**Country Profile** 

# **Paraguay**

Maternal, Newborn & Child Survival

March 2012

Statistics and Monitoring Section / Policy and Practice



## Paraguay





#### INTERVENTION COVERAGE FOR MOTHERS **NEWBORNS AND CHILDREN NUTRITION**<sup>4</sup>

Wasting prevalence (based on 2006 WHO reference population, moderate and severe, %)

Underweight prevalence Percent of children <5 years underweight for age Based on 2006 WHO reference population 100 100 % 80 60 40 20 3 3 0 1990 DHS 2005 Other NS

1

(2005) Introduction of solid, semi-solid or soft foods (6-9 months, %)



-

- Low birthweight incidence (%) 6 (2008-



## **CHILD HEALTH**



#### Pneumonia treatment

Malaria treatment

- Percent of children <5 years with suspected pneumonia taken to appropriate health provider
  Percent of children <5 years with suspected pneumonia</li>
- receiving antibiotics





Diarrhoeal disease treatment

Percent of children <5 years with diarrhoea receiving oral rehydration therapy (ORS, recommended homemade fluids or increased fluids), with continued feeding

No Data

No Data

Percent of febrile children <5 years using anti-malarials

No Data

## **Paraguay**

Causes of maternal deaths

## MATERNAL AND NEWBORN HEALTH

Proportion of women with low BMI (< 18.5 Kg/m2, %)	-	
Demand for family planning satisfied (%)	94	(20
Total fertility rate	3.0	(20
Adolescent birth rate (births per 1000 woman aged 15-19 yr)	65	(20
Antenatal visit for woman (4 or more visits, %)	91	(20
Early initiation of breastfeeding (within 1 hour of birth, %)	47	(20
Institutional deliveries (%)	85	(20
Postnatal visit for baby (within 2 days for home births, %)	-	
Postnatal visit for mother	_	

Postnatal visit for mother (within 2 days, %)

#### Antenatal care

Percent of women aged 15-49 years attended at least once by a skilled health provider during pregnancy





Skilled attendant at delivery Percent of live births attended by skilled health personnel



Contraceptive 79 prevalence rate Pre-pregnanc; Antenatal visit 96 (1 or more) Pregnancy Skilled attendant 82 at birth Birth Postnatal care natal peri Exclusive breastfeeding Infancy Measles 40 60 80 100 % 0 20 Source: DHS, MICS, Other NS

Coverage along the continuum of care

#### Neonatal tetanus protection Percent of newborns protected against tetanus



## **HIV AND AIDS**

HIV prevalence among young women (15-24 yrs,%)	0.1 [0.1 - 0.2]	(2009)
HIV prevalence among young men (15-24 yrs,%)	0.2 [0.1 - 0.6]	(2009)
HIV+ children receiving ART (%)	[49 - >95]	(2009)
Orphan school attendance ratio	-	-



### Source: WHO/UNICEF 2011 EDUCATION

78	(2008)
76	(2008)
80	(2008)
86	(2009)
86	(2009)
86	(2009)
	76 80 86 86

## WATER AND SANITATION

Drinking water coverage Percent of population by type of drinking water source, 2010



Source: WHO/UNIEF JMP 2012

Sanitation coverage Percent of population by type of sanitation facility, 2010



CHILD PROTECTION		
Women aged 20-24 years who were married or in union by age 18 (%)	18	(2004)
Birth registration (%)	-	-
Female genital mutilation/cutting (%)	-	-

