Better Care Network

Nigeria DHS 2013:
Children's Care and Living Arrangements

WITH SUPPORT FROM

USAID
FROM THE AMERICAN PEOPLE

This report was written by Garazi Zulaika and Florence Martin.

This series of country briefs aim to provide an analysis of children's living and care arrangements according to the latest available data from ***Demographic and Health Surveys (DHS)*** *or* ***Multiple Indicators Cluster Surveys (MICS)*** *at the time of publication.*

Better Care Network is working with partner organizations to support more systematic use of existing household level data sets, particularly ***Demographic and Health Surveys (DHS)*** *and* ***Multiple Indicators Cluster Surveys (MICS)****, to provide a better picture of the patterns and trends relating to children in households and their living and care arrangements. It does not seek at this stage to show how these various arrangements relate to particular outcomes for child well-being, although work is being carried out, to be able to do so as part of the Technical Working Group on Children and Care under the Child Protection Monitoring and Evaluation Reference Group (CP MERG). The content of these papers will evolve as a result, and feedback and suggestions are welcome on the content of the briefs as well as how they can be improved. Communications should be sent to* *Florence.martin@bettercarenetwork.org*

The briefs are targeted to policy makers, researchers, and practitioners working to inform policy and programs for children's care and protection at country and international levels. In order to enable researchers and policy makers in the countries and regions to conduct further analysis, tables with the data extracted for the purpose of this brief have been included at the end of this report.

Source of data, unless otherwise noted is DHS implementing partners and ICF International. (2000-2015). Demographic and Health Surveys 2000-2015. Data extract from DHS Recode files. Integrated Demographic and Health Series (IDHS), version 2.0, Minnesota Population Center and ICF International [Distributors]. Accessed from http://www.dhsprogram.com/.

Front cover map from National Population Commission (NPC) [Nigeria] and ICF International. 2014. Nigeria Demographic and Health Survey 2013. Abuja, Nigeria, and Rockville, Maryland, USA: NPC and ICF International.

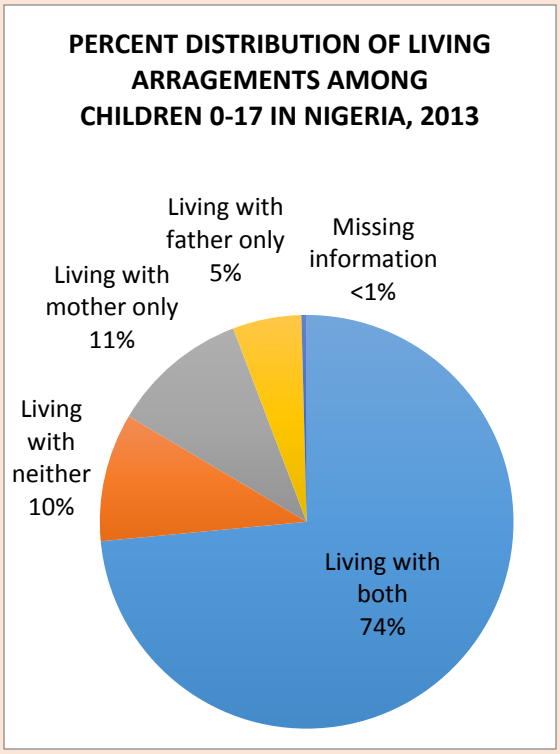
O**ther maps** are produced through ICF International. (2012). The DHS Program STATcompiler. Retrieved from http://www.statcompiler.com.

Suggested citation: Better Care Network. (2015). Nigeria DHS 2013: Children's Care and Living Arrangements, New York: Better Care Network.

The views expressed in this document do not necessarily reflect the views of the United States Agency for International Development or the United States Government.

EXECUTIVE SUMMARY:

Children's Living Arrangements:

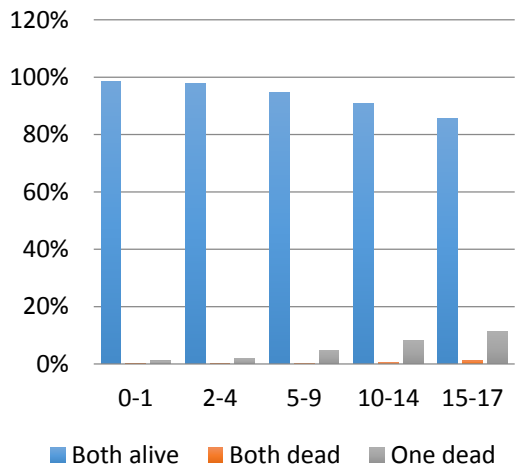


- Nearly 74% of children under the age of 18 in Nigeria live with both biological parents. 11% live with their biological mother, 5% with their biological father and 10% do not live with either biological parent.
- Large variations in living arrangement are seen according to gender, age group, rural-urban, and regional background characteristics.
  - Boys have a slightly higher likelihood of living with both biological parents when compared to girls age 0-17 (75% vs 72%); girls, on the other hand, are more likely to live with neither biological parent (12% vs 8%).
  - At an early age the large majority of children still live with both biological parents; this declines with age for children 0-17 (from 84% to 54%). Living with neither biological parent becomes more common as children get older (1% to 25%).
  - Wealth quintile appears to be associated with living with neither biological parent in Nigeria. Proportionally more children living in richer households live with neither biological parent relative to poorer households. Conversely, more children living in poorer households live with only their biological mother compared to households in richer quintiles in Nigeria.
  - High regional differences are seen in the prevalence of children 0-17 not living with a biological parent. While the North West region sees approximately 6% of children living with neither biological parent, on the opposite side of the country, nearly 15% of children 0-17 in the South East region live with neither their mother nor their father.
- In the western Africa regional context, Nigeria maintains one of the highest rates of living with both biological parents at 76% for children 0-14. This is significantly higher than countries such as Sierra Leone (52%), Liberia (46%) and Ghana (56%) which are located in the region.
  - Since 2003 the prevalence of living with both biological parents has increased in Nigeria from 73% to 76% for children 0-14.

Parent Survivorship:

- Loss of both biological parents happens to less than 1% of all children ages 0-17 in Nigeria, and another 5% suffer the death of a mother or a father before their eighteenth birthday.
  - The South East region in Nigeria is home to the highest proportion of children who have experienced the death of a biological parent. By age 18 over one in ten children – 11% - have lost

PERCENT DISTRIBUTION OF PARENTAL SURVIVAL STATUS ACCORDING TO AGE GROUP OF CHILD, NIGERIA 2013

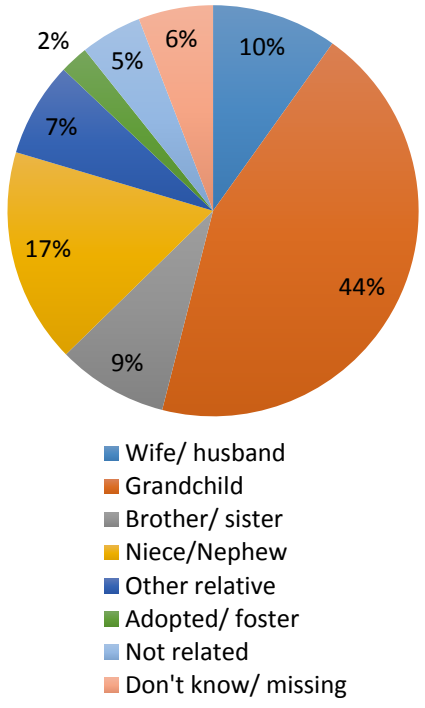


either their mother or their father and 0.8% have lost both. This region sees 7% of all children living with only their biological mother after experiencing the death of their father.

- Children living in households located in urban settings are more likely to have experienced the death of a biological parent. While 6.5% of children living in urban households have lost either a mother or a father, 4.5% of children living in rural areas have experienced the same.
- Household wealth quintile does not appear to have a strong influence on the likelihood of losing a parent in Nigeria.

- In the Western Africa regional context, Nigeria maintains one of the lowest rates of parental death. At 0.4% among children 0-17 and 0.3% for children under 15, the vast majority of children in Nigeria have a living biological parent.

PERCENT DISTRIBUTION OF CHILD RELATIONSHIP TO HOUSEHOLD HEAD AMONG CHILDREN LIVING WITH NEITHER BIOLOGICAL PARENT 0-17 IN NIGERIA



Living Arrangements of Children Living with Neither Biological Parent:

- One in ten children age 0-17 in Nigeria live with neither biological parent (10%). Of these, 79% have two living biological parents and 16% have one. Four percent of these children have no surviving parent (4%).

- The large majority of these children ages 0-17 - 89% - live in households headed by a relative.

- Among children living with neither biological parent, age group affects who children are most likely to live with. Young children are much more likely to live with grandparents, ranging from 70% among children 0-1 and 74% for children 2-4 to a low of 20% among children 15-17. As children get older, they more commonly live in households headed by their siblings.
  - Early marriage is very common in Nigeria, with 34% of children 15-17 living with their spouse prior to their eighteenth birthday.

- Five percent of surveyed households report hosting a child 0-17 unrelated to the head of the household.

- Urban households host twice as many unrelated children as rural households, and households in the

wealthiest quintile have a higher likelihood of hosting children unrelated to the household head.

- Regionally, Nigeria has one of the lowest rates of living with neither biological parent in the region at 8.1% for children under 15. Moreover, it has one of the highest rates of children living in households with both biological parents compared to other western African countries.
- Since the 2003 DHS, the percent of children living with neither biological parent when both are alive has declined in the country from 8% to 6.5% for children 0-14.

"The family being the fundamental group of society and the natural environment for the growth, well-being and protection of children, efforts should primarily be directed to enabling the child to remain in or return to the care of his/her parents, or when appropriate, other close family members."

– The Guidelines for the Alternative Care of Children (2009) II.A.3

Over the last 30 years there has been a growing understanding of the critical importance of the family and a family environment for children in terms of their development and well-being. This realization is at the core of the *United Nations Convention on the Rights of the Child* adopted in 1989, and more recently, of the *Guidelines for the Alternative Care of Children* welcomed by the United Nations General Assembly in 2009.[1]

A major body of empirical research in psychology, neuroscience, social work, and other disciplines has demonstrated the importance of investing in children's early years to support this critical period of child development.[2] Findings about the negative impact of emotional deprivation and institutionalization for younger children have further reinforced the critical importance of parental care and a family environment.[3] As a result, reforms of child protection and alternative care systems for children deprived of parental care, or at risk of being so, have been ongoing in virtually all regions of the world, with a particular focus on moving away from the use of residential care and strengthening the capacity of parents and families to care for their children.[4]

These reforms have also been informed by research that has shown that the vast majority of children in residential care are not placed there because care is genuinely needed or that they are without parental or family care, but rather because their families are facing a range of challenges in their capacity to care, including poverty, lack of access to social services, discrimination and social exclusion, as well as a result of personal or social crises and emergencies.[5] As a result, governments and other stakeholders in these reform processes have recognized that a major focus of this shift away from the use of residential care for children is not simply about reducing the numbers of institutions and removing children from there, but also about establishing better preventive and family support services to reduce child-family separation and stop children going into alternative care in the first place.

