

Uganda DHS 2011: Children's Care and Living Arrangements



WITH SUPPORT FROM



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 the 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 Uganda Bureau of Statistics (UBOS) and ICF International Inc. 2012. Uganda Demographic and Health Survey 2011. Kampala, Uganda: UBOS and Calverton, Maryland: ICF International Inc.

Other maps are produced through ICF International. (2012). The DHS Program STATcompiler. Retrieved from <http://www.statcompiler.com>.

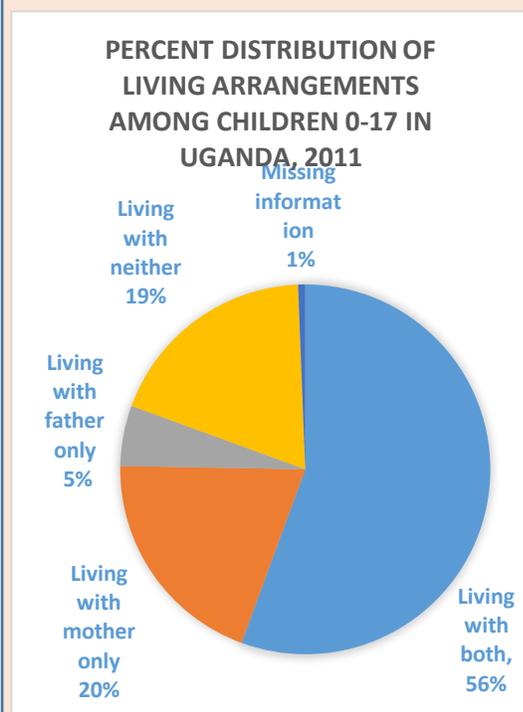
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EXECUTIVE SUMMARY:

Children's Living Arrangements:



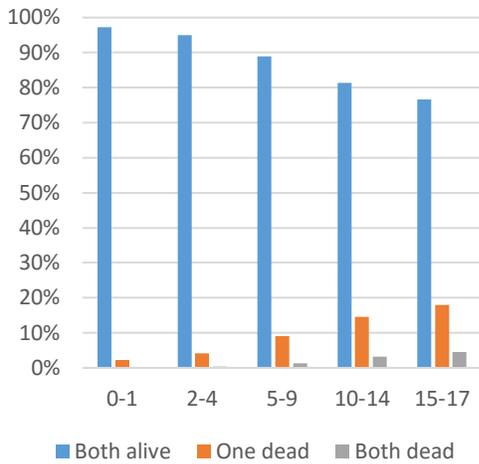
living with a single biological parent in Uganda. Proportionally more children living in richer households live with only their biological father relative to poorer households. Conversely, more children living in poorer households live with only their biological mother compared to households in richer quintiles in Uganda.

- In Uganda, 56% of children aged 0-17 and 58% of children aged 0-14 are living with both biological parents. Another 20% are living with their biological mother and 5% are living with their father. A significant percentage of children (19%) do not live with either biological parent.
- Large variations in living arrangement are seen according to gender, age group, wealth quintile, rural-urban, and regional background characteristics.
 - Boys have a higher likelihood of living with both biological parents and are more likely to live with their biological father when compared to girls age 0-17; girls, on the other hand, are more likely to live with neither biological parent relative to boys.
 - At an early age the large majority of children still live with both biological parents; this declines with age for children 0-17 (from 72% to 40%). Living with a single biological parent or neither biological parent becomes more common as children get older.
 - Wealth quintile appears to be associated with
- Provinces with large urban centers and higher concentrations of wealth such as Kampala see higher rates of children living without a biological parent, and lower rates of children living with both parents when compared to more rural areas of the country.
- Twelve percent of all children 0-14 in Uganda live with neither biological parent when both parents are alive – close to the highest rate in the East Africa regional context. Only the islands of Comoros (13%) and Zimbabwe (13%) see higher rates.

Parent Survivorship:

- By age 18, 1 in 10 children in Uganda have lost one biological parent and 2% have lost both. Between birth and age 15, 8.5% of children have lost one biological parent and 1.5% have lost both.
 - The Karamoja province in Uganda houses the highest percentage of children who have experienced orphaning, with one in twenty children (4.9%) under the age of 18 having no surviving biological parents.
 - Household wealth appears to be associated with parent survivorship for children in Uganda. Proportionally lower rates of parental death are seen in households belonging to the higher wealth quintiles compared to poorer households (range: 12.4% - 7.7%).

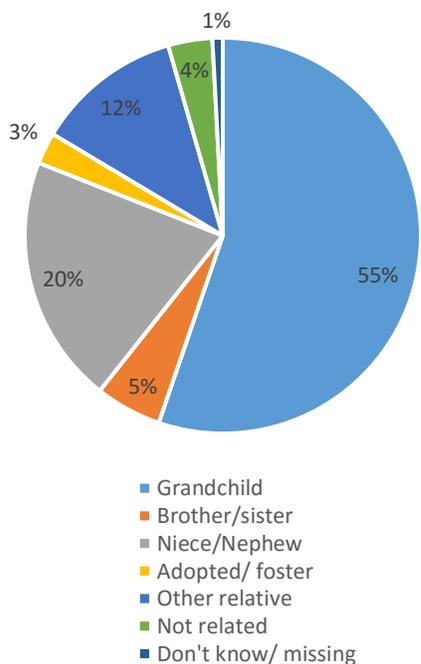
PERCENT DISTRIBUTION OF PARENTAL SURVIVAL STATUS ACCORDING TO AGE GROUP OF CHILD, UGANDA 2011



- Great diversity is seen in the regional distribution of parental death for children under the age of 18 in Uganda. For instance the Karamoja (14%) region sees nearly twice the prevalence of children who have lost a mother or a father compared to the East-Central region (7%).
- While this rate of parental loss increased during the previous three decades, between the 2006 Uganda DHS and the 2011 Uganda DHS there has been a marked decline in single and double parent death.
- Regionally, Uganda has similar rates of parental death and orphanhood as those of neighboring states. In the East Africa region, for children under 15, the prevalence of single parent loss ranges from 4% on the island of Comoros to 13% in Zimbabwe.

Living Arrangements of Children Living with Neither Biological Parent:

PERCENT DISTRIBUTION OF CHILD RELATIONSHIP TO HOUSEHOLD HEAD AMONG CHILDREN 0-17 LIVING WITH NEITHER BIOLOGICAL PARENT IN UGANDA, 2011



- Nearly one in five children age 0-17 in Uganda live with neither biological parent (19%). Of these, 68% have two living biological parents and another 22% have one. In Uganda, 10% of these children do not have a surviving biological parent.
- The rate of parental death experienced by children living in households with neither biological parent has significantly decreased since 2006. In 2011 10% of children living outside of parent care had lost both biological parents, down from 15% in 2006; 68% had both biological parents alive, up from 57% in 2006.
- The large majority of these children ages 0-17 - 96% - live in households headed by a relative.
- Uganda has a higher prevalence of children living in related care than most other countries in the East Africa region.
- Among children living with neither biological parent, age is a clear determinant of who children are most likely to live with. In the youngest age groups the prevalence of living in households headed by grandparents is 84% for children aged 0-1 and 78% for children aged 2-4, while

only 29% for the oldest age group of 15-17. Conversely, these younger age groups have very low rates of children living in households headed by aunts and uncles, while in the older age group the likelihood of living with these relatives becomes much more common at 24%.

- Only 4% of surveyed households report hosting a child unrelated to the head of the household
- Urban households and households in wealthier quintiles have a higher likelihood of hosting unrelated children and these children are generally older.
 - Kampala sees a strikingly high number of children living in unrelated care with 19% of all children living with neither biological parent living in households with an unrelated household head. The second highest rate is seen in the southwest region at 7%.

“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.

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.⁶

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 indicators 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 newborn 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.

Better Care Network is working with partner organizations to support more systematic use of existing household level data sets, particularly DHS and MICS data, to provide a better picture of the patterns and trends relating to children in households and their living and care arrangements. In collaboration with members of the Child Protection Monitoring, Evaluation Reference Group (CP MERG) and its

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.

Technical Working Group on Children Without Adequate Care, and with support from Save the Children, it is developing a series of country briefs using the latest available data set from DHS or MICS for the country and presenting the data and analysis of the trends, when data is available, regarding children's living arrangements and care situations. 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 and the content of these papers will evolve as a result. The brief is targeted to policy makers, researchers, and practitioners working to inform policy and programs for children's care and protection at country and international levels.

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.

UGANDA 2011 DHS:

The data presented in this report come from the 2011 Uganda Demographic and Health Survey (DHS) that was carried out by the Uganda Bureau of Statistics between May and December 2011⁷. 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 government of Uganda, USAID/Uganda, the United Nations Population Fund, United Nations Children's Fund, the World Health Organization, and the governments of Ireland and the UK.

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 2011 Uganda DHS data collection effort, a total of 9,033 households were interviewed and 45,046 household members were listed. Of these, 25,923 individuals were under the age of 18 and 22,977 children were under the age of 15. The household questionnaire retained a response rate of 95.3%. 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 numbers below are slightly larger than the figures reported in the 2011 Uganda 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 Uganda in its regional context and compare across other southern African states, data was pulled from nationally representative Demographic and Health Surveys (DHS) that were most recently run in these neighboring countries. The East African Region is defined by the DHS as including the following countries: Burundi⁸, Comoros⁹, Eritrea¹⁰, Ethiopia⁷, Kenya¹¹, Madagascar¹², Malawi¹³, Mozambique¹⁴, Rwanda¹⁵, Tanzania¹⁶, Uganda¹⁷, Zambia¹⁸, and Zimbabwe¹⁹. Given that many of these

⁷ Uganda Bureau of Statistics (UBOS) and ICF International Inc. 2012. *Uganda Demographic and Health Survey 2011*. Kampala, Uganda: UBOS and Calverton, Maryland: ICF International Inc.