D	ISPA	RIT	IES	IN II	NTE	RVE	ΝΤΙ	ON	COV	/ER	AGE	1	1		
			Gender		R	esiden	ce			Wea	alth Qui	ntile			
Indicator	Total	Male	Female	Ratio of Male to Female	Urban	Rural	Ratio of Urban to Rural	Poorest	Second	Middle	Fourth	Richest	Ratio of Richest to Poorest	Equity chart <sup>2</sup>	Source
DEMOGRAPHICS <sup>3</sup>			•		•	•	•				•	•			
Under-five mortalty rate (per 1,000 live births)	25	-	-	-	-	-	-	-	-	-	-	-	-		IGME 2011
NUTRITION <sup>4</sup>															
Low birth weight incidence (%)	6	-	-	-	-	-	-	-	-	-	-	-	-		Other NS 2008- 2009
Underweight prevalence (based on 2006 WHO reference population, %)	3	-	-	-	-	-	-	-	-	-	-	-	-		Other NS 2005
Stunting prevalence (based on 2006 WHO reference population, %)	18	-	-	-	-	-	-	-	-	-	-	-	-		Other NS 2005
Wasting prevalence (based on 2006 WHO reference population, %)	1	-	-	-	-	-	-	-	-	-	-	-	-		Other NS 2005
Exclusive breastfeeding (0-5 months, %)	24	22	27	0.8	29	18	1.6	-	-	-	-	-	-		Other NS 2008
Introduction of solid, semi-solid or soft foods (6-9 months, %)	-	-	-	-	-	-	-	-	-	-	-	-	-		-
Household consuming adequately iodized salt (15 ppm or more, %)	94	-	-	-	-	-	-	-	-	-	-	-	-		Other NS 2006
CHILD HEALTH <sup>5</sup>															
Care seeking for pneumonia (%)	51	-	-	-	-	-	-	-	-	-	-	-	-		DHS 1990
Antibiotic use for pneumonia (%)	29	33	23	1.4	34	24	1.4	-	-	-	-	-	-		DHS 1990
Diarrhoeal treatment - children receiving ORT and continued feeding (%)	-	-	-	-	-	-	-	-	-	-	-	-	-		-
Malaria prevention - children sleeping under ITNs (%)	-	-	-	-	-	-	-	-	-	-	-	-	-		-
Malaria treatment - febrile children receiving antimalarial medicines (%)	-	-	-	-	-	-	-	-	-	-	-	-	-		-
MATERNAL AND NEWBORN HEAI	тн														
Antenatal care coverage at least one visit (%)	96	-	-	-	-	-	-	-	-	-	-	-	-		Other NS 2008
Antenatal care coverage (4 or more visits, %)	91	-	-	-	-	-	-	-	-	-	-	-	-		Other NS 2008
Skilled attendant at delivery (%)	82	-	-	-	-	-	-	-	-	-	-	-	-		Other NS 2008
Early initiation of breastfeeding (%)	47	-	-	-	-	-	-	-	-	-	-	-	-		Other NS 2008
WATER AND SANITATION 6															
Use of improved drinking water sources (%)	86	-	-	-	99	66	1.5	-	-	-	-	-	-		2010 (WHO/UNICEF
Use of improved sanitation facilities (%)	71	-	-	-	90	40	2.3	-	-	-	-	-	-		JMP 2012) 2010 (WHO/UNICEF JMP 2012)
EDUCATION															JWP 20121
Survival rate to last grade of primary school (survey data, %)	-	-	-	-	-	-	-	-	-	-	-	-	-		-
Primary school net attendance ratio (survey data, %)	88	87	89	1.0	89	87	1.0	-	-	-	-	-	-		Other NS 2008
CHILD PROTECTION															
Women aged 20-24 years who were married or in union by age 18 (%)	18	-	-	-	-	-	-	-	-	-	-	-	-		Other NS 2004
Birth registration (%)	-	-	-	-	-	-	-	-	-	-	-	-	-		-
Female genital mutilation/cutting (%)	-	-	-	-	-	-	-	-	-	-	-	-	-		-

Note: The format for this Country Profile has been adapted from the Countdown to 2015 report. Coverage data have been largely derived from national household surveys such as the Multiple Indicator Cluster Surveys (MICS) and Demographic and Health Surveys (DHS). For the majority of coverage indicators, UNICEF global databases were used. Other organizations such as the World Health Organization, UNAIDS, United Nations Population Fund, London School of Hygiene and Tropical Medicine and Saving Newborn Lives also provided data. Details on indicators, data sources, and definitions of indicators, can be found at www.childinfo.org.

1. Disparities - Disparity information is only available for data directly derived from household surveys such as MICS and DHS. Therefore, disparity data are not available for the following indicators: vitamin A supplementation, immunization, and for HIV/AIDS. In addition, neither UNICEF Global Databases nor databases from partner organizations maintain disparity data for the following indicators: total fertility rate, unmet need, institutional deliveries, contraceptive prevalence, adolescent birth rate.

2. Equity chart - Displays values for the five wealth quintiles to the left. The scale is 0 to 100% for all charts except U5MR, which shows a range of 0 to 300 deaths per 1,000 live births.

3. USMR - Wealth quintile data are derived directly from MICS, DHS or other surveys. The total is the inter-agency estimate published by the UN Inter-agency Group for Child Mortality Estimation (IGME).

4. <u>Anthropometric indicators - Reference Standards for Underweight, Stunting and Wasting.</u> New international Child Growth Standards for infants and young children were released by WHO in 2006, replacing the older NCHS/WHO reference population. In using the 2006 WHO reference population, estimates generally change in the following manner: stunting is greater throughout childhood; underweight rates are higher during the first half of infancy and lower thereafter; and, wasting rates are higher during infancy. Please note that there may be small discrepancies between the totals and the disparity data, as the totals have undergone additional analysis.

5. Child Health - All indicators in this section refer to children under 5 years of age.

6. <u>Water and sanitation</u> - Wealth quintile data are derived from MICS or DHS surveys. Urban, rural and total coverage estimates provided are for 2010 and are those published by the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation.