a method. The reported main reasons for not using contraceptives are, health does not permit (13 percent), opposed to family planning (11 percent), against the religion (7 percent), afraid of sterilization (5 percent), lack of knowledge about family planning methods (4 percent) and difficult to become pregnant (2 percent). About 48 percent of the women reported other reasons for not using contraception. As far as rural-urban differentials are concerned, a little variation is observed in the reasons for not using any contraceptive.

Reason	Women			Husband*		
	Total	Rural	Urban	Total	Rural	Urban
Lack of Knowledge about FP method	3.7	4.1	2.1	9.7	9.8	9.3
Against the Religion	7.0	6.0	10.3	9.3	8.4	12.0
Opposed to family planning	11.0	11.3	10.1	9.7	9.7	9.6
Not like existing method	2.8	2.8	3.0	3.0	3.3	2.2
Afraid of sterilization	4.6	4.9	3.8	3.9	4.4	2.4
Can not work after sterilization	1.0	1.1	0.6	1.9	2.1	1.5
Worry about side effects	1.4	1.5	1.0	4.6	4.9	3.7
Costs too much	2.0	2.1	1.6	3.7	3.5	4.4
Health does not permit	13.2	11.7	18.2	12.6	12.5	12.9
Hard/inconvenient to get method	1.9	2.2	1.3	2.5	2.1	3.6
Inconvenient to use method	0.8	0.7	1.1	1.3	1.4	1.0
Difficult to become pregnant	2.4	2.3	2.5	5.3	4.7	7.0
Wife is pregnant ¹	-	-	-	3.0	3.2	2.5
Other	48.0	49.2	44.3	29.2	29.6	27.7
Missing	0.1	0.2	0.1	0.3	0.4	0.2
Total percent	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	21,609	16,448	5,160	9,424	7,114	2,310

Note: ¹ Not applicable for women. * Excluding not decided cases on timing of next child.

6.9 Unmet Need for Family Planning Services

Unmet need for family planning is one of the indicators to assess the effectiveness of the family planning programme. Policy makers and family planning programme planners use this to know the demand for family planning services/supplies. Unmet need is defined in this report separately for limiting and spacing. Unmet need for spacing includes the proportion of currently married women who are neither in menopause nor had hysterectomy nor are currently pregnant and who want more children after two years or later and are currently not using any family planning method. The women who are not sure about whether and when to have next child, are also included in unmet need for spacing. The women who are not sure about the timing of the next child are also included in the unmet need for spacing. Unmet need for limiting includes the proportion of currently married women who are neither in menopause nor had hysterectomy nor are currently pregnant and do not want any more children but are currently not using any family planning method. Total unmet need refers to the totality of unmet for limiting and spacing. Table 6.18 provides the information about unmet need for limiting and spacing in Uttar Pradesh by background characteristics.

The unmet need is higher for women of 20 – 29 years, mainly for spacing rather than for limiting. Unmet need is also relatively higher for women aged 30-34 years (33 percent) for both spacing and limiting. Among the older women of age 35-39 years, 29 percent have unmet need, and mostly for limiting. Among the women age 35 years and above, unmet need is exclusively for limiting. The rural women have high unmet need (36 percent) than the urban women (27 percent). The unmet need for family planning is higher (38 percent) among the non-literate women than among the women with 0-9 years of schooling (30 percent) and 10 or more years of schooling (23 percent). Christian women have lesser unmet need for family planning (22 percent) compared to the Muslim women (40 percent) or Hindu women (32 percent). Unmet need for family planning is higher for Scheduled tribe and Scheduled caste (38 percent each) followed by other backward class (35 percent) and other caste (28 percent) women.

Table 6.18 UNMET NEED FOR FAMILY PLANNING SERVICES

Percentage of currently married women with unmet need for family planning services by selected background characteristics, Uttar Pradesh, 2002-04

Background Characteristic	Unmet need for FP			Number of women
	Spacing ¹	Limiting ²	Total	
Age				
15-19	28.6	2.6	31.2	6,662
20-24	24.1	10.7	34.8	14,019
25-29	13.8	21.0	34.8	13,974
30-34	6.7	26.4	33.1	12,435
35-39	3.9	29.3	33.2	9,953
40-44	1.6	30.8	32.4	7,163
Residence				
Rural	15.1	21.2	36.3	45,196
Urban	8.9	18.1	27.0	19,011
Education				
Illiterate	14.2	23.5	37.7	39,991
0-9 @ years	13.3	16.3	29.6	14,418
10 years and above	9.7	13.0	22.6	9,785
Religion				
Hindu	12.9	19.4	32.4	52,900
Muslim	15.4	24.6	40.0	10,925
Christian	4.8	16.9	21.7	77
Sikh	4.3	13.6	17.9	218
Jain	2.1	4.9	7.1	66
Caste/tribe#				
Scheduled caste	15.9	21.5	37.5	14,188
Scheduled tribe	17.5	20.5	38.0	551
Other backward class	14.0	21.0	34.9	31,046
Others	10.0	18.0	28.0	17,717
Number of living children				
0	11.0	0.8	11.7	8,665
1	31.0	4.7	35.7	9,282
2	17.9	17.1	35.0	11,990
3	10.2	23.0	33.2	11,945
4+	6.0	34.6	40.6	22,326
Standard of living Index				
Low	16.1	22.9	39.0	32,769
Medium	12.5	19.6	32.1	17,432
High	7.8	14.9	22.7	14,006
All women	13.3	20.3	33.6	64,207
<p>Note: ¹ Unmet need for spacing includes the proportion of currently married women who are neither in menopause or had hysterectomy nor are currently pregnant and who want more children after two years or later and are currently not using any family planning method. The women who are not sure about whether and when to have next child are also included in unmet need for spacing.</p> <p>² Unmet need for limiting includes the proportion of currently married women who are neither in menopause or had hysterectomy nor are currently pregnant and do not want any more children but are currently not using any family planning method.</p> <p>Total unmet need refers to unmet for limiting and spacing.</p> <p>@ Literate women with no years of schooling are also included. # The total figure may not add to N due to do not know and missing cases.</p> <p>Note: Total includes 13 women with missing information on education and 20 women with other religion were not shown separately.</p>				

Women from low standard of living households have higher (39 percent) unmet need than the women of medium (32 percent) and high standard of living (23 percent). Unmet need is much higher for the women with one living child (36 percent) than women with two or more children (35 percent) and women with no children (12 percent). Among the women with no children or one child the unmet need is mainly for spacing, where as for women with two children or more unmet need is exclusively for limiting.

6.9.1 Unmet Need for Family Planning Services by Districts

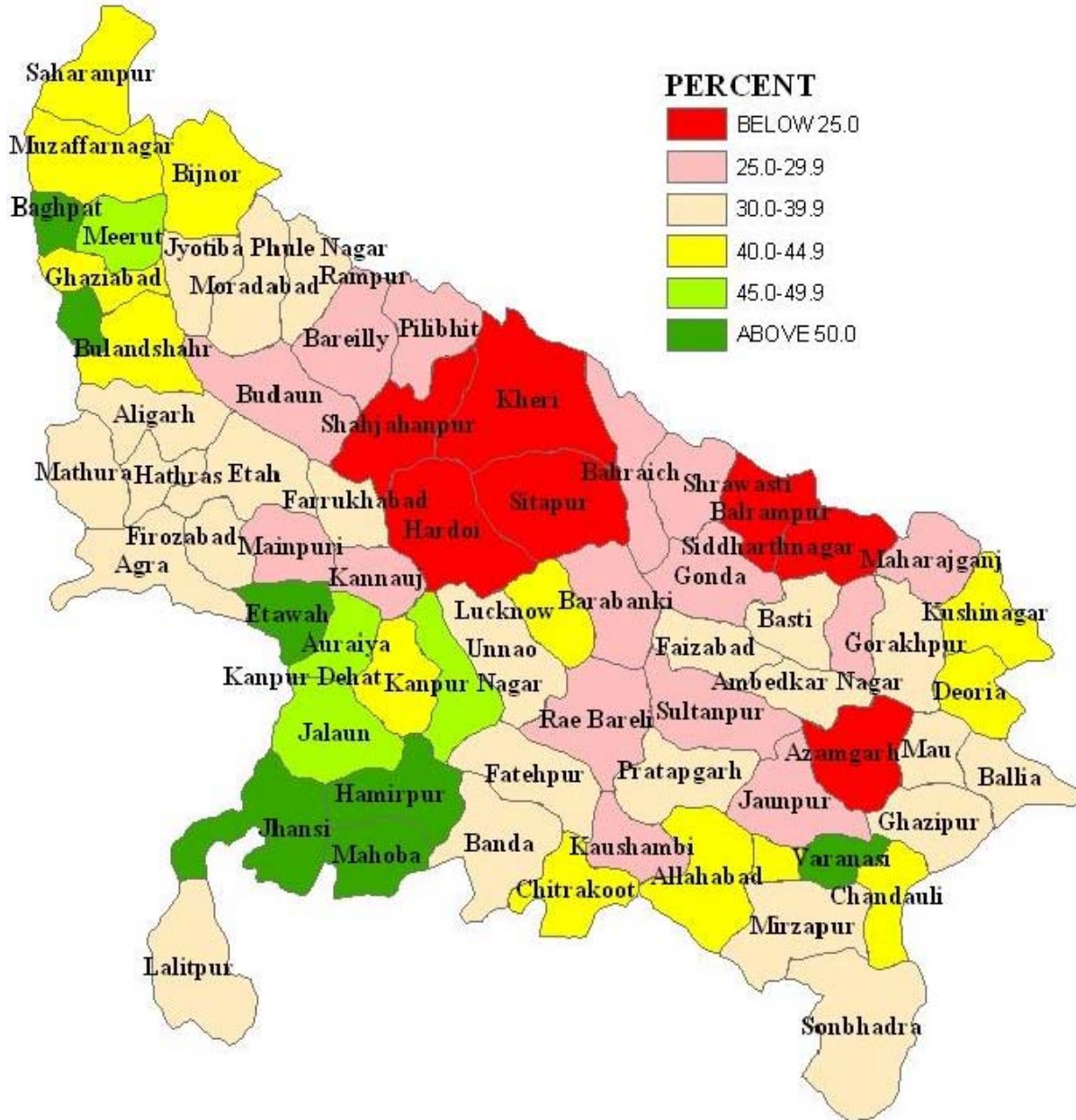
Table 6.19 provides the information about unmet need for limiting, spacing and total by district. The unmet need for family planning services for UP is 37 percent and it ranges from 20 percent in Jhansi to 48 percent in Rae Bareli. In 31 out of 70 districts, unmet need for family planning is more than the state average. Unmet need for limiting was found to be lowest in Jhansi (11 percent) followed by Varanasi (13 percent) and Mahoba (12 percent), and highest in Mainpuri (28 percent). Similarly, unmet need for spacing ranged from 6 percent in Baghpat to 25 percent in Rae Bareli. It may also observed that except Bahraich, Balrampur, Rae Bareli, Shrawasti and Sitapur districts, in all the districts of Uttar Pradesh unmet need for limiting was more than spacing.

Table 6.19 UNMET NEED BY DISTRICT			
Percentage of currently married women with unmet need by district, Uttar Pradesh, 2002-04			
Districts	Unmet need for		
	Spacing	Limiting	Total
Agra	10.9	19.2	30.1
Aligarh	7.7	19.1	26.8
Allahabad	8.7	17.8	26.5
Ambedaker Nagar	12.8	22.9	35.6
Auraiya	8.6	16.6	25.2
Azamgarh	19.3	26.5	45.8
Baghpat	5.8	16.6	22.4
Bahraich	18.9	17.5	36.4
Ballia	14.4	26.5	40.9
Balrampur	21.6	18.5	40.1
Banda	9.4	18.7	28.1
Barabanki	20.0	20.8	40.8
Bareilly	14.3	22.0	36.3
Basti	13.5	17.6	31.1
Bijnor	11.1	20.8	31.9
Budaun	9.9	20.8	30.7
Bulandshahar	9.1	22.6	31.8
Chandauli	10.5	14.0	24.5
Chitrakoot	10.7	15.6	26.3
Deoria	7.1	18.5	25.6
Etah	8.7	23.5	32.2
Etawah	6.6	16.6	23.2
Faizabad	15.0	20.3	35.3
Farrukhabad	9.1	21.6	30.7
Fatehpur	10.2	26.3	36.5
Firozabad	13.3	25.5	38.9
Gautam Buddha Nagar	8.2	14.4	22.6
Ghaziabad	9.8	22.4	32.2
Ghazipur	15.7	22.5	38.2
Gonda	18.4	20.0	38.4
Gorakhpur	11.6	21.9	33.6
Hamirpur	10.0	14.0	24.0
Hardoi	18.8	23.5	42.3
Hathras	8.6	21.4	30.0
Jalaun	7.4	15.3	22.7
Jaunpur	18.0	21.5	39.4
Jhansi	8.9	10.9	19.7
Jyotiba Phule Nagar	13.4	21.4	34.8
Kannauj	12.9	25.2	38.1
Kanpur Dehat	10.4	21.5	31.9

Contd.

Table 6.19 UNMET NEED BY DISTRICTS (Contd.)			
Percentage of currently married women with unmet need by district, Uttar Pradesh, 2002-04			
Districts	Unmet need for		
	Spacing	Limiting	Total
Kanpur Nagar	9.1	17.9	27.0
Kaushambi	15.2	21.0	36.2
Kheri	18.1	24.1	42.2
Kushinagar	10.1	18.8	28.8
Lalitpur	10.5	21.3	31.8
Lucknow	11.8	18.3	30.1
Maharajganj	14.6	22.3	36.9
Mahoba	9.4	12.2	21.6
Mainpuri	9.8	28.4	38.2
Mathura	11.7	19.1	30.8
Mau	12.5	17.2	29.6
Meerut	8.8	17.8	26.5
Mirzapur	12.9	16.2	29.1
Moradabad	14.7	19.8	34.5
Muzaffarnagar	7.9	18.9	26.8
Pilibhit	12.5	27.0	39.5
Pratapgarh	16.9	20.1	37.0
Rae Bareli	24.5	23.7	48.2
Rampur	16.0	21.4	37.4
Saharanpur	11.2	19.3	30.5
Sant Kabir Nagar	14.1	24.5	38.6
Sant Ravidas Nagar	12.1	15.5	27.5
Shahjahanpur	19.0	21.3	40.3
Shrawasti	18.4	15.5	33.9
Siddharthnagar	20.2	20.4	40.7
Sitapur	23.7	21.5	45.2
Sonbhadra	15.0	18.6	33.6
Sultanpur	16.3	25.5	41.8
Unnao	10.5	18.9	29.3
Varanasi	9.6	13.0	22.6
Uttar Pradesh	13.3	20.3	33.6

MAP-6
Current Use of Any Family Planning Method



CHAPTER VII

ACCESSIBILITY AND PERCEPTION ABOUT GOVERNMENT HEALTH FACILITIES

The government health facilities at all the levels provide various RCH services. Auxiliary Nurse Midwife (ANM), family planning worker or male health worker play a key role in delivering the services to the community. Health workers are expected to make regular visits to all the households in their assigned area. During these contacts, the health workers are supposed to monitor various aspects of the health of women and children, provide information related to health and family planning, counsel and motivate to adopt appropriate health and family planning practices, and deliver other selected services. These contacts are also important as they enhance the creditability of services and establish necessary rapport with the clients. In order to assess the extent of utilisation of government health facilities by all eligible women and to find out whether ANM/health workers reach the households for providing RCH services, a separate section in the women's questionnaire was canvassed to all the eligible women. This chapter deals with the accessibility and the opinion of women about the services provided by the government health workers. The quality of care offered by the government health programme as perceived by currently married women is also presented.

7.1 Home Visit by Health Workers

Table 7.1 shows the percentage of currently married women visited by health workers at home during the three months prior to the survey. Around 11 percent of the women in Uttar Pradesh reported that the health worker visited them at their residence at least once in last three months preceding the survey. Younger women seemed more likely to report a home visit than older women. Twelve percent of women in the age group 15-24 years reported at least one home visit compared to only 8 percent of women in the age group 35 years and older. The percentage of women in Uttar Pradesh receiving home visits is higher in rural areas (13 percent) than in urban areas (7 percent). Women who were non-literate (12 percent) and women with a low standard of living (13 percent) seemed more likely to report home visits. More Jain women (15 percent) reported home visits than Muslim women (12 percent), Hindu women (11 percent) and other religious groups (10 percent). There was not much variation by caste/tribe. Home visits were more common for women residing in the villages with a health facility.

Women who reported a home visit during the three months preceding the survey were asked who visited their household during the past three months and whether they were satisfied with the kind of services/advice received, and the time spent by these health workers. Among women who received services at home, 89 percent received services from ANM/LHV, 12 percent from male health worker and two percent from a doctor. There were more rural-urban differentials by visit of households by health worker. Seventy one percent of women who received services at home were satisfied with the time spent with them and 86 percent of women were satisfied with the services or advice given to them.

Table 7.1 HOME VISIT BY HEALTH WORKER								
Percentage of women who had home visit by a doctor, ANM/LHV, or male health worker in the 3 months preceding the survey, among women who had home visit, satisfied with time spent by health workers and with services provided by selected background characteristics, Uttar Pradesh, 2002-04								
Background characteristic	Percentage with home visit	Number of women	Home visit by ¹			Percentage of women satisfied with		Number of women
			Doctor	ANM / LHV	Male health worker	Amount of time	Services / advices	
Age								
15-24	12.4	20,681	3.5	89.5	11.2	70.4	86.0	654
25-34	12.5	26,409	3.4	88.0	13.4	72.5	87.6	5,193
35-44	7.7	17,116	3.6	90.8	11.9	69.6	83.5	1,324
Residence								
Rural	12.9	45,196	3.5	91.1	10.1	70.7	85.9	5,836
Urban	7.0	19,011	3.5	79.8	22.2	73.4	87.6	1,336
Education								
Non-literate	11.8	39,991	3.3	90.0	11.3	70.6	85.5	4,722
0-9@ years	11.1	14,418	3.3	89.7	12.1	71.8	87.0	1,607
10 and above	8.6	9,785	4.6	82.2	18.6	73.7	88.7	842
Religion								
Hindu	11.1	52,900	3.7	89.1	12.0	71.0	86.3	5,869
Muslim	11.7	10,925	2.4	89.1	13.5	72.1	86.0	1,279
Christian	4.0	77	*	*	*	*	*	3
Sikh	3.9	218	*	*	*	*	*	9
Jain	14.9	66	*	*	*	*	*	10
Caste/tribe#								
Scheduled caste	11.9	14,188	3.4	90.2	11.8	70.9	85.1	1,690
Scheduled tribe	11.0	551	3.9	91.2	11.6	60.4	80.6	60
Other backward class	12.0	31,046	3.2	89.7	11.6	70.7	87.0	3,725
Other	9.3	17,717	4.0	86.2	14.6	72.9	86.1	1,643
Standard of living index								
Low	12.6	32,769	3.2	90.6	11.1	69.5	85.0	4,140
Medium	11.4	17,432	3.3	90.3	10.9	73.0	87.9	1,990
High	7.4	14,006	4.7	80.5	19.6	74.5	88.1	1,042
Availability of health facility² in the village								
No	12.0	27,987	4.1	89.3	10.8	72.3	87.3	3,355
Yes	14.4	17,208	2.6	93.7	9.1	68.6	84.0	2,481
Total	11.2	64,207	3.5	89.0	12.3	71.2	86.2	7,172
Note: Total includes 13 woman with missing information on education and 20 women of other religion were not shown separately.								
¹ Percentage add to more than 100.0 due to multiple responses. @ Literate mother with no years of schooling are included.								
# Total number may not add to N due to do not know and missing cases.								
² Includes sub-center, primary health center, Community health center or referral hospital, government hospital, and government dispensary within the village. * Percentages not shown based on few cases.								

The proportion of women who were satisfied with the amount of time spent, and advice provided by health workers varied across various background characteristics. Seventy percent of women in the age group 15-24 years and seventy three percent of women in the age group 25-34 years reported satisfaction with the time spent by health workers as compared to 70 percent of women aged 35 years and older. Eighty six percent of women in the age group 15-24 years reported satisfaction with services as compared to 88 percent of women in the age group 25-34 and 84 percent of women of age 35 years and older. Urban women (73 percent) were more likely than rural women (71 percent) to

report that they are satisfied with the time spent by health workers during home visits, similarly they were more satisfied with service/ advice received. Women who were non-literate, women from scheduled tribe women, and women with a low standard of living are less likely to report satisfaction with amount of time spent by health workers during home visits. Women residing in the village with availability of health facility are slightly less satisfied with the time spent than women from those villages where health facilities are not available.

7.2 Home Visit by Health Workers by Districts

In more than half of the districts in Uttar Pradesh, health workers visited less than 10 percent of the women at home (Table 7.2 and Figure 7.1). There are only five districts in which about one third or more of women received home visits (Ambedaker Nagar, Chitrakoot, Deoria, Faizabad and Sant Kabir Nagar). In Chitrakoot district, health workers approached 42 percent of women. Among women who were visited by health workers at home, more than three quarter of them were approached by ANM/LHV in almost all the districts. None of the women was approached by male worker at home in Bahraich, Bareilly, Kaushambi and Shahjahanpur districts with the highest proportion being in Etawah (57 percent) district, and except women in less than one fifth of districts, in all other districts, women visited by doctor at home was below 10 percent in almost all districts.

In the districts Auraiya, Shrawasti and Varanasi, less than two fifth of the women said that the worker had spent enough time with them. On the other hand, more than 90 percent women in Gautam Buddha Nagar, Shahjahanpur (97 percent each), Firozabad (95 percent), Gorakhpur, Hathras, Maharajganj, Mainpuri (93 percent each), Agra, Mathura and Moradabad (92 percent each) reported satisfaction with services/advice given by health workers.

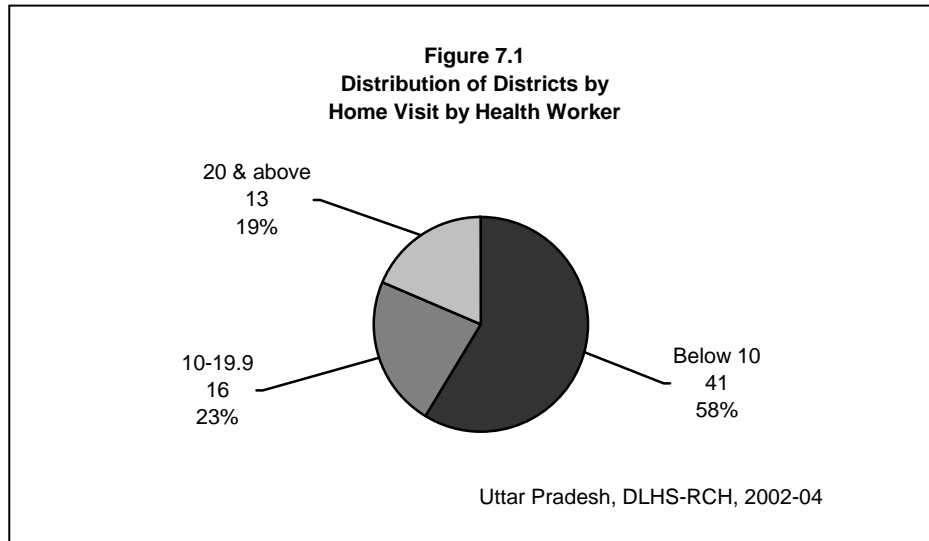


Table 7.2 HOME VISIT BY HEALTH WORKER BY DISTRICT

Percentage of women who had home visit by a doctor, ANM/LHV, or male health worker in the 3 months preceding the survey, among women who had home visit, satisfied with time spent by health workers and with services provided by district, Uttar Pradesh, 2002-04

District	Percentage with home visit	Home visit by ¹			Percentage of women satisfied with	
		Doctor	ANM / LHV	Male health worker	Time spent	Service
Agra	3.9	0.0	97.0	3.0	91.9	97.0
Aligarh	15.3	7.4	54.8	40.9	79.5	89.9
Allahabad	16.6	0.0	98.8	1.2	68.7	87.1
Ambedaker Nagar	34.2	0.3	100.0	9.5	77.2	85.2
Auraiya	6.3	0.0	92.2	15.5	35.7	92.8
Azamgarh	7.1	9.0	83.3	19.6	79.3	86.9
Baghpat	17.9	2.6	92.4	7.6	71.5	93.8
Bahraich	4.9	3.8	96.2	0.0	74.7	87.7
Ballia	5.1	14.9	83.6	7.5	86.5	88.1
Balrampur	14.0	0.0	97.4	11.2	77.8	90.1
Banda	14.0	1.8	97.5	13.0	65.4	81.8
Barabanki	5.1	8.9	95.5	4.1	68.2	81.1
Bareilly	6.5	6.6	93.4	0.0	88.1	92.2
Basti	10.8	3.5	95.4	1.1	55.8	90.9
Bijnor	8.8	11.1	85.0	6.1	79.0	87.0
Budaun	0.8	(12.5)	(73.3)	(14.2)	(56.1)	(40.5)
Bulandshahar	9.1	11.1	69.2	26.8	75.7	85.6
Chandauli	10.8	1.6	94.8	0.8	44.5	60.9
Chitrakoot	42.2	0.2	88.8	11.2	56.6	74.1
Deoria	40.5	0.8	96.5	2.9	49.7	81.7
Etah	1.6	(2.9)	(74.0)	(23.1)	(71.6)	(77.0)
Etawah	20.3	1.8	77.6	57.3	51.5	78.3
Faizabad	41.7	0.3	96.8	3.5	56.0	93.7
Farrukhabad	15.8	0.0	99.1	4.3	57.3	88.3
Fatehpur	8.9	7.6	88.5	20.2	85.8	95.3
Firozabad	3.4	7.1	79.6	15.3	94.1	93.5
Gautam Buddha Nagar	2.3	(2.5)	(97.5)	(2.5)	(96.1)	(91.5)
Ghaziabad	7.6	14.6	54.2	32.6	80.0	83.1
Ghazipur	8.0	12.2	87.8	2.4	76.1	82.8
Gonda	8.3	0.0	96.3	9.4	64.7	67.3
Gorakhpur	6.1	4.2	87.4	18.4	92.4	95.0
Hamirpur	29.7	0.5	89.3	10.3	69.8	95.9
Hardoi	3.7	4.8	77.8	17.5	77.3	57.5
Hathras	16.7	6.3	71.9	23.9	92.4	97.2
Jalaun	7.9	6.8	91.0	2.2	77.0	81.2
Jaunpur	3.9	12.1	77.9	25.5	69.0	86.9
Jhansi	9.4	4.1	84.2	12.2	74.8	83.3
Jyotiba Phule Nagar	21.3	1.7	96.2	10.3	87.5	89.7
Kannauj	4.8	6.2	89.5	4.3	74.7	83.4
Kanpur Dehat	9.5	1.6	97.1	1.3	85.3	93.0

Note: ¹ Percentage add to more than 100.0 due to multiple responses
() Based on less number of cases.

Contd.