⁸ Institut de Statistiques et d'Études Économiques du Burundi (ISTEEBU), Ministère de la Santé Publique et de la Lutte contre le Sida [Burundi] (MSPLS), et ICF International. 2012. *Enquête Démographique et de Santé Burundi 2010*. Bujumbura, Burundi : ISTEEBU, MSPLS, et ICF International.

⁹ Direction Générale de la Statistique et de la Prospective (DGSP) et ICF International. 2014. *Enquête Démographique et de Santé et à Indicateurs Multiples aux Comores 2012*. Rockville, MD 20850, USA : DGSP et ICF International.

¹⁰ National Statistics and Evaluation Office (NSEO) [Eritrea] and ORC Macro. 2003. *Eritrea Demographic and Health Survey 2002*. Calverton, Maryland, USA: National Statistics and Evaluation Office and ORC Macro.

¹¹ Central Bureau of Statistics (CBS) [Kenya], Ministry of Health (MOH) [Kenya], and ORC Macro. 2004. *Kenya Demographic and Health Survey 2003*. Calverton, Maryland: CBS, MOH, and ORC Macro.

¹² Institut National de la Statistique (INSTAT) et ICF Macro. 2010. *Enquête Démographique et de Santé de Madagascar 2008-2009*. Antananarivo, Madagascar : INSTAT et ICF Macro.

¹³ Cellule de Planification et de Statistique du Ministère de la Santé (CPS/MS), Direction Nationale de la Statistique et de l'Informatique du Ministère de l'Économie, de l'Industrie et du Commerce (DNSI/MEIC) et Macro International Inc. 2007. *Enquête Démographique et de Santé du Mali 2006*. Calverton, Maryland, USA : CPS/DNSI et Macro International Inc.

¹⁴ Ministerio da Saude (MISAU), Instituto Nacional de Estatística (INE) e ICF International (ICFI). *Moçambique Inquérito Demográfico e de Saúde 2011*. Calverton, Maryland, USA: MISAU, INE e ICFI.

countries collected data for the 0-14 age range until recently, for cross country comparisons under 15 age groups will be used. The 2006 and 2000-2001 DHS surveys conducted in Uganda 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 2014²⁰.

¹⁵ National Institute of Statistics of Rwanda (NISR) [Rwanda], Ministry of Health (MOH) [Rwanda], and ICF International. 2012. *Rwanda Demographic and Health Survey 2010*. Calverton, Maryland, USA: NISR, MOH, and ICF International.

¹⁶ National Bureau of Statistics (NBS) [Tanzania] and ICF Macro. 2011. *Tanzania Demographic and Health Survey 2010*. Dar es Salaam, Tanzania: NBS and ICF Macro

¹⁷ Uganda Bureau of Statistics (UBOS) and ICF International Inc. 2012. *Uganda Demographic and Health Survey 2011*. Kampala, Uganda: UBOS and Calverton, Maryland: ICF International Inc.

¹⁸ Central Statistical Office (CSO), Ministry of Health (MOH), Tropical Diseases Research Centre (TDRC), University of Zambia, and Macro International Inc. 2009. *Zambia Demographic and Health Survey 2007*. Calverton, Maryland, USA: CSO and Macro International Inc.

¹⁹ Zimbabwe National Statistics Agency (ZIMSTAT) and ICF International. 2012. *Zimbabwe Demographic and Health Survey 2010-11*. Calverton, Maryland: ZIMSTAT and ICF International Inc.

²⁰ United Nations Development Program 2014. *Sustaining Human Progress: Reducing Vulnerabilities and Building Resilience*. Human Development Report 2014. Tokyo.

BASIC STATISTICS^{21, 22}:

Country

- Total population (2012): 37,580,000
- Gross Domestic Product per capita: \$1,334.14
- Human Development Index: .484 (Rank – 164)
- Population living below \$1.25 a day: 38%
- Life expectancy at birth: 59 years
- Median age: 15.9 years
- Urban vs. rural distribution: 16% of the population is urban, 84% rural
- Under-5 mortality rate: 69 per 1,000 live births.
- HIV/AIDS prevalence: 7%
- Birth registration of children (% under age 5): 30%
- Child labor (age 5-14): 25%

Households

- Mean household composition: 4.9 members
- Over half of individuals in Uganda are under the age of 16
- Female headed households: 30%
- Urban vs. rural distribution: 19% of sampled households were urban; 71% rural
- Dependency composition per age group as a percent of the population: 51% age 0-14; 46% age 15-64; 3% age 65+

Marriage:

- Median age at first marriage: 17.9 years for women; 22.3 years for men
 - Women in rural households marry on average 2 years earlier than women in urban households (17.8 years vs 20).
 - Early marriage: 3% of all young women 15-19 are married or in a union.

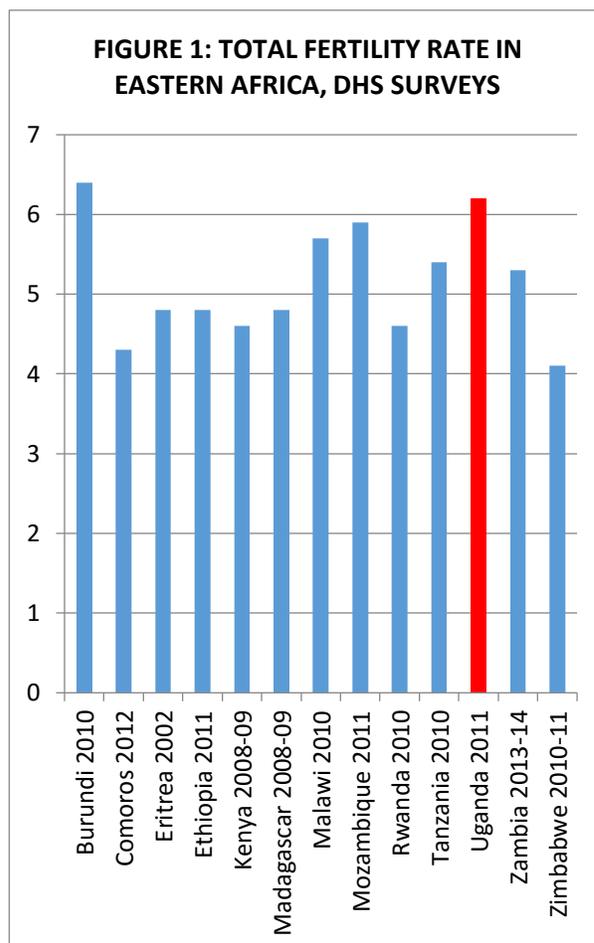
²¹ United Nations Development Program 2014. *Sustaining Human Progress: Reducing Vulnerabilities and Building Resilience*. Human Development Report 2014. Tokyo.

²² Uganda Bureau of Statistics (UBOS) and ICF International Inc. 2012. *Uganda Demographic and Health Survey 2011*. Kampala, Uganda: UBOS and Calverton, Maryland: ICF International Inc.

- This has significantly declined over the last 30 years from 19%.

Fertility

- Total Fertility Rate: 6.2 children
 - Fertility for women living in rural households is nearly double those living in urban areas.
 - Adolescent fertility: 134 per 1,000 girls age 15-19.
 - 24% of women age 15-19 are already mothers or currently pregnant with their first child.
 - 39% of all Ugandan women age 20-49 report having given birth prior to age 18 and 63% by age 20.
 - 25% of births occur within 24 months of a previous birth.
 - Uganda and Zambia have the highest TFR in the region.



CHILDREN'S LIVING ARRANGEMENTS:

In Uganda, 58% of children under the age of 15 live in households with both biological parents. While they represent the majority of children living in households in the nation, the rate is still markedly lower than in many neighboring countries. For instance, next-door in Tanzania 62% of children live with both biological parents, as do 65% in Rwanda, 72% in Burundi and 75% of children age 0-14 in Ethiopia. Still, the prevalence of children living with both biological parents is comparable to countries such as Kenya (58%), Malawi (59%) and Mozambique (55%). When looking at all children under the age of 18 in Uganda, the prevalence of living with both parents drops slightly to under 56%.

As shown in Figure 2, among children 0-17 in Uganda, 56% live with both biological parents, 20% live with only their mother, 5% live with only their father, and 19% live with neither biological parent. When disaggregated by background characteristics, factors such as gender, age, and geographic region appear to significantly influence living arrangements among children in Uganda. Boys have an improved likelihood of living with both biological parents. Girls not only live less frequently with both biological parents, more girls (20%) than boys (18%) live with neither biological parent in Uganda. Moreover, among children who live with a single biological parent, a higher proportion of boys (6%) live with their fathers as compared to girls (4%).

