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## Introduction

### Background of the Survey

The Government of Balochistan, through the Planning and Development Department (P&DD) conducted a household survey from November 2003 to January 2004 to collect and act on information for key social and economic indicators in the province. This was to establish a credible baseline for district support timed with the start of the devolution plan. The key requirements of timeliness and extent, to cover all districts appropriately, demanded a well-tested methodology. The Multiple Indicator Cluster Survey (MICS) was selected as a standardized approach (EDR). This has been used successfully in over 70 countries in preparation for national End Decade Reviews to monitor the pledges made at the World Summit for Children in 1990. This survey had already been conducted successfully in NWFP in late 2001. There was a need for a similar survey in Balochistan, so UNICEF was requested to assist the survey, culminating in a Memorandum of Understanding (MOU) with the Government of Balochistan in May 2003.

The survey was headed by the Additional Chief Secretary (Dev), Planning and Development Department (P&DD), Government of Balochistan, who headed a Steering Committee, having all the provincial line departments' administrative Secretaries as its members. To support the Steering committee technically, a Technical Working Group was established having representatives from P&DD, Federal Bureau of Statistics, Provincial Bureau of Statistics, Line Departments, Academia and UNICEF chaired by The Chief Economist/Survey Director. While the MICS Core Group consisted of MICS Deputy Director, Accounts Officer, Logistics Coordinator/Computer Operator and the MICS Provincial Coordinator. All the Core Group staff was placed at the MICS Secretariat. Government provided staff throughout the survey. MICS Secretariat was initially housed in rented premises and later on moved to P&DD. UNICEF provided equipment, technical support and funds.

### Survey Objectives

Objectives were based on survey results and their application to ensure a continuing process for planning and monitoring at provincial and district levels. These were to:

- 1 Help establish a credible baseline for socio-economic status of the districts at the start of the decade and the devolution process, and to help the government develop plans and monitoring systems for the delivery of social services and indicators of well being,'
- 2 Support the major shift from resources planning and distribution on the sole basis of population size to new impetus on the relative development among the districts,'
- 3 Rectify data gaps in information systems from national surveys and sectoral databases; and address gender disparities and lack of uniformity in the distribution of resources among districts,'
- 4 Prepare district profiles,'
- 5 Build capacity at the provincial Bureau of Statistics, envisaged as the provincial hub for socio-economic data,'

### Indicators

The Government of Balochistan through a consultative process involving all line departments selected a total of 56 Indicators. These covered economic-related (including expenditure and income), infant and under five child mortality, under-nutrition, education, adult literacy, water and sanitation, ante-natal

and birth care, birth registration, feeding patterns, young child recent illness and cost of treatment, contraceptive prevalence and awareness of HIV/AIDS. The list is shown in Annex B, with definitions.

It is re-ordered according to the sequence in this report. This sequence has been maintained throughout all tables to ensure consistency and ease of use. In a few cases, the indicators have been modified, usually to enhance the specificity (e.g. expansion of a household member working outside the household, to include receipt of remittances and zakat/donations; or breakdown assets – house, land and livestock values). An essential indicator for Education (Gross primary school enrolment ratio) was added in line with MDG and PPRSP targets. Other added items included women's health: knows how to prevent HIV/AIDS (of those aware), child health and nutrition: bottle fed during infancy (0-11 months), health practitioner consulted for recent illness and BCG scar (under 5 year olds), economic situation of households: percent of households (HH) with no possessions/no utilities, Mean number of persons per room.

## Questionnaire

The questionnaire for the Balochistan MICS 2004 was based on the MICS Model Questionnaire with some modifications and additions, according to the indicators selected by the Government of Balochistan. The components were as follows:

1. HOUSEHOLD MODULE - type of house, ownership, number of rooms, house value, utilities and possessions, household size, access to local school, runaway children
2. HOUSEHOLD MEMBERS - Age, Sex, National Identity Card, Marital Status (15 yr+); Eligibility (Ever-married women aged 15-49 yrs) and Children (0-5 years); cough for at least the last three weeks, diagnosed as tuberculosis in the past year, ever enrolled at school and highest class completed (5 years and over), ability to read and write in any language (10 years and over)
3. EDUCATION (5-17 year olds) - school enrolment and class, attendance and frequency/duration, enrolled in previous year and whether passed, any change of school in the past year.
4. INCOME AND EMPLOYMENT – Sources and amounts of Income, Unemployment (5 years and over); Child work (5-14 years)
5. AGRICULTURAL INCOME - Remittances and Zakat/donations with amounts, land owned (irrigated, non-irrigated, uncultivated with values), net agricultural income (Crops, Livestock, By-products and Expenses)
6. HOUSEHOLD EXPENDITURE – Foods (20 items), Health, Education, Household Non-food items
7. WATER AND SANITATION - Sources of drinking water and distance away, type of toilet facility, disposal of waste water and solid waste, members washing hands before meal and after using latrine
8. SALT IODIZATION – Awareness of need, test for iodine presence in household salt
9. ADULT MORTALITY MODULE - adult deaths in the past five years including those related to pregnancy, childbirth or within 6 weeks after birth
10. WOMEN'S INFORMATION (All ever-married women, 15-49 with age corrections) - Age, year and month of birth, age at marriage and years since marriage (if birth date not known)
11. CHILD MORTALITY - indirect method (All ever-married women 15-49 years with at least one birth) -total number of sons and daughters born and died, age of oldest and youngest child
12. YOUNG CHILD DEATHS IN PAST 3 YEARS - Direct method - young child deaths in the past five years, with age when died

13. MATERNAL CARE AND BIRTH WEIGHT: (All mothers with last birth within last 3 years) maternal care - antenatal, birth and postnatal care, birth weight of last birth, visit by a lady health worker (LHW) in the past month and what service was provided
14. CONTRACEPTIVE USE (Married non-pregnant women, 15-49 years) - ever used and current use with methods
15. HIV/AIDS (All ever-married women, 15-49 years) awareness, knowledge of prevention and attitudes to people with HIV/AIDS
16. CHILD INFORMATION - Age, date of birth, birth certificate, birth registration
17. BREAST, BOTTLE AND COMPLEMENTARY FEEDING; breastfeeding (up to two years of age) - ever and still breastfed, exclusively breastfed up to 6 months of age, and for children up to one year of age - types of liquids, milk and any solid or semi-solid food received in the past 24 hours, bottle use in the past 24 hours
18. RECENT CHILD ILLNESS - Recent illness (Diarrhea, cough with difficult breathing, high fever), who consulted and whether admitted to hospital; care seeking knowledge of mother or caretaker
19. ANTHROPOMETRY - Weighing for nutritional status and immunization (BCG scar seen).
20. INTERVIEWER CLUSTER CONTROL SHEET

From the revised MICS model English version, the questionnaires were translated into Urdu. These questionnaires were pre-tested several times during July and August 2003. Based on the results of the pretests, modifications were made to the wording and translation of the questionnaires. For the full questionnaires, see Technical Report.