Table 7.2 HOME VISIT BY HEALTH WORKER BY DISTRICT (Contd.)						
Percentage of women who had home visit by a doctor, ANM/LHV, or male health worker in the 3 months preceding the survey, among women who had home visit, satisfied with time spent by health workers and with services provided by district, Uttar Pradesh, 2002-04						
District	Percentage with home visit	Home visit by ¹			Percentage of women satisfied with	
		Doctor	ANM / LHV	Male health worker	Time spent	Service
Kanpur Nagar	5.0	0.0	97.3	2.7	84.8	85.0
Kaushambi	16.1	0.7	99.3	0.0	70.9	83.1
Kheri	6.5	26.0	75.6	10.4	60.3	70.3
Kushinagar	10.4	0.9	90.3	26.8	65.8	96.2
Lalitpur	7.7	2.1	88.5	10.9	67.8	81.0
Lucknow	6.8	17.2	58.6	25.7	70.0	82.1
Maharajganj	9.0	13.4	83.1	5.5	93.0	94.0
Mahoba	19.9	0.0	97.6	2.4	50.9	94.0
Mainpuri	10.7	3.1	69.4	28.5	92.2	97.4
Mathura	13.0	5.5	73.2	21.3	91.3	96.0
Mau	4.9	1.4	92.0	6.6	46.5	76.4
Meerut	22.7	0.8	97.1	7.0	88.8	94.1
Mirzapur	7.0	5.9	79.8	32.0	73.0	76.8
Moradabad	15.1	1.8	82.8	22.9	92.0	93.6
Muzaffarnagar	27.2	0.5	82.5	24.0	80.3	87.1
Pilibhit	0.7	(0.0)	(90.9)	(9.1)	(90.0)	(89.8)
Pratapgarh	7.3	1.2	95.2	23.1	74.9	67.6
Rae Bareli	8.4	5.8	90.1	15.5	90.0	85.3
Rampur	2.8	(23.6)	(64.8)	(19.7)	(81.6)	(83.7)
Saharanpur	5.5	13.5	68.6	17.9	70.4	73.8
Sant Kabir Nagar	34.6	0.0	99.9	14.0	80.5	86.2
Sant Ravidas Nagar	26.4	0.2	93.7	7.7	52.1	91.6
Shahjahanpur	2.7	(1.2)	(98.8)	(0.0)	(96.9)	(58.7)
Shrawasti	7.9	0.8	97.3	2.7	35.4	71.3
Siddharthnagar	31.6	0.1	98.6	2.8	64.0	88.8
Sitapur	7.0	4.2	93.6	7.9	71.1	84.9
Sonbhadra	2.5	(6.2)	(90.1)	(8.6)	(79.2)	(85.0)
Sultanpur	14.5	4.3	93.0	6.6	75.9	81.2
Unnao	22.4	0.0	98.3	3.9	45.2	78.6
Varanasi	6.7	3.0	94.1	8.0	28.0	81.0
Uttar Pradesh	11.2	3.5	89.0	12.3	71.2	86.2

Note: ¹ Percentage add to more than 100.0 due to multiple responses
() Based on less number of cases.

7.3 Matters Discussed during Home visits or Visits to Health Facilities

Women who were visited at home by a family planning worker, as well as those who visited government health facility or other health facility during the three months preceding the survey were asked about the different topics discussed with the workers during any of these visits. Table 7.3 shows the percentage of women who discussed the health and family planning or any health related matters to the health workers during home visits or visits to a health facility during the past three months. There are 5,096 pregnant women or women with children born during the reference period, and other women include 1,195 current users and 881 current non-users, who were visited by health workers at home.

The major focus of discussion during home visits was immunization (52 percent) and other (30 percent). In addition, discussions were also made on family planning (8 percent), disease prevention and antenatal care (6 percent each), child care (4 percent), treatment of health problem and delivery care (2 percent). Discussions about family planning were mentioned more often by current users of contraception (13 percent) than pregnant women or women with child born after reference period and other non-user women (8 percent). As expected, pregnant women or women with child born after reference period were much more likely than other women to report that they discussed childcare, immunization, antenatal care, postpartum care, and breastfeeding. A higher proportion of current contraceptive users and current non-users discussed, disease prevention, treatment of health problems, sanitation/cleanliness and other health related matters during home visit by health workers past three months preceding the survey.

Table 7.3 MATTER DISCUSSED DURING CONTACT WITH A HEALTH WORKER				
Percentage of women who were visited by health worker in the three months preceding the survey, and percentage of women who visited health facility, and the percentage of women ¹ who discussed specific topics with the health worker, Uttar Pradesh, 2002-04				
Topic discussed	Pregnant women or women with children after reference period ²	Other women		Total
		Current contraceptive users	Current nonusers	
During home visit				
Family planning	7.8	13.3	7.6	8.7
Breastfeeding	0.4	0.3	0.0	0.4
Supplementary feeding	1.4	0.9	0.3	1.1
Immunization	52.1	37.7	43.8	48.7
Nutrition	1.1	1.2	1.1	1.1
Diseases prevention	6.2	13.3	11.2	8.0
Treatment of health problem	2.0	6.6	6.6	3.4
Antenatal care	5.6	0.8	1.4	4.3
Delivery care	1.6	0.2	0.9	1.3
Postpartum care	1.2	0.0	0.2	0.9
Childcare	3.7	3.6	3.6	3.7
Sanitation / cleanliness	1.4	3.1	3.3	1.9
Oral rehydration	1.2	1.2	0.8	1.2
Other	29.8	32.9	30.1	30.3
Number of women	5,096	1,195	881	7,172
During visit to health facility				
Family planning	7.4	7.4	1.9	6.5
Breastfeeding	0.5	0.3	0.1	0.4
Supplementary feeding	2.0	1.2	0.8	1.6
Immunization	35.2	2.2	2.6	23.4
Nutrition	1.7	1.7	0.6	1.5
Diseases prevention	21.1	49.1	45.5	30.6
Treatment of health problem	16.1	41.1	51.1	26.7
Antenatal care	18.9	1.2	2.4	12.7
Delivery care	6.8	0.1	1.0	4.5
Postpartum care	3.0	0.5	1.0	2.2
Childcare	11.7	10.8	6.3	10.6
Sanitation / cleanliness	1.9	0.6	1.8	1.6
Oral rehydration	0.5	0.1	0.0	0.4
Other	2.2	6.8	7.4	4.0
Number of women	2,381	729	613	3,724
Note: Percentage add to more than 100.0 due to multiple responses.				
¹ Women who visited private health facility are not included.				
² Reference period for phase I, January 1 st 1999 and for phase II, January 1 st .2001				

The topic discussed most often during visits to health facility by women was disease prevention (31 percent), treatment of health problems (27 percent), immunization (23 percent), antenatal care (13 percent), childcare (11 percent) and family planning (7 percent). Only four percent women reported that they discussed other health related topics during the visit. During visit to health facility more than one third of the pregnant women or women with children born during reference period discussed about immunization, 21 percent discussed about disease prevention, 19 percent discussed about antenatal care, 16 percent discussed treatment of a health problem, 12 percent discussed childcare and 7 percent each discussed about family planning and delivery care. A few pregnant women or women with children born after reference period also discussed about postpartum care, breastfeeding, nutrition, oral re-hydration, sanitation/cleanliness, breastfeeding and other health related topics during visit to health facility. A higher proportion of current users and non-users discussed about treatment of health problems and disease prevention during visit to health facility in three months prior to survey.

7.4 Visit to Health Facility

Table 7.4 presents the percentage of currently married women who needed to visit health facility and visited the health facility by residence and availability of health facility in the village. Around 54 percent of women needed to visit health facility but did not visit in comparison with 26 percent of women who needed to visit health facility and visited in past three months before the survey. The proportion of such women was higher in urban areas (31 percent) than in rural areas (24 percent). Among them who visited any health facility, 25 percent of women reported that they had visited a private dispensary, (26 percent in rural areas and 24 percent in urban areas).

Table 7.4 VISIT TO HEALTH FACILITY					
Percentage of women who need to visit health facility and visited, and percent distribution of women visited health facility by type of health facility and according to place of residence and availability of health facilities in the village, Uttar Pradesh, 2002-04					
Health facility	Total	Residence		Availability of health facility ¹ in the village	
		Rural	Urban	No	Yes
Percentage of women who needed to visit health facility and not visited	53.6	55.4	49.2	56.1	54.3
Percentage of women who needed to visit health facility and visited	26.3	24.3	31.0	22.9	26.5
Number of women	64,207	45,196	19,011	27,987	17,208
Government health facility					
Hospital / CHC / FRU /RH	10.8	8.1	15.7	8.3	7.9
Dispensary	1.0	0.7	1.6	0.7	0.7
Primary health center	6.7	8.5	3.3	7.8	9.6
Sub-center	2.5	3.5	0.8	3.0	4.2
Private health facility					
Hospital	49.6	49.3	50.0	49.6	49.0
Dispensary	25.4	26.1	24.3	26.6	25.3
ISM ² hospital/dispensary	3.3	3.1	3.7	3.3	2.7
Other	0.6	0.7	0.6	0.8	0.5
Total percent	100.0	100.0	100.0	100.0	100.0
Number of women	16,867	10,978	5,889	6,412	4,566
Note: CHC: Community health center, FRU: First referral unit, RH: Referral Hospital					
¹ Includes sub-center, primary health center, Community health center or referral hospital, government hospital, and government dispensary within the village					
² Either government or private health facility of Indian System of Medicine					

Only twenty one percent of the women visited a government health facility, of which 11 percent visited government health facility such as, hospital/CHC/FRU/RH, 7 percent visited primary health centre, 3 percent visited sub-centre and only one percent visited government dispensary. Only three percent of the women reported that they visited Indian system of medicine hospital/ dispensary - either government or private. There are not many differences in terms of visit to any health facility according to availability of health facility in the village in the past three months of the survey.

7.5 Visit to Health Facility by Districts

Table 7.5 presents the percentage of currently married women who needed to visit health facility and visited the health facility by district. Eighty three percent of currently married women in Pilibhit and 82 percent in Shahjahanpur, needed to visit a health facility, but they did not visit. Out of 18, in 70 districts i.e. Allah bad , Ambedaker Nagar, Balrampur, Chandauli, Deoria, Faizabad, Gonda, Hamirpur, Kanpur Nagar, Kaushambi, Lucknow, Mathura, Mau, Sant Kabir Nagar, Sant Ravidas Nagar, Siddharthnagar, Unnao and Varanasi more than one third of the women visited health facility for their health problems. In Shahjahanpur, only 4 percent of women visited health facility when needed.

Among them who visited health facility, less than fifteen percent of women visited government health facility in 11 districts (Allahabad, Ambedaker Nagar, Deoria, Etah, Hathras, Mau, Meerut, Sant Kabir Nagar, Sant Ravidas Nagar, Siddharthnagar and Varanasi). Except Hardoi and Shahjahanpur, in all districts more than half of the women visited private health facility in the past three months before the survey.

Table 7.5 VISIT TO HEALTH FACILITY BY DISTRICT				
Percentage of women who needed to visit health facility, but not visited and percentage of women who visited health facility by type of health facility by district, Uttar Pradesh, 2002-04				
Districts	Percentage of women who need to visit health facility, but not visited	Percentage of women who need to visit health facility and visited	Percentage of women who visited to	
			Government health facility	Private health facility
Agra	47.7	15.3	15.0	85.0
Aligarh	57.6	22.1	17.3	82.7
Allahabad	49.0	43.8	10.6	89.4
Ambedaker Nagar	57.0	41.1	7.1	92.9
Auraiya	74.1	9.3	25.9	70.0
Azamgarh	59.4	26.5	27.9	72.1
Baghpat	62.3	14.1	17.6	82.4
Bahraich	60.6	30.4	31.1	68.0
Ballia	36.9	30.8	28.8	70.8
Balrampur	58.6	38.0	18.3	81.4
Banda	66.8	25.7	28.9	71.1
Barabanki	63.9	23.5	27.6	71.9
Bareilly	65.1	5.8	30.2	68.6
Basti	34.8	25.1	27.3	72.0
Bijnor	56.2	12.9	36.8	63.2
Budaun	61.2	16.4	17.4	82.0
Bulandshahar	49.3	24.2	16.5	82.0
Chandauli	49.9	45.3	15.6	84.0
Chitrakoot	29.3	30.5	17.4	82.2
Deoria	27.9	42.0	14.1	85.9
Etah	73.5	16.7	10.3	89.7
Etawah	68.6	17.9	21.4	78.6
Faizabad	37.4	44.7	21.4	78.6
Farrukhabad	70.8	10.8	17.6	82.4
Fatehpur	44.6	17.3	30.3	67.0
Firozabad	36.2	12.7	22.7	77.3
Gautam Buddha Nagar	53.9	21.5	37.1	62.9
Ghaziabad	51.5	29.6	20.4	78.4
Ghazipur	30.6	28.7	22.2	77.3
Gonda	47.5	39.4	17.2	82.3
Gorakhpur	58.4	28.6	19.1	79.7
Hamirpur	49.9	33.1	28.8	71.2
Hardoi	68.8	4.2	50.3	49.7
Hathras	37.8	27.3	11.2	87.9
Jalaun	51.3	25.9	25.3	74.7
Jaunpur	58.6	21.9	34.4	65.3
Jhansi	48.0	27.4	25.7	72.4
Jyotiba Phule Nagar	44.7	26.2	16.5	83.5
Kannauj	70.8	13.4	27.8	72.2
Kanpur Dehat	51.9	31.0	23.2	74.2

Contd.

Table 7.5 VISIT TO HEALTH FACILITY BY DISTRICT (Contd.)				
Percentage of women who needed to visit health facility, but not visited and percentage of women who visited health facility by type of health facility by district, Uttar Pradesh, 2002-04				
Districts	Percentage of women who need to visit health facility, but not visited	Percentage of women who need to visit health facility and visited	Percentage of women who visited to	
			Government health facility	Private health facility
Kanpur Nagar	44.3	39.3	17.7	80.4
Kaushambi	56.1	41.7	17.3	82.7
Kheri	48.9	24.8	23.2	76.1
Kushinagar	56.1	31.9	32.9	67.1
Lalitpur	55.8	28.8	35.0	65.0
Lucknow	37.0	41.4	28.5	71.2
Maharajganj	47.0	28.1	25.7	74.3
Mahoba	47.1	30.2	23.6	75.6
Mainpuri	44.4	25.7	18.1	81.5
Mathura	41.4	34.4	17.9	81.4
Mau	53.5	44.4	12.6	87.2
Meerut	42.2	26.2	14.7	84.7
Mirzapur	58.3	14.4	43.8	54.9
Moradabad	44.4	27.4	16.1	83.5
Muzaffarnagar	61.3	24.5	19.5	80.5
Pilibhit	82.6	4.1	24.1	75.9
Pratapgarh	46.8	30.9	26.1	71.7
Rae Bareli	68.7	19.3	46.9	50.9
Rampur	66.1	11.2	27.2	72.8
Saharanpur	59.8	11.1	38.9	59.7
Sant Kabir Nagar	57.6	41.0	13.4	86.6
Sant Ravidas Nagar	30.1	46.5	14.9	84.9
Shahjahanpur	82.2	3.9	78.3	21.7
Shrawasti	69.0	24.1	27.3	72.0
Siddharthnagar	43.4	39.9	14.1	85.7
Sitapur	62.1	18.8	29.7	66.9
Sonbhadra	53.3	30.2	20.9	77.9
Sultanpur	65.0	15.1	43.0	57.0
Unnao	41.5	50.0	21.1	78.9
Varanasi	50.0	46.1	12.2	87.0
Uttar Pradesh	53.6	26.3	21.4	77.9

7.6 Client's Perception of Quality of Government Health Services

Utilization of services is an essential indicator reflecting the quality of services. Better quality of services would have a higher utilization rate, which is very important from the policy point of view. Unless clients are satisfied with the services provided by the government, efforts made by the government will be wasted. In order to assess the utilization of government health facilities, a question was asked whether they had visited any health facility for their health problem during the three months prior to the survey. Those who visited the government health facility were asked about their perceptions about quality of services, (personal manner like courtesy, respect, sensitivity, and friendliness of the physician and staff, technical skills and quality like thoroughness, carefulness, and competence and waiting time for receiving the services) and the same is presented in Table 7.6. Women in general perceived that the quality of services, personal

manner as well technical skills and quality of physician, ANM/nurse and other staff was good. Majority of the respondents perceived that personal manner (courtesy, respect, sensitivity, and friendliness) and technical skills (thoroughness, carefulness, and competence) of the physician, nurses and other staff were good, a few respondents mentioned that personal manner and technical skills and quality of doctor (10percent), the personal manner of nurse (8 percent), and other staff including paramedical staff (5 percent) was excellent.

Table 7.6 QUALITY OF GOVERNMENT HEALTH FACILITY			
Percentage of women who visited government health facility and rated quality and availability of services during most recent visit to a government health facility in the three months preceding the survey, Uttar Pradesh, 2002-04			
Quality indicator	Poor	Good	Excellent
The convenience of the health facility location	7.8	86.6	5.6
Length ¹ of time spend towards waiting	18.1	73.4	7.3
Personal manner ² of the physician ⁵	5.3	84.3	10.3
The technical skills and quality ³ of the physician ⁵	5.6	84.1	10.3
Personal manner ² of nurse	6.1	86.1	7.8
The technical skills and quality ³ of nurse	6.2	87.0	6.9
Personal manner of other staff ⁵	5.9	89.6	4.5
The technical skills and quality of other ⁴ staff	5.9	89.6	4.5
The explanation of what was done to her	7.1	85.1	7.8
Medical, surgical and diagnostic equipment	8.5	87.4	4.1
General comfort	8.8	84.6	6.6

Note: ¹ Poor indicate long waiting time, good indicate average waiting time, and excellent indicate short waiting time
² Courtesy, respect, sensitivity, friendliness
³ Thoroughness, carefulness, competence
⁴ Including paramedical staff
⁵ Includes hospital/community health center/ first referral unit/ referral hospital, dispensary, and primacy health center last visit made by women

7.7 Reason for not visiting Government Health Centre

Women who visited the private health centre were asked the main reason for not visiting the government health centre and the results are presented in Table 7.7. Twenty eight percent of the currently married women reported inconvenient location of the centre as one of the reason for not visiting the government health centre for their health problems. As expected, this reason is more reported by rural women (33 percent) than urban women (20 percent), and women from those villages where health facilities are not available (35 percent). About 18 percent reported that they did not feel the necessity to visit the government health centre due to medicine not/rarely given or of bad quality, and no rural-urban differential noticed. Further, 17 percent reported that they did not feel necessity to visit the government health centre due to poor quality of services, 13 percent in rural area and 24 percent in urban areas. Other reasons for not visiting government health centres include: doctor/ health workers do not examine properly (9 percent), time is not suited (7 percent), services are charged (6 percent) and heavy rush (5 percent).

Table 7.7 REASON FOR NOT PREFERRING GOVERNMENT HEALTH FACILITY
Percent distribution of women visited private health facility by reason for not visiting government health facility and according to residence and availability of health facilities in the village, Uttar Pradesh, 2002-04

Reason	Total	Residence		Availability of health facility ¹ in the village	
		Rural	Urban	No	Yes
Not conveniently located	28.0	32.8	18.9	34.6	30.2
Time is not suited	6.7	6.7	6.6	6.4	7.1
Poor quality of services	16.8	13.2	23.5	13.0	13.5
Heavy rush	5.3	3.3	9.0	3.5	2.9
Non/rare-availability of doctors/health workers	2.3	2.5	2.0	2.3	2.8
Doctors/health workers do not examine properly	9.2	7.8	12.0	7.2	8.6
Medicine not/rarely given or of bad quality	18.3	18.4	18.2	17.8	19.2
Doctors/paramedical staff does not behave properly	0.3	0.2	0.5	0.3	0.2
Services are charged	6.1	7.3	3.8	7.3	7.2
Referred by government doctor	0.7	0.6	0.8	0.5	0.8
Other	6.3	7.3	4.6	7.1	7.4
Total percent	100.0	100.0	100.0	100.0	100.0
Number of women	13,151	8,581	4,570	5,079	3,501

Note: ¹ Includes sub-center, primary health center, Community health center or referral hospital, government hospital, and government dispensary within the village

7.8 Family Planning Information and Advice Received

Women who are currently not using any contraceptive method were asked whether they were ever advised by ANM or family planning health worker to adopt family planning method and method advised during any of the contacts. Seventeen percent of current non-users said that they had advice or discussion on method of family planning with ANM or family planning health worker (Table 7.8). The most frequently discussed method was female sterilization (50 percent) followed by pills (21 percent). Only ten percent of women received advices to adopt condom followed by male sterilization (5 percent) as a contraceptive method. Discussions about traditional methods, such as rhythm or withdrawal were rare. There is no much variation by type of residence in terms of family planning information and advice received except female sterilization, which is more in rural (55 percent) than its counterpart (31 percent).

7.9 Availability of Pills and Condom

To explore difficulties faced in the procurement of condoms and pills, current users of these methods were asked that they had been able to get their supply whenever needed. The results are presented in Table 7.9. Only five percent each of condom users and pill users reported that they had a problem in getting these methods. A little higher proportion of rural women than urban women had problems in getting a supply of condom as well as pills.

Table 7.8 ADVISE TO ADOPT FAMILY PLANNING METHOD			
Percentage of current non-users who reported ever advised to adopt family planning method by method of family planning by ANM/health worker, according to residence, Uttar Pradesh, 2002-04			
Method	Total	Rural	Urban
Percentage of non-users who were advised to adopt family planning method	7.0	7.2	6.3
Number of women	39,500	30,031	9,470
Method			
Female sterilization	49.8	55.0	31.1
Male sterilization	5.4	4.5	8.7
IUD	11.8	9.4	20.3
Pills	20.8	20.9	20.8
Condom	10.0	8.4	15.8
Rhythm/periodic abstinence	0.2	0.3	0.2
Withdrawal	0.1	0.1	0.2
Other	1.6	1.3	2.7
Missing	0.2	0.1	0.2
Total percent	100.0	100.0	100.0
Number of women	2,767	2,169	598
Note: Total includes 1 case missing on advice to adopt family planning method.			

Table 7.9 AVAILABILITY OF REGULAR SUPPLY OF CONDOMS/PILLS		
Percentage of current condom or pill users who ever had a problem getting a supply of condoms/pills by residence, Uttar Pradesh, 2002-04		
Method/residence	Percentage who had a problem getting supply	Number of users
Condom		
Rural	6.6	785
Urban	3.2	818
Total	4.9	1,603
Pills		
Rural	5.0	2,027
Urban	4.3	2,673
Total	4.6	4,700

7.10 Quality of Care of Family Planning Services

Several aspects of quality of care of family planning services were also investigated. Current user of sterilization was asked whether the person or centre where sterilization had been performed, informed her about other alternative methods of family planning; and further it was asked whether she was told by a ANM or health worker about possible side effects of the modern method at the time she accepted the method; whether she received any follow-up care after accepting the method. Tables 7.10 and 7.11 present the results of this investigation.

Around 18 percent of sterilized women reported that ANM or health worker informed them about alternative methods that they could use (Table 7.10) before adopting sterilization. Around twenty three percent of sterilized women received such information from private health facilities compared to around 18 percent of women who were sterilized in the government health facilities, and 16 percent of women received this information in the family planning or RCH camp or out reach/ MCH clinic in village at the time of accepting the sterilization. About 13 percent of such women were informed about alternative methods by others but not by a health worker working in government or private health sector.

Table 7.10 INFORMATION OF OTHER MODERN METHOD BEFORE STERILIZATION				
Percentage of current users of sterilization who were informed about other modern method by the source where they get sterilized, according to the source of sterilization and residence, Uttar Pradesh, 2002-04				
Source of sterilization	Total	Rural	Urban	Number of users
Government health facility	18.0	15.8	23.2	7,605
Family planning or RCH camp/ village session	15.9	15.3	18.3	592
Private health facility	23.3	18.1	27.1	1,054
Other	12.6	16.1	11.6	81
Total	18.4	16.0	23.5	9,380
Note: Total includes 3 and 45 women who said that they sterilized at mobile clinic, and by chemist, and who do not know including missing information of place/source of sterilization, are not shown separately.				

Table 7.11 INFORMATION ON SIDE EFFECT AND FOLLOW-UP FOR CURRENT METHOD			
Percentage of current users of modern contraceptive methods who were told about side effects or other problems of current method by a health worker or ANM/Nurse at the time of accepting the method and percentage who received follow-up services after accepting the method by current method and residence, Uttar Pradesh, 2002-04			
Information/follow-up	Total	Rural	Urban
Told about side effects			
Sterilization	24.1	23.4	25.6
Other modern method	14.0	15.6	12.6
Any modern method	19.7	20.8	18.2
Received follow-up			
Sterilization	27.9	33.9	15.4
Other modern method	3.7	5.9	1.9
Any modern method	17.3	24.4	7.7

Another important facet of informed contraceptive choice is being fully informed about any side effects and any other problems associated with the method. In Uttar Pradesh, only 20 percent of users of any modern method were informed about possible side effects or health problems associated with their current method. Twenty one percent of acceptors of sterilization in rural area and 18 percent in urban area reported that they were informed about side effects. Among users of modern method other than sterilization, 16 percent of rural users and 13 percent of urban users were informed about side effects. It is clear from the results that ANM or health workers in Uttar Pradesh are not providing sufficient information to couples who need to make an informed choice

about contraceptive methods. The situation with respect to follow-up services is also not encouraging. Follow-up services among sterilization users are nine fold higher than user of modern methods. About thirty-four percent of sterilization users in rural area and about 15 percent in urban area reported that they received follow-up services by ANM or health worker. Only 4 percent of the users of other modern method received follow-up services. In all, only 24 percent of the users of any modern method in rural area and only 8 percent in urban areas received follow-up services.

7.11 Quality of Care Indicators for Contraceptive Users by District

Table 7.12 shows inter-district variations in the percentage of users of sterilization who were told about alternative methods before adopting sterilization and about side effects or other problems related to the current method or users of modern contraceptive methods, and the percentage of users who received follow-up services.

Table 7.12 QUALITY OF CARE INDICATORS FOR CONTRACEPTIVE USERS BY DISTRICT						
Among currently married women who are current users of modern contraceptive methods, quality of care indicators related to the use of their current contraceptive method by district, Uttar Pradesh, 2002-04						
District	Percentage informed about other methods before getting sterilization ¹	Percentage told about side effects or other problems with method ²		Percentage who received follow-up ²		Percentage non-user told ever had advised to adopt contraceptive method
		Sterilization	Other modern method	Sterilization	Other modern method	
Agra	27.5	15.5	3.4	11.7	0.9	3.2
Aligarh	44.1	40.3	19.1	18.5	9.1	6.3
Allahabad	13.7	14.8	8.9	33.3	2.6	15.9
Ambedaker Nagar	12.4	18.2	11.1	47.3	4.5	11.5
Auraiya	44.6	55.2	23.8	29.8	4.3	2.6
Azamgarh	7.3	21.2	10.9	34.2	4.9	2.7
Baghpat	52.3	48.4	22.2	33.1	9.0	5.7
Bahraich	8.8	18.5	20.9	39.5	3.7	7.4
Ballia	14.8	14.4	13.4	26.5	2.4	6.9
Balrampur	12.5	13.6	9.0	26.4	0.0	6.2
Banda	35.1	44.0	29.9	42.3	2.6	6.0
Barabanki	24.5	22.1	13.5	24.9	7.6	4.3
Bareilly	5.9	16.4	3.2	15.5	0.5	7.3
Basti	33.4	18.9	13.3	28.1	3.7	8.2
Bijnor	28.9	18.9	16.0	14.7	9.4	7.8
Budaun	26.6	10.4	11.5	10.3	0.0	1.9
Bulandshahar	22.5	24.3	13.3	15.1	3.1	4.3
Chandauli	1.5	19.0	20.0	36.7	0.0	8.0
Chitrakoot	12.9	18.4	7.1	50.4	3.4	12.1
Deoria	15.8	24.0	14.3	24.6	0.0	9.8
Etah	24.6	9.1	6.4	27.7	0.0	0.7
Etawah	34.3	44.9	24.6	13.0	6.0	5.9
Faizabad	14.6	13.9	6.2	47.0	0.0	8.2
Farrukhabad	27.4	38.4	19.0	22.4	4.2	2.5
Fatehpur	12.1	10.4	13.8	33.9	9.5	10.5
Firozabad	14.5	13.6	2.4	4.7	0.4	2.4
Gautam Buddha Nagar	17.6	20.5	18.1	11.6	2.0	3.5
Ghaziabad	36.9	33.2	18.4	15.7	2.9	5.7
Ghazipur	10.7	18.0	19.0	27.3	6.2	9.0
Gonda	11.0	16.3	9.1	38.6	0.7	11.9
Gorakhpur	8.5	18.8	15.9	30.8	9.2	6.3
Hamirpur	0.9	3.6	3.0	39.6	4.7	11.0
Hardoi	24.3	8.9	9.6	6.2	3.2	7.3
Hathras	32.6	41.2	20.3	38.7	0.6	7.1
Jalaun	7.5	44.3	13.2	50.4	3.3	7.8
Jaunpur	10.7	22.7	11.4	37.7	3.5	4.4
Jhansi	6.0	20.0	11.7	35.4	10.3	11.0
Jyotiba Phule Nagar	45.1	44.4	32.0	37.7	11.8	5.0
Kannauj	15.0	10.8	9.7	15.0	2.3	4.3
Kanpur Dehat	13.5	48.4	7.3	39.5	2.6	13.3

Note: ¹ At the time of accepting the current method

² By a health worker or ANM/Nurse after accepting the current method

Contd.

Table 7.12 QUALITY OF CARE INDICATORS FOR CONTRACEPTIVE USERS BY DISTRICT (Contd)						
Among currently married women who are current users of modern contraceptive methods, quality of care indicators related to the use of their current contraceptive method by district, Uttar Pradesh, 2002-04						
District	Percentage informed about other methods before getting sterilization ¹	Percentage told about side effects or other problems with method ²		Percentage who received follow-up ²		Percentage non-user told ever had advised to adopt contraceptive method
		Sterilization	Other modern method	Sterilization	Other modern method	
Kanpur Nagar	9.1	40.6	17.2	15.4	5.9	10.9
Kaushambi	14.8	24.7	18.1	35.7	10.5	10.4
Kheri	31.7	22.1	11.0	26.4	4.0	7.1
Kushinagar	24.9	32.4	16.1	27.8	1.7	4.9
Lalitpur	13.9	19.6	14.7	35.7	9.2	6.2
Lucknow	20.2	21.9	6.1	14.9	1.2	8.9
Maharajganj	7.7	11.3	9.1	58.6	0.0	9.6
Mahoba	23.8	29.8	13.9	37.3	6.0	4.7
Mainpuri	17.8	23.1	12.5	17.0	4.5	4.7
Mathura	31.9	36.7	15.3	37.7	3.7	5.3
Mau	5.6	29.4	14.5	31.1	0.0	5.1
Meerut	43.2	53.1	22.9	27.6	2.3	9.3
Mirzapur	11.1	6.7	23.2	20.5	1.1	9.1
Moradabad	31.8	33.7	13.5	21.7	4.4	5.6
Muzaffarnagar	40.9	47.4	32.8	17.5	5.7	4.3
Pilibhit	7.4	1.3	3.8	2.8	0.7	1.5
Pratapgarh	17.6	39.5	11.9	40.4	0.7	6.5
Rae Bareli	17.3	34.0	18.6	28.1	1.7	9.6
Rampur	14.8	19.1	11.2	20.0	2.0	2.9
Saharanpur	24.9	22.4	7.9	12.1	6.2	5.5
Sant Kabir Nagar	16.6	12.3	10.0	31.8	2.7	7.2
Sant Ravidas Nagar	5.5	14.0	11.9	43.4	3.5	8.8
Shahjahanpur	13.8	12.2	2.8	13.8	0.1	4.2
Shrawasti	21.8	10.5	12.3	32.3	2.8	5.1
Siddharthnagar	20.4	18.0	13.6	51.7	4.6	8.3
Sitapur	26.7	24.3	10.7	39.6	5.3	8.0
Sonbhadra	7.2	41.8	22.8	28.4	2.8	6.7
Sultanpur	18.5	9.6	18.6	26.3	7.5	9.5
Unnao	6.5	28.5	17.5	49.9	5.5	13.2
Varanasi	8.3	19.8	21.3	34.7	0.8	6.9
Uttar Pradesh	18.4	24.1	14.0	27.9	3.7	7.0

Note: ¹ At the time of accepting the current method
² By a health worker or ANM/Nurse after accepting the current method

The percentage of sterilization-users who were told about alternate method is lowest in Hamirpur (1 percent) while it is highest in Baghpat (52 percent). Large inter-district variation is found in the percentage of sterilization- users and users of modern contraceptive methods who were told about the possible side effect. In case of sterilization, the proportion varied from a low of one percent in Pilibhit to a high of 55 percent in Auraiya. For other modern contraceptive methods, one third of users in Muzaffarnagar and a minimum of 2 percent of users in Firozabad were told about the side effects of the method. Follow-up services are slightly better for acceptors of sterilization than for other modern methods in most of the districts of Uttar Pradesh. Table 7.12 also shows district wise variation in the percentage of current non-users who were ever advised to adopt contraceptive methods, which varies from a low of one percent in Etah to a high of 16 percent in Allahabad.

Overall, the quality of care for family planning and health services is far from satisfactory in many of the districts of Uttar Pradesh; almost all districts need to work much more to improve their health and family planning services, particularly services that are provided by the government sector.

7.12 Quality of Care of Maternal Health Care

Information on few other aspects of quality of care in terms of maternal care was also collected. Women with last live/still birth during three years preceding the survey were asked whether the Doctor/ANM/health worker advised her to go to health facility for delivery when they were pregnant, and received any follow-up care after delivering the baby within 2 weeks of delivery and received follow care at least one visit within six weeks of delivery. The same information is presented in Table 7.13.

Table 7.13 ADVISED TO HAVE DELIVERY AT HEALTH FACILITY AND FOLLOW-UP SERVICES FOR POSTPARTUM CHECK-UP			
Percentage of women* who were advised to have delivery at health facility by doctor/ health worker and percentage who receive follow-up services within 2 weeks and within 6 weeks of delivery by ANM, according to residence, Uttar Pradesh, 2002-04			
Advise/follow-up service	Total	Rural	Urban
Percentage of women who were advised to have delivery at health facility	14.1	10.9	23.6
Percentage of women who were visited within 2 weeks of delivery	6.7	7.5	4.4
Percentage of women who were visited at least once within 6 weeks of delivery	9.0	10.1	5.9
Number of women	31,137	23,283	7,854
Note: * Women who had live birth/still birth after 1.1.1999/2001			

About fourteen percent of the women with last live/still birth during three years preceding the survey reported that they were advised by doctor or health worker to have delivery in health facility. Women from urban areas (24 percent) were more likely than rural areas (11 percent) to get advised to deliver their child at health facility.

In district wise variation, the percentage varies from as low as 3 percent in Etah and Firozabad to as high as 31 percent in Lucknow (Table 7.14). In twenty one of the 70 districts, less than one tenth women were advised for delivery of their child in health facility.

Table 7.14 QUALITY OF CARE INDICATORS FOR MATERNAL CARE

Among currently married women* who are given live/still birth three years preceding the survey, quality of care indicators related to delivery care by district, Uttar Pradesh, 2002-04

District	Percentage of women		
	Advised to have delivery at health facility by doctor/ health worker	Visited within 2 weeks of delivery by ANM	Visited at least one within 6 weeks of delivery by ANM
Agra	15.4	6.3	6.3
Aligarh	9.8	3.5	5.5
Allahabad	15.5	6.0	8.7
Ambedaker Nagar	16.8	9.5	15.7
Auraiya	9.2	2.1	2.9
Azamgarh	17.2	4.2	5.3
Baghpat	15.0	2.9	3.8
Bahraich	8.8	9.1	15.8
Ballia	24.4	8.6	22.3
Balrampur	7.3	6.2	7.4
Banda	7.8	9.4	10.5
Barabanki	18.3	4.8	5.8
Bareilly	7.3	9.9	9.9
Basti	14.5	9.5	13.0
Bijnor	18.3	11.1	11.1
Budaun	9.3	2.4	2.4
Bulandshahar	8.6	4.1	5.1
Chandauli	13.3	4.0	4.3
Chitrakoot	9.5	8.4	14.9
Deoria	19.6	8.4	13.9
Etah	3.3	2.1	3.1
Etawah	9.7	6.4	8.2
Faizabad	17.8	15.5	21.6
Farrukhabad	11.9	1.2	1.0
Fatehpur	10.5	8.2	9.1
Firozabad	3.3	6.5	6.5
Gautam Buddha Nagar	16.8	2.0	2.5
Ghaziabad	22.9	9.6	10.4
Ghazipur	17.9	8.7	10.7
Gonda	16.1	7.4	11.6
Gorakhpur	15.8	4.2	10.0
Hamirpur	11.4	18.4	34.3
Hardoi	4.5	2.1	2.1
Hathras	15.7	10.6	12.0
Jalaun	17.5	12.3	15.1
Jaunpur	15.8	3.3	4.4
Jhansi	23.7	9.2	12.1
Jyotiba Phule Nagar	10.5	6.0	7.8
Kannauj	7.6	6.0	6.6
Kanpur Dehat	15.7	7.6	12.3

Note: * Women who had live birth/still birth after 1.1.1999/2001

Contd.

Table 7.14 QUALITY OF CARE INDICATORS FOR MATERNAL CARE (Contd)
Among currently married women* who are given live/still birth three years preceding the survey, quality of care indicators related to delivery care by district, Uttar Pradesh, 2002-04

District	Percentage of women		
	Advised to have delivery at health facility by doctor/ health worker	Visited within 2 weeks of delivery by ANM	Visited at least one within 6 weeks of delivery by ANM
Kanpur Nagar	29.4	2.7	4.1
Kaushambi	11.2	3.7	5.0
Kheri	11.3	5.3	6.8
Kushinagar	17.5	6.9	9.8
Lalitpur	9.4	8.2	10.7
Lucknow	31.3	1.2	2.8
Maharajganj	13.2	6.5	11.7
Mahoba	10.8	11.7	15.6
Mainpuri	11.6	7.4	8.5
Mathura	12.9	11.1	11.5
Mau	14.0	3.6	4.3
Meerut	17.5	8.6	9.5
Mirzapur	12.2	3.9	6.9
Moradabad	10.2	5.0	6.9
Muzaffarnagar	15.7	2.9	3.1
Pilibhit	8.9	1.1	1.1
Pratapgarh	11.8	8.1	9.8
Rae Bareli	15.7	10.9	12.4
Rampur	7.8	9.1	9.3
Saharanpur	9.4	9.7	9.9
Sant Kabir Nagar	12.6	10.0	17.2
Sant Ravidas Nagar	14.1	7.1	12.5
Shahjahanpur	8.4	3.7	3.7
Shrawasti	8.4	8.5	12.2
Siddharthnagar	9.3	12.9	20.5
Sitapur	12.9	8.8	9.0
Sonbhadra	10.7	4.1	4.9
Sultanpur	17.2	8.4	10.7
Unnao	15.3	13.0	19.5
Varanasi	19.0	5.6	5.9
Uttar Pradesh	14.1	6.7	9.0

Note: * Women who had live birth/still birth after 1.1.1999/2001

Seven percent of the women reported that they were visited by an ANM within two weeks of delivery; such visit was only 4 percent in urban areas and 8 percent in rural areas. Only 10 percent of the women in rural area and 6 percent in urban areas received at least one follow-up service within six weeks of delivery. Not more than nine percent of women received postpartum check-up within 2 weeks of delivery in any district of Uttar Pradesh, and the proportion of women who had at least one postpartum check-up within six weeks of delivery varied from a low of one percent in Farrukhabad and Pilibhit to high of 34 percent in Hamirpur (Table 7.14).

CHAPTER VIII

REPRODUCTIVE HEALTH PROBLEMS AND AWARENESS OF RTIs/STIs AND HIV/AIDS

One of the important components of the Reproductive and Child Health Programme is to have a healthy sexual life without any fear of contracting disease. With this approach, the RCH programme places a lot of emphasis on promoting and encouraging healthy sexual behaviour among couples through various Information, Education and Communication (IEC) activities. Health workers are also expected to educate women and men about Reproductive Tract Infections (RTIs) and Sexually Transmitted Infections (STIs) and motivate those people with RTI/STI problems to seek medical help. The DLHS-RCH has made an attempt to collect information on awareness and prevalence of RTI/STI. Apart from this, information on knowledge of HIV/AIDS, source of information and way of avoiding AIDS were also collected.

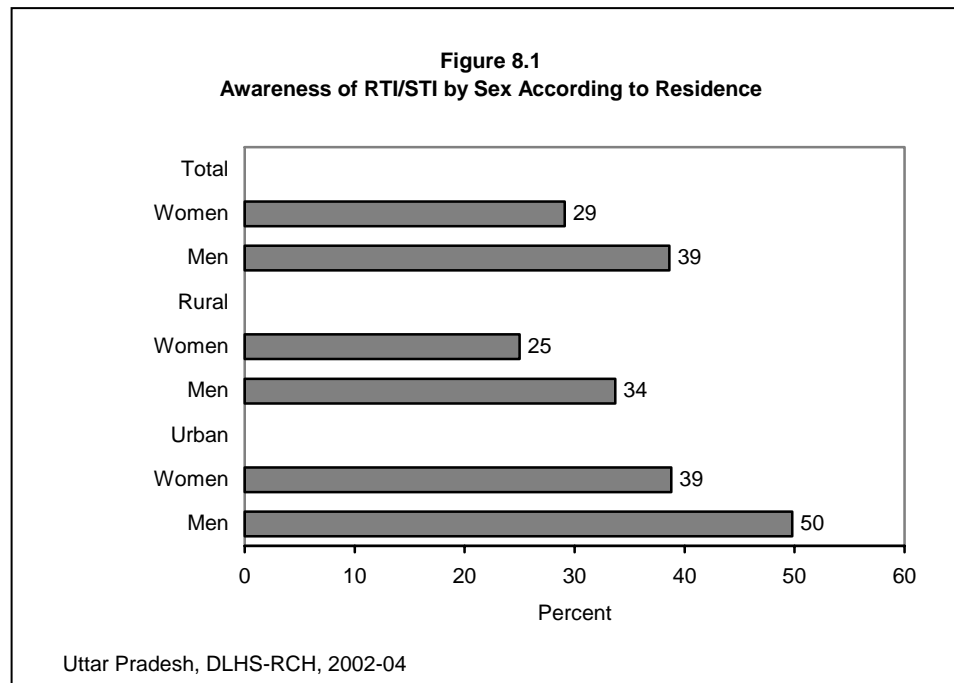
8.1 Awareness of RTI/STI

An attempt was made to assess whether couples were aware of RTI/STI. Currently married women and their husbands were asked about their awareness of RTI/STI, and if they were aware, they were further questioned about the source of information and mode of transmission of the disease.

Table 8.1 shows the percentage of women aware of RTI/STI by background characteristics. Twenty nine percent of the women in Uttar Pradesh were aware of RTI/STI. The proportion of women who were aware of RTI/STI is much higher in urban areas (39 percent) than in rural areas (25 percent) (Figure 8.1). Awareness of RTI/STI is much lower among younger women, non-literate women, women from Hindu and Muslim religions, scheduled tribe women and women from households with a low standard of living. Awareness of RTI/STI increases from 20 percent among non-literate women to 57 percent among women who have completed 10 or more years of schooling. The standard of living index shows a positive relationship with awareness of RTI/STI, ranging from 21 percent among women with a low standard of living to 47 percent among women with a high standard of living.

Those women who had heard of RTI/STI were further asked about the source of information of RTI/STI, which is presented in Table 8.1. Almost two third of the women reported that they received information on RTI/STI from friends or relatives. Other sources of information of RTI/STI as reported by women were television (32 percent), newspaper or books or magazines (23 percent), Radio (14 percent), slogans or posters or pamphlets or wall hoardings (12 percent) and community meetings (8 percent). Only 6 percent of women received this information from doctors and 4 percent from health workers, and about 3 percent of the women reported that they had heard of RTI/STI from other source.

Table 8.2 shows the percentage of husbands of currently married women who heard of RTI/STI by specific source of information according to some selected background characteristics. In Uttar Pradesh, the percentage of men who heard of RTI/STI is higher than that of women (Figure 8.1). Thirty nine percent of the men heard of RTI/STI. Men from urban areas and younger men were relatively more aware of RTI/STI. Non-literate men and men who belong to Muslim religion and mainly from scheduled tribes are less likely to report awareness of RTI/STI. The awareness of RTI/STI is not high among men in Uttar Pradesh. The level of awareness of RTI/STI increases with an increase in education level and standard of living. Sixteen percent of non-literate men were aware of RTI/STI as compared to sixty one percent of men who had completed 10 or more years of schooling. Twenty seven percent of men from households with a low standard of living were aware of RTI/STI as compared to 59 percent of men with a high standard of living.



Television and relatives or friends are the most prominent source of RTI/STI for men in Uttar Pradesh. Forty six percent of men who knew about RTI/STI received information from television followed by relatives or friends (39 percent). Other important sources of information about RTI/STI are newspaper or books or magazines (34 percent), radio (30 percent), slogans or posters or pamphlets or wall hoardings (29 percent). Sixteen percent of the men received this information from a doctor, 6 percent from health workers, 10 percent from community meetings and 1 percent mentioned that they had received information about RTI/STI from school teachers. Only two percent of the men reported that they heard of RTI/STI from other sources. Television and relatives or friends are the most important source of information of RTI/STI in all the groups. Electronic media such as ‘television’ is the main important source of information on RTI/STI for men who are from urban areas and belong to Sikh religion as well as ‘other’ castes category. Men from rural areas, non-literate men, Muslim men, Men from scheduled tribes, men with a low standard of living and younger men are more likely to receive information from relatives or friends. The differences in the knowledge of RTI/STI from television as a source of information by educational level and standard of living of household are quite visible. Only twenty eight percent of non-literate men had heard of RTI/STI from television, which increased to 56 percent for men who have completed 10 or more years of schooling.

Table 8.1 SOURCE OF KNOWLEDGE ABOUT RTI/STI AMONG WOMEN

Percentage of currently married women age 15 - 44 who have heard about RTI/STI and among women who have heard about RTI/STI, percentage who received information from specific sources by selected background characteristics, Uttar Pradesh, 2002-04.

Background Characteristic	Percentage who have heard about RTI/STI	Number of Women	Among those who have heard about RTI/STI, percentage who received information from.										Number of women who have heard about RTI/STI	
			Radio	Television	Newspaper/ Books/ Magazines	Slogan/ Pamphlets/ Posters/ Wall Hoardings	Doctor	Health worker	School teacher	Community Meeting	Relative/ Friends	Others		
Age group (years)														
15-19	22.0	6,662	12.7	24.9	16.4	8.4	2.9	1.5	0.3	7.1	69.8	4.0	1,466	
20-24	28.5	14,019	14.1	33.2	22.8	12.2	4.7	3.0	0.6	6.9	64.0	3.0	3,995	
25-29	30.2	13,974	14.6	33.6	25.3	13.1	7.3	4.2	0.5	8.4	62.8	3.5	4,222	
30-34	29.6	12,435	13.2	32.4	23.5	11.4	6.6	4.2	0.5	9.1	65.5	3.4	3,684	
35-39	31.1	9,953	13.3	32.4	23.9	12.9	7.8	4.6	0.7	8.1	63.5	3.5	3,097	
40-44	30.8	7,163	11.6	29.5	22.5	10.8	7.4	5.4	0.6	8.5	66.8	3.4	2,207	
Residence														
Rural	25.0	45,196	11.0	18.7	12.3	7.3	4.4	3.8	0.4	9.0	74.4	4.1	11,296	
Urban	38.8	19,011	17.4	52.2	39.7	19.0	9.3	4.1	0.8	6.8	50.0	2.4	7,374	
Education														
Non-literate	20.3	39,991	6.1	12.9	5.7	0.8	3.5	2.9	0.2	9.9	80.3	4.5	8,115	
0-9@ years	34.5	14,418	14.4	32.7	20.3	10.4	5.4	3.8	0.4	7.9	64.8	3.3	4,970	
10 and above	57.0	9,785	23.6	58.9	51.1	29.5	11.3	5.6	1.2	5.7	42.1	1.9	5,579	
Religion														
Hindu	28.9	52,900	13.9	31.9	23.6	12.4	6.6	4.2	0.6	7.8	65.0	3.3	15,302	
Muslim	29.0	10,925	11.3	30.6	19.1	8.4	4.8	2.7	0.3	9.6	65.1	4.0	3,172	
Christian	55.1	77	(14.7)	(44.1)	(38.2)	(17.6)	(17.6)	(2.9)	(0.0)	(5.9)	(41.2)	(2.9)	42	
Sikh	51.3	218	16.5	63.9	65.2	42.9	17.1	5.1	0.6	10.9	28.3	2.2	112	
Jain	55.3	66	(13.1)	(78.7)	(72.1)	(27.9)	(6.6)	(1.6)	(0.0)	(4.9)	(34.4)	(0.0)	37	
Caste/tribe#														
Scheduled caste	22.3	14,188	9.8	22.0	14.8	6.7	4.5	4.2	0.5	8.6	72.1	4.4	3,157	
Scheduled tribe	16.7	551	11.0	28.9	19.1	9.7	4.1	2.3	0.0	11.9	83.2	1.6	92	
Other backward class	26.4	31,046	10.7	25.5	17.0	8.5	5.3	3.2	0.4	8.1	70.3	3.6	8,189	
Other	40.3	17,717	18.4	43.7	34.0	18.3	8.4	4.7	0.7	7.8	54.9	2.7	7,140	
Standard of living index														
Low	21.0	32,769	7.0	8.9	6.0	3.2	3.4	3.8	0.3	9.5	80.3	4.6	6,896	
Medium	29.5	17,432	13.0	29.3	18.5	9.1	5.7	3.6	0.5	8.7	67.3	3.7	5,136	
High	47.4	14,006	20.6	57.9	44.6	23.2	9.9	4.4	0.9	6.2	46.5	1.9	6,639	
Total	29.1	64,207	13.5	31.9	23.2	11.9	6.4	3.9	0.5	8.1	64.7	3.4	18,670	

Note: Total includes 13 cases of missing information on education and 20 women with other religion are not shown separately. #Total figure may not add to N due to do not know and missing cases. @ Literate women with no year of schooling are also included.

Table 8.2 SOURCE OF KNOWLEDGE ABOUT RTI/STI AMONG MEN													
Percentage of husband of eligible women who have heard about RTI/STI and among men who have heard about RTI/STI, percentage who received information from specific sources by selected background characteristics, Uttar Pradesh, 2002-04.													
Background characteristic	Percentage who have heard about RTI/STI	Number of men	Among those who have heard about RTI/STI, percentage who received information from.										Number of men who have heard about RTI/STI
			Radio	Television	Newspaper / Books/ Magazines	Slogan/ Pamphlets/ Posters/ Wall Hoardings	Doctor	Health worker	School teacher	Community Meeting	Relative/ Friends	Others	
Age group (years)													
< 25	38.4	5,177	32.7	42.4	30.4	27.2	14.6	5.1	1.9	9.0	42.6	2.4	1,987
25-34	39.9	14,546	30.0	48.0	34.4	28.5	15.1	5.7	1.3	9.3	39.7	2.1	5,808
35-44	38.2	13,022	29.4	44.3	34.2	28.9	16.0	5.7	1.2	11.6	38.3	2.7	4,980
45+	35.6	4,717	29.9	45.8	37.7	29.2	17.3	4.9	1.4	12.7	36.8	2.7	1,678
Residence													
Rural	33.7	26,161	34.0	36.9	29.4	26.3	16.2	6.3	1.3	12.4	41.9	2.7	8,822
Urban	49.8	11,302	24.1	59.5	41.7	32.1	14.7	4.2	1.4	7.3	35.2	2.0	5,631
Education													
Non-literate	16.1	10,742	21.2	28.2	3.8	7.3	10.7	3.4	1.2	17.9	51.7	3.6	1,727
0-9@ years	37.0	14,678	26.1	37.0	21.5	24.7	13.3	4.1	0.9	11.3	44.6	2.1	5,432
10 and above	60.6	12,029	35.2	56.3	50.9	36.4	18.5	7.1	1.7	8.0	32.4	2.4	7,291
Religion													
Hindu	38.6	31,200	31.7	46.0	35.4	29.1	15.9	5.8	1.3	10.1	38.9	2.4	12,031
Muslim	38.0	6,035	22.3	42.5	26.9	25.0	14.4	4.2	1.4	12.5	41.8	2.6	2,295
Christian	52.2	59	(22.7)	(72.7)	(54.5)	(27.3)	(18.2)	(4.5)	(0.0)	(18.2)	(27.3)	(0.0)	31
Sikh	50.7	120	9.0	55.7	54.1	41.9	18.7	0.0	1.1	7.1	35.3	1.8	61
Other	(69.9)	49	(28.3)	(83.0)	(60.4)	(41.5)	(9.4)	(1.9)	(1.9)	(3.8)	(24.5)	(0.0)	34
Caste/tribe#													
Scheduled caste	31.4	8,389	29.3	37.3	25.9	22.9	14.6	5.0	1.0	10.1	41.7	2.7	2,630
Scheduled tribe	21.5	331	20.8	44.1	33.6	30.6	17.8	6.1	4.5	16.1	47.7	2.6	71
Other backward class	36.9	18,026	28.6	40.9	30.6	27.5	15.0	5.4	1.4	12.0	42.8	2.5	6,649
Other	48.6	10,340	32.7	56.2	43.2	33.0	17.0	6.0	1.4	8.5	33.2	2.2	5,021
Standard of living index													
Low	26.8	18,738	29.6	24.2	21.1	22.3	14.6	5.9	1.2	12.7	48.5	3.1	5,019
Medium	43.0	10,134	30.6	46.6	30.3	28.3	14.6	5.6	1.1	10.5	37.1	2.1	4,355
High	59.1	8,591	30.3	66.1	50.5	34.9	17.5	5.1	1.7	8.1	32.0	2.1	5,079
Total	38.6	37,463	30.1	45.7	34.2	28.6	15.6	5.5	1.3	10.4	39.3	2.4	14,453
Note: #Total figure may not add to N due to do not know and missing cases Total includes 14 cases with missing information on education are not shown separately. @ Literate men with no year of schooling are also included. () Based on less than 50 cases.													

8.1.1 Knowledge of Mode of Transmission of RTI/STI

Women who were aware of RTI/STI were asked about the mode of transmission. This is presented in Table 8.3. Among women who reported knowledge of RTI/STI, 51 percent did not know anything further about the mode of transmission of RTI/STI. This proportion is relatively higher among rural women, young women, non-literate women, and women from other than Hindu and Muslim religions, women from scheduled-tribes and women coming from households with low standard of living. Fifty eight percent of rural women do not know about the mode of transmission of RTI/STI compared to 40 percent of urban women. Heterosexual intercourse (24 percent) and lack of personnel hygiene (27 percent) were mentioned by women as mode of transmission of RTI/STI. Only 3 percent of women reported homosexual intercourse and 10 percent reported other modes of transmission of RTI/STI.

Table 8.3 SOURCE OF KNOWLEDGE ABOUT MODE OF TRANSMISSION OF RTI/STI AMONG WOMEN						
Percentage of currently married women age 15-44 who have heard of RTI/STI, knowledge of mode of transmission by selected background characteristics, Uttar Pradesh, 2002-04						
Background characteristic	Percentage by knowledge of mode of transmission				Do not know	Number of women who have heard of RTI/STI
	Homosexual intercourse	Heterosexual intercourse	Lack of personnel hygiene	Other		
Age						
15-19	1.8	15.4	18.7	10.9	61.0	1,466
20-24	3.2	24.2	24.3	8.8	52.1	3,995
25-29	3.1	25.4	28.5	9.6	48.8	4,222
30-34	3.4	22.9	28.2	11.2	49.1	3,684
35-39	3.4	26.8	29.5	10.7	47.5	3,097
40-44	2.8	20.9	26.9	10.3	52.6	2,207
Residence						
Rural	1.9	15.9	20.7	12.6	57.6	11,296
Urban	5.0	35.3	36.0	6.3	40.3	7,374
Education						
Non-literate	1.2	11.3	19.5	12.7	61.6	8,115
0-9@ years	2.4	22.1	24.5	10.1	52.4	4,970
10 years and above	6.5	42.6	39.2	6.4	33.5	5,579
Religion						
Hindu	3.1	23.9	26.5	10.7	50.4	15,302
Muslim	3.1	20.2	27.3	7.6	53.4	3,172
Christian	(2.9)	(44.1)	(32.4)	(5.9)	(44.1)	42
Sikh	3.0	48.4	37.7	1.2	35.5	112
Jain	(3.3)	(39.3)	(32.8)	(4.9)	(44.3)	37
Caste/tribe[#]						
Scheduled caste	1.5	18.5	22.4	13.0	54.9	3,157
Scheduled tribe	3.9	21.0	26.2	14.8	55.9	92
Other backward class	2.0	19.4	22.3	10.8	55.7	8,189
Other	5.1	30.7	33.6	8.1	43.3	7,140
Standard of living index						
Low	1.2	11.2	16.6	13.2	63.7	6,896
Medium	2.4	20.2	26.2	11.2	51.7	5,136
High	5.7	38.9	37.7	6.1	36.6	6,639
Total	3.1	23.5	26.7	10.1	50.8	18,670
Note: Total includes 6 cases missing information on education and 5 cases on other religion are not shown separately.						
[#] Total figure may not add to N due to do not know and missing cases.						
@ Literate women with no year of schooling are also included.						
() percentage shown less than 50 unweighted cases						

Table 8.4 SOURCE OF KNOWLEDGE ABOUT MODE OF TRANSMISSION OF RTI/STI AMONG MEN						
Percentage of husbands of currently married women who have heard of RTI/STI, knowledge of mode of transmission by selected background characteristics, Uttar Pradesh, 2002-04						
Background characteristic	Percentage by knowledge of mode of transmission				Do not know	Number of men who have heard of RTI/STI
	Homosexual intercourse	Heterosexual intercourse	Lack of personnel hygiene	Other		
Age						
<25	8.0	45.6	19.8	7.5	38.8	1,987
25-34	6.4	52.7	21.5	5.6	32.9	5,808
35-44	6.8	52.9	21.4	5.8	32.8	4,980
45+	7.1	51.4	22.0	6.0	31.8	1,678
Residence						
Rural	6.0	46.9	18.8	7.0	37.5	8,822
Urban	8.1	59.0	25.3	4.4	27.4	5,631
Education						
Non-literate	4.6	31.5	13.8	5.6	54.8	1,727
0-9@ years	5.5	43.2	17.4	6.7	40.9	5,432
10 years and above	8.3	62.7	26.0	5.5	23.1	7,291
Religion						
Hindu	7.1	52.0	21.5	5.8	33.3	12,031
Muslim	5.4	48.5	19.9	7.2	35.3	2,295
Christian	(0.0)	(77.3)	(18.2)	(0.0)	(22.7)	31
Sikh	4.7	81.4	34.9	5.1	8.6	61
Other	(1.9)	(69.8)	(32.1)	(0.0)	(22.6)	34
Caste/tribe[#]						
Scheduled caste	6.2	45.6	18.0	6.7	39.1	2,630
Scheduled tribe	1.8	55.2	20.4	1.7	40.2	71
Other backward class	6.8	48.4	20.6	6.0	36.0	6,649
Other	7.1	59.0	23.9	5.7	27.3	5,021
Standard of living index						
Low	5.6	39.2	15.9	6.4	45.1	5,019
Medium	6.3	51.2	19.7	6.7	33.3	4,355
High	8.5	64.3	27.9	4.9	22.3	5,079
Total	6.8	51.6	21.3	6.0	33.5	14,453

Note: Total includes 2 cases with missing information on education are not shown separately. @ Literate men with no years of schooling are also included. # Total figure may not add to N due to do not know and missing cases. () Based on less than 50 unweighted cases

Table 8.4 presents the knowledge of mode of transmission of RTI/STI among men. Among men who had heard of RTI/STI, 34 percent mentioned that they did not know anything about the mode of transmission of this RTI/STI. The percentage of men who did not know about the mode of transmission is higher among younger men, non-literate men, Muslim men, men from scheduled tribes, and men from households with a low standard of living. Among the men who knew the modes of transmission of RTI/STI, 52 percent mentioned heterosexual intercourse, 21 percent reported lack of personal hygiene, and only 7 percent mentioned homosexual intercourse, while 6 percent reported other modes of transmission.

8.2 Prevalence of RTI/STI

In DLHS-RCH, information was collected on the common symptoms of reproductive tract infections and sexually transmitted infections from women and their husbands, and information on menstruation related problems in the three months immediately preceding the survey.

The prevalence of reproductive tract infections and sexually transmitted tract infections is judged by their symptoms. All the respondents were told about symptoms of RTI/STI, and were asked whether they had any of them. In case of the presence of at least one symptom, they were further asked whether they sought treatment for such problems, and if they had sought treatment, details regarding the source of treatment was also recorded. The topic of RTI/STI is quite sensitive. The culture of silence prevents people from discussing such topics in front of others. In spite of intensive training of the investigators, the respondent might have hesitated in reporting the symptoms of RTI/STI. What gets reported in the survey though may not have given the exact prevalence, but may have given the lower limit for it.

Table 8.5 and Figure 8.2 show that more than one third of currently married women (36 percent) reported at least one reproductive health problem. The problems reported by women were 'low backache' (21 percent), 'pain in lower abdomen' (10 percent), 'itching over vulva' and 'frequent / painful passage of urine' (8 percent each), 'fever' and 'swelling in the groin' (7 percent each), 'painful sexual intercourse' (6 percent), 'any involuntary escape of urine while coughing or sneezing' (4 percent), 'boils/ ulcers/ warts around vulva' and 'some mass coming out of vagina' (3 percent each). Very few women reported 'bleeding after sexual intercourse' and 'swelling / lump in breast' (1 percent). The prevalence of reproductive health problems is common among rural and urban women.

Table 8.5 SYMPTOMS OF RTI/STI AMONG WOMEN			
Percentage of currently married women age 15-44 who reported any symptoms RTI/STI and specific symptoms during three months prior to survey, according to residence, Uttar Pradesh, 2002-04			
Symptoms	Total	Residence	
		Rural	Urban
Percentage of women reported any RTI/STI symptoms	35.6	35.9	34.9
Symptoms			
Itching over vulva	7.5	7.4	7.8
Boils/ ulcers/ warts around vulva	2.9	3.0	2.8
Pain in lower abdomen not related to menses	10.2	10.3	10.1
Low backache	20.9	20.7	21.4
Pain during sexual intercourse	6.3	6.7	5.5
Bleeding after sexual intercourse	1.2	1.2	1.1
Swelling in the groin	6.8	6.6	7.3
Frequent / painful passage of urine	7.6	7.7	7.3
Fever	7.4	8.1	5.7
Some mass coming out of vagina	3.1	3.2	2.9
Any involuntary escape of urine while coughing or sneezing	4.4	4.6	4.1
Swelling / lump in breast	1.0	1.0	1.1
Number of women	64,207	45,196	19,011

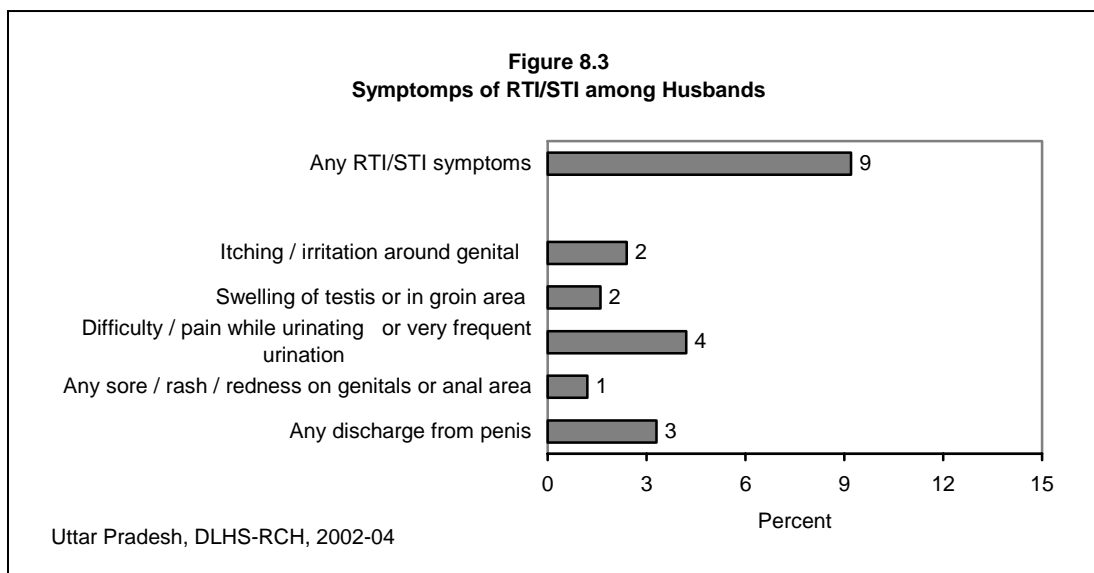
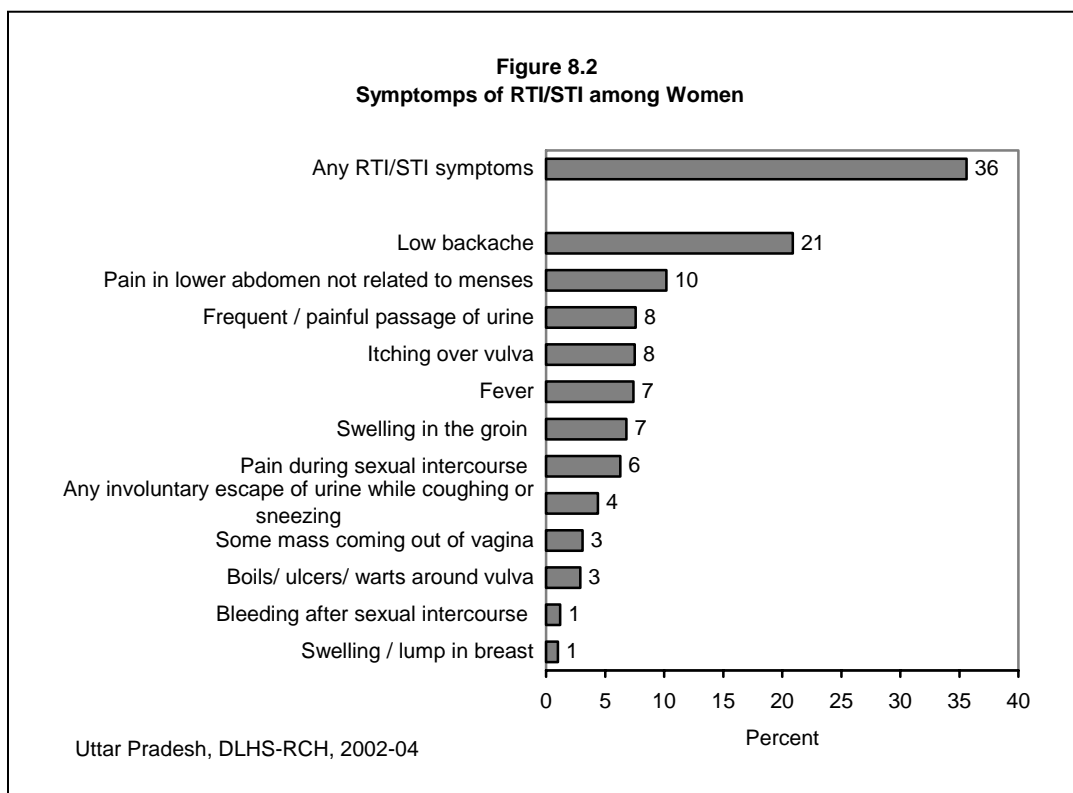


Table 8.6 and Figure 8.3 show the prevalence of reproductive health problems among husbands of currently married women. The prevalence of RTI/STI among men was judged by the reporting of symptoms. Nine percent of men reported experiencing at

least one symptom of reproductive health problem in the last three months preceding the survey. The prevalence of reproductive health problems is higher among rural men (11 percent) than among urban men (7 percent). The specific problem of reproductive health experienced by men is 'difficulty / pain while urinating or very frequent urination (4 percent), 'discharge from penis' (3 percent), 'itching / irritation around genital' and 'swelling of testes or in groin area' (2 percent each) and 'sore / rash / redness on genitals or anal area' (1 percent).

Table 8.6 SYMPTOMS OF RTI/STI AMONG MEN			
Percentage of husbands of currently married women who reported any symptoms RTI/STI and specific symptoms during three months prior to survey and sought treatment for RTI/STI by source of treatment, according to residence, Uttar Pradesh, 2002-04			
Symptoms and treatment	Total	Residence	
		Rural	Urban
Percentage of men reported any RTI/STI symptoms	9.2	10.7	6.9
Symptoms			
Any discharge from penis	3.3	3.6	2.4
Any sore / rash / redness on genitals or anal area	1.2	1.4	0.7
Difficulty / pain while urinating or very frequent urination	4.2	4.7	3.1
Swelling of testis or in groin area	1.6	2.0	0.8
Itching / irritation around genital	2.4	2.8	1.6
Number of men	37,463	26,121	11,302
Percentage of men sought treatment for any RTI/STI	43.4	42.0	48.8
Number of men ¹	3,565	2,788	777
Percentage sought treatment at health facility²			
Government health facility³			
Primary health centre	1.1	0.6	2.9
Sub centre	3.7	3.5	4.3
Private health facility⁴			
ISM ⁵ facility	12.5	12.7	11.9
Chemist/ medical shop	12.9	14.1	9.1
Other	14.1	14.9	11.9
Percentage obtained treatment from²			
Doctor	67.7	66.9	70.1
Male health worker	1.3	0.7	3.0
Traditional healer	1.8	1.8	1.7
Relative/friends	3.0	2.9	3.5
ISM practitioner	1.6	1.5	2.1
Home remedy	6.9	6.7	7.6
Chemist medical shop	9.7	10.7	6.5
Other	10.1	10.4	9.2
Number of men ⁶	1,549	1,170	379
Note: ¹ Based on men with any symptoms of RTI/STI. ² Percentage may add more than 100.0 due to multiple responses and based on who sought treatment. ³ Includes Government municipal hospital, dispensary, UHC/ UHP /UWFC, CHC/ rural hospital, Primary health centre, sub-centre. ⁴ Includes private hospital/ clinic, non-governmental / trust hospital/clinic. ⁵ Either government or private hospital/clinic of Indian system of medicine. ⁶ Based on who sought treatment for RTI/STI.			

Among men who reported reproductive health problems, 43 percent of them sought treatment. More urban men (49 percent) sought treatment for reproductive health problems than rural men (42 percent). Among them, only 24 percent visited a government health facility, including a primary health centre (1 percent) and sub-centre (4 percent) and 45 percent visited a private health facility. A sizeable number of men were treated by the Indian system of medicine (13 percent), 13 percent obtained treatment from a chemist or medical shop, and 14 percent of the men reported that they were treated at other sources. A relatively higher proportion of men from urban areas utilised the government health facility, private health facility but use of chemist or medical shop for treatment is higher among rural men (14 percent) than among urban men (9 percent) and utilisation of the Indian system of medicine is higher among rural men (13 percent) than among urban men (12 percent). A large proportion of men saw a doctor (68 percent)- 70 percent in urban areas and 67 percent in rural areas. Only one percent of men were seen by a male health worker, 2 percent by a traditional healer, 3 percent by relative or friend, and 2 percent by an ISM practitioner. Seven percent of the men used home remedies and 10 percent of the men went to a chemist. Another one tenth of the men obtained treatment from other sources. The percentage of men who obtained treatment, except form doctors, male health worker, chemists and other treatment, is somewhat higher in rural areas than in urban areas.

The DLHS-RCH also collected information from currently married women on symptoms of RTIs, that is, on abnormal vaginal discharge, texture, colour and odour of discharge in the three months immediately preceding the survey. The prevalence of reproductive health problems among currently married women is estimated from women's experiences. Table 8.3 shows the asymptotic prevalence of vaginal discharge related problems among currently married women in Uttar Pradesh during the three months preceding the survey according to residence. Twenty three percent of the women reported problems related to vaginal discharge. The prevalence of vaginal discharge problem is relatively higher among rural women (24 percent) than among urban women (23 percent).

Among the women who had reported symptoms of vaginal discharge, 33 percent went for treatment, higher percentage (42 percent) from urban areas compared to their rural counterparts (29 percent). A considerable proportion (63 percent) visited private health facilities followed by government health facility (20 percent). Only one tenth went for home remedy, 4 percent to the Primary Health Centre and 1 percent to Sub Centre, six percent of the women visited other places for treatment. The proportion of women who visited a private health facility is higher in urban areas (65 percent) than in rural areas (63 percent), and the proportion of women who visited a facility rendering the Indian system of medicine, is much higher in urban areas (7 percent) than in rural areas (5 percent). A significantly higher proportion (76 percent) of women in the state of Uttar Pradesh obtained treatment from doctors for their problems. Around 7 percent women were treated by ANM/Nurse/Midwife /LHV and 12 percent by other health professionals.

Table 8.7 ABNORMAL VAGINAL DISCHARGE			
Percentage of currently married women age 15-44 who reported had any abnormal vaginal discharge during three months prior to survey and percentage who sought treatment and source of treatment according to residence, Uttar Pradesh, 2002-04			
Symptoms and treatment	Total	Residence	
		Rural	Urban
Percentage of women reported abnormal vaginal discharge	23.4	23.7	22.6
Number of women	64,209	45,196	19,011
Percentage of women sought treatment for vaginal discharge ¹	32.9	29.3	42.0
Number of women	15,025	10,727	4,298
Percentage sought treatment at health facility²			
Government health facility ³	19.5	20.3	
Primary health centre	3.9	5.0	18.3
Sub centre	0.8	1.0	1.9
			0.3
Private health facility ⁴	63.3	62.6	64.6
ISM ⁵ facility	5.6	4.9	6.8
Home remedy	10.2	10.6	9.5
Other	6.4	6.3	6.6
Percent distribution of women who obtained treatment from²			
Doctor	75.9	74.4	78.4
ANM/nurse/midwife/LHV	7.2	7.2	7.1
Other health professionals ⁶	11.5	12.3	10.1
Other	5.2	5.7	4.4
Total percent	100.0	100.0	100.0
Number of women	4,949	3,142	1,807
Note: ¹ Based on women who reported having vaginal discharge. ² Based on women who sought treatment for vaginal discharge. ³ Includes Government municipal hospital, dispensary, UHC/ UHP /UWFC, CHC/ rural hospital, Primary health centre, sub-centre and out reach/ MCP clinic in village. ⁴ Includes private hospital/ clinic, non-governmental / trust hospital/clinic, chemist/ medical shop. ⁵ Either government or private hospital/clinic of Indian system of medicine, ⁶ Includes <i>dai</i> (trained or untrained), relative or friends and chemist/ medical shop.			

8.3 Menstruation Related Problems

Table 8.8 shows the percentage of women who had menstruation problems and who sought treatment during the three months preceding the survey. The Table shows that around 16 percent women in Uttar Pradesh had menstruation problems, with the figure being 16 percent and 15 percent in the rural and urban areas respectively.

Table 8.8 MENSTRUATION RELATED PROBLEMS			
Percentage of currently married women age 15-44 who had any menstruation related problem during three months prior to survey and percentage who sought treatment and source of treatment according to residence, Uttar Pradesh, 2002-04			
Symptoms and treatment	Total	Residence	
		Rural	Urban
Percentage of women with any menstruation related problem	15.7	16.2	14.7
Number of women	45,746	31,090	14,655
Symptoms ¹			
No period	3.4	3.5	3.1
Painful period	33.7	35.1	30.6
Frequent or short period	20.8	21.7	18.5
Delayed period	22.2	23.0	20.5
Prolonged bleeding	7.4	7.2	8.0
Excessive bleeding	13.3	13.3	13.4
Continuous bleeding	3.5	3.5	3.4
Scanty bleeding	27.3	26.1	30.0
Inter-menstrual bleeding	6.4	6.1	7.0
Percentage of women sought treatment who had any menstruation related problems	35.2	32.5	41.5
Number of women	7,185	5,058	2,157
Percentage sought treatment at health facility ⁶			
Government health facility ²	24.5	27.2	19.6
Primary health centre	5.1	6.6	2.5
Sub centre	1.7	2.6	0.1
Private health facility ³	67.8	65.6	71.8
ISM ⁴ facility	5.7	4.3	8.4
Other	2.8	3.9	0.8
Percentage of women obtained treatment from ⁶			
Doctor	81.2	79.8	83.7
ANM/nurse/midwife/LHV	10.4	12.0	7.5
Other health professionals ⁵	8.0	6.9	9.9
Other	2.5	3.0	1.5
Number of women	2,530	1,634	895
Note: ¹ Based on women who reported any menstruated related problems. ² Includes Government municipal hospital, dispensary, UHC/ UHP /UWFC, CHC/ rural hospital, Primary health centre, sub-centre and out reach/ MCP clinic in village. ³ Includes private hospital/ clinic, non-governmental / trust hospital/clinic, chemist/ medical shop. ⁴ Either government or private hospital/clinic of Indian system of medicine, ⁵ Includes <i>dai</i> (trained or untrained), relative or friends and chemist/ medical shop. ⁶ Multiple responses.			

Among the women who had reported menstrual problems in Uttar Pradesh, 34, 27, 22 and 21 percent reported painful periods, scanty bleeding, delayed periods and frequent or short period as symptoms respectively. The magnitude of these symptoms is more or less the same among urban as well as rural women. Painful periods and scanty bleeding are the main menstrual problems prevalent in Uttar Pradesh. Among the women who had menstrual problems, thirty five percent sought treatment in the state, and the figures for urban and rural areas are 42 percent and 33 percent respectively. The private health facility and government health facility are the main sources of treatment for menstrual problems. Around 68 percent of women sought treatment at a private facility and 25 percent sought treatment at

government health facility. Only six percent of women sought treatment form an ISM that is higher in urban area (8 percent) and lower in rural area (4 percent). Most of the women went to a doctor for treatment (81 percent). The figures for urban and rural areas are 84 and 80 percent respectively.

8.4 Prevalence of RTIs/STIs by District

Table 8.9 presents the prevalence of RTIs/STIs among currently married women and their husbands by district. The proportion of respondents who reported symptoms of RTIs/STIs among women is lowest in Hamirpur (20 percent each) and highest in Muzaffarnagar (59 percent). The proportion who reported problems related to abnormal vaginal discharge ranges from 8 percent in Kaushambi to 46 percent in Moradabad.

Table 8.9 REPRODUCTIVE HEALTH CARE INDICATORS BY DISTRICT					
Percentage of currently married women and their husbands who reported reproductive health problems and percentage who sought treatment for the problems by district, Uttar Pradesh, 2002-04					
District	Percentage of women			Percentage of men	
	With any symptoms of RTI/STI	Reported any abnormal vaginal discharge	Sought treatment for abnormal vaginal discharge	With any symptoms of RTI/STI	Sought treatment for RTI/STI problems
Agra	31.6	33.7	31.1	7.3	45.1
Aligarh	34.7	31.8	24.4	8.2	31.8
Allahabad	31.7	10.6	45.4	5.3	47.9
Ambedaker Nagar	31.4	11.3	42.3	3.1	(36.8)
Auraiya	41.1	42.7	23.6	11.2	28.6
Azamgarh	27.9	18.3	39.5	5.6	37.3
Baghpat	47.1	33.1	32.5	6.5	30.0
Bahraich	42.8	26.5	33.3	9.5	52.5
Ballia	30.3	22.2	22.1	12.6	53.0
Balrampur	33.3	22.9	39.6	6.9	55.1
Banda	37.0	22.7	16.0	13.0	43.6
Barabanki	36.1	17.1	34.9	14.0	35.3
Bareilly	38.9	25.6	35.3	21.8	55.3
Basti	33.3	21.3	22.1	6.6	55.8
Bijnor	37.5	24.3	40.2	12.8	61.1
Budaun	47.5	35.5	30.0	18.1	48.3
Bulandshahar	37.7	28.0	33.5	10.4	43.9
Chandauli	28.1	12.1	27.3	5.6	31.7
Chitrakoot	23.6	21.7	23.3	7.8	41.7
Deoria	39.4	20.8	34.6	5.5	35.9
Etah	37.5	29.6	31.8	9.6	37.9
Etawah	37.2	38.4	30.2	10.3	31.0
Faizabad	26.0	18.3	39.2	3.4	(66.4)
Farrukhabad	46.9	33.4	26.8	14.0	23.7
Fatehpur	24.2	18.5	33.9	8.8	27.2
Firozabad	24.4	20.9	30.0	9.7	62.2
Gautam Buddha Nagar	47.8	30.5	37.8	9.2	54.4
Ghaziabad	41.0	24.6	34.4	11.7	54.3
Ghazipur	28.0	21.7	22.9	9.2	42.6
Gonda	36.8	26.3	32.2	7.8	42.1
Gorakhpur	40.7	25.9	36.7	7.3	44.8
Hamirpur	19.8	17.7	40.5	14.0	37.2
Hardoi	24.9	11.8	25.4	15.5	38.3
Hathras	42.3	39.9	27.8	10.0	26.6
Jalaun	37.2	32.8	34.6	8.9	54.1
Jaunpur	30.1	16.0	34.2	8.9	29.1
Jhansi	37.8	26.0	28.4	8.3	36.2
Jyotiba Phule Nagar	47.7	41.6	38.6	7.2	54.6
Kannauj	45.5	23.0	35.7	13.3	41.1
Kanpur Dehat	39.0	25.7	35.1	13.7	41.4

Note: () Based on less number of cases

Contd.

