

Ministry of Health and Sports

Department of Public Health

Public Health Statistics (2014-2016)

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September 2017

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PREFACE

Utilization of Health Information is one of the strategic areas under Health Information System Strategic Plan (2017-2021). Core health information disseminated to various users by various methods is one of the strategic objectives and publication of the Public Health Statistics Report is one of the activities in this strategic objective.

This Public Health Statistics Report (2014-2016) is being intended to provide a comprehensive data source for all actors under Myanmar Health System. The report compiles the minimal essential information for health projects and programmes integrated to Health Management Information System. Aiming to be minimal, compact and essential data set; the data are collected monthly, quarterly and annually by the Public Health Report Forms 1, 2, and 3 from every unit of primary health care centers. To make sure the data quality and standardization, the data dictionary is distributed to all Basic Health staff for the operational definition, data collection procedure and calculation methods of indicators.

The data reporting system has been gradually transformed from paper-based to electronic-based by using District Health Information Software version 2(DHIS2) starting from 2014 to get the reliable, accurate and timely information. It is planned to cover nation-wide at the end of 2017. At the same time, the necessary training and capacity building of basic health staff were also conducted at the township, regional and central level. Desk monitoring is a routine and field supervision was frequently performed at all levels for enhancement of data quality.

The activities of health information system were strictly in line with the HIS strategic Plan (2011-2015). The further steps for the improvement of Health Information System will be established in line with Health Information System Strategic Plan (2017-2021), as well as the National Health Plan (2017-2021).

We would like to take this opportunity to show our gratitude to everyone for their contributions and great efforts in the whole process starting from data collection to publication. We also appreciate and welcome any comments and suggestions for the improvement of this publication in the future.

Dr. Thar Tun Kyaw Director General Department of Public Health

SUMMARY

This Public Health Statistics was generated from monthly report, quarterly and annual reports of Health Management Information System. It is the combined effort of health staff giving service delivery at community, supervisor and health managers at various levels and central/regions/state statisticians. The data was processed by using DHIS2 software in 2016 together with excel programme in previous years. The quality of data was assessed by using WHO Data Quality Assessment tool, <u>http://www.who.int/healthinfo/tools_data_analysis/en/</u>.

The domain 1 of data quality assessment focused on completeness of reporting; the completeness rate was 97%. Domain 2, internal consistency of reported data showed no extreme outliers and moderate outlier with >5% was seen in deliveries data. Assessing consistency over time, there is no region/state outside the 33% relative difference from national ratio; it s the Ratio of total events in the current year to the mean number of events for past 3 years. Consistency check between Penta1 immunization& ANC1, and between Penta1 & Penta3 showed all the regions/sates are situated near national ratio line and within +/- 33% difference. Domain 3 external consistency with population data revealed that reported live births to UN live birth projection is 1.12, and official estimation of denominator for ANC coverage and immunization coverage is not too high as well as not too low compared with most recent survey. Domain 4 external comparison of coverage rate with most recent survey showed 6 regions/states had more than +/-33% difference between the two coverage rates in delivery, 7 regions/states in Penta3 coverage, no difference was found in antenatal care.

Regarding to SDGs, the 10 indicators representatives for health care services was available from routine HMIS as baseline for monitoring SDGs. Skilled birth attendants (%) was 78.4% and it was ranged from 51% to 91% among regions/states; compared with the other source, world health statistics 2016 showed 78%. It is noted that the data available for disease incidence from HMIS is representative only for the new cases found by basic health staff, it might be lower than exact situation. Hepatitis-B vaccine was already combined into Pentavalent vaccine; the Penta coverage(3rd dose) was 87.3%. Suicide mortality rate per 100,000 population was increasing; 1 death per 100,000 population in 2010 and triple in 2016, 3 deaths per 100,000

population. Mortality rate of unintentional poisoning was increased 1.5 times last five years, 0.76 per 100000 population in 2016. Road traffic mortality rate (per 100 000 population) was 9.2. Adolescent birth rate was 17.9 per 1000 women aged 15–19 years, contrast with 2015-16 MDHS, it was 36. Proportion of population using improved drinking water sources was 81.3% which was similar to MDHS 2015-16, it showed 80.4%. The proportion of population using improved sanitation was 62.1%; the calculation was based on 2014 census household size.

The composite index was applied for assessing maternal and child health up to township level; Tanintharyi and Bago showed low discrepancy among their townships while highest in Shan (N) and Ayeyarwady in maternal health services. The unequal distribution was seen among townships by each regions/states in child health. The 21 townships had less than 0.7 of child health index and needed more attention.

The Skill birth attendants(%) in rural area across the country was assessed. The (1402) out of (1825) rural health facility reporting in 2016 showed that lowest SBA% was 3% ranged to highest 100%. The assessing of services by Health Facility supports the township health planning better; and need to explore resource allocation and need to fulfill enabling working environment.

Regarding to utilization of public health services, the 23 million patients utilized public health facilities and coming to clinics over the country. The basic health staff delivered health care services during field visits to wards/villages; nearly 11 million patients seek care from basic health staff. Public health services were utilized highest in Kayah and lowest in Yangon where a private health service is increasing.

The maternal health, maternal nutrition, newborn health and reproductive heath services showed antenatal care coverage (86.1%), Delivery by SBA(78.4%), Postnatal Care(91%), TT 2nd dose immunization(81.2%), Deworming (74.3%), Iron supplementation 4 times and above(63.5%) and B1 supplementation during pregnancy(59.7%). B1 supplementation is given up to postnatal and breastfeeding period; B1 supplementation in PN period(73.6%), B1 in breastfeeding mother(74.5%) was achieved. The births occurred at public health facilities (41%), at private facility(10%), home delivery by BHS (27%), home deliveries by AMW(8%), by

TTBA(6%) and other(8%) in 2016. The newborn care within three days of birth(84.2%), newborn receiving breastfeeding within one hour of birth (83.3%) was found in 2016 under essential newborn care services. Birth spacing helped reducing closed birth interval, the women become pregnant within 24 months after last delivery, and promotes both maternal and newborn health; the higher contraceptive prevalence rate the lower the closed birth interval was seen among regions/states. Injection method is prefer modern contraceptive method (58%) among clients, followed by pills(31%).

Diarrhoea, ARI and fever was common in children; nearly all under five children with diarrhea who had met with health staff received oral rehydration therapy(ORT) (98.9%), similarly, antibiotics treatment for under 5 pneumonia was 96.7%. The immunization coverage in infant showed BCG(92%), Polio3(87%), Penta3(87%), PCV3(13%) and MR(9 months)(88%). Less than 80% coverage was seen in 56 townships, Two-fifth of townships were between 80 to 90% coverage in Penta3 immunization.

Non-communicable diseases occurrence was increasingly nowadays; the detection of high blood pressure, new hypertension cases in out-patients attending to BHS was 3.8%. Hypertension cases detected by BHS among 15+ population was calculated as proxy prevalence, thirteen hypertension cases per 1000 population of aged 15+ was found. The current smoker, taking any types of smoking within 1 month, was 175 people in 1000 population of aged 15+. The injuries become increasingly high; road traffic accident is a big magnitude compare with poisoning, drowning and suicide problems, where the case fatality rate is high. Among 11282 reported deaths due to injury, two-fifth was due to RTA and near one-fourth was due to drowning, 12.5% was due to suicide. Early detection and treatment of congenital deafness prevents the deaf and dumb life of children, the basic health staff reported 0.17 per 1000 Live births. Mental health problem per 100,000 population in 2016 revealed that 9 person reported with psychosis, 6 person had depression, 7 person showed anxiety and mental retardation, 5 stayed with epilepsy, 120 depend on alcohol.

Malaria was detected using RDT by basic health staff, 7.5 Lakh people received malaria checkup by BHS and 4.2 % was found as positive patients and it ranged across the country, Chin (12.3%) to Yangon(<0.1%) in 2016. Sixty percent of malaria case was in 15-44 years age group

and male was more affected. In both Cases and Death due to TB, the proportion of sputum smear negative TB patients is largest portion; 49% in cases and 45% in death, followed by sputum smear positive tuberculosis patients, it showed about one-third. Male was about 2 times common than female. Leprosy prevalence rate was 0.3 per 10,000 Population, the under 15 year patients was 5.1% among new patients in 2016, 31.3% of new patients were female patients. The basic health staff reported one hundred and sixteen thousand primigravida mothers received VDRL testing during pregnancy period; the positive rate was 0.33%. Opthalmia neonatorum cases were reported by 19 townships; 90 newborns suffered and it represented as about 1 case per 10,000 newborns in Myanmar. The fifty six thousand cases of dog bite occurred in 2016, among those, 1.3% were rabid dog bite. The 64% of dog bite cases had taken anti-rabies vaccines.

Access to sanitary latrine and clean water by students in school was needed for school health; 96.2% of schools were examined by basic health staff and school health team in 2016, 88% of schools had fly proof latrines with the standard ratio of 50 students to 1 latrine, 86.5 % of schools had clean water source. The primary school children received medical examination in school, 93.8% of primary school children received in 2016. The Sanitary latrine coverage for the whole population was 62.1% and proportion of population using improved drinking water sources was 81.3%.

Average 55 times per month per township for advocacy meeting, average 1 time for exhibition and contest, average 80 times for public talks and 18 times for distribution of IEC materials per month per township was conducted in 2016, it was the performance of all basic health staff in the township.

The data available from routine HMIS data system pointed out the public health services delivered over the country. To preserve valid timely complete data from health staff through DHIS2 software, the exploration of difficulties and challenges of basic health staff regarding to data reporting is needed; and continuing to support enabling working environment.

ABBREVIATIONS

AMW	Auxiliary Midwife
ANC1	antenatal care first visit
ARI	Acute Respiratory Tract Infection
B1	Vitamin B 1 (Thiamine)
BCG	Bacillus Calmette–Guérin
BHS	Basic Health Staff
CPR	Contraceptive Prevalence Rate
DHIS2	District Health Information Software version 2
DHS	Demographic and Health Survey
DPT	Diphtheria-pertussis-tetanus
DQA	Data Quality Assessment
e-HMIS	Electronic Health Management Information system
HIS	Health Information System
HMIS	Health Management Information System
IEC	Information, Education and Communication
INGO	International Non-governmental organization
IPV	Inactivated polio vaccine
IUCD	Intrauterine Contraceptice Device
MB	Multibacillary
MCH	Maternal and Child Health center
MDHS	Myanmar Demographic and Health Survey
MR	Measles-Rubella Vaccination
NGO	Non-governmental organization
OPD	Outpatient department
ORT	Oral Rehydration Therapy
PCV	Pneumococcal conjugate vaccine
PN	Postnatal
RDT	Rapid Diagnostic Test
RHC	Rural Health Center
RTA	Road Traffic Accident
SBA	Skilled Birth Attendant
SDG	Sustainable Development Goal
SE	Standard Error
SHU	Station Health Unit
STD	Sexually Transmitted Disease
ТВ	Tuberculosis
TT	Tetanus Toxoid Immunization
ТТВА	Trained Traditional Birth Attendants
UHC	Urban Health Center
UiO	University of Oslo
UN	United Nations
VDRL	Venereal disease research laboratory

Public Health Statistics Report, 2014-2016

Understanding on Generation of Statistics

The Public Health Statistics was generated from public health services reporting system. The grass root level of health care delivery system is sub-rural health centers where a midwife is available and focal points for services data reporting system. The data flow starting from subcenter and compilation of report at each level combining the report generated by each and every health staff who are working at that level; Health Assistant/Lady Health Visitor/ Public Health Supervisor Grade-I is responsible person for Data compilation for the report of RHC/MCH/SHU and UHC. Township Health Assistant/Township Health Nurse is key focal person for generation of township report under supervision of Medical Officer in Public Health Department.

The collection of data items was based on the services delivered by Basic Health staff at their assigned health centers and jurisdiction area. The services covered health promotion, prevention, treatment of minor illness and referral, surveillance of diseases and recording of birth and deaths. The data was collected as minimal essential data of each kind of services and health programmes. The data items were categorized into data set as monthly report, quarterly and yearly report.

Monthly report covered daily practices in health care services: Patient Care at clinics and field, maternal health care including birth spacing services, maternal and child health nutrition, Essential newborn care and treatment of diarrhea/ARI, Immunization of maternal and children, surveillance of diseases under national surveillance, Blood testing of suspected Malaria Cases and treatment of confirmed malaria cases, Detection of hypertension cases at clinics and field during patient care, recording of accidents and injury, as well as birth and death events.

Quarterly report covered school health services, environmental sanitation, disease control activities including TB, leprosy, STD, trachoma and Zoonosis, prevention of deafness, mental health and health education.

Yearly report designed for calculation of coverage; head count of population, infrastructure and health manpower at service delivery point at primary health care level.

The feasibility of collection of data for each minimal essential data item defined by progamme managers, discussion with various categories of implementers at series of workshops, pretest, finalization and production of data dictionary is one of the important activities for data quality. The operation definition for each data item is described in data dictionary for standardization and comparison. Clinic register, field register, birth and death register, population and yearly register, reporting format, data compilation procedure, data

flow mechanism, Weight chart for boys and girls are also documented in data dictionary; which was distributed to all basic health staff.

The main indicators generated from services data for each programme is defined; calculation method of each indicator is also described for usefulness of data. The indicators could be used by, basic health staffs at assigned health center, supervisors at primary health care level, middle level health managers, Region/state and central level health programme managers for transformation of data to action.

The process run as nation-wide paper-based reporting system; the timeliness receiving of report forms from all townships had to rely on surface mailing system. The process from data collection to generation of statistics had been implemented by Health Management Information System (HMIS) since 1995.



Evolution of electronic Health Management Information System (e-HMIS)

Electronic Health Management Information System (e-HMIS) have been started in 2014 as pilot stage with assistance of University of Oslo(UiO). The open source software called District Health Information software version 2 (DHIS2) is adopted as national platform in 2013 and customized by National DHIS2 Core Team in HMIS Unit to be the same as Paper based Health Management Information System (HMIS).

The Nyaung Lay Bin Township from Bago region and Patheingyi Township from Mandalay Region are pilot townships in 2014. Region and State Statistical officers had also participated

for pilot utilization of DHIS2 software. The software was updated based on user requirement.

Chaung-U township from Sagaing Region and Madayar township from Mandalay Region are forerunner in 2015. At the end of 2015, the coverage of DHIS2 extended to 30 townships. Those 30 townships reported electronically monthly in 2016.

At the end of 2016, the coverage reached to two-third of nation; 225 townships. In current year 2017, the 225 townships except Lahe, Namyun and Cocogyun reported electronically by DHIS2 software.

The training extended to Rakhine State in June 2017 and electronically reporting started from monthly report of May, 2017. Now, e-HMIS covered 242 townships as of June 2017.

The main server was setting up and the data was stored electronically; manual for DHIS2 was also developed.

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Data Quality Assessment

WHO Data Quality Assessment(DQA)tool-through

<u>http://www.who.int/healthinfo/tools_data_analysis/en/</u>assessed at 30 July 2017 was used for assessing data quality of information system.

The data quality was assessed by 4 domains; completeness of reporting, internal consistency of reported data, external consistency of population data and external comparison.

The DQA tool examines the quality of data generated by a health facility-based information system for four core tracer indicators: antenatal care first visit (ANC1), deliveries,

diphtheria-pertussis-tetanus third dose (DPT3) and outpatient department (OPD) visits. Through analysis of these four standard indicators, the tool quantifies problems of data completeness, accuracy and external consistency and thus provides valuable information on "fit-for-purpose" of health facility data to support planning and annual monitoring. In this report, Penta 3 was substituted to DPT3.

The monthly reporting of antenatal services, skilled birth attendants, Penta 1 immunization services, Penta 3 immunization services and outpatient attendances for 330 townships of the whole country in 2016 was assessed for Data Quality Domain 1: Completeness of reporting. The input data was generated with the aids of DHIS2 software.

The internal consistency and trend over time was assessed by using the services data reported by each township for 3 years preceding the study. The input tracer data for each township was extracted from excel templates of each state/region from 2013 to 2015, accessed the database in HMIS unit. The tracer data for each township through 2013 to 2016 was compared for Domain 2: Internal Consistency for Reported Data.

Domain 3 is External Consistency of Population data; checking for consistency with UN population projection, the ratio of official (reported data) to alternate denominator for ANC1 coverage and immunization coverage. The input reported data was extracted from HMIS database by using DHIS2 software.

Domain 4 is External comparison for tracer indicators and assessing the reported data with the most recent survey data on +/- 33% difference. The Demographic and Health Survey(DHS 2015-16) is the most recent national survey. The tracer indicators of Antenatal Care Coverage, Skilled Birth Attendants at delivery, Penta 3 immunization coverage by region/states with standard error had applied to external comparison. The standard error for Penta 1 immunization is not available in DHS survey and default SE was applied.

The Data Quality Report Card was auto-generated by WHO DQA template as well as the results for each Domain.

Briefly, the national completeness rate was 96.9% based on facility level reporting; among regions/states, 5 regions/states showed 100% completeness and 4 regions/states had the percent less than national level. Moderate outlier with less than 5% was acceptable level for internal consistency of monthly reporting; deliveries indicator showed that moderate outlier was a little bit higher than 5% (5.6%). There is no 33% relative difference between alternative denominator and official denominator at Region/State level for external consistency domain. The comparison of antenatal coverage between reporting system to survey showed no 33% difference between the two rates at region/state level.

DOMAIN 1: COMPLETENESS OF REPORTING

Table (1) Indicator 1a: National reporting completeness rate- Region/State Level andRegion/State with poor completeness rate

	2016
National reporting completeness rate(Region/State	100%
Level)	10070
Number of Region/State with completeness rate below	0
80%	0
Percent of Region/State with completeness rate below	00/
80%	0%

Table (2) Indicator 1b: National reporting completeness rate- facility level andRegion/State with poor facility reporting completeness

	2016
National reporting completeness rate- facility level	96.9%
Number of Region/State with facility completeness rate below 80%	0
Percent of Region/State with facility completeness rate below 80%	0%

Table (3) Indicator 1c: Missing/zero values by indicators

% of monthly reports that are NOT zero/missing values nationally AND Region/State with 20% or more zero/missing value reports(2016)					
National score Region/State with > 20% zero/missing value					
	%	No.	%	Name	
ANC1	98.3%	0	0%	-	
Deliveries	98.1%	0	0%	-	
Penta 3	95.3%	1	0%	Kachin	
OPD	98.3%	0	0%	-	



Figure (1) Indicator 1b: National, Regions/States reporting completeness rate- facility level

DOMAIN 2: INTERNAL CONSISTENCY OF REPORTED DATA

Table (4) Indicator 2a.1 and 2a.2: Extreme and moderate outliers for 4 indicators

			201	6				
	extreme fror	% of national values that are extreme outliers (at least 3 SD from the mean) AND Region/State with extreme outliers				of national values that are moderate outlie veen ±2-3 SD from the mean) AND Region/ with moderate outliers		
	National score		with	ion/State extreme utliers	National Region/State with moderate ou			ate with moderate outliers
	%	No.	%	Name	%	No.	%	Name
ANC1	0%	0	0%	-	3.4%	7	41%	Kayah, Kayin, Nay Pyi Taw, Yangon, Shan(S), Shan(N), Ayeyarwady
Deliveries	0%	0	0%	-	5.6%	11	65%	Kayah, Kayin, Chin, Tanintharyi, Nay Pyi Taw, Rakhine, Yangon, Shan(S), Shan(N), Shan(E), Ayeyarwady
Penta3	0%	0	0%	-	3.4%	7	41%	Kayah, Tanintharyi, Bago, Magway, Nay Pyi Taw, Rakhine, Shan(N)
OPD	0%	0	0%	-	0.0%	0	0%	-





*Solid line indicates the national ratio of current events to mean of past events; dashed lines indicate 33% relative difference from the national ratio

Figure (3) Indicator 2c: Ratio between Penta1 and ANC1 events and Region/State with ratios more than +/-33% different from the national ratio *

*Solid line indicates the national ratio of Penta1 to ANC1 number of events; dashed lines indicate 33% relative difference from the national ratio



 Table (5) Indicator 2d: Consistency ratio between Penta1 and Penta3 and Region/State

 with consistency ratio greater than 1

	2016
National Penta1-Penta3 consistency ratio	95.65%
No. of Region/State with consistency ratio > 1.02	0
%. of Region/State with consistency ratio > 1.02	0%

Figure (4) Indicator 2d: Consistency ratio between Penta1 and Penta3



DOMAIN 3: EXTERNAL CONSISTENCY OF POPULATION DATA Table (6) Indicator3a: Consistency with UN Projections

	2016
Ratio of population projection of live births	
from the reported data to a UN live births	
projection	1.12

Figure(5) Indicator 3b: Ratio of the official (reported data) to an alternate denominator

Indicator 3b.1: Ratio of the official (reported data) to an alternate denominator(*Derived by dividing ANC1 total events from HMIS by ANC1 coverage rate estimated from the most recent population based survey) for pregnant women AND Region/State where there is at least 33% difference between the two denominators Indicator 3b.2: Ratio of the official(reported data) to an alternate denominator(*Derived by dividing Penta1 total events from HMIS by Penta1 coverage rate estimated from the most recent population based survey) for children under one AND Region/State where there is at least 33% difference between the two denominators



Solid line indicates an exact match between the two ratios; dashed lines indicate 33% relative difference between the two at Region/State level

DOMAIN 4: EXTERNAL COMPARISON

Table (7) Indicator 4: Ratio of facility coverage rates to survey coverage rate ANDRegion/State where there is at least 33% difference between the two rates

	2016			
	Indicator 4a ANC1	Indicator 4b Delivery	Indicator 4c Penta3	
Number of Region/State with more than +/-33% difference between the two coverage rates	0	6	7	
% of Region/State with more than +/- 33% difference between the two coverage rates	0.0%	35.3%	41.2%	
Names of Region/State with more than +/-33% difference between the two coverage rates		Kayah, Kayin, Chin, Mon, Rakhine, Ayeyarwady	Tanintharyi, Bago, Magway, Nay Pyi Taw, Mon, Rakhine, Ayeyarwady	







Figure (7) Indicator 4b: Deliveries by SBA, Comparison between Facility coverage rates to survey coverage rate

Figure (8) Indicator 4c: Penta3 Immunization Coverage, Comparison between Facility coverage rates to survey coverage rate



Sustainable Development Goals-SDGs Indicators (2016)

SDG for Health: Ensure healthy lives and promote well- being for all at all ages

Table (8) Sustainable Development Goals-SDGs Indicators (2016) available from HMIS-Myanmar and compare with other source

		Data (2015-2016) (MDHS)	Data(year) (World Health Statistics 2016)	Data (2016) (HMIS)
Health SDGs 3.1	SBA%	60	78 (2006-2014)	78.4
Health SDGs 3.3	TB incidence (/100,000Pop)	-	369(2014)	190.2
	Malaria Incidence (/1000 pop)	-	45 (2013)	0.723
	Infants receiving three doses of hepatitis B vaccine (%)	Penta 3 62.3%	75%(2014)	Penta 3 87.3%
Health SDGs 3.4	Suicide mortality rate (per 100 000 Population)	-	12.4 (2012)	2.8
Health SDGs 3.6	Road traffic mortality rate (per 100 000 population)	-	20.3(2013)	9.2
Health SDGs 3.7	Health SDGs 3.7 Adolescent birth rate (per 1000 women aged 15–19 years)		30.3 (2005-2015)	17.9
Health SDGs 3.9	Mortality rate from unintentional Poisoning (per 100000 population)	-	1.1 (2012)	0.76
Selected Health Related SDGs 6.1	Proportion of population using improved Drinking water sources (%)	80.4	81 (2015)	81.3
Selected Health Related SDGs 6.2	Proportion of population using improved sanitation (%)	49.1	80 (2015)	62.1

The above table showed SDGs Indicators (2016) available from HMIS-Myanmar and compare with other source. Available indicators from routine health management information system over the years were shown in below figures.