Variations in living arrangements across age group are also evident in Uganda. At an early age the large majority of children still live with at least one biological parent; this proportion declines in a linear fashion with age. Where only 40% of children in the oldest age group live with both of their biological parents, 66% of children ages 2-4 and 72% of children under two live with both biological parents. Conversely, the likelihood that a child will live with neither biological parent increases with age. While fewer

FIGURE 2: PERCENT DISTRIBUTION OF LIVING ARRANGEMENTS AMONG CHILDREN 0-17 IN UGANDA, 2011

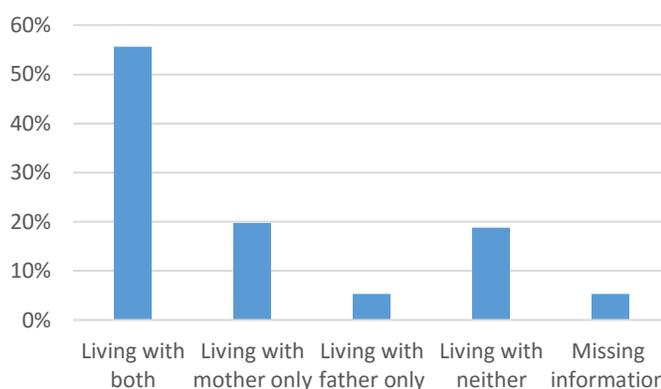
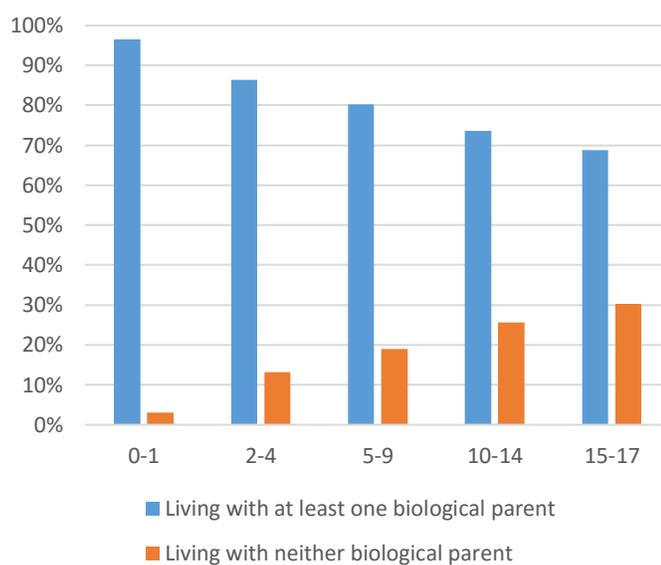
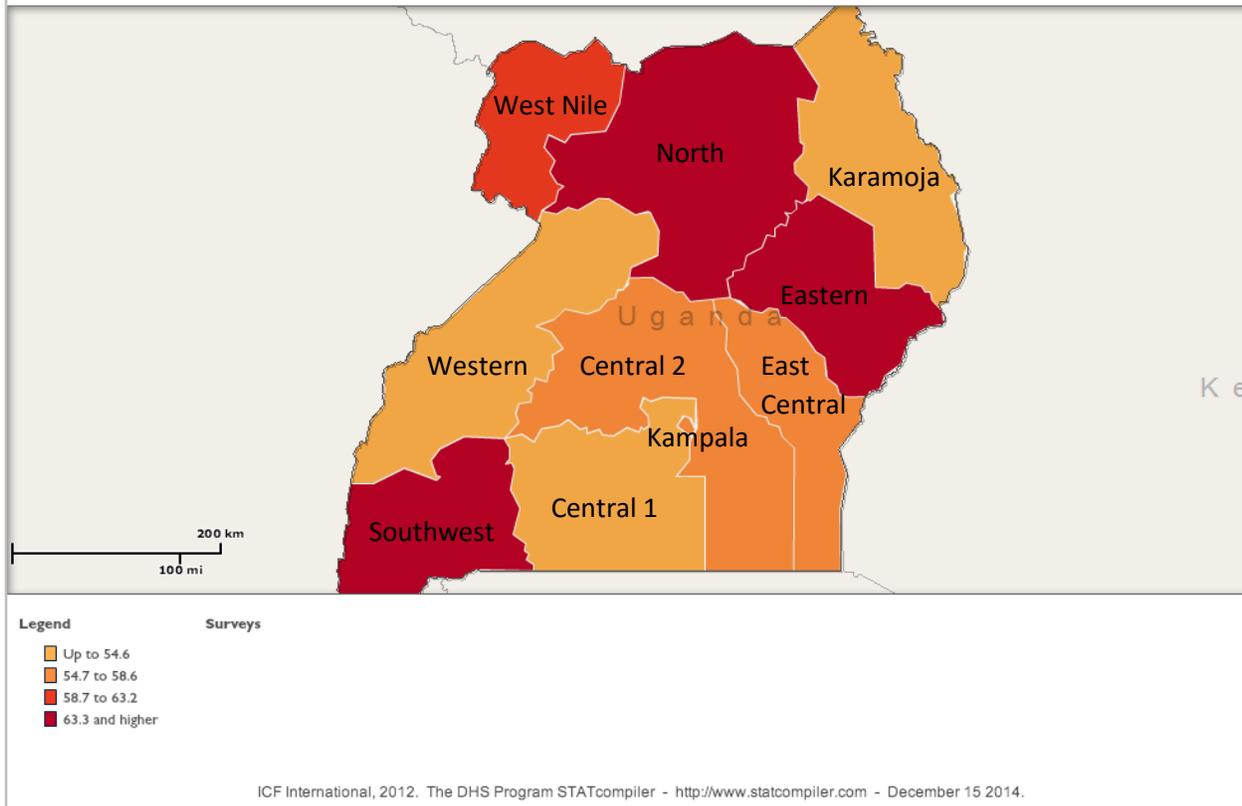


FIGURE 3: PERCENT DISTRIBUTION OF CHILDREN LIVING WITH AT LEAST ONE BIOLOGICAL PARENT VS NEITHER BIOLOGICAL PARENT AMONG CHILDREN 0-17 IN UGANDA, ACCORDING TO AGE GROUP



than 3% of children under 2 live with neither biological parent, there is an exponential increase in children living with neither biological parent, reaching 26% for children age 10-14 and 30% for children age 15-17 (as seen in Figure 3 above).

FIGURE 4: PERCENT OF CHILDREN 0-14 LIVING WITH BOTH BIOLOGICAL PARENTS BY REGION



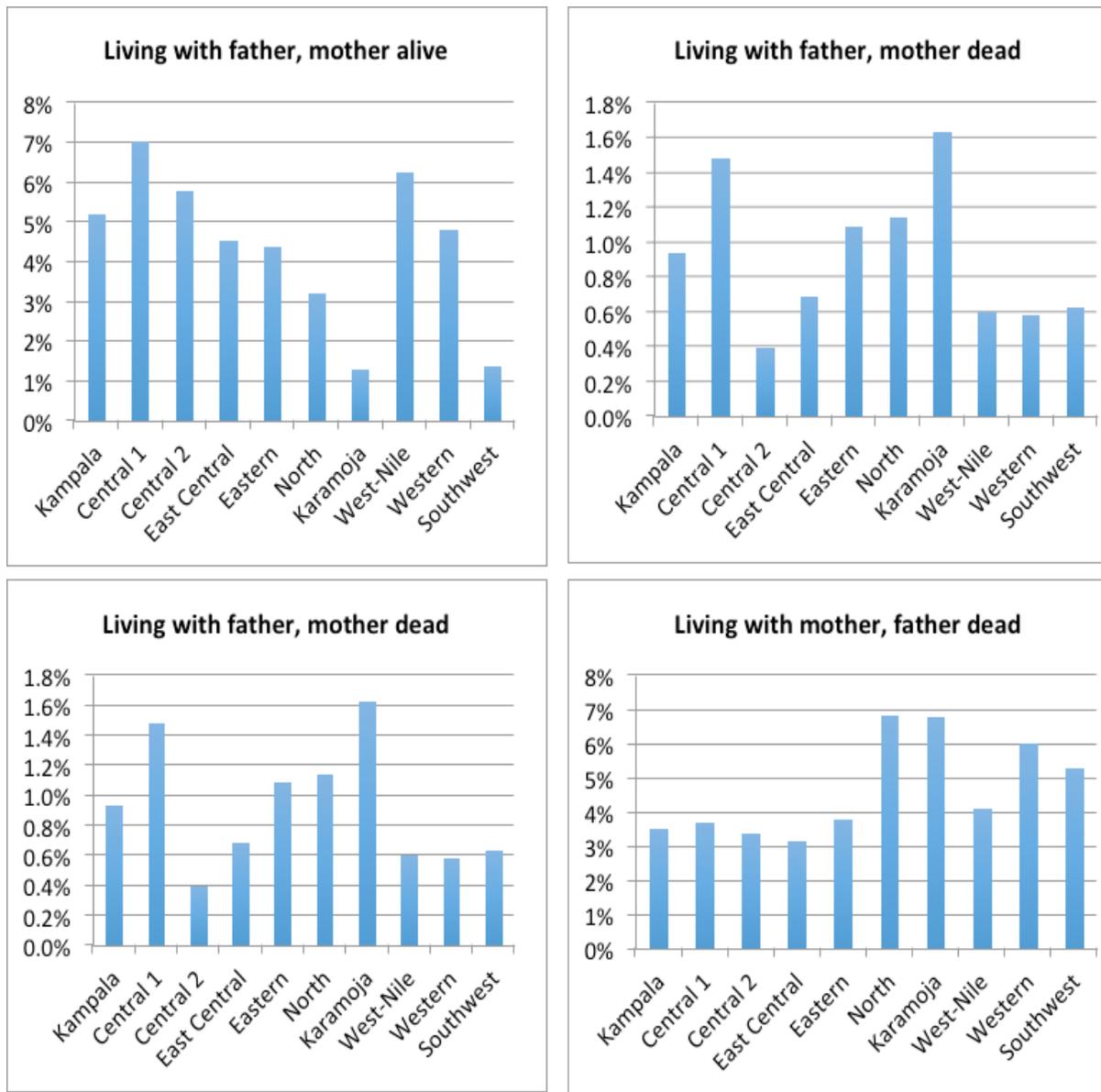
Children in rural regions of Uganda more commonly live with both biological parents when compared to children in urban households (56% to 49%). For the purposes of this data collection effort, Uganda’s 112 administrative districts were subdivided into 10 geographic areas to understand the regional diversity found in country (refer to map on cover page). Children in the Eastern area (62%), Southwest area (61%) and North area (61%) are much more likely to live with both biological parents as compared to the Kampala province (51%) which houses the nation’s capital, the Central 1 region (49%), Karamoja (50%), and the Western area (51%). Interestingly, while the single and double parental survival is approximately equal among rural and urban households in Uganda, a larger proportion of children in urban households live with neither biological parent – 23% of children in urban households versus 18% of children living in rural households live with neither biological parent.

