



GENERATING EVIDENCE TO DELIVER FOR CHILDREN

A group of diverse children are running joyfully down a dirt path in a village. They are wearing colorful clothing, and the background shows traditional wooden and thatched-roof buildings under a bright sky.

Madagascar

Madagascar Multiple Indicator Cluster Survey, 2018

Executive summary of survey results - August, 2019



Madagascar Multiple Indicator Cluster Survey (MICS) was carried out in 2018 by INSTAT - the National Institute of Statistics - as part of the global MICS programme. Technical support was provided by the United Nations Children's Fund (UNICEF). The latter along with the World Bank, USAID and the Japan Trust Fund for Scaling Up Nutrition (SUN) provided financial support.

This executive summary presents the results of the MICS Madagascar 2018. The full report and survey data are available at this link: <https://mics.unicef.org/surveys>.



Sample coverage and characteristics of respondents

Interview results

Data collection for the Third General Census of Population and Housing (RGPH-III) and the first round of presidential elections took place in 2018 in Madagascar. Despite this difficult context, the 2018 Madagascar MICS survey obtained high response rates (98% at the household level, 91% among women, 85% among men, 96% among children under five and 96% among children aged 5-17) thanks in particular to an sensitization campaign that combined three components: media, visual and community based.

Households and population characteristics

Four out of five households are headed by men. The average household size is 4.5. The Malagasy population is very young: 50% are under 18, 43% under 15 and 15% under 5.

Most interviewed men and women aged 15-49 are either married or in union (63% and 58% respectively); single women and men account for 24% and 38% of the total respectively.

Almost 13% of the children under 18 live with neither of their biological parents, 16% live only with their mothers and 4% with their fathers.

Mass media and Information and Communication Technology (ICT)

The level of exposure to traditional media remains low for both men and women. Radio is the most widely used media type and reaches less than half of them.

Television exposure affects less than a quarter of both men and women. Moreover, barely a tenth of them read newspapers.

More than half of households (52%) have a mobile phone, the most widely used ICT (by slightly more than half of both men and women).

On the other hand, efforts are still needed to raise the level of computer use as well as Internet access, as only 5% of households have a computer; Internet access at home is restricted to one in ten households and levels of use and specific skills are below 8% for both men and women.



Every child survives and thrives: Survive

Child mortality

Over the past 15 years, the under-five mortality rate has steadily declined from 72 deaths per 1,000 live births in 2006 to 59 in 2016.

Despite a decline, the level of infant mortality remains high (40 deaths per 1,000 live births). As regards neonatal mortality, it is stagnating at around 22 deaths per 1,000 live births.



Every child survives and thrives: Maternal and reproductive health

Fertility and family planning

Between 2015 and 2018, a woman of childbearing age has an average of 4.6 children. Female fertility is higher in rural areas (five children per woman) than in urban areas (3.4 children per woman).

Preventing early motherhood would be an important measure to reduce birth before 18, a trend that shows an increase among the younger generations.

Two in five women in union are currently using a modern contraceptive method. Among women aged 15-49 in union, 65% of their demand for contraception is met with a modern method, which inevitably requires additional efforts.

Maternal and new-born health

The antenatal period provides important opportunities for pregnant women to benefit from a number of interventions essential to their health and that of their babies. However, only half of them underwent at least the recommended four prenatal visits. Although it is critically important for these women to begin antenatal care visits as early as possible, only 27% get their first antenatal visit during the first three months of pregnancy. In terms of content, only 22% of women benefited from all three components of a prenatal consultation (blood pressure, urine and blood sampling).

Six out of ten deliveries take place at home. Only one out of two delivery is assisted by skilled personnel and 2% of deliveries carried out by caesarean section.

The vast majority of new-born (78%) and their mothers (72%) receive postnatal care within two days of birth. On the other hand, in terms of content, skin-to-skin care (10%), delayed bathing (34%) and early breastfeeding (45%) are relatively rarely practiced.

