Snapshots of Key Findings Report

Multiple Indicator Cluster Survey 2022

Thailand

MICS

GENERATING EVIDENCE TO DELIVER FOR CHILDREN

NSO
National Statistical Office

unicef for every child

UNICEF
United Nations Children's Fund

Thailand

Multiple Indicator Cluster Survey 2022

Snapshots of Key Findings Report

August 2023

National Statistical Office
Thailand

unicef
for every child

The Thailand Multiple Indicator Cluster Survey (MICS) was carried out in 2022 by the National Statistical Office of Thailand (NSO) in collaboration with UNICEF, as part of the Global MICS Programme. Technical support was provided by the United Nations Children's Fund (UNICEF), with government funding and financial support of UNICEF.

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

The objective of these snapshots is to highlight selected key findings from the Thailand MICS 2022. The complete Survey Findings Report 2022 and the micro data are also available.

For more information on the Global MICS Programme, please go to mics.unicef.org.

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SUMMARY OF SURVEY IMPLEMENTATION AND THE SURVEY POPULATION

THAILAND MICS 2022			
Survey sample and implementation			
Sample frame o Updated	2022 Household Basic Information Survey (HBIS) October-December 2021	**Questionnaires**	Household Women (age 15-49) Men (age 15-49) Children under five Children age 5-14
Interviewer training	1st batch: 9-17 June 2022 2nd batch: 30 June-8 July 2022	**Fieldwork**	June-October 2022
Survey sample			
Households o Sampled o Occupied o Interviewed o Response rate (Per cent)	34,540 31,685 30,008 94.7	Children under five o Eligible o Mothers/caretakers interviewed o Response rate (Per cent)	10,638 10,502 98.7
Women (age 15-49) o Eligible for interviews o Interviewed o Response rate (Per cent)	21,663 21,089 97.4	Children age 5-14[1] o Number in interviewed households o Eligible o Mothers/caretakers interviewed o Response rate (Per cent)	14,588 10,615 10,450 98.4
Men (age 15-49)[2] o Number in interviewed households o Eligible for interviews o Interviewed o Response rate (Per cent)	20,069 9,844 9,452 96.0		

Survey population			
Average household size	2.6	**Percentage of population living in** o Urban areas o Rural areas	 54.8 45.2
Percentage of population under: o Age 5 o Age 18	 4.0 18.5		
Percentage of women age 15-49 years with at least one live birth in the last 2 years	5.7	o Bangkok o Central o North o Northeast o South	16.0 31.4 15.6 24.2 12.8

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[1] The Questionnaire for Children Age 5-14 was administered to one randomly selected child in each interviewed household.

[2] The Individual Questionnaire for Men was administered to all men age 15-49 years in every second sampled household.
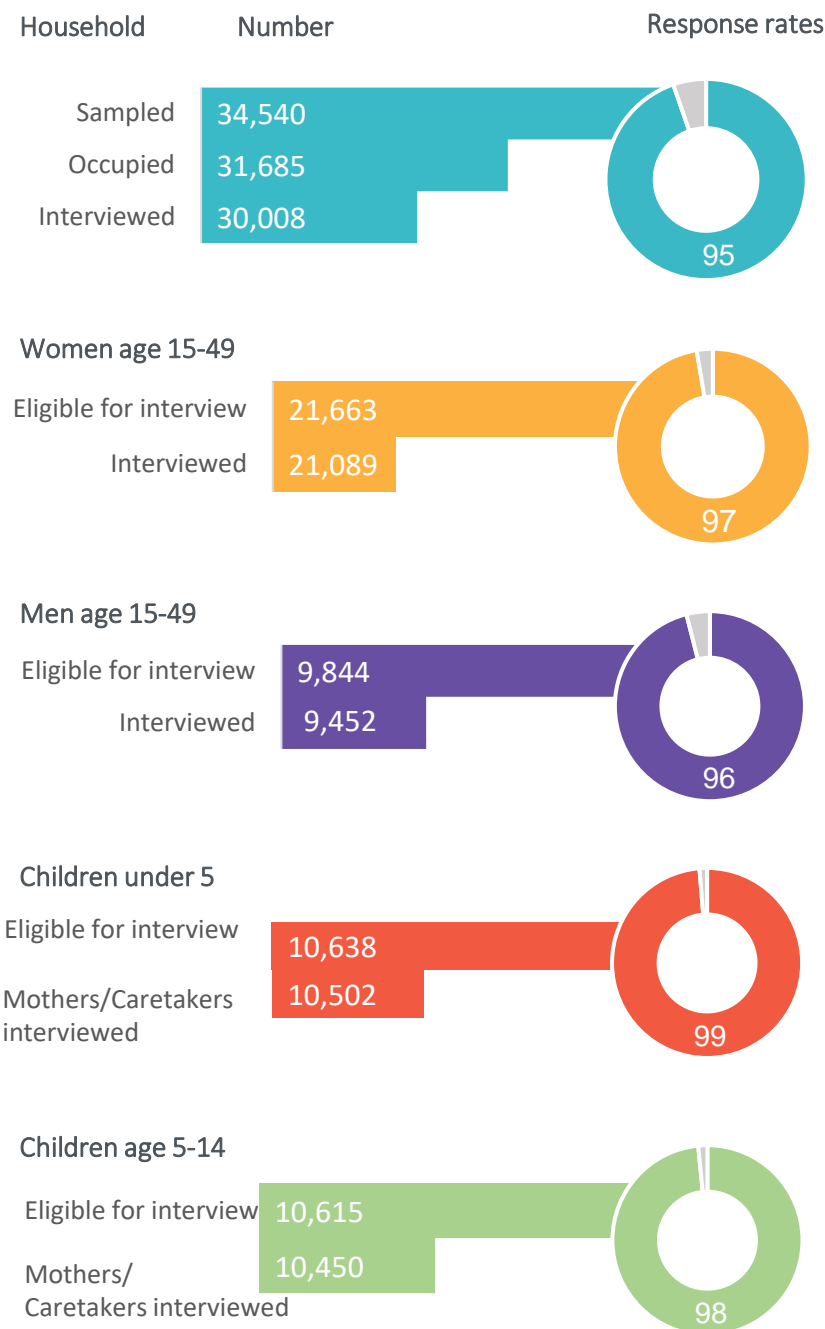
© UNICEF Thailand/2022/Preechapanich

MICS

Sample and Survey Characteristics

Response Rates

Household	Number	Response rates
Sampled	34,540	
Occupied	31,685	
Interviewed	30,008	95

Women age 15-49		
Eligible for interview	21,663	
Interviewed	21,089	97

Men age 15-49		
Eligible for interview	9,844	
Interviewed	9,452	96

Children under 5		
Eligible for interview	10,638	
Mothers/Caretakers interviewed	10,502	99

Children age 5-14		
Eligible for interview	10,615	
Mothers/Caretakers interviewed	10,450	98

Survey Implementation

Implementing agency:
National Statistical Office

Sampling frame:
Household Basic
Information Survey, 2022

Listing:
October-December 2021

Interviewer training:
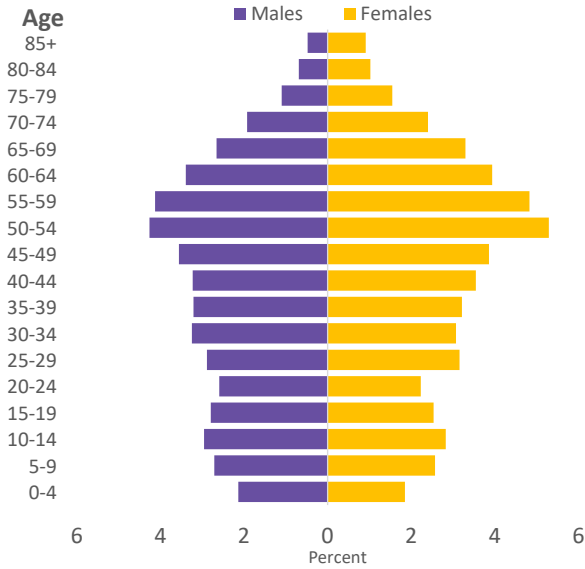June-July, 2022

Fieldwork:
June-October, 2022

Questionnaires:
Household
Women age 15-49
Men age 15-49
Children under 5
Children age 5-14
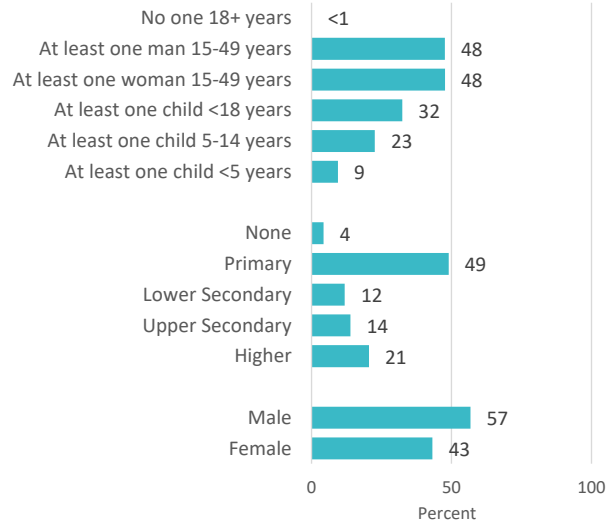
Population Characteristics

Household Population Age & Sex Distribution

■ Males ■ Females

Age	
85+	
80-84	
75-79	
70-74	
65-69	
60-64	
55-59	
50-54	
45-49	
40-44	
35-39	
30-34	
25-29	
20-24	
15-19	
10-14	
5-9	
0-4	

6 4 2 0 2 4 6
Percent

Percent distribution of household population by age group and sex

Household Composition & Characteristics of Head of household

No one 18+ years	<1
At least one man 15-49 years	48
At least one woman 15-49 years	48
At least one child <18 years	32
At least one child 5-14 years	23
At least one child <5 years	9
None	4
Primary	49
Lower Secondary	12
Upper Secondary	14
Higher	21
Male	57
Female	43

0 50 100
Percent

Percent of households by selected characteristics

Women & Men's Profile

	Women	Men
None	2	2
Primary	15	19
Lower Secondary	18	23
Upper Secondary	26	28
Higher	38	28
Currently married/in-union	56	47
Widowed	1	<1
Divorced	3	2
Separated	5	5
Never married/not in union	35	46
Has health insurance	98	98

100 50 0 50 100
Percent

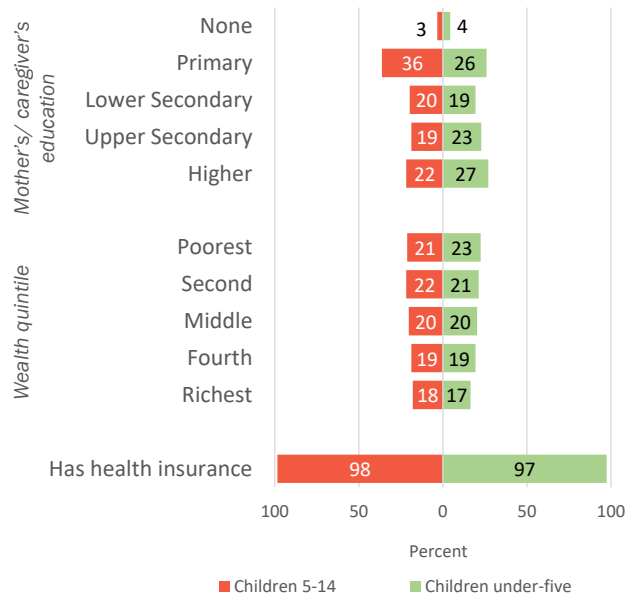■ Women ■ Men
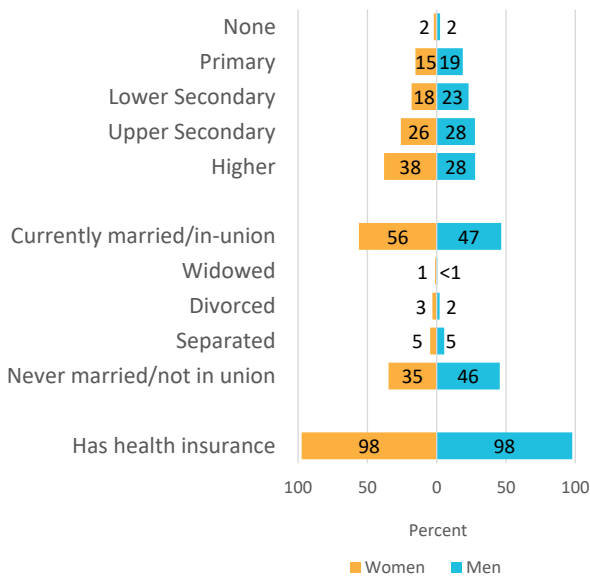
Percent distribution of women and men age 15-49 by background characteristics

Children's Profile

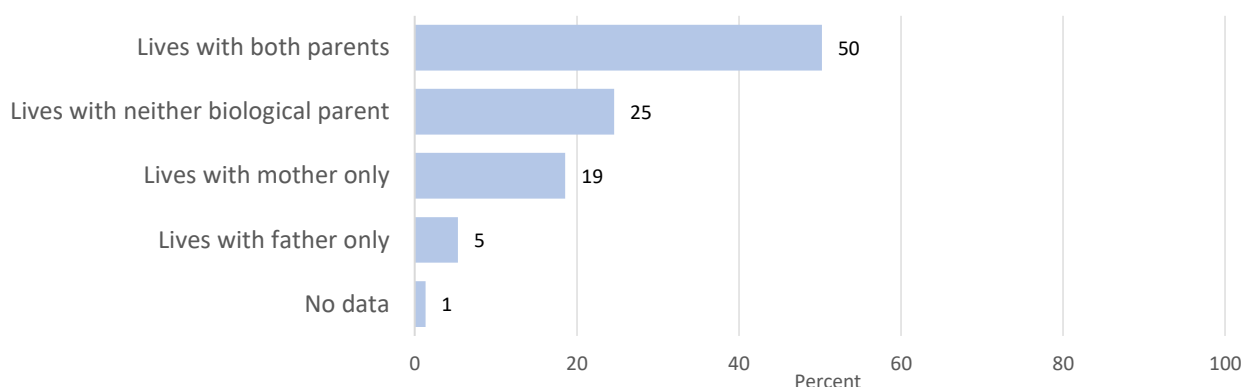|	Children 5-14	Children under-five
Mother's/ caregiver's education		
None	3	4
Primary	36	26
Lower Secondary	20	19
Upper Secondary	19	23
Higher	22	27
Wealth quintile		
Poorest	21	23
Second	22	21
Middle	20	20
Fourth	19	19
Richest	18	17
Has health insurance	98	97

100 50 0 50 100
Percent

■ Children 5-14 ■ Children under-five

Percent distribution of children age 5-14 and under-five by background characteristics

Children's Living Arrangements*

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

Regional Distribution of Population (percent)

Region	Households	Women	Men	Children under 5	Children 5-14
National	100	100	100	100	100
Bangkok	16	16	16	8	9
Central	31	34	34	27	27
North	16	14	14	17	16
Northeast	24	23	22	31	32
South	13	14	14	17	17

Key Messages

- Thailand MICS 2022 had a sample size of 34,540 households with a 95% response rate.

- The sample size for women 15-49 years was 21,663 with a 97% response rate.

- The sample size for men 15-49 years was 9,844 with a 96% response rate.

- The sample size for children under 5 years was 10,638 with a 99% response rate.

- The sample size for children 5-14 years was 10,615 with a 98% response rate.

- The age structure shows that the largest proportion of the population falls within the 50-54 age group for both men and women.

- Nearly half of the heads of households have only ever attended the primary education level as their highest level of education.

- Above 40% of households is headed by a female.

- Two to three percent of women, men and children did not have health insurance.

- One-fourth of children age 0-17 years were living with neither of their biological parents.
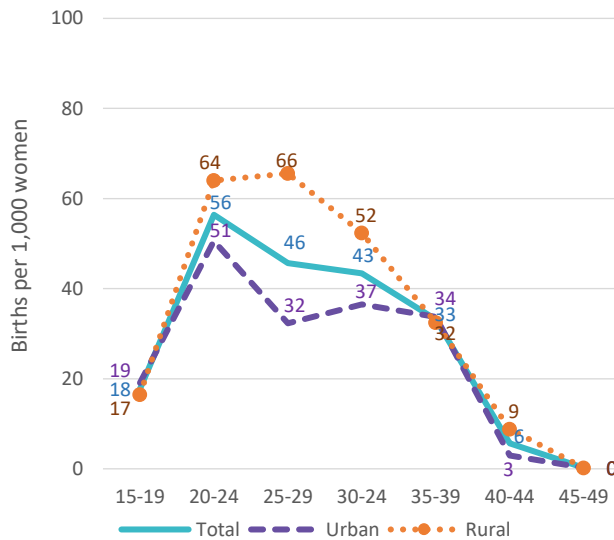
3

© UNICEF Thailand/2022/Roisri

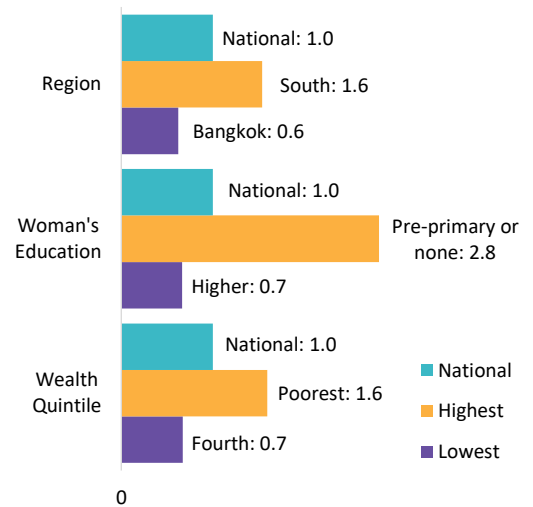# Fertility and Family Planning

Fertility
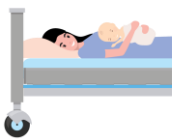
Age Specific Fertility Rates

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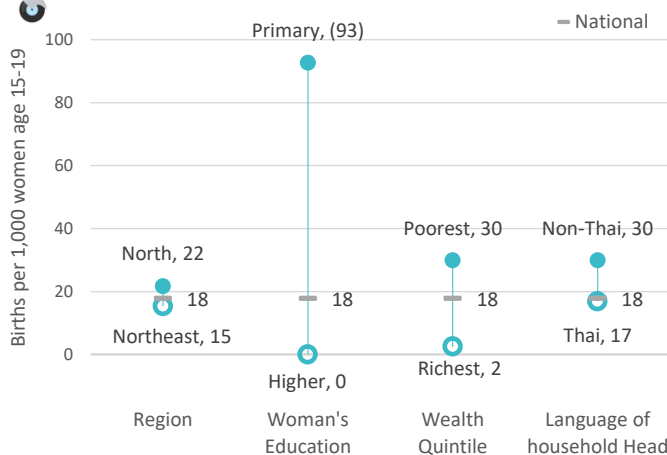
Total Fertility Rate

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

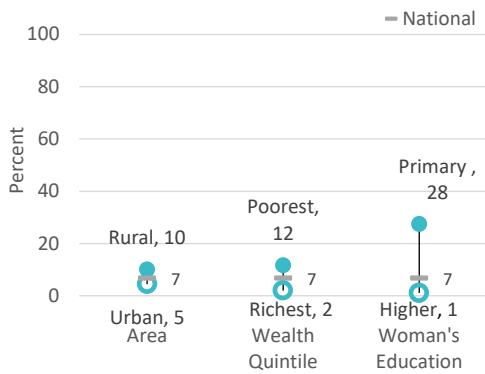## Adolescent Birth Rate: SDG indicator 3.7.2

Age-specific fertility rate for girls age 15-19 years for the one-year period preceding the survey

( ) Based on 125-249 unweighted women years of exposure

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

Reducing adolescent fertility and addressing the multiple factors underlying it are essential for improving sexual and reproductive health and the social and economic well-being of adolescents. Preventing births very early in a woman's life is an important measure to improve maternal health and reduce infant mortality.
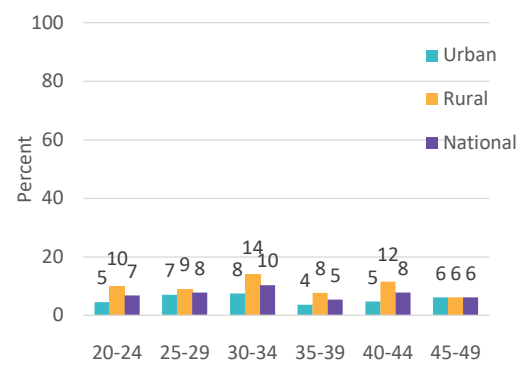
Early Child Bearing - by Age 18

— National

Rural, 10
Urban, 5
Area

Poorest, 12
Richest, 2
Wealth Quintile

Primary, 28
Higher, 1
Woman's Education

7   7   7

Percentage of women age 20-24 years who have had a live birth before age 18, by background characteristics
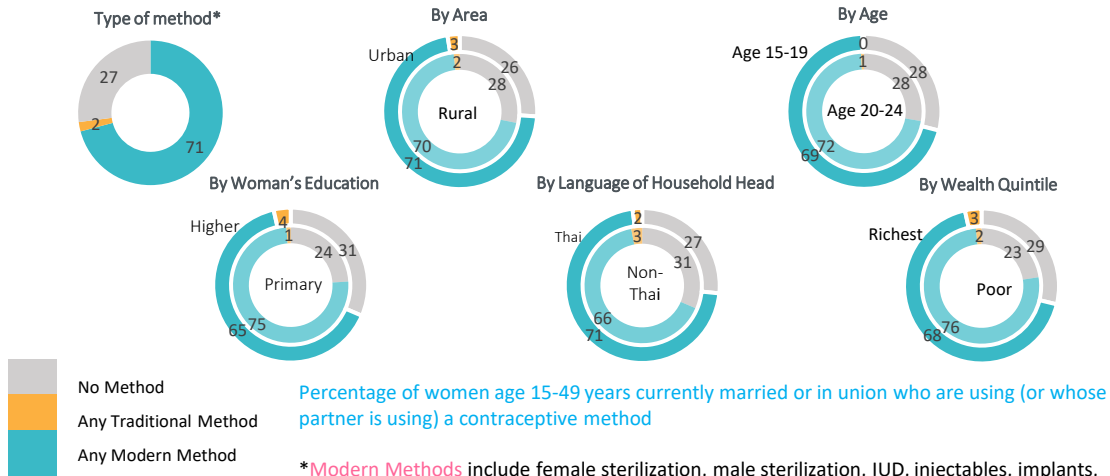
Trends in Early Child Bearing - by Age 18

■ Urban
■ Rural
■ National

	20-24	25-29	30-34	35-39	40-44	45-49
Urban	5	7	8	4	5	6
Rural	10	9	14	8	12	6
National	7	8	10	5	8	6

Percentage of women age 20-49 years who have had a live birth before age 18, by area

Family Planning

Method of Family Planning by Various Characteristics

Type of method*
27   2   71

By Area
Urban   3 2 26 28
Rural   70 71

By Age
Age 15-19   0 1 28 28
Age 20-24   69 72

By Woman's Education
Higher   4 1 24 31
Primary   65 75

By Language of Household Head
Thai   2 3 27 31
Non-Thai   66 71

By Wealth Quintile
Richest   3 2 23 29
Poor   68 76

No Method
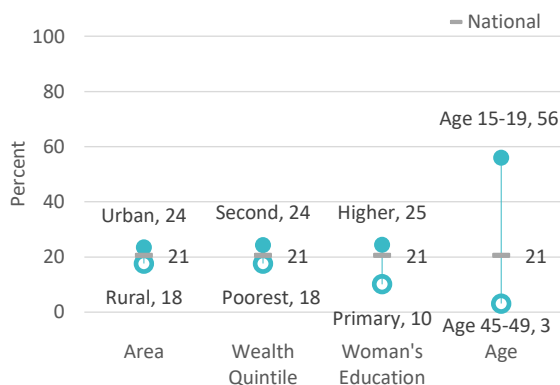Any Traditional Method
Any Modern Method

Percentage of women age 15-49 years currently married or in union who are using (or whose partner is using) a contraceptive method

*Modern Methods include female sterilization, male sterilization, IUD, injectables, implants, pills, male condom, female condom, diaphragm, foam, jelly and contraceptive patch.
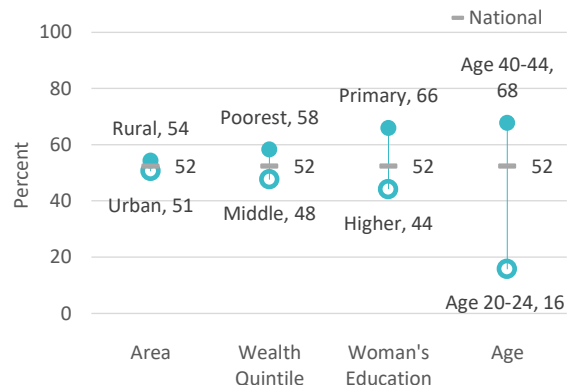Traditional methods refer to periodic abstinence and withdrawal

Met Need for Family Planning

Met Need for Family Planning - Spacing

— National

Urban, 24
Rural, 18
Area

Second, 24
Poorest, 18
Wealth Quintile

Higher, 25
Primary, 10
Woman's Education

Age 15-19, 56
Age 45-49, 3
Age

21   21   21   21

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

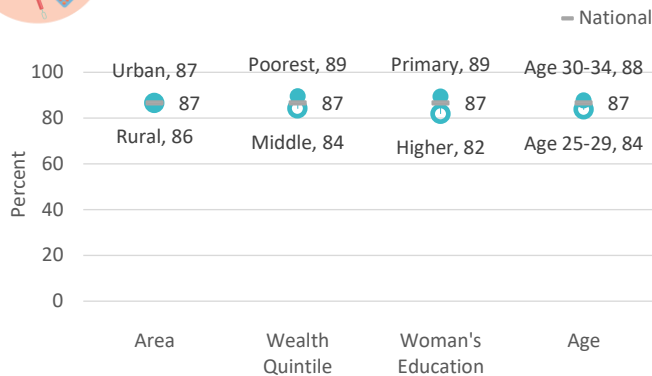### Met Need for Family Planning — Limiting

— National

Rural, 54
Urban, 51
Area

Poorest, 58
Middle, 48
Wealth Quintile

Primary, 66
Higher, 44
Woman's Education

Age 40-44, 68
Age 20-24, 16
Age

52   52   52   52

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

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

Urban, 87	● 87
Rural, 86	
Poorest, 89	● 87
Middle, 84	
Primary, 89	● 87
Higher, 82	
Age 30-34, 88	● 87
Age 25-29, 84	

━ National

Area — Wealth Quintile — Woman's Education — Age

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

Regional Data on Fertility & Family Planning

Region	Adolescent Birth Rate (per 1,000 women age 15-19)	Total Fertility Rate (per woman age 15-49 years)	Child bearing before 15 (%)	Child bearing before 18 (%)	Contraception use of modern method among married / in-union women (%)	Contraception use of any method among married / in-union women (%)	Demand for family planning satisfied with modern methods among married / in-union women (%)
National	**18**	**1.0**	**0.4**	**7**	**71**	**73**	**86**
Bangkok	(22)	0.6	0.0	4	70	73	87
Central	17	1.0	0.2	6	72	74	87
North	22	0.8	0.5	9	77	79	90
Northeast	15	1.2	1.0	9	73	74	87
South	17	1.6	0.1	8	59	63	80

( ) Based on 125-249 unweighted women years of exposure

Key Messages

• The total fertility rate (TFR) in Thailand is 1 birth per woman. South had the highest TFR with 1.6 and lowest in Bangkok with 0.6. TFR is high among women with pre-primary or none level of education and women from the poorest wealth quintile.

• The adolescent birth rate in the poorest wealth quintile is higher than in the richest wealth quintile (30 babies versus 2 children per 1,000 women).

• Approximately three in four married women (73%) use one or more methods of contraception, including modern and traditional methods of contraception.

• The proportion of women using contraceptives is higher among women with primary level of education, in households where the language of the head of the household is Thai and in the second wealth quintile.

• Almost nine in ten married women (86%) are satisfied with modern methods of contraception for family planning.

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Adolescents

The Adolescent Population: Age 10-19

Age & Sex Distribution of Household Population

This snapshot of adolescent well-being is organized around key priority areas for adolescents:
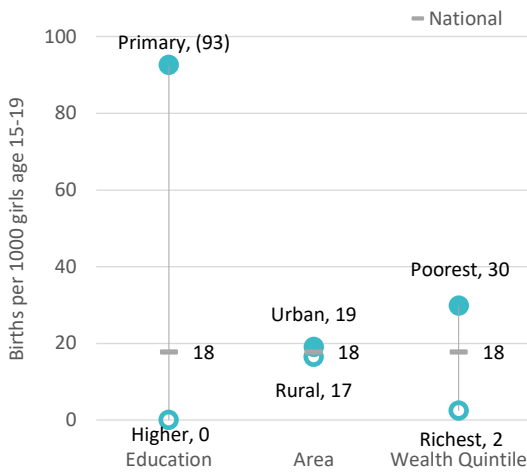
- Every adolescent survives and thrives
- Every adolescent learns
- Every adolescent is protected from violence and exploitation
- Every adolescent lives in a safe and clean environment
- Every adolescent has an equitable chance in life

Every Adolescent Survives & Thrives

Adolescence is by some measures the healthiest period in the life-course, yet it can also mark the first manifestations of issues which can have lifelong effects on health and wellbeing, such as unsafe sexual behavior, early childbearing and substance misuse. Nevertheless, health interventions during this period are shown to have long-lasting effects. Access to appropriate contraceptive methods is critical to prevent adolescent pregnancy and its related consequences, allowing adolescents to transition into adulthood with the ability to plan their pregnancies and live healthy and productive lives.

Adolescent Birth Rate: SDG 3.7.2

— National

Births per 1000 girls age 15-19

Primary, (93)

Poorest, 30

Urban, 19

18   18   18

Rural, 17

Higher, 0   Richest, 2

Education   Area   Wealth Quintile

100

80

60

40

20

0

Age-specific fertility rate for girls age 15-19 years: the number of live births in the last 1 year, divided by the average number of women in that age group during the same period, expressed per 1,000 women

( ) Based on 125-249 unweighted women years of exposure

Modern Contraceptive Use, Unmet Need & Demand Satisfied for Modern Methods: SDG 3.7.1

71

Married   9

87

0   20   40   60   80   100

Percent

■ Modern Use
■ Unmet Need
■ Demand Satisfied (Modern Methods) SDG 3.7.1
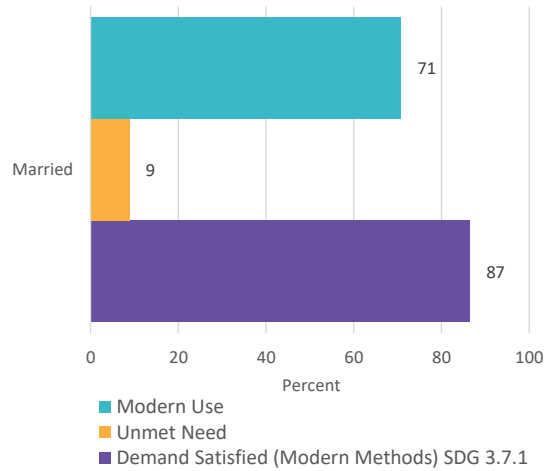
Percentage of girls age 15-19 years who are using (or whose partner is using) a contraceptive method, percentage with an unmet need for contraception and percent of demand for modern methods of family planning satisfied, among married women
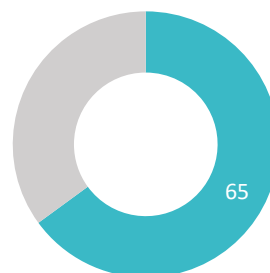
Every Adolescent Learns

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

71
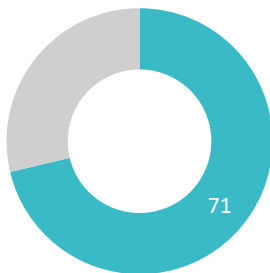
Percentage of children age 7-14 who can 1) read 90% of words in a story correctly, 2) Answer three literal comprehension questions, 3) Answer two inferential comprehension questions

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

65

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

Quality education and experiences at school positively affect physical and mental health, safety, civic engagement and social development. Adolescents, however, can also face the risk of school drop-out, early marriage or pregnancy, or being pulled into the workforce prematurely.

Data on reading and numeracy skills are collected in MICS through a direct assessment method. The Foundational Learning module captures information on children's early learning in reading and mathematics at the level of Grade 2 in primary education.
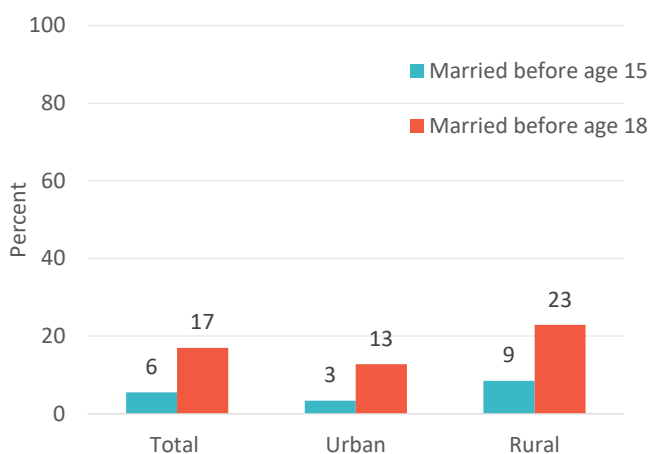
School Attendance Ratios

Legend: Girls, Boys

	Girls	Boys
Primary	93	94
Lower Secondary	86	84
Upper Secondary	81	67
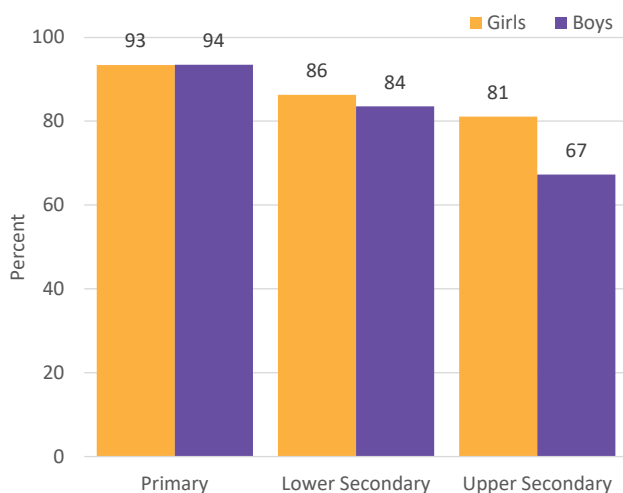
Adjusted net attendance ratio, by level of education and by gender

Every Adolescent is Protected from Violence & Exploitation

Child Marriage: SDG 5.3.1

Legend: Married before age 15, Married before age 18

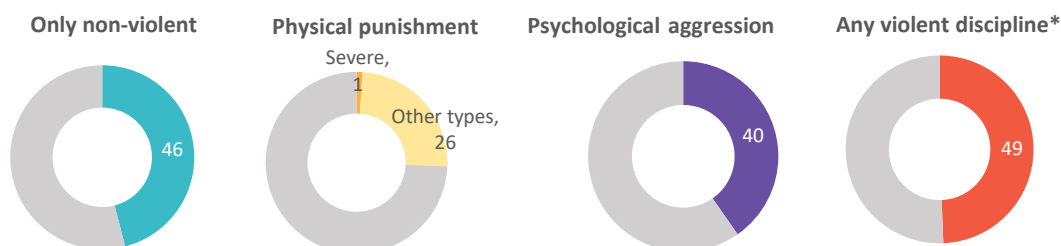|	Married before age 15	Married before age 18
Total	6	17
Urban	3	13
Rural	9	23

Percentage of women age 20 to 24 years who were first married or in union before age 15 and before age 18, by area

Adolescence is a period of heightened risk to certain forms of violence and exploitation. The onset of puberty marks an important transition in girls' and boys' lives whereby gender, sexuality and sexual identity begin to assume greater importance, increasing vulnerability to particular forms of violence, particularly for adolescent girls. Certain harmful traditional practices, such as female genital mutilation/cutting and child marriage, often take place at the onset of puberty. At the same time, as children enter adolescence, they begin to spend more time outside their homes and interact more intimately with a wider range of people, including peers and romantic partners. This change in social worlds is beneficial in many respects, but also exposes adolescents to new forms of violence.

Child Discipline

Only non-violent — 46

Physical punishment — Severe, 1; Other types, 26

Psychological aggression — 40
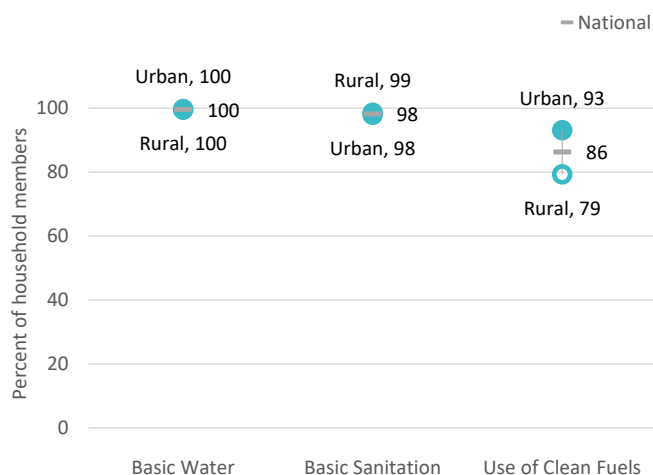
Any violent discipline* — 49

Percentage of children age 10 to 14 years who experienced any discipline in the past month, by type
*Age disaggregate of SDG 16.2.1

Every Adolescent Lives in a Safe & Clean Environment

Water, Sanitation & Clean Fuel Use

— National

Urban, 100
100
Rural, 100

Rural, 99
98
Urban, 98

Urban, 93
86
Rural, 79

Percent of household members: 100, 80, 60, 40, 20, 0

Basic Water | Basic Sanitation | Use of Clean Fuels

The data presented here are at the household level. Evidence suggests that adolescent access to these services are comparable to household-level data.
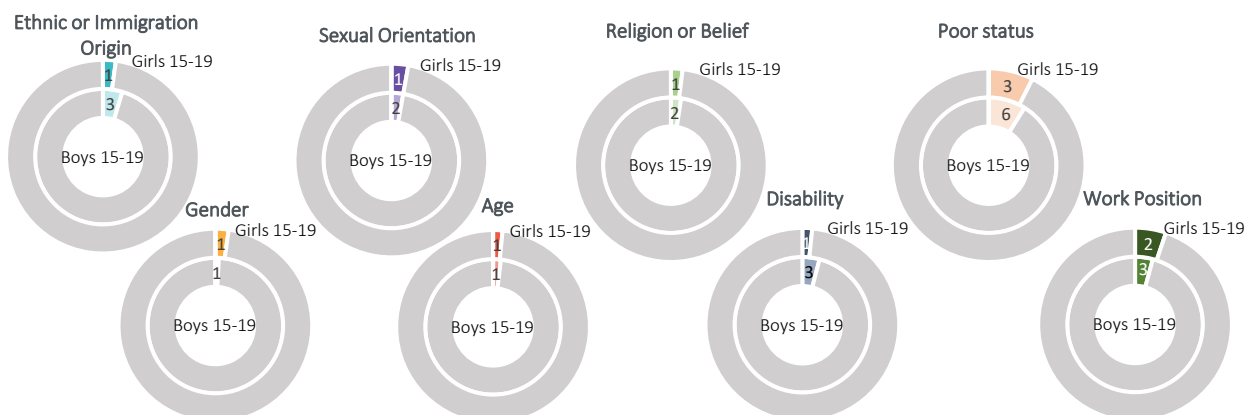**Basic Drinking Water SDG 1.4:** Drinking water from an improved source, provided collection time is not more than 30 minutes for a roundtrip including queuing. Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, and include: piped water, boreholes or tubewells, protected dug wells, protected springs, rainwater, and packaged or delivered water
Basic Sanitation Services SDG 1.4.1/6.2.1: Use of improved facilities which are not shared with other households. Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush to piped sewer system, septic tanks or pit latrines; ventilated improved pit latrines, composting toilets or pit latrines with slabs
Clean Fuels SDG 7.1.2: Primary reliance on clean fuels and technologies for cooking and lighting

Every Adolescent has an Equitable Chance in Life

Discrimination & Harassment

Ethnic or Immigration Origin
Girls 15-19
1
3
Boys 15-19

Sexual Orientation
Girls 15-19
1
2
Boys 15-19

Religion or Belief
Girls 15-19
1
2
Boys 15-19

Poor status
Girls 15-19
3
6
Boys 15-19

Gender
Girls 15-19
1
1
Boys 15-19

Age
Girls 15-19
1
1
Boys 15-19

Disability
Girls 15-19
1
3
Boys 15-19

Work Position
Girls 15-19
2
3
Boys 15-19

Percentage of adolescent girls and boys age 15-19 years who in the last 12 months have felt discriminated against or harassed on the basis of different grounds

Key Messages

- Adolescent girls in urban areas and those among the poorest and with primary education were at a higher risk of early child bearing.

- Seventy-one percent of children age 7-14 demonstrated foundational reading skills while 65% demonstrated foundational numeracy skills.

- The adjusted net attendance ratio was highest among primary school adolescents when compared to lower and upper secondary school adolescents.

- Seventeen percent of women age 20-24 years were first married before age 18 years. A smaller proportion, 6% of the same age group married for the first time before age 15 years.

- Nearly haft (49%) of children age 10 to 14 years experienced any form of violent discipline.

- Almost all households had basic water and basic sanitation while 86% reported the use of clean fuels and technologies for cooking and lighting.

- Minority of adolescents age 15-19 years had felt discriminated against or harassed on the basis of poor status, work position, ethnic or immigration origin, disability, sexual orientation, age, religion or belief and gender.
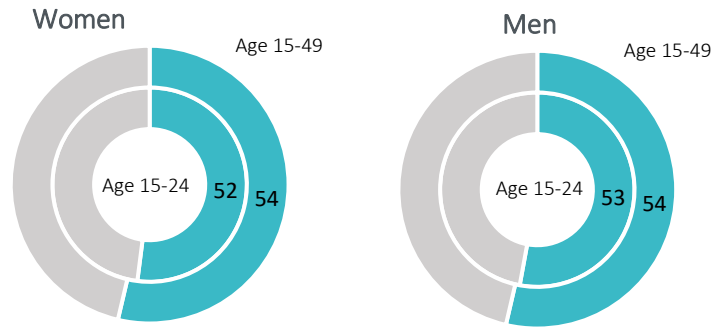
HIV
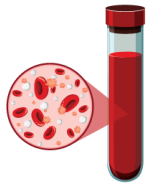
HIV indicators

Knowledge

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

Women

Age 15-49

Age 15-24 52 54

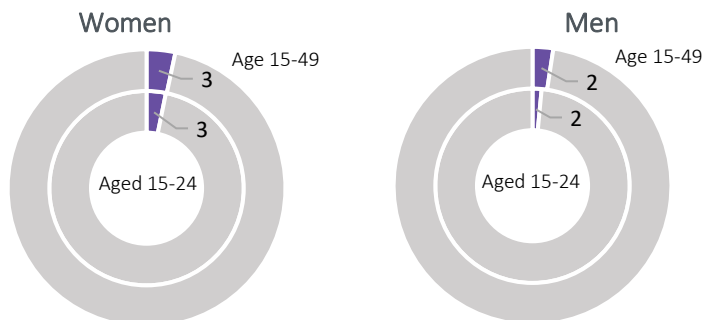**Men**

Age 15-49

Age 15-24 53 54

Stigma

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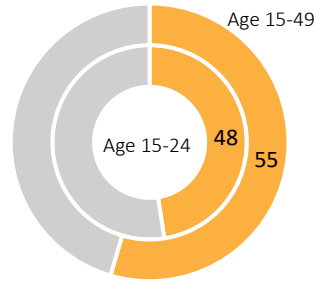
Women

Age 15-49

Age 15-24 28 34

Men

Age 15-49

Age 15-24 27 32
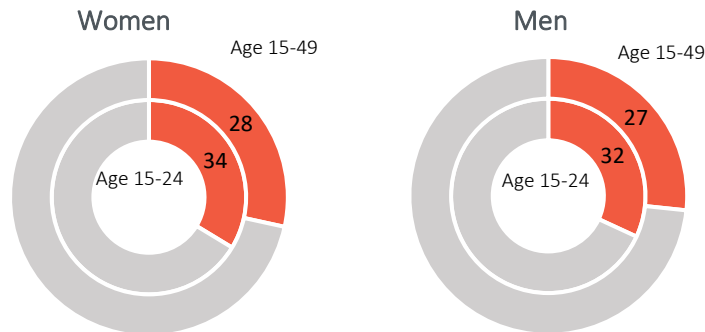
Testing

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

Women

Age 15-49 3

3

Aged 15-24

Men

Age 15-49 2

2

Aged 15-24

13

Testing during Antenatal Care

Percent of women who during their antenatal care for their last pregnancy were offered an HIV test, accepted and received results, and received post-test health information or counselling related to HIV
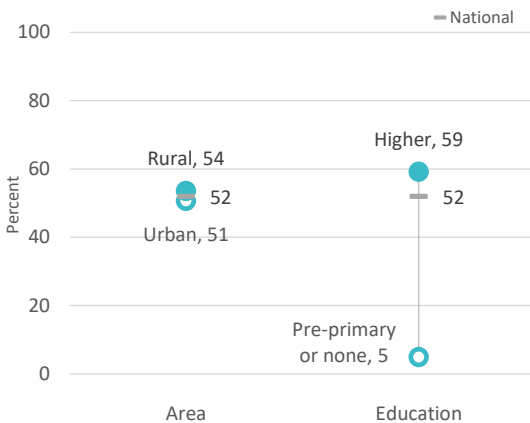
Age 15-49

Age 15-24

48

55

Key Messages

- Overall, above half of women and men age 15-49 years had comprehensive knowledge about HIV. Likewise, similar percentages are observed among young women and young men.