Household wealth quintile appears to be linearly associated with children’s likelihood of living with neither biological parent. In the poorest households, proportionally more children were found to live with at least one biological parent when compared to households in the richest quintile. An incremental increase in living with neither biological parent was seen for every wealth quintile ranging from 15% of children living in the poorest households to 23% of children in the richest households living with neither biological parent. Important to note is the great disparities in wealth distribution seen across the different regions of Uganda. As stated in the Uganda DHS 2011 Final Report, over 90% of the population

of Kampala falls into the richest wealth quintile, while in more rural regions such as Karamoja, which borders South Sudan, 8 in 10 households fall into the lowest quintile. Therefore differences seen across wealth quintile and region likely overlap.

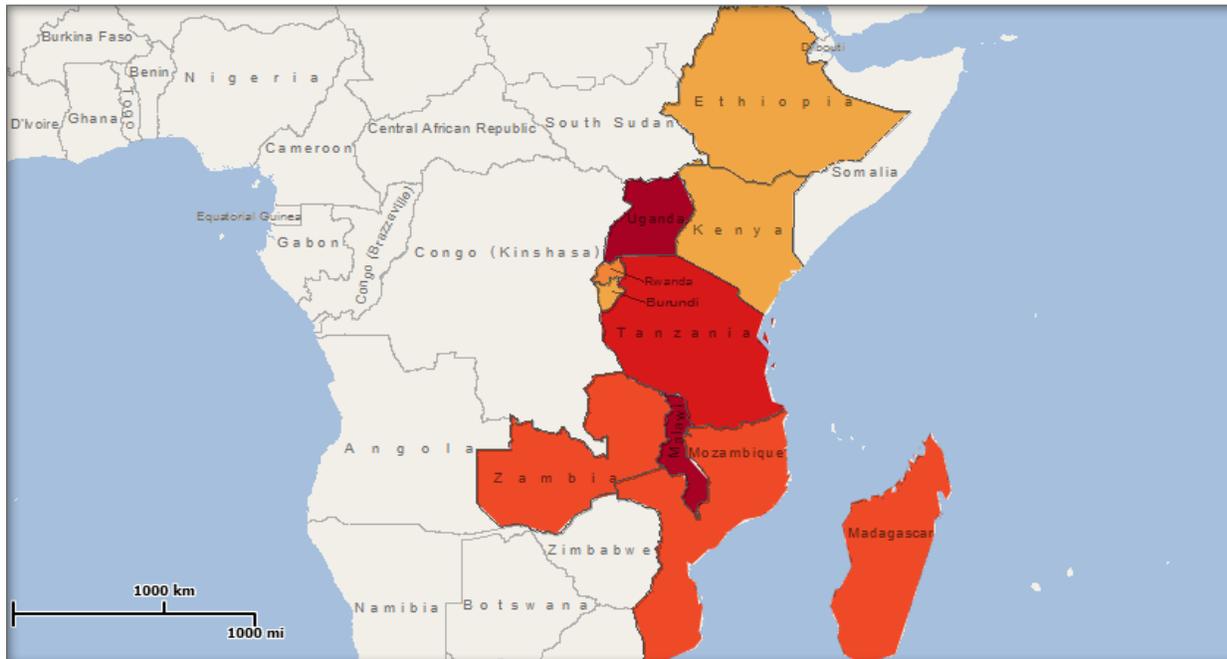
On the aggregate gender, age and wealth seem to have a mixed relationship on the number of children living with a single biological parent. However, a varied regional landscape is seen across Uganda. Over 30% of children live with only one biological parent in the Western and Karamoja areas, while in the North region wedged geographically between them under 20% of children do the same. As seen in Figure 5 there are significant in country differences when it comes to children living in households with a single biological parent. Moreover, children in urban households have an elevated likelihood of living with only one biological parent (27%) than do children in rural households (25%).

FIGURE 5: REGIONAL VARIATIONS IN LIVING ARRANGEMENTS AMONG CHILDREN 0-17 LIVING WITH A SINGLE BIOLOGICAL PARENT IN UGANDA



Regionally, Uganda has a comparable rate of children age 0-14 who live with only one biological parent in the context of other southern and eastern African states (24%). However, Uganda stands apart when it comes to the proportion of children age 0-14 who live with neither biological parent when both parents are alive. While neighboring states like Burundi (4.3%), Rwanda (7.3%), and Kenya (6.5%) have under 10% of children in country living with neither biological parent if their parents are alive, in Uganda 12% of all children 0-15 live without either living biological parent. This number is higher still for all children in Uganda under 18 at 13% (not reflected in Figure 6).

FIGURE 6: PERCENT OF CHILDREN 0-14 LIVING WITH NEITHER BIOLOGICAL PARENT WHEN BOTH ARE ALIVE BY COUNTRY



Legend

- Up to 7.1
- 7.2 to 9.0
- 9.1 to 9.9
- 10.0 to 10.6
- 10.7 and higher

Surveys

Burundi 2010 DHS	4.3	Malawi 2010 DHS	10.8	Zambia 2007 DHS
Ethiopia 2011 DHS	6.5	Mozambique 2011 DHS	9.5	
Kenya 2003 DHS	6.5	Rwanda 2010 DHS	7.3	
Lesotho 2009 DHS	12.5	Tanzania 2010 DHS	10.6	
Madagascar 2008-09 DHS	9.5	Uganda 2011 DHS	11.8	

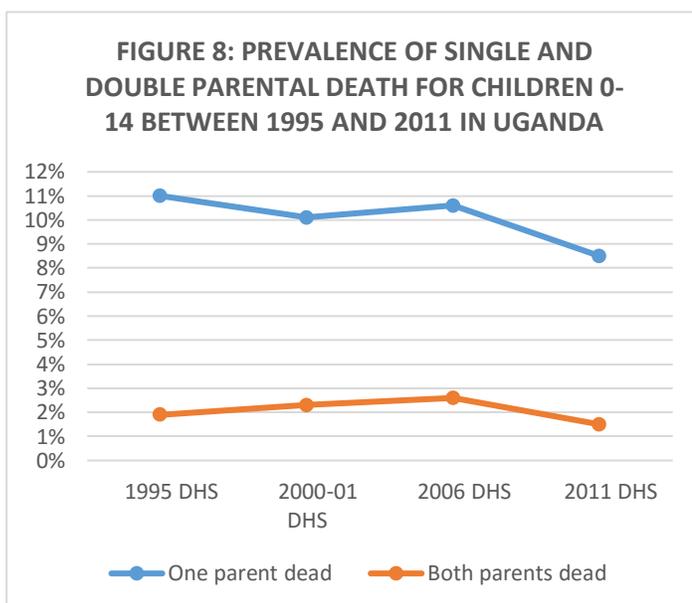
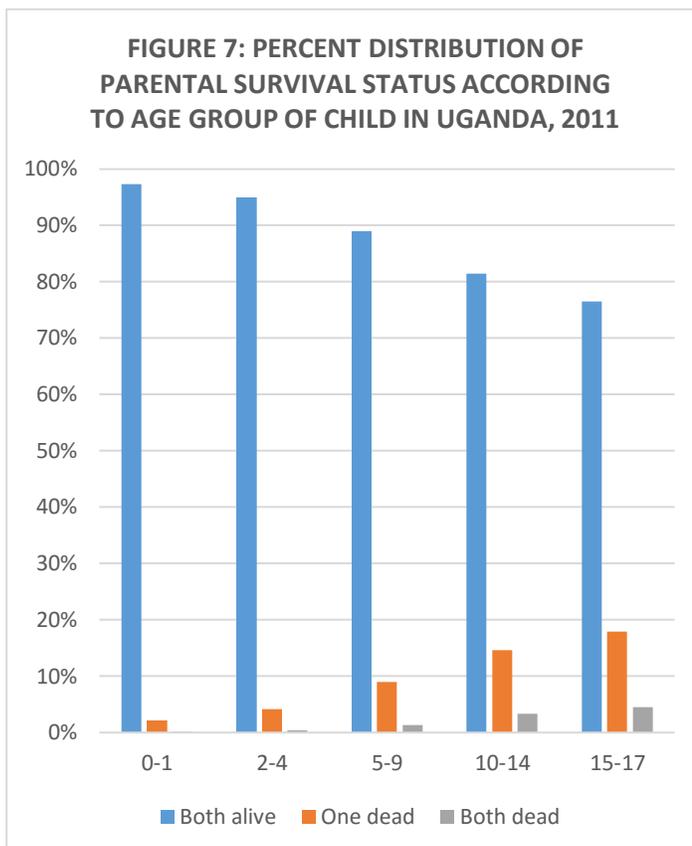
ICF International, 2012. The DHS Program STATcompiler - <http://www.statcompiler.com> - October 8 2014.

DEATH OF A PARENT (SINGLE AND DOUBLE “ORPHANHOOD”):

Loss of a parent is not uncommon for children age 0-17 in Uganda. By the time children reach 15 in Uganda, 8.5% of them have lost one biological parent and 1.5% have lost both. By age 18, 1 in 10 children in Uganda have lost one biological parent and 2% have lost both. Parental loss is positively associated with age: 98% of all children under the age of one having two living parents, while 18% of children age 15-17 have lost a biological parent as seen in Figure 7.

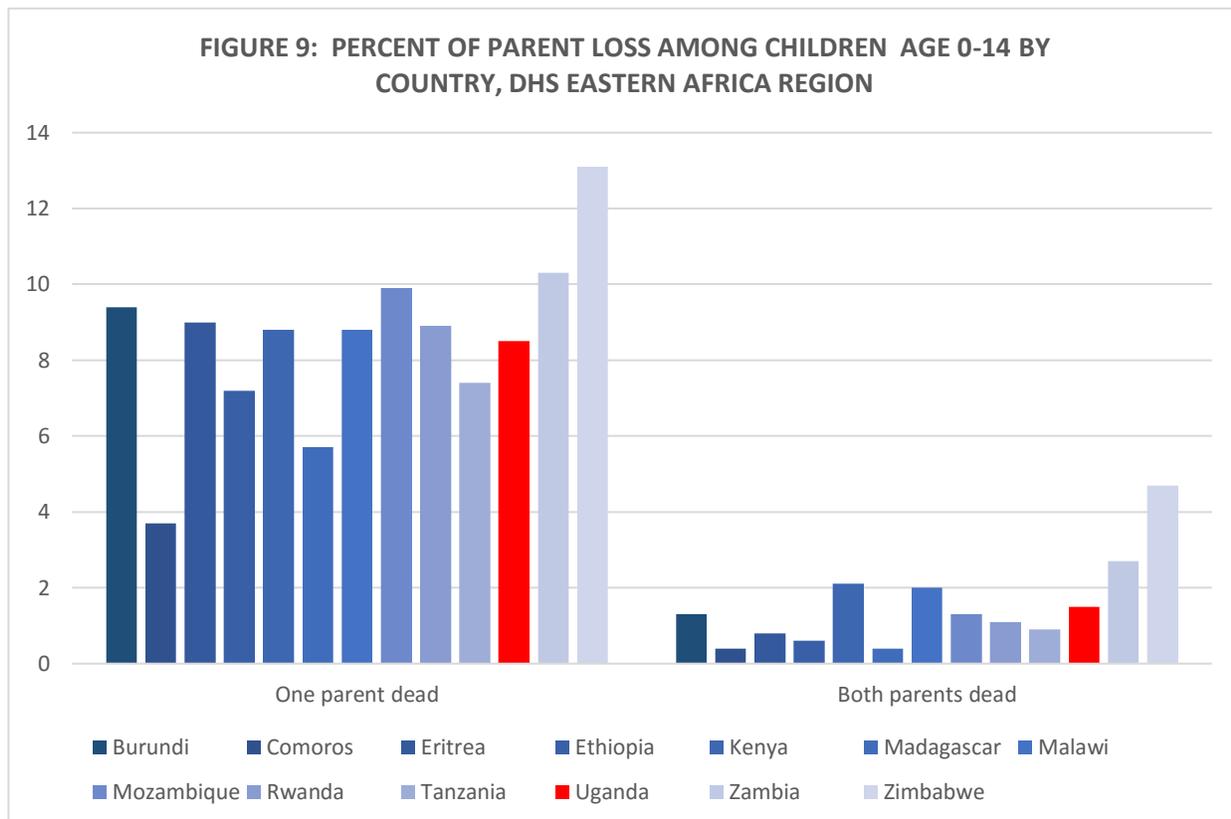
While the rate of parental loss in Uganda was increasing between 1995 and 2006, there has been a significant downturn in parental death in between the last two DHS surveys. As seen in Figure 8, the prevalence of double orphanhood among children 0-15 in Uganda was 1.9% in 1995, 2.3% in 2000, and 2.6% in 2006. However, between the 2006 Uganda DHS and the current data collection effort, the prevalence of double orphanhood has dropped to 1.5% and the loss of one biological parent has similarly declined from 10.6% in 2006 to 8.5% in 2011.

Wealth quintile of the household seems to be related to the likelihood of having lost a parent for children in Uganda. Children 0-17 living in households in wealthier quintiles less commonly experience the death of a parent as compared to children living in households belonging to poorer quintiles. Where 12.4% of children 0-17 living in households in the poorest quintiles have lost one biological parent and 2.6% have lost both parents, 7.7% of children in the richest quintile have lost one parent and 1.8% have lost both. This may partially explain the regional differences in parental survival found across Uganda. Areas like Kampala and West Nile see much lower rates of parental loss than poorer



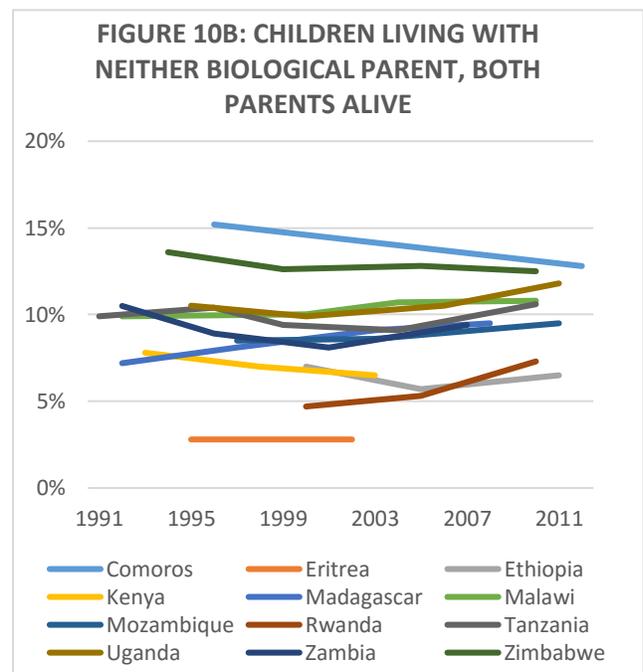
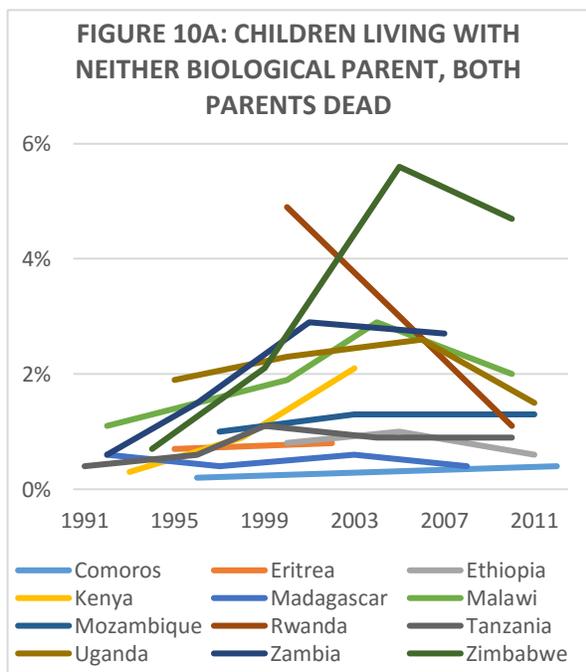
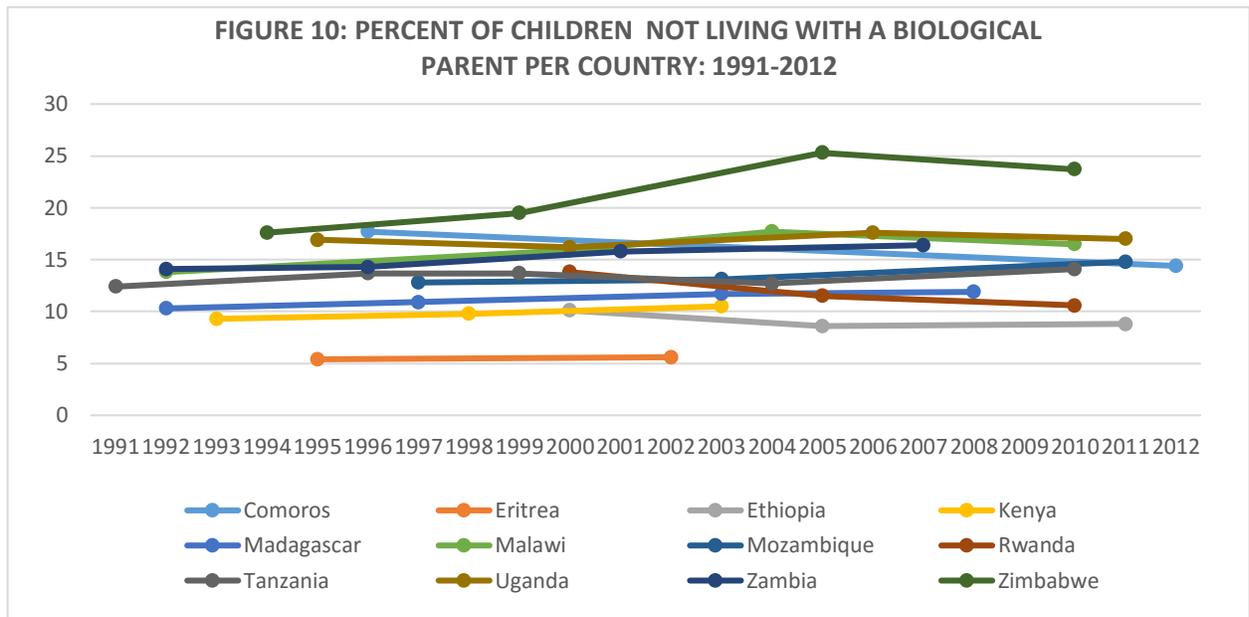
regions like Karamoja which houses the highest proportion of children who have experienced the loss of a parent in the country – 14% of children 0-17 have lost one biological parent and 5% have lost both.

Regionally, when it comes to parent survival for children 0-15, Uganda stands close to its neighbors with 1.5% of children losing both parents prior to age 15 and 8.5% losing either their biological mother or father. Higher rates of single parent death are seen in Lesotho (18.5%), Zambia (10.3%), and Mozambique (9.9%), while lower rates are found in countries like Madagascar (5.7%), Ethiopia (7.2%) and Tanzania (7.4%). Similarly the region sees a range of rates of double orphanhood, In certain countries such as Madagascar (.4%) and Ethiopia (.6%) very children have lost both biological parents, while outliers such as Lesotho and Swaziland see orphanhood rates above 5%.



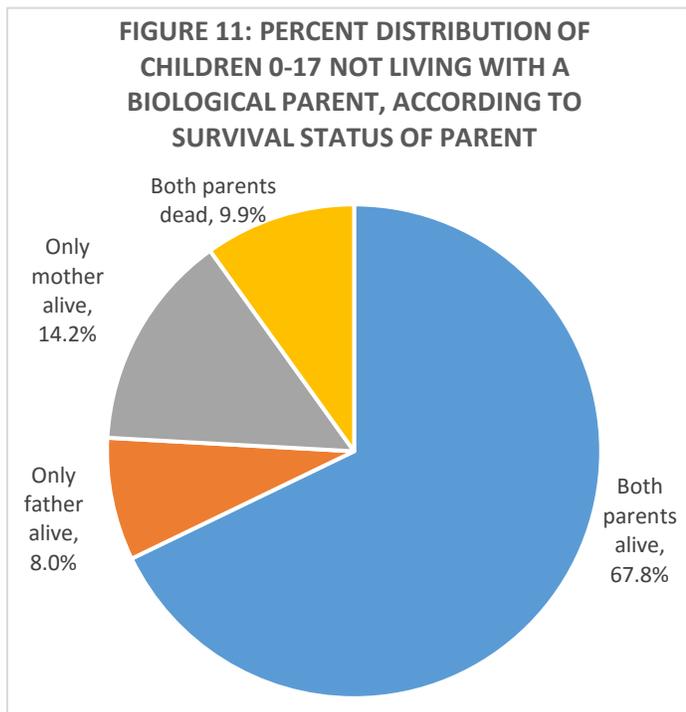
CHILDREN LIVING WITH NEITHER BIOLOGICAL PARENT:

As stated previously, nearly one in every five children under the age of 18 lives with neither biological parent. In the last two decades different trends have been observed in Uganda 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 Uganda while 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 East African region, with few notable exceptions such as Zimbabwe which saw a sharp increase in the proportion of children living without either biological parent or Rwanda, which saw a decline in the number of children living without their mother and their father in the last decade.



However, as is the case with Uganda, 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 skyrocket or dramatically decline. Because the vast majority of children living with neither biological parent still have both parents alive, the effect of events such as civil war, the HIV/AIDS epidemic, and access to anti-retroviral therapy become 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.

While 10% of these children do not have a living biological parent to live with, 8% have a biological father who is alive, 14% have a living mother, and the vast majority – a full 68% - have both living biological parents²³. In fact, since 2006, with the downturn in parental death, a parallel increase in the proportion of children living with neither biological parent when both biological parents are alive has been seen: in 2006, 15% of these children had no living biological parent and 57% had both biological parents living. 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?

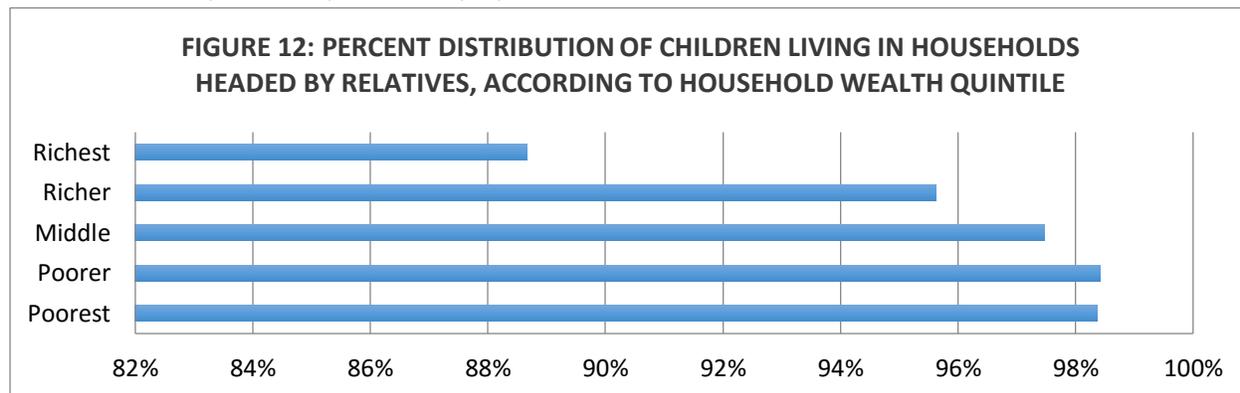


While these children do not live with their biological parent, the vast majority of them do live in family care, residing instead in households with their grandparents, aunts, uncles, siblings, and other relatives. Nationwide, 96% of children aged 0-17 live in family care, with under 4% of surveyed households reported hosting a child who is unrelated to the household head. The likelihood of living in family care is equally likely for girls as it is for boys. Living in family care seems to be negatively associated with age, with the oldest age group having a higher likelihood of living in non-related care; however, given the small sample size in the youngest age categories, caution must be employed.

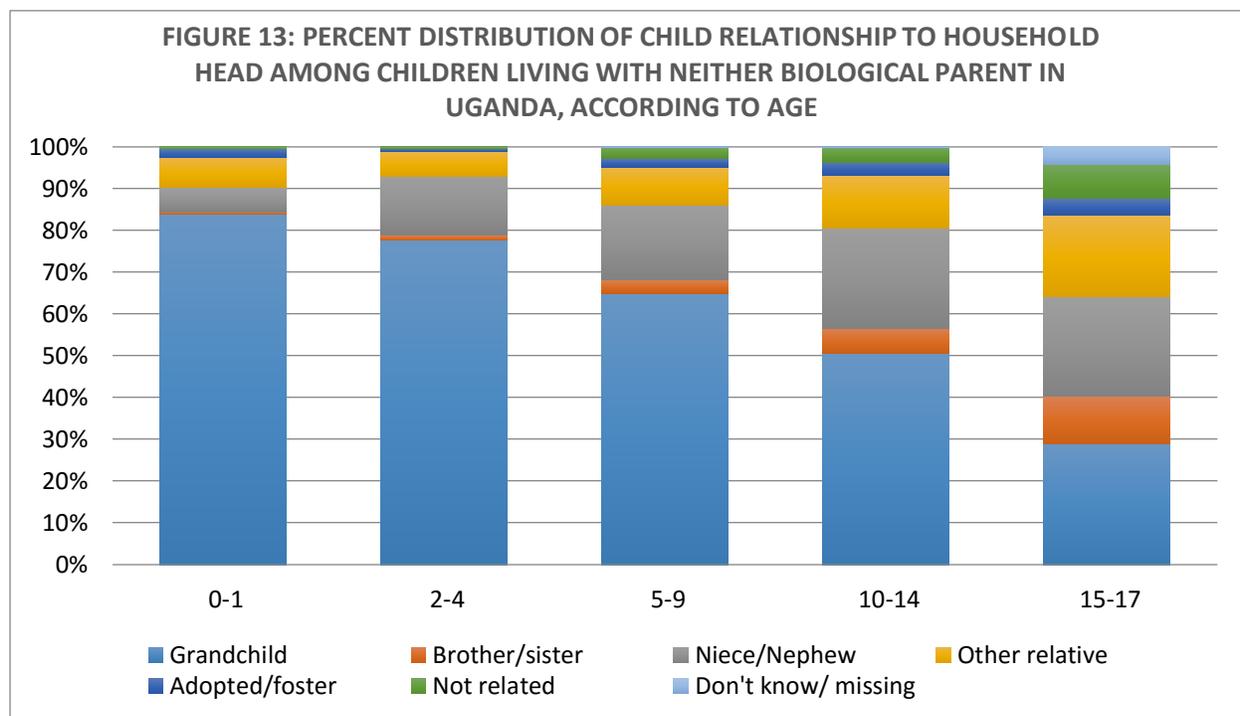
In Uganda, children in rural households are significantly more likely to live in family care as compared to urban households (97% vs. 89%). This disparity is more pronounced when one looks at the region of Kampala, which houses the nation’s capital, versus the rest of the country. While every other region in the country has between 93-99% of children age 0-17 living within neither biological parent living in family care, in Kampala only 80% of these children live in family care. This region is a striking outlier in the country with nearly 19% of children living with neither biological parent living in households where they are not related to the household head. This striking indicator might be partially explained by child migration flows into cities due to improved educational opportunities in the capital, or more domestic work or

²³ According to the World Bank, in 2011 49% of the total population in Uganda was between the ages of 0-14. Therefore, nearly 3.3million children under the age of 15 live with neither biological parent, of which approximately 275,000 children have lost both biological parents.

child labor options in the urban center. Moreover, households hosting unrelated children are also more likely to be in the richest wealth quintile. While less than one percent* of children in the poorest wealth quintile report being unrelated to the household head, over 10% of children age 0-17 living in the richest quintile live in households where they are not related to the head of the household²⁴. It is possible that wealthier households managing more resources are both concentrated in urban centers and more likely to provide opportunities like domestic work to unrelated youth. Further research is needed in this area to better tease apart the dynamics at play.



In Uganda, 55% of children 0-17 living with neither biological parent live with their grandparents. This number is larger for children 0-15 at 61.3%. In fact, this relationship seems to be negatively associated with age of the child. Children under the age of two have the highest likelihood of living with their grandparents, with 84% of all children under 2 who live with neither biological parent living in households headed by their grandmother or grandfather. An incremental decrease is seen in this



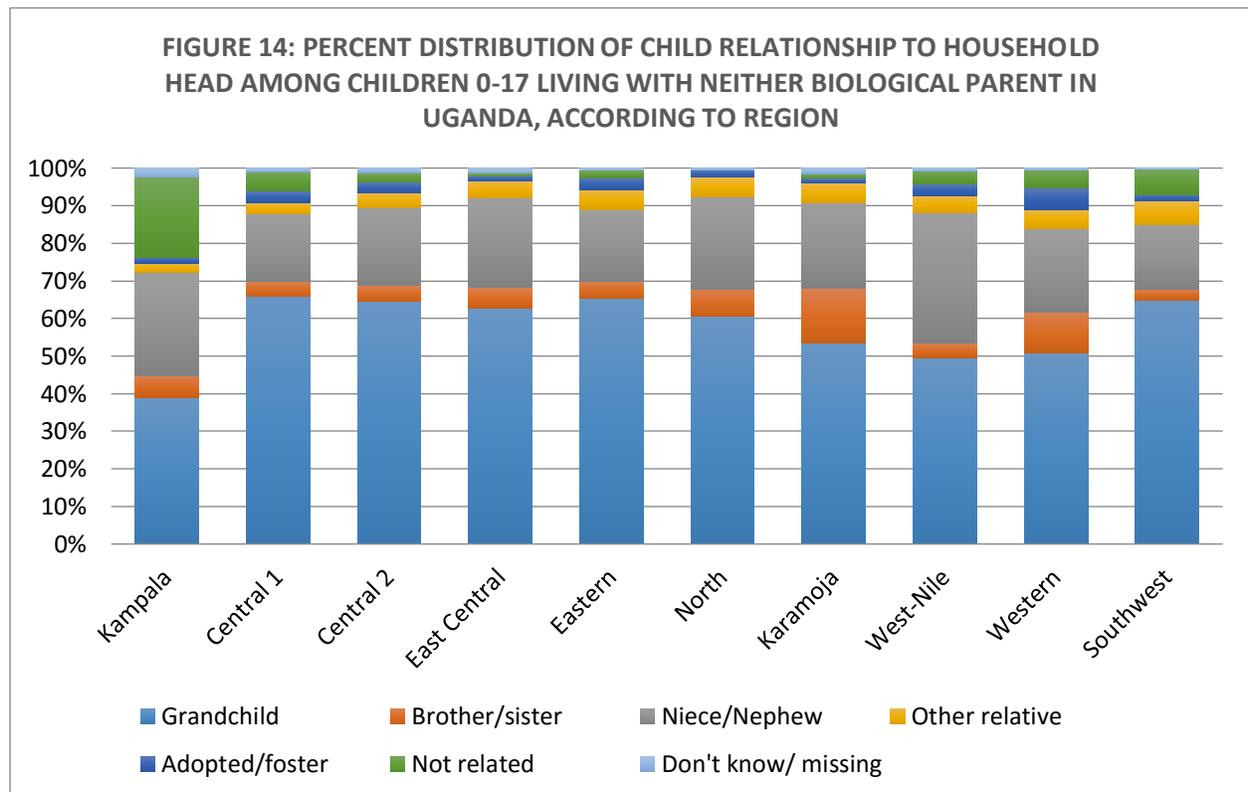
²⁴ Percentages in brackets reflect 25-49 unweighted cases. Caution should be employed when generalizing to the entire population given the small sample found in these sub-cohorts. Additionally, sub-cohorts with fewer than 24 unweighted cases are identified in the report with an asterisk (*). These percentages are not reported.

proportion as children age – the high prevalence of 84% drops to 78% for children age 2-4, 65% for children age 5-9, 51% for children age 10-14, and 29% for children 15-17. In fact in the oldest cohort; it is almost equally likely that a child living with neither biological parent live with their aunt or uncle. Unlike with grandparents, the likelihood of living with aunts and uncles, siblings, or other relatives increases with the age of the child.

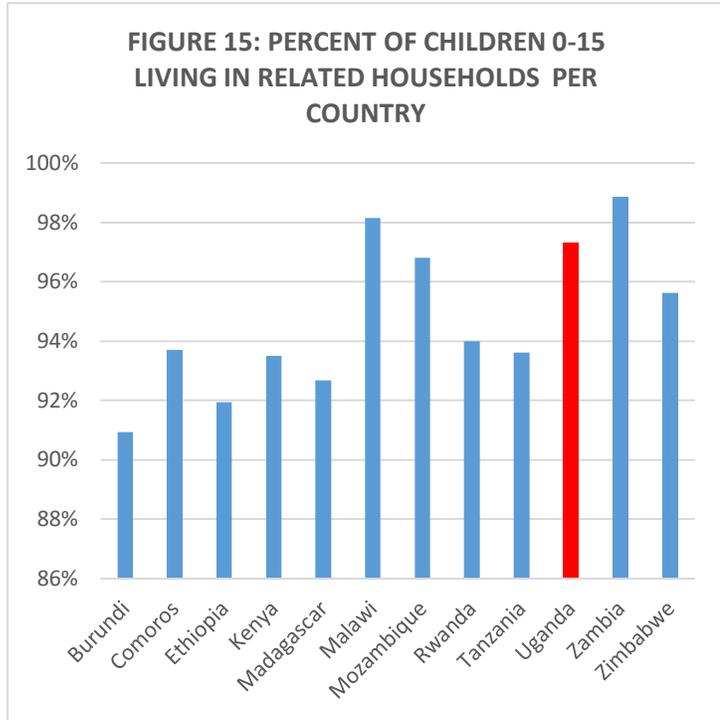
Additionally, gender seems to play a role in determining who children live with when living outside of the care of their biological parents. Significantly more boys age 0-17 live with their grandparents than do girls (60% vs. 52%). Conversely, more girls live with their aunts and uncles and other relatives as compared to boys (23% vs 18%). Possible explanations might include the different reproductive and economic life phases of older and younger generation family members and how these realities intersect with the need for assistance in the house, for example with childcare or manual labor.

When disaggregated by geographical characteristics, it appears that significantly more children 0-17 in rural areas live in households headed by their grandparents than among children living in urban centers (59% vs 37%). The opposite is true for children living with their aunts and uncles whereby 30% of children in urban areas live in households headed by these family members versus 19% of children in rural areas. Similar but smaller differences are also true for children living in households headed by “other relatives” and siblings.

Similarly, clear differences are seen between any two regions of the country. As seen in Figure 14, Kampala maintains the lowest proportion of children living with neither biological parent in households headed by that child’s grandparents at 34% and highest proportion of children living in households with unrelated household heads, while the Southwest region has the highest prevalence of children 0-17 living in grandparent headed households at 64.4%. The western region of the country has the highest prevalence of children who are adopted or fostered at [5.2%].



Adoption and fostering seems to be more common among boys and in older age cohorts. However, sample size limitations do not allow for any significant 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, Uganda has a higher proportion of children 0-17 living in related care compared to other countries in southern and eastern Africa. With 97% of all children under 15 living with neither biological parent in the country, only Zambia (99%) and Malawi (98%) have a higher prevalence of these children regionally.

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 Uganda.

Uganda, 2011	Table 1. Percent distribution of children under age 18 by living arrangement and survival status of parents, according to background characteristics, Uganda 2011 TOTAL N=25923																									
	Living with both 55.6%	Living with neither 18.8%				Living with mother only 19.7%		Living with father only 5.3%		Missing information 0.6%	Total Count 100.0%	Summary Figures														
		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	56.7%	1.5%	2.4%	11.8%	1.9%	14.7%	4.3%	5.1%	0.9%	0.6%	100.0%	17.7%	1.9%	9.2%	11584	13113										
Female	54.5%	1.5%	2.9%	13.7%	1.8%	15.6%	4.9%	3.7%	0.8%	0.6%	100.0%	20.0%	1.8%	10.1%	11393	12809										
Age																										
0-1	72.0%	0.1%	0.1%	2.7%	0.2%	21.9%	1.9%	0.6%	0.0%	0.3%	100.0%	3.1%	0.2%	2.2%	3370	3370										
2-4	65.7%	0.6%	0.9%	11.3%	0.4%	15.6%	2.5%	2.4%	0.2%	0.4%	100.0%	13.2%	0.4%	4.2%	5133	5133										
5-9	56.3%	1.7%	2.6%	13.4%	1.4%	14.4%	4.1%	4.8%	0.7%	0.7%	100.0%	19.0%	1.4%	9.0%	7737	7737										
10-14	45.7%	2.3%	4.3%	15.8%	3.3%	13.2%	6.4%	6.7%	1.6%	0.7%	100.0%	25.7%	3.3%	14.6%	6738	6738										
15-17	39.8%	2.6%	5.1%	18.1%	4.5%	12.5%	8.4%	6.1%	1.8%	1.0%	100.0%	30.3%	4.5%	18.0%	2946	2946										
Residence																										
Urban	49.3%	1.8%	3.8%	15.3%	1.9%	18.4%	3.3%	5.1%	0.6%	0.5%	100.0%	22.8%	1.9%	9.6%	2686	3114										
Rural	56.5%	1.5%	2.5%	12.4%	1.9%	14.7%	4.8%	4.3%	0.9%	0.6%	100.0%	18.3%	1.9%	9.6%	20291	22809										
Region																										
Kampala	50.5%	1.7%	3.5%	14.0%	1.3%	18.8%	3.5%	5.2%	0.9%	0.7%	100.0%	20.4%	1.3%	9.6%	944	1122										
Central 1	49.4%	1.6%	2.8%	16.4%	1.2%	15.8%	3.7%	7.0%	1.5%	0.6%	100.0%	22.0%	1.2%	9.6%	2464	2764										
Central 2	52.0%	1.6%	3.0%	17.2%	2.0%	14.3%	3.4%	5.7%	0.4%	0.4%	100.0%	23.8%	2.0%	8.3%	2426	2739										
East Central	53.2%	1.5%	2.1%	15.6%	1.5%	17.3%	3.2%	4.5%	0.7%	0.6%	100.0%	20.6%	1.5%	7.4%	2612	2930										
Eastern	62.2%	1.1%	2.4%	10.6%	1.3%	12.6%	3.8%	4.3%	1.1%	0.6%	100.0%	15.4%	1.3%	8.4%	3694	4141										
North	61.3%	1.2%	4.0%	9.0%	4.1%	8.7%	6.8%	3.2%	1.1%	0.7%	100.0%	18.2%	4.1%	13.1%	2207	2499										
Karamoja	50.9%	2.6%	2.7%	7.6%	4.9%	21.5%	6.8%	1.3%	1.6%	0.1%	100.0%	17.8%	4.9%	13.7%	914	1004										
West-Nile	55.8%	0.9%	4.1%	14.2%	0.8%	12.7%	4.1%	6.2%	0.6%	0.5%	100.0%	20.1%	0.8%	9.7%	1430	1624										
Western	51.5%	2.2%	2.3%	11.2%	1.6%	19.0%	6.0%	4.8%	0.6%	0.9%	100.0%	17.3%	1.6%	11.1%	3421	3892										
Southwest	61.4%	1.1%	1.6%	11.3%	1.8%	14.7%	5.3%	1.3%	0.6%	0.8%	100.0%	15.8%	1.8%	8.7%	2855	3209										
Wealth index																										
Poorest	56.3%	1.2%	2.4%	8.9%	2.6%	15.7%	7.8%	3.0%	0.9%	1.0%	100.0%	15.2%	2.6%	12.4%	5028	5513										
Poorer	58.3%	2.1%	2.4%	11.4%	1.8%	14.2%	4.9%	4.0%	0.5%	0.5%	100.0%	17.6%	1.8%	9.9%	4787	5338										
Middle	56.5%	1.5%	2.7%	12.1%	1.6%	15.0%	4.5%	4.6%	0.8%	0.7%	100.0%	18.0%	1.6%	9.5%	4755	5355										
Richer	54.6%	1.2%	2.6%	15.7%	1.5%	14.3%	3.0%	5.3%	1.4%	0.4%	100.0%	21.1%	1.5%	8.2%	4583	5280										
Richest	51.6%	1.4%	3.3%	16.4%	1.8%	16.5%	2.2%	5.4%	0.7%	0.5%	100.0%	23.0%	1.8%	7.7%	3825	4437										
Total < 15	57.6%	1.4%	2.4%	12.1%	1.5%	15.4%	4.1%	4.2%	0.7%	0.6%	100.0%	17.3%	1.5%	8.6%	22977	22977										
Total < 18	55.6%	1.5%	2.7%	12.8%	1.9%	15.1%	4.6%	4.4%	0.9%	0.6%	100.0%	18.8%	1.9%	9.6%	22977	25923										