Skilled Birth Attendants(%) from 2005 to 2016 were analysed with lowest and highest regions/states. Yangon, Mon, Kayah and Kayin positioned alternatively as highest during last 12 years period whereas Rakhine situated as lowest over the years. The SBA % was increased 20% from 2005 to 2016, average 2% increased in each year.

Hepatitis-B vaccine was already combined into Pentavalent vaccine which was introduced to Myanmar in late 2012; the Penta coverage(3rd dose) had more than 85% over 3 years from 2014 to 2016.

The data collected under injury prevention project covered Health SDGs 3.4, 3.6, 3.9; Suicide mortality rate, Road traffic mortality rate and Mortality rate from unintentional poisoning (per 100 000population). The increasing trend was seen obviously; increased more than double in Road traffic mortality rate per 100,000 population from 2010 to 2016. Suicide death rate was increasing, 1 death per 100,000 population in 2010 and triple in 2016, 3 deaths per 100,000 population. Mortality rate of unintentional poisoning was increased 1.5 times last five years.

Health related SDG such as Proportion of population using improved drinking water source and using improved sanitation were 81.3% and 62.1% respectively in 2016, the trend was not much changed during five years. The one latrine was being used by 4.4 person (average household size 4.4 at national level in 2014 census) was applied over last 5 years in the calculation of the proportion of population using improved sanitation.

Figure (9) Health SDGs 3.1, Proportion of births attended by skilled health personnel(2005-2016)



Figure (10) Health SDGs 3.3, Infants receiving three doses of hepatitis B vaccine (%) (2005-2016)



Figure (11) Health SDGs 3.4, 3.6, 3.9: Suicide mortality rate, Road traffic mortality rate, Mortality rate from unintentional poisoning (per 100 000population)(2005-2016)



Figure(12) Selected Health Related SDGs 6.1 & 6.2: Proportion of population using improved Drinking water sources (%), Proportion of population using improved sanitation (%)(2005-2016)



Township Level Analysis

Maternal Health Services

For assessing maternal health service coverage, the following indicators were used to calculate summary measure (Maternal health index); and the level of measures for each indicator were defined to high, middle and low coverage as described in Table(9). The summary measure (Maternal Health Index) was standardized by converting into 1 if all maternal health indicators had been achieved to high level. The maternal health service coverage among regions/states was explored by using maternal health index, Figure (13).

- Antenatal care coverage (%)
- Proportion of births attended by Skilled Health Personnel (%)
- Postnatal care coverage (%)
- > TT2 coverage (%)
- Still-birth ratio (per 1000 LBs)
- Abortion rate (%)
- Maternal mortality ratio (per 1000 LBs)

Table (9) Level	of measures to	or maternal	health indicators
	or measures it	or maternar	incultin infunction 5

Indicators	High level	Middle level	Low level
Antenatal Care Coverage (%)	>75%	50-75%	<50%
Proportion of births attended by Skilled			
Health Personnel (%)	>75%	50-75%	<50%
Postnatal Care Coverage (%)	>75%	50-75%	<50%
TT2 Coverage (%)	>75%	50-75%	<50%
Still-birth ratio(per 1000 LBs)	< 10	10-20	>20
Abortion rate (%)	<2	2-4	>4
Reported Maternal mortality ratio			
(per 1000 LBs)	0-0.99999	1-1.5	>1.5



Figure (13) Summary Measures of Maternal Health Services

The all townships from Tanintharyi, Bago, Mandalay, Mon, Yangon, Nay Pyi Taw, Kayah and Kayin had needed to sustain their performance of maternal health services; those were above the index value of 0.7. The lowest discrepancy among townships were shown in Tanintharyi, Bago, Mon, Kayah, Kayin and Chin while the highest inequality in Shan(N) and Ayeyarwady. The townships with index value less than 0.5 and first priority intervention was needed in some townships of Shan(N). In 2016, 20 townships out of 330 (6.1%) are under satisfactory level 0.7; Kachin(3 townships), Chin(2 townships), Sagaing(1 township), Magway(1 township), Rakhine (2 townships), Shan(S)(3 townships), Shan(N)(5 townships), Shan(E)(2 townships) and Ayeyarwady (1 township). The name of townships was described in Table(10).

Region/States	Township	Maternal Index	Region/States	Township	Maternal Index
Kachin	InJangyang	0.67	Shan(S)	Langkho	0.67
	SumPara Bum	0.67		Mongkung	0.67
	Mansi	0.67		Kyethi	0.67
Chin	Paletwa	0.62	Shan(N)	Manton	0.48
	Kanpetlet	0.67		Tang-yan	0.57
Sagaing	Pinle-bu	0.67		Kutkai	0.57
Magway	Sidok taya	0.62	·	Mong-yai	0.67
Rakhine	Sittwe	0.67		Kung-long	0.67
	Myebon	0.67	Shan(E)	Matman	0.67
Ayeyarwady	Tha -baung	0.57		Mongyan	0.67

Table(10) Name of townships needed for Maternal Health Intervention

Child Health Services

Neonatal care coverage, ORT utilization rate, percent of antibiotics treatment in ARI case, measles immunization coverage, low birth weight, early neonatal death rate and under five mortality rate were used to assess coverage of child health services. Summary Measure (Child Health Index) was calculated based on level of measures of child health indicators.

Indicators	High level	Middle level	Low level
Neonatal Care Coverage (%)	>75%	50-75%	<50%
ORT utilization rate (%)	>75%	50-75%	<50%
Antibiotics treatment coverage in ARI case (%)	>75%	50-75%	<50%
Measles Immunization Coverage (%)	>75%	50-75%	<50%
Low Birth Weight (%)	Up to 1%	1.01-2%	Zero reporting,>2%
Early Neonatal Death Rate (per 1000 LBs)	Up to 3	3.01-6	>6
Under Five Mortality Rate(per 1000 LBs)	Up to 10	10.01-20	>20

Table (11) Level of measures for child health service indicators

Figure (14) Summary Measures of Child Health Services



The above figure reflected inequity between Regions and States, one blue diamond represents one township in each region/state; the 21 townships out of 330 (6.4%) of townships had less than Child Health Index value of 0.7; Kachin(4 townships), Sagaing(2 townships), Bago(1 township), Mandalay(1 township), Rakhine(1 township), Yangon(8 townships) and Shan(4 townships). Most of the townships (above Index 0.7) needed to continue their services continuously and sustained.

Region/States	Township	Child Index	Region/States	Township	Child Index
Kachin	TsawLaw	0.62	Yangon	Coco Island	0.52
	InJangyang	0.62		Dagon	0.57
	Nogmung	0.67		Mayan gone	0.62
	Machanbaw	0.67		Insein	0.62
Sagaing	HKham -ti	0.67		Bota taung	0.62
	Wun -tho	0.67		Dagon Myothit(S)	0.67
Bago	Paung -de	0.67		Hmaw bi	0.67
Mandalay	PyinOoLwin	0.67		N/Ok kala	0.67
Rakhine	Sittwe	0.62	Shan(N)	Konkyan	0.57
Shan(S)	Hsiseng	0.67	Shan(N)	Mong-yai	0.67
Shan(E)	Matman	0.57			

Table (12) Name of townships needed for Child Health Intervention

Table (13) Number of Townships by Priority Level for Maternal Health and Child Health

Priority Level	Number of townships needed for Maternal Health Intervention	Number of townships needed for Child Health Intervention
First (less than Index 0.5)	1	0
Second (between 0.5 and 0.6)	3	4
Third (between 0.6 and 0.7)	16	17
Total Number of townships	20	21

Health Facility Level Analysis

There are 1825 Health Facilities in rural area over the country which delivered Rural Health Center Functions, most are rural health centers and some are station heath unit. Among them, 1402 Health Facilities are in rural area of 242 townships implementing electronic HMIS as of June 2017.

Region/States	Number of Townships implementing electronic HMIS as of June2017	Number of Townships with Rural Health Centers/Station Health Units	Number of Health Facility in Rural Area	Electronic HMIS started using www.health.gov.mm/dhis
Kayah	7	7	28	January 2016
Kayin	7	7	63	December 2016
Chin	9	9	78	January 2016(7 townships) December 2016(Kanpetlet, Paletwa)
Sagaing	37	37	235	March 2015 (Chaung-U) December 2016 (36 Townships)
Tanintharyi	10	10	50	December 2016
Bago	28	28	194	January 2015 (Nyaung-Lay- Bin) December 2016(27 townships)
Magway	25	25	188	January 2016 (5 Townships) December 2016 (20 Townships)
Mandalay	28	23	157	January 2015 (Patheingyi) January 2016 (Madayar) December 2016(26 Townships)
Mon	10	10	66	December 2016
Rakhine	17	17	122	May 2017
Yangon	45	18	89	December 2016
Shan(S)	3	3	12	January 2017
Shan(N)	2	2	12	January 2016(Namtu) December 2016(Kutkai)
Ayeyarwady	6	6	79	January 2016
Nay Pyi Taw	8	7	29	December 2016
Total	242	209	1402	

Table (14) Number of Rural Health Facilities in 242 townships implementing electronic HMIS

The skilled birth attendant(SBA) (%) generated from yearly reporting(Form-3) as of December 2016 in rural area, available by using DHIS2 software, was studied by health facility across 13 regions/states. The unequal distribution of skilled birth attendant coverage rate was seen; among those, Kayin State had the health facility, KyaeKaTaut RHC in Thandaunggyi Townshsip, with the lowest SBA coverage (3%) while the minimum coverage was 51% in Yangon Region. The highest divergence was seen in Kayin, Chin and Nay Pyi Taw. The lowest inequality was seen in Yangon, Mandalay and Ayeyarwady. The health facilities from the two townships of Shan(N) had the SBA coverage ranged from 19% to 72%. The assessing of services by Health Facility supports the township health planning better; and need to explore resource allocation and need to fulfill enabling working environment.

Figure(15) Highest and lowest Skilled birth attendants (%) in Rural health centers(2016)



Table (15) Health Facility with lowes	t SBA% within respective Region/State
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Regions/States	Township	Name of Health Facility	SBA%
Kayin	Thandaunggyi	KyaeKaTaut	3.4%
Chin	Paletwa	HmoneToeNone	11.1%
Nay Pyi Taw	Pyimana	Botema	12.6%
Kayah	Hprusoe	КауКаw	16.8%
Shan(N)	Kutkai	MongYu, Monehwan	18.9%
Sagaing	BanMauk	Nanzar	21.2%
Mon	Belin	LayKay	24.6%
Bago	Yedarshae	MaYoeKhone	25%
Magway	Ngaphe	GoteKyi	25.8%
Tanintharyi	Yebyu	Yarphu	32.3%
Ayeyarwady	Bogale	KyeinChaunggyi	38.7%
Mandalay	Thabeikkyin	Zayutkwin	44.7
Yangon	Taikkyi	SanYwa	51%

Primary Medical Care and Referral of Patients

One of the indicators for utilization of health facilities was total number of attendances at the clinic; more than 23 million patients attended the clinics of public health facilities at townships and lower level in 2016. The health worker delivered health care services during field visits to wards/villages, nearly 11 million patients seek care from basic health staff. Increasing number of patients at both clinics and field visits was seen within 3 years, 2014 to 2016; Figure(16). Total attendances at the clinics by Regions/States(2014-2016) was shown in Figure(17).



Figure(16) Total attendances at the clinics and during field visits(2014-2016)

Figure(17) Total attendances at the clinics by Regions/States(2014-2016)





Figure(18) Percentage of new patients at the clinic by Regions/States(2014-2016)

It is proportion of population, who attended at the clinic as new patients in a year; 26.1% of population attended health facilities in 2016 compared with 24.3% in 2014 and 25.7% in 2015. In Kayah, 41.3% of population utilized public health facilities for seeking health care where as Yangon had lowest(20.7%). All Regions/State except Kayah, Rakhine and Mon showed higher percentage than 2014. In large and urbanized cities, seeking care in private clinic and private hospitals was familiar while in very remote and conflict area, inaccessible to health facilities might be occurred.



Figure(19) Referral cases by basic health staff to higher levels (clinic + field visit) in 2016

Maternal Health, Maternal Nutrition and Reproductive Health

Midwives and Lady Health Visitors were main service providers for maternal and reproductive health in grass root level. Doctors and nurses provided services in hospitals; the information in this report also covered the services from primary hospitals.

The calculation of coverage of maternal and reproductive health depend on estimation of pregnancy, and the estimated pregnancy in 2016 was unvarying across the services such as antenatal care, tetanus immunization, de-worming of pregnant mother, iron, B1, and Vitamin A supplementation for maternal nutrition.

The postnatal care coverage represented at least one visit during puerperium 42 days and some overlapping of services could occur between consecutive years. The breastfeeding mothers defined as postnatal 43 days to 84 days and B1 supplementary was given; could overlap services among consecutive months.



Figure (20) Average number of visits for Antenatal care and Postnatal Care by Region/States (2016)

Coverage of antenatal care and postnatal care was based on at least one visit of health care, average number of visits showed continuous taking of health care throughout the pregnancy and during puerperium period. Average 4 visits for both antenatal and postnatal at national level was found from 2014-2016. The above figure 2016 showed antenatal visits was more than postnatal visits in Kayah, Magway, Nay Pyi Taw, Shan(S), Ayeyarwady, Chin, Bago, Shan(East), Rakhine and Shan(North) whereas postnatal visits was more than antenatal visits in Mon, Sagaing, Kachin, Mandalay, Yangon, Tanintharyi and Kayin.


Figure (21) Antenatal, Delivery by SBA, Postnatal Care coverage (%), 2016

In 2016, Antenatal Care Coverage (86.1%), Delivery by SBA(78.4%), Postnatal Care(91%) was seen at national level. Skilled Birth Attendants(%) was highest in Yangon(90.9%), Mon(88.5%), and Mandalay(87.7%) while lowest in Shan(N)(67%), Chin(55.9%) and Rakhine(50.5%). Antenatal care coverage(%) was highest in Kayin(90.3%) and lowest in Shan(East)(73.6%); Postnatal care coverage(%) was highest in Sagaing(98.5%) and lowest in Shan(N)(78%).

Match up with previous year at national level, Antenatal care coverage 83.6% in 2014, 82.4% in 2015 was found. Skilled birth Attendants(%) in 2016 got 1% higher than 2015 and 4% higher than 2014. Postnatal Care Coverage increased about 10% within five years; 79.7% in 2012, 80% in 2013, 85% in 2014 and 86% in 2015 and 91% in 2016.



Figure(22) Health Services during antenatal period(%), 2016

Regarding the services given in antenatal period, tetanus immunization 2 doses, de-worming of pregnant mothers after 3 months of gestational age, B1 supplementation after completed 36 weeks of gestation, iron throughout the period was provided. At national level in 2016, TT2 coverage (81.2%), Deworming(74.3%), Iron supplementation 4 times or more(63.5%), B1 supplementation(59.7%) was shown in Figure(22). The coverage of TT2 was highest in Yangon(86.3%) followed by Bago(85%) while less than 70% coverage in Shan(N)(69.1%) and Shan(E)(61.8%). The highest variation between TT2 immunization and B1 supplementation in last month of pregnancy was found in Rakhine, Shan(South) and Yangon.

TT2 immunization coverage in the last 2 year, 2014 and 2015 showed 78%, and 3% higher in 2016. Deworming was seen as 70%(2014) and 71.4%(2015) and also 3% higher in 2016. The services for B1 was 4% higher than the previous years; 55.6%(2014) and 55.7%(2015).





Regarding the services given in Postnatal period, B1 supplementation was continued in postnatal period and breastfeeding period; national coverage in 2016 was 73.6% and 74.5%. Shan (N), Shan(E) and Rakhine had no more than 60%. More than 80% coverage was seen in Mon, Kayin and Nay Pyi Taw. Vitamin A was also given to postnatal mother; the coverage ranged from Shan(E) 50.1% to Kayin 84%, national level was 73.7%.

Last year 2015 showed 67.3%, 68.2%, 69.1% respectively in B1 supplementation of postnatal mother, breastfeeding mother and Vit A supplementation in postnatal period. In 2014, the coverage of 65.9%, 67.1% and 67.4% was achieved.



Figure(24) Types of Delivery(%), 2016

About half of deliveries occurred in institutional place of both public and private sector. Public Facilities includes public hospitals, tertiary hospitals, general hospitals, district hospitals, township hospitals and station hospitals, RHC and Subcenter Delivery rooms. Private sector includes private hospitals, private clinic and private delivery room. Home delivery includes Delivery by BHS(27%), AMW(8%) and TTBA(6%). About 8% is other deliveries, might include delivery by relatives and other delivery occurred outside country. Among 41% of institutional deliveries in public sectors in 2016, (29.6%) of deliveries occurred in townships hospitals and lower level within reporting township. Compare with previous year, 24.3% in 2014 and 27.1% in 2015. The 11% of institutional deliveries utilized other public hospitals rather than hospitals within township.



Figure(25) Contraceptive Prevalence Rate and Close Birth Interval(%), 2016

Birth Spacing service is one of the services delivered by Basic Health Staff to support maternal health; birth spacing services could reduce closed birth interval, defined as the women become pregnant within 24 months after last delivery, which was one of the indicators for maternal health. At national level in 2016, contraceptive prevalence rate (any methods) was 67.6% and the two percent of pregnant mother had close birth interval. The higher CPR with the lower closed birth interval was seen in Nay Pyi Taw, Yangon, Ayeyarwady and Bago. The lower CPR with the higher close birth interval was found in Rakhine, Kayin and Chin.

The contraceptive prevalence rate (modern methods) in 2016 was 63.1% inclusive of Pills(19%), Injection(36.1%), IUCD(2.4%), Condom(1.5%), Implant(1.2%), Sterilization(1%) and other modern(0.5%); 1.4% was reported as modern methods but not differentiate prefer method. Regarding to preference methods among users of modern methods in 2016, prefer contraceptive method was injection and contributed as three-fifth, one-third was pills; implant and sterilization was 2% each.



Figure (26) Proportion of Preference Modern Contraceptive Method (%), 2016

Child Health

Newborn care within three days of birth was reported as one of the newborn health care services, the newborn with breastfeeding within one hour of birth was also recorded by basic health staff. The lowest % in newborn with breastfeeding within one hour of birth was 58.4 % and found in Rakhine State. Shan(E) showed 63.6% and lowest among Region/States in newborn care services within 3 days of birth.

The diarrhea and ARI is common problem in under five children; basic health staff provided ORT for diarrhea case and antibiotics in pneumonia cases at the clinics as well as in the field.

In 2016, national level had 98.9% and 96.7% in ORT and antibiotics treatment respectively among diarrhea and pneumonia cases who had met with basic health staff; and the gap was not much among region/states.



Figure(27) Child health service coverage(%) and Highest and lowest Region/State(%), 2016

Immunization Coverage

Figure(28) Immunization coverage(%), 2016



Regarding to immunization services, national level coverage was more than 90% in BCG, Polio1 and Penta1. Polio2 and Penta2 had 89% coverage and Polio3 and Penta3 showed 87% coverage; drop-out was about 4%. Proportion of under 1 children with measles rubella immunization was 88%. Inactivated polio vaccine(IPV) was launched throughout the country on 3rd December 2015 and Pneumococcal vaccine on 1st July 2016.

Figure(29) Immunization (Penta3) coverage and MR (9 months) coverage at township level, 2016



Assessing township level coverage of Penta3 and MR(9 months) immunization, 56 townships had less than 80% coverage in Penta3 and 58 townships in MR. More than 90% coverage was found in 152 townships in penta3 and 165 townships in MR(9 months).

Out of 330 townships, 5 townships from Shan State had no reporting in all months. By exploring of 56 townships with <80% coverage of Penta3, Kachin(12 townships), Kayah(2 township), Kayin(4 townships), Chin(1 township),Sagaing(5 townships), Tanintharyi(1 township), Magway(2 townships), Mandalay(3 townships), Rakhine(3 townships), Yangon(3 townships), Shan(19 townships) and Ayeyarwady(1 township) was found. Attention needed townships with less than 50% coverage of penta3 was seen in Kachin, Shan, Yangon, Rakhine and Ayeyarwady.

Prevention of Cardiovascular Disease

Hypertension was defined as the blood pressure of 140/90 mmHg and above; the hypertension among patients attending to basic health staffs was recorded and reported. Hypertension cases detected by BHS among 15+ population was calculated as proxy prevalence. In 2016, 13.5 hypertension cases per 1000 population of aged 15+ was found; which showed 3.8% of patients attending to BHS already had hypertension.

The region/state difference was seen; 5.7% of patients had hypertension in Shan(East) and lowest to Chin(1.4%). Above 15 hypertension cases per 1000 population of aged 15+ was found in Shan(East), Shan(South), Bago, Kayah, Kachin, Tanintharyi and Nay Pyi Taw.



Figure(30) Prevalence of hypertension among 1000 population of aged 15+, 2016

Smoking is risk factor for non-communicable diseases; current smoker was defined as the person taking any types of smoking within 1 month at the time of data collection by BHS; any types of smoking includes Cigarette, Cheroot, Cigar and Dottle, etc. The household member reported to BHS the smoking status of their family and it might be underreporting.

Number of current smokers per 1000 population of aged 15+ was calculated as prevalence. At national level, 174.6 was found; it meant that at an every 100 people aged 15+, the 17 people was current smoker.



Figure(31) Prevalence of current smokers among 1000 population of aged 15+, 2016

Injury Prevention

The injuries become leading problem nowadays; the prevention is important for reduction of morbidity and mortality burden of accidents and injuries. Basic Health Staff reporting include unintentional injuries such as Road Traffic Accidents, occupational injuries in Farm, Poisoning, Fall, Burns and Drowning, and Intentional injuries like Suicide and Assault.

Road traffic accident is big magnitude among reported types of injuries, followed by farm injuries, Assault, Fall and Burn. More than 50% of injuries due to RTA among reported eight kinds of injury was found in Kachin, Kayin, Tanintharyi, Mon and Shan(North). Yangon showed assault cases were more than 30% among injuries.



Figure(32) Distribution of cause of injury by Regions/States, 2016

Poisoning, Drowning and Suicide problems were a smaller amount compare with others problems, however, the death rate is highest; 74% of drowning cases become going to death, 48% of suicide attempted resulted in death, 7% of poisoning not recovered. Among 11282 reported deaths due to injury, two-fifth was due to RTA and near one-fourth was due to drowning, 12.5% was due to suicide. Regarding to mortality of injury on eight kinds per 100,000 population among regions/states, 22 deaths due to injury was found at national level, ranged from 11 deaths (Yangon) to 37 deaths (Kayin).



Figure(33) Proportional mortality by types of injuries, 2016

Prevention of Hearing Impairment

Congenital deafness was recorded by basic health staff after detection of none response of loud noise in 3 consecutive months under 6 months of age; it is for early diagnosis and further investigation. Total 148 cases were reported by basic health staff in 2016; morbidity rate is 0.17 per 1000 Live Births. Chronic ear discharge from both ears longer than 3 months was also reported by basic health staff and the prevalence was 2 people per 100,000 population (0.02 per 1000 Population) in 2016. Number of people with hearing impairment without having any ear discharges was 4 people per 100,000 Population. The burden of hearing problems reported by basic health staff might be under-reporting, however, it showed consideration of prevention of hearing impairment in the community is needed. Ngaputaw, Pekon, Danuphyu, Mindat and Kyauktaw had more cases of deafness; 165, 103, 94, 76 and 72 accordingly.

Figure(34) Townships with reported hearing impairment cases in both ears without any ear discharges, 2016



Mental Health

Regarding to mental health, psychosis, depression, anxiety, alcoholic dependence, epilepsy and mental retardation in their community knowing by basic health staff was reported once a year. Per 100,000 population in 2016, 9 person reported with psychosis, 6 person had depression, 7 person showed anxiety and mental retardation, 5 stayed with epilepsy, 120 depend on alcohol.

Among reported mental retardation, Kayah, Chin, Shan(S) showed high rate of mental retardation per 100,000 population.



Figure(35) Prevalence of mental retardation per 100,000 population, 2016

Malaria

Basic Health Staff, staff from malaria campaign and volunteer health workers, staffs from NGO, INGOs and UN are working to achieve malaria elimination. The basic health staff checked-up malaria using RDT among patients attending to them when suspected. In 2016, the total of (753,677) patients had been tested for malaria, which is 5.7 % of patients attending to them. Among malaria check-up, 4.2 % was found as positive patients; it ranged across the country, Chin (12.3%) to Yangon(<0.1%).

Percentage of malaria positive patient among new patient attendances was 0.24%, 2 malaria patients per 1000 patient at national level. Chin showed highest rate 1.6% followed by Shan(E), Sagaing and Kachin.



Figure(36) Percentage of malaria positive patients among outpatients , 2016

Regarding to surveillance by age group and by sex, 36749 cases was reported as malaria in 2016 by Basic Health Staff reporting. The working age group (15-44 years) showed 60%, Male 43% and Female 17%, greatest percent among malaria positive cases. Male suffered malaria more than female; two-third contribution was male and one-third showed female.



Figure(37) Malaria by age groups and by Regions/States, 2016

Number of reported malaria cases in 2016 by Region/state was shown in Figure(37); more than 9000 cases in Sagaing, and three to four thousand cases was found in Kachin, Chin, Rakhine and Ayeyarwady. The red colour in the map, 8 townships had highest malaria positive outpatient; Paletwa, Ngaputaw, Banmauk, Phaungbyin, Katha, Mongsat, Tiddim and Pathein, Figure(38).



Figure (38) Malaria positive outpatient by townships, 2016

Tuberculosis

This report covered only basic health staff reporting; township TB coordinators were basic health staff in most of the townships. The data about total tuberculosis patients and sputum positive patients was reported quarterly; diseases under national surveillance monthly reporting include types of tuberculosis, by age group and by sex.

In both Cases and Death due to TB, the proportion of sputum smear negative TB patients is largest portion; 49% in cases and 45% in death, followed by sputum smear positive tuberculosis patients, it showed about one-third.

Regarding to age group distribution in tuberculosis patients (case), the proportion of 15-44 age group showed largest percent 39% followed by 45-49 years age group(21%). Tuberculosis patients under 0-14 years age group showed 23% contribution among tuberculosis patients and 8% in death.



Figure(39) Percent distribution of types of tuberculosis among tuberculosis cases and deaths, 2016

Figure(40) Tuberculosis by age group in tuberculosis cases and deaths, 2016



According to Gender distribution among tuberculosis, male are common than female in tuberculosis patients as well as in deaths due to TB; male showed double of female and in retreated tuberculosis, male had 2.5 times higher than female.



Figure(41) Distribution of types of tuberculosis by gender, 2016

Sexually transmitted infection

The basic health staff reported 116,459 primigravida mothers received VDRL testing during pregnancy period; the positive rate was 0.33%, about 4 people going to be positive per 1000 tested primigravida mothers in 2016. Shan(S), Mandalay, Shan(N) and Ayeyarwady showed higher than other region/states.

Genital ulcer detection by BHS was highest in Shan(E) and Tanintharyi. Only 2 cases per 100,000 population consulted with basic health staff.



/>			
Figure(42)	Genital Ulcer Det	ection by Basic	Health Staff, 2016
1 16 41 6 (12)		cection by busic	nearch Stan, 2010

Leprosy

The under 15 year patients was 5.1% among new patients in 2016, 31.3% of new patients were female patients. About 4 cases per 100,000 population was detected as new patients. Disability grade 2 was found in (9.3%) of new leprosy patients. Defaulter for leprosy treatment was still present and 80 patients become defaulter in the year. Leprosy prevalence rate was 0.3 per 10,000 Population.

Figure(43) Townships with remaining registered patients (MB) at the end of 2016



Trachoma Control and Prevention of Blindness

In 2016, (29) townships out of 330 reported infectious trachoma patients under 10 years of age, total 185 cases of infectious trachoma. Kayah, Mon, Yangon, Nay Pyi Taw had no reported cases of infectious trachoma. Opthalmia neonatorum cases were found in 19 townships; 90 newborns suffered and it represented as about 1 case per 10,000 newborns in Myanmar.

Figure(44) Townships with reported ophthalmia neonatorum cases ,2016

Opthalmia neonatorum cases in 19 townships



Region/states	Name of townships
Kachin	Pharkant
Kayah	Pharsaung
kayin	Kawkareik
Sagaing	Kani, Myaung
Bago	Monyo, Bago
Magway	Magway
Mandalay	Kyaukpadaung
Mon	Kyaikhto, Mudon
Rakhine	Buthidaung
Yangon	Hlaingtharyar
Shan(S)	Pekon
Shan(N)	Mongyai
Shan(E)	Tachileik, Mongton
Ayeyarwady	Ingapu, Dedaye

Zoonosis

The vaccination for prevention of rabies is one of the activities under zoonotic diseases control project. The number of dog bites cases, the number of rabid dog bite cases, vaccination cases, leptospirosis cases that occurred in community was reported by basic health staff. The (56,296) cases of dog bite occurred in 2016, among those, 1.3% were rabid dog bite. The 64% of dog bite cases had taken anti-rabies vaccines. Only 14 leptospirosis and no anthrax case was reported by BHS.

Regarding to morbidity of dog bite, (111) cases per 100,000 population was seen; Bago and Yangon had highest followed by Kachin and Mandalay.

Regarding to rabies by sex, male was more affected and 3:1 ratio was seen. Exploring by age group, 39% of rabies cases were between 15-44 years age group, 34% were under 14 years of aged, 18% was seen in 45-49 years and only 9% in 60 years and above. Kayah, Chin, Tanintharyi, Rakhine and Shan(East) had nil reporting in Rabies.



Figure(45) Number of dog bites per 100,000 population and Rabies by age group, 2016

Diseases Under National Surveillance

There are 17 diseases under National Surveillance; in the year 2016, reported one diarrhoea case in every 100 people, one dysentery case in every 300 people, (14) cases of food poisoning and (9) cases of enteric fever in 100,000 population was found. The vaccine preventable diseases like measles, diphtheria, whooping cough was occurred in some regions/states in 2016, measles was reported from Sagaing, Bago, Yangon, Ayeyarwady and Nay Pyi Taw. Diphtheria was found in Tanintharyi, Bago, Magway, Yangon, Ayeyarwady and Nay Pyi Taw. Whooping cough was seen in Mandalay, Rakhine and Yangon. For Neonatal tetanus, morbidity rate was 1.6 per 100,000 live births. ARI is common in under five children and 4553 moderate and severe pneumonia case per 100,000 under five children was observed. About 2 cases of meningitis, 14 cases of hepatitis and 17 cases of poisonous snake bite was also reported per 100,000 Population.

School Health

The data collected in school health services, provided by basic health staff and school health team, were the coverage of school examined, availability of water source and sanitary latrine as well as the coverage of examination for primary school children. The coverage was 96.2% for school examination and 93.8% for examination of primary school children for health care. The coverage among regions/states was not much different. Availability of sanitary latrine and water source for school children is important for school health services; the standard ratio of student to sanitary latrine was 50:1. The percentage of school with the full standard ratio (50:1) of fly-proof latrines was 88% and access to water was 86.5%; the variation among regions/states to access to water was higher than sanitary latrine. More discrepancy among regions/states was seen in schools with nutrition promotion activities and health promoting school activities.



Figure(46) School Health Services Coverage(%), highest and lowest regions/states, 2016

Environmental Sanitation

The population coverage of sanitary latrine was generated by using number of sanitary latrines, average household size using the latrine and population residing in the area. In large cities of regions/states, one household had more than one latrine especially in Residential Buildings, which would affect on calculation. Although the urban and rural distribution of family size is different, in this report, the household size by township from 2014 census was applied to get urban, rural and township coverage. Sanitary latrine coverage was 62.1% and proportion of population using improved drinking water sources was 81.3%.



Figure(47) Sanitary Latrine Coverage(%), urban and rural coverage(%), 2016

Health literacy promotion in the community

Advocacy meeting is one of the health education activities, average 55 times per month per township with the performance of all basic health staff in the township. Average 1 time for exhibition and contest, average 80 times for public talks and 18 times for distribution of IEC materials per month per township was conducted in 2016.



Figure(48) Average number of advocacy meeting per month per township, 2016

Annex 1. Health Service Monitoring Indicators by Regions/States (2016) and National Level (2014-2016)

Primary Medical Care & Referral Project (2016)													
		Activities	of Basic He	ealth Staff		Activities of Community Health Worker							
Regions and States	% of new patients at the clinic	Avg. number of visits by each patient	Avg. number of field visits to villages/wards	Total number of attendances during field visits	% of patients referred to higher levels	Avg. number of joint activities with BHS (Freq:)	Avg. number of activities carried out by CHW						
Kachin	36.6	1.6	22.5	294,003	0.69	7.6	5.1						
Kayah	41.3	2.1	19.6	79,879	1.1	8.9	5.2						
Kayin	32.4	1.7	17.5	236,097	0.7	13.4	12						
Chin	40.8	1.7	15.1	95,197	0.71	8.5	6.2						
Sagaing	28.6	1.7	29	1,272,021	0.8	14.7	11.2						
Tanintharyi	31.3	1.5	22.6	358,505	0.5	22.6	17.9						
Bago	28.4	1.8	26.8	1,271,226	1.1	14.2	9.5						
Magway	23.2	1.8	32.9	1,095,119	0.98	15.5	11.4						
Mandalay	21.2	1.8	30	1,364,500	0.84	16.6	14						
Mon	24.5	1.7	43.5	345,976	0.91	22.4	19.2						
Rakhine	28.2	1.5	24.7	589,998	0.7	16.2	12						
Yangon	20.7	1.9	58.7	1,193,111	0.75	19.1	16.8						
Shan (S)	28.6	1.7	18.8	653,430	0.66	10.1	7.6						
Shan (N) Shan (E)	22.3	1.6	14.3	305,846	0.86	5.8	4.9						
Snan (E) Ayeyarwady	28.8 26.5	1.6 1.7	8.7 19.6	155,463 1 264 520	0.48	3.9 15.2	2.9 11.1						
Nay Pyi Taw	26.5 26.2	1.7 1.8	19.6 49.9	1,364,520 306,509	1.1 1.3	15.3 31.9	26.9						
2016	26.1	1.7	25.4	10,981,400	0.86	14.7	11.2						
2015	25.7	1.7	26.2	10,583,439	0.8	14.0	10.7						
2014	24.3	1.7	24.2	9,856,582	0.8	11.6	8.9						

Table (1) Indicators for Primary Medical Care and Referral of Patients

× ×	,				rn and Chi				-
			Mater	nal and	l Child Hea	lth Acti	vities k	by BHS	
Regions and States	% coverage of antenatal care*	% of pregnant women with close birth interval	Avg. frequency of antenatal visits	% of home deliveries by BHS	Proportion of deliveries by BHS at hospitals and delivery rooms	% of those who received ANC 4 times or more**	% coverage of postnatal care	Avg. frequency of visit for postnatal care	% of mothers referred to higher levels (during pregnancy, delivery and postnatal period)
Kachin	82.6	3.5	4.1	36.6	30	87.8	94	4.6	14.6
Kayah	86.4	11.4	4.5	29.7	20.1	70.8	94.7	3.8	33.1
Kayin	90.3	2.7	3.3	26.5	38.6	78.2	97.3	4.1	14.1
Chin	81.1	7.1	3.7	35.3	23.4	65.4	88.8	3.2	13.7
Sagaing	87.7	2.2	4.4	27.8	36.7	81.8	98.5	5	38.5
Tanintharyi	85.7	1.8	3.6	26.1	24.8	50.9	91.4	4	16.5
Bago	89.3	1.6	3.7	33	37	49.4	88.4	3.5	24.5
Magway	84.9	1.7	4.5	31.7	25.5	71.2	95.8	4.1	39.6
Mandalay	88.6	1.1	4.1	30.7	25.2	86.2	94.8	4.5	27.3
Mon	89.8	1.5	4.5	30.1	38	83.9	95.7	5.1	29.2
Rakhine	78.9	3	3.3	33.1	14.1	58.4	80.6	2.9	10.3
Yangon	85.1	0.76	3.9	14	22.7	69.2	88.6	4.1	14.8
Shan (S)	86.5	2.8	3.9	27.3	26	73.4	79.4	3.3	18.8
Shan (N)	77.8	5.3	3.3	17	43.7	52.8	78	2.5	13.6
Shan (E)	73.6	3.9	3.5	21.9	41.6	59.6	80.9	2.8	10
Ayeyarwady	90.2	1.6	3.8	26.7	35.4	80.8	92.8	3.5	27.1
Nay Pyi Taw	88.6	0.83	4.1	24	17.2	94.3	98.3	4	36.6
2016	86.1	2.1	3.9	27.3	29.6	72.3	91	3.9	24
2015	82.4	2.1	3.8	30.3	27.1	70.1	86.3	3.8	21.1
2014	83.6	2.2	3.8	33.1	24.3	67.1	85.2	3.7	18.1

Table (2) Indicators for Maternal and Child Health Activities by BHS

Mater		orn and Child Healt	h Care (201	6)
	Activ	vities by AMWs	Activit	ies by TTBAs
Regions and States	% of home deliveries by AMW	% of mothers referred to higher levels (during pregnancy, delivery and postnatal period)	% of home deliveries by TTBA	% of mothers referred to higher levels (during childbirth)
Kachin	6	35.9	0.82	33.1
Kayah	7.1	7.5	8.8	1.2
Kayin	13	6.7	13.8	3.8
Chin	24.9	3	3.5	0.92
Sagaing	9.8	9.9	2.2	2.7
Tanintharyi	9.2	4.8	3	0.44
Bago	7.2	7.3	7.1	1.8
Magway	10.6	15.7	3.2	11.7
Mandalay	4.9	12.3	2	6.9
Mon	5.4	12.9	1.8	2.3
Rakhine	8.1	13	29.6	0.8
Yangon	2.8	22.5	3.3	3.7
Shan (S)	10.6	7.7	4.8	4.2
Shan (N)	8.2	4.9	1	0.53
Shan (E)	1.2	11.4	0.23	37.5
Ayeyarwady	8.1	8.4	8.6	1.1
Nay Pyi Taw	6.7	5.3	3	2.2
2016	7.6	10.6	6.2	2.5
2015	8.1	9.4	6.3	1.7
2014	8.8	8.4	6.8	2.1

Table (3) Indicators for Maternal and Child Health Activities by AMWs and TTBAs

	Matern	al, New	/born an	d Child H	lealth Ca	re (201	6)	
Regions and States	Total numbers of under 5 children who received treatment from health staff (at clinics/health facilities and during field visits)	% of under 5 children with severe dehydration	% of under-5 children receiving ORT	% of under-5 children receiving ARI treatment	% of under-5 children receiving antibiotics treatment for pneumonia	% of under 5 children who are referred to higher level	% of newborn receiving breastfeeding within one hour of birth	% of newborn care coverage
Kachin	167078	1.2	99.6	43.4	99.3	0.79	91	92.2
Kayah	58278	1.4	100	64.3	99.9	1.6	88.7	87
Kayin	163260	1.5	100	32.7	99.8	0.6	96.5	94.4
Chin	67492	1.4	99.2	51.8	96.6	1.5	92.4	84.5
Sagaing	340725	1.6	98.7	31.8	92.7	1.3	84.5	86.4
Tanintharyi	137052	1.2	99.2	31.9	97.4	0.73	87.1	90.3
Bago	275968	0.39	99.8	24.7	99.2	0.97	76.3	81.2
Magway	239352	1.4	99.6	32.5	98	1.4	88.8	88.5
Mandalay	272036	1.4	97.5	22.5	89.3	1.5	87.7	87.3
Mon	144188	0.24	99.7	27.5	99.9	0.96	89.9	90.2
Rakhine	202980	0.5	99.1	27.5	98	1.2	58.4	64.7
Yangon	215212	0.36	99.7	15.5	98.3	1.1	84.6	84.7
Shan (S)	183981	2.5	99.4	35.4	98.6	0.93	88	85.6
Shan (N)	119777	1.3	97.4	26.4	97.7	0.82	63.9	65
Shan (E)	57868	1.3	97.9	37.1	98.3	0.6	64.3	63.6
Ayeyarwady	371452	1.4	97.5	29.2	96.4	1.1	87.3	86.8
Nay Pyi Taw	64768	3.6	98.7	29.6	92.2	0.74	95	96.8
2016	3081467	1.2	98.9	28.3	96.7	1.1	83.3	84.2
2015	2671596	1.3	98.5	22.7	96.1	1.2	79.2	79.8
2014	2376866	1.6	98.3	20.3	95.4	1.1	78.5	78.3

Table (4) Indicators for Child Health Activities

i		Nutrition E)evelopmei	nt Service	es (2016)		
Regions and States	% of newborns with LBW (Male)	% of newborns with LBW(Female)	% of newborns with LBW (Total)	Infants with beriberi per 1000 LBs	% of pregnant women receiving de- worming drugs	% of post-natal mothers who received iron supplements 3 times or below during pregnancy	% of post-natal mothers who received iron supplements 4 times or more during pregnancy
Kachin	1.8	1.7	1.8	0.36	73.3	7	65.5
Kayah	2.0	2.3	2.1	0.6	77	15.9	64.5
Kayin	3.3	3.3	3.3	0.27	78.1	18.5	69.4
Chin	0.8	1.3	1.0	0.08	68.8	15.9	54.2
Sagaing	2.1	1.8	2.0	0.22	78.7	10.3	70.1
Tanintharyi	1.8	2.0	1.9	0.03	70.9	12.4	62.4
Bago	2.8	2.9	2.9	3.3	80.9	21.4	59.4
Magway	1.8	1.9	1.8	2.2	79.5	6.5	71.9
Mandalay	1.6	1.6	1.6	0.31	74.7	6.6	72
Mon	2.0	1.9	2.0	0.08	81.6	12.7	70.1
Rakhine	0.5	0.6	0.5	0.53	44.6	15.7	37.6
Yangon	1.5	1.3	1.4	0.36	75.4	10.1	62
Shan (S)	1.9	1.8	1.9	0.6	78.6	16.7	63.7
Shan (N)	2.6	2.8	2.7	0.35	67.9	19	44.4
Shan (E)	2.0	2.5	2.2	1.1	60.5	14.8	39.8
Ayeyarwady	2.9	2.9	2.9	4.2	80	8.7	70.2
Nay Pyi Taw	1.1	1.2	1.2	5	76.2	5.3	78.3
2016	2.1	2.1	2.1	1.3	74.3	11.9	63.5
2015	2.0	2.0	2.0	1.3	71.4	11.9	59.1
2014	1.7	1.8	1.8	1.6	70.0	13.0	57.5

Table (5.1) Indicators for Growth Monitoring

ii				Nutr	ition D	evelo	oment	Services	(2016)		
Regions and States	% of pregnant mothers who received B1 supplements	% of post-natal mothers who received B1 supplements	% of breastfeeding mothers who received B1 supplements	% of post-natal mothers who received vitamin A supplements	% of under-5 children with moderate underweight	% of under-5 children with severe underweight	% of under-5 children with underweight	Avg number of under-nourished children receiving Growth Monitoring and Promotion per month	% of under-nourished children receiving Growth Monitoring and Promotion per month	% of villages/ wards with qualified consumption of adequately iodized salt (township review)	% of village/wards with unqualified consumption of adequately iodized salt (township review)
Kachin	57.8	73	71.7	71	2.1	0.16	2.3	343.8	10.3	91	9
Kayah	57.4	80.5	76.4	80.3	4.8	0.48	5.3	154.4	9	98.6	1.4
Kayin	61.4	84	87.1	84	1.8	0.26	2	214.3	5.8	99.2	0.84
Chin	51.6	72.5	69.3	70.7	4.1	0.42	4.5	128.3	4.8	88.6	11.4
Sagaing	66.8	80.3	80.5	79.8	2.8	0.2	3	1521.5	10.4	97.3	2.7
Tanintharyi	58.5	74	75.6	74	1.5	0.09	1.5	178.2	7.4	95.5	4.5
Bago	66.6	79.8	80.6	78.3	0.78	0.07	0.85	271.7	8.1	98	2
Magway	61.7	78.2	77.8	77.9	2.3	0.23	2.5	649.3	7.6	93.9	6.1
Mandalay	62.9	77.7	79.1	78.4	1.1	0.08	1.2	229.9	5.2	98.3	1.7
Mon	65.2	85.2	85.5	83.6	1.3	0.04	1.4	175.2	6.9	98.7	1.3
Rakhine	39	44.2	45.8	52.8	1.5	0.15	1.7	246.8	4.1	70.1	29.9
Yangon	60.4	68.5	70.5	67.4	1.8	0.21	2	541.8	5.1	98.5	1.5
Shan (S)	56.1	76.2	72.5	77.5	2.2	0.15	2.4	495.4	8.2	98.5	1.5
Shan (N)	44	58.9	59.3	60.4	1.5	0.13	1.6	123.6	4.3	93.3	6.7
Shan (E)	43.4	51.8	49.1	50.1	1.7	0.14	1.8	55.8	3.8	76.7	23.3
Ayeyarwady	65.1	79.4	82	77	1.9	0.19	2	746.8	5.8	94	6
Nay Pyi Taw	65.5	80.9	88.4	83.3	0.28	0.03	0.31	67.9	19.6	99.8	0.18
2016	59.7	73.6	74.5	73.7	1.8	0.16	1.9	6144.7	7	93.7	6.3
2015	55.7	67.3	68.2	69.1	2.0	0.2	2.1	6228	6.7	94.0	6.0
2014	55.6	65.9	67.1	67.4	2.5	0.2	2.7	7012	5.9	93.8	6.2

Table (5.2) Indicators for Growth Monitoring

		Scho	ol Health (20	016)		
Regions and States	% of schools examined for school health care	% of schools with the full standard ratio (50:1) of fly-proof latrines	% of schools with access to clean water	% of schools with nutritional promotion activities	% of primary school children receiving school medical examinations	% of schools with health promoting school activities
Kachin	92	89.2	88.1	77.6	95.4	0.13
Kayah	100	93.6	90.3	87.4	98.7	40.9
Kayin	94.6	88.9	88	81.8	92.7	52.8
Chin	93.6	71.7	60.8	7.8	93.9	3.7
Sagaing	98.6	92.1	88.7	55.1	99	27.1
Tanintharyi	96.9	88.8	91.8	69.8	89.2	30.9
Bago	98.8	91.1	93.4	86.5	94.9	67.1
Magway	97.3	92.4	90.8	70.3	97.3	34.5
Mandalay	96.2	90.2	90.1	54	94.1	38.3
Mon	94.8	90.9	93.9	86.9	93.8	79.1
Rakhine	93.1	60	53.3	24	85.1	8.3
Yangon	97.7	94.2	96.5	93.2	94.4	78.8
Shan (S)	96.9	92.1	85.7	70	98.8	48.8
Shan (N)	88.9	79.2	76.4	49	90.5	16.9
Shan (E)	87.4	80.7	72.1	45.4	97.5	17.1
Ayeyarwady	97.6	92.7	92.7	73.3	90.8	34.6
Nay Pyi Taw	95.9	81.3	84.9	70.8	97	57.8
2016	96.2	88	86.5	65.5	93.8	38.7
2015	93.6	85.5	83.2	66.2	91.5	39.1
2014	92.9	83.4	80.4	61.6	92.0	34.8

Table (6) Indicators for School Health Activities

Survemance												
		E	pidemi	ologia	al Sur	veilla	nce ar	d Res	sponse ((2016)		
Regions and	Diarrho	bea	Dysentery			Food poisoning		Enteric Fever		iles	Diphtheria	
States	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)	(3)	(2)*	(3)	(2)*
Kachin	1963	0	347.2	0	24.8	0.2	23.1	0	0	0	0	0
Kayah	3256.8	1	909	0	15.2	0.34	1.7	0	0	0	0	0
Kayin	1643.6	0	256.4	0	28.7	0.19	1.8	0	0	0	0	0
Chin	3394.9	0.97	467.8	0	14.6	1.6	27.7	0.39	0	0	0	0
Sagaing	1101.8	0	307.6	0	10.9	0.09	12	0	4.1	0.92	0	0
Tanintharyi	1433.9	0	427.2	0	52.3	0.27	5.4	0	0	0	0.65	0
Bago	961.3	0	316.5	0.06	15.7	0.06	10.9	0	0.25	0	0.25	0.25
Magway	1090.7	0.02	455	0	8.5	0.02	3	0	0	0	0.33	0
Mandalay	754.7	0	268.4	0	18.2	0.08	5	0	0	0	0	0
Mon	1135.7	0	208.8	0	10.3	0.09	2	0	0	0	0	0
Rakhine	1863	0.03	667.4	0	14.6	0.06	18.2	0	0	0	0	0
Yangon	386.1	0.02	126.3	0	2.6	0.03	0.61	0	0.93	0	1.1	0.19
Shan (S)	1336.8	0.04	329.9	0	16.8	0.47	6.3	0	0	0	0	0
Shan (N)	1222.5	0.2	216.5	0	22.6	0.25	3.9	0	0	0	0	0
Shan (E)	1811.8	0	301.7	0	19	0	5.9	0	0	0	0	0
Ayeyarwady	722.6	0.03	333.6	0.09	14.4	0.06	19.2	0	0.58	0	0.96	0.38
Nay Pyi Taw	915.6	0	248.6	0	7.5	0	0.37	0.09	2.2	0	2.2	2.2
2016	1067.4	0.04	319.2	0.02	14.6	0.12	8.7	0.01	0.66	0.09	0.37	0.14
2015	1109.9	0.3	377.7	0.0	13.3	0.1	8.6	0.0	0.9	0.0	1.2	0.3
2014	1087.3	0.4	388.7	0.0	14.5	0.2	8.9	0.0	1.1	0.0	0.2	0.0

Table (7) Indicators for Morbidity and Mortality of Diseases Under National Surveillance

(1) Number of cases per 100,000 Population

(2) Number of deaths per 100,000 Population

(2)* Number of deaths per 100,000 Population under five years children
 (3) For vaccine preventable diseases and ARI, number of cases per

For vaccine preventable diseases and ARI, number of cases per 100,000 under five years children are mentioned in the table

ii		Ej	pidem	iologic	al Sur	veilla	nce an	d Res	ponse (2	016)		
Regions and States	Whoo cou		Neonatal tetanus		Teta	Tetanus		gitis	ARI		Viral Hepatitis	
	(3)	(2)*	(4)	(4)*	(1)	(2)	(1)	(2)	(3)	(2) *	(1)	(2)
Kachin	0	0	0	0	0.2	0.07	5.9	0.91	6565.2	21.1	25.1	0.72
Kayah	0	0	0	0	1	0.34	0.34	0	11627.7	21.9	48.8	0.34
Kayin	0	0	0	0	0.13	0	11.9	0.25	3479.2	10	49.3	0.19
Chin	0	0	0	0	0.19	0	3.1	0	12304.8	49.9	27.1	0.39
Sagaing	0	0	2.2	2.2	0.38	0	2.4	0.11	5271.1	22.1	13.5	0.07
Tanintharyi	0	0	3.4	0	0.2	0	1.6	0.07	4782.9	5.2	15	0.13
Bago	0	0	2.4	2.4	0.2	0.04	3.3	0.06	2712.4	4.9	19.1	0.1
Magway	0	0	0	0	0.1	0	0.86	0.02	5720.5	16.7	3	0.12
Mandalay	0.21	0	1.9	1.9	0.18	0.03	3.2	0.27	3384.4	5.6	11	0.05
Mon	0	0	0	0	0.27	0.09	1	0.09	1281.9	1.6	21.7	0.13
Rakhine	0.28	0	0	0	0.24	0	0.69	0.09	6926.6	12.7	9.3	0.06
Yangon	0.19	0	3.8	2.9	0.06	0.02	0.18	0.05	2675.7	0.56	1.4	0
Shan (S)	0	0	0	0	0.17	0.04	1.5	0.34	8518.8	27.3	21.9	0.3
Shan (N)	0	0	2.7	0	0	0	1.5	0.1	4018	6.6	21.4	0.15
Shan (E)	0	0	0	0	0	0	0.94	0	5689	1.4	13.5	0
Ayeyarwady	0	0	1.9	1.9	0.35	0.02	4	0.11	4518.2	8.2	18	0.14
Nay Pyi Taw	0	0	0	0	0.09	0.09	4.4	0.19	1493.1	3.2	6.4	0
2016	0.07	0	1.6	1.3	0.2	0.02	2.5	0.14	4553	10.5	14.4	0.12
2015	0.2	0.0	1.9	1.2	0.2	0.0	2.9	0.1	5225.2	8.4	17.5	0.1
2014	0.1	0.0	2.5	1.0	0.3	0.0	2.5	0.1	6245.8	11.1	16.4	0.1

(1) Number of cases per 100,000 Population

(2) Number of deaths per 100,000 Population

(2)* Number of deaths per 100,000 Population under five years children For vaccine preventable diseases and ARI, number of cases per

(3) 100,000 under five years children are mentioned in the table

(4) For Neonatal Tetanus, number of cases per 100,000 live birth are mentioned in the table

(4)* Number of deaths per 100,000 live births

iii				Epid	lemiol	ogica	l Surv	eillan	ce an	d Res	ponse	(201	6)			
Regions and States	Rabies Mala		iria	ria Snake bite poisonous		Sput	TB: Sputum +ve		eated B ents	TB: Sputum - ve		TB: Extra- pulmonary		Anthrax		
	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)
Kachin	0.2	0.2	197.9	0.13	4.1	0.07	75	1.6	18.5	0.33	184.6	2.7	71	0.26	0	(
Kayah	0	0	210.6	0	10.8	0	28.8	0.34	13.5	0.68	66.7	1	2.7	0	0	(
Kayin	0.57	0.57	92.6	0	21.7	0.89	77.5	0.95	13.4	0.19	211.9	0.83	8.8	0	0	(
Chin	0	0	719.6	1.4	8.8	0	23.4	0	5.6	0	90.9	0.58	22.8	0	0	(
Sagaing	0.2	0.2	175.8	0.24	28.4	0.73	36	0.25	7.6	0.15	78	0.73	11.6	0.02	0	(
Tanintharyi	0	0	95.5	0.13	3.6	0	47	0.13	14.9	0.07	123	0.6	32.4	0	0	(
Bago	0.38	0.38	10.8	0.02	26.7	1.4	69.3	0.51	24	0.3	135.2	0.97	16.5	0.12	0	(
Magway	0.21	0.21	6.3	0.02	33.4	2.5	34	0.26	8	0.07	56.5	0.19	16.7	0.05	0	
Mandalay	0.2	0.2	29	0.03	19.9	1	49	0.28	11.3	0.08	36.8	0.15	24	0.07	0	
Mon	0.13	0.13	12.2	0	13.5	1.4	73.6	1.1	16.2	0.27	142.2	1.3	13.5	0.09	0	
Rakhine	0	0	113.4	0.03	2.7	0.03	40.7	0.42	7.7	0	68.3	0.48	23.2	0.15	0	(
Yangon	0.09	0.09	0.83	0.02	10.2	0.54	115.7	1	33.8	0.32	133.2	1.2	25.1	0.17	0	(
Shan (S)	0.21	0.21	115.9	0.09	8.5	0.21	44.2	0.51	8.2	0.13	52.3	0.51	17.9	0.26	0	
Shan (N)	0.25	0.25	75.5	0.05	2.3	0.05	61.2	0.44	14.5	0.05	105.8	0.1	15.2	0.05	0	(
Shan (E)	0	0	257.7	0.27	0.54	0	63.9	0.54	18.3	0	120.7	0.27	12	0.27	0	(
Ayeyarwady	0.22	0.22	57.4	0	21.4	3.4	64.5	0.36	17.9	0.09	58.1	0.22	13.2	0.02	0	
Nay Pyi Taw	0.28	0.28	37.8	0.19	15.2	0.65	44.6	0.47	14.6	0.09	69.2	0.28	25.8	0.37	0	
2016	0.19	0.19	72.3	0.07	17.5	1.2	61.1	0.53	16.1	0.16	93.1	0.65	19.9	0.1	0	(
2015	0.2	0.2	154.2	0.1	18.1	1.0	61.4	0.4	14.7	0.2	97.3	0.5	23.6	0.1	0.0	0.
2014	0.3	0.3	253.3	0.2	15.8	1.0	61.5	0.4	14.6	0.2	91.8	0.6	24.5	0.1	0.0	0.

(1) Number of cases per 100,000 Population

(2) Number of deaths per 100,000 Population

Expanded Programme on Immunization (2016)															
Regions and States	BCG (%) Polio Coverage (⁴		%)	%) Pentavalent coverage (%)*		PCV coverage (%)*		Measles Coverage (%)		TT Coverage (%)					
	ТВ	1 st Dose	2 nd Dose	IPV	3 rd Dose	1 st Dose	2 nd Dose	3 rd Dose	1 st Dose	2 nd Dose	3 rd Dose	9 Months	18 Months	1 st Dose	2 nd Dose
Kachin	83.2	82.5	80.9	70.2	78.9	83.3	81.5	79.2	39.8	25	12.8	78	74.5	75.4	73.4
Kayah	94.3	93.4	94.3	74.4	91.3	93.4	94.2	91.5	43.8	28.7	14.7	91.5	85.7	81.3	77.7
Kayin	89	87.1	84.8	79.6	84.3	89.1	86.9	84.2	42.2	26.5	13.1	86.9	83.3	84.7	81.5
Chin	86.4	86	85.8	61.9	86.1	85.8	85.5	85.6	40	31.1	15.6	86.4	85.1	74.5	73.7
Sagaing	92.3	91.9	90.9	65.4	90.5	91.9	91.1	90.8	43.6	27.7	13.3	89.5	87.3	82.5	81.2
Tanintharyi	90.2	90.5	89.4	67.7	87.5	90.1	89.7	86.5	38.5	27.2	13.7	87.8	84.2	84	82.1
Bago	94.6	94.6	92.1	66.3	89.8	94.4	92.3	90	45	28.6	14.4	91.9	88.9	87.6	85
Magway	90.8	91.1	90.9	48.8	90	91.4	90.2	89.8	41.7	28.7	14.8	88.4	84.3	83.5	82.1
Mandalay	92.7	92.4	90.9	64.1	90.2	92.1	90.9	89.9	43.7	29.1	14	89.6	86.1	84.2	83.9
Mon	95.1	94.9	93.7	85.1	92.8	94.9	93.7	92.9	46.4	30.1	14.8	93.2	91.4	86.3	84.9
Rakhine	87.2	87.2	81.6	49	77.9	87.4	81.9	77.3	36	19.8	9.4	77	71.2	83.9	74.7
Yangon	95.4	95.8	93.3	74.4	91.2	95.2	92.5	91.2	44.9	28.7	13.8	91.8	89.3	88	86.3
Shan (S)	91.5	90.4	89.3	58.2	85.1	91.6	88.8	86.3	43.4	28.2	13.8	88	83.6	85.4	82.1
Shan (N)	88.7	87.6	81.1	71	75.4	88.3	81.5	75.8	43.3	25.3	11.9	76.9	67.2	76.6	69.1
Shan (E)	70.2	71.7	69.8	34.6	65.4	71.2	69.8	66.2	33.4	21.7	12.1	65	58.9	64.9	61.8
Ayeyarwady	93.3	93	91.5	19.6	90.1	91.9	90.6	89.5	32.2	24.8	13.4	90.9	86.8	85	83.2
Nay Pyi Taw	91.8	92.9	91.8	80.2	89.3	92.6	92.1	89.9	44.5	28.7	14.3	93.4	84.9	82.3	80.1
2016	91.5	91.3	89.2	59.9	87.3	91.2	89.1	87.3	41.4	27	13.4	87.7	83.8	83.8	81.2
2015	91.9	92.4	90.1	-	87.4	92.4	90.1	87.5	-	-	-	81.1	76.8	80.3	78.0
2014	89.8	89.7	87.7	-	85.4	89.7	87.5	85.3	-	-	-	85.3	79.9	80.4	78.1

Table (8) Indicators for Immunization Coverage

*PCV was started at June 2016.

Zoonotic Diseases Control (2016)							
Regions and States	Number of dog bite patients	Number of rabid dog bite patients	Number of persons received for rabies vaccines	Number of leptospirosis patients			
Kachin	2258	55	1400				
Kayah	149	3	174				
Kayin	1496	7	1202				
Chin	88	1	46				
Sagaing	3876	110	1785				
Tanintharyi	1095	9	622				
Bago	9987	42	4810				
Magway	3099	108	689				
Mandalay	8978	184	6709				
Mon	2501	58	2284				
Rakhine	1207	18	718				
Yangon	13039	19	11507				
Shan (S)	1828	55	1490	4			
Shan (N)	1010	23	389				
Shan (E)	435	2	203	2			
Ayeyarwady	3954	31	1195	1			
Nay Pyi Taw	1296	4	860	7			
2016	56296	729	36083	14			
2015	56615	448	38170	6			
2014	53724	817	31686	15			

Table (9) Indicators for Zoonotic Diseases

Tuberculosis Control (2014-2016)*							
Regions and States	New Sputum smear- positive pulmonary TB patients: case detection rate (%) (2016)	New Sputum smear- positive pulmonary TB patients: case detection rate (%) (2015)	New Sputum smear- positive pulmonary TB patients: case detection rate (%) (2014)				
Kachin	63.9	74.8	81.6				
Kayah	35.8	36.0	45.1				
Kayin	85.8	64.5	56.9				
Chin	8.2	11.5	9.0				
Sagaing	27.4	35.1	33.7				
Tanintharyi	25.1	24.1	76.3				
Bago	67.1	61.7	49.8				
Magway	33.6	32.3	35.1				
Mandalay	31.2	24.3	29.1				
Mon	66.2	49.5	71.8				
Rakhine	22.5	30.8	17.0				
Yangon	74	58.8	66.6				
Shan (S)	27.5	23.5	39.5				
Shan (N)	36.1	28.1	32.3				
Shan (E)	41.2	41.5	43.5				
Ayeyarwady	49.7	55.9	54.0				
Nay Pyi Taw	19	32.6	24.3				
Union	51.5	44.2	47.1				

Table (10) Indicator for Tuberculosis Control Activity

*Basic Health Staff Reporting only

Leprosy Elimination Activities (2016)							
Regions and States	New case detection rate (per 100000 pop)	% of new under-15 patients	% of new female patients	% of new patients with disability grade 2	No. of those who released from treatment after completing the standard therapy (RFT case)	Number of defaulters	Leprosy Prevalence Rate per 10000 pop
Kachin	0.59	0	22.2	0	5	0	0.03
Kayah	2	0	33.3	33.3	5	0	0.17
Kayin	6.3	5.1	10.1	4	46	0	0.15
Chin	0.19	0	100	100	2	0	0.00
Sagaing	6.3	5.2	42.2	11.3	260	49	0.54
Tanintharyi	0.81	16.7	33.3	16.7	13	0	0.08
Bago	5.8	6.1	28.8	12.5	228	13	0.53
Magway	7	5.7	30.4	7.4	175	9	0.51
Mandalay	3.3	4.5	37.9	8.1	166	2	0.26
Mon	0.84	5.3	21.1	10.5	12	0	0.06
Rakhine	0.09	0	66.7	0	7	0	0.01
Yangon	0.97	7.8	39.1	15.6	65	1	0.12
Shan (S)	6.1	3.5	36.4	3.5	110	2	0.51
Shan (N)	2.2	0	29.5	9.1	41	1	0.24
Shan (E)	0.4	0	0	0	2	0	0.01
Ayeyarwady	4	4	22.9	9.5	208	2	0.37
Nay Pyi Taw	3.2	8.8	5.9	5.9	12	1	0.24
2016	3.6	5.1	31.3	9.3	1357	80	0.30
2015	3.5	5.1	31.4	7.9	1550	29	0.3
2014	3.9	5.3	31.1	8.8	1603	41	0.4

Table (11) Indicators for Leprosy Elimination Activities

AIDS/ STI Prevention and Control (2016)							
Regions and States	VDRL test positive rate in primigravida	Genital ulcer detection rate	Genital discharge rate (male)	Percentage of STI among outpatients			
Kachin	0.15	0.91	0.55	0.004			
Kayah	0.08	0.34	5	0.006			
Kayin	0.44	1.4	2.3	0.021			
Chin	0.29	0.78	2.5	0.017			
Sagaing	0.15	0.38	2.7	0.091			
Tanintharyi	0.1	9.9	6.9	0.073			
Bago	0.34	1.2	9	0.052			
Magway	0.06	1	0.85	0.007			
Mandalay	0.61	2.5	2	0.024			
Mon	0	0.75	0.62	0.004			
Rakhine	0	2.6	5	0.015			
Yangon	0.4	0.91	1.3	0.048			
Shan (S)	1.3	0.47	0.49	0.014			
Shan (N)	0.61	1.4	2	0.013			
Shan (E)	0	15.2	13.7	0.09			
Ayeyarwady	0.58	2.1	4.4	0.029			
Nay Pyi Taw	0.11	8.3	0.26	0.035			
2016	0.33	2	3.2	0.036			
2015	0.6	2.1	3.1	0.04			
2014	0.5	2.4	5.2	0.05			

Table (12) Indicators for Sexually Transmitted Infection Control Activities

Institutional based Malaria (2016)							
Regions and States	% of malaria among outpatients	% of hospitalized patients with malaria	% of in-patients deaths among those with malaria (Case Fatality Rate)				
Kachin	0.47	0.36	0.88				
Kayah	0.44	0.37	0				
Kayin	0.21	0.43	0				
Chin	1.6	0.69	2.9				
Sagaing	0.54	0.56	0.36				
Tanintharyi	0.24	0.31	0.4				
Bago	0.03	0.06	0.67				
Magway	0.02	0.02	0				
Mandalay	0.12	0.12	0.24				
Mon	0.03	0.08	0				
Rakhine	0.38	0.24	0.46				
Yangon	0	0	0				
Shan (S)	0.32	0.47	0.19				
Shan (N)	0.27	0.3	0.34				
Shan (E)	0.77	0.43	0.78				
Ayeyarwady	0.19	0.17	1.9				
Nay Pyi Taw	0.08	0.13	0				
2016	0.24	0.19	0.56				
2015	0.5	0.4	0.6				
2014	0.9	0.7	0.7				

Table (13) Indicators for Malaria
Trachoma Control and Prevention of Blindness (2016)										
Regions and States	Morbidity rate of new eye diseases (per 100,000 population)	Percent of infectious trachoma (under-10 year population)	Percent of blindness or loss of eyesight (general population)	Morbidity rate of ophthalmia neonatorum in newborn infants (per 1000 livebirths)						
Kachin	201.8	0.001	0.000	0.097						
Kayah	225.8	0.000	0.014	0.302						
Kayin	175.2	0.001	0.001	0.030						
Chin	153.1	0.002	0.003	0.000						
Sagaing	426.2	0.006	0.004	0.066						
Tanintharyi	219	0.001	0.001	0.000						
Bago	274.8	0.000	0.016	0.348						
Magway	107.4	0.001	0.003	0.015						
Mandalay	170.8	0.001	0.010	0.154						
Mon	126.3	0.000	0.001	0.079						
Rakhine	67.2	0.001	0.001	0.047						
Yangon	44.1	0.000	0.000	0.019						
Shan (S)	244.3	0.006	0.003	0.379						
Shan (N)	267.3	0.001	0.002	0.027						
Shan (E)	186.4	0.009	0.000	0.291						
Ayeyarwady	117.2	0.006	0.003	0.029						
Nay Pyi Taw	160.5	0.000	0.002	0.000						
2016	181.5	0.002	0.004	0.103						
2015	197.9	0.0066	0.0055	0.13						
2014	454.9	0.0055	0.0065	0.07						