- Almost three in ten women and men aged 15-49 years reported discriminatory attitudes towards people living with HIV.

- The proportion of individuals 15-49 years of age tested for HIV in the 12 months preceding the survey and knew their results was low (3% in women and 2% in men).

- About half of pregnant women were offered an HIV test, accepted, received results and post-test health information or counselling related to HIV during their last pregnancy.
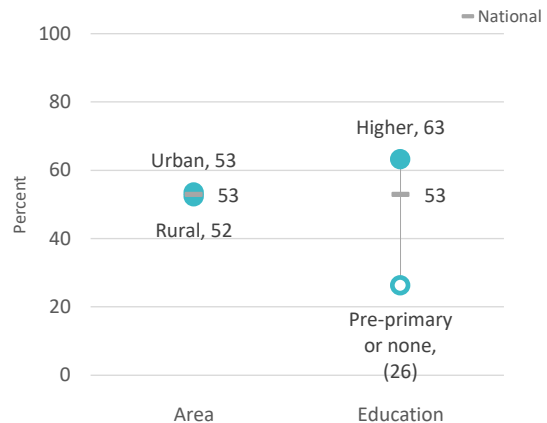
HIV Indicators by Key Characteristics

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

National

Rural, 54

Urban, 51

52

Higher, 59

52

Pre-primary or none, 5

Area   Education

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

National

Urban, 53

Rural, 52

53

Higher, 63

53

Pre-primary or none, (26)
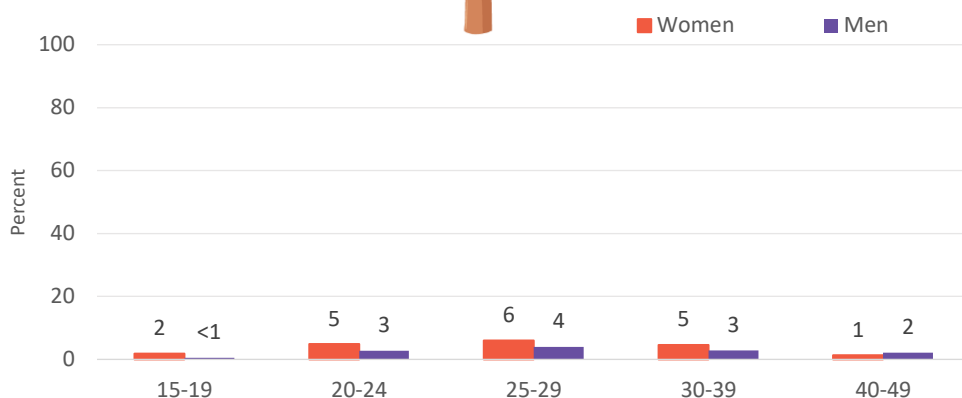
Area   Education

*Percent age 15-24 who know two ways of HIV prevention, who know that a healthy-looking person can be HIV-positive, and who reject two most common misconceptions.

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

Tested for HIV in last 12 months

Legend: ■ Women ■ Men

Age group	Women	Men
15-19	2	<1
20-24	5	3
25-29	6	4
30-39	5	3
40-49	1	2

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

Regional Data on HIV Testing

Region	Men who tested in last 12 months	Women who tested in last 12 months	Women testing at ANC
National	2	3	55
Bangkok	5	4	51
Central	2	4	52
North	3	3	53
Northeast	2	3	68
South	1	3	45

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

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

Key Messages

• Young women and men (15-24 years) with higher education are more likely to have comprehensive knowledge of HIV than those with pre-primary education or none.

• The highest proportion of women and men who tested for HIV in the last 12 months and know the result was in the age group 25-29 years and lowest in the age group 15-19 years.

• In the South only 1% of men and 3% of women aged 15-49 years reported having been tested in the last 12 months prior to the survey and know the result, in contrast to 5% of men in Bangkok, and 4% of women in Bangkok and the Central.

• For pregnant women attending ANC, HIV testing is lowest in the South (45%) and highest in the Northeast at 68%.
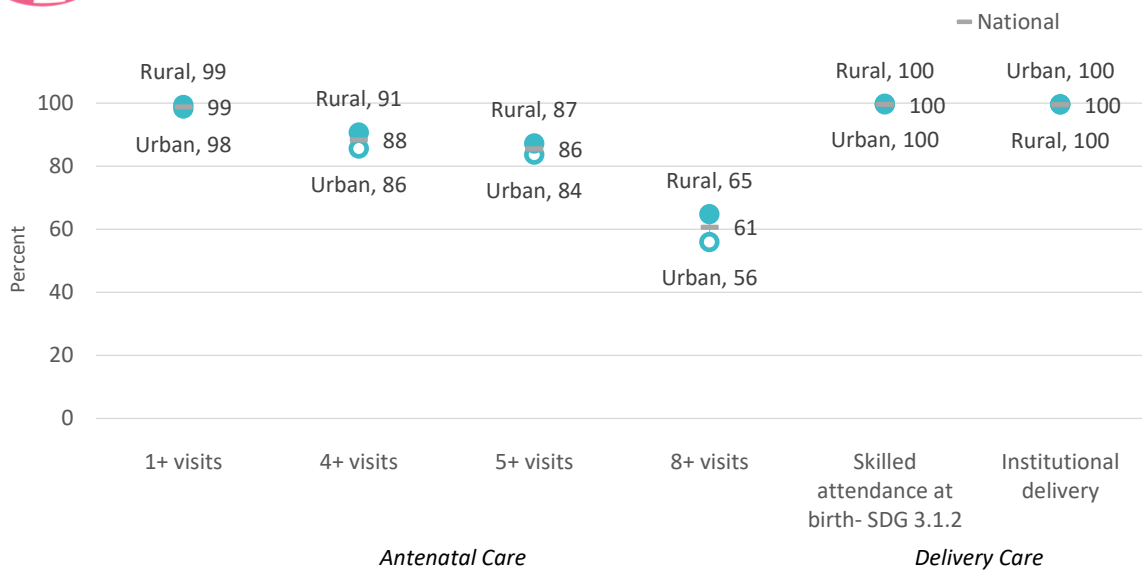
© UNICEF Thailand/2022/Preechapanich

Maternal and Newborn Health

Key Elements of Maternal & Newborn Health

Maternal & Newborn Health Cascade by Area

National

Rural, 99	99
Urban, 98	
Rural, 91	88
Urban, 86	
Rural, 87	86
Urban, 84	
Rural, 65	61
Urban, 56	
Rural, 100	100
Urban, 100	
Urban, 100	100
Rural, 100	

Percent

100 — 80 — 60 — 40 — 20 — 0

1+ visits | 4+ visits | 5+ visits | 8+ visits | Skilled attendance at birth- SDG 3.1.2 | Institutional delivery
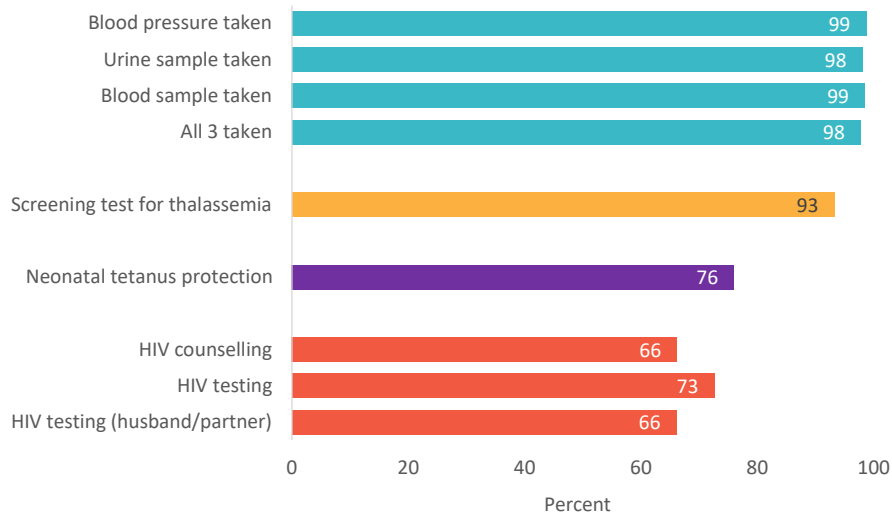
Antenatal Care   *Delivery Care*

Percentage of women age 15-49 years with a live birth in the last 2 years who were attended during their last pregnancy that led to a live birth at least once by skilled health personnel or at least four, five and eight times by any provider, who were attended by skilled health personnel during their most recent live birth (**SDG 3.1.2**) and whose most recent live birth was delivered in a health facility, by area.

Timing of First Antenatal Care Visit
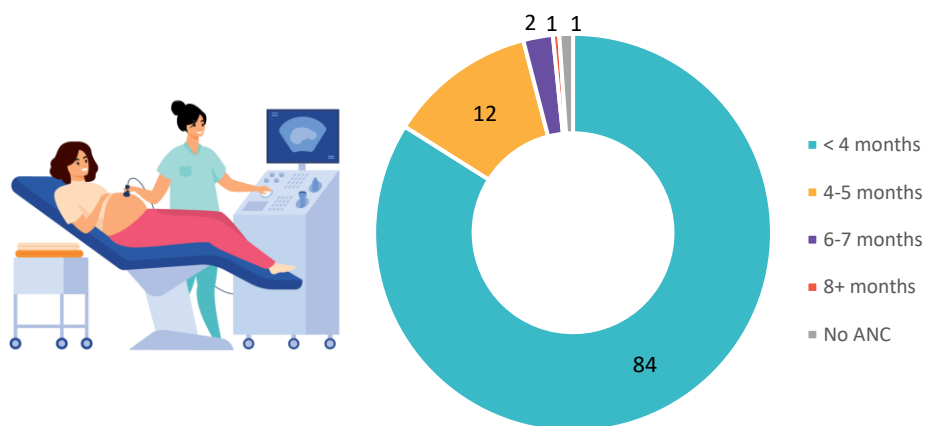
2 1 1

12

84

- < 4 months
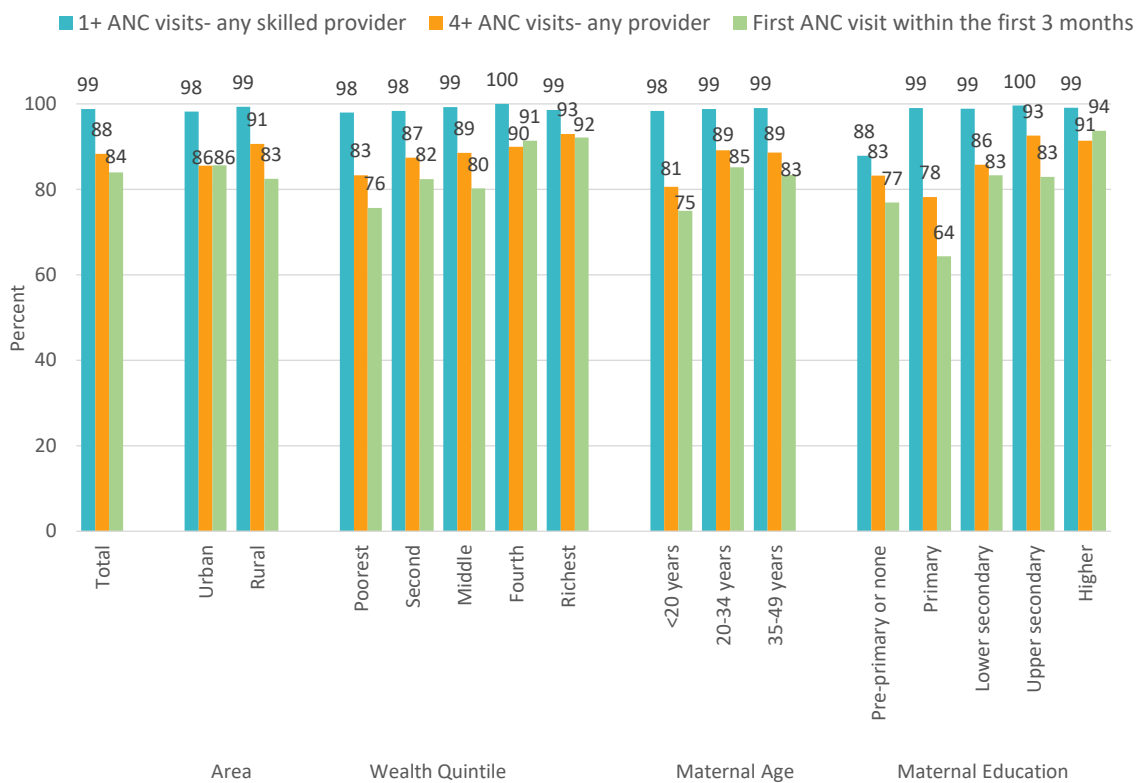- 4-5 months
- 6-7 months
- 8+ months
- No ANC

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

Content & Coverage of Antenatal Care Services

	Percent
Blood pressure taken	99
Urine sample taken	98
Blood sample taken	99
All 3 taken	98
Screening test for thalassemia	93
Neonatal tetanus protection	76
HIV counselling	66
HIV testing	73
HIV testing (husband/partner)	66

Percentage of women age 15-49 years with a live birth in the last 2 years who had their blood pressure measured and gave urine and blood samples, had screening test for thalassemia, were given at least two doses of tetanus toxoid vaccine within the appropriate interval, reported that during an ANC visit they received information or counselling on HIV, reported that they were offered and accepted an HIV test during antenatal care and received their results during the last pregnancy that led to a live birth, and reported that whose husband/ partner was tested for HIV during antenatal care

Coverage of Antenatal Care by Various Characteristics

Legend: ■ 1+ ANC visits- any skilled provider ■ 4+ ANC visits- any provider ■ First ANC visit within the first 3 months

Characteristic	1+ ANC visits	4+ ANC visits	First ANC visit within 3 months
Total	99	88	84
Urban	98	86	86
Rural	99	91	83
Poorest	98	83	76
Second	98	87	82
Middle	99	89	80
Fourth	100	90	91
Richest	99	93	92
<20 years	98	81	75
20-34 years	99	89	85
35-49 years	99	89	83
Pre-primary or none	88	83	77
Primary	99	78	64
Lower secondary	99	86	83
Upper secondary	100	93	83
Higher	99	91	94

Area — Wealth Quintile — Maternal Age — Maternal Education

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

18

Coverage of Skilled Attendance at Birth & Institutional Delivery by Area
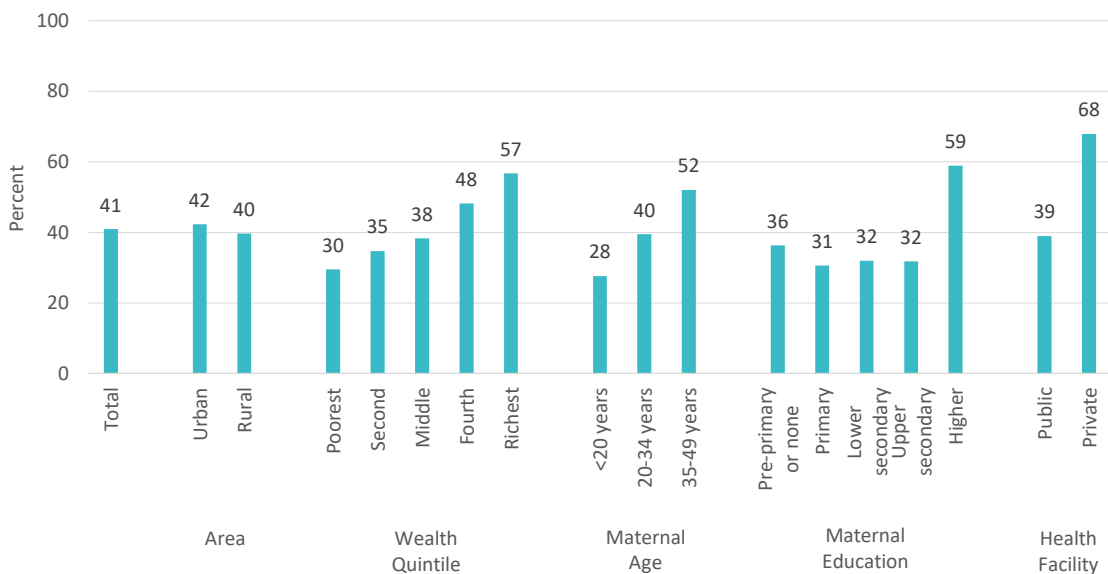
Skilled Attendance at Birth

Total

<1
100

Urban

<1
100

Rural

<1
100

- ■ Skilled attendant
- ■ Unskilled attendant/ No attendant

Institutional Delivery

Total

<1
100

Urban

<1
100

Rural

<1
100

- ■ Institutional
- ■ Non-institutional

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

Caesarian Section by Various Characteristics

Category	Value
Total	41
Urban	42
Rural	40
Poorest	30
Second	35
Middle	38
Fourth	48
Richest	57
<20 years	28
20-34 years	40
35-49 years	52
Pre-primary or none	36
Primary	31
Lower secondary	32
Upper secondary	32
Higher	59
Public	39
Private	68

Area | Wealth Quintile | Maternal Age | Maternal Education | Health Facility

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

19

Coverage of Newborn Care
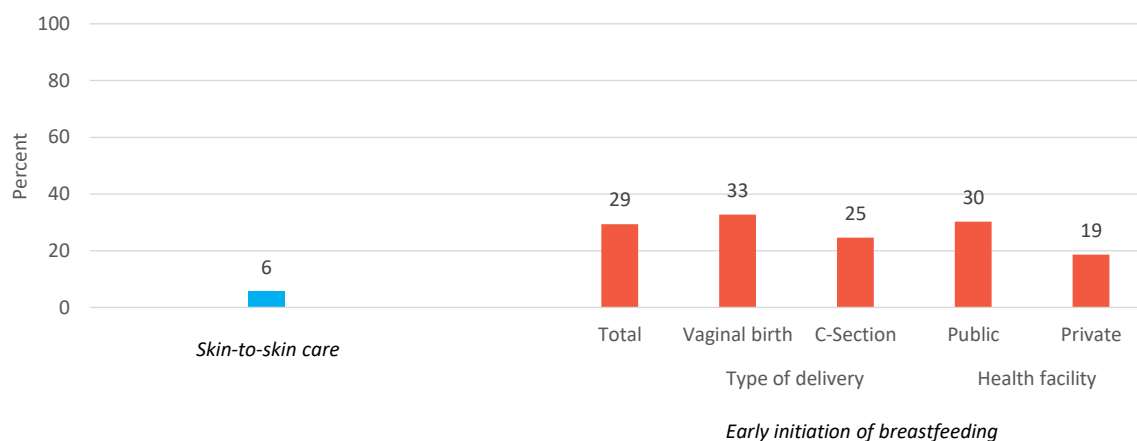
Among the last live-birth in the last 2 years, percentage who were given skin to skin contact and percentage of women with a live birth in the last 2 years who put their last newborn to the breast within one hour of birth.

Regional Data on Maternal and Newborn Cascade

Region	ANC: At least 1 visit (skilled provider)	ANC: At least 4 visits (any provider)	Skilled Attendance at Birth	Institutional Delivery
National	**99**	**88**	**100**	**100**
Bangkok	100	92	100	100
Central	98	90	100	100
North	98	75	100	100
Northeast	100	91	100	100
South	100	91	99	99

Key Messages

- Ninety-nine percent of pregnant women received at least one antenatal care visit by skilled health personnel , whilst 88% received four or more antenatal care visits by any provider.

- Women in rural (91%) had antenatal care (4+ visits) more than urban areas (86%).

- Pregnant women who were under 20 years old received less ANC visits and also went to their first ANC visit late.

- Whilst 98% of pregnant women received all 3 key antenatal services (checking of blood pressure, urine and blood tests), only two thirds received HIV counselling.

- About three quarters of pregnant women received vaccination to prevent neonatal tetanus.

- All of women were attended by skilled health personnel during their most recent live birth and delivered in a health facility.

- Two-fifths of pregnant women gave birth through caesarean section. The rate is much higher in private hospitals.

- Skin to skin care occurred in 6% of all live births in the last 2 years respectively.

- Three-tenths of women with a live birth in the last 2 years reported early initation of breastfeeding.

# Infant and Young Child Feeding (IYCF)

Infant & Young Child Feeding

Start Breastfeeding within one hour of birth	Breastfeed exclusively for the first 6 months of life	Provide nutritionally adequate, age appropriate and safely prepared **complementary foods** starting at 6 months; and **continue breastfeeding** until age 2 or longer					

< 1 hour	0-5 months	6-8 months	6-23 months	6-23 months	6-23 months	12-15 months	20-23 months
Early initiation of breastfeeding	Exclusive breastfeeding	Introduction of solid, semi-solid or soft food	Minimum meal frequency	Minimum diet diversity	Minimum acceptable diet	Continued breastfeeding at 1 year	Continued breastfeeding at 2 years

Bar chart (Percent):
- Early Initiation of breastfeeding: 29
- Exclusive breastfeeding: 29
- Introduction of solid, semi-solid or soft foods: 88
- Minimum meal frequency: 81
- Minimum diet diversity: 77
- Minimum acceptable diet: 66
- Continued breastfeeding at 1 year: 31
- Continued breastfeeding at 2 years: 19

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

IYCF: Equity

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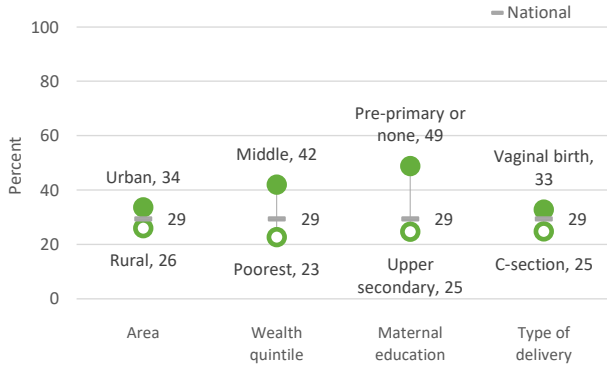
Percent of newborns put to the breast within one hour of birth, by background characteristics

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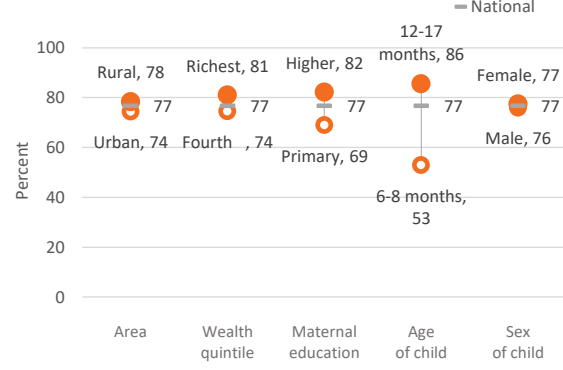
Percent of children aged 6-23 months that were fed food from at least 5 out of 8 food groups, by background characteristics

IYCF: What are the Youngest Infants Fed?