Table 8.9 REPRODUCTIVE HEALTH CARE INDICATORS BY DISTRICT (Contd.)
Percentage of currently married women and their husbands who reported reproductive health problems and percentage who sought treatment for the problems by district, Uttar Pradesh, 2002-04

District	Percentage of women			Percentage of men	
	With any symptoms of RTI/STI	Reported any abnormal vaginal discharge	Sought treatment for abnormal vaginal discharge	With any symptoms of RTI/STI	Sought treatment for RTI/STI problems
Kanpur Nagar	38.8	20.2	42.1	5.9	(26.7)
Kaushambi	33.3	8.1	40.7	3.8	(61.7)
Kheri	28.4	17.4	38.6	14.0	34.0
Kushinagar	42.2	19.5	21.4	14.7	53.5
Lalitpur	33.2	29.2	20.6	7.4	29.2
Lucknow	27.2	11.6	45.1	7.7	47.0
Maharajganj	39.4	26.1	34.4	12.3	52.8
Mahoba	32.9	24.0	13.3	8.5	7.7
Mainpuri	42.2	35.1	22.1	5.0	(42.0)
Mathura	41.4	41.2	28.8	8.8	34.6
Mau	27.6	15.9	27.3	4.7	50.4
Meerut	48.6	39.4	41.5	6.3	44.3
Mirzapur	26.1	14.7	39.4	11.4	31.2
Moradabad	51.1	46.3	26.2	8.8	59.6
Muzaffarnagar	58.9	43.6	31.4	12.2	40.7
Pilibhit	34.9	31.9	41.6	16.2	66.1
Pratapgarh	39.8	23.5	37.8	5.6	(42.4)
Rae Bareli	25.0	14.0	37.2	8.6	40.3
Rampur	42.1	30.2	37.9	12.9	43.2
Saharanpur	37.5	18.6	31.7	13.1	29.2
Sant Kabir Nagar	40.4	23.1	43.8	6.1	40.6
Sant Ravidas Nagar	31.2	13.1	42.7	7.0	29.7
Shahjahanpur	21.1	23.1	37.9	13.5	45.8
Shrawasti	28.5	17.6	26.2	13.2	38.0
Siddharthnagar	27.0	27.0	31.9	7.7	47.1
Sitapur	35.8	15.1	33.6	11.6	45.0
Sonbhadra	39.6	20.8	37.7	7.7	36.7
Sultanpur	24.3	13.1	41.5	6.8	42.2
Unnao	43.1	10.3	25.7	6.2	56.9
Varanasi	26.3	14.1	36.9	6.7	46.1
Uttar Pradesh	35.0	23.4	32.9	9.0	43.4

Note: () Based on less number of cases

In comparison to women, fewer men from all districts of Uttar Pradesh reported symptoms of RTIs/STIs. Men from Ambedaker Nagar, Faizabad, Kaushambi, Mainpuri and Mau districts (3-5 percent) reported the lowest prevalence of symptoms of RTIs/STIs and men from Bareilly (22 percent) reported the highest prevalence. Except Hamirpur, Hardoi and Shahjahanpur, data does not show association between the prevalence of RTIs/STIs among women and men in any other districts.

The percentage of women who have sought treatment for RTIs (abnormal vaginal discharge) ranges from 13 percent in Mahoba to 45 percent in Allahabad, and for men who have sought treatment; it ranges from 8 percent in Mahoba to 66 percent in Pilibhit.

8.5 HIV/AIDS

Acquired Immune Deficiency Syndrome (AIDS) is an illness caused by the Human Immune Virus (HIV), which weakens the immune system and leads to death through secondary infection such as tuberculosis or pneumonia. The virus is generally transmitted through sexual contact, through the placenta of HIV-infected women to their children, or through contact with contaminated needle (injections) or blood. Prevalence of HIV and AIDS has been on the rise for more than a decade in India and has reached alarming proportions in recent years. To prevent HIV transmission, the government has been making various efforts.

DLHS-RCH has collected information on the general state of awareness of HIV/AIDS, its transmission, its prevention and common misconceptions about HIV/AIDS. All the currently married women in the age group 15-44, and their husbands were first asked if they had ever heard of an illness called HIV/AIDS. Respondents who had heard of HIV/AIDS were further asked about their source of information, mode of transmission, and correct knowledge of HIV/AIDS transfusion.

8.5.1 Knowledge of HIV/AIDS

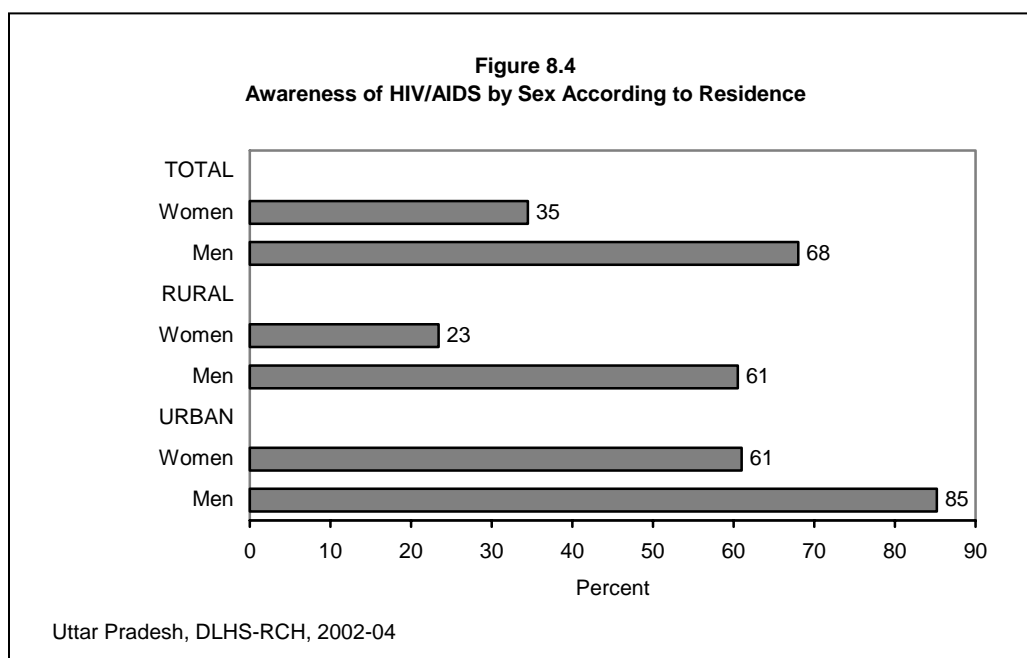
Table 8.10 shows the percentage of women who had heard about HIV/AIDS by some selected background characteristics. Thirty five percent of currently married women in Uttar Pradesh have heard of HIV/AIDS, which is higher than RCH Round – I. In Round-I, only 23 percent of currently married women were aware of HIV/AIDS.

Knowledge of HIV/AIDS is much lower among rural women, non-literate women, Hindu women, women from scheduled tribes, women from households with a low standard of living, and younger women. Sixty one percent of urban women had heard about HIV/AIDS compared to only 23 percent of rural women. Knowledge of HIV/AIDS steadily increased with increase in educational level and household standard of living. Less than 15 percent of non-literate women had heard of HIV/AIDS against 90 percent of women who had completed 10 or more years of schooling. Similarly 14 percent of the women with a low standard of living had heard of HIV/AIDS against 77 percent of women with a high standard of living. Except younger women (below the age of 20) more than one third of the women from other age groups have knowledge of HIV/AIDS. Hindu women (34 percent) were less aware of HIV/AIDS compared to Muslim (37 percent) and Christian women (72 percent). Women from ‘other caste’ category were more knowledgeable about HIV/AIDS (57 percent) than women belonging to other backward classes (28 percent), scheduled caste (22 percent) and scheduled tribe women (18 percent).

The government has been using mass media, such as television, radio, and newspaper extensively to increase awareness among the general public about HIV/AIDS and its prevention. Table 8.10 shows the percentage of currently married women who were aware of HIV/AIDS from different sources. The most prominent source of information about HIV/AIDS is television. About 79 percent of women reported that

television was their source of information about HIV/AIDS, followed by relatives or friends (34 percent), radio (31 percent), newspapers, books or magazines (29 percent) and slogans or pamphlets, posters or wall hoardings (24 percent). Only five percent of the women reported that a health worker had informed them about HIV/AIDS and 8 percent of the women received information of HIV/AIDS from a doctor. A comparatively higher proportion of rural women received information about HIV/AIDS from radio, health worker, and relatives or friends.

Table 8.11 shows the percentage of husbands of currently married women who had heard about HIV/AIDS. In Uttar Pradesh, the proportion of men who had heard about HIV/AIDS is almost double than that of women. Sixty eight percent of men had heard of HIV/AIDS as compared to 35 percent of women (Figure 8.4).



About eighty five percent of urban men had heard about HIV/AIDS as compared to only 61 percent of rural men. Knowledge of HIV/AIDS varies by men's age, and it is higher for the age group less than 25 years. Awareness of HIV/AIDS is much lower among non-literate men, Hindu men, men from scheduled tribes, and men who belong to households with a low standard of living. A similar trend is observed in the case of women. About one third of non-literate men had heard of HIV/AIDS, and it increased up to 71 percent for literate men and up to 94 percent for men who had completed 10 or more years of schooling. Thus, it is positively related to standard of living.

Table 8.11 also shows the percentage of husbands of currently married women who were aware of HIV/AIDS by different sources. As reported by the men of Uttar Pradesh, the most prominent source of information on HIV/AIDS was television (63 percent), followed by radio (40 percent). Other important sources of HIV/AIDS are the slogans or pamphlets, posters or wall hoardings (39 percent), newspapers, books or magazines (38 percent) and relatives or friends (37 percent). Fifteen percent of men reported that a doctor had informed them about HIV/AIDS and 6 percent men had received information of HIV/AIDS from a health worker.

Table 8.10 SOURCE OF KNOWLEDGE ABOUT HIV/AIDS AMONG WOMEN													
Percentage of currently married women age 15 - 44 who have heard about HIV/AIDS and among women who have heard about HIV/AIDS, percentage who received information from specific sources by selected background characteristics, Uttar Pradesh, 2002-04.													
Background characteristic	Percentage who have heard about HIV/AIDS	Number of Women	Among those who have heard about HIV/AIDS, percentage who received information from.										Number of women who have heard about HIV/AIDS
			Radio	Television	Newspaper / Books/ Magazines	Slogan/ Pamphlets/ Posters/ Wall Hoardings	Doctor	Health worker	School teacher	Community Meeting	Relative/ Friends	Others	
Age group (years)													
15-19	25.5	6,662	33.2	71.0	18.6	16.8	3.6	2.3	0.8	5.4	39.3	1.4	1,702
20-24	37.8	14,019	31.0	79.3	27.0	23.7	6.6	3.5	1.5	5.3	33.1	1.6	5,293
25-29	38.3	13,974	31.6	80.1	31.4	25.6	9.0	5.5	1.2	5.4	33.5	1.5	5,350
30-34	33.8	12,435	30.7	79.5	28.6	24.3	9.1	5.2	0.9	6.0	33.0	2.2	4,209
35-39	33.7	9,953	28.7	79.6	30.0	24.2	9.3	5.8	1.2	5.9	32.4	1.9	3,359
40-44	31.5	7,163	28.4	80.4	30.1	23.9	10.5	5.7	0.8	6.3	33.1	1.2	2,258
Residence													
Rural	23.4	45,196	33.3	64.3	18.3	17.8	7.0	5.0	0.8	7.1	44.1	2.4	10,579
Urban	61.0	19,011	28.3	92.5	37.8	29.4	9.4	4.6	1.4	4.3	23.9	1.0	11,591
Education													
Non-literate	15.3	39,991	22.5	61.6	3.0	2.9	3.9	3.4	0.2	7.0	42.5	2.6	6,106
0-9@ years	50.6	14,418	30.2	77.8	19.2	18.9	6.4	3.6	0.4	5.1	35.3	1.6	7,291
10 and above	89.6	9,785	36.8	92.2	54.0	42.5	12.8	6.7	2.4	5.1	25.9	1.2	8,770
Religion													
Hindu	33.8	52,900	31.8	78.5	30.1	25.1	8.8	5.2	1.3	5.9	34.5	1.8	17,880
Muslim	36.5	10,925	25.6	80.5	19.3	16.8	5.2	2.8	0.5	4.0	29.9	1.4	3,986
Christian	72.4	77	21.6	88.0	29.0	27.3	8.2	5.4	0.4	6.6	47.0	1.6	56
Sikh	81.4	218	32.6	96.3	60.5	46.5	17.9	5.5	0.5	10.3	14.8	0.0	177
Jain	92.3	66	35.7	95.6	63.3	49.0	22.2	2.9	2.7	10.0	26.0	0.0	61
Caste/tribe[#]													
Scheduled caste	21.6	14,188	28.1	72.5	18.7	17.6	6.8	5.9	1.3	5.8	36.2	1.8	3,063
Scheduled tribe	17.6	551	37.8	76.1	28.1	20.6	11.5	2.0	5.0	9.7	45.9	0.2	97
Other backward class	28.3	31,046	28.8	75.2	21.5	18.8	6.5	4.0	0.8	5.6	35.8	1.9	8,798
Other	56.6	17,717	33.2	84.3	37.8	30.4	10.2	5.2	1.4	5.6	30.8	1.4	10,031
Standard of living index													
Low	13.8	32,769	30.1	44.5	10.0	10.8	6.0	5.1	0.6	8.5	51.3	3.1	4,532
Medium	39.7	17,432	29.3	78.5	18.7	17.6	6.2	4.3	0.9	5.5	35.4	1.9	6,926
High	76.5	14,006	31.8	94.0	42.7	33.4	10.5	5.0	1.5	4.5	24.8	1.0	10,712
Total	34.5	64,207	30.7	79.0	28.5	23.8	8.2	4.8	1.1	5.6	33.5	1.7	22,170
Note: Total includes 13 cases missing information on education are not shown separately.													
@ Literate women with no year of schooling are also included. # Total figure may not add to N due to do not know and missing cases.													

Table 8.11 SOURCE OF KNOWLEDGE ABOUT HIV/AIDS AMONG MEN

Percentage of husband of currently married women who have heard about RTI/STI and among men who have heard about RTI/STI, percentage who received information from specific sources by selected background characteristics, Uttar Pradesh, 2002-04.

Background Characteristic	Percentage who have heard about HIV/AIDS	Number of men	Among those who have heard about HIV/AIDS, percentage who received information from.										Number of men who have heard about HIV/AIDS	
			Radio	Television	Newspaper / Books/ Magazines	Slogan/ Pamphlets/ Posters/ Wall Hoardings	Doctor	Health worker	School teacher	Community Meeting	Relative/ Friends	Others		
Age group (years)														
< 25	72.4	5,177	41.2	60.9	30.0	33.7	13.1	4.6	2.0	9.0	42.5	2.3	3,746	
25-34	71.7	14,546	41.5	64.5	36.7	39.5	14.3	5.9	1.0	8.7	37.6	2.0	10,428	
35-44	65.7	13,022	38.5	61.2	39.6	40.7	15.1	5.7	1.0	9.7	34.9	2.1	8,554	
45+	58.2	4,717	37.7	61.2	44.0	38.6	16.9	6.1	1.0	10.1	35.4	2.7	2,747	
Residence														
Rural	60.5	26,161	44.1	51.4	32.0	36.5	14.7	6.4	1.2	10.6	40.8	2.6	15,840	
Urban	85.2	11,302	33.2	80.7	46.5	43.0	14.7	4.5	1.1	7.1	31.3	1.4	9,635	
Education														
Non-literate	35.3	10,742	28.2	45.3	6.8	10.4	8.7	2.9	0.4	13.8	50.9	2.8	3,795	
0-9@ years	70.9	14,678	37.5	55.8	26.1	35.5	11.9	4.3	0.8	8.8	39.3	2.2	10,412	
10 and above	93.6	12,029	46.3	74.4	58.3	51.8	19.3	7.8	1.8	8.1	30.6	1.9	11,265	
Religion														
Hindu	67.5	31,200	41.3	62.0	38.6	40.2	15.2	6.1	1.3	9.0	36.8	2.2	21,058	
Muslim	69.9	6,035	33.8	63.4	31.0	32.2	12.2	3.4	0.6	10.6	40.0	2.1	4,218	
Christian	76.9	59	(30.3)	(84.8)	(60.6)	(33.3)	(15.2)	(12.1)	(3.0)	(9.1)	(27.3)	(0.0)	45	
Sikh	89.8	120	36.8	92.1	54.4	47.5	9.7	2.1	0.6	5.9	27.0	0.0	108	
Other	93.6	49	(38.5)	(92.3)	(66.7)	(57.7)	(12.8)	(2.6)	(2.6)	(9.0)	(14.1)	(1.3)	46	
Caste/tribe[#]														
Scheduled caste	57.3	8,389	39.1	55.7	28.6	32.5	13.2	5.9	1.1	9.6	39.2	2.2	4,804	
Scheduled tribe	46.4	331	33.1	57.2	30.2	35.2	8.5	5.0	2.4	8.8	34.0	2.7	154	
Other backward class	65.5	18,026	39.0	58.4	33.9	37.5	13.7	5.3	1.1	10.1	40.8	2.3	11,810	
Other	82.3	10,340	42.1	72.0	47.6	44.9	17.0	6.0	1.2	7.9	31.2	2.0	8,513	
Standard of living index														
Low	49.9	18,738	39.4	38.3	23.7	32.8	12.9	5.9	1.1	11.4	46.3	3.0	9,357	
Medium	79.2	10,134	40.9	66.2	33.0	36.3	13.8	5.4	1.0	9.0	35.8	2.0	8,028	
High	94.2	8,591	39.8	86.7	57.8	48.7	17.7	5.6	1.3	7.0	28.0	1.4	8,089	
Total	68.0	37,463	40.0	62.5	37.5	39.0	14.7	5.7	1.2	9.3	37.2	2.2	25,475	

Note: Table includes 24 cases missing information on education are not shown separately. @ Literate men with no year of schooling are also included. # Total figure may not add to N due to don't and missing cases. () Based on less than 50 unweighted cases.

About 9 percent reported that they were informed through community meetings and one percent received such information from a schoolteacher. Comparatively, a higher proportion of rural men received information about HIV/AIDS from radio, health worker, school teacher, community meetings and relatives or friends than urban men. The information on awareness of HIV/AIDS through mass media, such as television and newspapers, and books or magazines, was received more by older men (aged 45 and above), urban men, and men from other religions and 'other castes' category, with at least 10 years of schooling, and men from households with a high standard of living. On the other hand, relatives or friends were the main source of information for rural men, younger men below age 25, non-literate men, Muslim men, men from a other backward castes men and men from households with a low standard of living.

8.5.2 Knowledge of Mode of Transmission about HIV/AIDS

Women who were aware of HIV/AIDS were asked about the mode of transmission and this is presented in Table 8.12. Among women who reported awareness of HIV/AIDS, 24 percent of them did not know about the mode of transmission.

Table 8.12 SOURCE OF KNOWLEDGE ABOUT MODE OF TRANSMISSION OF HIV/AIDS AMONG WOMEN

Percentage currently married women age 15-44 who have heard of HIV/AIDS, knowledge of mode of transmission by selected background characteristics, Uttar Pradesh, 2002-04

Background characteristic	Percentage by knowledge of mode of transmission						Do not know	Number of women who have heard of HIV/AIDS
	Homo sexual intercourse	Hetero sexual intercourse	Needles/ blade/ skin puncture	Mother to child	Transfusion of infected blood	Other		
Age								
15-19	6.4	61.3	25.3	5.3	20.4	2.8	32.1	1,702
20-24	9.9	67.9	35.2	11.3	29.0	2.4	23.8	5,293
25-29	11.5	69.5	39.2	15.2	32.9	3.2	20.8	5,350
30-34	11.3	69.6	37.8	12.3	31.1	2.7	21.9	4,209
35-39	10.6	67.8	36.7	12.6	30.7	4.1	24.6	3,359
40-44	11.1	64.4	37.2	11.0	28.3	4.2	26.0	2,258
Residence								
Rural	7.2	62.8	27.6	7.8	21.2	3.3	28.6	10,579
Urban	13.6	72.2	44.3	16.1	37.7	3.0	19.2	11,591
Education								
Non-literate	7.6	53.8	16.0	5.4	13.3	2.5	37.6	6,106
0-9@ years	8.1	65.7	29.9	8.3	23.0	3.0	26.1	7,291
10 years and above	14.6	79.1	55.9	20.0	47.0	3.6	12.0	8,770
Religion								
Hindu	10.5	68.6	37.0	12.3	30.1	3.2	23.1	17,880
Muslim	10.8	62.8	31.7	10.7	26.5	2.8	27.4	3,986
Christian	6.4	73.7	35.7	19.7	40.7	3.3	20.7	56
Sikh	8.8	82.7	63.6	15.6	58.6	4.6	8.0	177
Jain	5.0	90.6	68.7	28.8	66.7	1.9	6.3	61
Caste/tribe[#]								
Scheduled caste	8.9	63.7	28.8	9.7	24.5	2.2	28.3	3,063
Scheduled tribe	9.6	69.5	28.6	20.1	26.6	1.0	26.5	97
Other backward class	8.2	66.1	32.0	10.0	25.9	2.7	26.2	8,798
Other	12.6	70.8	42.4	14.5	34.9	3.8	20.0	10,031
Standard of living index								
Low	5.5	55.1	16.7	5.0	13.2	3.2	36.9	4,532
Medium	8.3	64.6	29.8	8.7	22.7	2.6	27.3	6,926
High	14.1	75.1	48.9	17.4	41.5	3.4	15.8	10,712
Total	10.5	67.7	36.3	12.1	29.9	3.1	23.7	22,170

Note: Total includes 4 cases missing information on education and 11 women with other religion not shown separately. @ Literate women with no year of schooling are also included. # Total may not add upto N due to do not know and missing cases

This proportion is relatively higher among rural women, younger women, non-literate women, Muslim women, women from scheduled castes and women with a low standard of living. Twenty nine percent of the rural women do not know about the mode of transmission of HIV/AIDS compared to 19 percent of urban women.

Among women who reported different ways of transmission of HIV/AIDS, a large proportion (68 percent) mentioned heterosexual intercourse as a mode of transmission. All the socio-economic groups reported that heterosexual intercourse was the main mode of transmission of HIV/AIDS. Other modes reported by women were transmission through needle or blade or skin puncture (36 percent), transfusion of infected blood (30 percent), mother to child, if pregnancy occurs during a stage of HIV (12 percent); only 11 percent of the women mentioned that homosexual intercourse could also be a mode of transmission. Only three percent stated that there were other ways of transmission of HIV/AIDS.

Table 8.13 SOURCE OF KNOWLEDGE ABOUT MODE OF TRANSMISSION OF HIV/AIDS AMONG MEN

Percentage of husbands of currently married women who have heard of HIV/AIDS, knowledge of mode of transmission by selected background characteristics, Uttar Pradesh, 2002-04

Background characteristic	Percentage by knowledge of mode of transmission							Number of men who have heard of HIV/AIDS
	Homosexual intercourse	Heterosexual intercourse	Needles/ blade/ skin puncture	Mother to child	Transfusion of infected blood	Other	Do not know	
Age								
<25	7.4	72.8	30.8	6.8	21.9	4.3	18.4	3746
25-34	7.2	76.2	33.3	6.5	24.5	3.5	16.6	10,428
35-44	7.7	74.0	30.2	6.5	22.9	3.9	18.8	8,554
45+	7.1	73.1	29.3	6.1	21.5	3.8	20.4	2,747
Residence								
Rural	6.4	70.6	27.8	5.2	20.0	4.3	21.3	15,840
Urban	9.0	81.2	37.5	8.6	28.7	2.9	12.6	9635
Education								
Non-literate	5.0	61.3	11.1	2.0	7.3	2.9	32.7	3,795
0-9@ years	6.0	70.6	22.5	4.7	14.8	4.0	22.1	10,412
10 years and above	9.5	82.8	46.7	9.6	36.4	3.8	9.3	11,265
Religion								
Hindu	7.7	74.5	32.5	6.8	24.3	3.9	17.8	21,058
Muslim	6.2	74.5	25.8	5.0	17.7	2.9	19.4	4,218
Christian	(9.1)	(78.8)	(45.5)	(0.0)	(42.4)	(3.0)	(15.2)	45
Sikh	6.0	84.5	43.6	7.4	35.3	2.6	12.2	108
Other	(6.4)	(91.0)	(43.6)	(14.1)	(35.9)	(5.1)	(5.1)	46
Caste/tribe[#]								
Scheduled caste	7.2	69.9	24.8	5.5	18.9	3.8	21.8	4,804
Scheduled tribe	2.5	61.9	21.2	3.1	13.7	4.4	36.1	154
Other backward class	6.7	73.5	28.5	5.2	20.1	4.0	19.4	11,810
Other	8.4	79.2	39.6	8.9	30.5	3.4	13.6	8,513
Standard of living index								
Low	5.5	64.9	18.6	3.5	12.8	4.7	27.4	9,357
Medium	6.4	76.2	30.4	6.0	21.9	3.6	16.8	8,028
High	10.6	84.3	47.5	10.4	36.7	2.9	8.4	8,089
Total	7.4	74.6	31.5	6.5	23.3	3.8	18.0	25,475

Note: Total includes 3 case missing information on education are not shown separately. @ Literate men with no year of schooling are also included. () Based on less than 50 cases unweighted were not shown separately. # Total figure may not add to N due to do not know and missing cases.

Table 8.13 presents the knowledge about mode of transmission of HIV/AIDS among men. Eighteen percent of the men who had heard about HIV/AIDS mentioned that they do not know the mode of transmission. The percentage of men not knowing the mode of transmission is higher among older men, rural men, non-literate men, Muslim men, scheduled tribes, and men from households with a low standard of living. Among who reported ways of transmission of HIV/AIDS, three fourth of them mentioned heterosexual intercourse as a mode of transmission. All the groups reported that heterosexual intercourse was the main mode of transmission of HIV/AIDS. Other modes reported by men are transmission through needle or blade or skin puncture (32 percent), transfusion of infected blood (23 percent), mother to child, if pregnancy occurs during a stage of HIV (7 percent), and only 7 percent of men mentioned that homosexual intercourse could also be a mode of transmission of HIV/AIDS. Only three percent stated that there were other ways of transmission of HIV/AIDS.

8.5.3 How to avoid HIV/AIDS

All the respondents, male and female, were asked about how to prevent HIV/AIDS. The percentage of women who said that HIV/AIDS could be avoided by various ways has been presented in Table 6.14 by some selected background characteristics.

Among women who reported about awareness of HIV/AIDS, more than one quarter of them did not know how to avoid becoming infected by HIV/AIDS. This percentage is higher among rural women than among urban women. The percentage of women who did not know of any way to avoid infection decreases with increasing levels of education and household standard of living. Forty four percent of non-literate women reported that they did not know of any way to avoid infection as compared to 15 percent of women who had completed ten or more years of schooling. Similarly, 44 percent of women with low a standard of living stated that they did not know of any way to avoid infection as compared to 19 percent of women with a high standard of living. The percentage of women who did not know ways to avoid infection is also high among Muslim women, scheduled caste women and younger women.

Among women who mentioned ways to avoid HIV/AIDS, a higher proportion of women (63 percent) said, “sex with only one partner is the way to avoid it”. Other ways to prevent HIV/AIDS mentioned by women were ‘using a condom correctly during each sexual intercourse’ and ‘sterilizing needles and syringe before injecting’ (27 percent each), ‘checking blood prior to transfusion’ (30 percent), and 10 percent of the women reported that the pregnancy should be avoided if couples were infected by HIV/AIDS. All the specific ways to avoid becoming infected by HIV/AIDS reported by women are proportionally higher in urban areas, among Christian women, women who belong to Sikh or Jain category, women with a high level of education and women with a high standard of living.

Table 6.15 shows the percentage of men who reported that HIV/AIDS could be avoided by some selected background characteristics. Among men who are aware of HIV/AIDS, more than two fifth of them did not know of any method to avoid infection, compared to 29 percent women in the state.

In Uttar Pradesh a higher proportion of men reported that ‘sex with only one partner’ is the way to avoid HIV/AIDS, a majority of men (65 percent) also reported the same, and this was the most commonly reported way to avoid HIV/AIDS in all the groups.

Table 8.14 KNOWLEDGE ABOUT AVOIDANCE OF HIV/AIDS AMONG WOMEN

Among currently married women age 15-44 who have heard about HIV/AIDS, the percentage of women reported HIV/AIDS can be avoided in specific ways by selected background characteristics, Uttar Pradesh, 2002-04

Background characteristic	Percentage reported HIV/AIDS can be avoided by:						Do not know To avoid HIV/AIDS	Number of women
	Sex With Only one partner	Using condoms correctly during each sexual intercourse	Checking blood prior to transfusion	Sterilizing needles and syringes for injection	Avoiding pregnancy when having HIV/AIDS	Other		
Age								
15-19	53.4	16.8	19.9	21.8	4.0	3.4	38.5	1,702
20-24	61.8	25.6	28.4	32.1	8.7	3.0	29.3	5,293
25-29	66.4	29.5	31.8	35.9	11.8	4.2	25.0	5,350
30-34	64.5	28.0	31.0	34.0	9.8	4.3	27.1	4,209
35-39	62.4	27.2	30.8	33.8	10.7	5.4	29.0	3,359
40-44	61.8	24.6	29.0	33.4	9.4	4.2	30.9	2,258
Residence								
Rural	56.5	18.1	20.5	24.2	5.4	4.2	34.9	10,579
Urban	68.7	34.1	37.7	41.0	13.6	3.9	22.9	11,591
Education								
Non-literate	50.4	10.0	12.6	13.4	3.0	3.8	44.1	6,106
0-9@ years	59.9	20.0	22.4	26.8	6.3	3.6	31.8	7,291
10 years and above	74.0	43.3	47.2	51.8	17.2	4.6	15.3	8,770
Religion								
Hindu	63.2	27.2	29.9	33.6	9.8	4.2	28.0	17,880
Muslim	60.2	21.8	26.0	28.6	8.0	3.2	32.6	3,986
Christian	76.0	35.8	31.5	37.6	15.1	14.3	21.0	56
Sikh	75.5	44.5	55.8	57.5	21.9	7.5	15.3	177
Jain	80.7	59.9	66.9	64.0	24.0	3.8	11.4	61
Caste/tribe#								
Scheduled caste	58.9	19.3	24.5	25.5	6.4	3.7	34.4	3,063
Scheduled tribe	65.6	19.5	30.5	27.3	5.0	5.9	28.1	97
Other backward class	59.8	23.4	24.8	29.1	7.5	3.6	32.0	8,798
Other	66.7	31.4	35.0	38.7	12.5	4.4	23.9	10,031
Standard of living index								
Low	48.9	11.7	12.5	14.6	2.9	5.0	43.8	4,532
Medium	58.4	19.5	22.0	26.1	6.1	3.1	33.7	6,926
High	71.7	37.2	41.5	45.2	14.9	4.3	19.0	10,712
Total	62.9	26.5	29.5	33.0	9.7	4.1	28.7	22,170

Note: Total includes 4 cases missing information on and 11 women with other religion not shown separately. @ Literate women with no year of schooling are also included. # Total figure may not add to N due to do not know and missing cases.

Other ways to prevent HIV/AIDS mentioned by men are 'using a condom correctly during each sexual intercourse' (36 percent) 'sterilizing needles and syringe before injecting' (28 percent), and 'checking blood prior to transfusion' (21 percent). All the specific ways to avoid becoming infected by HIV/AIDS reported by men are proportionally higher in urban areas than in rural areas, and among men who belong to Sikh and 'other caste' category, men with a high level of education and men with a high standard of living. Hindu men were more likely to report prevention of HIV/AIDS by using a condom correctly during each sexual intercourse.

Table 8.15 KNOWLEDGE ABOUT AVOIDANCE OF HIV/AIDS AMONG MEN

Among husbands of currently married women who have heard about HIV/AIDS, the percentage of men reported HIV/AIDS can be avoided in specific ways by selected background characteristics, Uttar Pradesh, 2002-04

Background characteristic	Percentage reported HIV/AIDS can be avoided by:							Number of men
	Sex with only one partner	Using condoms correctly during each sexual intercourse	Checking blood prior to transfusion	Sterilizing needles and syringes for injection	Avoiding pregnancy when having HIV/AIDS	Other	Do not know to avoid HIV/AIDS	
Age								
<25	61.3	36.7	19.1	27.5	6.7	6.0	24.0	3,746
25-34	66.2	37.7	22.2	29.7	5.8	6.5	20.4	10,428
35-44	64.9	33.5	20.5	27.5	6.0	6.6	21.8	8,554
45+	64.7	32.3	19.6	25.9	5.7	6.0	23.8	2,747
Residence								
Rural	61.7	30.9	18.0	24.9	5.1	6.8	25.6	15,840
Urban	70.1	43.1	25.7	33.6	7.5	5.7	15.5	9,635
Education								
Non-literate	51.3	14.8	6.5	9.2	2.1	5.4	39.7	3,795
0-9@ years	60.4	27.9	13.4	19.9	4.4	6.8	26.7	10,412
10 years and above	73.6	49.6	32.6	42.2	8.8	6.3	11.2	11,265
Religion								
Hindu	64.8	36.6	21.6	29.2	6.2	6.3	21.5	21,058
Muslim	64.8	29.4	16.7	23.0	5.0	7.0	23.6	4,218
Christian	(66.7)	(57.6)	(39.4)	(42.4)	(9.1)	(0.0)	26.7	45
Sikh	73.1	51.6	37.1	45.3	3.0	5.2	12.7	108
Other	(79.5)	(57.7)	(33.3)	(37.2)	(12.8)	(2.6)	(7.7)	46
Caste/tribe[#]								
Scheduled caste	62.3	30.2	16.6	22.8	4.8	5.6	26.3	4,804
Scheduled tribe	52.3	26.7	11.4	13.7	2.5	5.5	38.6	154
Other backward class	64.3	32.1	17.9	24.9	5.2	6.6	23.4	11,810
Other	67.6	43.6	27.6	36.2	7.9	6.6	16.4	8,513
Standard of living index								
Low	56.6	22.8	11.4	17.0	4.3	7.4	32.6	9,357
Medium	65.6	34.6	19.4	27.2	5.1	6.5	20.2	8,028
High	73.8	51.2	33.4	42.2	8.9	5.1	10.9	8,089
Total	64.9	35.5	20.9	28.2	6.0	6.4	21.8	25,475

Note: Total includes 3 case missing information on education are not shown separately. @ Literate men with no year of schooling are also included. () Based on less than 50 cases unweighted were not shown separately. # Total figure may not add to N due to do not know and missing cases.

8.5.4 Misconception about HIV/AIDS

People generally have misconceptions about the ways of transmission of HIV/AIDS, such as 'shaking hands with a person having AIDS', hugging and kissing with them, sharing their clothes or sharing eating utensils, stepping on urine/stool, through insect bites, for example, being bitten by mosquitoes, fleas and bedbugs. All these questions were asked to the respondents who had heard of HIV/AIDS.

Table 8.16 shows the percentage of women with misconceptions about spreading HIV/AIDS through specific ways by selected background characteristics. Being bitten by mosquitoes, fleas or bedbugs is commonly reported as the way of getting HIV/AIDS infection by women in all the groups, and this percentage is higher in rural areas (24

Table 8.16 MISCONCEPTION ABOUT TRANSMISSION OF HIV/AIDS AMONG WOMEN								
Among currently married women age 15-44 who have heard about HIV/AIDS, the percentage of women having misconception about the transmission of HIV/AIDS by selected background characteristics, Uttar Pradesh, 2002-04								
Background characteristic	Percentage having misconception about the transmission of HIV/AIDS							Number of Women
	Shaking hands	Hugging	Kissing	Sharing clothes	Sharing eating utensils	Stepping on Urine / stool	Mosquito, flea, or bedbugs biting	
Residence								
Rural	14.7	16.5	20.9	20.3	24.8	19.0	23.9	1,0579
Urban	7.9	8.5	11.0	11.2	12.6	9.6	13.6	1,1591
Education								
Non-literate	14.5	16.6	20.9	20.1	23.9	17.9	21.9	6,106
0-9@ years	12.9	13.5	17.2	17.3	20.4	15.6	19.8	7,291
10 years and above	7.4	8.3	10.8	11.0	12.9	10.1	15.1	8,770
Religion								
Hindu	11.1	12.4	15.9	15.6	18.9	14.6	19.1	17,880
Muslim	11.8	12.5	15.3	15.7	16.8	12.3	16.7	3,986
Christian	24.2	25.0	26.3	25.0	25.7	26.9	32.2	56
Sikh	6.1	3.7	7.0	7.2	5.5	3.9	7.1	177
Jain	2.2	2.4	3.0	5.6	6.6	4.2	4.2	61
Caste/tribe*								
Scheduled caste	11.5	12.9	17.2	17.1	20.4	14.6	20.2	3,063
Scheduled tribe	12.3	15.2	26.7	13.7	21.1	21.5	16.2	97
Other backward class	12.1	13.2	16.3	16.1	19.7	14.6	19.4	8,798
Other	10.3	11.4	14.5	14.7	16.7	13.4	17.4	10,031
Standard of living index								
Low	17.0	19.6	24.6	24.4	29.2	22.0	26.4	4,532
Medium	12.4	13.5	16.8	16.4	19.8	15.1	19.5	6,926
High	7.9	8.5	11.2	11.3	13.0	10.1	14.6	10,712
Total	11.2	12.3	15.7	15.6	18.4	14.1	18.5	22,170
Note: Total includes 4 cases missing information on education and 11 women with other religion not shown separately @ Literate women with no year of schooling are also included. # Total figure may not add to N due to do not know and missing cases.								

percent) than in urban areas (14 percent). Non-literate women who have completed nine years of schooling, women from households with a low standard of living, Christian women, and women from scheduled caste mentioned this method of transmission more often. Other misconceptions about the spread of HIV/AIDS were 'sharing eating utensils' (18 percent), 'sharing clothes' and 'kissing' (17 percent each), 'stepping on urine/stool' (14 percent), 'hugging' (12 percent), and 'shaking hands' (11 percent). The percentage of respondents reporting all these misconceptions is higher among women who belong to scheduled tribes, scheduled castes, among Christian women, non-literate women and women with a low standard of living.

Table 8.17 presents the percentage of men with misconceptions about the spread of HIV/AIDS through specific ways by selected background characteristics. Again, just like the women, men in all the groups reported that HIV/AIDS is transmitted through insect bites, mosquitoes, through flea or bedbugs. Twenty nine percent of the men felt so. The percentage who reported that HIV/AIDS could be transmitted through the biting by mosquitoes or flees or bedbugs was much higher among rural men (32 percent) than among urban men (23 percent). Literate men who have completed nine years of schooling, men from households with a low standard of living, Hindu men, and scheduled

Table 8.17 MISCONCEPTION ABOUT TRANSMISSION OF HIV/AIDS AMONG MEN
Among husbands currently married women who have heard about HIV/AIDS, the percentage of men having misconception about the transmission of HIV/AIDS by selected background characteristics, Uttar Pradesh, 2002-04

Background characteristic	Percentage having misconception about the transmission of HIV/AIDS							Number of men
	Shaking hands	Hugging	Kissing	Sharing clothes	Sharing eating utensils	Stepping on Urine / stool	Mosquito, flea, or bedbugs biting	
Residence								
Rural	21.1	24.0	30.7	28.6	30.4	22.3	32.2	15,840
Urban	12.5	13.8	19.6	16.9	17.7	13.4	23.1	9,635
Education								
Non-literate	24.6	27.5	33.4	30.0	32.4	24.4	29.9	3,795
0-9@ years	20.8	23.9	30.4	28.4	30.0	22.0	30.8	10,412
10 years and above	12.9	14.2	20.6	18.4	19.2	14.3	26.4	11,265
Religion								
Hindu	17.8	20.0	26.7	24.2	25.8	19.2	29.3	21,058
Muslim	18.4	21.2	26.2	24.5	25.3	18.4	26.6	4,218
Christian	(6.1)	(6.1)	(9.1)	(3.0)	(3.0)	(6.1)	(24.2)	45
Sikh	10.0	11.4	16.9	17.4	12.0	6.5	4.4	108
Other	(7.7)	(11.2)	(17.9)	(14.1)	(14.1)	(11.5)	(14.1)	46
Caste/tribe#								
Scheduled caste	20.0	22.7	29.1	26.9	28.7	21.4	30.6	4,804
Scheduled tribe	16.4	17.2	23.5	21.3	23.0	19.7	24.7	154
Other backward class	19.3	21.8	28.6	26.1	27.6	19.7	29.6	11,810
Other	14.8	16.6	22.3	20.3	21.3	16.5	26.5	8,513
Standard of living index								
Low	24.8	28.3	35.0	33.1	35.1	26.2	34.0	9,357
Medium	17.7	20.3	27.2	24.5	26.2	18.9	29.2	8,028
High	10.0	10.5	15.9	13.5	14.0	10.6	22.1	8,089
Total	17.9	20.1	26.5	24.2	25.6	18.9	28.7	25,475

Note: Total includes 3 case missing information on education are not shown separately. @ Literate men with no year of schooling are also included. () Based on less than 50 unweighted cases. # Total figure may not add to N due to do not know and missing cases.

caste men are of the impression that HIV/AIDS spreads when one is bitten by mosquitoes, fleas or bedbugs. Other misconceptions about the spread of HIV/AIDS are 'kissing' (27 percent), 'sharing eating utensils' (26 percent), 'sharing clothes' (24 percent), 'hugging' (20 percent), 'stepping on urine/stool' (19 percent) and 'shaking hands' (18 percent). The proportion of respondents who reported about misconceptions is higher among men than women. The percentage respondents who reported of all these misconceptions is also higher among men who belong to scheduled caste and other backward caste, Hindu men, non-literate men and men with a low standard of living.

8.5.5 Knowledge of Curability of HIV/AIDS

Table 8.18 shows the percentage distribution of currently married women and their husbands who have heard about HIV/AIDS by knowledge of curability of the same, according to some selected background characteristics. Around 37 percent women and 32 percent men have the notion that HIV/AIDS is curable, whereas 45 percent women and 48 percent men replied that the disease is not curable. Nineteen percent women and 20 percent men do not have any idea regarding the curability of the disease. It can be safely

Table 8.18 KNOWLEDGE OF CURABILITY ABOUT HIV/AIDS								
Among currently married women and their husband, who have heard about HIV/AIDS, Percent distribution of respondents by knowledge of curability about HIV/AIDS, according to some selected background characteristics, Uttar Pradesh, 2002-04								
Background characteristic	Percent distribution of women			Number of women	Percent distribution of men			Number of men
	Yes	No	Do not know		Yes	No	Do not know	
Residence								
Rural	37.5	42.3	20.1	10,579	33.1	45.4	21.5	15,840
Urban	35.5	47.5	16.9	11,591	31.1	51.2	17.7	9,635
Education								
Non-literate	34.2	35.5	30.3	6,106	33.6	31.4	35.1	3,795
0-9@ years	38.0	42.1	19.9	7,291	34.3	41.9	23.7	10,412
10 years and above	36.8	54.2	9.0	8,770	30.0	58.3	11.7	11,265
Religion								
Hindu	37.5	45.3	17.2	17,880	32.6	47.8	19.6	21,058
Muslim	31.9	43.6	24.5	3,986	31.4	45.8	22.9	4,218
Christian	28.5	58.0	13.5	56	(33.3)	(54.5)	(12.1)	45
Sikh	45.7	42.2	12.1	177	16.6	66.6	16.8	108
Jain	25.7	69.5	4.7	61	-	-	-	-
Caste/tribe#								
Scheduled caste	39.2	38.9	21.9	3,063	34.2	42.4	23.4	4,804
Scheduled tribe	34.1	36.7	29.2	97	36.6	33.0	30.4	154
Other backward class	36.3	43.4	20.3	8,798	32.1	46.3	21.6	11,810
Other	35.9	48.6	15.5	10,031	31.5	52.5	15.9	8,513
Standard of living index								
Low								
Medium	38.9	35.8	25.3	4,532	34.8	38.5	26.7	9,357
High	35.6	42.8	21.5	6,926	32.2	47.7	20.1	8,028
	36.0	50.4	13.5	10,712	29.6	57.9	12.5	8,089
Total	36.5	45.1	18.5	22,170	32.3	47.6	20.1	25,475
Note: Total includes 4 women missing information on education 11 women with other religion not shown separately.								
Total include 3 men missing information on education were not shown separately.								
@ Literate persons with no year of schooling are also included. () Based on less than 50 cases.								
# Total figure may not add to N due to do not know and missing cases.								

asserted from the figures that both men and women of urban area having high level of education, belonging to Christian religion and other backward classes and from households of high standard of living are showing better performance as far as the knowledge of curability of HIV/AIDS is concerned.

8.6 Awareness of RTI/STI and HIV/AIDS by District

Table 8.19 shows the percentage distribution of currently married women and their husbands who are aware of RTI/STI and HIV/AIDS by districts.

According to DLHS, 29 percent and 35 percent of women were aware of RTI/STI and HIV/AIDS respectively and the corresponding figure for husbands of eligible women is 39 and 68 percent respectively. The awareness of RTI/STI and HIV/AIDS among men is higher than that among women by 10 and 34 percentage points.

In general, in all of the districts, men are more aware of RTI/STI and HIV/AIDS than women. The highest level of awareness about RTI/STI among women was reported in Sant Ravidas Nagar (71 percent), followed by Kanpur Nagar and Faizabad (58 and 56 percent respectively) to the lowest in Shahjahanpur (3 percent). Among men, the highest level of awareness of RTI/STI was reported in Ghaziabad (63 percent), followed by Kanpur Nagar (58 percent) and Kanpur Dehat (57 percent) and the lowest in Firozabad (9 percent).

The proportion of husbands of eligible women for currently married women aged 15-44 years who are aware of HIV/AIDS in the districts of Uttar Pradesh is also presented Table 8.19. Among women, the awareness about HIV/AIDS ranges from the highest of 63 percent in Kanpur Nagar to the lowest of 11 percent in Hardoi. With the exception of Hardoi, Maharajganj and Sitapur in every district a minimum of one fifth of women reported awareness of HIV/AIDS. A high level of awareness of HIV/AIDS among men exceeding 80 percent was reported in Ambedaker Nagar, Baghpat, Basti, Chandauli, Deoria, Gautam Buddha Nagar, Ghaziabad, Gorakhpur, Jaunpur, Kanpur Nagar, Mau, Meerut, Muzaffarnagar, Sant Kabir Nagar, Sant Ravidas Nagar and Varanasi.

Table 8.19 AWARENESS OF RTI/STI AND HIV/AIDS BY DISTRICT				
Percentage of currently married women and their husbands aware of RTI/STI and HIV/AIDS by district, Uttar Pradesh, 2002-04				
District	Percentage of women		Percentage of men	
	Aware of RTI/STI	Aware of HIV/AIDS	Aware of RTI/STI	Aware of HIV/AIDS
Agra	4.5	25.3	18.1	67.7
Aligarh	22.6	30.6	37.2	61.7
Allahabad	35.6	39.7	45.6	76.0
Ambedaker Nagar	45.8	42.7	55.3	83.4
Auraiya	30.1	30.5	45.1	67.7
Azamgarh	20.3	29.9	40.3	78.7
Baghpat	38.3	56.9	50.0	82.8
Bahraich	45.3	28.9	44.0	53.8
Ballia	28.3	30.8	36.5	71.9
Balrampur	39.5	32.7	50.6	67.7
Banda	34.4	28.4	39.8	63.2
Barabanki	30.5	29.7	30.5	60.2
Bareilly	17.0	20.9	15.7	37.9
Basti	26.3	45.2	46.3	82.1
Bijnor	11.6	29.7	26.1	65.5
Budaun	44.1	22.9	30.1	43.9
Bulandshahar	22.6	36.3	48.5	73.3
Chandauli	34.7	48.4	47.3	80.9
Chitrakoot	38.6	33.5	32.1	54.9
Deoria	46.0	52.6	44.8	81.6
Etah	30.9	24.8	25.3	53.3
Etawah	41.9	36.7	44.0	70.4
Faizabad	56.1	42.5	54.7	74.5
Farrukhabad	31.5	27.6	36.7	55.2
Fatehpur	14.1	30.7	33.1	55.8
Firozabad	4.7	23.2	8.6	66.6
Gautam Buddha Nagar	27.9	47.5	34.6	83.1
Ghaziabad	34.0	57.8	62.8	83.4
Ghazipur	28.7	27.8	40.5	68.5
Gonda	47.6	32.5	51.1	76.2
Gorakhpur	23.3	33.0	44.4	80.8
Hamirpur	34.4	29.6	52.9	73.5
Hardoi	3.7	11.0	10.8	37.3
Hathras	19.4	28.8	52.4	72.9
Jalaun	43.8	30.0	44.2	61.4
Jaunpur	17.1	41.0	44.2	82.1
Jhansi	15.6	28.7	32.5	64.4
Jyotiba Phule Nagar	27.7	26.4	46.5	62.7
Kannauj	31.3	29.1	31.5	61.3
Kanpur Dehat	54.6	40.2	57.1	66.9

Contd...

Table 8.19 AWARENESS OF RTI/STI AND HIV/AIDS BY DISTRICT (Contd.)				
Percentage of currently married women and their husbands aware of RTI/STI and HIV/AIDS by district, Uttar Pradesh, 2002-04				
District	Percentage of women		Percentage of men	
	Aware of RTI/STI	Aware of HIV/AIDS	Aware of RTI/STI	Aware of HIV/AIDS
Kanpur Nagar	58.3	63.0	57.7	83.0
Kaushambi	21.6	31.2	33.8	64.5
Kheri	26.2	23.0	30.0	44.5
Kushinagar	34.1	36.1	40.2	79.2
Lalitpur	17.4	21.1	27.5	45.0
Lucknow	32.9	57.4	45.4	77.5
Maharajganj	18.5	18.7	36.9	64.6
Mahoba	34.2	24.5	36.4	67.2
Mainpuri	25.1	31.4	45.1	72.5
Mathura	28.2	38.3	50.6	74.2
Mau	39.2	40.5	42.3	84.1
Meerut	40.0	50.6	54.1	85.6
Mirzapur	9.1	28.5	39.7	67.0
Moradabad	27.3	26.4	47.3	61.2
Muzaffarnagar	41.1	47.7	51.3	80.4
Pilibhit	17.2	21.1	23.6	52.4
Pratapgarh	27.8	37.7	41.0	78.7
Rae Bareli	19.4	31.2	21.7	61.9
Rampur	13.2	25.3	17.6	50.0
Saharanpur	11.8	36.4	21.6	70.9
Sant Kabir Nagar	32.5	41.2	49.1	80.5
Sant Ravidas Nagar	70.6	48.7	49.7	84.5
Shahjahanpur	2.8	21.7	8.7	54.4
Shrawasti	45.4	33.0	34.6	53.2
Siddharthnagar	54.0	33.2	54.2	78.9
Sitapur	16.1	19.9	24.2	47.1
Sonbhadra	30.8	26.9	35.6	61.4
Sultanpur	12.8	27.8	28.0	61.9
Unnao	25.8	37.3	49.8	66.5
Varanasi	51.3	54.8	50.8	85.7
Uttar Pradesh	29.1	34.5	38.6	68.0

APPENDIX – A

SAMPLING ERROR ESTIMATION

Sampling Error Estimation

The accuracy of programme indicators such as contraceptive prevalence rate, unmet need and institutional delivery, antenatal coverage etc. estimated from DLHS-RCH can be assessed in terms of stability of the estimated indicators as measured by the standard errors. Standard errors reflect only the appropriateness and suitability of sampling design adopted for RCH survey. However, the accuracy of estimated programme indicator are also affected to a great extent by non-sampling errors arising from lack of proper operationalisation and non-response cases, and is inherent in large scale surveys. The estimation producers of District Level Reproductive & Child Health survey takes into consideration design appropriateness and non-response rates. DLHS-RCH estimator of a programme indicators is design as

$$r = \frac{\sum_h \sum_j \sum_i w_{hji} y_{hji}}{\sum_h \sum_j \sum_i w_{hji} x_{hji}} = \frac{y}{x} \dots\dots\dots (1)$$

where the cell (h, j, i) stands for ith observational unit in jth primary sampling unit (PSU) in hth stratum, basically rural-urban areas of a district are taken as strata. W_{hij} is the sampling weight of (h, j, i)th cell inflated by response rates. The variables y and x denote the main and the auxiliary characteristics required for computation of proportion or ratios.

The equation for estimation of variance of programme indicator (r) is obtained after Taylor series linearisation as

$$\text{var} (r) = \frac{1}{x^2} [\text{var} (y) + r^2 \text{var} (x) - 2 r \text{cov} (y , x)] \dots\dots\dots(2)$$

$$\text{var} (y) = \sum_h \frac{n_h}{n_h - 1} \left[\sum_j \sum_i (w_{hji} y_{hji})^2 - \frac{\left(\sum_j \sum_i w_{hji} y_{hji} \right)^2}{n_h} \right] \dots\dots\dots(3)$$

$$\text{cov} (y , x) = \sum_h \frac{n_h}{n_h - 1} \left[\sum_j \sum_i w_{hji}^2 y_{hji} x_{hji} - \frac{\left(\sum_j \sum_i w_{hji} y_{hji} \right) \left(\sum_j \sum_i w_{hji} x_{hji} \right)}{n_h} \right] \dots\dots\dots(4)$$

and n_h is the number of sampled PSUs representing rural or urban areas of a district/state.

List of Selected Programme Variables for Sampling Errors, RCH 2002-04

Variable	Estimate	Base Population
CPR (Any Method)	Proportion	Currently married women age 15-44 years
Unmet Need	Proportion	Currently married women age 15-44 years
Any ANC	Proportion	Last live/still births in the past three years
ANC3+	Proportion	Last live/still births in the past three years
Institutional Delivery	Proportion	Last live/still births in the past three years
Safe Delivery	Proportion	Last live/still births in the past three years
BCG	Proportion	Children age 12-23 months
Measles	Proportion	Children age 12-23 months
BO3+	Proportion	Currently married women age 15-44 years with births in past three years

Sampling errors, Uttar Pradesh, 2002-04								
Variables	Estimate (R)	Sampling error (SE)	Number of cases		Design Effect	Relative Error (%)	95% Conf. Interval	
			Unweighted	Weighted			R-1.96 SE	R+1.96 SE
Contraceptive Prevalence Rate (Currently Married Women age 15-44)								
Total	0.356	0.002	64,207	64,206	1.700	0.7	0.351	0.361
Rural	0.307	0.003	45,195	45,195	1.460	0.9	0.302	0.312
Urban	0.473	0.005	19,012	19,011	2.119	1.1	0.463	0.483
Unmet Need (Currently Married Women age 15-44)								
Total	0.336	0.002	64,207	64,207	1.646	0.7	0.331	0.340
Rural	0.363	0.003	45,195	45,196	1.484	0.8	0.358	0.369
Urban	0.270	0.005	19,012	19,011	2.084	1.7	0.261	0.279
Received Any Antenatal Check up (last live/still birth of past 3 years)								
Total	0.578	0.004	30,991	31,137	1.624	0.6	0.571	0.585
Rural	0.527	0.004	22,967	23,283	1.499	0.8	0.519	0.535
Urban	0.730	0.007	8,024	7,854	1.993	1.0	0.716	0.744
Received 3+ Antenatal Check up (last live/still birth of past 3 years)								
Total	0.247	0.003	30,991	31,137	1.727	1.3	0.240	0.253
Rural	0.194	0.003	22,967	23,283	1.469	1.6	0.188	0.200
Urban	0.403	0.008	8,024	7,854	2.119	2.0	0.387	0.419
Institutional Delivery (last live/still birth of past 3 years)								
Total	0.224	0.003	30,991	31,138	1.763	1.4	0.218	0.230
Rural	0.160	0.003	22,967	23,283	1.487	1.8	0.154	0.166
Urban	0.415	0.008	8,024	7,855	2.108	1.9	0.400	0.431
Safe Delivery (last live/still birth of past 3 years)								
Total	0.287	0.003	30,991	31,137	1.705	1.2	0.280	0.293
Rural	0.214	0.003	22,967	23,283	1.459	1.5	0.207	0.220
Urban	0.503	0.008	8,024	7,854	2.069	1.6	0.487	0.519
Received BCG Vaccination (last and last but one living children, age 12-23 months)								
Total	0.578	0.006	10,178	10,252	1.636	1.1	0.565	0.590
Rural	0.554	0.007	7,578	7,639	1.487	1.3	0.540	0.568
Urban	0.647	0.013	2,600	2,613	2.041	2.1	0.621	0.673
Received Measles (last and last but one living children, age 12-23 months)								
Total	0.354	0.006	10,178	10,252	1.631	1.7	0.342	0.366
Rural	0.324	0.006	7,578	7,639	1.454	2.0	0.311	0.337
Urban	0.442	0.014	2,600	2,613	2.105	3.2	0.414	0.469
Birth order 3+ (birth in last three years)								
Total	0.569	0.003	35,434	35,538	1.637	0.6	0.563	0.576
Rural	0.588	0.004	26,265	26,561	1.495	0.6	0.581	0.595
Urban	0.513	0.008	9,169	8,977	2.026	1.5	0.498	0.528

Sampling errors, Uttar Pradesh, 2002-04

District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors (%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Contraceptive Prevalence Rate (Currently Married Women age 15-44)							
Agra	0.377	0.019	779	779	5.1	0.339	0.414
Aligarh	0.398	0.017	834	834	4.4	0.364	0.432
Allahabad	0.405	0.017	875	875	4.3	0.371	0.439
Ambedaker Nagar	0.357	0.016	1,037	1,037	4.3	0.326	0.387
Auraiya	0.457	0.018	787	786	4.0	0.422	0.493
Azamgarh	0.228	0.013	1,123	1,123	5.7	0.203	0.254
Baghpat	0.511	0.017	922	922	3.3	0.478	0.545
Bahraich	0.283	0.016	917	917	5.7	0.252	0.315
Ballia	0.315	0.015	1,051	1,051	4.7	0.285	0.344
Balrampur	0.179	0.013	923	923	7.5	0.152	0.205
Banda	0.395	0.018	847	847	4.5	0.360	0.429
Barabanki	0.271	0.015	860	860	5.7	0.241	0.301
Bareilly	0.275	0.023	825	825	8.5	0.230	0.321
Basti	0.355	0.017	956	956	4.7	0.322	0.387
Bijnor	0.435	0.020	786	786	4.5	0.397	0.473
Budaun	0.299	0.022	873	873	7.2	0.257	0.341
Bulandshahar	0.415	0.018	807	807	4.4	0.379	0.450
Chandauli	0.447	0.017	1,130	1,130	3.8	0.414	0.480
Chitrakoot	0.416	0.016	994	1,000	4.0	0.384	0.448
Deoria	0.414	0.016	1,059	1,059	3.9	0.382	0.445
Etah	0.349	0.026	820	820	7.6	0.297	0.400
Etawah	0.516	0.024	805	805	4.7	0.469	0.564
Faizabad	0.367	0.016	898	898	4.5	0.335	0.399
Farrukhabad	0.338	0.018	755	755	5.3	0.302	0.373
Fatehpur	0.309	0.018	895	895	5.8	0.274	0.344
Firozabad	0.346	0.033	842	842	9.5	0.281	0.410
Gautam Buddha Nagar	0.516	0.021	878	878	4.0	0.476	0.557
Ghaziabad	0.445	0.017	877	877	3.9	0.411	0.479
Ghazipur	0.324	0.015	1,089	1,089	4.6	0.295	0.353
Gonda	0.287	0.015	1,014	1,014	5.1	0.259	0.316
Gorakhpur	0.370	0.016	1,061	1,061	4.4	0.338	0.402
Hamirpur	0.510	0.018	847	847	3.5	0.475	0.545
Hardoi	0.213	0.020	749	749	9.6	0.172	0.253
Hathras	0.362	0.017	874	874	4.7	0.329	0.395
Jalaun	0.492	0.017	1,012	1,012	3.4	0.459	0.525
Jaunpur	0.290	0.013	1,197	1,197	4.7	0.264	0.317
Jhansi	0.551	0.018	932	932	3.2	0.517	0.586
Jyotiba Phule Nagar	0.344	0.019	827	827	5.5	0.307	0.381
Kannauj	0.298	0.017	829	829	5.8	0.264	0.331
Kanpur Dehat	0.422	0.018	870	870	4.2	0.387	0.458
Kanpur Nagar	0.478	0.020	780	780	4.3	0.438	0.518

Contd.....

Sampling errors, Uttar Pradesh, 2002-04 (Contd.)

District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors (%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Contraceptive Prevalence Rate (Currently Married Women age 15-44)							
Kaushambi	0.292	0.016	869	869	5.5	0.261	0.323
Kheri	0.217	0.014	946	946	6.4	0.190	0.244
Kushinagar	0.414	0.016	1,045	1,045	3.9	0.383	0.445
Lalitpur	0.399	0.016	1,010	1,010	4.0	0.368	0.430
Lucknow	0.425	0.019	812	812	4.4	0.388	0.461
Maharajganj	0.295	0.015	1,005	1,005	5.1	0.266	0.325
Mahoba	0.548	0.019	753	753	3.5	0.511	0.586
Mainpuri	0.298	0.016	806	806	5.5	0.266	0.330
Mathura	0.366	0.018	928	928	4.8	0.332	0.400
Mau	0.396	0.016	1,050	1,050	4.0	0.365	0.428
Meerut	0.450	0.018	872	872	4.1	0.414	0.485
Mirzapur	0.381	0.016	1,017	1,017	4.2	0.350	0.412
Moradabad	0.346	0.018	803	803	5.1	0.311	0.380
Muzaffarnagar	0.431	0.023	875	873	5.4	0.385	0.477
Pilibhit	0.294	0.025	858	863	8.4	0.245	0.342
Pratapgarh	0.331	0.015	1,056	1,056	4.6	0.301	0.361
Rae Bareli	0.259	0.016	878	878	6.1	0.228	0.290
Rampur	0.342	0.020	844	844	5.7	0.304	0.381
Saharanpur	0.428	0.021	812	812	4.8	0.388	0.469
Sant Kabir Nagar	0.278	0.015	947	947	5.5	0.248	0.308
Sant Ravidas Nagar	0.446	0.015	1,186	1,186	3.4	0.417	0.476
Shahjahanpur	0.230	0.025	816	816	10.7	0.182	0.278
Shrawasti	0.276	0.016	941	941	5.7	0.245	0.307
Siddharthnagar	0.234	0.014	988	988	5.9	0.207	0.261
Sitapur	0.227	0.014	982	982	6.3	0.199	0.255
Sonbhadra	0.350	0.017	916	916	4.8	0.317	0.383
Sultanpur	0.269	0.014	1,007	1,007	5.4	0.241	0.297
Unnao	0.348	0.016	912	912	4.7	0.316	0.380
Varanasi	0.528	0.016	1,037	1,037	3.1	0.495	0.560

Sampling errors, Uttar Pradesh, 2002-04							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Unmet Need (Currently Married Women age 15-44)							
Agra	0.301	0.018	779	779	6.0	0.266	0.337
Aligarh	0.268	0.016	834	834	5.9	0.237	0.298
Allahabad	0.265	0.016	875	875	5.9	0.234	0.295
Ambedaker Nagar	0.356	0.016	1,037	1,037	4.4	0.326	0.387
Auraiya	0.252	0.016	787	785	6.3	0.221	0.283
Azamgarh	0.458	0.016	1,123	1,123	3.4	0.428	0.488
Baghpat	0.224	0.014	922	922	6.4	0.196	0.252
Bahraich	0.364	0.017	917	917	4.6	0.331	0.397
Ballia	0.409	0.016	1,051	1,051	3.8	0.378	0.440
Balrampur	0.401	0.017	923	923	4.3	0.367	0.436
Banda	0.281	0.016	847	847	5.7	0.250	0.313
Barabanki	0.408	0.017	860	860	4.2	0.375	0.441
Bareilly	0.363	0.029	825	824	7.9	0.307	0.419
Basti	0.311	0.016	956	956	5.1	0.280	0.343
Bijnor	0.319	0.019	786	786	5.8	0.283	0.356
Budaun	0.307	0.020	873	873	6.4	0.269	0.345
Bulandshahar	0.318	0.017	807	807	5.4	0.284	0.351
Chandauli	0.245	0.015	1,130	1,130	6.1	0.216	0.274
Chitrakoot	0.263	0.014	994	999	5.5	0.234	0.291
Deoria	0.256	0.014	1,059	1,059	5.5	0.229	0.284
Etah	0.322	0.024	820	820	7.5	0.275	0.369
Etawah	0.232	0.019	805	805	8.2	0.194	0.269
Faizabad	0.353	0.016	898	898	4.6	0.321	0.385
Farrukhabad	0.307	0.018	755	755	5.8	0.272	0.342
Fatehpur	0.365	0.019	895	895	5.1	0.328	0.401
Firozabad	0.389	0.033	842	842	8.4	0.325	0.453
Gautam Buddha Nagar	0.226	0.017	878	878	7.6	0.192	0.259
Ghaziabad	0.322	0.017	877	877	5.2	0.289	0.354
Ghazipur	0.382	0.015	1,089	1,089	4.1	0.352	0.413
Gonda	0.384	0.016	1,014	1,014	4.1	0.353	0.414
Gorakhpur	0.336	0.016	1,061	1,061	4.7	0.304	0.367
Hamirpur	0.240	0.015	847	847	6.3	0.210	0.269
Hardoi	0.423	0.022	749	749	5.1	0.381	0.465
Hathras	0.300	0.016	874	874	5.4	0.268	0.331
Jalaun	0.227	0.014	1,012	1,012	6.0	0.201	0.254
Jaunpur	0.394	0.015	1,197	1,197	3.7	0.366	0.423
Jhansi	0.197	0.014	932	932	7.1	0.170	0.225
Jyotiba Phule Nagar	0.348	0.019	827	827	5.4	0.311	0.385
Kannauj	0.381	0.018	829	829	4.8	0.345	0.416
Kanpur Dehat	0.319	0.017	870	870	5.2	0.287	0.352
Kanpur Nagar	0.270	0.018	780	780	6.6	0.235	0.305

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Sampling errors, Uttar Pradesh, 2002-04 (Contd.)							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Unmet Need (Currently Married Women age 15-44)							
Kaushambi	0.362	0.017	869	869	4.7	0.329	0.395
Kheri	0.422	0.017	946	946	3.9	0.390	0.455
Kushinagar	0.288	0.015	1045	1,045	5.1	0.259	0.318
Lalitpur	0.318	0.015	1010	1,010	4.7	0.288	0.347
Lucknow	0.301	0.017	812	812	5.6	0.268	0.334
Maharajganj	0.369	0.016	1,005	1,005	4.3	0.338	0.400
Mahoba	0.216	0.016	753	753	7.3	0.185	0.247
Mainpuri	0.382	0.017	806	806	4.6	0.348	0.417
Mathura	0.308	0.017	928	928	5.5	0.275	0.341
Mau	0.296	0.015	1,050	1,050	5.0	0.267	0.325
Meerut	0.265	0.016	872	872	6.1	0.233	0.297
Mirzapur	0.291	0.015	1,017	1,017	5.1	0.262	0.320
Moradabad	0.345	0.017	803	803	5.1	0.311	0.379
Muzaffarnagar	0.268	0.022	875	872	8.0	0.226	0.310
Pilibhit	0.395	0.028	858	863	7.1	0.340	0.449
Pratapgarh	0.370	0.016	1,056	1,056	4.2	0.340	0.401
Rae Bareli	0.482	0.018	878	878	3.7	0.447	0.516
Rampur	0.374	0.019	844	844	5.1	0.337	0.412
Saharanpur	0.305	0.018	812	812	6.0	0.269	0.340
Sant Kabir Nagar	0.386	0.017	947	947	4.3	0.353	0.419
Sant Ravidas Nagar	0.275	0.013	1,186	1,186	4.9	0.249	0.301
Shahjahanpur	0.403	0.026	816	816	6.5	0.352	0.454
Shrawasti	0.339	0.017	941	941	4.9	0.306	0.372
Siddharthnagar	0.407	0.016	988	988	4.0	0.374	0.439
Sitapur	0.452	0.017	982	982	3.8	0.419	0.485
Sonbhadra	0.336	0.017	916	916	5.0	0.304	0.369
Sultanpur	0.418	0.016	1,007	1,007	3.9	0.386	0.450
Unnao	0.293	0.016	912	912	5.3	0.263	0.324
Varanasi	0.226	0.014	1,037	1,037	6.2	0.198	0.253

Sampling errors, Uttar Pradesh, 2002-04							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Received Any Antenatal Check up (last live/still birth of past 3 years)							
Agra	0.600	0.026	410	420	4.4	0.549	0.651
Aligarh	0.522	0.025	420	417	4.8	0.473	0.571
Allahabad	0.320	0.025	394	399	7.7	0.272	0.368
Ambedaker Nagar	0.392	0.024	447	436	6.1	0.345	0.439
Auraiya	0.658	0.026	351	348	4.0	0.607	0.709
Azamgarh	0.820	0.017	573	572	2.1	0.787	0.853
Baghpat	0.712	0.025	356	359	3.5	0.663	0.761
Bahraich	0.294	0.023	464	459	7.7	0.250	0.338
Ballia	0.888	0.014	499	503	1.6	0.860	0.916
Balrampur	0.222	0.020	496	509	9.0	0.183	0.260
Banda	0.306	0.023	433	432	7.5	0.261	0.352
Barabanki	0.646	0.023	461	462	3.5	0.601	0.690
Bareilly	0.434	0.040	469	469	9.3	0.355	0.513
Basti	0.541	0.026	436	444	4.7	0.491	0.591
Bijnor	0.600	0.027	407	406	4.5	0.548	0.653
Budaun	0.364	0.029	490	456	7.8	0.308	0.420
Bulandshahar	0.550	0.027	368	368	4.9	0.497	0.603
Chandauli	0.450	0.027	482	492	6.0	0.398	0.503
Chitrakoot	0.228	0.020	487	486	8.8	0.189	0.267
Deoria	0.428	0.024	474	468	5.7	0.380	0.475
Etah	0.403	0.035	437	417	8.8	0.334	0.472
Etawah	0.684	0.034	355	350	4.9	0.618	0.751
Faizabad	0.445	0.024	441	440	5.4	0.398	0.493
Farrukhabad	0.614	0.027	345	351	4.5	0.560	0.668
Fatehpur	0.721	0.024	424	412	3.3	0.674	0.767
Firozabad	0.389	0.040	495	478	10.4	0.310	0.468
Gautam Buddha Nagar	0.688	0.028	373	362	4.1	0.633	0.743
Ghaziabad	0.679	0.025	360	361	3.7	0.630	0.728
Ghazipur	0.873	0.015	511	520	1.7	0.843	0.902
Gonda	0.360	0.022	523	530	6.1	0.318	0.403
Gorakhpur	0.847	0.019	468	467	2.3	0.810	0.885
Hamirpur	0.318	0.025	374	376	7.8	0.269	0.367
Hardoi	0.481	0.029	439	433	6.1	0.424	0.538
Hathras	0.736	0.023	387	392	3.2	0.690	0.782
Jalaun	0.677	0.024	428	420	3.5	0.630	0.724
Jaunpur	0.786	0.018	565	565	2.3	0.750	0.821
Jhansi	0.792	0.023	382	388	2.9	0.747	0.837
Jyotiba Phule Nagar	0.694	0.024	430	428	3.5	0.646	0.741
Kannauj	0.432	0.026	428	424	6.0	0.382	0.483
Kanpur Dehat	0.750	0.024	373	372	3.2	0.704	0.797
Kanpur Nagar	0.873	0.023	314	309	2.7	0.827	0.919

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Sampling errors, Uttar Pradesh, 2002-04 (Contd.)							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Received Any Antenatal Check up (last live/still birth of past 3 years)							
Kaushambi	0.232	0.021	435	439	9.2	0.190	0.274
Kheri	0.592	0.023	506	509	3.8	0.547	0.636
Kushinagar	0.481	0.024	470	475	5.0	0.434	0.529
Lalitpur	0.825	0.017	516	516	2.1	0.791	0.859
Lucknow	0.847	0.019	366	363	2.3	0.810	0.885
Maharajganj	0.828	0.017	536	539	2.0	0.795	0.860
Mahoba	0.344	0.027	364	370	7.9	0.290	0.397
Mainpuri	0.660	0.025	379	376	3.8	0.611	0.709
Mathura	0.584	0.026	452	449	4.5	0.533	0.635
Mau	0.514	0.024	466	473	4.7	0.466	0.561
Meerut	0.779	0.022	413	417	2.9	0.735	0.823
Mirzapur	0.569	0.025	429	420	4.3	0.521	0.618
Moradabad	0.593	0.025	422	418	4.2	0.544	0.641
Muzaffarnagar	0.699	0.035	409	410	5.1	0.629	0.768
Pilibhit	0.380	0.036	423	448	9.5	0.309	0.450
Pratapgarh	0.772	0.019	521	525	2.5	0.734	0.809
Rae Bareli	0.683	0.023	458	457	3.4	0.637	0.728
Rampur	0.440	0.026	509	481	5.9	0.389	0.490
Saharanpur	0.487	0.029	385	365	6.0	0.430	0.544
Sant Kabir Nagar	0.466	0.024	468	470	5.2	0.418	0.514
Sant Ravidas Nagar	0.320	0.021	527	520	6.7	0.278	0.362
Shahjahanpur	0.520	0.034	494	464	6.6	0.453	0.587
Shrawasti	0.257	0.021	461	471	8.2	0.216	0.299
Siddharthnagar	0.402	0.022	545	545	5.5	0.359	0.445
Sitapur	0.567	0.023	550	550	4.0	0.523	0.612
Sonbhadra	0.603	0.025	417	426	4.2	0.553	0.652
Sultanpur	0.781	0.020	502	513	2.5	0.743	0.819
Unnao	0.320	0.024	402	407	7.6	0.272	0.368
Varanasi	0.470	0.027	397	407	5.7	0.418	0.522

Sampling errors, Uttar Pradesh, 2002-04							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Received 3+ Antenatal Check up (last live/still birth of past 3 years)							
Agra	0.267	0.024	410	420	8.9	0.220	0.313
Aligarh	0.263	0.022	420	417	8.3	0.221	0.306
Allahabad	0.142	0.019	394	399	13.3	0.105	0.179
Ambedaker Nagar	0.163	0.018	447	436	10.9	0.129	0.198
Auraiya	0.197	0.022	351	348	11.1	0.154	0.239
Azamgarh	0.374	0.021	573	573	5.6	0.332	0.415
Baghpat	0.257	0.024	356	360	9.2	0.210	0.303
Bahraich	0.112	0.015	464	459	13.3	0.083	0.141
Ballia	0.455	0.023	499	504	5.1	0.409	0.500
Balrampur	0.097	0.014	496	507	14.4	0.070	0.125
Banda	0.124	0.017	433	434	13.6	0.091	0.156
Barabanki	0.229	0.020	461	462	8.6	0.190	0.267
Bareilly	0.164	0.028	469	468	17.1	0.109	0.219
Basti	0.201	0.020	436	444	10.0	0.162	0.241
Bijnor	0.295	0.025	407	406	8.6	0.245	0.345
Budaun	0.116	0.018	490	457	15.6	0.080	0.151
Bulandshahar	0.296	0.026	368	369	8.7	0.245	0.346
Chandauli	0.190	0.021	482	491	11.0	0.149	0.231
Chitrakoot	0.096	0.015	487	486	15.3	0.067	0.125
Deoria	0.177	0.019	474	469	10.6	0.141	0.214
Etah	0.148	0.025	437	418	17.2	0.098	0.198
Etawah	0.271	0.033	355	351	12.1	0.207	0.335
Faizabad	0.179	0.019	441	439	10.4	0.142	0.215
Farrukhabad	0.162	0.020	345	352	12.3	0.123	0.201
Fatehpur	0.285	0.025	424	412	8.7	0.236	0.333
Firozabad	0.120	0.019	495	477	15.6	0.083	0.156
Gautam Buddha Nagar	0.341	0.031	373	362	9.0	0.281	0.401
Ghaziabad	0.393	0.027	360	361	6.9	0.340	0.445
Ghazipur	0.338	0.022	511	521	6.5	0.295	0.381
Gonda	0.152	0.017	523	531	10.8	0.120	0.185
Gorakhpur	0.420	0.025	468	466	5.9	0.371	0.469
Hamirpur	0.095	0.016	374	376	17.0	0.063	0.126
Hardoi	0.167	0.024	439	433	14.4	0.120	0.214
Hathras	0.273	0.023	387	391	8.6	0.227	0.318
Jalaun	0.249	0.022	428	420	8.7	0.206	0.291
Jaunpur	0.311	0.020	565	563	6.5	0.271	0.350
Jhansi	0.339	0.027	382	387	7.9	0.286	0.391
Jyotiba Phule Nagar	0.284	0.026	430	428	9.0	0.234	0.335
Kannauj	0.160	0.019	428	424	11.7	0.123	0.196
Kanpur Dehat	0.238	0.023	373	374	9.7	0.193	0.283
Kanpur Nagar	0.451	0.032	314	309	7.2	0.387	0.514

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Sampling errors, Uttar Pradesh, 2002-04 (Contd.)							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Received 3+ Antenatal Check up (last live/still birth of past 3 years)							
Kaushambi	0.054	0.011	435	439	20.6	0.032	0.076
Kheri	0.231	0.019	506	508	8.3	0.194	0.269
Kushinagar	0.203	0.019	470	475	9.6	0.165	0.242
Lalitpur	0.304	0.021	516	516	6.8	0.263	0.344
Lucknow	0.465	0.027	366	363	5.9	0.412	0.519
Maharajganj	0.348	0.021	536	539	6.1	0.306	0.389
Mahoba	0.121	0.020	364	370	16.3	0.082	0.160
Mainpuri	0.253	0.023	379	375	9.0	0.209	0.298
Mathura	0.237	0.021	452	449	9.0	0.195	0.279
Mau	0.209	0.021	466	473	9.8	0.169	0.250
Meerut	0.301	0.024	413	417	8.1	0.253	0.349
Mirzapur	0.209	0.020	429	420	9.8	0.169	0.249
Moradabad	0.262	0.022	422	418	8.5	0.218	0.306
Muzaffarnagar	0.306	0.031	409	410	10.1	0.246	0.366
Pilibhit	0.191	0.030	423	448	15.5	0.133	0.249
Pratapgarh	0.309	0.022	521	527	7.1	0.266	0.351
Rae Bareli	0.263	0.021	458	457	7.9	0.222	0.304
Rampur	0.181	0.021	509	482	11.5	0.140	0.222
Saharanpur	0.292	0.028	385	364	9.5	0.238	0.347
Sant Kabir Nagar	0.174	0.018	468	470	10.5	0.138	0.209
Sant Ravidas Nagar	0.107	0.015	527	520	13.5	0.079	0.136
Shahjahanpur	0.155	0.024	494	464	15.8	0.107	0.203
Shrawasti	0.090	0.014	461	471	15.0	0.064	0.117
Siddharthnagar	0.142	0.016	545	546	11.1	0.111	0.172
Sitapur	0.232	0.019	550	551	8.3	0.194	0.269
Sonbhadra	0.197	0.021	417	426	10.8	0.155	0.238
Sultanpur	0.348	0.022	502	513	6.4	0.304	0.391
Unnao	0.092	0.015	402	407	15.9	0.063	0.120
Varanasi	0.262	0.024	397	408	9.0	0.216	0.309

Sampling errors, Uttar Pradesh, 2002-04							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Institutional Delivery (last live/still birth of past 3 years)							
Agra	0.329	0.026	410	420	7.8	0.279	0.379
Aligarh	0.257	0.021	420	416	8.4	0.215	0.299
Allahabad	0.200	0.021	394	399	10.6	0.158	0.241
Ambedaker Nagar	0.266	0.021	447	438	8.1	0.224	0.308
Auraiya	0.111	0.017	351	348	15.4	0.077	0.144
Azamgarh	0.326	0.021	573	573	6.3	0.286	0.366
Baghpat	0.260	0.024	356	359	9.3	0.212	0.307
Bahraich	0.100	0.015	464	460	14.5	0.072	0.128
Ballia	0.335	0.022	499	504	6.6	0.292	0.378
Balrampur	0.063	0.011	496	509	17.0	0.042	0.084
Banda	0.087	0.014	433	434	16.2	0.059	0.114
Barabanki	0.241	0.020	461	462	8.4	0.202	0.281
Bareilly	0.096	0.015	469	469	15.8	0.066	0.126
Basti	0.233	0.021	436	446	9.2	0.191	0.275
Bijnor	0.287	0.024	407	407	8.5	0.239	0.335
Budaun	0.132	0.022	490	456	17.0	0.088	0.176
Bulandshahar	0.233	0.023	368	369	9.9	0.188	0.278
Chandauli	0.307	0.025	482	492	8.2	0.257	0.356
Chitrakoot	0.088	0.014	487	487	15.4	0.062	0.115
Deoria	0.288	0.022	474	468	7.8	0.244	0.332
Etah	0.223	0.034	437	417	15.4	0.156	0.290
Etawah	0.168	0.021	355	350	12.6	0.127	0.210
Faizabad	0.305	0.023	441	440	7.4	0.261	0.349
Farrukhabad	0.147	0.020	345	349	13.4	0.108	0.185
Fatehpur	0.213	0.026	424	413	12.0	0.163	0.263
Firozabad	0.228	0.043	495	479	18.8	0.144	0.312
Gautam Buddha Nagar	0.352	0.031	373	361	8.8	0.291	0.413
Ghaziabad	0.366	0.027	360	360	7.3	0.314	0.418
Ghazipur	0.244	0.020	511	519	8.1	0.205	0.283
Gonda	0.169	0.017	523	531	10.0	0.136	0.202
Gorakhpur	0.207	0.021	468	467	10.1	0.166	0.248
Hamirpur	0.193	0.021	374	376	11.1	0.151	0.235
Hardoi	0.076	0.012	439	434	16.2	0.052	0.100
Hathras	0.273	0.024	387	392	8.7	0.227	0.320
Jalaun	0.227	0.022	428	419	9.5	0.185	0.269
Jaunpur	0.249	0.019	565	565	7.5	0.213	0.286
Jhansi	0.318	0.026	382	389	8.2	0.267	0.369
Jyotiba Phule Nagar	0.181	0.022	430	428	12.1	0.138	0.224
Kannauj	0.076	0.013	428	423	17.4	0.050	0.101
Kanpur Dehat	0.195	0.024	373	372	12.1	0.149	0.241
Kanpur Nagar	0.368	0.031	314	309	8.4	0.308	0.428

Contd.....

Sampling errors, Uttar Pradesh, 2002-04 (Contd.)							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Institutional Delivery (last live/still birth of past 3 years)							
Kaushambi	0.135	0.017	435	438	12.9	0.101	0.169
Kheri	0.152	0.016	506	508	10.6	0.120	0.183
Kushinagar	0.265	0.021	470	474	8.0	0.223	0.306
Lalitpur	0.239	0.019	516	517	8.0	0.202	0.277
Lucknow	0.420	0.027	366	363	6.4	0.367	0.473
Maharajganj	0.143	0.016	536	539	11.3	0.112	0.175
Mahoba	0.258	0.025	364	371	9.7	0.209	0.307
Mainpuri	0.215	0.022	379	376	10.1	0.172	0.257
Mathura	0.304	0.024	452	450	7.8	0.258	0.351
Mau	0.275	0.022	466	474	8.0	0.232	0.318
Meerut	0.276	0.024	413	417	8.7	0.229	0.323
Mirzapur	0.209	0.021	429	418	9.8	0.169	0.250
Moradabad	0.185	0.020	422	418	10.8	0.146	0.224
Muzaffarnagar	0.237	0.026	409	410	11.2	0.185	0.289
Pilibhit	0.096	0.022	423	448	22.9	0.053	0.139
Pratapgarh	0.250	0.021	521	525	8.4	0.209	0.291
Rae Bareli	0.194	0.019	458	457	9.9	0.157	0.232
Rampur	0.177	0.022	509	481	12.6	0.134	0.221
Saharanpur	0.242	0.026	385	365	10.9	0.191	0.294
Sant Kabir Nagar	0.189	0.019	468	470	10.1	0.151	0.226
Sant Ravidas Nagar	0.232	0.019	527	520	8.3	0.194	0.269
Shahjahanpur	0.130	0.026	494	464	19.9	0.079	0.180
Shrawasti	0.087	0.015	461	470	17.7	0.057	0.117
Siddharthnagar	0.147	0.016	545	544	11.0	0.115	0.178
Sitapur	0.195	0.018	550	551	9.3	0.160	0.231
Sonbhadra	0.158	0.019	417	425	12.0	0.121	0.195
Sultanpur	0.267	0.021	502	513	7.9	0.226	0.308
Unnao	0.113	0.016	402	407	14.3	0.082	0.145
Varanasi	0.364	0.026	397	406	7.0	0.314	0.414

Sampling errors, Uttar Pradesh, 2002-04							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Safe Delivery (last live/still birth of past 3 years)							
Agra	0.358	0.026	410	420	7.3	0.307	0.409
Aligarh	0.320	0.023	420	416	7.2	0.275	0.365
Allahabad	0.246	0.023	394	399	9.3	0.201	0.291
Ambedaker Nagar	0.343	0.023	447	436	6.7	0.298	0.389
Auraiya	0.161	0.020	351	349	12.4	0.122	0.200
Azamgarh	0.428	0.022	573	573	5.0	0.386	0.470
Baghpat	0.289	0.025	356	359	8.7	0.240	0.339
Bahraich	0.168	0.018	464	459	10.8	0.132	0.203
Ballia	0.481	0.023	499	504	4.8	0.436	0.527
Balrampur	0.108	0.015	496	510	13.4	0.080	0.136
Banda	0.196	0.020	433	433	10.1	0.157	0.235
Barabanki	0.324	0.022	461	461	6.8	0.281	0.367
Bareilly	0.123	0.018	469	469	14.9	0.087	0.159
Basti	0.297	0.023	436	445	7.7	0.252	0.342
Bijnor	0.321	0.025	407	407	7.9	0.271	0.371
Budaun	0.176	0.025	490	457	14.2	0.127	0.224
Bulandshahar	0.256	0.024	368	368	9.3	0.209	0.303
Chandauli	0.377	0.026	482	492	7.0	0.326	0.429
Chitrakoot	0.215	0.020	487	485	9.2	0.177	0.254
Deoria	0.374	0.024	474	468	6.3	0.327	0.420
Etah	0.271	0.035	437	417	12.8	0.203	0.339
Etawah	0.275	0.030	355	351	10.7	0.217	0.333
Faizabad	0.356	0.023	441	439	6.6	0.310	0.401
Farrukhabad	0.236	0.024	345	350	10.1	0.189	0.282
Fatehpur	0.256	0.026	424	412	10.2	0.204	0.307
Firozabad	0.246	0.043	495	479	17.5	0.162	0.330
Gautam Buddha Nagar	0.424	0.032	373	361	7.5	0.362	0.487
Ghaziabad	0.417	0.027	360	360	6.5	0.364	0.470
Ghazipur	0.408	0.023	511	519	5.6	0.363	0.453
Gonda	0.236	0.019	523	529	8.2	0.199	0.274
Gorakhpur	0.253	0.022	468	467	8.8	0.209	0.296
Hamirpur	0.286	0.024	374	377	8.5	0.238	0.334
Hardoi	0.084	0.013	439	434	15.4	0.058	0.109
Hathras	0.381	0.026	387	392	6.7	0.331	0.431
Jalaun	0.320	0.024	428	419	7.5	0.273	0.367
Jaunpur	0.371	0.021	565	564	5.6	0.330	0.412
Jhansi	0.387	0.027	382	389	7.1	0.333	0.440
Jyotiba Phule Nagar	0.230	0.024	430	429	10.3	0.183	0.277
Kannauj	0.108	0.015	428	423	14.3	0.078	0.139
Kanpur Dehat	0.241	0.025	373	372	10.3	0.192	0.289
Kanpur Nagar	0.425	0.032	314	308	7.4	0.363	0.487

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Sampling errors, Uttar Pradesh, 2002-04 (Contd.)							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Safe Delivery (last live/still birth of past 3 years)							
Kaushambi	0.173	0.019	435	438	11.1	0.135	0.211
Kheri	0.200	0.018	506	507	9.1	0.164	0.235
Kushinagar	0.334	0.023	470	474	6.8	0.289	0.378
Lalitpur	0.292	0.021	516	516	7.0	0.252	0.333
Lucknow	0.488	0.027	366	363	5.6	0.435	0.542
Maharajganj	0.213	0.019	536	539	8.8	0.176	0.250
Mahoba	0.318	0.027	364	370	8.4	0.266	0.370
Mainpuri	0.255	0.023	379	376	9.0	0.210	0.300
Mathura	0.371	0.025	452	449	6.7	0.322	0.419
Mau	0.381	0.024	466	474	6.3	0.334	0.428
Meerut	0.345	0.025	413	417	7.4	0.295	0.395
Mirzapur	0.298	0.023	429	419	7.7	0.253	0.343
Moradabad	0.220	0.021	422	418	9.7	0.178	0.261
Muzaffarnagar	0.269	0.028	409	410	10.3	0.215	0.323
Pilibhit	0.117	0.023	423	448	19.6	0.072	0.162
Pratapgarh	0.372	0.023	521	525	6.1	0.328	0.416
Rae Bareli	0.271	0.021	458	456	7.9	0.229	0.314
Rampur	0.212	0.023	509	481	10.9	0.167	0.257
Saharanpur	0.262	0.027	385	363	10.4	0.209	0.316
Sant Kabir Nagar	0.266	0.022	468	471	8.2	0.223	0.308
Sant Ravidas Nagar	0.321	0.021	527	520	6.6	0.279	0.363
Shahjahanpur	0.158	0.029	494	463	18.1	0.102	0.214
Shrawasti	0.176	0.019	461	471	11.0	0.138	0.214
Siddharthnagar	0.195	0.018	545	545	9.3	0.159	0.230
Sitapur	0.234	0.020	550	551	8.4	0.195	0.272
Sonbhadra	0.235	0.022	417	426	9.4	0.191	0.278
Sultanpur	0.358	0.022	502	513	6.3	0.314	0.402
Unnao	0.201	0.021	402	406	10.7	0.159	0.243
Varanasi	0.445	0.027	397	406	6.0	0.393	0.497

Sampling errors, Uttar Pradesh, 2002-04							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Received BCG Vaccination (last and last but one living children, age 12-23 months)							
Agra	0.613	0.044	130	135	7.1	0.528	0.699
Aligarh	0.540	0.044	126	122	8.1	0.454	0.626
Allahabad	0.421	0.044	120	121	10.3	0.336	0.507
Ambedaker Nagar	0.673	0.039	153	149	5.8	0.597	0.749
Auraiya	0.559	0.049	103	102	8.7	0.464	0.655
Azamgarh	0.569	0.040	162	164	7.1	0.490	0.648
Baghpat	0.654	0.044	109	110	6.7	0.568	0.741
Bahraich	0.609	0.040	157	163	6.6	0.529	0.688
Ballia	0.750	0.038	134	134	5.0	0.676	0.824
Balrampur	0.450	0.043	142	141	9.5	0.366	0.534
Banda	0.436	0.044	117	118	10.1	0.350	0.522
Barabanki	0.474	0.042	136	137	8.9	0.391	0.557
Bareilly	0.445	0.066	146	151	14.8	0.316	0.575
Basti	0.745	0.040	126	129	5.4	0.667	0.824
Bijnor	0.663	0.046	123	123	6.9	0.574	0.753
Budaun	0.414	0.055	148	159	13.2	0.307	0.521
Bulandshahar	0.633	0.041	135	134	6.5	0.552	0.714
Chandauli	0.643	0.045	149	153	7.0	0.556	0.731
Chitrakoot	0.536	0.044	127	128	8.2	0.450	0.623
Deoria	0.847	0.028	172	164	3.3	0.792	0.901
Etah	0.405	0.064	146	147	15.7	0.281	0.530
Etawah	0.647	0.070	92	84	10.8	0.510	0.784
Faizabad	0.701	0.039	129	129	5.6	0.624	0.778
Farrukhabad	0.486	0.055	83	84	11.3	0.378	0.594
Fatehpur	0.567	0.048	119	113	8.5	0.473	0.662
Firozabad	0.422	0.065	156	131	15.5	0.294	0.550
Gautam Buddha Nagar	0.706	0.048	108	101	6.8	0.612	0.800
Ghaziabad	0.598	0.045	118	117	7.5	0.510	0.686
Ghazipur	0.648	0.037	185	186	5.6	0.577	0.720
Gonda	0.521	0.041	151	151	7.8	0.442	0.601
Gorakhpur	0.741	0.040	131	133	5.4	0.663	0.820
Hamirpur	0.755	0.040	110	112	5.3	0.677	0.834
Hardoi	0.467	0.048	135	124	10.2	0.373	0.560
Hathras	0.578	0.040	149	155	7.0	0.498	0.657
Jalaun	0.568	0.044	126	126	7.8	0.481	0.655
Jaunpur	0.547	0.038	175	173	6.9	0.473	0.621
Jhansi	0.702	0.044	105	100	6.2	0.616	0.788
Jyotiba Phule Nagar	0.539	0.047	132	134	8.8	0.446	0.632
Kannauj	0.522	0.043	145	140	8.2	0.439	0.605
Kanpur Dehat	0.661	0.044	115	110	6.6	0.575	0.747
Kanpur Nagar	0.791	0.049	89	93	6.3	0.694	0.888

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Sampling errors, Uttar Pradesh, 2002-04 (Contd.)							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Received BCG Vaccination (last and last but one living children, age 12-23 months)							
Kaushambi	0.293	0.044	101	100	15.0	0.207	0.379
Kheri	0.415	0.039	153	149	9.4	0.338	0.492
Kushinagar	0.782	0.034	147	148	4.3	0.716	0.848
Lalitpur	0.584	0.041	132	131	7.0	0.504	0.665
Lucknow	0.691	0.044	108	113	6.4	0.604	0.777
Maharajganj	0.642	0.038	163	169	5.9	0.568	0.716
Mahoba	0.647	0.050	90	94	7.7	0.549	0.744
Mainpuri	0.643	0.043	115	117	6.7	0.558	0.728
Mathura	0.498	0.044	145	145	8.9	0.412	0.585
Mau	0.565	0.040	159	163	7.0	0.487	0.643
Meerut	0.628	0.045	128	125	7.2	0.539	0.717
Mirzapur	0.459	0.041	151	145	8.9	0.379	0.538
Moradabad	0.511	0.043	134	130	8.5	0.426	0.596
Muzaffarnagar	0.648	0.051	117	117	7.9	0.547	0.748
Pilibhit	0.417	0.071	107	115	17.0	0.278	0.555
Pratapgarh	0.654	0.037	158	164	5.7	0.581	0.726
Rae Bareli	0.694	0.040	137	141	5.7	0.616	0.772
Rampur	0.372	0.047	150	151	12.6	0.280	0.464
Saharanpur	0.616	0.042	142	122	6.9	0.533	0.698
Sant Kabir Nagar	0.595	0.042	150	157	7.0	0.514	0.676
Sant Ravidas Nagar	0.528	0.039	154	151	7.3	0.453	0.604
Shahjahanpur	0.478	0.059	151	156	12.4	0.362	0.594
Shrawasti	0.513	0.045	134	132	8.8	0.425	0.601
Siddharthnagar	0.673	0.036	172	168	5.3	0.603	0.743
Sitapur	0.375	0.039	159	168	10.5	0.298	0.453
Sonbhadra	0.549	0.043	139	140	7.8	0.466	0.633
Sultanpur	0.631	0.039	158	164	6.2	0.554	0.708
Unnao	0.547	0.050	96	90	9.1	0.449	0.644
Varanasi	0.643	0.046	117	126	7.1	0.553	0.733

Sampling errors, Uttar Pradesh, 2002-04							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Received Measles (last and last but one living children, age 12-23 months)							
Agra	0.381	0.043	130	135	11.3	0.297	0.465
Aligarh	0.309	0.041	126	122	13.1	0.230	0.389
Allahabad	0.273	0.039	120	121	14.3	0.197	0.350
Ambedaker Nagar	0.431	0.040	153	149	9.3	0.353	0.509
Auraiya	0.417	0.049	103	102	11.7	0.322	0.513
Azamgarh	0.357	0.039	162	164	10.8	0.281	0.433
Baghpat	0.357	0.045	109	110	12.6	0.269	0.445
Bahraich	0.363	0.040	157	163	11.0	0.285	0.441
Ballia	0.585	0.043	134	134	7.4	0.500	0.670
Balrampur	0.289	0.039	142	141	13.3	0.213	0.365
Banda	0.242	0.038	117	118	15.8	0.167	0.317
Barabanki	0.280	0.038	136	137	13.6	0.206	0.355
Bareilly	0.309	0.062	146	151	20.0	0.188	0.430
Basti	0.459	0.044	126	129	9.6	0.372	0.546
Bijnor	0.470	0.047	123	123	10.1	0.377	0.563
Budaun	0.218	0.046	148	159	21.1	0.128	0.308
Bulandshahar	0.398	0.043	135	134	10.9	0.313	0.483
Chandauli	0.406	0.047	149	153	11.5	0.315	0.498
Chitrakoot	0.242	0.038	127	128	15.9	0.166	0.317
Deoria	0.680	0.036	172	164	5.3	0.609	0.751
Etah	0.223	0.055	146	147	24.6	0.115	0.331
Etawah	0.360	0.059	92	84	16.4	0.244	0.476
Faizabad	0.455	0.043	129	129	9.4	0.371	0.539
Farrukhabad	0.241	0.045	83	84	18.8	0.152	0.329
Fatehpur	0.360	0.044	119	113	12.3	0.274	0.447
Firozabad	0.269	0.064	156	131	23.7	0.144	0.394
Gautam Buddha Nagar	0.533	0.051	108	101	9.7	0.432	0.634
Ghaziabad	0.388	0.045	118	117	11.6	0.300	0.475
Ghazipur	0.385	0.037	185	186	9.7	0.312	0.458
Gonda	0.351	0.039	151	151	11.0	0.275	0.427
Gorakhpur	0.529	0.047	131	133	8.9	0.437	0.620
Hamirpur	0.426	0.046	110	112	10.8	0.335	0.516
Hardoi	0.272	0.044	135	124	16.0	0.187	0.358
Hathras	0.381	0.040	149	155	10.4	0.303	0.459
Jalaun	0.220	0.037	126	126	16.6	0.148	0.291
Jaunpur	0.369	0.036	175	173	9.7	0.299	0.439
Jhansi	0.338	0.046	105	100	13.6	0.248	0.428
Jyotiba Phule Nagar	0.276	0.043	132	134	15.5	0.192	0.359
Kannauj	0.327	0.040	145	140	12.3	0.248	0.406
Kanpur Dehat	0.361	0.046	115	110	12.7	0.271	0.451
Kanpur Nagar	0.478	0.060	89	93	12.6	0.360	0.596

Contd.....

Sampling errors, Uttar Pradesh, 2002-04(Contd.)							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Received Measles (last and last but one living children, age 12-23 months)							
Kaushambi	0.147	0.035	101	100	23.6	0.079	0.215
Kheri	0.251	0.035	153	149	13.9	0.183	0.319
Kushinagar	0.440	0.041	147	148	9.3	0.360	0.521
Lalitpur	0.256	0.036	132	131	14.1	0.186	0.327
Lucknow	0.519	0.048	108	113	9.3	0.424	0.613
Maharajganj	0.405	0.039	163	169	9.6	0.329	0.482
Mahoba	0.251	0.044	90	94	17.4	0.165	0.337
Mainpuri	0.285	0.041	115	117	14.4	0.204	0.366
Mathura	0.227	0.037	145	145	16.4	0.154	0.300
Mau	0.380	0.039	159	163	10.4	0.303	0.457
Meerut	0.345	0.043	128	125	12.5	0.261	0.430
Mirzapur	0.286	0.037	151	145	13.0	0.213	0.359
Moradabad	0.182	0.033	134	130	18.2	0.117	0.248
Muzaffarnagar	0.280	0.046	117	117	16.4	0.190	0.369
Pilibhit	0.248	0.055	107	115	22.2	0.140	0.355
Pratapgarh	0.465	0.041	158	164	8.7	0.386	0.545
Rae Bareli	0.425	0.042	137	141	10.0	0.342	0.508
Rampur	0.232	0.045	150	151	19.4	0.144	0.321
Saharanpur	0.420	0.043	142	122	10.3	0.335	0.504
Sant Kabir Nagar	0.363	0.041	150	157	11.3	0.282	0.443
Sant Ravidas Nagar	0.276	0.035	154	151	12.7	0.208	0.345
Shahjahanpur	0.310	0.058	151	156	18.8	0.196	0.424
Shrawasti	0.310	0.042	134	132	13.5	0.228	0.393
Siddharthnagar	0.459	0.038	172	168	8.3	0.385	0.534
Sitapur	0.213	0.034	159	168	15.8	0.147	0.279
Sonbhadra	0.320	0.040	139	140	12.5	0.241	0.399
Sultanpur	0.386	0.039	158	164	10.0	0.310	0.461
Unnao	0.362	0.047	96	90	13.0	0.270	0.454
Varanasi	0.427	0.047	117	126	10.9	0.336	0.518

Sampling errors, Uttar Pradesh, 2002-04							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Birth order 3+ (birth in last three years)							
Agra	0.581	0.024	479	488	4.2	0.533	0.629
Aligarh	0.542	0.023	504	497	4.2	0.498	0.587
Allahabad	0.570	0.024	441	444	4.3	0.522	0.618
Ambedaker Nagar	0.560	0.023	502	492	4.1	0.515	0.605
Auraiya	0.573	0.026	392	388	4.5	0.522	0.623
Azamgarh	0.553	0.020	644	643	3.7	0.513	0.593
Baghpat	0.488	0.025	413	415	5.2	0.438	0.538
Bahraich	0.571	0.023	529	526	4.0	0.526	0.615
Ballia	0.542	0.022	571	574	4.0	0.499	0.584
Balrampur	0.620	0.022	551	564	3.6	0.577	0.663
Banda	0.555	0.024	466	467	4.3	0.508	0.602
Barabanki	0.570	0.022	510	509	3.9	0.527	0.614
Bareilly	0.659	0.034	574	579	5.2	0.592	0.727
Basti	0.579	0.024	465	472	4.2	0.532	0.627
Bijnor	0.601	0.024	498	504	4.1	0.553	0.649
Budaun	0.665	0.025	604	549	3.8	0.616	0.715
Bulandshahar	0.515	0.025	457	460	4.8	0.467	0.563
Chandauli	0.473	0.024	569	585	5.2	0.425	0.521
Chitrakoot	0.615	0.022	557	554	3.5	0.573	0.657
Deoria	0.515	0.023	533	521	4.5	0.470	0.560
Etah	0.626	0.033	567	547	5.3	0.561	0.691
Etawah	0.530	0.034	398	390	6.4	0.464	0.597
Faizabad	0.602	0.023	483	482	3.8	0.558	0.647
Farrukhabad	0.620	0.026	386	389	4.2	0.570	0.671
Fatehpur	0.572	0.026	470	455	4.6	0.521	0.624
Firozabad	0.594	0.038	612	573	6.4	0.519	0.669
Gautam Buddha Nagar	0.485	0.029	437	433	6.0	0.428	0.542
Ghaziabad	0.492	0.024	448	450	5.0	0.444	0.540
Ghazipur	0.519	0.022	586	595	4.2	0.477	0.562
Gonda	0.617	0.020	606	621	3.3	0.577	0.656
Gorakhpur	0.497	0.024	530	528	4.8	0.450	0.544
Hamirpur	0.547	0.025	417	417	4.6	0.498	0.597
Hardoi	0.662	0.026	477	484	3.9	0.611	0.713
Hathras	0.578	0.023	474	481	4.1	0.532	0.624
Jalaun	0.516	0.024	494	475	4.6	0.470	0.563
Jaunpur	0.519	0.020	645	646	3.9	0.479	0.559
Jhansi	0.432	0.026	445	455	5.9	0.381	0.482
Jyotiba Phule Nagar	0.609	0.025	489	491	4.1	0.560	0.658
Kannauj	0.585	0.023	523	514	4.0	0.540	0.631
Kanpur Dehat	0.581	0.026	417	411	4.4	0.531	0.631
Kanpur Nagar	0.484	0.031	346	334	6.3	0.424	0.544

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Sampling errors, Uttar Pradesh, 2002-04 (Contd.)							
District	Estimate (R)	Sampling error (SE)	Number of cases		Relative Errors(%)	95% Conf. Interval	
			Unweighted	Weighted		R-1.96 SE	R+1.96 SE
Birth order 3+ (birth in last three years)							
Kaushambi	0.666	0.022	506	512	3.3	0.623	0.709
Kheri	0.620	0.021	571	574	3.4	0.579	0.662
Kushinagar	0.543	0.023	516	522	4.2	0.498	0.588
Lalitpur	0.551	0.021	580	587	3.9	0.509	0.592
Lucknow	0.497	0.026	394	392	5.3	0.446	0.549
Maharajganj	0.536	0.021	590	602	4.0	0.494	0.578
Mahoba	0.542	0.027	384	386	5.0	0.489	0.595
Mainpuri	0.577	0.024	449	445	4.2	0.530	0.624
Mathura	0.574	0.024	546	549	4.1	0.528	0.620
Mau	0.542	0.023	525	526	4.2	0.497	0.586
Meerut	0.583	0.024	484	495	4.1	0.536	0.630
Mirzapur	0.552	0.023	492	478	4.2	0.506	0.597
Moradabad	0.637	0.023	476	473	3.6	0.592	0.681
Muzaffarnagar	0.588	0.031	468	469	5.3	0.526	0.649
Pilibhit	0.605	0.037	460	479	6.1	0.533	0.677
Pratapgarh	0.557	0.021	609	612	3.8	0.516	0.599
Rae Bareli	0.585	0.023	489	493	4.0	0.539	0.630
Rampur	0.582	0.023	621	597	4.0	0.536	0.628
Saharanpur	0.577	0.025	477	442	4.4	0.527	0.627
Sant Kabir Nagar	0.595	0.023	530	528	3.8	0.550	0.639
Sant Ravidas Nagar	0.575	0.021	597	591	3.7	0.534	0.616
Shahjahanpur	0.680	0.029	552	510	4.3	0.623	0.737
Shrawasti	0.572	0.024	501	516	4.3	0.524	0.620
Siddharthnagar	0.648	0.020	594	587	3.1	0.609	0.688
Sitapur	0.590	0.021	606	601	3.6	0.548	0.632
Sonbhadra	0.577	0.024	484	503	4.1	0.531	0.624
Sultanpur	0.532	0.022	545	554	4.2	0.488	0.576
Unnao	0.564	0.025	429	426	4.4	0.516	0.613
Varanasi	0.528	0.025	450	465	4.7	0.479	0.577

APPENDIX - B

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