Adult mortality

As part of the MICS Madagascar 2018, women aged 15-49 were asked a series of questions designed with the explicit aim of providing all the information needed to make direct estimates of maternal mortality. The latter is estimated using direct sisterhood method,

and requires a very precise declaration of the number of sisters the respondent has ever had, the number of sisters who died, and the number of those who died during pregnancy, childbirth or within two months after the end of pregnancy or childbirth. It shows that the maternal mortality ratio is 426 maternal deaths per 100,000 live births.

HIV and sexual behaviour

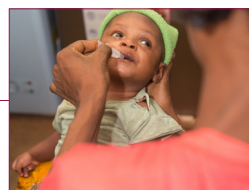
The level of knowledge regarding these two means of preventing any risk of contracting HIV - using condoms and limiting sexual relations to one uninfected faithful partner - remains low among men (27%), women (22%) aged 15-49 and young people aged 15-24 (23%).

Discriminatory attitudes towards people living with HIV are common, with three in four women and seven in ten men having such attitudes.

The rate of HIV testing and HIV status knowledge is low among the survey population (less than 4%) and among pregnant women during prenatal visits.

Risk behaviours for HIV infection are high among men: multiple sexual partners (20%) and low condom use (4%).

Sexual intercourses are practiced at a very young age: one in five girls aged 15-24 and one in ten boys have already had sexual relations before 15.



Every child survives and thrives: child health, nutrition and development

Immunisation

Basic immunisation coverage (BCG, 3 doses of Polio, 3 doses of DPT, measles) is 41% among children aged 12-23 months, and barely 25% of them are fully immunised before their first birthday. On the other hand, 20% did not receive any basic vaccine.

Drop-out is very significant compared to vaccine series, especially between the first and third doses for antigens administered at the same time.

Children's diseases

For 38% of children under five who had diarrhoea, advices or treatments were sought from a health facility or healthcare provider. During the diarrhoea episode, one in five children received low-osmolarity rehydration salts (ORS), one in three children received more drinks and one in two children were fed slightly less than usual.

Although four out of five households own an Insecticide-Treated Mosquito Net (ITN), four in ten children under five do not sleep under it. There was a search for advice or treatment from a health facility or healthcare provider for half of the children under five who had a fever.

For 40% of children under five years old who had symptoms of Acute Respiratory Infection (ARI), advice or treatment was sought from a health facility or healthcare provider.

Breastfeeding and early childhood nutrition

One out of every two new-borns is breastfed within an hour of birth. Half of all children under six months are exclusively breastfed. Three in five children are breastfed until the age of two.

At the national level, among children aged 6-23 months, barely one child in four enjoys a minimum dietary diversity.

Malnutrition

The situation about stunting is critical in Madagascar as it affects 42% of children under five years old.

The prevalence of wasting is precarious with an overall rate of 6%, including 1% of severe cases in the country. Children aged 12-17 months are the most vulnerable with a prevalence of 9 %.

Early Childhood Development

Parental involvement in activities which promote children's learning and school readiness remains limited: the parents or an adult in the household of one in four children aged 2-4 participate in such activities with them. Similarly, barely 15% of children aged 3-4 attend preschool education.

Nearly one in three children under the age of 5 was left alone or in the care of other children under 10 for more than an hour during the week before the survey.

Seven out of ten children are developmentally on track in at least three of these four areas: physical, learning, social-emotional and literacy-numeracy.



Every child learns

The adjusted net attendance ratio in early childhood education programmes remains low (15%). The adjusted net attendance ratio is 76% at primary level, 27% at lower secondary level and 13% at upper secondary level.

In terms of parity between boys and girls, there is a slight imbalance in favour of girls at primary level (1.07) and a greater advantage in their favour at secondary level (1.37).

The school completion remains an issue for the education system, where less than three in five children complete primary level, a quarter complete lower secondary and one in six of them could complete upper secondary.

The non-enrolment of children affects more than a third of lower secondary school-aged children. Boys are generally the most concerned at all education levels.