Uganda, 2011		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, Uganda 2011 TOTAL N=4874																					
		Living with neither				Total	Both parents dead	Only one dead	Relationship to head										Total in family care	Total not in family care	Total number of weighted children 0-14	Total number of weighted children 0-17	Total number of unweighted children 0-17
		Only father alive	Only mother alive	Both alive	Both dead				Wife/husband	Son/daughter-in-law	Grandchild	Brother/sister	Niece/Nephew	Other relative	Adopted/fostered	Not related	Don't know/missing						
Sex																							
Male	8.5%	13.7%	66.9%	10.9%	100.0%	10.9%	22.2%	0.0%	0.4%	59.7%	6.0%	17.7%	8.6%	3.3%	3.0%	1.3%	95.8%	3.0%	1906	2315	2365		
Female	7.6%	14.7%	68.7%	9.0%	100.0%	9.0%	22.3%	2.2%	1.1%	51.5%	4.9%	22.8%	10.9%	1.9%	4.2%	0.5%	95.3%	4.2%	2077	2559	2684		
Age																							
0-1	1.9%	4.3%	88.4%	5.4%	100.0%	5.4%	6.2%	0.0%	0.0%	84.0%	0.5%	5.8%	7.1%	2.1%	0.5%	0.0%	99.5%	0.5%	104	104	98		
2-4	4.5%	7.1%	85.6%	2.8%	100.0%	2.8%	11.5%	0.0%	0.0%	77.6%	1.3%	14.0%	6.0%	0.7%	0.4%	0.0%	99.6%	0.4%	676	645	645		
5-9	8.7%	13.6%	70.6%	7.1%	100.0%	7.1%	22.3%	0.0%	0.2%	65.0%	3.3%	17.9%	8.8%	2.0%	2.7%	0.1%	97.2%	2.7%	1473	1473	1547		
10-14	8.9%	16.8%	61.5%	12.8%	100.0%	12.8%	25.7%	0.0%	0.5%	50.5%	6.1%	24.1%	12.1%	3.1%	3.5%	0.1%	96.3%	3.5%	1729	1729	1615		
15-17	8.7%	16.9%	59.7%	14.8%	100.0%	14.8%	25.5%	6.3%	2.9%	28.8%	11.5%	23.8%	10.4%	4.0%	8.1%	4.3%	87.7%	8.1%		892	944		
Residence																							
Urban	8.1%	16.8%	66.8%	8.3%	100.0%	8.3%	24.9%	1.0%	0.2%	36.8%	6.7%	30.1%	12.1%	2.1%	9.8%	1.2%	89.0%	9.8%	513	711	1234		
Rural	8.0%	13.8%	68.0%	10.2%	100.0%	10.2%	21.8%	1.2%	0.9%	58.5%	5.2%	18.7%	9.5%	2.7%	2.6%	0.8%	96.7%	2.6%	3469	4163	3815		
Region																							
Kampala	8.4%	17.0%	68.3%	6.3%	100.0%	6.3%	25.4%	2.1%	0.0%	34.3%	5.1%	24.1%	12.2%	1.4%	18.7%	2.1%	79.2%	18.7%	143	229	312		
Central 1	7.2%	12.8%	74.4%	5.7%	100.0%	5.7%	20.0%	0.6%	0.7%	58.3%	3.5%	16.0%	12.9%	2.7%	4.5%	0.9%	94.6%	4.5%	513	609	495		
Central 2	6.9%	12.4%	72.4%	8.2%	100.0%	8.2%	19.3%	0.7%	0.3%	59.9%	3.8%	19.2%	10.0%	2.6%	2.3%	1.2%	96.5%	2.3%	526	651	605		
East Central	7.1%	10.2%	75.5%	7.2%	100.0%	7.2%	17.3%	1.2%	0.5%	59.5%	5.2%	22.5%	7.8%	1.3%	0.7%	1.3%	98.0%	0.7%	503	604	607		
Eastern	7.3%	15.7%	68.9%	8.2%	100.0%	8.2%	23.0%	1.9%	1.7%	60.0%	4.2%	17.5%	9.5%	2.9%	1.8%	0.6%	97.6%	1.8%	526	639	513		
North	6.5%	21.9%	49.2%	22.4%	100.0%	22.4%	28.4%	0.7%	1.3%	55.1%	6.5%	22.4%	11.9%	1.7%	0.0%	0.4%	99.6%	0.0%	369	456	525		
Karamoja	14.3%	15.4%	42.6%	27.6%	100.0%	27.6%	29.7%	2.4%	1.0%	51.9%	14.2%	22.1%	4.6%	1.3%	1.1%	1.5%	97.4%	1.1%	153	179	436		
West-Nile	4.7%	20.2%	71.0%	4.1%	100.0%	4.1%	24.9%	0.7%	2.2%	46.3%	3.7%	32.4%	7.9%	2.9%	3.3%	0.7%	96.1%	3.3%	271	326	622		
Western	12.9%	13.2%	64.6%	9.2%	100.0%	9.2%	26.1%	1.4%	0.3%	46.2%	9.8%	20.1%	12.2%	5.2%	4.3%	0.5%	95.3%	4.3%	550	674	530		
Southwest	7.2%	10.1%	71.3%	11.4%	100.0%	11.4%	17.3%	0.8%	0.2%	64.4%	3.0%	16.9%	6.0%	1.7%	6.6%	0.3%	93.1%	6.6%	429	508	404		
Wealth index																							
Poorest	8.1%	16.0%	58.8%	17.1%	100.0%	17.1%	24.1%	2.3%	1.7%	59.1%	7.5%	18.0%	8.4%	1.4%	0.4%	1.2%	98.4%	0.4%	708	837	1073		
Poorer	12.1%	13.4%	64.5%	10.0%	100.0%	10.0%	25.5%	1.4%	0.7%	57.7%	8.0%	19.2%	9.0%	2.4%	0.7%	0.9%	98.4%	0.7%	797	941	840		
Middle	8.5%	15.3%	67.4%	8.7%	100.0%	8.7%	23.8%	0.9%	0.7%	63.2%	4.0%	15.6%	10.6%	2.3%	2.1%	0.5%	97.5%	2.1%	821	962	873		
Richer	5.8%	12.5%	74.4%	7.3%	100.0%	7.3%	18.3%	0.6%	0.6%	60.8%	3.5%	20.1%	7.5%	2.6%	3.8%	0.6%	95.6%	3.8%	909	1113	1053		
Richest	6.2%	14.4%	71.5%	7.9%	100.0%	7.9%	20.6%	0.8%	0.3%	36.9%	4.8%	28.3%	13.6%	4.0%	10.2%	1.2%	88.7%	10.2%	746	1021	1210		
Total < 15	7.9%	13.6%	69.7%	8.8%	100.0%	8.8%	21.5%	0.0%	0.3%	61.3%	4.1%	19.6%	9.7%	2.3%	2.6%	0.1%	97.3%	2.6%	3982	3982	4105		
Total < 18	8.0%	14.2%	67.8%	9.9%	100.0%	9.9%	22.3%	1.2%	0.8%	55.4%	5.4%	20.4%	9.8%	2.6%	3.6%	0.8%	95.5%	3.6%	3982	4874	5049		