Understanding better the situation of children in 'care vulnerable situations', including those outside of parental care, has become crucial not only for HIV prevalent countries but for all countries seeking to strengthen their responses and systems for children facing a range of care and protection risks. A

[1] UN General Assembly, Guidelines for the Alternative Care of Children: resolution adopted by the General Assembly, 24 February 2010, (A/RES/64/142). Available at: http://www.bettercarenetwork.org/docs/Guidelines-English.pdf

[2] National Research Council and Institute of Medicine (2000) *From Neurons to Neighborhoods: The Science of Early Childhood Development.* Committee on Integrating the Science of Early Childhood Development. Jack P. Shonkoff and Deborah A. Phillips, eds. Board on Children, Youth, and Families, Commission on Behavioral and Social Sciences and Education. Washington, D.C.: National Academy Press.

[3] For a review of the evidence, see for example Williamson, J, & Greenberg, A. (2010). Families, not orphanages. (Better Care Network, working paper). Retrieved from http://www.bettercarenetwork.org/docs/Families%20Not%20Orphanages.pdf; Browne, K. (2009). The Risk of Harm to Young Children in Institutional Care. Better Care Network and Save the Children Working Paper). Retrieved from http://www.bettercarenetwork.org/docs/The_Risk_of_Harm.pdf; Csaky (2009) Keeping Children Out of harmful institutions, Save the Children UK. Retrieved from http://www.bettercarenetwork.org/BCN/details.asp?id=21471&themeID=1003&topicID=1023

[4] For documentation of these reforms, go to Better Care Network online Library of Documents at: www.bettercarenetwork.org

[5] Williamson, J, & Greenberg, A. (2010). Families, not orphanages. (Better Care Network, working paper). Retrieved from http://www.bettercarenetwork.org/BCN/details.asp?id=23328&themeID=1003&topicID=1023;

number of organizations and initiatives have drawn attention to the need for more systematic data on children's care situations, including family arrangements, parental status, care practices, and their impact on child well-being.[6]

National household surveys provide critical data to monitor population-level patterns and trends in relation to key socio-demographic indicators at national and sub-national levels that can also be used to draw important comparisons between countries at both regional and international levels. These surveys provide particularly rich data sets through which changing household compositions and living arrangements, fertility and marriage, health and nutrition, literacy and access to education, poverty and deprivation, and other key indicators of child and family well-being are being gathered on a five yearly basis for a nationally representative sample of households. Initial analysis of this data for a small number of countries has shown how critical this data can be to understand the care situations of these children but also to highlight potential indicators of vulnerability associated with different care and living arrangements. [7]

Demographic and Health Surveys (DHS) have been conducted in middle to low income countries by national statistical agencies with support from USAID since the mid-1980s in over 90 countries. The DHS has now entered its Phase 7 (2013-2018). The survey includes 3 main questionnaires (Household, woman and man's questionnaires) and provides nationally representative data on health and population, including fertility, maternal and child survival, immunization, water and sanitation, education, living arrangements among others. In addition, the DHS has included questionnaire modules on a range of topics such as domestic violence, Female Genital Mutilation, Fistula, out of pocket expenditures.

Multiple Indicators Cluster Surveys (MICS) have been conducted with support from UNICEF since the mid-1990s in more than 100 countries, tracking progress and trends on more than 20 indictors relating to the Millennium Development Goals (MDGs) and other major international commitments relevant to the situation of women and children. MICS has entered in its fifth phase, MICS 5 (2012-2014). The survey includes a household questionnaire, a questionnaire for women 15-49 years of age with or without birth history, a questionnaire on children under 5 years of age administered to the mothers or caretaker of these children and a questionnaire for men 15-49 years of age. The questionnaires cover a wide range of issues, including education, child labor, child discipline, water and sanitation, maternal and new born health, marriage and union, FGM, birth registration, early childhood development, breastfeeding, sexual behavior, fertility and Tobacco and alcohol use among others.

Both DHS and MICs have also increasingly gathered data on attitudes and beliefs on some critical social issues such as child care practices, attitudes towards HIV AIDS, domestic violence and child discipline.

[6] See for examples, Family For Every Child and INTRAC (2012) Context for Children and Policy situation paper, Roby (2011) Children in Informal Alternative Care, UNICEF; Child Frontiers (2012) Family support services and alternative care in Sub-Saharan Africa: Background paper; Better Care Network (2013) Analysis of DHS data (Ghana, Liberia, Rwanda, Jordan, Sierra Leone); Save the Children (2013). Save the Children Research Initiative: Understanding and Improving Informal Alternative Care Mechanisms to increase the care and protection of children, with a focus on Kinship care in West Central Africa.

[7] Better Care Network (2013) Analysis of DHS data (Ghana, Liberia, Rwanda, Jordan, Sierra Leone); Better Care Network (2014) Who Cares for Children and why we should Care. Presentation at The State of the Evidence on Children's Care Symposium at McSilver Institute for Poverty Policy and Research, New York University, September 24th 2014. Retrieved at http://bettercarenetwork.org/bcn-in-action/key-initiatives/the-state-of-the-evidence-on-children%E2%80%99s-care-a-better-care-network-and-cpc-learning-network

The DHS and MICS core questionnaires contain a number of indicators in relation to children's living arrangements, survivorship of parents, and relationship to the head of the household. This data in some countries is collected for all children under 15 years of age in a household and in others for children under 18 years of age. The data on survival status of parents is collected under the HIV AIDS section of the questionnaire and whilst it is collected systematically in countries with high HIV prevalence, other countries do not always collect it. This data is key to understanding the extent of parental loss (single/double orphans) but also the extent to which parental loss is a significant factor in children's living arrangement as well as a number of outcome indicators.

A core question asked by all DHS/MICS questionnaires relates to the relationship between children in a particular household to the head of the household. Although there are slight variations in the range of possible relationships provided, there is general consistency as far as the key categories are concerned (grandchild, niece and nephews, foster child, unrelated, for example). This data is systematically collected but rarely extracted and analyzed in the national reports, despite its clear relevance to children's care situations. Although that data is not a perfect proxy indicator for caregiving arrangements, as it does not provide actual information as to who the legal or de facto caregiver for a particular child is in that household, it is nonetheless a clear indicator of whether a child is living within or outside of family care. This information is key to understanding the extent and patterns of informal alternative care, particularly kinship care, in a given country and this, in turn is critical to inform policies seeking to strengthen parental care, prevent harmful separation but also support adequate family care and family based alternative care.

The DHS and MICS data has huge potential to inform child protection policy and programming, however currently this potential is not being realized. A key barrier is that in most cases the data that would be useful, such as on children's care and different living arrangements, is not extracted and presented in national reports. Furthermore, awareness of this potentially useful DHS and MICS data amongst child protection practitioners is very low. Given the scarcity of national monitoring data on child protection issues in many contexts, it is important that the sector explores the potential of the DHS and MICS data and also is better informed of what it could offer and how it could be used to support better policies and interventions targeting at risk children and families. It is hoped that these country briefs can contribute to this.

NIGERIA 2013 DHS:

The data presented in this report come from the 2013 Nigeria Demographic and Health Survey (DHS) that was carried out by the National Population Commission (NPC)[8]. MEASURE DHS is a USAID-funded project that provides technical support in the implementation country-wide surveys across the world. Funding for this effort came from the ICF International, the United Kingdom for International Development (DFID) through PATHS2, and the United Nations Population Fund (UNFPA).

The primary objective for this data collection effort is to provide country-wide information on demographic characteristics, health conditions and behaviors, and indicators around mortality. The child well-being indicators reported here come from the DHS Household Questionnaire. This questionnaire is used to list all individuals who spent the previous night in a selected household. It collects basic information of each member listed: name, sex, age, education, relationship to head of the household, and disability status. Additionally, for children under the age of 18 survival status of parents is also recorded.

During the 2013 Nigeria DHS data collection effort, a total of 38,522 households were interviewed and 176,963 household members were listed. Of these, 90,438 individuals were under the age of 18 and 80,648 children were under the age of 15. The household questionnaire retained a response rate of 99.0%. All figures reported here have accounted for sample weights, none are unweighted. No exclusion criteria has been applied – the data presented below represent the entire sample of individuals present in the dataset. As a result, the total counts used are slightly larger than the figures reported in the 2013 Nigeria DHS country report. Data were analyzed using the statistical software package SAS 9.4. To measure statistically significant levels of association chi-squared tests and t-tests were run using a 5% alpha level.

To understand Nigeria in its regional context and compare across other western African states, data was pulled from nationally representative Demographic and Health Surveys (DHS) that were most recently run in these neighboring countries. The Western Africa Region is defined by the DHS as including the following countries: Benin[9], Burkina Faso[10], Code d'Ivoire[11], Ghana[12], Guinea[13], Liberia[14], Mali[15], Mauritania[16], Niger[17], Nigeria[18], Senegal[19], Sierra Leone[20], and Togo[21]. Given that many of these

[8] National Population Commission (NPC) [Nigeria] and ICF International. 2014. *Nigeria Demographic and Health Survey 2013.* Abuja, Nigeria, and Rockville, Maryland, USA: NPC and ICF International.
[9] Institut National de la Statistique et de l'Analyse Économique (INSAE) et ICF International, 2013. Enquête Démographique et de Santé du Bénin 2011-2012. Calverton, Maryland, USA : INSAE et ICF International.
[10] Institut National de la Statistique et de la Démographie (INSD) et ICF International, 2012. Enquête Démographique et de Santé et à Indicateurs Multiples du Burkina Faso 2010. Calverton, Maryland, USA : INSD et ICF International.
[11] Instituto Nacional de Estatística (INE) [Cabo Verde], Ministério da Saúde, e Macro International. 2008. Segundo Inquérito Demográfico e de Saúde Reprodutiva, Cabo Verde, IDSR-II, 2005. Calverton, Maryland, USA: INE
[12] Ghana Statistical Service (GSS), Ghana Health Service (GHS), and ICF Macro. 2009. Ghana Demographic and Health Survey 2008. Accra, Ghana: GSS, GHS, and ICF Macro.
[13] Institut National de la Statistique (INS) et ICF International, 2013. Enquête Démographique et de Santé du Guinee 2013. Calverton, Maryland, USA : INSAE et ICF International.
[14] Liberia Institute of Statistics and Geo-Information Services (LISGIS), Ministry of Health and Social Welfare [Liberia], National AIDS Control Program [Liberia], and ICF International, 2014. *Liberia Demographic and Health Survey 2013.*
[15] Cellule de Planification et de Statistique (CPS/SSDSPF), Institut National de la Statistique (INSTAT/MPATP), INFO-STAT et ICF International, 2014. Enquête Démographique et de Santé au Mali 2012-2013. Rockville, Maryland, USA : CPS, INSTAT, INFO-STAT et ICF International.
[16] Office National de la Statistique (ONS) [Mauritanie] et ORC Macro. 2001. Enquête Démographique et de Santé Mauritanie 2000-2001. Calverton, Maryland, USA : ONS et ORC Macro.

countries collected data for the 0-14 age range until recently, for cross-country comparisons under 15 age groups will be used. The 2008 and 2003 DHS surveys conducted in Nigeria are also represented in this report to look at any significant changes that have occurred within the country over the last decade. Lastly, all country level development statistics were pulled from the Human Development Report 2014.[22]

[17] Institut National de la Statistique (INS) [Niger], Unicef et ICF International 2012. Enquête Démographique et de Santé dans les Zones d'Intervention du Programme de Coopération de l'UNICEF au Niger, 2012. Rockville, Maryland, USA : INS, Unicef et ICF International.
[18] National Population Commission (NPC) [Nigeria] and ICF International. 2014. Nigeria Demographic and Health Survey 2013. Abuja, Nigeria, and Rockville, Maryland, USA: NPC and ICF International.
[19] Agence Nationale de la Statistique et de la Démographie (ANSD) [Sénégal], et ICF International. 2012. Enquête Démographique et de Santé Continue (EDS-Continue 2012-2013). Calverton, Maryland, USA: ANSD et ICF International.
[20] Statistics Sierra Leone (SSL) and ICF International. 2014. Sierra Leone Demographic and Health Survey 2013. Freetown, Sierra Leone and Rockville, Maryland, USA: SSL and ICF International.
[21] Anipeh, Kodja, For a Mboup, Afi Mawuena Ouro-Gnao, Bassante Boukpessi, Pierre Adade Messan, et Rissy Salami-Odjo. 1999. *Enquete Demographique et da Sante, Togo 1998.* Calverton, Maryland USA: Direction de la Statistique et Macro International Inc.
[22] United Nations Development Program 2014. *Sustaining Human Progress: Reducing Vulnerabilities and Building Resilience*. Human Development Report 2014. Tokyo.