Table (14) Indicators for Prevention of Blindness

Detection of Carc	Detection of Cardiovascular Diseases and risk behaviors (2016)									
Regions and States	Proportion of hypertension per 1000 above 15 years population	Prevalence of current smoker per 1000 above 15 years population								
Kachin	16.7	194.2								
Kayah	17	118.8								
Kayin	13.6	211.6								
Chin	9.1	211.5								
Sagaing	13.3	176.8								
Tanintharyi	16.3	200.8								
Bago	17	180.5								
Magway	11.4	152.4								
Mandalay	10.8	129.5								
Mon	14.3	164.1								
Rakhine	11.1	282.9								
Yangon	9.7	124.5								
Shan (S)	20	207.2								
Shan (N)	14.8	217.9								
Shan (E)	23.4	211.7								
Ayeyarwady	14.3	186.6								
Nay Pyi Taw	15.5	152.5								
2016	13.5	174.6								
2015	11.6	163.6								
2014	10.6	161.6								

Table (15) Indicators for Prevention of Cardiovascular Disease

i			Preve	ntion of Acc	ident and I	njury (20)16)		
Regions an States	d	Road Traffic Accident		Farm i	njuries	Poiso	ning	Fall f hei	
States		(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)
Kachin		7.2	10.4	3.7	4.8	0.23	1.2	0.62	2.7
Kayah		7	12.9	7	0.68	0.13	2.4	1	3.7
Kayin		6.5	15.6	2.3	1	0.14	1.6	1.4	2.5
Chin		3.5	4.1	4	1.4	0.18	0.19	1.8	5.8
Sagaing		3.6	9.4	2.7	1.1	0.09	0.31	0.62	1.6
Tanintharyi		5.3	12.9	2.9	0.81	0.08	0.34	0.72	1.5
Bago		3.1	13.7	1.4	0.99	0.12	1.2	0.6	1.8
Magway		2.3	8.1	2.2	0.48	0.06	0.26	0.61	2.1
Mandalay		3.4	10	1.3	0.52	0.12	0.68	0.55	1.7
Mon		5	16.2	1.3	0.44	0.07	0.4	0.65	1.9
Rakhine		1.3	2.9	1.5	0.33	0.07	0.48	0.56	0.6
Yangon		1.5	4.8	0.4	0.21	0.06	0.35	0.27	0.42
Shan (S)		4	7.9	2.7	0.69	0.18	1.8	0.8	1.3
Shan (N)		5.3	8.7	2	1.2	0.16	1.6	0.6	1.1
Shan (E)		4.2	6.1	3.5	0.54	0.13	0.81	0.5	0.54
Ayeyarwady		2.1	8.9	1.4	0.66	0.09	1	0.38	1.3
Nay Pyi Taw		3.5	11.5	3	0.37	0.06	0.09	0.99	3
2016	(3)	3.2	9.2	1.8	0.78	0.1	0.76	0.59	1.5
2010	(4)	164583	4680	93038	399	5155	384	29786	774
2015	(3)	3.0	8.4	1.8	0.8	0.1	0.7	0.6	1.5
2015	(4)	152384	4175	92394	384	4315	338	28663	743
2014	(3)	2.8	8.1	1.8	0.7	0.1	0.8	0.5	1.7
2014	(4)	140098	3985	88596	348	4083	375	26797	828

Table (16) Indicators for Prevention of Accidents and Injuries

(1) Morbidity rate per 1000 Population

(2) Mortality rate per 100,000 Population

(3) Rate for Union

(4) Actual number for Union

ii			Pre	evention	of Accid	ent and In	jury (2016	5)		
Regions an	d	Burns/	Scalds	Drov	vning	Suic	cide	Ass	Assault	
States		(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)	
Kachin		0.72	0.59	0.08	6.6	0.07	3.7	0.88	1.6	
Kayah		1.1	1.4	0.09	7.1	0.04	3	0.33	0.34	
Kayin		0.65	0.51	0.08	7.2	0.11	6.9	1.3	1.5	
Chin		0.98	1.4	0.06	3.7	0.07	2.5	0.67	1.2	
Sagaing		0.58	0.42	0.07	4.2	0.06	2.5	0.75	1.4	
Tanintharyi		0.59	0.67	0.11	6.8	0.08	5.3	0.84	2.1	
Bago		0.49	0.46	0.1	7.9	0.09	3.7	1.2	2.2	
Magway		0.4	0.43	0.04	3.2	0.04	2.4	0.64	1.3	
Mandalay		0.54	0.4	0.05	3.3	0.06	2.1	1.2	1.2	
Mon		0.4	0.8	0.1	8.4	0.06	3.9	0.87	1.9	
Rakhine		0.56	0.48	0.1	6.3	0.05	2.5	0.62	2	
Yangon		0.22	0.15	0.04	3	0.03	0.98	1.2	0.91	
Shan (S)		0.65	0.69	0.04	2.4	0.08	3.9	0.41	1.2	
Shan (N)		0.54	0.35	0.04	2.5	0.08	3.3	0.53	1.2	
Shan (E)		0.31	0.67	0.02	0.94	0.07	3.2	0.41	1.3	
Ayeyarwady		0.39	0.47	0.11	8.9	0.04	2	0.77	1.7	
Nay Pyi Taw		0.54	1.6	0.05	3.6	0.05	3.5	1.1	1.8	
2016	(3)	0.48	0.48	0.07	5.2	0.06	2.8	0.89	1.5	
2010	(4)	24555	245	3551	2635	2919	1406	45064	759	
2015	(3)	0.5	0.5	0.1	5.5	0.1	2.4	0.9	1.5	
2015	(4)	24345	238	3795	2765	2706	1224	43639	733	
2014	(3)	0.5	0.5	0.1	5.1	0.0	2.5	0.9	1.5	
2014	(4)	24239	239	3350	2502	2423	1212	43039	758	

(1) Morbidity rate per 1000 Population

(2) Mortality rate per 100,000 Population

(3) Rate for Union

(4) Actual number for Union

		Ment	tal Healt <mark>h (</mark> 2	2016)		
Regions and			Per 100	0 Population		
States	Psychosis	Depression	Anxiety Neurosis	Alcoholic Dependence	Epilepsy	Mental retardation
Kachin	0.063	0.014	0.048	0.48	0.035	0.046
Kayah	0.234	0.061	0.01	2.867	0.098	0.447
Kayin	0.098	0.086	0.131	0.878	0.06	0.083
Chin	0.312	0.088	0.201	1.203	0.074	0.249
Sagaing	0.07	0.021	0.06	1.018	0.036	0.063
Tanintharyi	0.162	0.093	0.068	1.776	0.071	0.128
Bago	0.075	0.046	0.08	1.312	0.031	0.066
Magway	0.08	0.047	0.05	0.833	0.04	0.076
Mandalay	0.162	0.108	0.044	1.566	0.019	0.035
Mon	0.064	0.032	0.023	0.423	0.027	0.04
Rakhine	0.146	0.055	0.195	1.729	0.1	0.067
Yangon	0.046	0.078	0.07	0.898	0.066	0.045
Shan (S)	0.113	0.114	0.194	4.748	0.079	0.166
Shan (N)	0.037	0.005	0.007	0.194	0.031	0.031
Shan (E)	0.038	0.034	0.028	0.203	0.059	0.012
Ayeyarwady	0.05	0.031	0.05	0.574	0.028	0.096
Nay Pyi Taw	0.039	0.022	0.054	1.699	0.046	0.036
2016	0.087	0.056	0.073	1.201	0.045	0.07
2015	0.09	0.05	0.08	0.90	0.05	0.06
2014	0.07	0.04	0.06	0.84	0.04	0.06

Table (17) Indicators for Mental Health

Prev	ention and Control of I	Hearing Impairment (2	.016)
Regions and States	Morbidity rate of congenital hearing defect (per 1000 livebirths)	Morbidity rate of chronic ear discharges (per 1000 population)	Morbidity rate of hearing impairment (per 1000 population)
Kachin	0.10	0.03	0.04
Kayah	0.60	0.21	0.32
Kayin	0.00	0.01	0.01
Chin	2.10	0.08	0.32
Sagaing	0.07	0.01	0.04
Tanintharyi	0.41	0.01	0.06
Bago	0.06	0.01	0.03
Magway	0.12	0.01	0.09
Mandalay	0.03	0.02	0.02
Mon	0.03	0.01	0.01
Rakhine	0.20	0.03	0.05
Yangon	0.02	0.01	0.01
Shan (S)	0.87	0.10	0.11
Shan (N)	0.08	0.01	0.01
Shan (E)	2.20	0.01	0.07
Ayeyarwady	0.01	0.01	0.07
Nay Pyi Taw	0.00	0.01	0.04
2016	0.10	0.03	0.04
2015	0.11	0.02	0.05
2014	0.17	0.02	0.05

Table (18) Indicators for Prevention and Control of Hearing Impairment

	Environn	nental Sanit	ation (2016)
Regions and States	Proportion improved	Proportion of Population access to improved Drinking Water(%)		
	Union	Urban	Rural	Union
Kachin	76.4	84.4	74.3	89.9
Kayah	70.1	81.5	66.6	71.7
Kayin	56.1	70.9	53.8	84.6
Chin	69.5	75.5	68.3	78.4
Sagaing	67.5	75.8	66.2	78.8
Tanintharyi	60.1	62.2	59.7	81.8
Bago	58.6	62.3	58	84
Magway	62.6	67.8	62	91
Mandalay	65.2	69.9	63.5	88.3
Mon	62	67.2	60.5	85.3
Rakhine	33.7	44.6	32.1	56.6
Yangon	67.3	67.2	67.9	91.1
Shan (S)	59	77.4	54.1	73.5
Shan (N)	61.4	56	65.2	78
Shan (E)	67.5	81	64	66.8
Ayeyarwady	54.7	66.2	53.4	70.5
Nay Pyi Taw	70.3	91.4	63.6	96.6
2016*	62.1	69	60.1	81.3
2015*	59.3	65.9	57.1	79.8
2014*	59.2	66.8	56.7	80.1

Table (19) Indicators for Environmental Sanitation

*Population access to improved sanitary latrine was calculated as number of latrine multiplied by average number of household member from 2014 census.

Health Education Services (2016)											
	Advocacy Meeting	Exhibitions and Contests	Public Talks	Production/ Distribution of IEC materials							
Regions and States	Average number of monthly health education activities in the township	Average number of monthly health education activities in the township	Average number of monthly health education activities in the township	Average number of monthly health education activities in the township							
Kachin	27.3	0.22	41.6	13.6							
Kayah	18.1	0.9	29.4	6.7							
Kayin	87.8	1	62.7	23.7							
Chin	41.3	1.2	59.7	6.9							
Sagaing	51.9	0.97	118.7	10.5							
Tanintharyi	96.1	0.18	94	47.7							
Bago	64.3	0.45	125.6	28.4							
Magway	64.5	1.1	88.8	13.1							
Mandalay	80	0.61	92.2	19.5							
Mon	81.6	0.17	85.3	23.5							
Rakhine	79.9	0.45	42.2	13.4							
Yangon	33	0.23	41.1	19.2							
Shan (S)	44.7	0.28	97.9	21.2							
Shan (N)	24.3	0.1	39.6	8.2							
Shan (E)	14.3	0.08	32.6	7.9							
Ayeyarwady	92.1	1.6	118.5	24.1							
Nay Pyi Taw	54.1	1.1	121.5	25.1							
2016	55.4	0.62	79.9	18							
2015	53	0.5	67	15							
2014	40	0.4	50	9							

Table (20) Indicators for Health Education

Annex 2 Health Service Monitoring Indicators by Regions/States (2014-2015)

Table(1) Indicators for Primary Medical Care and Referral of Patients (2014-2015)

	Prima	ary Medical	Care & Ref	ferral Project	t (2014-	2015)	
		Activities	of Basic He				f Community Worker
Regions and States	% of new patients at the clinic	Avg. number of visits by each patient	Avg. number of field visits to villages/wards	Total number of attendances during field visits	% of patients referred to higher levels	Avg. number of joint activities with BHS (Freq:)	Avg. number of activities carried out by CHW
Kachin	32.1	1.5	20.4	224064	0.7	6.8	4.7
Kayah	45.6	1.9	21.5	76344	0.6	4.4	2.1
Kayin	29.3	1.7	15.0	220401	0.7	9.7	8.3
Chin	40.0	1.8	11.9	100519	0.5	4.7	3.2
Sagaing	27.9	1.9	24.9	1142621	0.7	11.3	8.9
Tanintharyi	27.9	1.5	21.4	265973	0.5	16.3	14.9
Bago	24.2	1.8	23.4	1041926	1.0	11.2	7.4
Magway	22.1	1.8	27.9	1003935	0.7	12.7	8.8
Mandalay	19.7	1.8	37.9	1253278	0.9	14.0	12.1
Mon	26.3	1.7	38.4	320523	0.9	19.3	16.4
Rakhine	33.0	1.4	23.6	630833	0.6	14.7	10.6
Yangon	18.9	1.9	51.8	1024915	0.7	10.2	9.1
Shan (S)	26.5	1.7	17.6	593919	0.6	6.6	5.4
Shan (N)	19.8	1.5	14.8	258450	0.6	4.0	3.7
Shan (E)	26.2	1.5	7.8	115420	0.5	2.1	1.8
Ayeyarwady	22.3	1.7	20.5	1340121	1.0	12.6	9.2
Nay Pyi Taw	22.3	1.7	44.3	243340	1.4	19.9	16.4
2014	24.3	1.7	24.2	9,856,582	0.8	11.6	8.9
Kachin	32.1	1.6	22.3	277789	0.7	6.6	5.2
Kayah	48.6	1.9	20.5	89137	0.9	4.7	2.6
Kayin	30.6	1.7	15.3	206515	0.8	13.7	11.8
Chin	38.7	1.8	13.2	86176	0.6	5.5	4.6
Sagaing	28.6	1.8	30.2	1258401	0.8	14.9	11.2
Tanintharyi	31.3	1.5	22.8	289428	0.5	17.0	14.9
Bago	26.3	1.8	27.4	1158156	1.1	13.7	9.2
Magway	24.5	1.8	32.4	1160897	0.8	14.7	10.6
Mandalay	20.3	1.8	38.4	1258902	0.8	14.5	13.1
Mon	24.9	1.7	42.1	334850	1.3	20.3	17.0
Rakhine	33.9	1.4	25.4	661148	0.6	25.8	17.5
Yangon	20.2	1.9	53.9	1099607	0.7	17.0	15.3
Shan (S)	26.4	1.7	18.2	592410	0.6	7.8	6.5
Shan (N)	20.7	1.5	15.8	311115	0.7	5.6	4.7
Shan (E)	27.0	1.6	7.6	117968	0.4	3.9	2.8
Ayeyarwady	23.4	1.7	20.9	1370058	1.0	14.2	10.3
Nay Pyi Taw	28.0	1.7	50.6	310882	1.2	20.7	16.1
2015	25.7	1.7	26.2	10,583,439	0.8	14.0	10.7

	Maternal and Child Health Activities by BHS										
Regions and States	% coverage of antenatal care	% of pregnant women with close birth interval	Avg. frequency of antenatal visits	% of home deliveries by BHS	Proportion of deliveries by BHS at hospitals and delivery rooms	% of those who received ANC 4 times or more	% coverage of postnatal care	Avg. frequency of visit for postnatal care	∞ or motners referred to higher levels (during pregnancy, delivery and postnatal period)		
Kachin	82.3	3.6	3.7	42.3	25.2	74.8	90.8	4.3	11.2		
Kayah	83.7	8.1	4.1	41.8	24.3	64.7	94.6	3.4	18.2		
Kayin	88.5	2.6	3.4	33.2	31.0	71.9	90.8	3.7	12.0		
Chin	77.9	8.2	3.8	39.4	11.6	61.3	75.7	2.8	9.3		
Sagaing	84.2	2.4	4.4	35.5	31.0	77.8	94.3	4.8	30.5		
Tanintharyi	86.4	1.9	3.8	34.9	22.9	80.9	90.3	4.5	12.3		
Bago	84.7	1.3	3.5	36.9	31.3	40.2	79.7	3.2	19.3		
Magway	78.9	1.3	4.2	40.4	14.1	65.2	88.7	3.9	24.9		
Mandalay	88.5	1.0	4.0	36.3	22.6	80.0	92.1	4.4	20.4		
Mon	88.2	1.7	4.2	38.3	30.9	75.1	89.5	4.8	20.7		
Rakhine	75.7	4.3	3.3	34.6	7.8	56.6	75.1	2.6	9.7		
Yangon	83.1	0.7	3.6	18.2	19.4	64.6	78.1	3.6	11.9		
Shan (S)	86.2	3.2	3.7	31.1	18.8	55.3	75.8	3.1	15.0		
Shan (N)	74.5	5.5	3.3	22.3	42.1	55.4	70.5	2.6	11.6		
Shan (E)	66.1	4.8	3.4	27.5	44.3	61.0	82.0	3.1	8.9		
Ayeyarwady	87.2	1.7	3.6	32.9	28.3	74.4	87.9	3.4	19.9		
Nay Pyi Taw	87.4	1.1	3.8	33.9	16.9	81.9	93.1	3.5	23.3		
2014	83.6	2.2	3.8	33.1	24.3	67.1	85.2	3.7	18.1		
Kachin	80.5	3.3	3.9	40.2	27.9	77.0	92.6	4.5	14.8		
Kayah	82.0	10.5	4.3	32.2	10.8	62.5	88.7	3.2	26.8		
Kayin	87.0	2.7	3.4	29.4	36.8	76.5	92.3	3.9	14.0		
Chin	77.0	7.3	3.7	33.0	19.9	59.5	79.7	2.8	11.9		
Sagaing	84.0	2.6	4.5	33.1	35.9	77.7	91.4	4.9	34.7		
Tanintharyi	85.1	2.0	3.5	31.9	24.6	79.7	94.4	4.5	13.2		
Bago	84.1	1.4	3.5	35.5	35.0	45.1	83.1	3.4	21.6		
Magway	79.4	1.7	4.4	36.1	18.9	67.3	90.4	4.0	32.5		
Mandalay	87.5	1.0	4.1	33.7	24.1	83.3	91.2	4.3	24.1		
Mon	84.9	1.7	4.1	31.5	33.3	77.3	90.9	4.7	23.9		
Rakhine	76.3	3.5	3.3	34.0	10.4	58.9	77.3	2.8	10.2		
Yangon	81.5	0.8	3.8	15.5	22.1	69.9	82.0	3.8	13.7		
Shan (S)	84.6	2.8	3.8	28.9	24.0	63.8	73.1	3.3	15.9		
Shan (N)	72.8	6.2	3.3	21.1	43.2	54.5	72.2	2.5	11.6		
Shan (E)	70.9	3.8	3.4	24.0	36.4	56.9	78.1	2.8	8.5		
Ayeyarwady	83.7	1.3	3.7	30.0	30.2	77.6	89.5	3.4	22.7		
Nay Pyi Taw	84.4	1.1	4.0	30.5	15.8	88.4	94.6	3.9	33.0		
2015	82.4	2.1	3.8	30.3	27.1	70.1	86.3	3.8	21.1		

Table (2) Indicators for Maternal and Child Health Activities by BHS(2014-2015)

Maternal, N	Vewboi			th Care	2014-20		rnal, New	/born and	l Child	
		(2014)	0			Health Care (2015) Activities by Activities by				
		vities by VIWs		ities by BAs			Ws		TTBAs	
Regions and States	% of home deliveries by AMW	% of mothers referred to higher levels (during pregnancy, delivery and postnatal period)	% of home deliveries by TTBA	% of mothers referred to higher levels (during childbirth)		% of home deliveries by AMW	% of mothers referred to higher levels (during pregnancy, delivery and postnatal period)	% of home deliveries by TTBA	% of mothers referred to higher levels (during childbirth)	
Kachin	5.8	30.9	3.1	26.0		6.6	33.8	2.0	12.3	
Kayah	10.5	5.4	11.6	0.6		6.8	6.2	7.9	14.5	
Kayin	13.1	6.6	14.8	2.0		13.2	6.2	14.3	0.8	
Chin	16.1	2.3	4.1	0.0		19.2	3.0	3.1	1.9	
Sagaing	10.9	9.6	3.1	2.5		10.2	9.0	2.2	3.5	
Tanintharyi	13.0	4.4	3.9	1.1		10.7	4.0	3.2	0.8	
Bago	8.5	5.6	9.4	1.4		7.8	6.2	8.3	1.4	
Magway	16.2	7.5	4.4	1.8		13.5	9.5	3.7	3.0	
Mandalay	6.9	9.2	3.1	2.7		6.0	11.3	2.5	2.6	
Mon	4.9	13.8	2.7	2.9		5.3	14.4	2.0	3.1	
Rakhine	6.8	5.4	23.9	1.3		6.8	4.4	27.4	0.8	
Yangon	3.2	17.6	4.2	1.9		3.0	22.4	3.5	2.4	
Shan (S)	11.5	6.7	3.6	2.4		11.2	9.0	3.5	0.9	
Shan (N)	7.3	8.3	2.5	2.3		7.4	6.1	2.9	0.8	
Shan (E)	0.8	5.7	0.2	9.5		0.9	49.4	0.1	10.0	
Ayeyarwady	10.6	7.7	10.5	1.6		9.0	8.8	8.8	1.7	
Nay Pyi Taw	6.3	6.3	1.7	0.7		6.6	6.4	2.9	1.5	
2014	8.8	8.4	6.8	2.1	2015	8.1	9.4	6.3	1.7	

Table (3) Indicators for Maternal and Child Health Activities byAMWs and TTBAs (2014-2015)

	Maternal,	Newbo	rn and C	hild Hea	Ith Care	(2014-2	015)	
Regions and States	Total numbers of under 5 children who received treatment from health staff (at clinics/health facilities and during field visits)	% of under 5 children with severe dehydration	% of under-5 children receiving ORT	% of under-5 children receiving ARI treatment	% of under-5 children receiving antibiotics treatment for pneumonia	% of under 5 children who are referred to higher level	% of newborn receiving breastfeeding within one hour of birth	% of newborn care coverage
Kachin	108413	2.0	98.9	25.2	92.7	0.9	84.7	84.5
Kayah	41797	1.8	99.5	47.1	91.6	1.0	86.5	80.7
Kayin	120453	2.5	99.8	25.4	98.2	0.6	91.6	91.9
Chin	58610	1.3	99.2	42.4	94.5	1.1	82.0	71.7
Sagaing	308510	2.8	98.2	25.1	95.2	1.2	79.4	82.7
Tanintharyi	98877	0.6	99.5	25.7	98.3	0.8	93.8	92.3
Bago	201810	0.6	99.7	15.0	98.9	1.0	72.5	76.4
Magway	177096	0.6	99.8	21.2	97.9	0.9	81.6	83.0
Mandalay	236337	1.2	96.3	17.5	94.9	1.3	89.0	86.7
Mon	125619	1.0	97.4	21.6	95.7	1.1	90.4	90.3
Rakhine	173802	0.6	97.5	26.1	97.5	1.1	56.9	58.5
Yangon	174643	0.8	99.0	12.1	96.8	1.3	71.7	69.2
Shan (S)	114635	2.2	99.3	20.5	96.7	1.1	76.0	73.0
Shan (N)	84344	1.9	98.3	14.2	95.2	0.7	71.3	68.7
Shan (E)	33998	1.1	93.8	24.2	93.4	0.8	64.8	64.9
Ayeyarwady	274661	3.1	97.6	20.3	89.3	1.3	77.7	77.7
Nay Pyi Taw	43261	0.3	99.0	17.6	93.6	0.7	90.6	91.3
2014	2376866	1.6	98.3	20.3	95.4	1.1	78.5	78.3
Kachin	135452	1.0	98.1	33.3	98.6	0.9	80.6	82.5
Kayah	57434	1.9	99.8	66.2	96.9	1.6	81.8	77.2
Kayin	126842	2.3	99.5	27.8	99.7	0.6	92.4	92.4
Chin	60715	1.0	99.2	42.2	95.8	1.2	86.5	80.5
Sagaing	343080	1.5	97.7	25.9	95.7	1.6	79.4	82.5
Tanintharyi	112325	1.7	99.3	28.6	97.4	1.0	97.5	94.9
Bago	218488	0.9	99.6	17.6	99.1	1.2	74.8	79.6
Magway	235878	1.2	99.7	29.7	98.1	1.4	85.0	86.1
Mandalay	246528	1.4	97.9	18.5	91.6	1.6	87.1	86.7
Mon	131861	0.8	99.0	23.2	95.6	1.2	89.8	90.6
Rakhine	187986	0.6	98.0	25.9	96.4	1.1	59.7	63.6
Yangon	183076	1.2	99.0	13.1	97.8	1.4	75.5	73.2
Shan (S)	132685	1.5	98.9	24.0	98.2	1.0	80.4	76.8
Shan (N)	99858	2.6	98.7 07 F	18.1	96.9	0.7	65.0	64.4
Shan (E)	42784	1.2	97.5	28.4	92.1	0.9	62.8 7(0	63.5
Ayeyarwady	296020	1.7 1 1	96.7	19.9 24.7	92.5	1.3	76.0	77.2
Nay Pyi Taw	60584	1.1	98.9	24.7	88.2	1.0	93.3	92.3
2015	2671596	1.3	98.5	22.7	96.1	1.2	79.2	79.8

Table (4) Indicators for Child Health Activities(2014-2015)

i	Nutri	tion Develo	opment Sei	vices (2014	-2015)	
Regions and States	% of newborns with LBW (Male)	% of newborns with LBW (Female)	infants with beriberi per 1000 LBs	% of pregnant women receiving de-worming drugs	% of post-natal mothers who received iron supplements 3 times or below during pregnancy	% of post-natal mothers who received iron supplements 4 times or more during pregnancy
Kachin Kayah	1.6 1.5	1.5 0.9	0.5 0.7	70.2 70.6	9.3 16.5	56.9 53.1
Kayin	2.1	2.6	0.4	74.5	18.9	61.9
Chin	0.6	0.7	0.4	74.5	18.8	53.3
Sagaing	1.8	1.8	0.2	76.9	9.7	67.7
Tanintharyi	1.3	1.1	3.0	74.7	12.7	60.4
Bago	2.8	3.1	4.1	72.6	20.9	53.6
Magway	1.3	1.4	2.4	72.8	9.9	62.0
Mandalay	1.0	1.1	1.1	69.6	8.7	67.3
Mon	1.4	1.6	0.2	74.3	12.2	61.7
Rakhine	1.5	1.5	0.9	42.7	20.9	37.7
Yangon	1.2	1.1	0.4	70.5	8.2	55.5
Shan (S)	1.7	1.7	0.8	78.4	20.8	56.1
Shan (N)	2.5	2.9	0.7	63.2	18.4	39.2
Shan (E)	1.6	2.4	1.4	50.0	13.9	33.0
Ayeyarwady	2.2	2.4	4.4	73.2	11.3	61.6
Nay Pyi Taw	1.4	1.0	1.9	73.8	6.9	61.7
2014	1.7	1.8	1.6	70.0	13.0	57.5
Kachin	1.9	1.8	0.3	71.2	8.1	60.4
Kayah	2.3	1.8	0.3	71.9	13.4	60.0
Kayin	3.5	3.8	0.9	74.9	17.2	65.7
Chin	2.2	1.7	0.5	68.7	17.1	52.8
Sagaing	1.7	1.7	0.2	77.2	10.6	68.1
Tanintharyi	0.8	1.1	0.3	69.1	10.7	59.4
Bago	2.7	2.9	3.6	73.9	18.5	52.5
Magway	1.7	1.6	2.4	74.0	7.0	66.0
Mandalay	1.4	1.6	0.3	76.1	8.2	68.8
Mon	2.0	1.7	0.3	73.4	11.5	62.6
Rakhine	1.3	1.1	0.3	47.1	19.6	36.3
Yangon	1.2	1.2	0.4	74.0	8.3	58.7
Shan (S)	1.6	1.6	0.5	77.7	19.3	61.2
Shan (N)	2.3	2.6	0.7	59.6	17.5 15.0	40.5
Shan (E)	2.1	1.7 2.9	2.8	59.4 72.7	15.9	36.0
Ayeyarwady	2.8 1.5	2.8	4.1 0.9	73.7 71.8	8.9 5.6	62.1
Nay Pyi Taw	1.5	0.8				65.8
2015	2.0	2.0	1.3	71.4	11.9	59.1

Table (5.1) Indicators for Growth Monitoring(2014-2015)

ii	Nutrition Development Services (2014)										
Regions and States	% of pregnant mothers who received B1 supplements	% of post-natal mothers who received B1 supplements	% of breastfeeding mothers who received B1 supplements	% of post-natal mothers who received vitamin A supplements	% of under-5 children with moderate underweight	% of under-5 children with severe underweight	% of under-5 children with underweight	Avg number of under-nourished children receiving Growth Monitoring and Promotion per month	% of under-nourished children receiving Growth Monitoring and Promotion per month	% of villages/ wards with qualified consumption of adequately iodized salt (township review)	% of village/wards with unqualified consumption of adequately iodized salt (township review)
Kachin	52.9	63.8	62.3	63.1	2.1	0.1	2.2	211	6.5	96.7	3.3
Kayah	44.9	66.8	64.3	67.5	7.7	0.5	8.2	182	7.7	97.0	3.0
Kayin	56.1	73.9	74.2	76.2	3.5	0.2	3.6	352	5.9	99.4	0.6
Chin	54.4	62.2	61.7	61.0	4.4	0.4	4.8	123	4.8	95.3	4.7
Sagaing	64.5	74.8	75.1	75.7	4.5	0.5	5.0	1774	8.1	98.2	1.8
Tanintharyi	61.0	70.8	73.9	70.0	1.8	0.1	1.9	201	6.0	90.5	9.5
Bago	57.8	71.7	72.5	72.0	1.3	0.0	1.4	315	5.4	98.1	1.9
Magway	56.9	70.7	71.7	71.1	2.9	0.2	3.2	712	6.4	96.3	3.7
Mandalay	59.2	71.6	73.7	76.2	2.3	0.0	2.3	332	3.8	98.8	1.2
Mon	59.3	71.3	71.9	70.6	2.5	0.1	2.6	334	6.9	95.4	4.6
Rakhine	41.2	43.8	44.9	48.3	2.1	0.2	2.3	135	1.8	68.0	32.0
Yangon	52.9	57.9	59.2	59.5	1.3	0.1	1.4	462	5.8	95.3	4.7
Shan (S)	51.3	69.3	66.5	71.8	3.3	0.1	3.5	580	7.8	98.2	1.8
Shan (N)	40.3	50.0	49.2	52.8	2.4	0.2	2.6	222	4.6	85.9	14.1
Shan (E)	36.9	42.9	36.7	42.9	3.0	0.1	3.1	78	4.0	85.8	14.2
Ayeyarwady	61.8	70.0	74.3	70.7	2.7	0.2	3.0	984	5.2	93.6	6.4
Nay Pyi Taw	57.9	66.8	75.2	67.1	0.6	0.0	0.6	17	3.0	96.8	3.2
2014	55.6	65.9	67.1	67.4	2.5	0.2	2.7	7012	5.9	93.8	6.2

Table (5.2.1) Indicators for Growth Monitoring (2014)

ii	Nutrition Development Services (2015)										
Regions and States	% of pregnant mothers who received B1 supplements	% of post-natal mothers who received B1 supplements	% of breastfeeding mothers who received B1 supplements	% of post-natal mothers who received vitamin A supplements	% of under-5 children with moderate underweight	% of under-5 children with severe underweight	% of under-5 children with underweight	Avg number of under-nourished children receiving Growth Monitoring and Promotion per month	% of under-nourished children receiving Growth Monitoring and Promotion per month	% of villages/ wards with qualified consumption of adequately iodized salt (township review)	% of village/wards with unqualified consumption of adequately iodized salt (township review)
Kachin	52.3	66.4	64.1	65.9	1.6	0.2	1.8	262	10.0	97.9	2.1
Kayah	52.6	72.8	71.8	71.7	6.1	0.4	6.5	149	7.3	98.6	1.4
Kayin	57.7	80.6	81.7	79.2	2.2	0.2	2.4	209	4.9	97.2	2.8
Chin	51.6	67.6	66.8	66.8	3.8	0.5	4.3	83	3.1	89.4	10.6
Sagaing	65.4	76.6	77.1	78.0	3.4	0.2	3.6	1974	11.5	98.2	1.8
Tanintharyi	57.8	69.3	74.3	68.9	1.4	0.1	1.5	125	5.6	92.9	7.1
Bago	57.2	70.1	70.9	73.7	1.0	0.0	1.0	273	6.7	97.8	2.2
Magway	56.5	71.1	71.6	72.7	2.5	0.2	2.8	593	6.4	96.9	3.1
Mandalay	61.3	75.7	76.6	77.1	1.0	0.1	1.0	245	6.1	97.7	2.3
Mon	59.0	73.1	72.7	72.1	1.6	0.1	1.6	208	6.9	98.6	1.4
Rakhine	38.0	42.4	42.8	50.1	2.2	0.2	2.4	242	3.1	70.1	29.9
Yangon	55.6	60.1	61.8	62.3	1.5	0.1	1.6	398	4.6	98.8	1.2
Shan (S)	52.0	67.8	65.6	73.6	2.7	0.1	2.8	524	8.6	98.7	1.3
Shan (N)	42.2	54.4	52.0	54.5	1.7	0.2	1.9	120	3.5	95.0	5.0
Shan (E)	41.2	52.0	43.8	49.4	1.9	0.3	2.1	47	3.5	76.5	23.5
Ayeyarwady	58.6	69.2	72.6	70.1	2.1	0.2	2.3	694	4.9	92.7	7.3
Nay Pyi Taw	59.9	73.6	83.2	72.9	0.6	0.1	0.7	82	11.1	100.0	0.0
2015	55.7	67.3	68.2	69.1	2.0	0.2	2.1	6228	6.7	94.0	6.0

Table (5.2.2) Indicators for Growth Monitoring (2015)

		School	Health (2014	-2015)		
Regions and States	% of schools examined for school health care	% of schools with the full standard ratio (50:1) of fly- proof latrines	% of schools with access to clean water	% of schools with nutritional promotion activities	% of primary school children receiving school medical examinations	% of schools with health promoting school activities
Kachin	90.5	83.4	85.9	74.8	93.0	42.3
Kayah	84.0	80.3	65.7	37.1	80.9	14.6
Kayin	92.7	85.8	81.5	71.9	94.8	35.7
Chin	81.5	63.5	62.8	7.1	73.3	1.1
Sagaing	95.1	87.8	79.2	48.2	97.2	20.4
Tanintharyi	92.5	81.7	75.9	70.6	86.8	16.0
Bago	96.3	90.2	89.4	83.9	91.5	60.9
Magway	96.5	90.3	88.8	64.7	96.2	31.4
Mandalay	90.3	85.7	83.6	50.6	87.4	34.0
Mon	95.9	90.2	93.8	94.6	95.0	82.0
Rakhine	90.4	47.7	34.0	23.8	85.9	6.4
Yangon	95.3	91.7	93.6	91.2	96.8	79.9
Shan (S)	92.6	86.2	79.0	64.9	90.3	27.0
Shan (N)	83.0	71.3	74.4	38.2	80.9	18.8
Shan (E)	79.9	72.7	67.8	39.1	80.3	18.1
Ayeyarwady	94.9	88.4	86.5	70.6	95.7	31.8
Nay Pyi Taw	95.6	79.4	90.4	69.0	94.1	45.3
2014	92.9	83.4	80.4	61.6	92.0	34.8
Kachin	85.6	80.7	82.5	77.6	88.4	35.4
Kayah	94.7	87.2	80.7	29.7	99.9	17.6
Kayin	95.2	90.7	91.2	86.3	95.6	38.4
Chin	90.2	72.1	62.7	13.1	92.7	3.2
Sagaing	95.8	88.2	81.9	53.8	95.5	19.8
Tanintharyi	92.5	87.3	69.5	62.0	90.1	30.0
Bago	96.7	91.5	91.4	87.5	95.1	63.4
Magway	97.4	89.5	88.7	71.8	96.1	39.5
Mandalay	90.5	86.0	86.7	59.1	91.1	34.6
Mon	96.0	92.8	94.7	94.8	92.8	92.5
Rakhine	83.8	48.2	43.6	23.1	72.1	7.0
Yangon	97.3	93.0	95.5	91.8	90.2	87.5
Shan (S)	94.8	89.4	85.4	69.9	94.3	34.7
Shan (N)	88.3	80.4	74.7	48.0	91.7	18.7
Shan (E)	79.5	74.0	69.0	43.5	88.4	22.7
Ayeyarwady	95.9	92.3	90.6	75.6	94.4	40.2
Nay Pyi Taw	93.6	77.4	84.4	67.5	93.7	45.6
2015	93.6	85.5	83.2	66.2	91.5	39.1

Table (6) Indicators for School Health Activities(2014-2015)

i Epidemiological Surveillance and Response (2014-2015)												
	Diarrho		Dysen		Foo	bd	Ente	ric	Meas		Diphtheria	
Regions and States	Diarrit	Jea	Dysen	iery	poiso	ning	Fev	er	Weas	0103	Dipita	
	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)	(3)	(2)*	(3)	(2)*
Kachin	1944.7	0.5	420.5	0.1	27.5	0.4	15.0	0.0	0.0	0.0	0.0	0.0
Kayah	2707.4	3.2	933.1	0.0	12.1	0.7	1.1	0.0	0.0	0.0	0.0	0.0
Kayin	1627.4	0.3	329.6	0.0	41.1	0.1	2.4	0.0	0.0	0.0	0.0	0.0
Chin	3852.9	8.7	924.0	0.8	12.5	1.6	14.1	0.0	0.0	0.0	0.0	0.0
Sagaing	1175.0	0.4	424.0	0.0	10.7	0.1	7.2	0.0	0.0	0.0	0.2	0.0
Tanintharyi	1373.1	0.6	521.7	0.0	64.5	0.4	6.0	0.0	1.3	0.0	0.0	0.0
Bago	886.2	0.2	322.2	0.0	17.7	0.2	15.6	0.0	0.0	0.0	0.0	0.0
Magway	1022.3	0.1	517.7	0.0	5.6	0.0	5.0	0.0	0.0	0.0	0.0	0.0
Mandalay	892.4	0.1	358.0	0.0	9.3	0.0	10.7	0.0	0.0	0.0	0.2	0.0
Mon	983.5	0.1	227.6	0.0	11.6	0.0	6.3	0.0	0.0	0.0	0.0	0.0
Rakhine	1885.9	0.4	759.9	0.0	14.3	0.1	16.9	0.0	0.3	0.0	0.0	0.0
Yangon	474.3	0.1	156.3	0.0	5.3	0.0	0.6	0.0	0.0	0.0	0.4	0.0
Shan (S)	1212.1	0.7	414.3	0.0	35.6	0.7	14.3	0.0	0.0	0.0	0.0	0.0
Shan (N)	1131.7	0.8	264.6	0.2	18.4	0.4	5.3	0.0	3.8	0.0	0.0	0.0
Shan (E)	1431.2	0.2	354.0	0.0	12.1	0.0	5.7	0.0	0.0	0.0	0.0	0.0
Ayeyarwady	897.3	0.3	417.5	0.0	8.3	0.1	12.4	0.0	0.0	0.0	0.2	0.0
Nay Pyi Taw	875.5	0.3	266.5	0.0	11.7	0.0	1.0	0.0	0.0	0.0	0.0	0.0
2014	1087.3	0.4	388.7	0.0	14.5	0.2	8.9	0.0	1.1	0.0	0.2	0.0
Kachin	2016.3	0.4	397.9	0.0	28.5	0.1	24.4	0.0	0.0	0.0	0.0	0.0
Kayah	3377.3	3.8	929.0	0.0	27.7	0.3	1.0	0.0	0.0	0.0	0.0	0.0
Kayin	1640.6	0.5	323.3	0.0	31.8	0.3	2.5	0.0	0.0	0.0	0.0	0.0
Chin	3657.9	5.0	678.9	0.0	27.4	0.2	9.5	0.2	1.6	0.0	0.0	0.0
Sagaing	1242.5	0.3	426.7	0.0	10.3	0.1	6.5	0.0	0.2	0.0	0.0	0.0
Tanintharyi	1514.5	0.7	522.5	0.0	63.7	0.3	5.9	0.1	0.0	0.0	0.0	0.0
Bago	946.2	0.2	351.7	0.0	17.1	0.1	13.3	0.0	0.7	0.0	0.0	0.0
Magway	1122.5	0.4	528.0	0.1	4.7	0.1	5.2	0.0	0.0	0.0	0.3	0.3
Mandalay	842.7	0.1	336.3	0.0	9.8	0.1	5.0	0.0	0.2	0.0	0.0	0.0
Mon	1046.2	0.4	236.7	0.0	10.0	0.0	3.3	0.0	0.0	0.0	0.0	0.0
Rakhine	1961.5	0.1	765.0	0.0	16.8	0.1	15.5	0.0	0.0	0.0	0.0	0.0
Yangon	415.5	0.0	137.7	0.0	4.9	0.0	1.1	0.0	0.0	0.0	0.4	0.0
Shan (S)	1253.5	0.7	360.6	0.1	13.7	0.5	8.1	0.0	0.0	0.0	0.5	0.0
Shan (N)	1132.4	0.4	233.4	0.2	17.1	0.1	6.6	0.0	0.0	0.0	0.0	0.0
Shan (E)	1802.8	0.1	355.6	0.0	21.0	0.1	7.3	0.0	0.0	0.0	0.0	0.0
Ayeyarwady	784.7	0.2	371.1	0.0	7.3	0.1	19.3	0.0	0.6	0.0	0.2	0.0
Nay Pyi Taw	1106.4	0.2	367.9	0.0	6.1	0.0	0.1	0.0	1.1	0.0	0.0	0.0
2015	1109.9	0.3	377.7	0.0	13.3	0.1	8.6	0.0	0.9	0.0	1.2	0.3

Table (7.1) Indicators for Morbidity and Mortality of Diseases Under National Surveillance(2014-2015)