Liquids or foods consumed by infants 0-5 months old

Percent of infants aged 0-5 months receiving breastmilk only, breastmilk and plain water, breastmilk and non-milk liquids, breastmilk and other milk/formula, breastmilk and complementary foods and no breastmilk

Notes:
1) may also have been fed plain water;
2) may also have been fed plain water and/or non-milk liquids;
3) may also have been fed plain water, non-milk liquids and/or other milk/formula;
4) may have been fed plain water, non-milk liquids, other milk/infant formula and/or solid, semi-solid and soft foods.

- No breastmilk[4]
- Breastmilk and complementary foods[3]
- Breastmilk and other milk / formula[2]
- Breastmilk and non-milk liquids[1]
- Breastmilk and plain water
- Breastmilk only
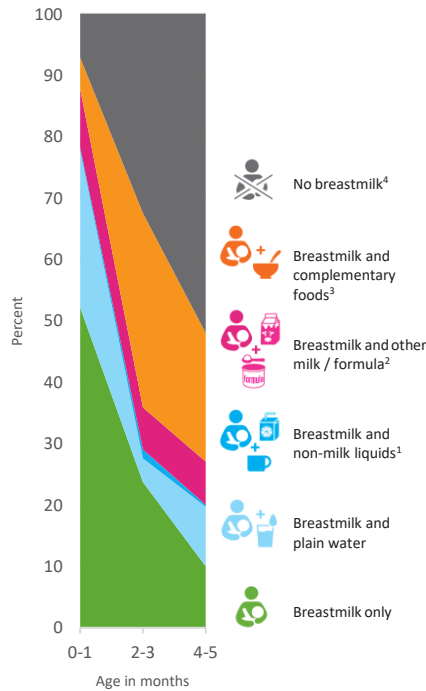
Regional Data

Region	Early Initiation of breastfeeding	Minimum Diet Diversity
National	**29**	**77**
Bangkok	19	75
Central	24	81
North	35	76
Northeast	26	81
South	43	63

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

Key Messages

- About three-tenths of newborns were put to breast within 1 hour of birth.

- Only 29% of babies age 0-5 months were exclusively breastfed.

- Nine in every ten children age 6–8 months were introduced to solid or semi-solid foods.

- Young children 6-23 months were fed often enough (81%) and their diet attained variety (77%). Almost 7 out of 10 children met the recommended minimum acceptable diet.

- Thirty one percent of babies continued with breastfeeding at 1 year while only 19% did the same at 2 years.

- Early initiation of breast feeding was practiced most in the South (43%) and least in Bangkok (19%).

- Minimum diet diversity was highest in the Central and Northeast (81%) and lowest in the South (63%).
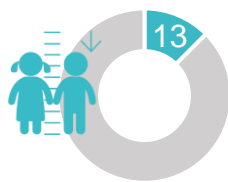
Nutritional Status of Children

Anthropometric Malnutrition Indicators

Stunting: SDG 2.2.1

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

13

Percentage children under-5 who are stunted

Wasting: SDG 2.2.2

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

7
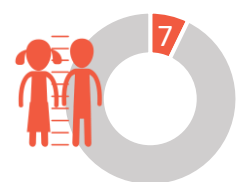
Percentage children under-5 who are wasted

Overweight: SDG 2.2.2

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

11

Percentage children under-5 who are overweight

Underweight

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

7

Percentage children under-5 who are underweight

Anthropometric Malnutrition Indicators by Age
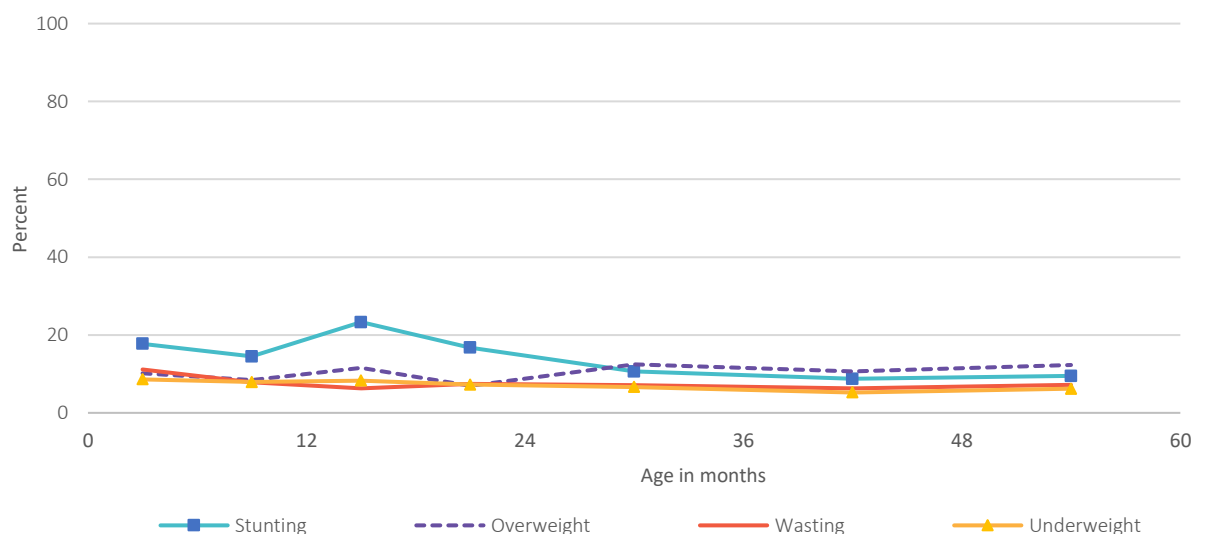
Percentage children who are underweight, stunted, wasted and overweight, by age in months

Nutritional Status of Children: Disaggregates

Stunting: SDG 2.2.1

— National

Percent

- Rural, 13
- 13
- Urban, 12

Area

- Poorest, 14
- 13
- Middle, 12

Wealth Quintile

- Lower secondary, 15
- 13
- Higher, 10

Maternal Education

- North, 15
- 13
- Central, 10
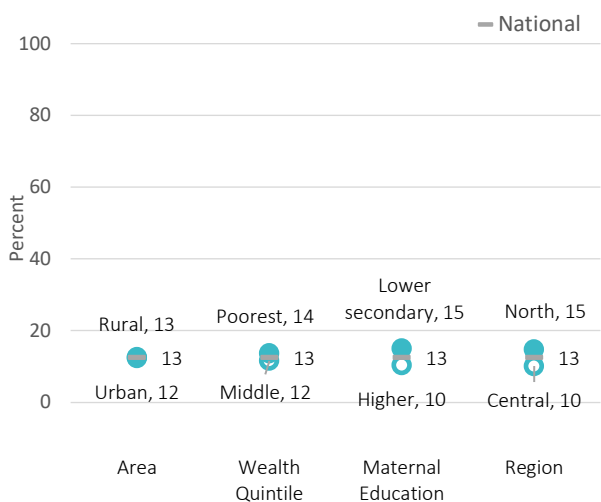
Region

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

Wasting: SDG 2.2.2

— National

Percent

- Urban, 8
- 7
- Rural, 7

Area

- Poorest, 8
- 7
- Richest, 6

Wealth Quintile

- Pre-primary or none, 8
- 7
- Upper Secondary, 6

Maternal Education

- 0-5, 11
- 7
- 36-47, 6

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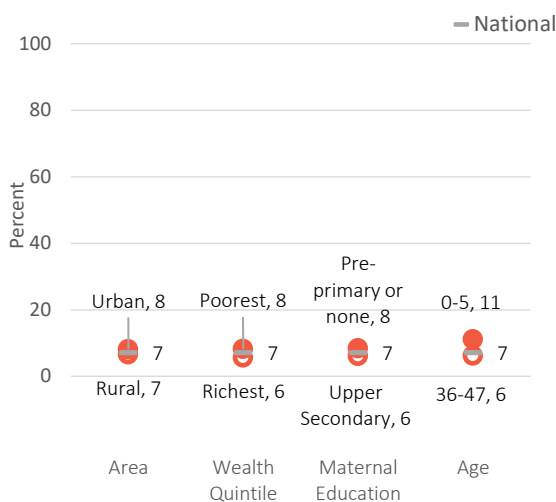
Percentage of under 5 children who are wasted, by background characteristics

Regional Data on Stunting, Overweight & Wasting

	Stunting: SDG 2.2.1	Overweight: SDG 2.2.2	Wasting	
	% stunted (moderate and severe)	% overweight (moderate and severe)	% wasted (moderate and severe, SDG 2.2.2)	% wasted (severe)
National	**13**	**11**	**7**	**3**
Bangkok	12	15	11	6
Central	10	9	7	3
North	15	12	6	2
Northeast	13	12	6	2
South	13	8	11	3

Key Messages

- Among children under 5 stunting was 13%, Overweight: 11%, Wasting: 7% and Underweight: 7%.

- Wasting and underweight were more prevalent for children under 6 months of age while overweight peaked at 24-35 months, and stunting peaked at 12-17 months.

- There is no difference in stunting and wasting prevalence among children between urban and rural areas.

- Bangkok had the highest prevalence of overweight compared to other regions. While the North had the highest prevalence of stunting compared to other regions.

Early Childhood Development (ECD)

Support for Learning

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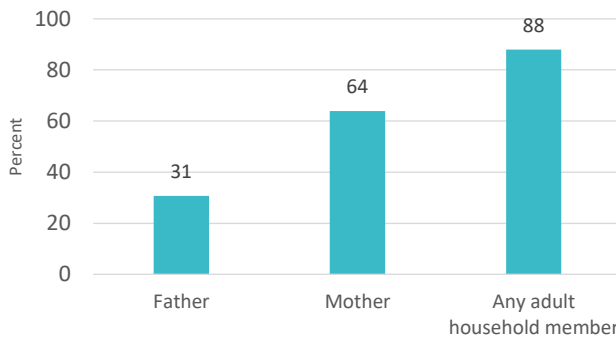
Percentage of children age 2-4 years with whom the father, mother or adult household members engaged in activities that promote learning and school readiness during the last three days

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

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

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

Activities with father

Activities with mother

Activities with adult household member
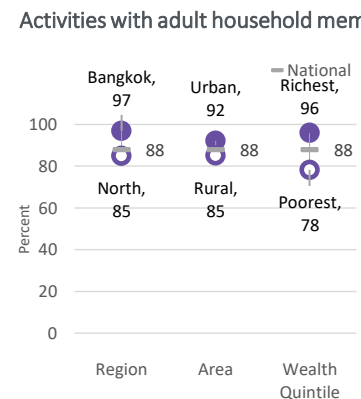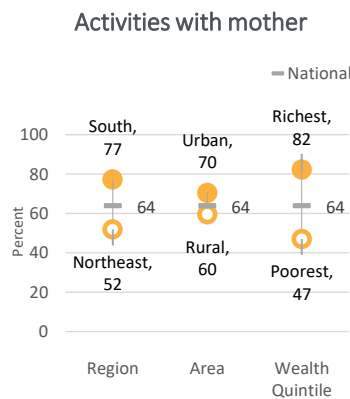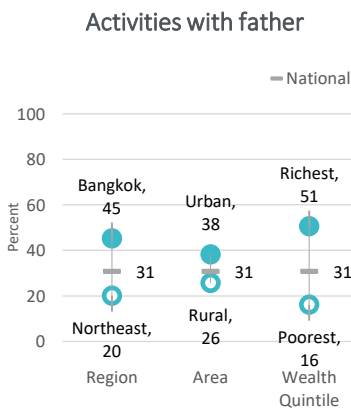
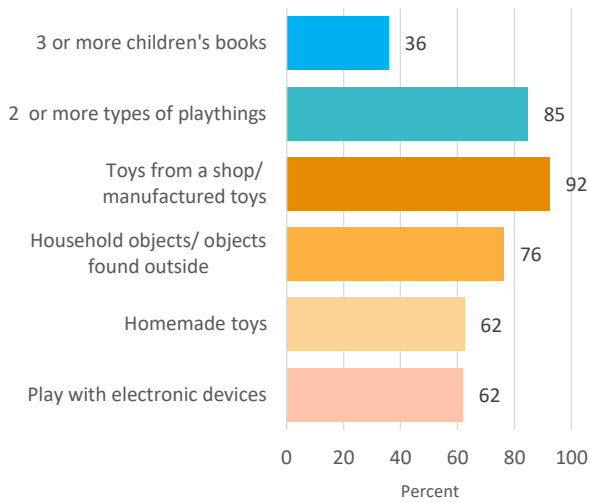### Attendance at Early Childhood Education Programmes
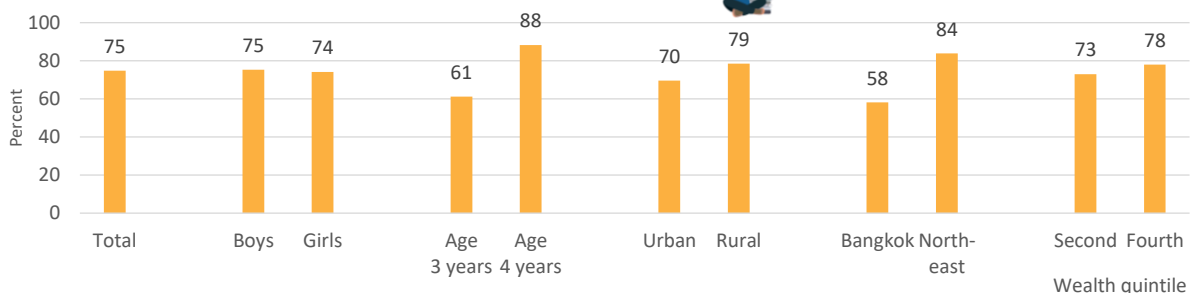
Percentage of children age 3-4 years attending an early childhood education programme, by background characteristics

Learning Materials & Child Supervision

Access to Play & Learning Materials

Category	Percent
3 or more children's books	36
2 or more types of playthings	85
Toys from a shop/ manufactured toys	92
Household objects/ objects found outside	76
Homemade toys	62
Play with electronic devices	62

Percent

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

Inadequate supervision of children

Region	Left in inadequate supervision
National	**5**
Bangkok	6
Central	3
North	5
Northeast	6
South	5

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

Early Childhood Development Index (ECDI2030)

ECDI2030: Total Score, SDG 4.2.1

	Percent
ECDI 2030	78
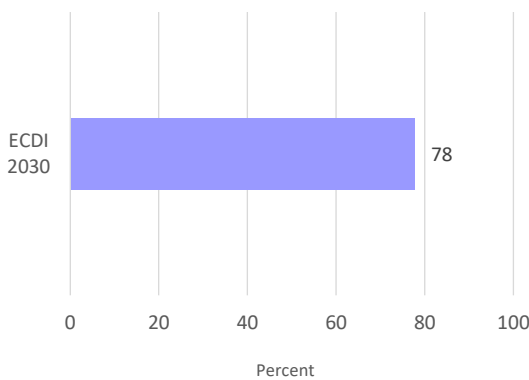
Percent

ECDI2030: Early Childhood Development Index; percentage of children age 24-59 months who are developmentally on track in health, learning and psychosocial well-being.

ECDI2030: Disaggregates

— National

- Urban, 80
- Rural, 77
- Richest, 84
- Poorest, 72
- Higher, 84
- Pre-primary or none, 54
- Female, 81
- Male, 75
- Attending, 81
- Not attending, 67

78 (National line across all)

Percent

| Area of residence | Wealth Quintile | Maternal education | Sex of child | ECE attendance |
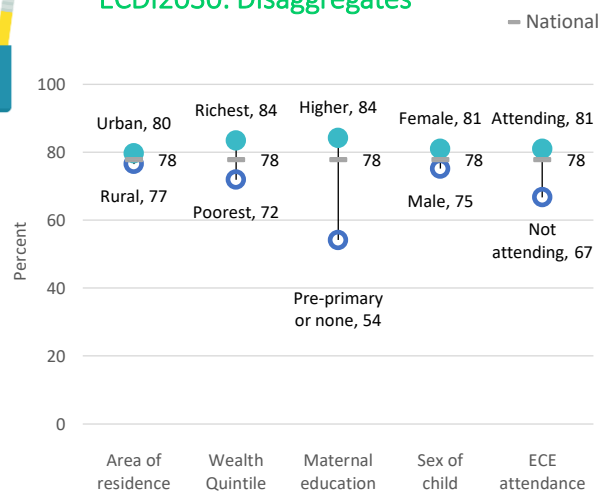
ECDI by various characteristics
ECE = Early childhood education.

Key Messages

- Almost nine in ten children engaged in activities with an adult household member and less than half engaged in activities of fathers compared to mothers during the last three days.

- Children age 3 years was less likely to attend an early childhood education programs compared with those age 4 years (61% and 88%, respectively).

- Early childhood education programs is highest in the Northeast and lowest in Bangkok but there were no clear disparities when comparing sex of the child.

- Eighty-five percent of children (age 2-4 years) had 2 or more type of playthings and 92% had toys from a shop/ manufactured toys.

- Early Childhood Development Index (ECDI2030) indicates that 78% of children (age 24-59 months) are developmentally on track in health, learning and psychosocial well-being.
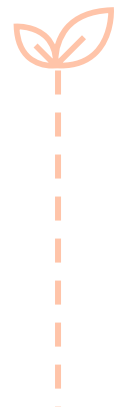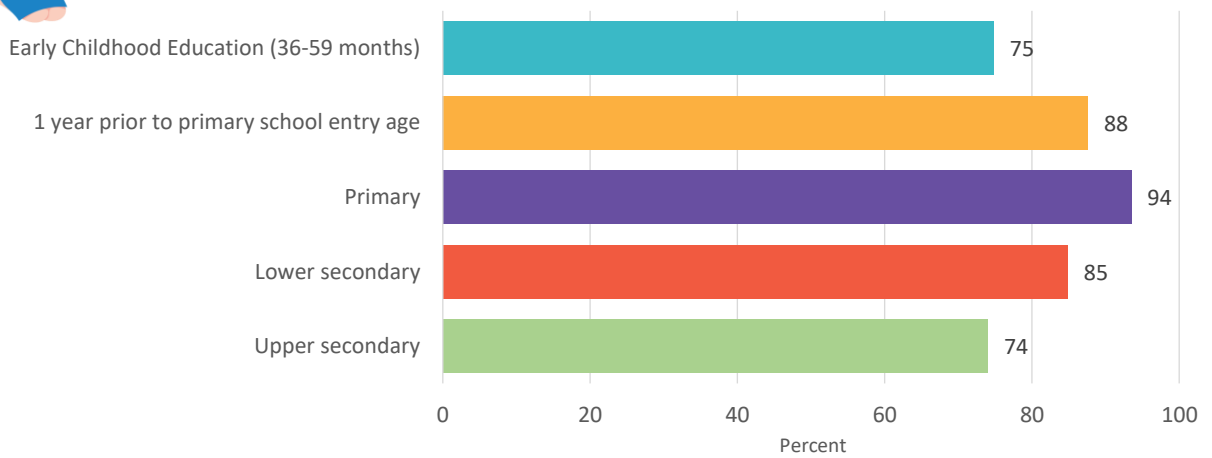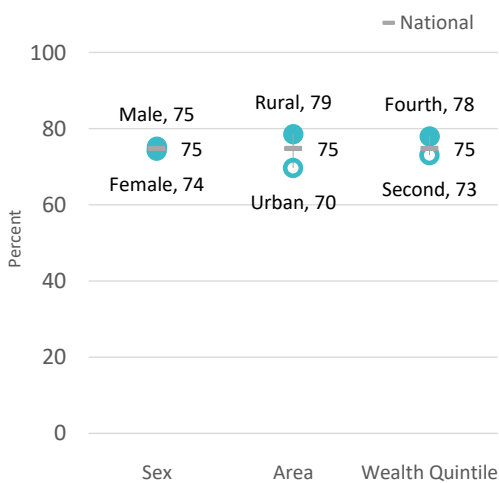
Education

Attendance Rates & Inequalities

School Net Attendance Rates (adjusted)

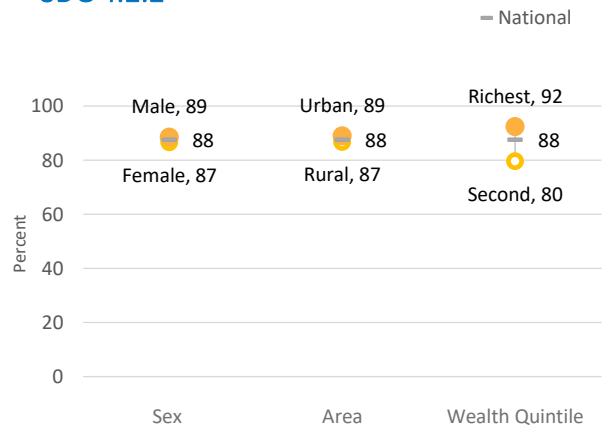| Category	Percent
Early Childhood Education (36-59 months)	75
1 year prior to primary school entry age	88
Primary	94
Lower secondary	85
Upper secondary	74

Percent

Inequalities in Attendance in Early Childhood Education & Participation in Organized Learning

Net Attendance Rate for Early Childhood Education

— National

Male, 75
Female, 74
75

Rural, 79
Urban, 70
75

Fourth, 78
Second, 73
75

Percent

Sex   Area   Wealth Quintile

Percentage of children age 36-59 months who are attending early childhood education

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

— National

Male, 89
Female, 87
88

Urban, 89
Rural, 87
88

Richest, 92
Second, 80
88

Percent

Sex   Area   Wealth Quintile

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

Inequalities in Attendance Rates

Adjusted Primary School Net Attendance Rate

Male, 94   Urban, 94   Richest, 96
94   94   94
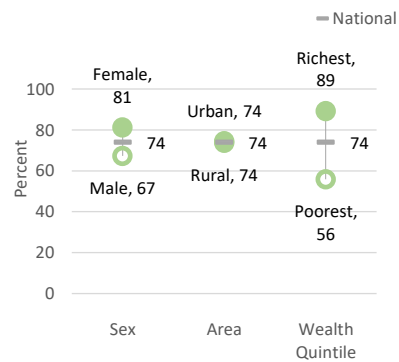Female, 93 Rural, 93   Fourth, 92

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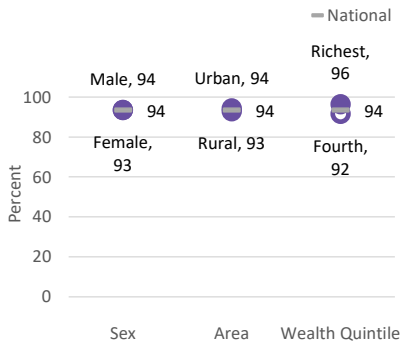
Percentage of children of primary school age (as of the beginning of school year) who are attending primary or secondary school

Adjusted Lower Secondary School Net Attendance Rate
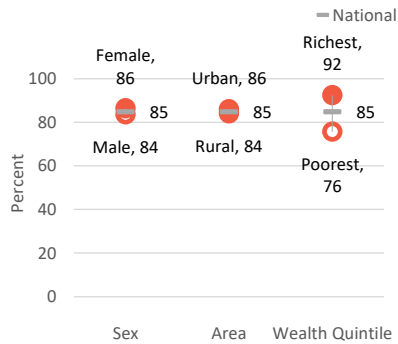
Female, 86   Urban, 86   Richest, 92
85   85   85
Male, 84   Rural, 84   Poorest, 76

Sex   Area   Wealth Quintile

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

Adjusted Upper Secondary School Net Attendance Rate

Female, 81   Urban, 74   Richest, 89
74   74   74
Male, 67   Rural, 74   Poorest, 56

Sex   Area   Wealth Quintile

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

Regional Data for Net Attendance Rates (adjusted)

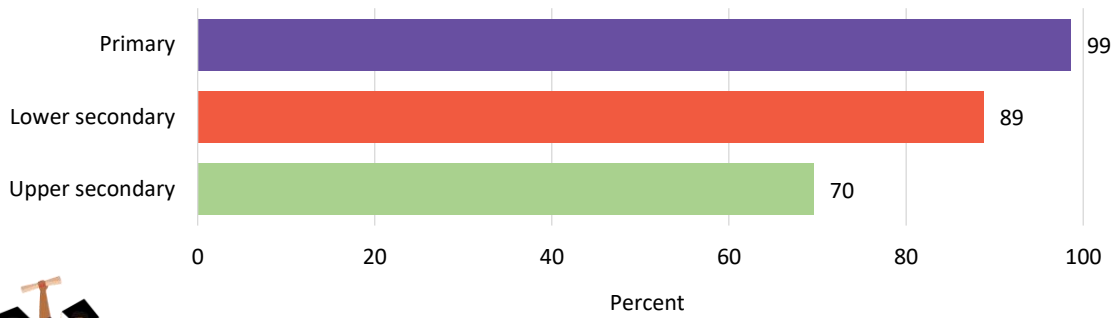| Region	Early Childhood Education	Participation rate in organized learning	Primary	Lower Secondary	Upper Secondary
National	**75**	**88**	**94**	**85**	**74**
Bangkok	58	90	96	91	82
Central	64	86	95	86	76
North	82	93	95	89	76
Northeast	84	86	91	82	71
South	75	87	94	80	68

Key Messages

- Three out of 4 children age 36 to 59 months were attending early childhood education. The attendance rate in rural areas was higher than urban areas. Bangkok had the lowest attendance rate.

- Participation rate in organised learning programs (1 year prior to primary school entry age) was 88%.

- Net attendance rates show wider gaps in secondary school than in primary school according to wealth status.

- The widest gap for attending in upper secondary school was observed between children of the poorest and richest households.

- The South region had the lowest attendance rates in lower secondary and upper secondary with 80%, and 68%, respectively.

- Lower secondary and upper secondary school net attendance was highest in Bangkok with 91%, and 82%, respectively.
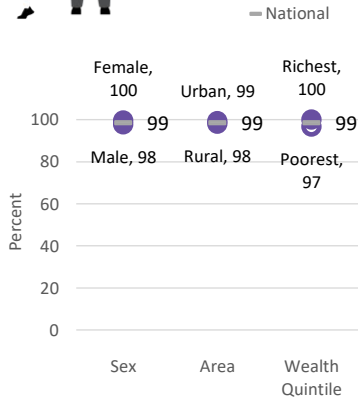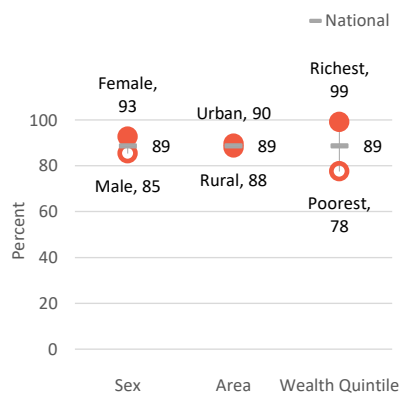
Completion Rates

	Percent
Primary	99
Lower secondary	89
Upper secondary	70

Inequalities in Completion Rates

Primary School

— National

Female, 100
Urban, 99
Richest, 100
99 99 99
Male, 98
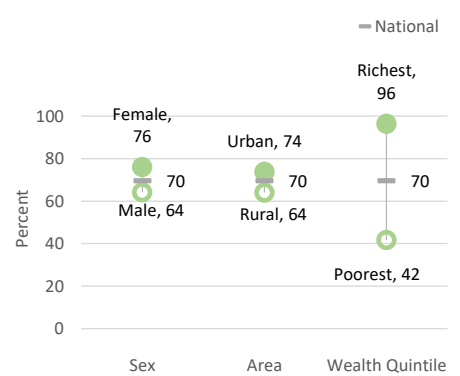Rural, 98
Poorest, 97

Percent

Sex Area Wealth Quintile

Percentage of children who age 3 to 5 years above the intended age for the last grade of primary school (age 14-16 years at beginning of school year) who have completed primary education
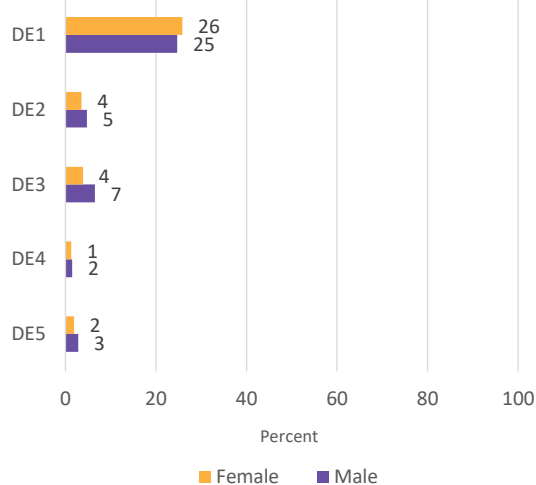
Lower Secondary

— National

Female, 93
Urban, 90
Richest, 99
89 89 89
Male, 85
Rural, 88
Poorest, 78

Percent

Sex Area Wealth Quintile

Percentage of children who age 3 to 5 years above the intended age for the last grade of lower secondary school (age 17-19 years at beginning of school year) who have completed lower secondary education

Upper Secondary

— National

Female, 76
Urban, 74
Richest, 96
70 70 70
Male, 64
Rural, 64
Poorest, 42

Percent

Sex Area Wealth Quintile

Percentage of children or youth who age 3 to 5 years above the intended age for the last grade of upper secondary school (age 20-22 years at beginning of school year) who have completed upper secondary education

Regional Data in Completion Rates

Region	Primary	Lower Secondary	Upper Secondary
National	99	89	70
Bangkok	100	93	80
Central	99	90	71
North	98	89	63
Northeast	99	91	65
South	97	78	65

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Out of School Rates

Out of School Dimensions for Levels of Education

	Female	Male
DE1	26	25
DE2	4	5
DE3	4	7
DE4	1	2
DE5	2	3

Percent

■ Female ■ Male

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

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

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

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

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

SDG Summary for Education

SDG	MICS Indicator	Definition & Notes	Value		
			Primary	Lower Secondary	Upper Secondary
4.1.4	LN.8a,b,c	Completion rate	99%	89%	70%
4.1.5	LN.6a,b,c	Out-of-school rate	4%	5%	15%
4.1.6	LN.10a,b	Percentage of children over-age for grade	1%	2%	na
4.5.1	LN.5a	Gender Parity Indices (girls/boys)	1.00	1.03	1.21
4.5.1	LN.5b	Wealth Parity Indices (poorest/richest)	0.95	0.82	0.63
4.5.1	LN.5c	Area Parity Indices (rural/urban)	0.98	0.98	0.99
			Total	Boys	Girls
4.2.2	LN.2	Participation rate in organized learning (one year before the official primary entry age)	88%	89%	87%

na: not applicable

Key Messages

- Almost all children completed primary education, while the completion rate at upper secondary education sharply dropped to 70%.

- Disparities in completion rate were observed in upper secondary by sex, area and wealth quintile.

- Children from the richest households had a basic secondary school completion rate of 99%, which was higher than their counterparts from the poorest households at 78%. The gap widens even further at the upper secondary education level.

- Completion rates for primary and lower secondary levels are lowest in the South region while the rate for upper secondary level is lowest in the North.

- Out-of-school rates significantly increase as the children reach higher levels. In primary, lower and upper secondary levels, the rates are 4, 5 and 15 percent, respectively.
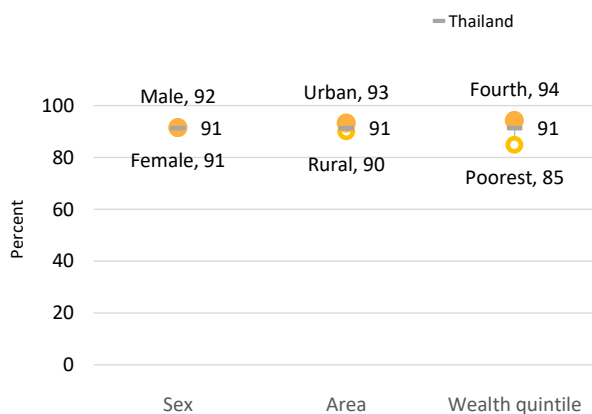
Remote Learning

The COVID-19 pandemic led to school closures around the world, affecting almost 1.6 billion students. The effects of even short disruptions in a child's schooling on their learning and wellbeing have been shown to be acute and long lasting. The effects of even short disruptions in a child's schooling on their learning and wellbeing have been shown to be acute and long lasting. The capacities of education systems to respond to the crisis through delivering remote learning and support to children and families have been diverse yet uneven. The most vulnerable children are less likely to access remote learning, and are at higher risk of violence, neglect, child marriage and other risks while schools are closed.

In Thailand, COVID-19 enforced school closures and required the education system to deliver alternative instructions. As per Ministry of Education guidance, the different options included: face to face teaching and learning (On-site), teachers delivered instructions through various internet platforms and applications (Online), broadcasting of available teacher-led lessons through television (On-air), students accessing pre-recorded available and recommended content (On-demand) and developing learning packages for children who were unable to access online instruction to learn at home (On-hand).

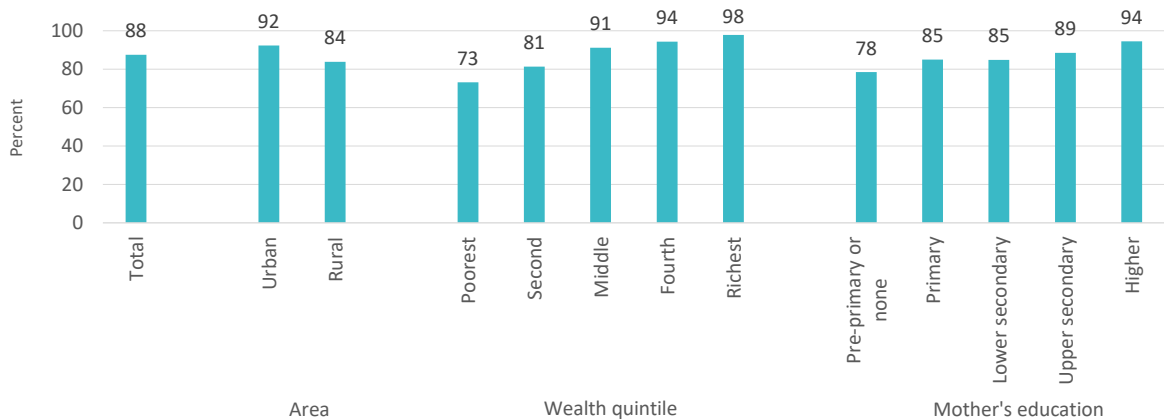## Remote learning during COVID-19 pandemic

Percentage of children age 7-14 years attended school in the last school year who attended classes remotely during COVID-19 pandemic

Main type of remote learning
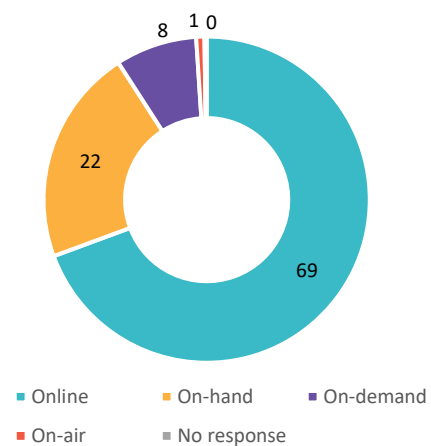
Percentage of children who attended classes remotely during COVID-19 pandemic by main type of remote learning

Children with any device used for remote learning*

Percentage of children who attended classes remotely during COVID-19 pandemic and used any device for remote learning

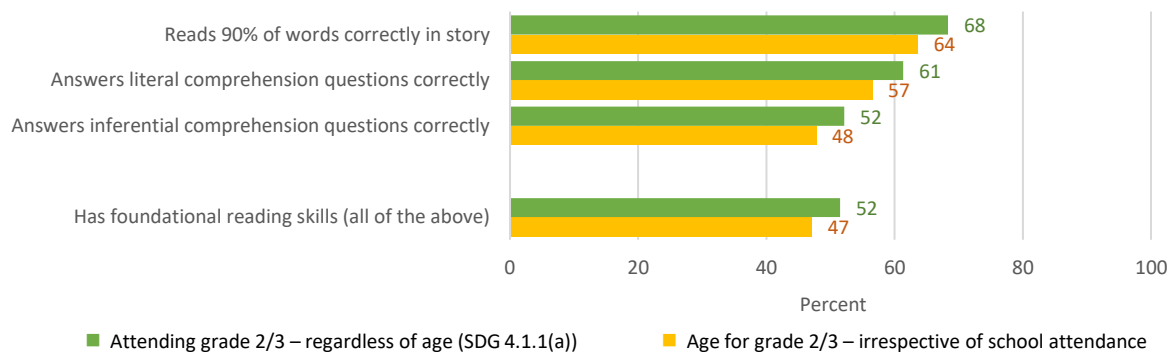*Devices include television, desktop computer, laptop computer, tablet and smart phone.

Early Grade Learning and Parental Involvement

Early Grade Learning: SDG 4.1.1(a)
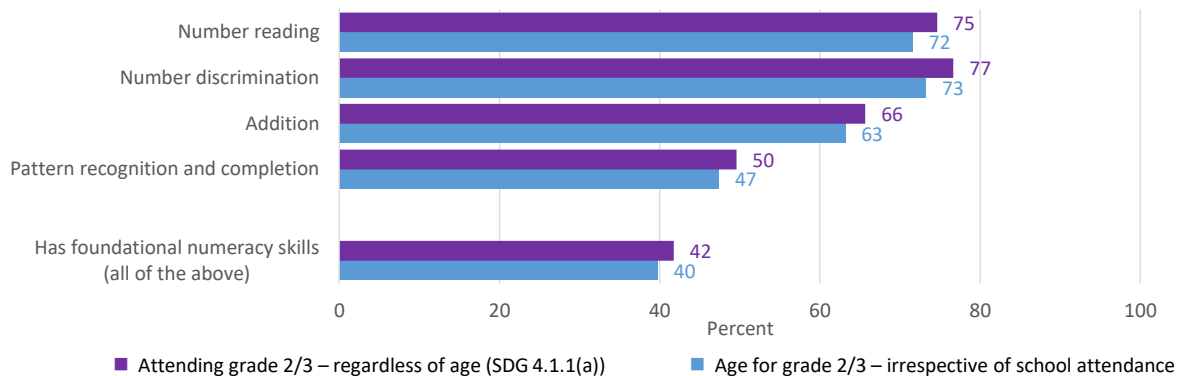
Foundational Reading Skills: SDG 4.1.1.(a) (i: reading)

Reads 90% of words correctly in story — 68 / 64
Answers literal comprehension questions correctly — 61 / 57
Answers inferential comprehension questions correctly — 52 / 48
Has foundational reading skills (all of the above) — 52 / 47

Percent: 0 20 40 60 80 100

■ Attending grade 2/3 – regardless of age (SDG 4.1.1(a))   ■ Age for grade 2/3 – irrespective of school attendance

Percentage of children attending grade 2/3 and at age for grade 2/3 (7-8 years old) who can 1) read 90% of words in a story correctly, 2) Answer three literal comprehension questions, 3) Answer two inferential comprehension questions

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

Number reading — 75 / 72
Number discrimination — 77 / 73
Addition — 66 / 63
Pattern recognition and completion — 50 / 47
Has foundational numeracy skills (all of the above) — 42 / 40

Percent: 0 20 40 60 80 100

■ Attending grade 2/3 – regardless of age (SDG 4.1.1(a))   ■ Age for grade 2/3 – irrespective of school attendance

Percentage of children attending grade 2/3 and at age for grade 2/3 (7-8 years old) who can successfully perform 1) a number reading task, 2) a number discrimination task, 3) an addition task and 4) a pattern recognition and completion task

Key Messages

- More than half of children attending grade 2 to 3 had foundational reading skills and above 2 in 5 children in the same age group had foundational numeracy skills.

- Above 2 in 3 children attending grade 2 to 3 were able to read 90% of words correctly in story, three-fifths of children were able to answer literal comprehension questions correctly and above half of children were able to answer inferential comprehension questions correctly .

- More than 7 in 10 children attending grade 2 to 3 were able to number reading and number discrimination, 2 in 3 children were able to number addition and half of children were able to pattern recognition and completion.

- It should be noted that the proportion of children at age for grade 2/3 who have foundational reading and numeracy skills was lower than that of children attending grade 2 to 3 .
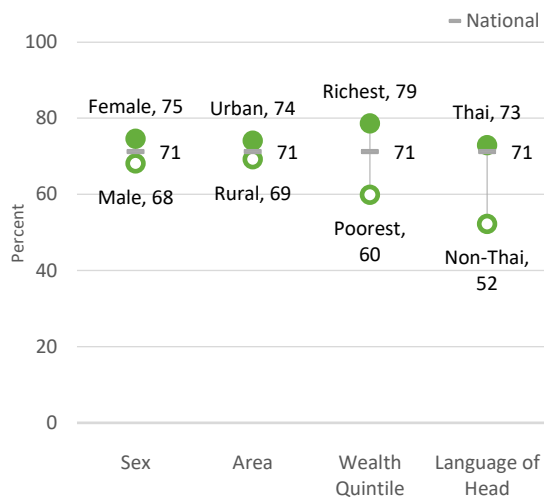
33

Early Grade Learning: Disaggregates (age 7-14 years)

Teaching children to read at a young age is the cornerstone of improving educational outcomes. Children who do not develop the ability to read proficiently in early grades are less likely to complete compulsory education than those who do.
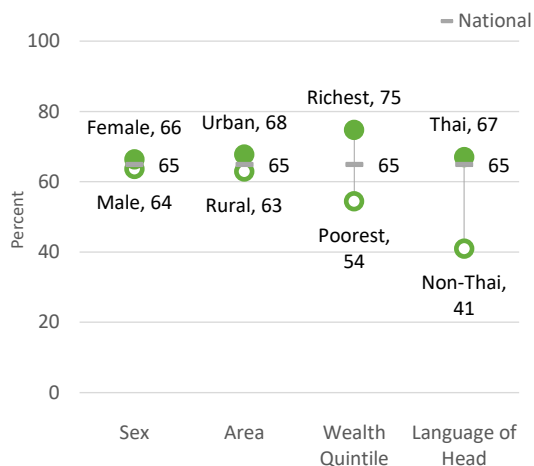
Disaggregates in Foundational Reading Skills

Regional Data on Foundational Reading Skills

Region	Boys	Girls	Total
National	**68**	**75**	**71**
Bangkok	78	83	81
Central	70	82	75
North	70	77	74
Northeast	68	69	68
South	58	68	63

Disaggregates in Foundational Numeracy Skills

Regional Data on Foundational Numeracy Skills

Region	Boys	Girls	Total
National	**64**	**66**	**65**
Bangkok	74	75	75
Central	73	75	74
North	56	66	61
Northeast	63	60	62
South	51	61	56

Reading & Numeracy Skills Data in MICS

- The Foundational Learning module adopts a direct assessment method for children's early learning in reading and mathematics at the level of Grade 2 in primary education. This contributes to SDG4.1.1.(a) Global Indicator.
- For the Foundational Learning module, one child age 7 to 14 (inclusively) is randomly selected in each household.
- The content of reading assessment is customized in each country, ensuring that the vocabulary used are part of the Grade 2 reading textbook. This ensures national question relevance in terms of vocabulary and cultural appropriateness. The questions on mathematics are based on universal skills needed for that grade level.
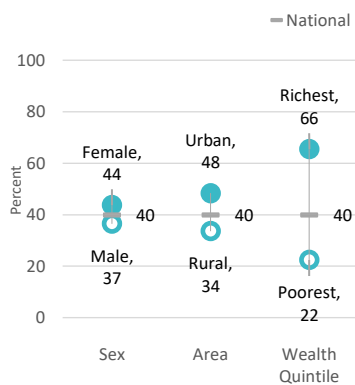- As MICS also collects data on school attendance and numerous individual and household characteristics, such as location, household socio-economic status, and language, the most marginalized sub-populations of children can be identified for support to improve learning outcomes. Without intervention the literacy gap between good and poor readers widens.
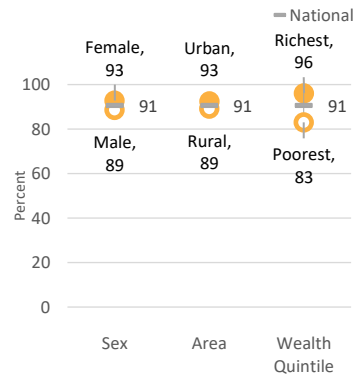
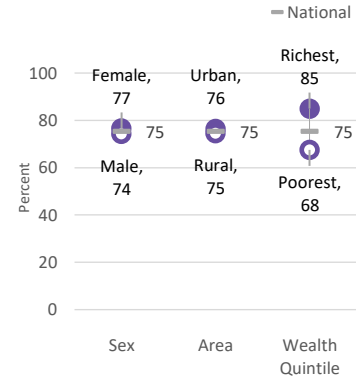# Parental Involvement: Learning Environment at Home

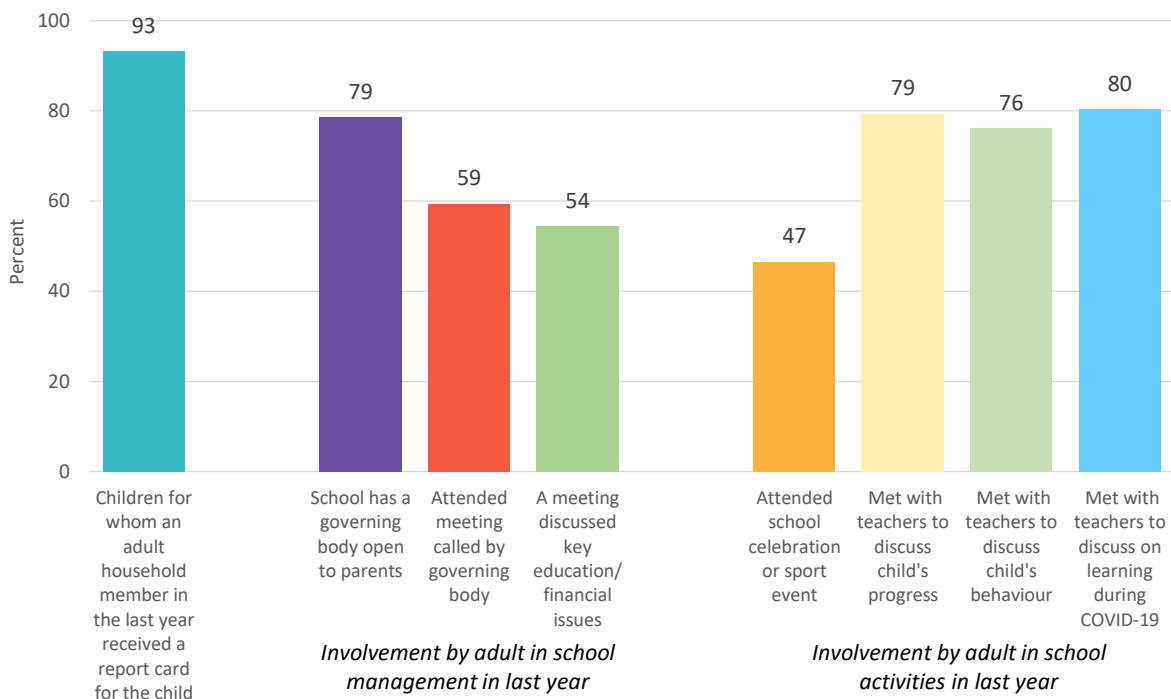### Children with 3 or more books to read at home

National

- Female, 44
- Male, 37
- Urban, 48
- Rural, 34
- Richest, 66
- Poorest, 22
- 40 / 40 / 40

(Sex, Area, Wealth Quintile)

Children who read books or are read to at home

National

- Female, 93
- Male, 89
- Urban, 93
- Rural, 89
- Richest, 96
- Poorest, 83
- 91 / 91 / 91

(Sex, Area, Wealth Quintile)

Children who receive help with homework

National

- Female, 77
- Male, 74
- Urban, 76
- Rural, 75
- Richest, 85
- Poorest, 68
- 75 / 75 / 75

(Sex, Area, Wealth Quintile)

Parental Involvement: Support for learning at School

Category	Percent
Children for whom an adult household member in the last year received a report card for the child	93
School has a governing body open to parents	79
Attended meeting called by governing body	59
A meeting discussed key education/financial issues	54
Attended school celebration or sport event	47
Met with teachers to discuss child's progress	79
Met with teachers to discuss child's behaviour	76
Met with teachers to discuss on learning during COVID-19	80

Involvement by adult in school management in last year

Involvement by adult in school activities in last year

Key Messages

- Children in the richest wealth quintile were more likely to have 3 or more books to read at home (more than three-fifths) compared with those in the poorest wealth quintile (one-fifths).

- For more than 9 in 10 children, an adult household member in the last year received a report card for the child.

- More than 8 out of 10 children in the richest quintile compared to less than seven-tenths of the poorest received help at home for schoolwork.

- Seventy-nine and 76 percent of the parents attended meetings with teachers to discuss their children's progress and behaviour, respectively.
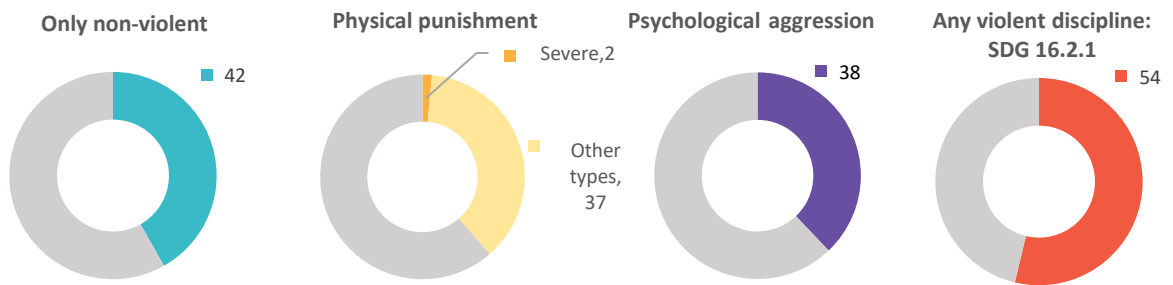
© UNICEF Thailand/2021/Sukhum Preechapanich
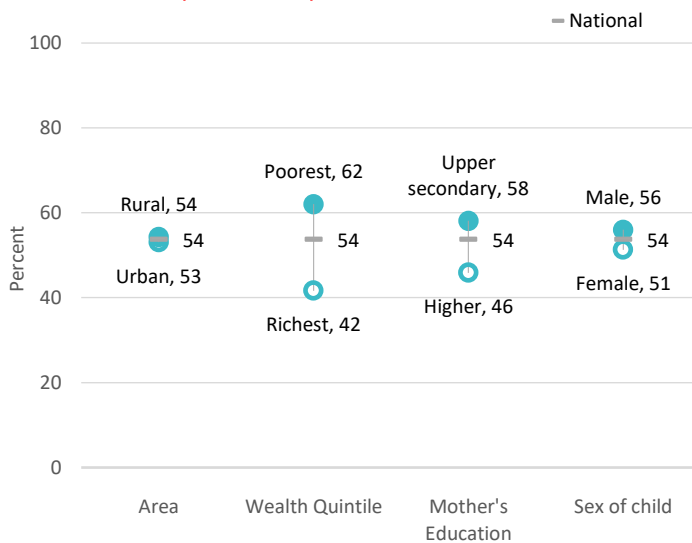
Child Discipline

Child Discipline

Types of Child Discipline

Only non-violent

■ 42

Physical punishment

■ Severe, 2

■ Other types, 37

Psychological aggression

■ 38

Any violent discipline: SDG 16.2.1

■ 54

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

Violent Discipline: Inequalities

— National

Rural, 54
Urban, 53
54

Poorest, 62
Richest, 42
54

Upper secondary, 58
Higher, 46
54

Male, 56
Female, 51
54

Percent

Area | Wealth Quintile | Mother's Education | Sex of child

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

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

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

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

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

Key Messages

- More than half of children age 1-14 years experienced any violent discipline while 1% experienced severe physical punishment in the past month.

- The use of violent discipline was lower among the richest and mothers with higher education.

- Among age group, physical punishment and any violent discipline are highest among children 3-4 years of age.

- Almost two out of five of respondents think that physical punishment is necessary and almost two out of five of children age 1-14 years experienced any physical punishment.

- The more educated or wealthier respondents are, the less they feel or think that physical punishment is necessary to raise or educate children.
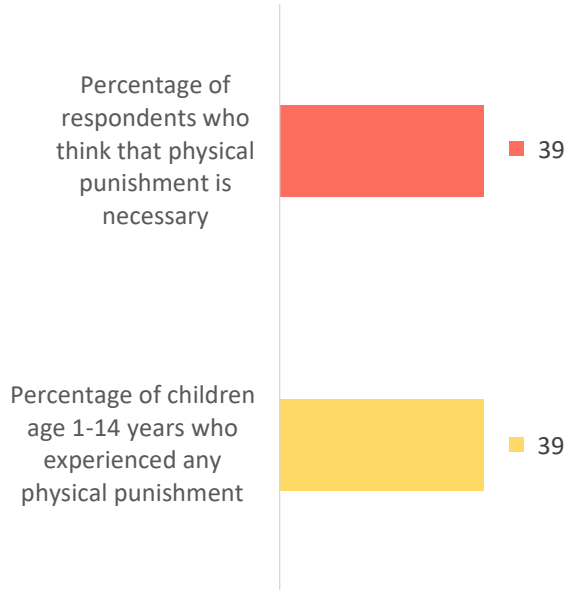
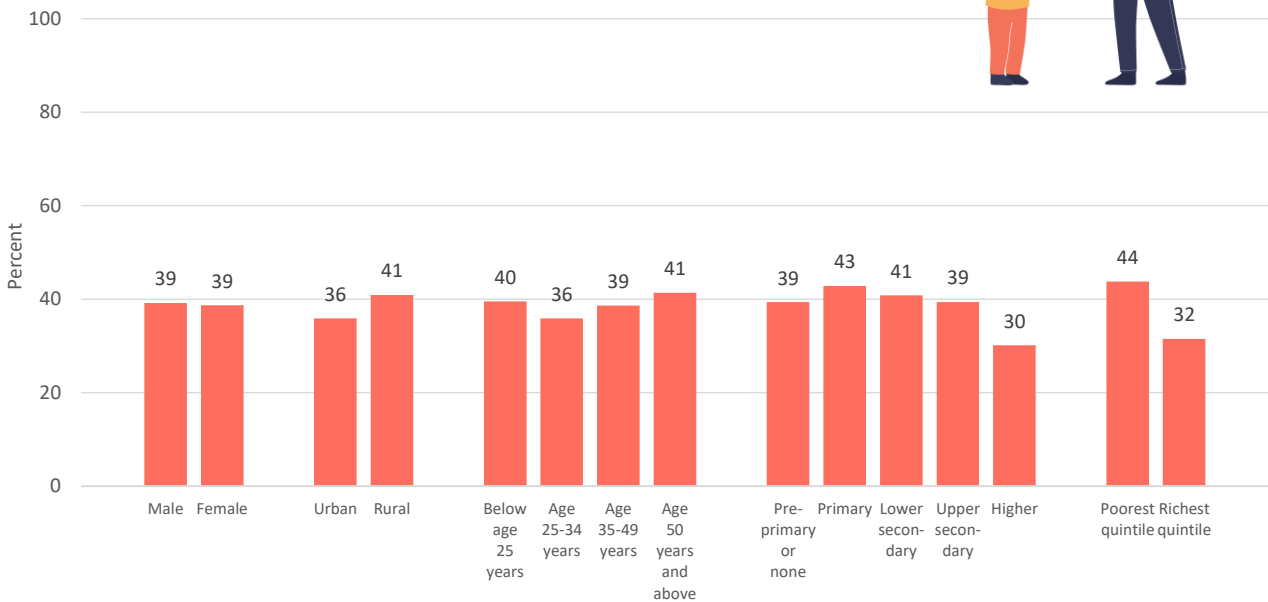## Violent Discipline: Age Patterns

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

Legend:
- Psychological aggression
- Physical punishment
- Severe physical punishment
- Any violent discipline

Y-axis: Percent (0, 20, 40, 60, 80, 100)
X-axis: 1-2 years, 3-4 years, 5-9 years, 10-14 years
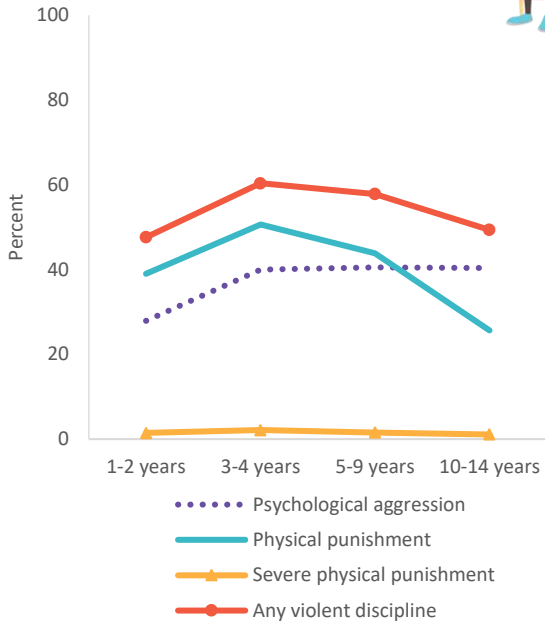
Physical Punishment: Attitudes & Experiences

Percentage of respondents who think that physical punishment is necessary — 39

Percentage of children age 1-14 years who experienced any physical punishment — 39

Attitudes to Physical Punishment

Male	Female		Urban	Rural		Below age 25 years	Age 25-34 years	Age 35-49 years	Age 50 years and above		Pre-primary or none	Primary	Lower secon-dary	Upper secon-dary	Higher		Poorest quintile	Richest quintile
39	39		36	41		40	36	39	41		39	43	41	39	30		44	32

Percentage of mothers/caretakers who think that physical punishment is necessary to raise or educate children, by their background characteristics

Child Marriage

Child Marriage: Levels & Disaggregates

Marriage before Age 15 & Age 18: SDG 5.3.1

Married by 18 — 17
Married by 15 — 6
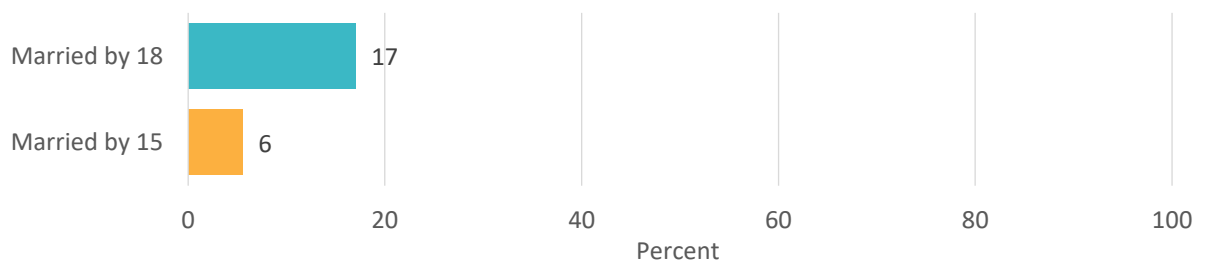
Percent

Percentage of women age 20-24 years who were first married or in union before age 15 and before age 18

The above chart refers to women aged 20 to 24 years, as this youngest cohort most recently completed exposure to the risk of marrying in childhood, thus giving a closer approximation of the current prevalence of child marriage. The following charts, which show disaggregation by background characteristics, refer to the full cohort of women aged 20 to 49 years.

Disaggregates in Marriage before Age 18

Total 16, Urban 13, Rural 20, Pre-primary or none 25, Primary 30, Lower secondary 29, Upper secondary 16, Higher 4, Poorest 26, Second 20, Middle 15, Fourth 14, Richest 8
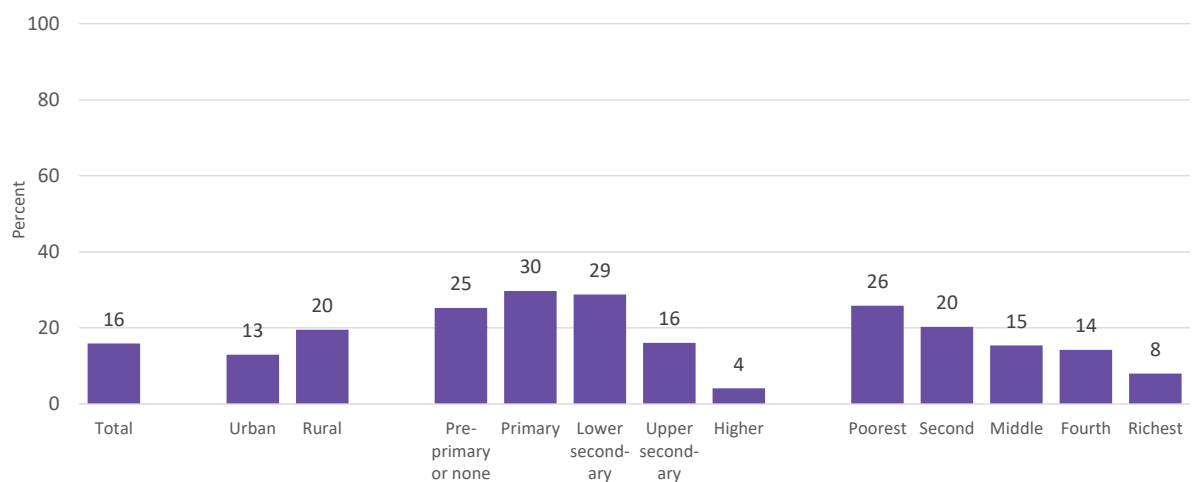
Percentage of women age 20-49 years who were first married or in union before age 18, by area, education and wealth quintile

Key Messages

- Seventeen percent of women aged 20-24 years were first married or in union before age 18 and 6% of women for the same age group were first married or in union before age 15.

- A higher prevalence of child marriage is seen in rural than in urban areas.

- Child marriage by age 18 was more common in the North region than other regions.

- The percentage of women age 20-49 years who were first married or in union before age 15 and before age 18 has remained generally constant across all age cohorts over time.

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Regional Data on Child Marriage

Region	Marriage by age 18
National	16
Bangkok	10
Central	14
North	21
Northeast	19
South	18

Percentage of women aged 20 to 49 years who were first married or in union before age 18, by region

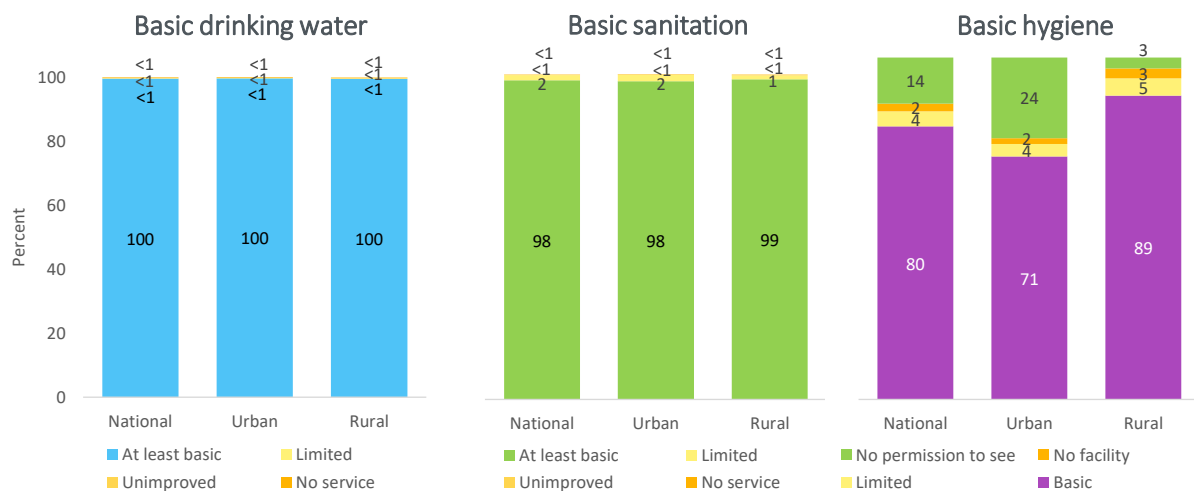Marriage before the age of 18 is a reality for many young girls. In many parts of the world parents encourage the marriage of their daughters while they are still children in hopes that the marriage will benefit them both financially and socially, while also relieving financial burdens on the family.

In actual fact, child marriage is a violation of human rights, compromising the development of girls and often resulting in early pregnancy and social isolation, with little education and poor vocational training reinforcing the gendered nature of poverty.

The right to 'free and full' consent to a marriage is recognized in the Universal Declaration of Human Rights - with the recognition that consent cannot be 'free and full' when one of the parties involved is not sufficiently mature to make an informed decision about a life partner.

Trends in Child Marriage

Percentage of women age 20-49 years who were first married or in union before age 15 and before age 18, by age cohort

Drinking Water, Sanitation and Hygiene (WASH)

Basic Drinking Water, Sanitation & Hygiene Services

Basic drinking water

	National	Urban	Rural
	<1	<1	<1
	<1	<1	<1
	<1	<1	<1
At least basic	100	100	100

Basic sanitation

	National	Urban	Rural
	<1	<1	<1
	<1	<1	<1
	2	2	1
At least basic	98	98	99

Basic hygiene

	National	Urban	Rural
No permission to see	14	24	3
No facility	2	2	3
Limited	4	4	5
Basic	80	71	89

Basic drinking water legend:
- ■ At least basic
- ■ Limited
- ■ Unimproved
- ■ No service

Basic sanitation legend:
- ■ At least basic
- ■ Limited
- ■ Unimproved
- ■ No service

Basic hygiene legend:
- ■ No permission to see
- ■ No facility
- ■ Limited
- ■ Basic

Percent of population by drinking water, sanitation and hygiene coverage

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

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

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

Key Messages

- Nearly all population accessed to basic drinking water and basic sanitation and 8 in 10 population accessed to basic hygiene.

- Basic drinking water in the South was lower than other regions and basic hygiene was highest in North region.

- Rural and urban dwellers were indifferent to access basic drinking water and basic sanitation.

- Almost fourth-fifths of population accessed on site sanitation facilities and 23% of population accessed sewer connection.

- Almost three-tenths of population had safe disposal of excreta on-site and seven-tenths potentially safely managed.

# WASH: Inequalities in Basic Services

Basic Drinking Water
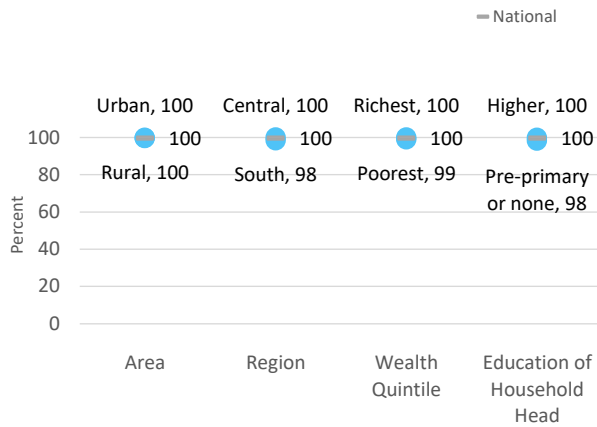
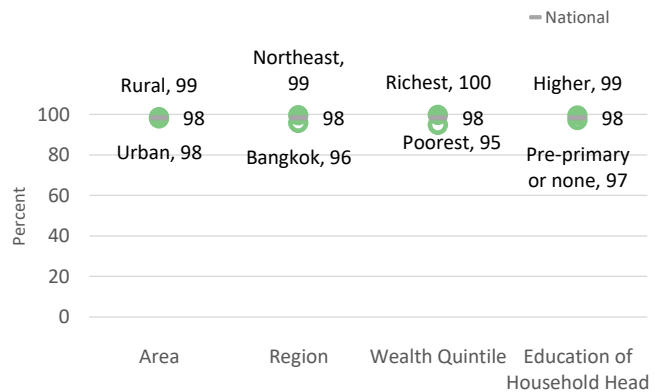Percent of population using basic drinking water services by background characteristics

Regional Data on Basic Services

Region	Basic Drinking Water	Basic Sanitation	Basic Hygiene
National	**100**	**98**	**80**
Bangkok	100	96	38
Central	100	99	82
North	99	99	92
Northeast	100	99	91
South	98	98	81

Percent of population using basic drinking water, sanitation and hygiene services by region
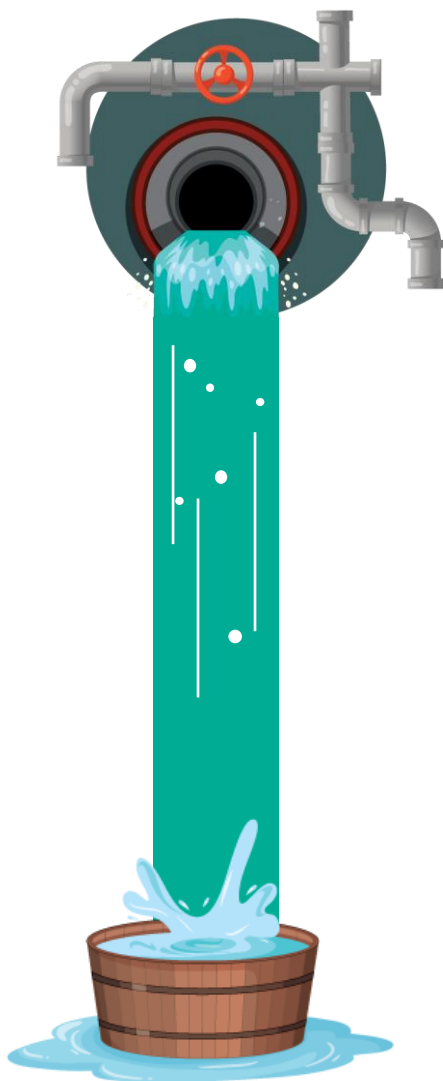
Basic Sanitation

Percent of population using basic sanitation services by background characteristics

Basic Hygiene
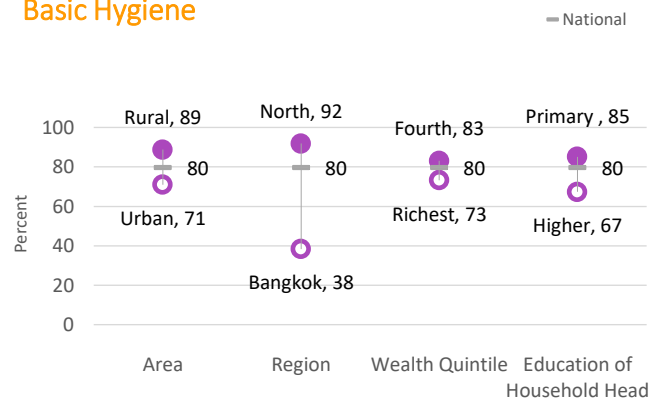
Percent of population using basic hygiene services by background characteristics

Safely Managed Sanitation Services: SDG 6.2.1

Types of Sanitation Facility

Sewer connection		23
Onsite sanitation		77
Unimproved	<1	
No sanitation facility	<1	
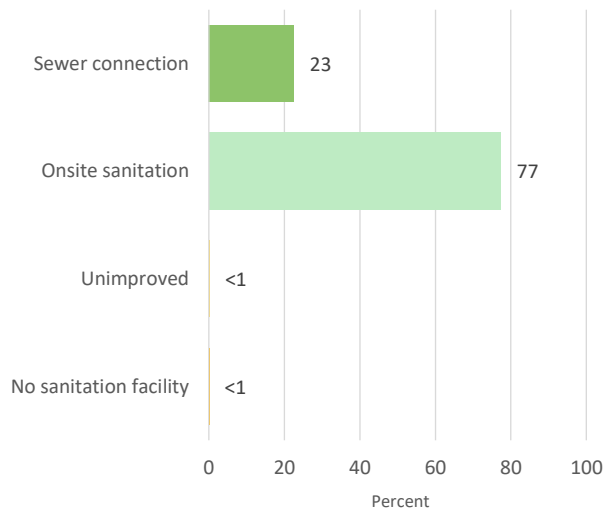
Percent

Percent of population by type of sanitation facility, grouped by type of disposal

Types of Sanitation Facility by Region

Region	Sewer connection	Onsite sanitation
National	23	77
Bangkok	57	43
Central	33	67
North	10	90
Northeast	5	95
South	12	88

Percent of population using sewer connections and onsite sanitation, by region

Sewer connections include "Flush/pour flush to piped sewer system" and "Flush to DK where"
Onsite sanitation facilities include "Flush/pour flush to septic", "Flush/pour flush to latrine", "Ventilated improved pit latrine" and "Pit latrine with slab"

Management of excreta from household sanitation facilities

Legend:
- Not safely managed
- Potentially safely managed*
- Safe disposal of excreta on-site

Safe disposal in situ of excreta from on-site sanitation facilities	Removal of excreta for treatment from on-site sanitation facilities	Connected to sewer	Unsafe disposal of excreta from on-site sanitation facilities	Using unimproved sanitation facilities	Practising open defecation
28	48	23	1	<1	<1
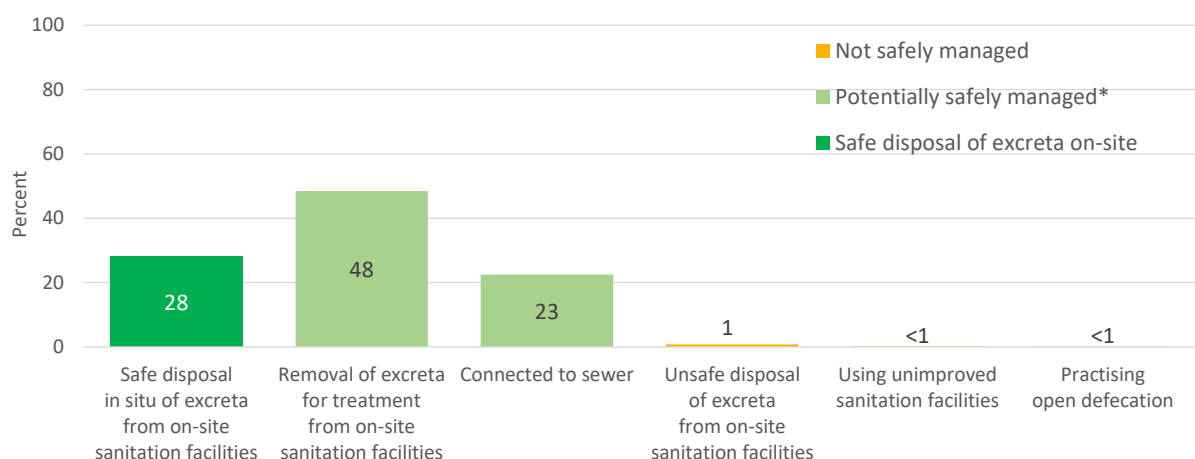
Percent of population by management of excreta from household sanitation facilities
* Additional information required to determine whether faecal sludge and wastewater is safely treated.

Safely managed sanitation services represents an ambitious new level of service during the SDGs and is the indicator for target 6.2. Safely managed sanitation services are improved facilities that are not shared with other households and where excreta are safely disposed of in situ or transported and treated offsite. The MICS survey collected information on the management of excreta from onsite facilities. For households where excreta are transported offsite (sewer connection, removal for treatment), further information is needed on the transport and treatment of excreta to calculate the proportion that are safely managed.

43

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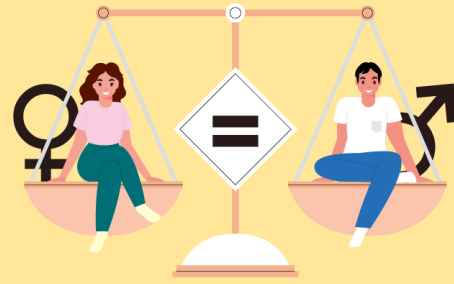
Gender equality means that girls and boys, women and men, enjoy the same rights, resources, opportunities and protections. Investments in gender equality contribute to lifelong positive outcomes for children and their communities and have considerable inter-generational payoffs because children's rights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

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

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

Malnutrition: Stunting (Moderate & Severe) among Children Under-5, SDG 2.2.1
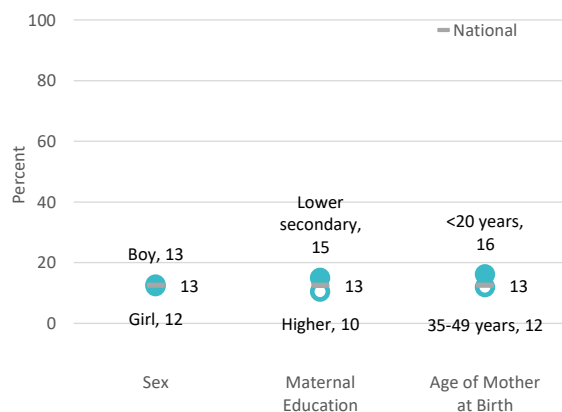
Stunting refers to a child too short for his or her age
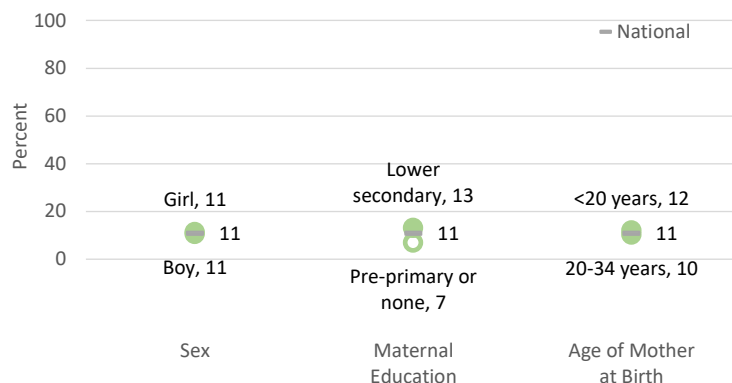
Malnutrition: Wasting (Moderate & Severe) among Children Under-5, SDG 2.2.2
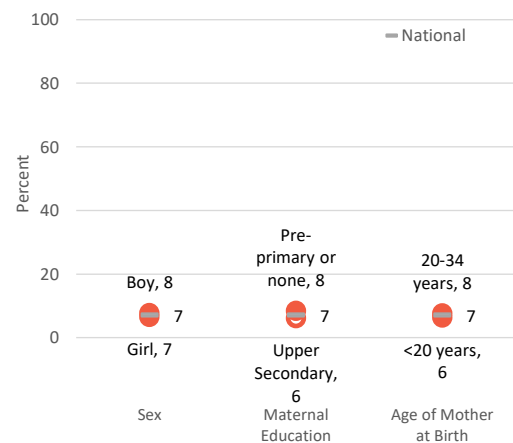
Wasting refers to a child who is too thin for his or her height

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

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

─ National

Girl, 11	Lower secondary, 13	<20 years, 12
11	11	11
Boy, 11	Pre-primary or none, 7	20-34 years, 10
Sex	Maternal Education	Age of Mother at Birth

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

Early Stimulation & Responsive Care by Adults
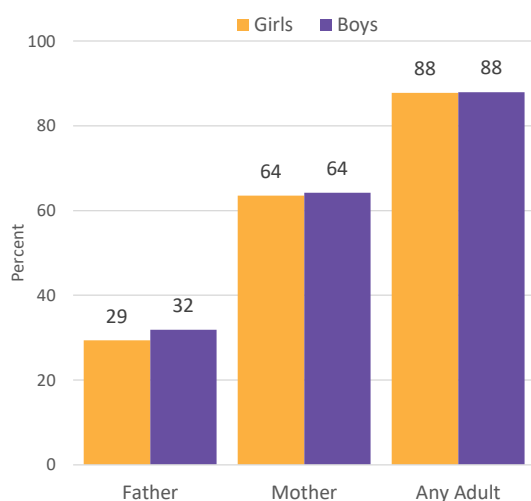
■ Girls ■ Boys

	Girls	Boys
Father	29	32
Mother	64	64
Any Adult	88	88

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

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

Early Childhood Development Index (ECDI2030), SDG 4.2.1
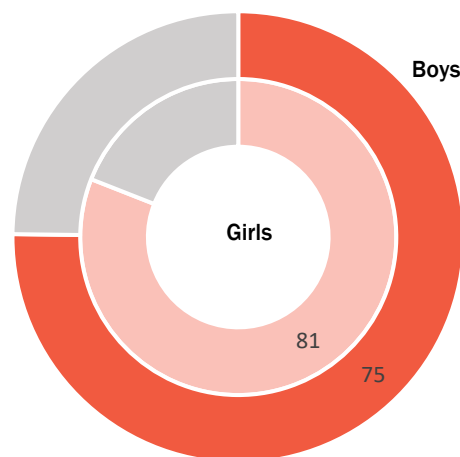
Boys

Girls

81

75

Percentage of children age 24-59 months who are developmentally on track in health, learning and psychosocial well-being

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

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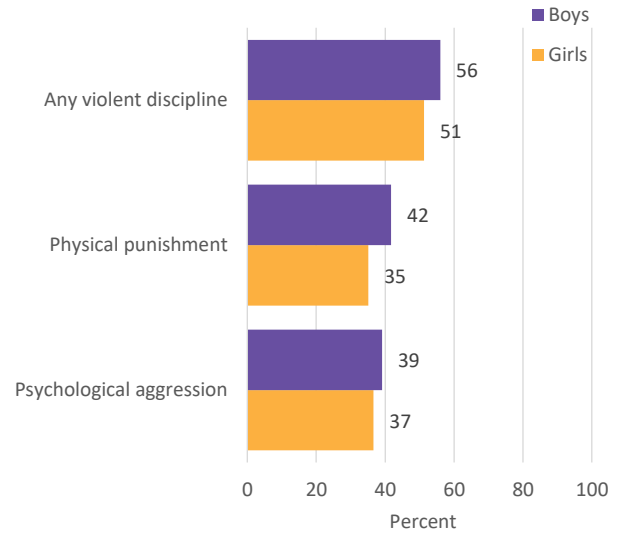
Every Girl & Boy Is Protected From Violence & Exploitation: The First Decade of Life

Birth Registration, SDG 16.9.1 Sex Disaggregate

Boy, 100 — 100
Girl, 100

Higher, 100 — 100
Pre-primary or none, 99

Percent: 100, 80, 60, 40, 20, 0

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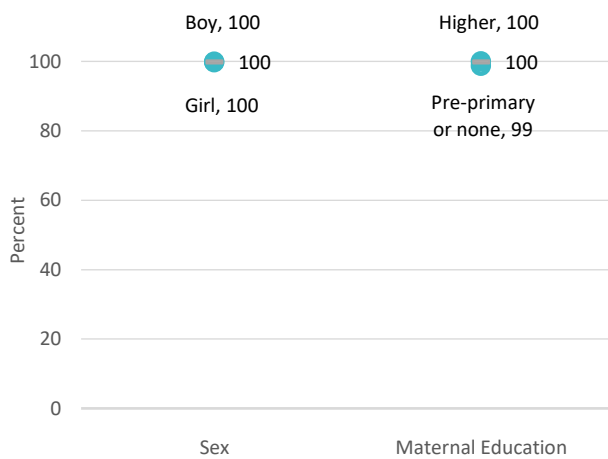
Percentage of children under age 5 whose births are registered, by sex and maternal education level

Violent Discipline, SDG 16.2.1 Sex Disaggregate

Legend: Boys (purple), Girls (orange)

Category	Boys	Girls
Any violent discipline	56	51
Physical punishment	42	35
Psychological aggression	39	37

Percent: 0, 20, 40, 60, 80, 100

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

Every Girl & Boy Learns: The First Decade of Life

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

Note: Because children of primary school age range from 6-11 years, these indicators include some children in their second decade of life.

Participation Rate in Organized Learning, SDG 4.2.2

	Girls	Boys
Percent	87	89

Percent: 100, 80, 60, 40, 20, 0
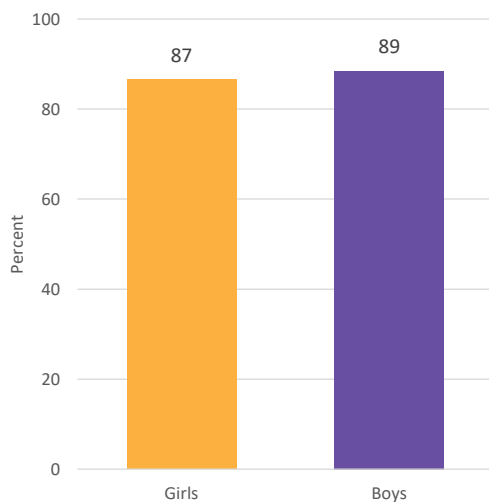
Percent distribution of children age one year younger than the official primary school entry age at the beginning of the school year attending to an early childhood education programme or primary education (adjusted net attendance ratio), by sex
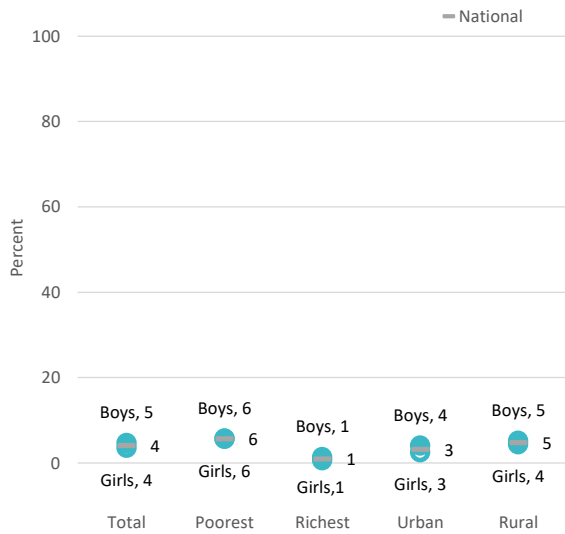
Primary School Attendance

National

Total: Boys, 94 — 94; Girls, 93
Poorest: Boys, 92 — 92; Girls, 92
Richest: Girls, 97 — 96; Boys, 96
Urban: Girls, 94 — 94; Boys, 94
Rural: Boys, 93 — 93; Girls, 93

Percent: 100, 80, 60, 40, 20, 0

Total   Poorest   Richest   Urban   Rural
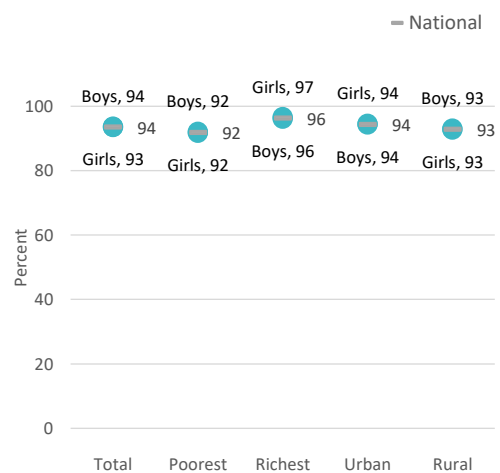
Percentage of children of primary school age attending primary or secondary school (adjusted net attendance ratio), by wealth quintile and urban/rural residence
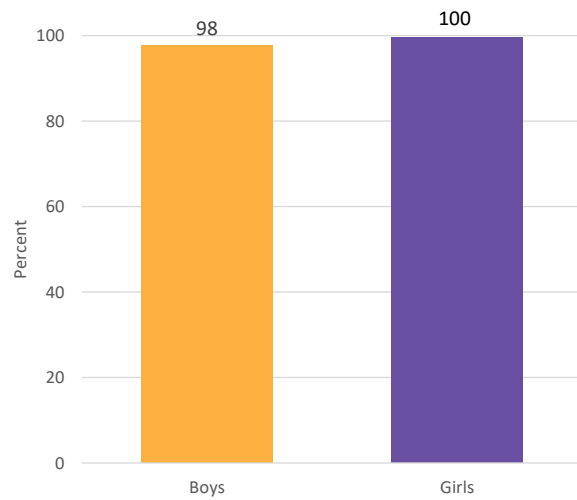
Children of Primary School Age Out of School

─ National

Boys, 5
4

Girls, 4

Total

Boys, 6
6

Girls, 6

Poorest

Boys, 1
1

Girls,1

Richest

Boys, 4
3

Girls, 3

Urban

Boys, 5
5

Girls, 4

Rural

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

Primary Completion

	98	100
	Boys	Girls

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

Key Messages

- For malnutrition indicators, the widest gap was observed in overweight by maternal education.

- More boys were too short for their age (stunting) than girls (13% and 12%, respectively).

- Among children age 2-4 years with whom adult household members engaged in activities, mothers were more likely to interact with children compared with father.

- Girls age 24-59 months were developmentally on track at higher rate than boys.

- Boys age 1-14 years were more likely to experience psychological aggression; physical punishment and any violent discipline compared with girls.

- Around 4% of children of primary school age were out of school.

- Almost all children, both boys and girls age 3 to 5 years the intended age for the last grade (age 14-16 years), had completed primary education.

Every Adolescent Girl & Boy Survives & Thrives: The Second Decade of Life

While adolescence carries new health risks for both girls and boys, girls often face gender-specific vulnerabilities, with lifelong consequences. Complications related to pregnancy and childbirth are among the leading causes of death worldwide for adolescent girls age 15 to 19. Preventing adolescent pregnancy not only improves the health of adolescent girls, but also provides them with opportunities to continue their education, preparing them for jobs and livelihoods, increasing their self-esteem and giving them more say in decisions that affect their lives. Yet, too often, adolescent girls lack access to appropriate sexual and reproductive health services, including modern methods of contraception.

Additionally, despite having a higher risk of contracting HIV due to both greater physiological vulnerabilities and gender inequalities, adolescent girls are often less knowledgeable than adolescent boys about how HIV is transmitted. However, gender norms adversely impact adolescent boys as well. For example, norms around masculinity that encourage risk taking may heighten adolescent boys' use of alcohol and tobacco, increasing their likelihood of developing noncommunicable diseases later in life.

Contraceptive Use & Demand Satisfied
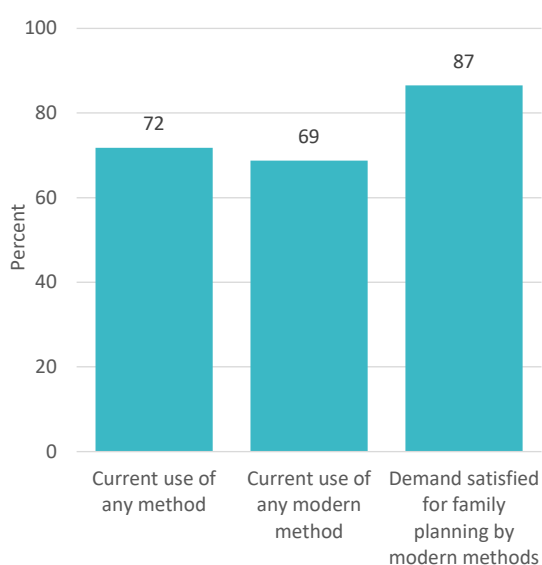
Contraceptive use and demand for family planning satisfied by modern methods among adolescent married girls age 15-19

Early Childbearing - by Age 18
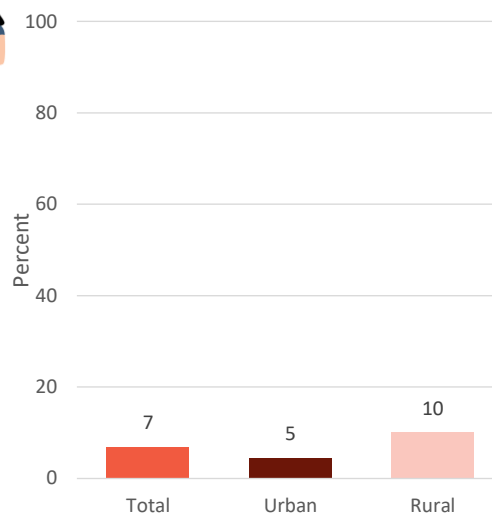
Percentage of women age 20-24 years who had a live birth by age 18, by urban/rural residence

Comprehensive Knowledge of HIV
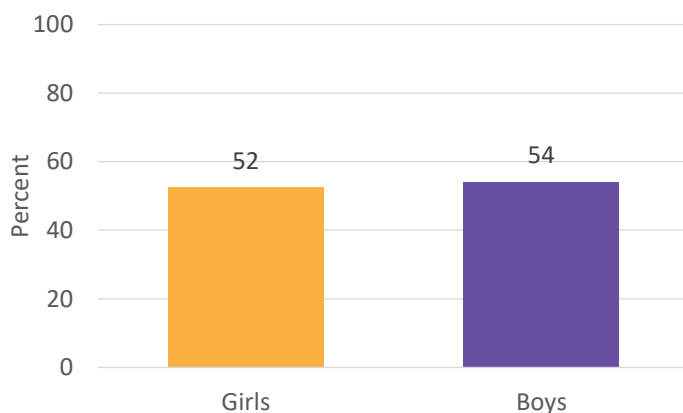
Percent of girls and boys age 15-19 who know of the two ways of HIV prevention (having only one faithful uninfected partner and using a condom every time), who know that a healthy looking person can be HIV-positive, and who reject the two most common misconceptions.

Every Adolescent Girl & Boy is Protected from Violence & Exploitation: The Second Decade of Life

Adolescence presents unique vulnerabilities to violence and exploitation for girls. In many countries, marriage before the age of 18 is a reality for girls due to the interaction of several factors that place a girl at risk, including poverty, social norms, customary or religious laws that condone the practice, an inadequate legislative framework and the state of a country's civil registration system. Child marriage often compromises a girl's development by resulting in early pregnancy and social isolation, interrupting her schooling, and limiting her opportunities for career and vocational advancement. It also often involves a substantial age difference between the girl and her partner, thus further disempowering her and putting her at greater risk of partner violence, sexually transmitted diseases and lack of agency. Attitudes about wife beating serve as a marker for the social acceptability of intimate partner violence. Acceptance of wife beating among adolescent girls and boys suggests that it can be difficult for married girls who experience violence to seek assistance and for unmarried girls to identify and negotiate healthy and equitable relationships. Female genital mutilation is a human rights issue that also affects girls and women. Adolescence, in particular, is a vulnerable period for girls who have undergone FGM because they may experience heightened consequences of the procedure as they become sexually active and begin childbearing. Gender-based discrimination may be one of the most ubiquitous forms of discrimination adolescent girls face, and it has long-lasting and far-reaching effects on their personal trajectories as well as on all aspects of social and economic development. While in most regions, girls and boys are equally likely to be involved in child labour, gender is a determinant of the types of activities boys and girls engage in, with girls more likely to be involved in domestic work.

Child Marriage, SDG 5.3.1
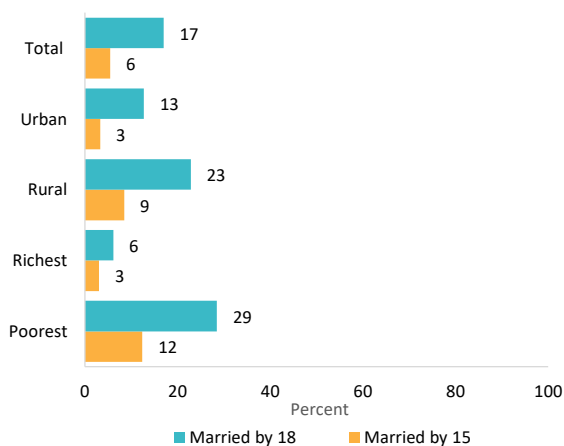
Percentage of women aged 20-24 years who were first married or in union before age 15 and before age 18*, by residence and wealth quintile
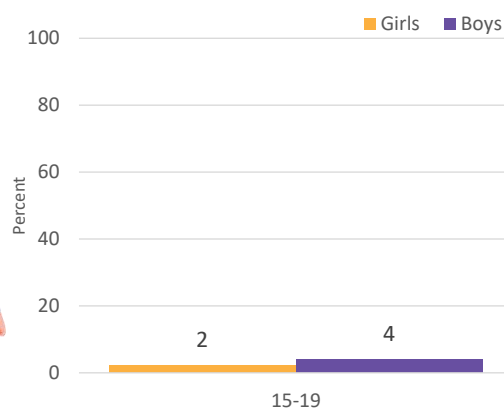
Spousal Age Difference
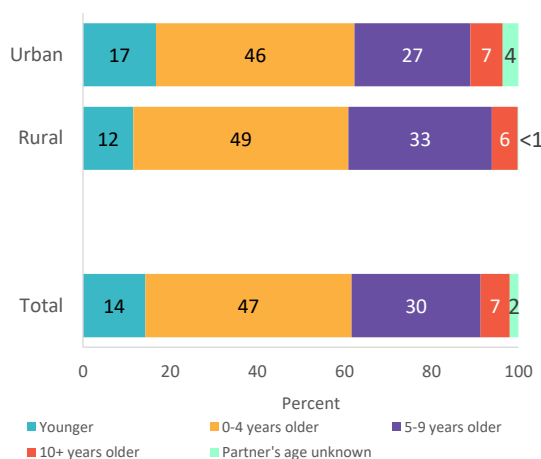
Percent distribution of adolescent girls age 15-19 currently married or in union by age difference with their husband or partner and area

Feelings of Safety, SDG 16.1.4 Age & Sex Disaggregate
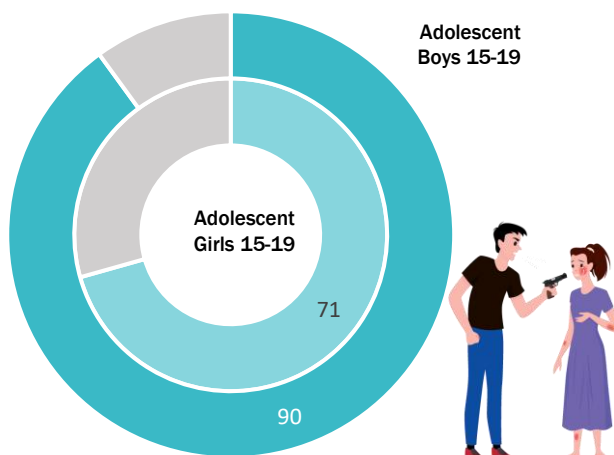
Percentage of adolescents age 15-19 who feel safe walking alone in their neighborhood after dark, by sex

Attitudes toward Domestic Violence

Percentage of adolescents age 15-19 years who justify wife beating for any of the following reasons: she goes out without telling him; she neglects the children; she argues with him; she refuses sex with him; she burns the food, by sex
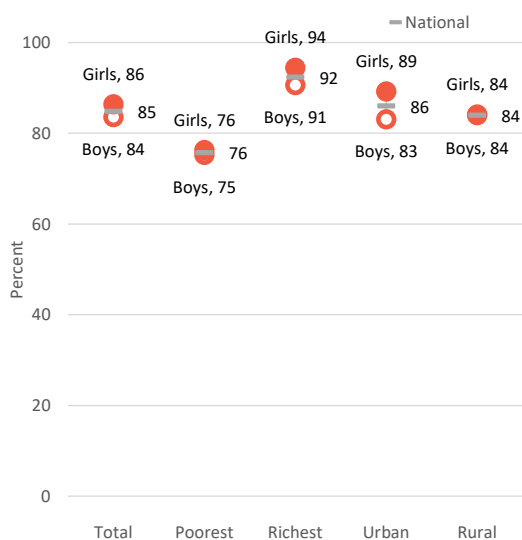
Every Adolescent Girl & Boy Learns :
The Second Decade of Life

While participation in secondary education is expanding, progress lags behind primary education. Gender disparities disadvantaging girls are also wider and occur in more countries at the secondary level than at the primary level. Yet, advancing girls' secondary education is one of the most transformative development strategies countries can invest in.

Completion of secondary education brings significant positive benefits to girls and societies – from increased lifetime earnings and national growth rates, to reductions in child marriage, stunting, and child and maternal mortality.

Lower Secondary Attendance
Net Attendance Rate

National

Girls, 94
Girls, 86
85
Girls, 89
Girls, 84
92
Boys, 84
Girls, 76
Boys, 91
86
84
76
Boys, 75
Boys, 83
Boys, 84
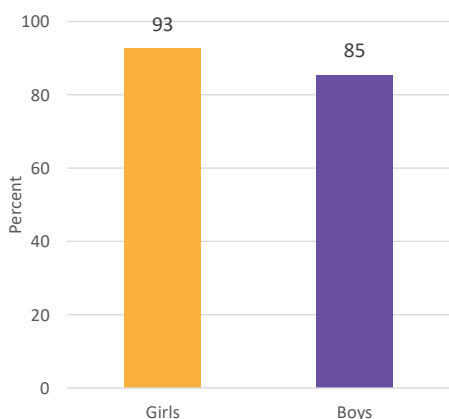
Percent

Total   Poorest   Richest   Urban   Rural

Percentage of children of lower secondary school age attending lower secondary school or higher (adjusted net attendance ratio), by sex, wealth quintile and area

Upper Secondary Attendance
Net Attendance Rate

National

Girls, 94
Girls, 81
74
89
Girls, 82
Girls, 80
Girls, 62
74
74
Boys, 85
Boys, 67
56
Boys, 68
Boys, 67
Boys, 51

Percent

Total   Poorest   Richest   Urban   Rural

Percentage of children of upper secondary school age attending upper secondary school or higher (adjusted net attendance ratio), by sex, wealth quintile and area

Lower Secondary Completion

93
85

Percent

Girls   Boys

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

Upper Secondary Completion
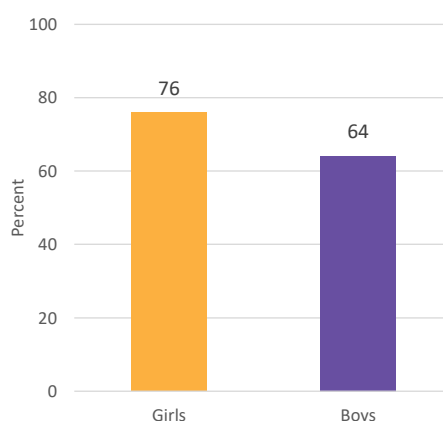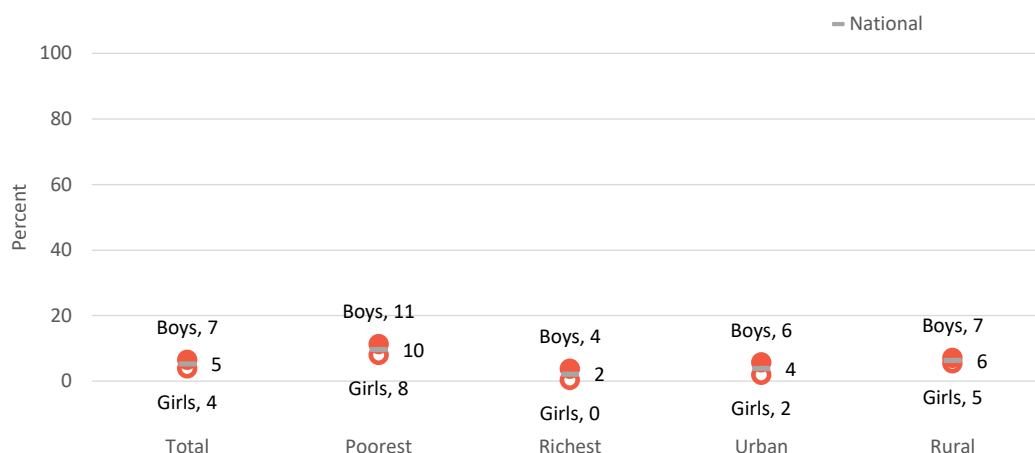
76
64

Percent

Girls   Boys

Percentage of children or youth who age 3 to 5 years above the intended age for the last grade of upper secondary school who have completed upper secondary education, by sex
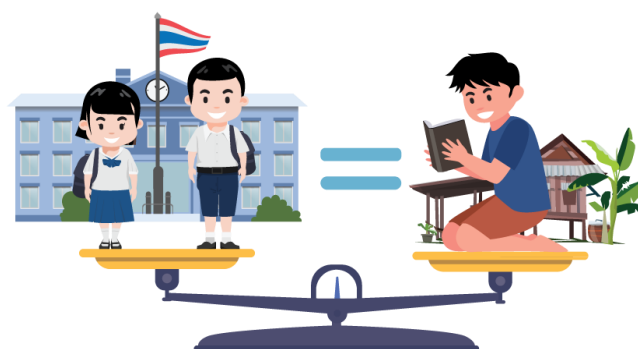
Children of Lower Secondary School Age Out of School

— National

	Total	Poorest	Richest	Urban	Rural
Boys	7	11	4	6	7
(mid)	5	10	2	4	6
Girls	4	8	0	2	5

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

Key Messages

- Seven in hundred women age 20-24 years had a live birth before age 18.

- Childbearing among young women by age 18 years is double higher for rural than urban.

- More than half of children (both girls and boys) age 15-19 years had comprehensive knowledge of HIV.

- Less than one in ten adolescent girls age 15-19 years currently married or in union had spouse who was older by 10 or more years.

- Seven out of 10 girls age 15-19 years reported that they feel safe walking alone in their neighborhood after dark compared with about 9 out of 10 boys.

- Gender disparity in lower and upper secondary attendance was widest among children in urban.

- Girls age 3 to 5 years above the intended age for the last grade were more likely to complete lower secondary and upper secondary at higher rates than boys.

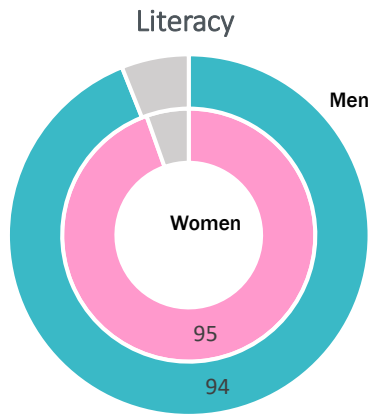- Boys of lower secondary school age were out of school at higher rate than girls.
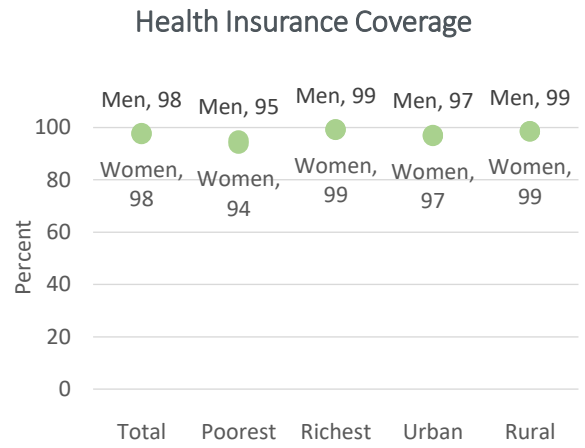
Gender Equality in Adulthood
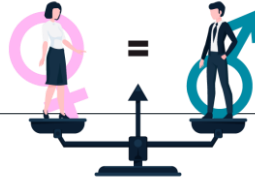
To survive and thrive, all children require care and support from women and men. Care and support can be substantively improved by fostering gender equality, an important goal in its own right, and by reducing the gender-related barriers. Gender-related barriers include women's and girls' disproportionate lack of information, knowledge and technology, resources, and safety and mobility, as well as the gender division of labour and gender norms. For example, a mother's lack of mobility, due to prohibitive norms or lack of transportation, may impede birth registration, nutrition, and other child outcomes. The internalization of gender norms around masculine and feminine expectations and behaviours may influence women's and men's attitudes toward intimate partner violence and physical punishment of children as well as self-perceptions of well-being, including life satisfaction and expectations for the future.

Access to Knowledge

Literacy

Men 94
Women 95

Percentage of adults age 15-49 who are literate, by sex

Access to Resources

Health Insurance Coverage

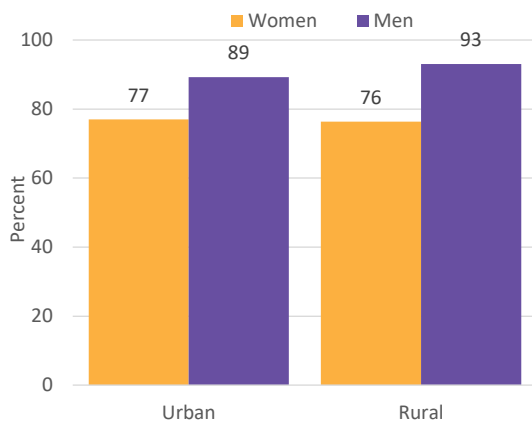|	Total	Poorest	Richest	Urban	Rural
Men	98	95	99	97	99
Women	98	94	99	97	99

Percentage of adults age 15-49 with health insurance, by sex, wealth quintile and area

Safety & Security

Feeling safe while walking alone, SDG 16.1.4 sex disaggregate

	Women	Men
Urban	77	89
Rural	76	93

Percentage of adults (age 15-49) who feel safe walking alone in their neighborhood after dark, by sex and area

Feeling safety while being at home alone
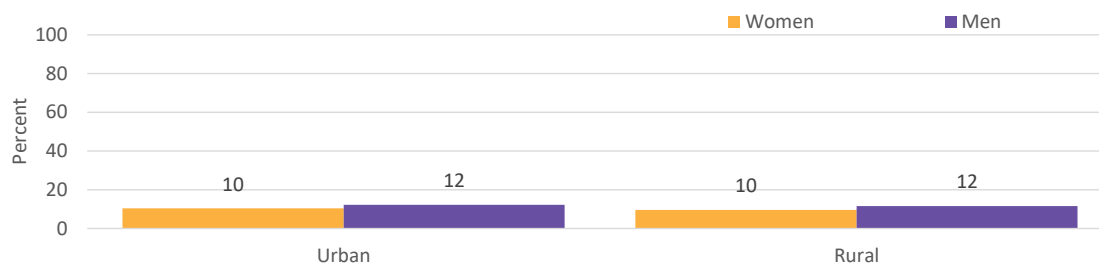

	Women	Men
Urban	91	97
Rural	90	97
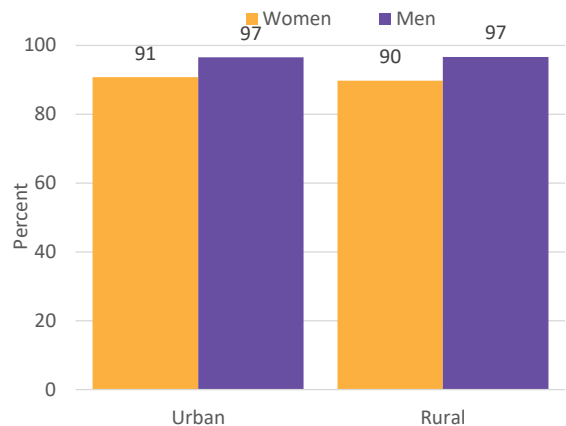
Percentage of adults (age 15-49) who feel safe being home alone after dark, by sex and area

Gender Equality in Adulthood

Discrimination & harassment

Legend: Women (orange), Men (purple)

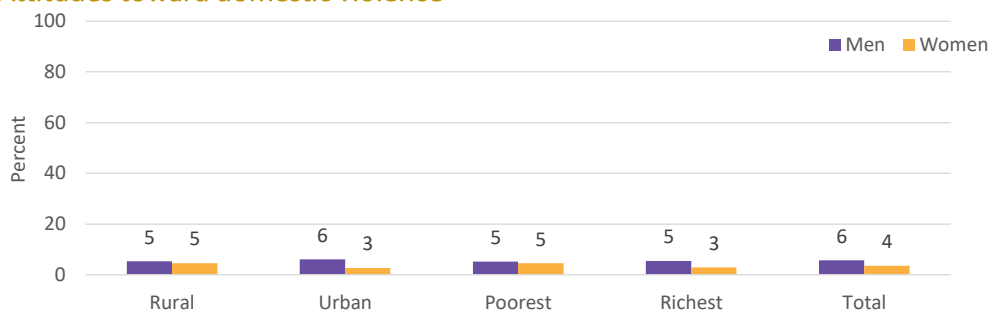|	Urban	Rural
Women	10	10
Men	12	12

Percentage of adults age 15-49 who have ever personally felt discriminated or harassed based on their gender, by sex and area

## Feminine & masculine attitudes & expectations

Attitudes toward domestic violence

Legend: Men (purple), Women (orange)

	Rural	Urban	Poorest	Richest	Total
Men	5	6	5	5	6
Women	5	3	5	3	4

Percentage of adults age 15-49 who justify wife beating for any of the following reasons: she goes out without telling him; she neglects the children; she argues with him; she refuses sex with him; she burns the food, by sex, wealth quintile and area

Attitudes toward physical punishment

Men 39
Women 39
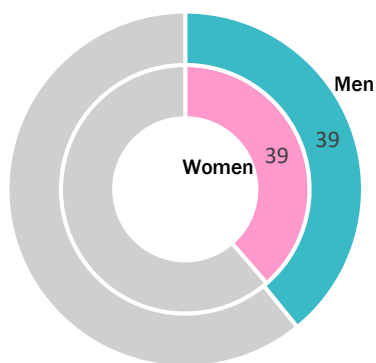
Percentage of caretakers who believe that physical punishment is needed to bring up, raise, or educate a child properly, by sex of caretaker

Key Messages

- More than 9 in 10 female and male adults age 15-49 years were literate.

- There is no difference between women and men in terms of health insurance coverage.

- More men age 15-49 years felt safe walking alone in their neighborhood after dark and felt safe being home alone after dark compared to women.

- There is no distinct difference between women and men in felt discriminated or harassed.

- Men in urban areas were more likely to justify wife beating than their female counterparts (6% compared to 3%).

- There is no difference between women and men believed that physical punishment is needed to bring up, raise or educate a child property.

MICS

GENERATING EVIDENCE TO DELIVER FOR CHILDREN

Snapshots of Key Findings Report