BASIC STATISTICS[22,23]:

Country

- Total population: 173,620,000
- Gross Domestic Product per capita: $5,440
- HDI: .504 (Rank – 152)
- Population living below $1.25/day: 67.98%
- Life expectancy at birth: 52.51 years
- Median age: 17.7 years
- Urban vs. rural distribution: 50.9% of the population is urban, 49.1% rural
- Under-5 mortality rate: 124 per 1,000 live births.
- HIV/AIDS prevalence: 3.1%
- Birth registration of children (% under age 5): 41.5%
- Child labor (age 5-14): 24.7%

Households

- Mean household composition: 4.6 members
  - This is elevated in rural regions (4.9) when compared to urban (4.2).
  - The likelihood of finding a large household (9+ members) is much higher in rural areas (12%) compared to urban areas (7%).
- 46% of the population is under age 15
- Female headed households: 19%
  - The prevalence of such households has remained approximately the same since the 2008 DHS in Nigeria.
- Urban vs. rural distribution: 43% of sampled households were urban; 57% rural
- Dependency ratio: 83.93 for children 0-14 and 5.14 for those over the age of 65.

Fertility

- Total Fertility Rate: 5.5 children
  - There appears to be a slight decline in fertility over the past decade from 5.7 births per woman.
- Fertility for women living in rural households is on average nearly 1.5 children higher than for women living in urban areas (6.2 vs 4.7).
- Significant regional variation is found in Nigeria from a low of 4.3 in the South region to a high of 6.7 in the North West zone.
  - Wealth quintile and education level also play a significant role in fertility.
- Median age at first birth: 20.2 years
  - 23% of women between the ages of 15-19 have begun childbearing.
- Adolescent birth rate (girls 15-19): 119.59
- Births within 24 months of prior birth: 23%. The median birth interval is 31.7 months.

Marriage:

- Median age at first marriage age 25-49: 18 years for women; 27 years among men
  - Among the younger generation there has been a gradual increase in age at first marriage. The median age at first marriage is 17.3 for women currently 45-49 and 19 years of age for women currently 20-24.
  - While 29% of women currently between ages 45-49 were married before 15, 17% of women currently between 20-24 and 12% or girls 15-19 were married by 15.
  - Education of woman significantly influence early marriage in Nigeria. For women with no formal education the median age at first marriage is 15.5, while for women with some secondary education it reaches 21.5 years of age.
- Polygamy is fairly common in Nigeria. One third of all married women are married to men who are in a polygynous union; 17% of currently married men reported having more than one wife.

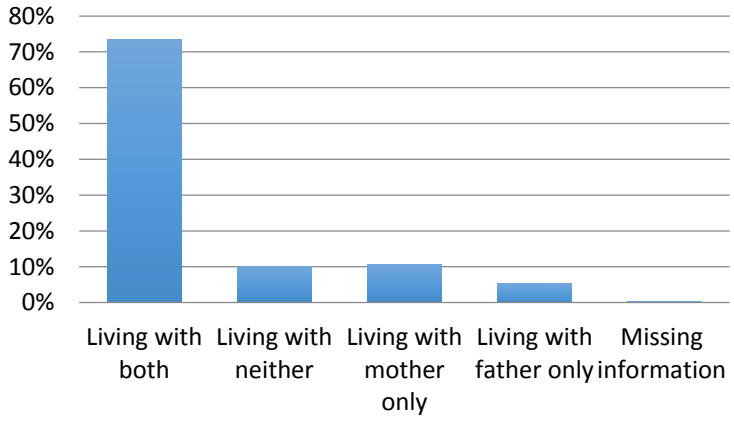
[23] United Nations Development Program 2014. *Sustaining Human Progress: Reducing Vulnerabilities and Building Resilience*. Human Development Report 2014. Tokyo.

[24] National Population Commission (NPC) [Nigeria] and ICF International. 2014. Nigeria Demographic and Health Survey 2013. Abuja, Nigeria, and Rockville, Maryland, USA: NPC and ICF International.

CHILDREN'S LIVING ARRANGEMENTS:

In Nigeria, 74% of children under the age of 18 live in households with both biological parents. They represent the great majority of children living in households in the country. Another 16% of children 0-17 live with one biological parent, of which twice as many children living with their mothers versus with their biological fathers. The remaining 10% of children live with neither biological parent.

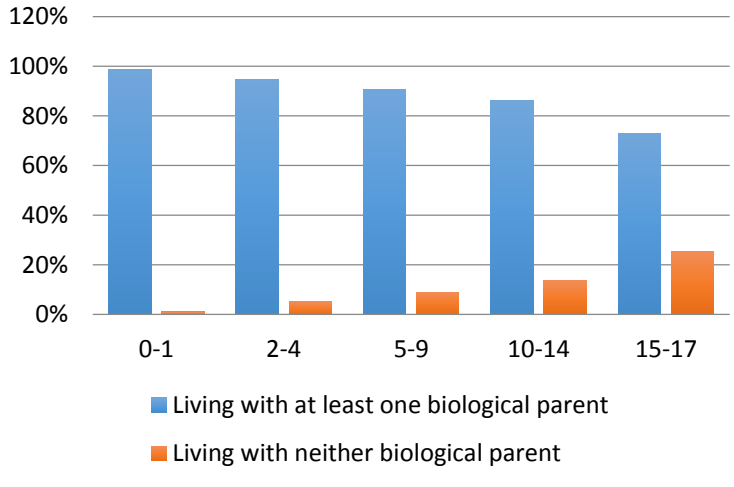
FIGURE 1: PERCENT DISTRIBUTION OF LIVING ARRAGEMENTS AMONG CHILDREN 0-17 IN NIGERIA, 2013



When disaggregated by background characteristics, factors such as gender, age, and geographic region appear to significantly influence living arrangements among children in Nigeria. Boys have a slightly improved likelihood of living with both biological parents – 75% of boys and 72% of girls live with both their mother and their father. Conversely, girls in Nigeria are more likely to live with neither biological parent when both are alive – 12% as compared to their 8% among boys. Moreover, among children who live with a single biological parent, a slightly higher proportion of boys (6%) live with their fathers as compared to girls (4.7%).

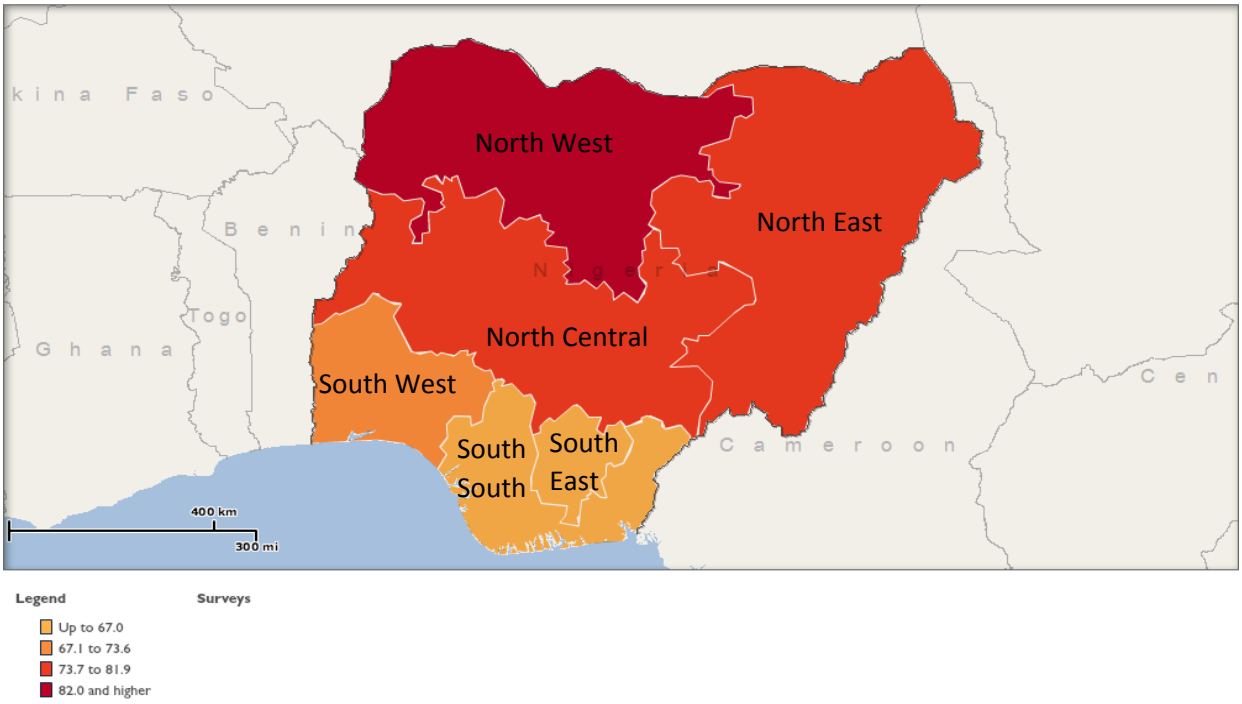
Variations in living arrangements across age group are also evident in Nigeria. At an early age the large majority of children still live with both biological parent; this proportion declines rapidly with age, ranging from 84% among those under 2 years of age to 54% for those between 15 and 17 years of age. Overall the proportion of children living with a single biological parent increases as children get older in Nigeria, largely due to the fact that a number of children experience the loss of a parent as they go through adolescence. While 14% of children under two and 13% of children 2-4 live with only one biological parent, for children in the oldest age group, 19% live with only their biological mother or father only. In the same way, the likelihood that a child will live with neither biological parent increases with age. While fewer than 1% of children under 2 live with neither biological parent, there is an large increase in this

FIGURE 2: PERCENT DISTRIBUTION OF CHILDREN LIVING WITH AT LEAST ONE BIOLOGICAL PARENT VS NEITHER BIOLOGICAL PARENT AMONG CHILDREN 0-17 IN NIGERIA, ACCORDING TO AGE GROUP



group as children get older, reaching 14% for children age 10-14 and 25% for children age 15-17 (as seen in Figure 2 above).

FIGURE 3: PERCENT OF CHILDREN 0-14 LIVING WITH BOTH BIOLOGICAL PARENTS BY REGION

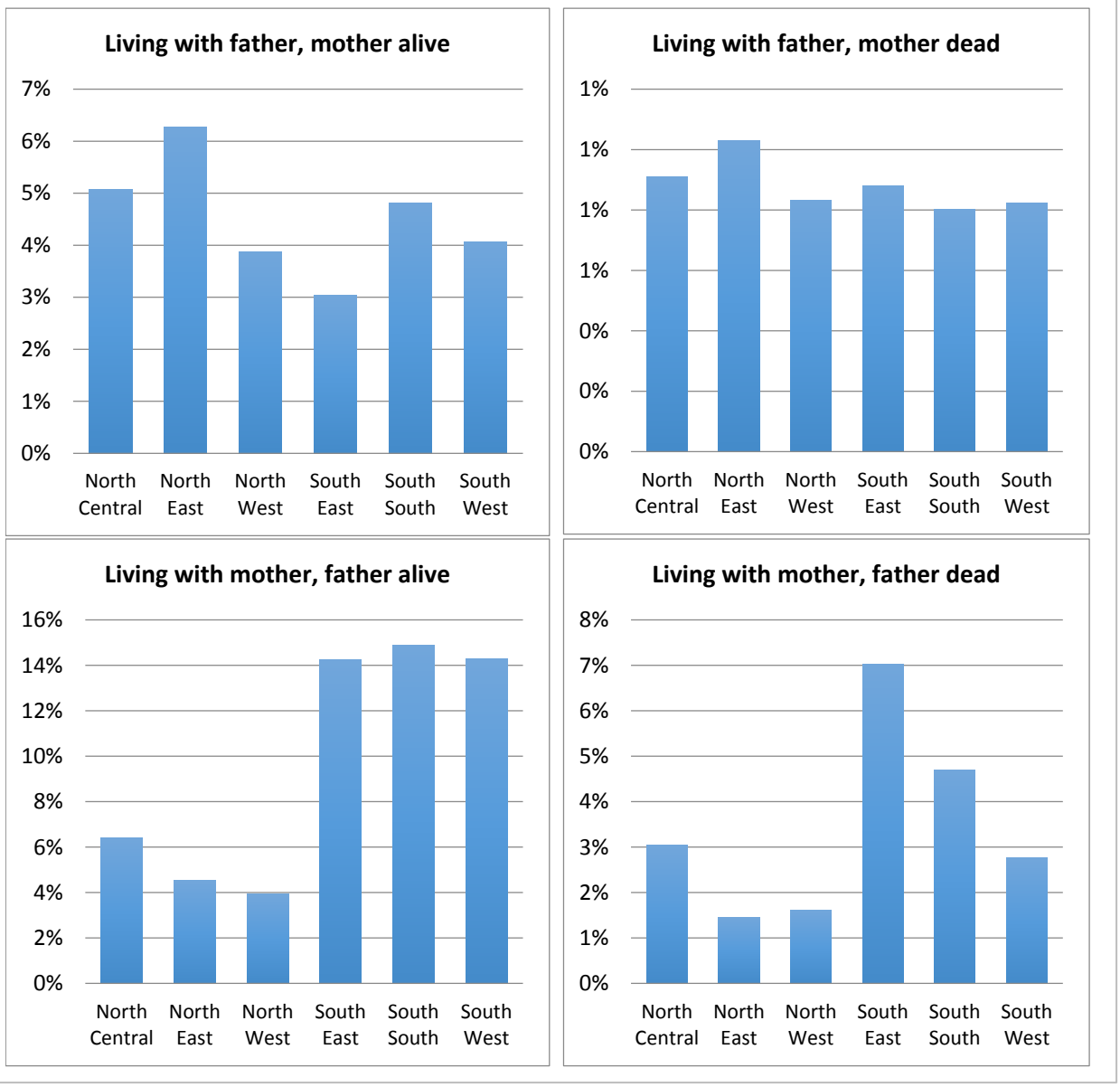


Children in rural regions of Nigeria more commonly live with both biological parents when compared to children in urban households (76% to 70%). More children living with a single biological parent live in urban areas (19%) as compared to rural areas (9%) and the sample is true for children 0-17 living with neither biological parent – 11% of children in urban households versus 9% of children living in rural households live with neither biological parent. For the purposes of this data collection effort, Nigeria's 36 states and a Federal Capital Territory were grouped into 6 geo-political zones to understand the regional diversity found in country (refer to map above). Children in the North West zone (83%), are much more likely to live with both biological parents as compared to children 0-14 living in the South South zone or South East zone (both approximately 60%).

Household wealth quintile appears to be associated with children's likelihood of living with both biological parents. In the poorest households, proportionally more children were found to live with both biological parents when compared to households in the richest quintile. A decrease was seen ranging from 83% of children living with neither biological parent in the poorest households to 69% of children in the more affluent three wealth quintiles. Important to note is the great disparities in wealth distribution seen across Nigeria. As stated in the Nigeria DHS 2013 Final Report, while 47% of households residing in urban areas belong to the richest wealth quintile, the same is true for only 5% of rural households. Meanwhile while 3% of all urban households live in the poorest wealth quintile, 36% of households residing in rural areas belong to the least affluent cohort. Therefore differences seen across wealth quintile and rural-urban distributions are likely intermixed.

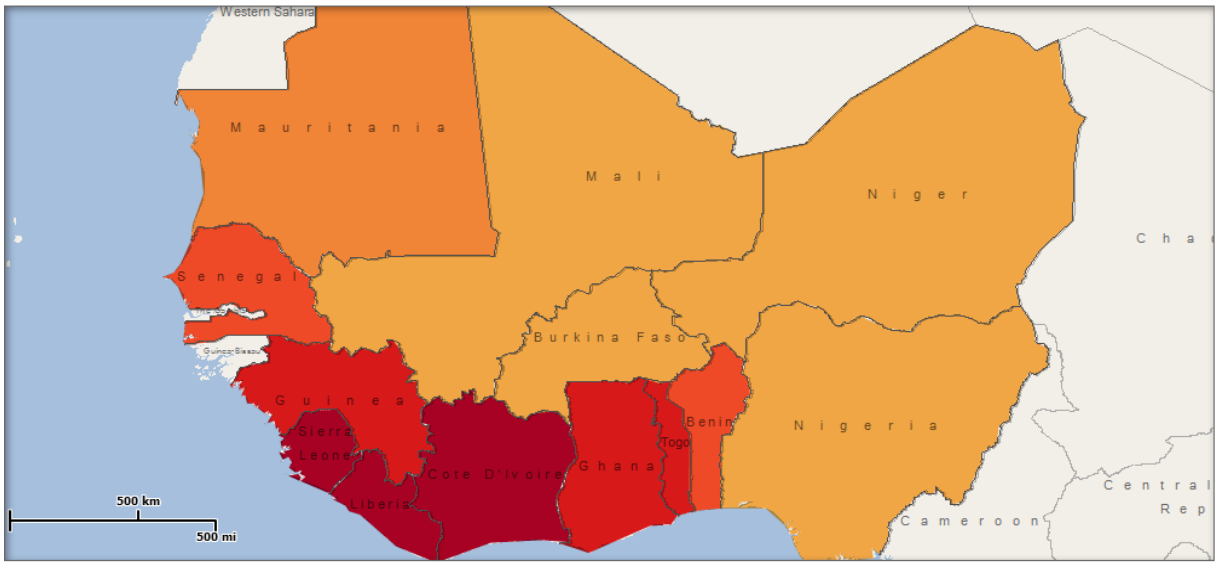
On the aggregate gender and age seem to have a weak relationship on the number of children living with a single biological parent. More children belonging to older age groups live with a single biological parent, in part due to the natural life course of parents dying as children get older. However, a varied regional landscape is seen across Uganda. Nearly twice as many children in the southern zones live with only a single biological parent compared to the northern areas among children 0-17: 25% in the South West and South South zones and 21% in the South East, compared to 15% in the North Central, 13% in the North East and 10% in the North West zones. As seen in Figure 5 there are significant in country differences when it comes to children living in households with a single biological parent. Among children living with a single biological parent, more are located in households in urban centers than in rural areas (19% vs 15%).

FIGURE 4: REGIONAL VARIATIONS IN LIVING ARRANGEMENTS AMONG CHILDREN 0-17 LIVING WITH A SINGLE BIOLOGICAL PARENT IN NIGERIA



Regionally, Nigeria has very low rates of children age 0-14 who live apart from their living biological parent(s) in the context of other west African states. At 6.5% of children 0-14, Nigeria has one-third the rate of children living with no biological parent when both are alive as neighboring countries such Sierra Leone (17%) and Liberia (20%). Countries such as Burkina Faso (6%), Mali (6%) and Niger (7%) see similarly low prevalence rates for children living with neither biological parent (As seen in Figure 5). This trend holds true for children living with a single biological parent as well. In the western Africa regional context, Nigeria has a relatively low prevalence of children 0-14 living with one biological parent while the other is still living. For instance, only 8% of children 0-14 in Nigeria live with their biological mother only when their father is still alive. This is markedly lower than rates found in the region such as in the countries of Senegal (23%), Mauritania (24%), Liberia (21%) and Ghana (20%).

FIGURE 5: PERCENT OF CHILDREN 0-14 LIVING WITH NEITHER BIOLOGICAL PARENT WHEN BOTH PARENTS ARE STILL LIVING BY COUNTRY



Legend

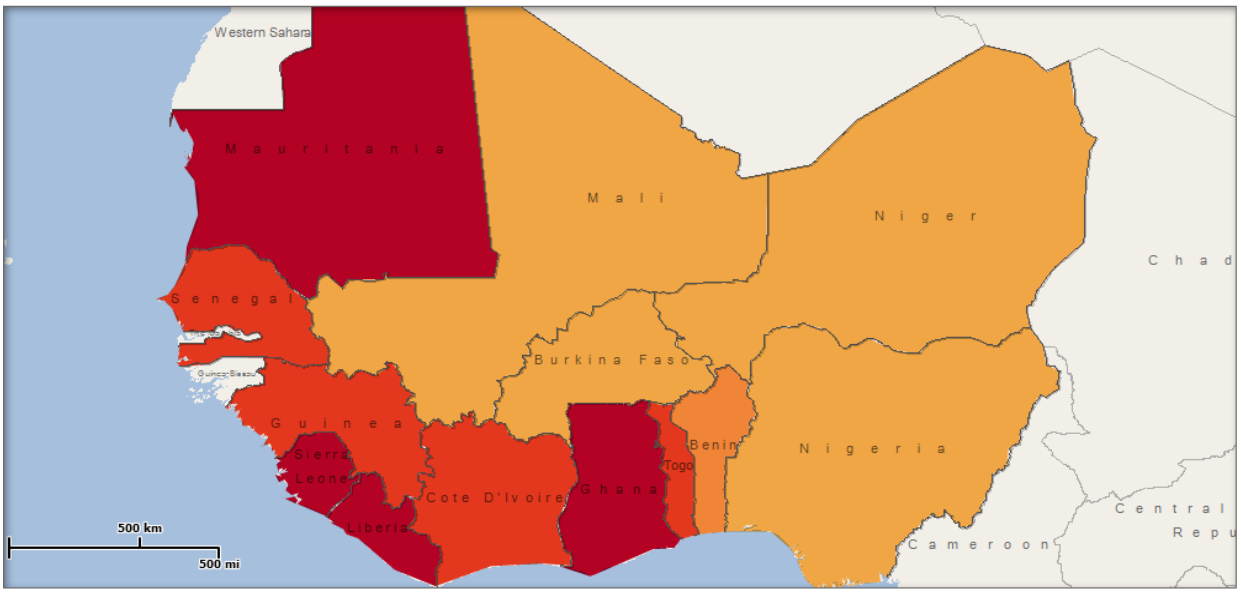
- Up to 7.1
- 7.2 to 10.1
- 10.2 to 11.5
- 11.6 to 14.7
- 14.8 and higher

Surveys

Benin 2011-12 DHS	11.5	Liberia 2013 DHS	20.2	Senegal 2010-11 DHS	10.7
Burkina Faso 2010 DHS	6.2	Mali 2012-13 DHS	6.4	Sierra Leone 2013 DHS	17.4
Cote d'Ivoire 2011-12 DHS	14.8	Mauritania 2000-01 DHS	9.3	Togo 1998 DHS	11.8
Ghana 2008 DHS	13.5	Niger 2012 DHS	6.6		
Guinea 2012 DHS	13.1	Nigeria 2013 DHS	6.5		

Among other western African countries Nigeria also has the second highest rate of children living in households with both biological parents at 76% for children 0-14. Only Burkina Faso reports a higher rate of 80% in the region. As seen in Figure 6 below, some regional counterparts have much lower rates of children living with both their mother and their father.

FIGURE 6: PERCENT OF CHILDREN 0-14 LIVING WITH BOTH BIOLOGICAL PARENTS BY COUNTRY



Legend

- Up to 55.9
- 56.0 to 66.2
- 66.3 to 75.6
- 75.7 and higher

Surveys

Benin 2011-12 DHS	66.6	Liberia 2013 DHS	45.9	Senegal 2010-11 DHS	57.2
Burkina Faso 2010 DHS	79.8	Mali 2012-13 DHS	82.8	Sierra Leone 2013 DHS	52.4
Cote d'Ivoire 2011-12 DHS	56.0	Mauritania 2000-01 DHS	54.7	Togo 1998 DHS	60.1
Ghana 2008 DHS	55.7	Niger 2012 DHS	75.7		
Guinea 2012 DHS	63.3	Nigeria 2013 DHS	76.2		

DEATH OF A PARENT (SINGLE AND DOUBLE "ORPHANHOOD"):

Loss of a biological parent is not very common for children age 0-17 in Nigeria. By the time children reach 15 in Nigeria, 4.5% of them have lost one biological parent and 0.3% have lost both. By age 18, 1 in 20 children in Nigeria have lost one biological parent and 0.4% have lost both. Parental loss is positively associated with age: nearly 99% of all children under the age of one have two living parents, while 11% of children age 15-17 have lost a biological parent as seen in Figure 7.

The rate of double parent loss in Nigeria was cut in half between the 2003 and 2008 DHS surveys going from 0.6% of all children 0-15 orphaned to 0.3%. Since the 2008 DHS survey that rate of decline has plateaued and similar rates of double parent loss were reported in the 2013 DHS Survey (0.3%). During this time period the rate of single parent death also decreased from 5.6% of children 0-15 experiencing the loss of a mother or a father in 2003 to 4.6% of children of the same age group experiencing the death of a parent decade later in 2013[25].

Wealth quintile of the household does not appear to be related to the likelihood of having lost a parent for children in Nigeria in a linear way. Children living in households in the middle wealth quintile have experienced the death of a parent more often than children living in households belonging to rich and poor households. While 2.7% of children living in the poorest households and 5.4% of children living in the richest households have experienced the loss of one biological parent, 6.7% of children living in the middle wealth quintile have lost either their mother or their father and an additional 0.6% have lost both.

Urban children have a slightly higher likelihood of experiencing the death of a biological parent. For

FIGURE 7: PERCENT DISTRIBUTION OF PARENTAL SURVIVAL STATUS ACCORDING TO AGE GROUP OF CHILD, NIGERIA 2013

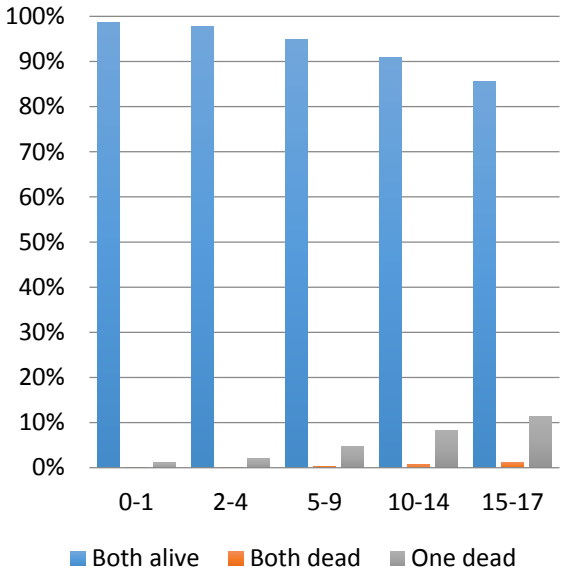
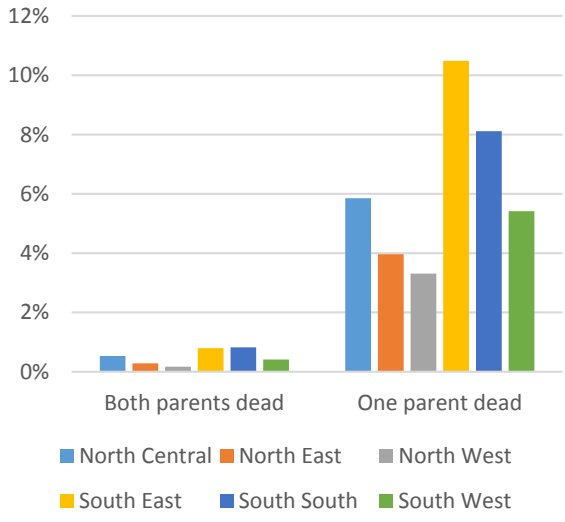


FIGURE 8: PERCENT OF PARENT LOSS AMONG CHILDREN AGE 0-17 BY ZONE IN NIGERIA, 2013

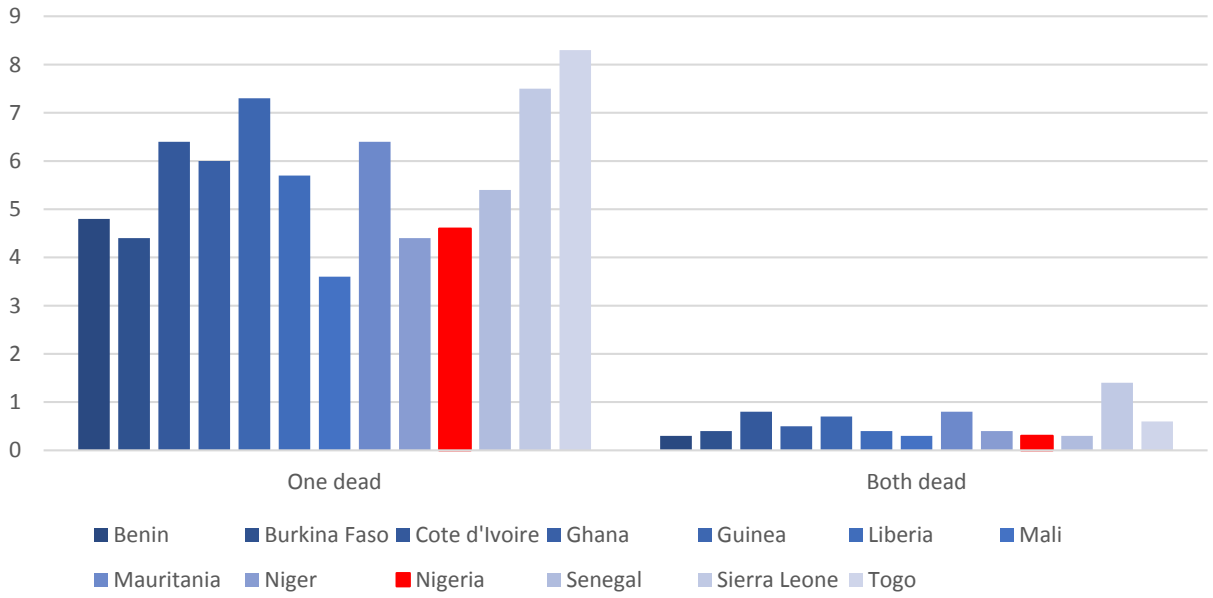


[25] The 2013 Nigeria DHS Survey reports that 6% of children 0-17 in Nigeria are "orphaned." The Survey defines orphans as children 0-17 who have lost one or both children. Throughout this report only children who have lost both biological parents are categorized as "orphans."

children 0-17 living in urban areas 6.5% experience the death of a parent compared to 4.5% in rural areas. However, the variability in parental death found across Nigeria's administrative zones is more pronounced. While 3.3% of children living in the North West region have experienced the loss of a mother or a father, over one in every ten children living in the South East region has experienced the same.

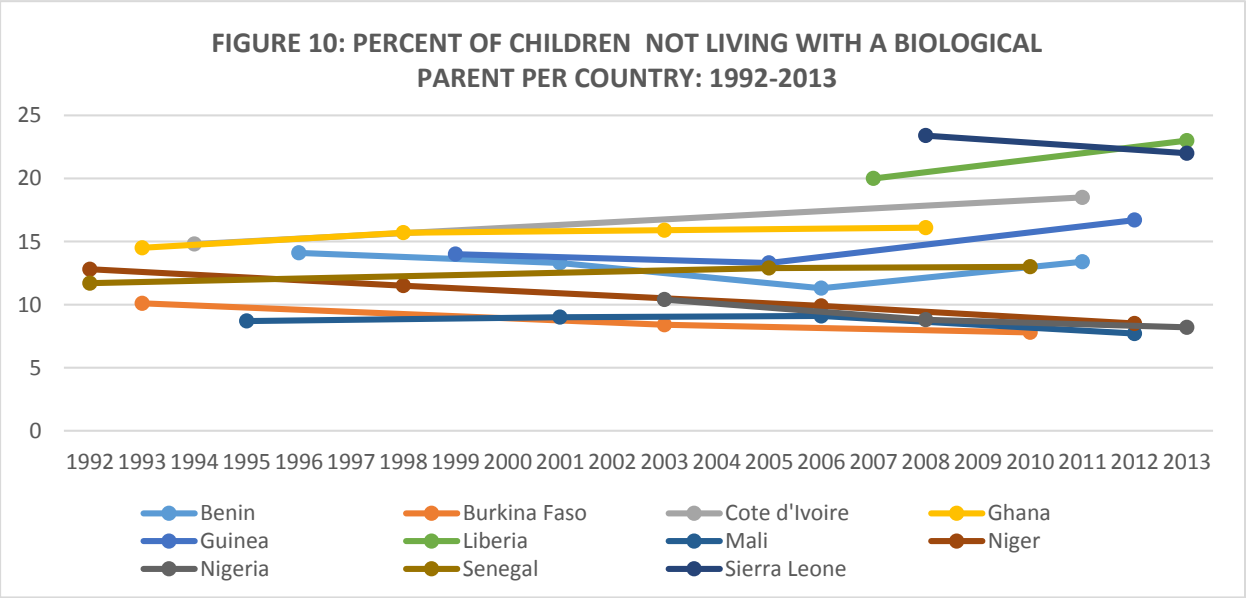
Regionally, Nigeria's rates of parental death are low compared to its regional neighbors. Among children under age 15, 4.5% of Burundi's children experience the death of one parent and 0.3% experience the death of both biological parents. Although some neighboring countries see similar rates of single parent loss, others report twice the rate of children 0-15 who have experienced the loss of their mother or their father. As shown in Figure 9, countries like Benin (4.8%), Burkina Faso (4.4%) and Niger (4.4%) have comparable proportions of children who have lost one biological parent, while countries such as Togo (8.3%), Sierra Leone (7.5%) and Guinea (7.3%) see two times the prevalence rate in their children. Similarly, when it comes to orphanhood, Nigeria's prevalence is a lower than many western Africa countries.

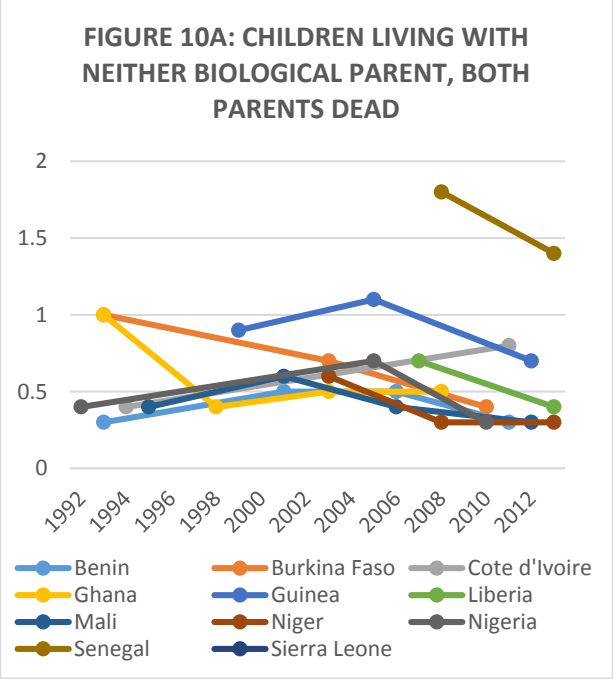
FIGURE 9: PERCENT OF PARENT LOSS AMONG CHILDREN AGE 0-14 BY COUNTRY, DHS WESTERN AFRICA REGION

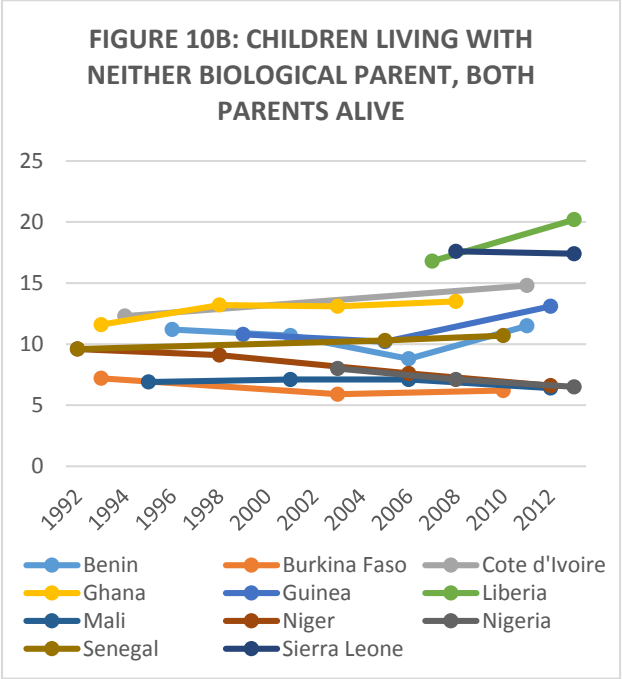


CHILDREN LIVING WITH NEITHER BIOLOGICAL PARENT:

As stated previously, one in every ten children under the age of 18 live with neither biological parent. In the last two decades different trends have been observed in the western Africa region among children living with neither biological parent. While overall the prevalence of children living with neither biological parent appears to be fairly constant, as seen in Figure 10A the rate of orphanhood has declined in the region with the exception of Cote d'Ivoire. Meanwhile, for many countries the rate of children living outside of parent care has been on the rise (Figure 10B). As seen in Figure 10, the prevalence of children living outside of parent care in most countries has stayed fairly stable in the western African region, with few notable exceptions such as Liberia which saw a sharp increase in the proportion of children living without either biological parent or Nigeria, which saw a decline in the number of children living without their mother and their father in the last two decades.







However, as is the case with Nigeria, while the overall number of children living with neither biological parent has remained largely unchanged in the region, some countries have seen rates of children living with neither biological parent when both parents are dead decline. Because the vast majority of children living with neither biological parent still have both parents living, the effect of events such as civil war, the HIV/AIDS epidemic, and access to anti-retro viral therapy can remain hidden. Therefore, variations in the proportions of children who have lost both biological parents are largely unseen because of the large number of children living outside of parental care who continue to have living biological parents.

Almost one in every ten children under the age of 18 lives with neither biological parent in Nigeria. While 4% of these children do not have a living biological parent to live with, 6% have a biological father who is alive, 10% have a living mother, and the vast majority – a full 80% - have both living biological parents[26]. This reality supports the idea that orphanhood is not the primary reason for family separation and begs the question –who are these children living with?

The majority of children in Nigeria under the age of 18 who are living with neither biological parent still live in family care, residing instead in households with their grandparents, aunts, uncles, siblings, and other relatives. Nationwide, 89% of children aged 0-17 live in family care, and approximately 5% of surveyed households report hosting a child who is unrelated to the head of the household. The likelihood of living in family care is slightly higher for girls (90% vs. 89%), possible reflecting gender differences in child migration for education or work opportunities. Living in family care seems to be negatively associated with age, with the youngest age groups having a higher likelihood of living in related care.

In Nigeria, children in rural households are slightly more likely to live in family care as compared to children living in urban households. While 91% of children living with neither parent in rural households live in households where they are related to the

FIGURE 11: PERCENT DISTRIBUTION OF CHILDREN 0-17 NOT LIVING WITH A BIOLOGICAL PARENT, ACCORDING TO SURVIVAL STATUS OF PARENT

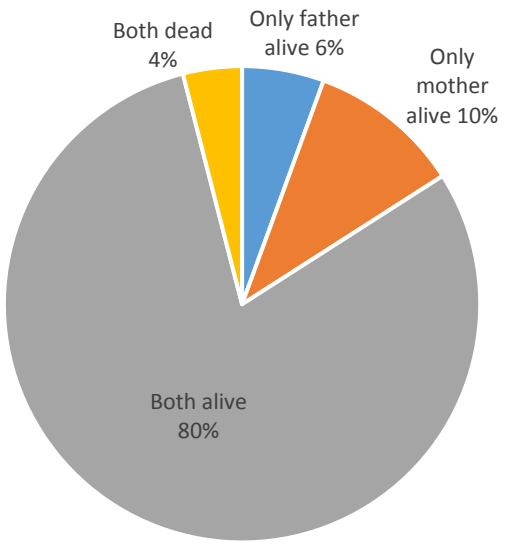
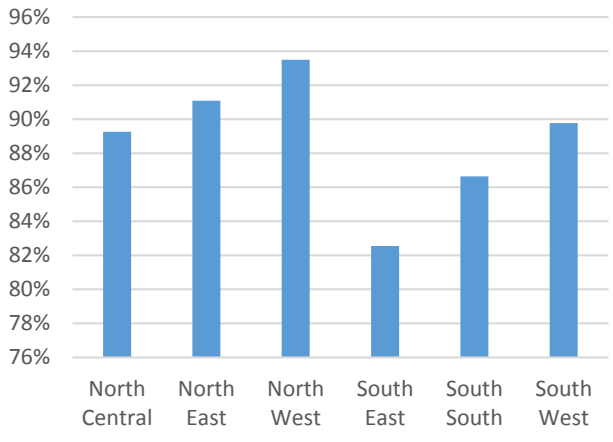


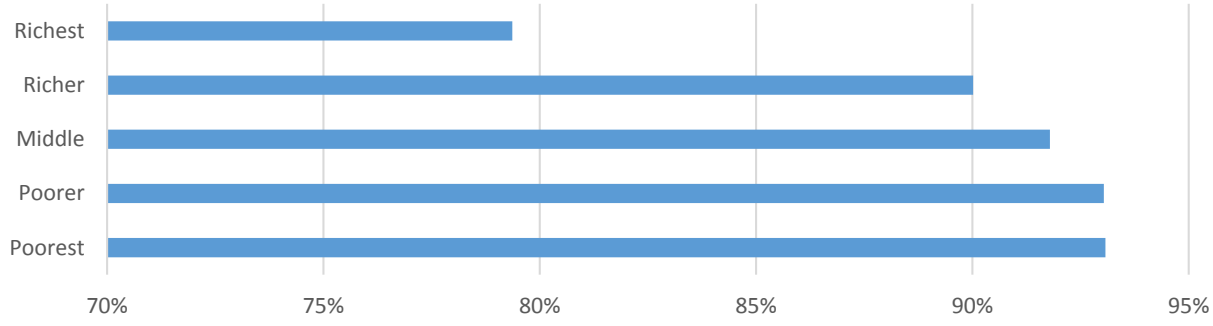
FIGURE 12: PERCENT OF CHILDREN 0-17 LIVING IN RELATED HOUSEHOLDS, ACCORDING TO REGION



[26] According to the World Bank, in 2013 44% of the total population in Nigeria was between the ages of 0-14. Therefore, over 7.6million children under the age of 15 live with neither biological parent, of which approximately 230,000 children have lost both biological parents.

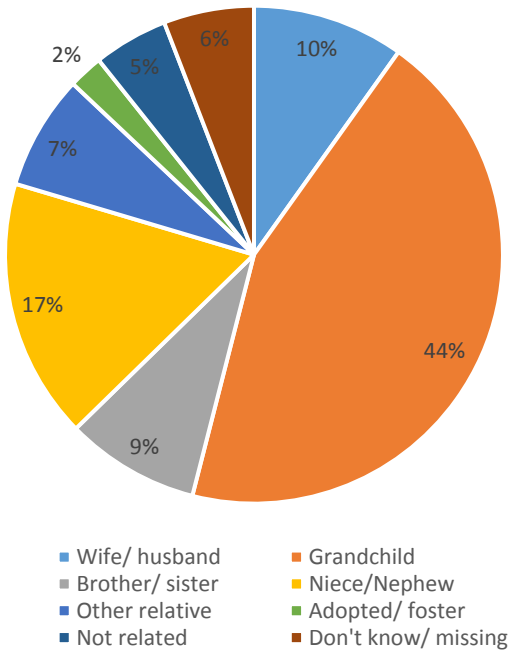
household head, only 87% of children living in urban households do the same. Additionally, households hosting unrelated children are also more likely to be in the richest wealth quintile. While only 3% of children in the poorest wealth quintile report being unrelated to the household head, nearly 13% of children age 0-17 living in the richest quintile live in households where they are not related to the head of the household. It is possible that wealthier households managing more resources are both concentrated in urban centers and more likely to provide opportunities like domestic work or boarding for schooling to unrelated youth. Further research is needed in this area to better tease apart the dynamics at play.

FIGURE 13: PERCENT DISTRIBUTION OF CHILDREN 0-17 LIVING IN HOUSEHOLDS HEADED BY RELATIVES, ACCORDING TO HOUSEHOLD WEALTH QUINTILE



In Nigeria, 44% of children 0-17 living with neither biological parent live with their grandparents, 17% live with their aunts or uncles, 9% live with their siblings, another 6% live with other relatives, and 5% live in households headed by unrelated individuals. One thing to note, in Nigeria, over 11% of all children 0-17 report living with their spouse or parent-in-law. The full breakdown is shown in Figure 14.

FIGURE 14: PERCENT DISTRIBUTION OF CHILD RELATIONSHIP TO HOUSEHOLD HEAD AMONG CHILDREN LIVING WITH NEITHER BIOLOGICAL PARENT 0-17 IN NIGERIA



Children ages 0-14 have a higher likelihood of living with their grandparents at 50%. In fact, living with grandparents seems to be negatively associated with age of the child. Children under the age of four have the highest likelihood of living with their grandparents, with 70% of children 0-1 and 74% of all children ages 2-4 who live with neither biological parent living in households headed by their grandmother or grandfather. An incremental decrease is seen in the proportion of children living with grandparents as children age, coming to a low

prevalence of 20% for children 15-17. In fact in the oldest age cohort, it is more likely that a child who is living with neither biological parent live in a household headed by their spouse (34%). These children are almost entirely female with 17% of all girls 0-17 living with their spouse in Nigeria. Early marriage is prevalent in Nigeria and girls on average marry 9 years prior to men. Figure 15 shows the age break down of living arrangements for children living outside of parental care.

Gender also seems to play a role in determining who children live with when living outside of the care of their biological parents. In Nigeria boys more commonly live in households headed by blood relatives with significantly more boys living with their grandparents, siblings, and aunts and uncles than girls. Conversely, in Nigeria, while no boys 0-17 appear to live with their spouses or parents-in-law, 19% of all girls under the age of 18 live with their husbands or their husband's parents. In other words, nearly one out of every five girls in Nigeria lives with her spouse or in-laws by the time they reach 18 years of age. Boys also have a slightly higher likelihood of living in households in which they are adopted or unrelated to the head as compared to girls.

When disaggregated by geographical characteristics, proportionally more children in living in urban centers live with their aunts and uncles, grandparents, and siblings as compared to children 0-17 living in rural areas. Strikingly, while only 2% of children under the age of 18 living in urban centers live with their spouse, in rural areas, 16% of all children reside in these living arrangements in Nigeria. Additionally, proportionally more children living in urban areas live in households headed by an unrelated individual – while 3% of children living in rural households are not related to the head of the household, twice as

FIGURE 15: PERCENT DISTRIBUTION OF CHILD RELATIONSHIP TO HOUSEHOLD HEAD AMONG CHILDREN LIVING WITH NEITHER BIOLOGICAL PARENT IN BURUNDI, ACCORDING TO AGE

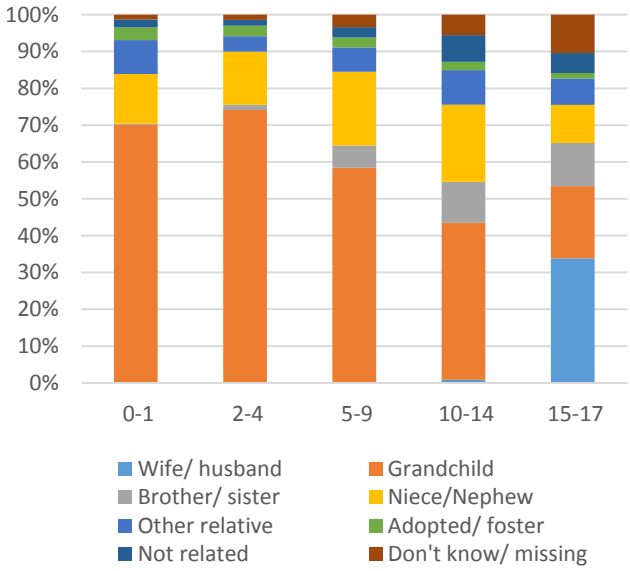
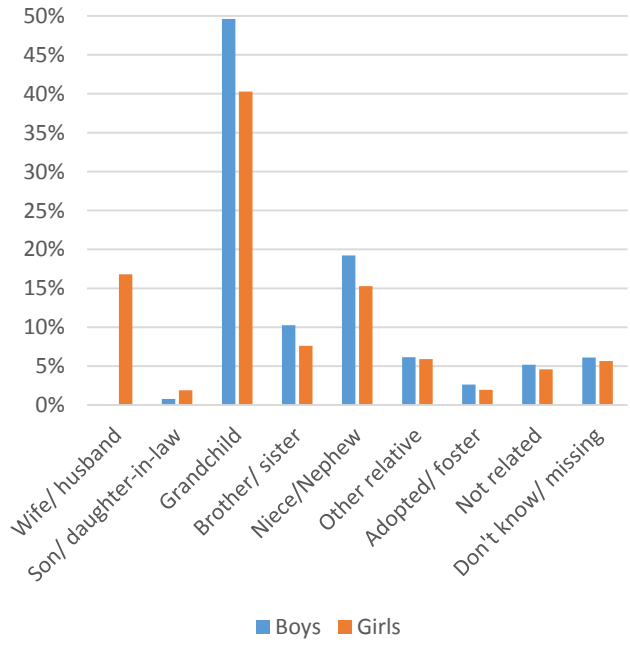


FIGURE 16: PERCENT DISTRIBUTION OF CHILD RELATIONSHIP TO HOUSEHOLD HEAD AMONG CHILDREN LIVING WITH NEITHER BIOLOGICAL PARENT 0-17 IN NIGERIA, ACCORDING TO GENDER



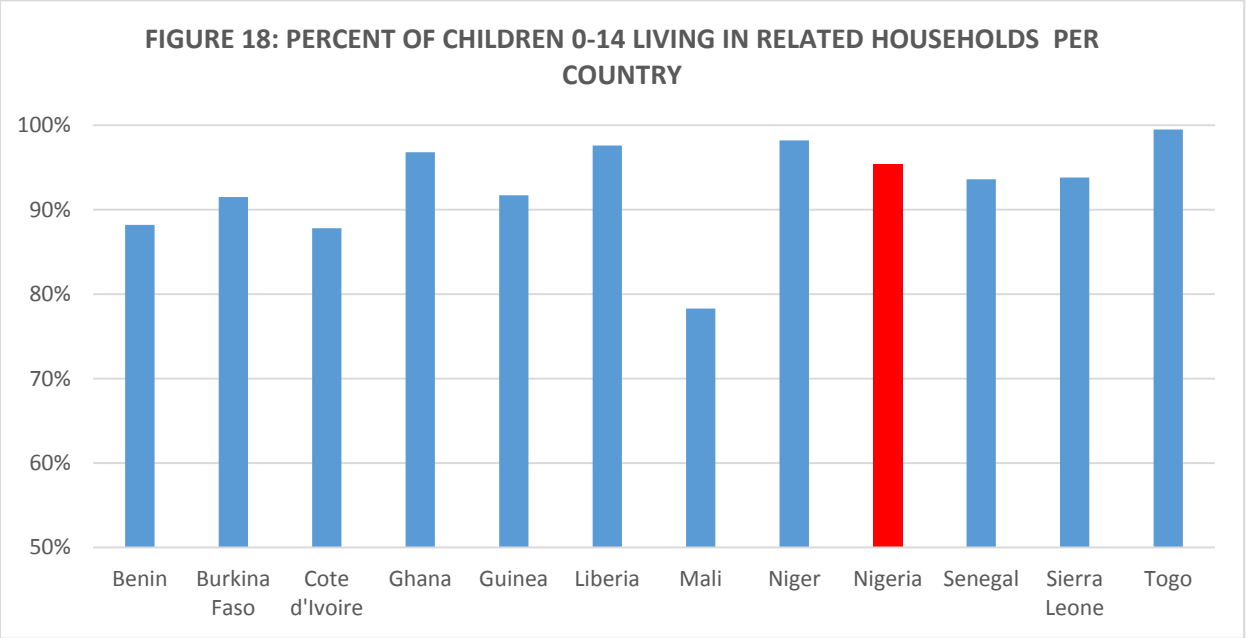
many children living in urban settings live in unrelated care (7%).

Similarly, clear differences are seen between any two regions of the country. As seen in Figure 17, where over half of all children 0-17 not living with their biological parents live with their grandparents in the South West region (55%), only 36% of children do the same in the North East region. Instead the North East (19%) and North West (28%) regions see an elevated prevalence of children 0-17 living with their spouses. The South East region sees the highest percentage of children living in unrelated care (12%), reporting over twice as many children 0-17 in these living arrangements than is found any other region in Nigeria. The North East region of the country sees the highest proportions of children under 18 being adopted and fostered at 3.3%.

FIGURE 17: PERCENT DISTRIBUTION OF CHILD RELATIONSHIP TO HOUSEHOLD HEAD AMONG CHILDREN 0-17 LIVING WITH NEITHER BIOLOGICAL PARENT IN NIGERIA, ACCORDING TO ZONE

In Nigeria, adoption and fostering seem to be weakly associated with gender or age, with slightly more boys than girls being adopted and it becomes less frequent as children age. However, small sample sizes do not allow for any conclusive findings in this sub-cohort. Additionally, caution must be employed when analyzing figures in these categories given the ambiguous definition around fostering within the DHS program. The DHS program defines fostering as "children under age 18 living in households with neither their mother nor their father present." However, as seen throughout this report, most children living with neither biological parent are not categorized as "fostered." Therefore, it is difficult to ascertain which children would be classified as "fostered" in the field. Additionally, in many of these settings formal adoption is quite limited. As a result, the data might be a significant underestimate of the total population of children being fostered and adopted.

Regionally, Nigeria's prevalence of children 0-17 who live in households in which they are related to the household head ranks fifth among all other western African countries. With 95% of all children living with neither biological parent age 0-14 living in households headed by relatives, Nigeria sees similar rates of related care as neighboring Senegal (94%) and Sierra Leone (94%). Overall, 4.8% of all children 0-17 in Nigeria live in households headed by unrelated individuals. In the West African region, Mali sees the lowest rates of children living in related care, recording rates under 80%.



LIMITATIONS:

The data presented here represent children who were residing in households at the time of data collection. It does not include the most vulnerable cohort of children ages 0-17 who are not living in households. These data look at the relationship between the child and the head of the household. They do not provide information on the primary caregiver of the child. Moreover, it does not capture multigenerational households; therefore, it is possible that a child who is reported as the grandchild of the household head is also cohabitating with an aunt or uncle, sibling, or other relative. Also to note, the available questionnaire categories that capture relationships to household head do not distinguish between maternal and paternal relatives, an area that may warrant closer attention in further data collection efforts.

Another limitation found in this report is the inflexibility of the structured household. Flows of communication, individuals, and funding that build the networks of each individual household remain hidden. The data cannot uncover whether children living with neither biological parent who have living biological parents communicate with them, are visited by them, or are supported financially by them. It does not capture the stability of the household composition, leaving unknown the timing of when a parent left or whether the parent comes and goes routinely. These limitations highlight areas of study that require additional data in order to uncover children's care structures in Nigeria.

Nigeria 2013	Table 1. Percent distribution of children under age 18 by living arrangement and survival status of parents, according to background characteristics, Nigeria 2013 TOTAL N=90932															
	Living with both	Living with neither				Living with mother only		Living with father only		Missing information	Total Count	Summary Figures				
	73.5%	10.0%				10.7%		5.4%		0.4%	100.0%					
		Only father alive	Only mother alive	Both alive	Both dead	Father alive	Father dead	Mother alive	Mother dead			Not living with a biological parent	Both parents dead	One parent dead	Number of children 0-14	Number of children 0-17
Sex																
Male	74.8%	0.5%	1.0%	6.4%	0.4%	7.7%	2.9%	5.0%	1.0%	0.2%	100.0%	8.3%	0.4%	5.5%	41005	45846
Female	72.1%	0.6%	1.0%	9.6%	0.4%	8.2%	2.6%	4.0%	0.7%	0.6%	100.0%	11.8%	0.4%	5.0%	40048	45086
Age																
0-1	84.4%	0.1%	0.0%	0.8%	0.0%	12.9%	0.9%	0.6%	0.1%	0.2%	100.0%	1.0%	0.0%	1.1%	12143	12143
2-4	81.7%	0.2%	0.2%	4.6%	0.1%	8.7%	1.2%	2.8%	0.3%	0.2%	100.0%	5.2%	0.1%	2.0%	18146	18146
5-9	75.0%	0.5%	1.0%	7.3%	0.2%	6.9%	2.4%	5.5%	0.9%	0.2%	100.0%	9.0%	0.2%	4.8%	28977	28977
10-14	67.5%	0.8%	1.6%	10.4%	0.7%	6.7%	4.2%	6.3%	1.5%	0.3%	100.0%	13.6%	0.7%	8.2%	21794	21794
15-17	53.9%	1.2%	2.5%	20.2%	1.3%	6.1%	6.0%	5.4%	1.5%	2.0%	100.0%	25.2%	1.3%	11.3%	9878	9878
Residence																
Urban	69.8%	0.7%	1.3%	8.9%	0.5%	10.0%	3.7%	4.0%	0.8%	0.4%	100.0%	11.3%	0.5%	6.5%	29914	34024
Rural	75.7%	0.5%	0.9%	7.5%	0.4%	6.7%	2.2%	4.8%	0.9%	0.4%	100.0%	9.3%	0.4%	4.5%	51146	56915
Region																
North Central	72.1%	0.7%	1.2%	9.6%	0.5%	6.4%	3.0%	5.1%	0.9%	0.4%	100.0%	12.1%	0.5%	5.9%	12355	13855
North East	78.2%	0.5%	1.0%	6.5%	0.3%	4.5%	1.5%	6.3%	1.0%	0.3%	100.0%	8.2%	0.3%	4.0%	135139	15000
North West	83.0%	0.3%	0.5%	5.3%	0.2%	3.9%	1.6%	3.9%	0.8%	0.5%	100.0%	6.3%	0.2%	3.3%	28540	31708
South East	59.7%	0.8%	1.8%	11.2%	0.8%	14.3%	7.0%	3.0%	0.9%	0.6%	100.0%	14.5%	0.8%	10.5%	7324	8372
South South	60.4%	0.8%	1.8%	10.4%	0.8%	14.9%	4.7%	4.8%	0.8%	0.6%	100.0%	13.9%	0.8%	8.1%	7933	9175
South West	64.5%	0.8%	1.1%	11.1%	0.4%	14.3%	2.8%	4.1%	0.8%	0.2%	100.0%	13.4%	0.4%	5.4%	11369	12829
Wealth index																
Poorest	82.8%	0.3%	0.6%	5.8%	0.2%	3.7%	0.9%	4.3%	0.9%	0.4%	100.0%	7.0%	0.2%	2.7%	18487	20367
Poorer	74.6%	0.5%	0.9%	7.4%	0.3%	7.0%	3.1%	4.8%	1.0%	0.5%	100.0%	9.0%	0.3%	5.5%	17361	19250
Middle	69.0%	0.7%	1.2%	9.1%	0.6%	9.5%	3.9%	4.6%	0.9%	0.5%	100.0%	11.6%	0.6%	6.7%	16005	18099
Richer	68.8%	0.6%	1.2%	8.9%	0.5%	10.2%	3.6%	5.0%	0.8%	0.3%	100.0%	11.3%	0.5%	6.3%	15315	17376
Richest	70.4%	0.8%	1.3%	9.5%	0.4%	10.2%	2.5%	3.8%	0.8%	0.4%	100.0%	12.0%	0.4%	5.4%	13892	15846
Total < 15	75.9%	0.5%	0.9%	6.5%	0.3%	8.1%	2.4%	4.4%	0.8%	0.2%	100.0%	8.2%	0.3%	4.5%	81054	81060
Total < 18	73.5%	0.6%	1.0%	8.0%	0.4%	7.9%	2.8%	4.5%	0.9%	0.4%	100.0%	10.0%	0.4%	5.2%	81054	90938

Nigeria 2013	Table 2. Living arrangements among children under age 18 not living with a biological parent - the percent distribution of survival status of parent and the percent distribution of relationship to head of household, according to background characteristics, Nigeria 2013 TOTAL N=9373																			
	Living with neither							Relationship to head												
	Only father alive	Only mother alive	Both alive	Both dead	Total	Both parents dead	Only one dead	Wife/ husband	Son/ daughter-in-law	Grandchild	Brother/ sister	Niece/Nephew	Other relative	Adopted/ foster	Not related	Don't know/ missing	Total in family care	Total not in family care	Number of weighted children 0-14	Number of weighted children 0-17	Number of unweighted children 0-17
Sex																				
Male	5.7%	12.2%	76.3%	4.3%	100.0%	4.3%	17.9%	0.0%	0.8%	49.6%	10.3%	19.2%	6.2%	2.6%	5.2%	6.1%	88.7%	5.2%	3109	3871	5416
Female	5.2%	8.6%	79.0%	3.6%	100.0%	3.6%	13.8%	16.8%	1.9%	40.3%	7.6%	15.3%	5.9%	2.0%	4.6%	5.7%	89.7%	4.6%	3604	5499	7087
Age																				
0-1	11.6%	4.2%	77.0%	2.8%	100.0%	2.8%	15.9%	0.0%	1.0%	70.1%	0.3%	13.4%	8.2%	3.4%	2.2%	1.3%	96.5%	2.2%	3034	131	176
2-4	4.7%	4.3%	87.8%	1.7%	100.0%	1.7%	9.0%	0.0%	0.2%	74.1%	1.4%	14.4%	4.0%	2.8%	1.6%	1.4%	97.0%	1.6%	3682	950	1157
5-9	5.4%	11.1%	79.9%	2.6%	100.0%	2.6%	16.4%	0.0%	1.3%	58.5%	6.0%	20.0%	5.3%	2.7%	2.8%	3.4%	93.8%	2.8%	2637	2637	3474
10-14	6.1%	11.9%	75.6%	5.0%	100.0%	5.0%	18.0%	0.8%	1.1%	42.6%	11.1%	21.0%	8.3%	2.3%	7.3%	5.5%	87.2%	7.3%	2998	2998	4138
15-17	4.6%	9.4%	75.0%	4.6%	100.0%	4.6%	14.1%	33.8%	2.5%	19.6%	11.7%	10.4%	4.7%	1.5%	5.4%	10.4%	84.2%	5.4%		2657	3564
Residence																				
Urban	5.8%	11.4%	77.0%	4.1%	100.0%	4.1%	17.2%	1.9%	1.0%	45.5%	9.1%	19.9%	7.1%	2.4%	6.8%	6.3%	86.9%	6.8%	3034	3919	5086
Rural	5.1%	9.2%	78.5%	3.7%	100.0%	3.7%	14.3%	15.6%	1.8%	43.1%	8.4%	14.8%	5.2%	2.1%	3.4%	5.5%	91.1%	3.4%	3682	5454	7423
Region																				
North Central	5.5%	9.9%	78.5%	4.3%	100.0%	4.3%	15.4%	3.9%	1.6%	41.5%	12.8%	22.8%	4.1%	2.6%	3.7%	7.0%	89.3%	3.7%	1296	1703	2390
North East	5.4%	12.1%	76.5%	3.3%	100.0%	3.3%	17.5%	19.3%	2.6%	35.6%	8.4%	16.6%	5.4%	3.3%	3.5%	5.4%	91.1%	3.5%	823	1269	1984
North West	5.2%	7.9%	78.7%	2.6%	100.0%	2.6%	13.1%	27.9%	2.6%	41.0%	5.1%	9.1%	5.2%	2.6%	1.8%	4.7%	93.5%	1.8%	1279	2129	2100
South East	5.3%	12.2%	75.4%	5.4%	100.0%	5.4%	17.5%	0.2%	0.4%	48.6%	8.0%	13.6%	9.9%	1.9%	11.6%	5.8%	82.5%	11.6%	1008	1239	1752
South South	5.6%	12.9%	73.6%	3.8%				0.6%	0.4%	42.2%	13.5%	20.2%	8.0%	1.8%	5.4%	7.9%	86.6%	5.4%	935	1299	2277
South West	5.6%	7.9%	82.3%	3.0%	100.0%	3.0%	13.6%	0.4%	0.5%	55.1%	6.3%	20.9%	5.2%	1.3%	5.4%	4.8%	89.8%	5.4%	1375	1734	2006
Wealth index																				
Poorest	4.2%	8.4%	80.1%	3.1%	100.0%	3.1%	12.6%	28.6%	3.4%	42.7%	4.4%	8.7%	3.6%	1.7%	2.5%	4.4%	93.1%	2.5%	899	1477	1730
Poorer	5.2%	9.6%	78.3%	3.2%	100.0%	3.2%	14.8%	17.5%	1.2%	44.3%	7.3%	14.9%	4.5%	3.3%	1.7%	5.3%	93.0%	1.7%	1239	1809	2328
Middle	6.0%	10.3%	76.2%	4.6%	100.0%	4.6%	16.3%	6.4%	1.6%	54.5%	9.7%	13.1%	4.2%	2.4%	2.8%	5.4%	91.8%	2.8%	1576	2168	3106
Richer	5.2%	10.6%	78.2%	4.6%	100.0%	4.6%	15.8%	2.0%	0.9%	49.3%	11.1%	19.0%	6.0%	1.7%	4.4%	5.6%	90.0%	4.4%	1558	1983	2899
Richest	6.2%	11.0%	77.4%	3.6%	100.0%	3.6%	17.2%	0.5%	0.5%	28.1%	9.7%	27.2%	11.4%	2.1%	12.4%	8.3%	79.4%	12.4%	1444	1935	2446
Total < 15	5.7%	10.4%	79.0%	3.6%	100.0%	3.6%	16.1%	0.4%	1.0%	53.8%	7.5%	19.3%	6.5%	2.5%	4.6%	4.0%	91.4%	4.6%	6716	6716	8943
Total < 18	5.4%	10.1%	77.9%	3.9%	100.0%	3.9%	15.5%	9.9%	1.4%	44.1%	8.7%	16.9%	6.0%	2.2%	4.8%	5.9%	89.3%	4.8%	6716	9373	12509