(1) Number of cases per 100,000 Population

(2) Number of deaths per 100,000 Population

(2)* Number of deaths per 100,000 Population under five years children

 (3) For vaccine preventable diseases and ARI, number of cases per 100,000 under five years children are mentioned in the table

ii Epidemiological Surveillance and Response (2014-2015)												
Regions and States	Whoo cou		Neor teta		Teta	anus	Menir	igitis	ARI		Viral Hepatitis	
States	(3)	(2)*	(4)	(4)*	(1)	(2)	(1)	(2)	(3)	(2) *	(1)	(2)
Kachin	0.0	0.0	0.0	0.0	0.3	0.1	2.9	0.1	4524.8	15.7	20.3	0.1
Kayah	0.0	0.0	0.0	0.0	0.0	0.0	1.4	0.0	8413.2	16.7	14.2	0.0
Kayin	0.6	0.0	3.3	3.3	0.1	0.0	9.2	0.1	3778.0	9.7	25.6	0.1
Chin	0.0	0.0	7.7	7.7	0.2	0.2	4.8	0.0	14434.8	37.2	47.5	0.0
Sagaing	0.0	0.0	0.0	0.0	0.4	0.0	2.0	0.2	6184.5	20.2	25.7	0.1
Tanintharyi	0.0	0.0	0.0	0.0	0.1	0.0	2.1	0.0	8087.0	5.9	17.8	0.5
Bago	0.0	0.0	4.9	4.9	0.4	0.0	5.5	0.1	2834.2	9.1	19.3	0.2
Magway	0.0	0.0	3.2	1.6	0.3	0.1	0.9	0.0	5454.3	21.4	6.2	0.1
Mandalay	0.0	0.0	1.0	1.0	0.3	0.1	2.7	0.0	4525.0	5.7	17.1	0.2
Mon	on 0.0 0.0 0.0 0.0 0.6 0.0 0.3 0.0 1564.8 3.7										8.7	0.0
Rakhine	0.0	0.0	0.0	0.0	0.5	0.0	2.0	0.2	9889.9	4.7	13.4	0.0
Yangon	0.2	0.0	2.0	0.0	0.0	0.0	0.5	0.0	3091.2	2.0	2.9	0.0
Shan (S)	0.5	0.0	0.0	0.0	0.3	0.1	2.4	0.2	6572.3	18.6	24.1	0.4
Shan (N)	0.0	0.0	2.9	0.0	0.6	0.0	2.7	0.1	3292.1	8.6	16.8	0.3
Shan (E)	3.4	0.0	0.0	0.0	0.2	0.0	1.9	0.0	6415.9	1.7	12.6	0.2
Ayeyarwady	0.0	0.0	7.6	0.0	0.3	0.1	2.8	0.2	4546.3	12.7	23.7	0.0
Nay Pyi Taw	0.0	0.0	5.9	0.0	0.5	0.0	3.3	0.1	1784.4	13.6	7.1	0.0
2014	0.1	0.0	2.5	1.0	0.3	0.0	2.5	0.1	6245.8	11.1	16.4	0.1
Kachin	1.3	0.0	0.0	0.0	0.7	0.1	5.7	0.5	4789.2	8.6	37.5	0.5
Kayah	0.0	0.0	0.0	0.0	0.3	0.0	0.3	0.0	10062.5	19.1	32.6	0.7
Kayin	1.8	0.0	0.0	0.0	0.1	0.0	7.8	0.1	3374.3	4.9	46.6	0.1
Chin	0.0	0.0	0.0	0.0	0.2	0.0	6.2	0.6	10141.5	46.2	43.4	0.2
Sagaing	0.7	0.0	0.0	0.0	0.3	0.1	1.9	0.2	4641.5	17.4	15.6	0.1
Tanintharyi	0.7	0.0	0.0	0.0	0.1	0.0	2.4	0.1	5922.8	8.0	19.2	0.5
Bago	0.0	0.0	7.2	4.8	0.2	0.0	4.3	0.1	2445.9	5.4	25.4	0.3
Magway	0.0	0.0	1.5	0.0	0.2	0.1	0.7	0.0	5967.3	13.1	6.0	0.1
Mandalay	0.0	0.0	2.9	2.9	0.3	0.0	3.9	0.0	3384.7	5.2	12.2	0.1
Mon	0.0	0.0	0.0	0.0	0.1	0.0	0.2	0.0	1239.8	3.7	14.2	0.0
Rakhine	0.0	0.0	0.0	0.0	0.6	0.1	4.1	0.2	7624.4	6.9	13.0	0.1
Yangon	0.2	0.0	1.9	1.9	0.0	0.0	0.3	0.0	3117.7	2.0	3.5	0.0
Shan (S)	0.0	0.0	2.3	2.3	0.2	0.0	1.5	0.2	6423.5	15.6	23.7	0.2
Shan (N)	0.0	0.0	0.0	0.0	0.1	0.0	3.1	0.0	3215.7	4.8	27.1	0.1
Shan (E)	0.0	0.0	0.0	0.0	0.0	0.0	4.8	0.0	6765.4	0.0	8.9	0.0
Ayeyarwady	0.0	0.0	2.9	0.0	0.1	0.0	4.9	0.2	3496.8	6.3	25.7	0.2
Nay Pyi Taw	0.0	0.0	0.0	0.0	0.1	0.0	1.4	0.1	1784.7	5.4	6.9	0.0
2015	0.2	0.0	1.9	1.2	0.2	0.0	2.9	0.1	5225.2	8.4	17.5	0.1
	(4))0.000 live			

Table (7.2) Indicators for Morbidity and Mortality of Diseases Under National Surveillance(2014-2015)

(4) For Neonatal Tetanus, number of cases per 100,000 live birth are mentioned in the table

(4)* Number of deaths per 100,000 livebirths

iii	iii Epidemiological Surveillance and Response (2014-2015)															
Regions and States	Rat	oies	Malar	ia	Sna bit poiso	e	TB Sputt + Ve	um	Retre Ti Patie	3	TB Sputu ve	m -	TB: E pulmo		Antl	nrax
	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)
Kachin	0.5	0.5	832.2	0.3	2.9	0.1	60.9	0.6	21.5	0.4	117.0	0.6	70.1	0.1	0.0	0.0
Kayah	0.7	0.7	517.1	0.0	5.3	0.0	28.8	0.0	3.6	0.0	40.2	0.4	3.9	0.0	0.0	0.0
Kayin	0.3	0.3	435.2	0.5	11.1	0.5	77.4	0.8	13.3	0.3	186.8	0.8	10.5	0.3	0.0	0.0
Chin	0.2	0.2	1499.6	2.8	11.9	0.2	29.4	0.2	9.5	0.0	85.4	0.6	67.0	0.0	0.0	0.0
Sagaing	0.2	0.2	536.0	0.8	29.8	1.1	40.8	0.2	9.5	0.2	55.3	0.2	18.2	0.1	0.0	0.0
Tanintharyi	0.2	0.2	421.4	0.1	4.5	0.4	54.8	1.4	18.3	0.5	129.5	2.9	53.1	0.4	0.0	0.0
Bago	0.4	0.4	68.6	0.1	22.7	1.0	64.1	0.8	14.9	0.2	133.5	0.8	15.8	0.0	0.0	0.0
Magway	0.2	0.2	85.9	0.1	26.6	1.9	42.7	0.4	7.1	0.1	66.0	0.9	19.6	0.2	0.0	0.0
Mandalay	0.4	0.4	74.4	0.2	26.2	1.6	60.0	0.3	12.8	0.0	40.6	0.2	31.3	0.1	0.0	0.0
Mon	0.4	0.4	64.2	0.0	12.3	1.0	86.6	1.0	14.1	0.4	171.1	1.6	13.0	0.0	0.0	0.0
Rakhine	0.0	0.0	628.1	0.2	1.6	0.1	39.6	0.1	6.8	0.0	53.8	0.1	14.8	0.1	0.0	0.0
Yangon	0.1	0.1	8.6	0.0	8.6	0.6	105.7	0.4	33.4	0.3	148.0	0.7	26.6	0.2	0.0	0.0
Shan (S)	0.4	0.4	447.5	0.3	6.3	0.1	46.1	0.6	6.7	0.2	54.0	0.5	20.9	0.2	0.0	0.0
Shan (N)	0.2	0.2	278.6	0.3	2.7	0.1	51.6	0.5	17.9	0.1	96.3	0.2	39.8	0.1	0.0	0.0
Shan (E)	0.3	0.3	348.3	0.0	2.6	0.0	91.4	0.2	15.3	0.0	106.3	0.5	10.3	0.5	0.0	0.0
Ayeyarwady	0.3	0.3	167.4	0.2	14.2	2.3	58.8	0.3	12.1	0.1	73.7	0.3	22.3	0.0	0.0	0.0
Nay Pyi Taw	0.6	0.6	91.7	0.0	12.0	0.2	45.1	0.4	7.3	0.1	44.8	0.1	24.5	0.0	0.0	0.0
2014	0.3	0.3	253.3	0.2	15.8	1.0	61.5	0.4	14.6	0.2	91.8	0.6	24.5	0.1	0.0	0.0
Kachin	0.9	0.9	534.2	0.3	4.0	0.0	87.6	1.6	21.5	0.5	135.8	1.4	70.6	0.5	0.0	0.0
Kayah	0.3	0.3	310.5	0.0	13.2	0.0	31.2	0.7	4.2	0.0	44.0	0.0	5.2	0.0	0.0	0.0
Kayin	0.3	0.3	185.3	0.1	16.2	0.8	81.5	0.9	9.9	0.2	243.9	1.0	4.8	0.1	0.0	0.0
Chin	0.0	0.0	1366.2	1.8	7.1	0.4	28.6	0.4	13.3	0.0	124.2	0.0	48.2	0.0	0.0	0.0
Sagaing	0.1	0.1	325.5	0.2	31.5	1.1	41.5	0.2	8.8	0.1	74.2	0.5	18.6	0.1	0.0	0.0
Tanintharyi	0.1	0.1	186.1	0.1	3.7	0.1	51.5	0.3	11.8	0.2	143.9	0.6	32.4	0.0	0.0	0.0
Bago	0.4	0.4	26.1	0.1	32.0	1.5	64.1	0.5	19.7	0.3	125.9	0.8	16.4	0.1	0.0	0.0
Magway	0.2	0.2	17.9	0.0	33.8	1.5	35.0	0.5	9.0	0.1	65.7	0.5	23.3	0.0	0.0	0.0
Mandalay	0.2	0.2	52.1	0.2	23.7	1.0	55.0	0.2	13.0	0.1	43.7	0.2	31.4	0.2	0.0	0.0
Mon	0.0	0.0	35.1	0.0	9.5	0.7	87.3	1.0	15.4	0.4	148.4	1.4	11.9	0.1	0.0	0.0
Rakhine	0.1	0.1	294.3	0.0	2.7	0.0	43.1	0.3	5.6	0.1	68.7	0.3	28.5	0.1	0.0	0.0
Yangon	0.0	0.0	5.5	0.0	11.4	0.7	109.4	0.3	30.8	0.4	150.5	0.4	28.1	0.1	0.0	0.0
Shan (S)	0.2	0.2	252.6	0.1	6.4	0.1	39.3	0.4	6.3	0.1	48.3	0.4	19.0	0.1	0.0	0.0
Shan (N)	0.1	0.1	223.8	0.2	1.8	0.0	48.0	0.3	16.7	0.0	87.1	0.2	19.8	0.0	0.0	0.0
Shan (E)	0.1	0.1	263.4	0.3	3.3	0.1	65.9	0.1	13.0	0.0	99.7	0.6	5.5	0.0	0.0	0.0
Ayeyarwady	0.1	0.1	150.7	0.2	17.5	2.6	59.3	0.2	12.5	0.0	82.1	0.4	19.9	0.0	0.0	0.0
Nay Pyi Taw	0.5	0.5	74.7	0.0	15.2	0.9	53.7	0.0	14.1	0.2	50.5	0.3	17.1	0.0	0.0	0.0
2015	0.2	0.2	154.2	0.1	18.1	1.0	61.4	0.4	14.7	0.2	97.3	0.5	23.6	0.1	0.0	0.0

Table (7.3) Indicators for Morbidity and Mortality of Diseases Under National Surveillance(2014-2015)

(1) Number of cases per 100,000 Population

(2) Number of deaths per 100,000 Population

(3) For vaccine preventable diseases and ARI, number of cases per 100,000 under five years children are mentioned in the table

	Exp	banded	d Progr	amme	on Imn	nunizati	ion(201	4-2015))		
Regions and States	Coverage (%)	Polio	Coveraç			valent Cov (%)	-		asles age(%)	(9	verage %)
	BCG	1 st Dose	2 nd Dose	3 rd Dose	1 st Dose	2 nd Dose	3 rd Dose	9 Months	18 Months	1 st Dose	2 nd Dose
Kachin	91.3	90.4	89.3	86.3	90.9	87.7	85.9	85.5	75.6	73.9	71.3
Kayah	81.5	81.1	79.8	77.9	80.9	79.7	77.9	75.4	64.8	74.4	69.5
Kayin	87.6	87.7	85.0	82.4	87.4	84.8	82.2	83.5	79.5	83.2	79.3
Chin	84.2	86.1	83.5	79.2	86.1	83.3	79.4	77.4	62.3	65.8	66.7
Sagaing	91.1	91.6	90.9	90.6	91.5	90.8	90.5	89.8	86.3	80.1	79.1
Tanintharyi	94.1	93.3	92.1	90.2	93.4	92.2	90.2	91.2	86.3	89.5	86.8
Bago	95.7	95.5	93.6	90.9	95.6	93.5	90.8	92.8	89.5	83.5	81.4
Magway	82.9	82.5	81.4	80.2	82.5	81.1	80.1	80.1	78.1	77.2	76.2
Mandalay	93.4	93.5	92.8	92.0	93.4	92.7	92.0	90.9	87.9	83.9	82.6
Mon	92.4	92.3	90.5	89.2	92.0	90.3	89.1	89.1	86.6	82.9	81.6
Rakhine	80.9	80.3	73.4	66.7	79.9	73.5	66.5	69.1	57.7	77.1	70.5
Yangon	93.6	93.3	91.2	89.1	93.3	91.0	89.1	90.1	86.0	84.0	82.0
Shan (S)	89.8	89.8	87.0	83.4	89.2	86.6	83.0	82.7	75.1	81.9	78.7
Shan (N)	87.3	86.6	82.9	77.2	87.1	82.5	76.8	75.6	62.7	71.9	65.0
Shan (E)	78.1	78.2	73.3	67.7	81.5	73.4	67.9	67.3	57.0	60.1	53.3
Ayeyarwady	90.0	90.0	89.1	88.1	90.0	89.0	88.0	85.8	80.5	80.2	79.1
Nay Pyi Taw	86.8	86.0	86.5	85.6	86.1	84.7	83.8	84.7	83.0	83.2	83.2
2014	89.8	89.7	87.7	85.4	89.7	87.5	85.3	85.3	79.9	80.4	78.1
Kachin	88.3	88.3	85.2	82.4	88.0	85.8	82.6	80.6	71.4	70.9	69.9
Kayah	98.0	97.8	98.8	97.6	98.1	98.8	97.6	78.1	67.5	75.6	72.8
Kayin	94.2	94.3	91.2	86.9	94.3	91.2	87.5	83.0	77.3	82.9	79.5
Chin	85.2	85.1	84.1	77.0	86.0	84.9	79.8	74.8	69.5	68.3	63.7
Sagaing	90.4	90.8	89.6	87.4	91.0	89.6	87.4	83.2	81.2	80.3	79.9
Tanintharyi	95.1	95.8	93.5	92.8	95.5	94.3	92.8	86.1	84.5	83.9	82.5
Bago	94.5	94.6	91.9	89.0	94.6	92.2	89.3	91.7	89.1	82.9	80.6
Magway	93.9	93.7	92.3	89.2	94.2	92.3	89.7	85.4	79.9	78.8	77.8
Mandalay	94.4	95.0	93.6	91.8	94.7	93.4	91.7	82.2	84.3	85.9	83.8
Mon	91.2	91.2	90.7	89.1	91.2	90.7	89.1	88.7	86.4	81.6	80.3
Rakhine	83.5	87.1	81.5	75.7	86.3	81.5	76.0	63.2	49.1	79.0	72.9
Yangon	94.3	94.5	92.1	90.4	94.6	92.4	90.4	83.2	78.9	83.0	81.3
Shan (S)	91.3	91.4	89.1	86.2	91.5	89.0	86.2	69.6	65.6	83.7	80.4
Shan (N)	81.5	82.1	78.2	72.7	82.1	77.4	72.7	62.3	53.8	67.9	64.5
Shan (E)	75.3	77.7	70.4	67.2	77.8	70.3	67.1	62.6	56.0	64.8	58.6
Ayeyarwady	96.2	96.3	94.6	92.8	96.5	94.6	92.7	86.8	82.7	80.3	78.1
Nay Pyi Taw	94.9	94.9	94.9	93.4	94.8	95.0	93.4	84.7	80.2	78.4	77.5
2015	91.9	92.4	90.1	87.4	92.4	90.1	87.5	81.1	76.8	80.3	78.0

Table (8) Indicators for Immunization Coverage (2014-2015)

Zoonoti	ic Diseas	ses Con	trol (2014	4)	Zoonotic Diseases Control (2015)						
Regions and States	Number of dog bite patients	Number of rabid dog bite patients	Number of persons received for rabies vaccines	Number of leptospirosis patients		Number of dog bite patients	Number of rabid dog bite patients	Number of persons received for rabies vaccines	Number of leptospirosis patients		
Kachin	1741	20	798	0		1811	29	1148	1		
Kayah	154	4	48	0		115	2	39	0		
Kayin	1278	36	1073	0		1306	5	970	0		
Chin	169	0	116	0		99	10	66	0		
Sagaing	4582	188	2714	1		3646	70	1645	1		
Tanintharyi	1114	8	693	0		1360	19	715	0		
Bago	11524	54	6354	1		14986	31	11355	0		
Magway	5787	97	2638	4		4483	84	1842	0		
Mandalay	4419	130	2362	0		4371	101	2569	0		
Mon	1943	98	1487	0		2132	22	1755	3		
Rakhine	627	7	229	0		737	6	354	0		
Yangon	10450	55	8833	1		11715	17	10260	0		
Shan (S)	1083	10	451	0		1691	12	1329	1		
Shan (N)	1126	33	666	0		847	11	287	0		
Shan (E)	314	11	93	8		252	4	72	0		
Ayeyarwady	5536	35	1911	0		3871	12	1321	0		
Nay Pyi Taw	1877	31	1220	0		3193	13	2443	0		
Union (2014)	53724	817	31686	15	Union (2015)	56615	448	38170	6		

Table (9) Indicators for Zoonotic Diseases (2014-2015)

	Le	eprosy Eli	mination	Activities	(2014-2015)		
Regions and States	New case detection rate (per 100000 pop)	% of new under- 15 patients	% of new female patients	% of new patients with disability grade 2	No. of those who released from treatment after completing the standard therapy (RFT case)	Number of defaulters	Leprosy Prevalence Rate per 10000 pop
Kachin	0.9	0.0	23.1	15.4	5	0.0	0.1
Kayah	1.1	0.0	66.7	33.3	1	0.0	0.2
Kayin	2.5	11.1	33.3	22.2	35	0.0	0.2
Chin	0.8	0.0	25.0	0.0	0	0.0	0.0
Sagaing	6.3	8.3	31.9	3.5	339	1.0	0.6
Tanintharyi	2.4	3.0	12.1	0.0	15	0	0.2
Bago	7.2	4.5	30.5	12.0	340	17.0	0.8
Magway	5.6	7.4	33.9	9.6	227	1.0	0.5
Mandalay	4.0	6.9	40.7	4.8	139	7.0	0.3
Mon	1.0	4.8	28.6	19.0	15	3.0	0.1
Rakhine	0.5	0.0	29.4	0.0	26	0.0	0.0
Yangon	1.2	5.3	22.4	17.1	51	5.0	0.1
Shan (S)	8.7	2.6	32.5	8.4	118	1.0	0.7
Shan (N)	3.1	0.0	37.7	23.0	55	2.0	0.2
Shan (E)	0.6	0.0	0.0	25.0	4	0.0	0.0
Ayeyarwady	4.4	2.5	23.1	7.2	219	4.0	0.4
Nay Pyi Taw	2.5	8.0	36.0	8.0	14	0.0	0.5
2014	3.9	5.3	31.1	8.8	1603	41	0.4
Kachin	0.4	0.0	16.7	0.0	3	0.0	0.0
Kayah	1.7	0.0	0.0	20.0	3	0.0	0.2
Kayin	2.7	7.3	17.1	4.9	40	0.0	0.2
Chin	1.0	0.0	40.0	20.0	0	0.0	0.0
Sagaing	6.4	8.0	37.1	1.7	320	1.0	0.6
Tanintharyi	1.7	4.2	25.0	20.8	17	1.0	0.1
Bago	6.3	3.5	25.9	8.5	298	13.0	0.5
Magway	5.4	6.3	46.4	9.0	205	9.0	0.5
Mandalay	3.9	6.0	34.3	9.4	135	0.0	0.3
Mon	0.4	0.0	30.0	0.0	12	0.0	0.0
Rakhine	0.5	0.0	31.3	12.5	4	0.0	0.0
Yangon	0.7	8.3	14.6	14.6	85	0.0	0.1
Shan (S)	6.1	3.6	31.9	9.4	136	2.0	0.6
Shan (N)	2.3	0.0	38.3	21.3	27	1.0	0.3
Shan (E)	0.6	0.0	0.0	0.0	3	0.0	0.0
Ayeyarwady	3.9	2.4	21.6	6.5	229	2.0	0.4
Nay Pyi Taw	2.2	8.7	17.4	21.7	33	0.0	0.1
2015	3.5	5.1	31.4	7.9	1550	29	0.3

Table (10) Indicators for Leprosy Elimination Activities(2014-2015)

	AIDS/ STI Prevention and Control (2014-2015)										
Regions and States	VDRL test positive rate in primigravida	Genital ulcer detection rate	Genital discharge rate (male)	Percentage of STI among outpatients							
Kachin	0.4	2.3	1.9	0.01							
Kayah	0.0	7.8	1.1	0.07							
Kayin	0.2	0.3	6.6	0.04							
Chin	0.9	2.0	3.3	0.01							
Sagaing	0.2	1.1	3.1	0.05							
Tanintharyi	1.1	9.0	18.9	0.17							
Bago	0.5	2.3	7.3	0.08							
Magway	0.4	2.0	2.9	0.02							
Mandalay	0.4	2.5	1.9	0.04							
Mon	1.0	1.4	0.3	0.01							
Rakhine	3.1	3.6	8.0	0.01							
Yangon	0.8	1.7	3.4	0.08							
Shan (S)	0.1	0.8	0.8	0.01							
Shan (N)	0.1	2.3	2.4	0.02							
Shan (E)	0.8	8.4	55.7	0.20							
Ayeyarwady	0.3	3.6	6.5	0.05							
Nay Pyi Taw	0.2	0.4	8.2	0.02							
2014	0.5	2.4	5.2	0.05							
Kachin	0.1	1.1	2.5	0.00							
Kayah	0.0	0.0	3.1	0.00							
Kayin	0.5	0.3	1.6	0.01							
Chin	5.4	1.4	0.0	0.01							
Sagaing	0.1	1.0	1.9	0.06							
Tanintharyi	0.1	9.1	18.8	0.10							
Bago	0.3	2.2	3.5	0.06							
Magway	1.5	1.0	0.5	0.04							
Mandalay	1.1	2.2	1.7	0.03							
Mon	0.1	3.0	2.5	0.02							
Rakhine	0.8	2.4	4.1	0.01							
Yangon	0.6	1.4	2.5	0.06							
Shan (S)	0.1	1.1	1.3	0.01							
Shan (N)	0.5	2.0	0.7	0.03							
Shan (E)	2.8	9.2	13.6	0.08							
Ayeyarwady	0.3	2.2	3.3	0.03							
Nay Pyi Taw	0.6	2.1	11.7	0.06							
2015	0.6	2.1	3.1	0.04							

Table (11) Indicators for Sexually Transmitted Infection Control Activities(2014-2015)

Institutio	onal based	Malaria (201	4)	Institutional based Malaria (2015)					
Regions and States	% of malaria among outpatients	% of hospitalized patients with malaria	% of in-patients deaths among those with malaria (Case Fatality Rate)		% of malaria among outpatients	% of hospitalized patients with malaria	% of in-patients deaths among those with malaria (Case Fatality Rate)		
Kachin	2.5	1.2	0.9		1.3	1.0	0.1		
Kayah	1.1	1.0	0.0		0.6	0.4	0.0		
Kayin	1.3	2.0	0.7		0.4	1.0	0.3		
Chin	3.3	3.9	0.7		3.4	1.0	2.1		
Sagaing	1.8	1.3	1.4		1.0	1.0	1.2		
Tanintharyi	1.3	1.5	0.3		0.5	0.8	0.2		
Bago	0.2	0.4	0.5		0.1	0.2	0.6		
Magway	0.4	0.2	0.0		0.1	0.1	1.5		
Mandalay	0.3	0.3	0.6		0.2	0.2	0.9		
Mon	0.2	0.5	0.3		0.1	0.2	0.0		
Rakhine	1.9	1.1	1.1		0.8	0.4	0.6		
Yangon	0.0	0.1	0.5		0.0	0.0	0.0		
Shan (S)	1.4	1.9	0.4		0.8	1.1	0.4		
Shan (N)	1.2	1.2	0.8		0.9	0.9	0.4		
Shan (E)	1.2	0.9	0.0		1.0	0.5	1.4		
Ayeyarwady	0.7	0.5	0.8		0.6	0.4	0.2		
Nay Pyi Taw	0.3	0.7	0.0		0.2	0.4	0.0		
2014	0.9	0.7	0.7	2015	0.5	0.4	0.6		

Table (12) Indicators for Malaria(2014-2015)

Tra	achoma Control a	nd Prevention of	Blindness (2014-	2015)
Regions and States	Morbidity rate of new eye diseases (per 100,000 population)	Percent of infectious trachoma (under-10 year population)	Percent of blindness or loss of eyesight (general population)	Morbidity rate of ophthalmia neonatorum in newborn infants (per 1000 livebirths)
Kachin	684.5	0.0151	0.0020	0.10
Kayah	538.4	0.0034	0.0046	0.17
Kayin	540.6	0.0000	0.0008	0.03
Chin	446.9	0.0421	0.0034	0.15
Sagaing	900.4	0.0060	0.0024	0.06
Tanintharyi	506.6	0.0035	0.0024	0.04
Bago	598.2	0.0000	0.0217	0.09
Magway	442.9	0.0009	0.0027	0.06
Mandalay	578.6	0.0055	0.0230	0.02
Mon	430.7	0.0013	0.0004	0.08
Rakhine	187.6	0.0036	0.0011	0.08
Yangon	166.1	0.0005	0.0002	0.02
Shan (S)	345.1	0.0193	0.0057	0.17
Shan (N)	400.5	0.0195	0.0007	0.00
Shan (E)	199.9	0.0062	0.0002	0.00
Ayeyarwady	308.8	0.0034	0.0027	0.17
Nay Pyi Taw	309.0	0.0113	0.0062	0.06
2014	454.9	0.0055	0.0065	0.07
Kachin	260.2	0.0051	0.0034	0.00
Kayah	292.8	0.0000	0.0062	0.00
Kayin	214.2	0.0000	0.0025	0.00
Chin	279.9	0.0113	0.0060	0.08
Sagaing	530.7	0.0537	0.0021	0.06
Tanintharyi	208.9	0.0014	0.0015	2.72
Bago	271.4	0.0002	0.0177	0.08
Magway	167.3	0.0005	0.0027	0.05
Mandalay	175.5	0.0008	0.0183	0.06
Mon	131.1	0.0000	0.0028	0.03
Rakhine	95.9	0.0015	0.0011	0.07
Yangon	63.1	0.0000	0.0002	0.01
Shan (S)	258.6	0.0051	0.0040	0.09
Shan (N)	193.7	0.0017	0.0011	0.06
Shan (E)	140.6	0.0008	0.0004	0.00
Ayeyarwady	54.8	0.0006	0.0018	0.03
Nay Pyi Taw	251.8	0.0000	0.0083	0.06
2015	197.9	0.0066	0.0055	0.13

Table (13) Indicators for Prevention of Blindness(2014-2015)

	Cardiovascular behaviors (20			Cardiovascular behaviors (20	
Regions and States	Proportion of hypertension per 1000 above 15 years population	Prevalence of current smoker per 1000 above 15 years population		Proportion of hypertension per 1000 above 15 years population	Prevalence of current smoker per 1000 above 15 years population
Kachin	13.7	167.9		16.7	193.1
Kayah	14.7	131.2		15.1	146.2
Kayin	12.1	190.6		13.4	218.0
Chin	7.6	182.2		7.5	220.7
Sagaing	13.8	163.8		13.6	184.0
Tanintharyi	12.3	124.3		13.4	203.2
Bago	10.2	179.0		12.2	173.6
Magway	9.4	126.3		11.2	136.4
Mandalay	7.8	131.8		8.5	118.4
Mon	11.2	145.3		11.8	163.9
Rakhine	9.3	238.2		10.5	226.8
Yangon	7.3	138.5		7.5	136.5
Shan (S)	17.4	197.3		18.5	208.7
Shan (N)	10.6	166.2		13.0	162.9
Shan (E)	16.9	188.8		18.0	203.8
Ayeyarwady	10.5	175.2		11.3	147.3
Nay Pyi Taw	12.1	154.6		15.6	162.1
2014	10.6	161.6	2015	11.6	163.6

Table (14) Indicators for Prevention of Cardiovascular Disease(2014-2015)

i Prevention of Accident and Injury (2014-2015)									
Regions an	d		Traffic ident	Farm ii	njuries	Poiso	ning	Fall f heig	
States		(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)
Kachin		6.9	11.8	3.4	2.4	0.1	0.7	0.8	3.5
Kayah		4.6	12.5	4.4	2.8	0.2	0.7	1.1	5.3
Kayin		4.6	10.5	2.6	0.7	0.1	1.0	1.1	2.3
Chin		3.5	7.6	3.2	0.8	0.1	0.8	1.4	8.1
Sagaing		3.7	9.9	2.9	1.1	0.1	0.7	0.6	1.9
Tanintharyi		3.7	7.7	2.5	0.9	0.1	1.1	0.7	1.9
Bago		2.7	12.7	1.5	0.7	0.1	1.1	0.6	1.7
Magway		2.1	8.2	2.4	0.7	0.1	0.5	0.6	2.5
Mandalay		3.4	11.7	1.3	0.5	0.1	0.8	0.5	1.9
Mon		3.8	11.3	1.3	0.5	0.0	0.2	0.5	1.8
Rakhine		1.2	2.7	1.7	0.3	0.1	0.6	0.6	1.1
Yangon		1.1	3.6	0.5	0.1	0.1	0.5	0.3	0.3
Shan (S)		4.2	6.0	2.7	0.8	0.2	1.7	0.8	1.5
Shan (N)		5.3	10.5	1.9	1.6	0.1	1.6	0.5	2.0
Shan (E)		4.1	8.2	3.5	1.3	0.2	0.5	0.6	0.5
Ayeyarwady		1.5	4.3	1.2	0.5	0.1	0.7	0.3	1.1
Nay Pyi Taw		3.0	7.6	2.3	0.8	0.0	0.2	0.8	1.8
2014	(3)	2.8	8.1	1.8	0.7	0.1	0.8	0.5	1.7
2014	(4)	140098	3985	88596	348	4083	375	26797	828
Kachin		8.1	11.4	3.7	2.2	0.1	0.7	0.7	2.8
Kayah		5.6	25.6	6.6	2.8	0.1	0.3	1.0	3.1
Kayin		6.4	11.0	2.4	1.1	0.1	1.0	1.4	1.9
Chin		3.4	6.7	2.7	2.2	0.1	0.4	1.7	2.8
Sagaing		3.7	10.2	3.1	1.0	0.1	0.5	0.6	2.0
Tanintharyi		4.8	8.6	2.8	0.8	0.1	0.3	0.7	1.3
Bago		3.0	12.7	1.5	0.6	0.1	1.3	0.6	1.6
Magway		2.3	7.7	2.5	0.7	0.1	0.4	0.6	2.4
Mandalay		3.1	8.6	1.2	0.6	0.1	0.8	0.5	1.6
Mon		4.0	12.8	1.3	0.6	0.1	0.6	0.6	1.8
Rakhine		1.3	2.9	1.8	1.3	0.1	0.3	0.6	0.7
Yangon		1.2	4.2	0.4	0.3	0.1	0.2	0.3	0.7
Shan (S)		3.8	7.2	2.7	0.7	0.1	1.0	0.8	1.5
Shan (N)			10.2	2.0	1.1	0.1	1.1	0.5	0.8
Shan (E)		4.1	6.4	3.8	0.7	0.1	1.0	0.5	0.6
Ayeyarwady		1.7	6.3	1.0	0.4	0.1	0.9	0.3	1.0
Nay Pyi Taw		3.6	13.4	3.1	0.9	0.1	0.6	0.9	2.0
2015	(3)	3.0	8.4	1.8	0.8	0.1	0.7	0.6	1.5
2015	(4)	152384	4175	92394	384	4315	338	28663	743
		(1)	Morbidity 1	ate per 1000	Population				

Table (15.1) Indicators for Prevention of Accidents and Injuries(2014-2015)

Mortality rate per 100,000 Population (2)

(3) Rate for Union

(4) Actual number for Union

ii			Preve	ention of	Accident	and Injur	y (2014-2	015)	
Regions an	ıd	Burns/	ns/ Scalds Drowning		Suid	cide	Assault		
States		(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)
Kachin		0.7	0.5	0.1	5.6	0.1	3.3	0.8	1.8
Kayah		0.9	0.4	0.1	4.6	0.0	2.1	0.3	0.4
Kayin		0.7	0.7	0.1	8.6	0.1	8.0	0.8	1.4
Chin		0.9	0.6	0.1	4.8	0.0	2.2	0.5	2.4
Sagaing		0.6	0.4	0.1	4.2	0.1	2.4	0.8	1.9
Tanintharyi		0.6	0.1	0.1	8.6	0.1	4.3	0.6	1.8
Bago		0.5	0.4	0.1	6.7	0.1	3.2	1.3	2.8
Magway		0.5	0.5	0.0	2.9	0.0	1.8	0.7	1.8
Mandalay		0.5	0.5	0.0	3.2	0.1	2.3	1.1	1.0
Mon		0.5	0.6	0.1	6.9	0.0	2.7	0.6	1.2
Rakhine		0.6	0.5	0.1	7.5	0.1	2.6	0.8	1.8
Yangon		0.2	0.2	0.0	3.6	0.0	1.0	1.1	0.8
Shan (S)		0.6	0.8	0.1	3.2	0.1	3.9	0.5	0.9
Shan (N)		0.5	0.7	0.0	3.5	0.1	2.5	0.5	1.0
Shan (E)		0.4	0.0	0.0	2.1	0.0	1.8	0.7	1.0
Ayeyarwady		0.4	0.6	0.1	7.3	0.0	1.4	0.7	1.6
Nay Pyi Taw		0.5	1.0	0.1	4.3	0.0	3.3	1.1	2.3
2014	(3)	0.5	0.5	0.1	5.1	0.0	2.5	0.9	1.5
2011	(4)	24239	239	3350	2502	2423	1212	43039	758
Kachin		0.7	1.3	0.1	6.2	0.1	2.6	1.1	2.2
Kayah		1.1	0.0	0.1	3.8	0.0	2.4	0.4	3.1
Kayin		0.7	1.3	0.1	8.5	0.1	7.0	1.2	1.9
Chin		0.9	0.6	0.1	5.6	0.0	2.0	0.6	2.2
Sagaing		0.6	0.4	0.1	6.4	0.1	2.8	0.7	1.5
Tanintharyi		0.6	0.7	0.1	6.8	0.1	3.6	0.9	1.7
Bago		0.5	0.7	0.1	7.9	0.1	3.4	1.2	2.4
Magway		0.5	0.4	0.0	3.6	0.0	2.0	0.6	1.5
Mandalay		0.4	0.4	0.0	2.7	0.1	1.8	1.1	1.5
Mon		0.4	0.4	0.1	8.4	0.1	2.1	0.6	1.5
Rakhine		0.7	0.4	0.1	8.1	0.0	2.7	0.7	2.3
Yangon		0.2	0.2	0.0	3.6	0.0	1.0	1.1	0.6
Shan (S)		0.7 0.5	0.4	0.0	2.4	0.1	3.4	0.4	0.5
	Shan (N)		0.5	0.0	2.1	0.1	2.6	0.5	1.2
Shan (E)		0.4	0.1	0.0	2.5	0.0	2.7	0.6	1.0
Ayeyarwady		0.4 0.5	0.3	0.1	8.4	0.0	1.9	0.8	0.9
Nay Pyi Taw	Nay Pyi Taw		0.7	0.0	3.2	0.0	3.3	1.1	2.5
2015	(3)	0.5	0.5	0.1	5.5	0.1	2.4	0.9	1.5
	(4)	24345	238	3795	2765	2706	1224	43639	733
	(1) Morbidity rate per 1000 Population								

Table (15.2) Indicators for Prevention of Accidents and Injuries(2014-2015)

Mortality rate per 100,000 Population (2)

(3) Rate for Union

Actual number for Union (4)

Mental Health (2014-2015)									
Regions and			Per 100	0 Population					
States	Psychosis	Depression	Anxiety Neurosis	Alcoholic Dependence	Epilepsy	Mental retardation			
Kachin	0.06	0.03	0.03	0.42	0.03	0.06			
Kayah	0.14	0.01	0.00	0.90	0.07	0.26			
Kayin	0.09	0.09	0.09	1.31	0.05	0.06			
Chin	0.18	0.04	0.04	0.58	0.03	0.25			
Sagaing	0.09	0.02	0.06	0.68	0.06	0.08			
Tanintharyi	0.21	0.07	0.05	1.28	0.09	0.13			
Bago	0.07	0.04	0.07	1.00	0.03	0.06			
Magway	0.06	0.03	0.05	0.96	0.04	0.06			
Mandalay	0.05	0.03	0.03	0.44	0.02	0.03			
Mon	0.06	0.03	0.02	0.38	0.02	0.04			
Rakhine	0.17	0.18	0.19	1.00	0.03	0.08			
Yangon	0.02	0.02	0.05	0.96	0.07	0.02			
Shan (S)	0.08	0.08	0.11	3.32	0.09	0.11			
Shan (N)	0.05	0.02	0.02	0.15	0.03	0.02			
Shan (E)	0.04	0.03	0.19	0.16	0.04	0.00			
Ayeyarwady	0.05	0.01	0.04	0.44	0.03	0.05			
Nay Pyi Taw	0.04	0.01	0.05	0.82	0.05	0.02			
2014	0.07	0.04	0.06	0.84	0.04	0.06			
Kachin	0.05	0.01	0.02	0.59	0.04	0.06			
Kayah	0.14	0.03	0.09	1.24	0.04	0.27			
Kayin	0.10	0.03	0.10	0.85	0.04	0.07			
Chin	0.14	0.05	0.14	1.08	0.05	0.18			
Sagaing	0.07	0.02	0.03	0.77	0.04	0.06			
Tanintharyi	0.23	0.07	0.09	2.43	0.09	0.16			
Bago	0.07	0.05	0.08	1.16	0.05	0.06			
Magway	0.09	0.10	0.10	0.87	0.03	0.09			
Mandalay	0.15	0.07	0.08	0.81	0.03	0.05			
Mon	0.08	0.04	0.03	0.49	0.03	0.05			
Rakhine	0.19	0.13	0.13	0.98	0.06	0.09			
Yangon	0.03	0.05	0.04	0.96	0.11	0.03			
Shan (S)	0.09	0.09	0.31	1.88	0.09	0.14			
Shan (N)	0.04	0.01	0.01	0.27	0.03	0.04			
Shan (E)	0.03	0.04	0.06	0.26	0.05	0.02			
Ayeyarwady	0.05	0.01	0.05	0.42	0.02	0.05			
Nay Pyi Taw	0.05	0.02	0.05	1.71	0.11	0.06			
2015	0.09	0.05	0.08	0.90	0.05	0.06			

Table (16) Indicators for Mental Health(2014-2015)

Preven	Prevention and Control of Hearing Prevention and Control of Hearing Impairment (2014) Hearing Impairment (2015)											
	_				_		nt (2015)					
Regions and States	Morbidity rate of congenital hearing defect (per 1000 live births)	Morbidity rate of chronic ear discharges (per 1000 population)	Morbidity rate of hearing impairment (per 1000 population)		Morbidity rate of congenital hearing defect (per 1000 live births)	Morbidity rate of chronic ear discharges (per 1000 population)	Morbidity rate of hearing impairment (per 1000 population)					
Kachin	0.00	0.04	0.04		0.17	0.05	0.03					
Kayah	0.17	0.05	0.24		0.14	0.07	0.16					
Kayin	0.00	0.02	0.01		0.00	0.01	0.01					
Chin	0.23	0.08	0.20		0.08	0.05	0.21					
Sagaing	0.02	0.02	0.03		0.02	0.01	0.02					
Tanintharyi	0.24	0.02	0.07		0.04	0.01	0.10					
Bago	0.23	0.02	0.10		0.01	0.01	0.08					
Magway	0.14	0.02	0.08		0.35	0.02	0.07					
Mandalay	0.06	0.03	0.03		0.22	0.02	0.03					
Mon	0.29	0.01	0.01		0.05	0.00	0.01					
Rakhine	0.66	0.06	0.06		0.39	0.04	0.04					
Yangon	0.03	0.00	0.00		0.02	0.01	0.00					
Shan (S)	0.24	0.06	0.09		0.12	0.06	0.11					
Shan (N)	0.09	0.03	0.01		0.03	0.02	0.01					
Shan (E)	0.24	0.01	0.03		0.00	0.02	0.03					
Ayeyarwady	0.29	0.01	0.12		0.05	0.02	0.07					
Nay Pyi Taw	0.06	0.00	0.02		0.00	0.01	0.02					
2014	0.17	0.02	0.05	2015	0.11	0.02	0.05					

Table (17) Indicators for Prevention and Control of Hearing Impairment(2014-2015)

Enviro	onmenta	al Sanita	ation (2	014)		Env		ntal Sa 2015)	nitation
Regions and States	popula impr lat	oportion ation acc oved sar rines (%	ess to hitary	Proportion of Population access to improved Drinking Water(%)		Proportion of population access to improved sanitary latrines (%)*			Proportion of Population access to improved Drinking Water(%)
	Union	Urban	Rural	Union		Union	Urban	Rural	Union
Kachin	72.1	78.1	69.6	87.3		72.2	68.5	73.6	88.9
Kayah	69.7	82.5	65.3	69.1		71.0	78.2	68.1	68.8
Kayin	54.5	59.3	53.8	74.7		55.9	66.2	54.5	67.9
Chin	68.6	63.4	69.9	79.4		67.9	82.4	64.4	79.7
Sagaing	62.8	73.6	60.8	77.3		63.4	69.1	62.4	75.7
Tanintharyi	59.7	64.6	58.2	74.2		59.9	59.8	59.9	73.9
Bago	58.7	62.3	58.0	81.9		58.1	64.3	56.9	82.5
Magway	61.1	69.1	59.9	86.2		60.8	67.5	59.7	91.1
Mandalay	63.5	68.3	61.6	88.9		63.3	67.9	61.4	91.9
Mon	60.0	65.8	58.0	84.0		60.7	65.5	59.8	85.4
Rakhine	30.8	53.0	27.2	58.9		35.0	61.5	30.8	56.1
Yangon	66.6	67.0	65.9	89.2		65.1	67.1	61.4	91.8
Shan (S)	61.1	67.6	59.1	78.7		61.2	63.0	60.6	75.1
Shan (N)	55.0	65.4	51.5	73.4		54.7	51.5	55.8	74.4
Shan (E)	63.7	87.2	56.0	73.9		60.2	73.3	55.9	64.8
Ayeyarwady	55.2	61.1	54.4	71.3		55.0	61.4	54.0	66.4
Nay Pyi Taw	69.4	89.9	62.5	94.3		71.0	89.3	64.9	91.7
2014	59.2	66.8	56.7	80.1	2015	59.3	65.9	57.1	79.8

Table (18) Indicators for Environmental Sanitation(2014-2015)

*Population access to improved sanitary latrine was calculated as number of latrine multiplied by average number of household member from 2014 census.

	Health Education Services (2014)												
	Advocacy	Meeting	Exhibitions a	and Contests	Public	Talks	Production/Distribution of IEC materials						
Regions and States	Average number of monthly health education activities in the township	Average number of health education activities conducted by a basic health staff per year	Average number of monthly health education activities in the township	Average number of health education activities conducted by a basic health staff per year	Average number of monthly health education activities in the township	Average number of health education activities conducted by a basic health staff per year	Average number of monthly health education activities in the township	Average number of health education activities conducted by a basic health staff per year					
Kachin	18	7	0.3	0.1	26	10	5	2					
Kayah	16	4	0.4	0.1	12	3	1	0					
Kayin	57	7	0.2	0.0	35	5	8	1					
Chin	32	6	0.4	0.1	25	4	2	0					
Sagaing	34	6	0.1	0.0	66	13	5	1					
Tanintharyi	54	10	0.5	0.1	44	8	14	3					
Bago	49	8	0.3	0.0	70	11	18	3					
Magway	40	6	0.5	0.1	53	8	10	1					
Mandalay	52	9	0.3	0.1	69	12	7	1					
Mon	51	8	0.5	0.1	42	6	15	2					
Rakhine	60	10	0.4	0.1	35	6	10	2					
Yangon	38	15	0.7	0.3	29	11	13	5					
Shan (S)	26	6	0.2	0.0	52	13	5	1					
Shan (N)	19	8	0.8	0.3	32	13	3	1					
Shan (E)	9	4	0.2	0.1	17	7	3	1					
Ayeyarwady	65	8	0.6	0.1	88	11	16	2					
Nay Pyi Taw	43	10	0.4	0.1	73	17	10	2					
2014	40	8	0.4	0.1	50	10	9	2					

Table (19.1) Indicators for Health Education(2014)

	Health Education Services (2015)												
	Advocacy	Meeting	Exhibitions a	Exhibitions and Contests		Talks	Production/Distribution of IEC materials						
Regions and States	Average number of monthly health education activities in the township	Average number of health education activities conducted by a basic health staff per year	Average number of monthly health education activities in the township	Average number of health education activities conducted by a basic health staff per year	Average number of monthly health education activities in the township	Average number of health education activities conducted by a basic health staff per year	Average number of monthly health education activities in the township	Average number of health education activities conducted by a basic health staff per year					
Kachin	23	9	0.1	0.1	32	12	9	3					
Kayah	18	4	0.5	0.1	22	5	3	1					
Kayin	84	11	0.4	0.0	51	7	14	2					
Chin	42	7	0.9	0.1	41	6	6	1					
Sagaing	48	8	0.4	0.1	95	16	11	2					
Tanintharyi	74	14	0.1	0.0	60	11	21	4					
Bago	65	9	0.7	0.1	112	16	34	5					
Magway	59	10	0.4	0.1	71	12	16	3					
Mandalay	65	10	0.6	0.1	85	13	13	2					
Mon	72	9	0.2	0.0	62	8	15	2					
Rakhine	76	12	0.4	0.1	43	7	10	2					
Yangon	38	13	0.5	0.2	36	12	16	6					
Shan (S)	49	12	0.3	0.1	72	17	11	3					
Shan (N)	25	8	0.1	0.0	36	12	8	3					
Shan (E)	12	6	0.3	0.1	20	10	3	2					
Ayeyarwady	91	11	1.0	0.1	114	13	19	2					
Nay Pyi Taw	63	19	0.1	0.0	93	28	37	11					
2015	53	12	0.5	0.1	67	16	15	3					

Table (19.2) Indicators for Health Education(2015)