Less than one in four children aged 7-14 have foundational skills in reading based on Grade 2 of the primary schooling curriculum. Likewise, just 7% of children aged 7-14 have foundational skills in numeracy.



Every child is protected from violence and exploitation

Birth registration

Despite the progress noted since the implementation of a national programme to restore birth registration in 2004, the non-registration of children at birth remains a real problem in Madagascar where one in five children under five is not registered.

The mothers of three of five unregistered children know birth registration process.

Child discipline

Nine out of ten children are subjected to violent discipline in the form of physical punishment or psychological aggression. Nearly six out of ten children aged 1-14 have experienced physical punishment, 10% of them in severe forms.

This practice is generalized in all socio-demographic categories. Indeed, six in ten mothers or caretakers of children think that physical punishment is necessary to raise or educate them properly.

Child labour

Despite the legislation in force as regards the elimination of all forms of child labour, this problem and its harmful effects remain widespread in Madagascar where one out of two children aged between 5 and 17 is involved in child labour.

Children get into the labour market at a very young age: 36% of those between 5 and 11 years old are involved in economic activities.

Nearly one in three children aged between 5 and 17 work in hazardous conditions endangering their health or physical, mental, spiritual and moral development.

Child marriage

Marriage before 18 is a human rights violation but remains a reality for many Malagasy children: two in five girls get married or enter a marital union before 18, making Madagascar one of the countries with the highest child marriage rate in the world. Similarly, marriage before 15 is relatively common, as it affects nearly 13% of women aged between 20 and 24.

Five regions have particularly high child marriage rate: Atsimo Atsinanana (60%), Atsimo Andrefana (66%), Melaky (54%), Betsiboka (51%) and Sofia (54%).

The intergenerational comparison shows a slightly upward trend in child marriage.



Every child lives in a safe and clean environment

Over half of the Malagasy population (57%) does not have access to an improved water source. Four out of five people drink water contaminated with E. Coli, i.e. faecal matter.

Four in five people do not have access to basic sanitation services, especially two practice open defecation.

Only one person in four has a hand washing facility with soap and water.

Nine out of ten women have access to appropriate materials and a private place to wash and change at home during menstruation. In addition, one in ten women reported that they were unable to participate in social, educational or economic activities during their menstruation.



Every child has equitable chance in life

Child functioning

In Madagascar, 13% of children aged 2 to 17 have functional difficulties in at least one domain. For nearly 5% of children aged between 2 and 17 who use hearing aids or walking equipment, hearing or walking difficulties persist.

One in ten children aged 2 to 4 has at least one functional difficulty, the most common of which are those related to learning (4.4%), communication (3.5%) and behavioural control (2.5%).

Among children aged 5 to 17, the percentage of those with functional difficulties in at least one domain is 14%. Anxiety (3.7%), depression (3.1%) and learning (2.9%) were the domains most frequently mentioned.

Social transfers

Barely 4% of men, 3% of women aged between 15 and 49 and 2% of children under 18 have a health insurance coverage.

Nearly 25% of the population has received some form of economic assistance in the past three months. If we limit ourselves to non-contributory social transfers - which do not include support for schooling and retirement pensions - we find a coverage of 5.5% of households and 6.4% of children. Aid coverage is estimated at around 2% of households for cash transfers, high labour-intensive programs (HIMO) and 3% for food distribution. 23% of households in the two poorest quintiles benefited from economic assistance. With regard to geographical distribution, a concentration of aid is noted in the southern regions.



Violence against women and girls

The social justification of violence as a disciplinary action when a woman does not conform to the expected gender role, prevails in Madagascar: women are more accepting of violence against women (41%) than men (29%).

14% of women aged 15-49 have survived to sexual violence during their lifetime, and 32% of them have been enduring physical violence since the age of 15.

Approximately one in four women has experienced physical violence perpetrated by her current or last husband or partner. If we limit ourselves to 12 months preceding the survey, this prevalence is 12%.



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