

Nigeria - Demographic and Health Survey, 2003, Fourth Round

National Population Commission (NPC) - Federal Government of Nigeria (FGN)

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Overview

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PRODUCTION DATE

2004-04-01

Overview

ABSTRACT

The 2003 Nigeria Demographic and Health Survey (2003 NDHS) is the third national Demographic and Health Survey (DHS) in a series under the worldwide Demographic and Health Surveys programme. The first Nigeria DHS survey was conducted in 1990. Funding for the 2003 NDHS survey was provided by the U.S. Agency for International Development (USAID/Nigeria), while technical assistance was provided by ORC Macro. The United Nations Population Fund (UNFPA) and United Nations Children's Fund (UNICEF) also provided logistical support. Fieldwork for the survey took place between March and September 2003 in selected clusters nationwide.

The major objective of the 2003 NDHS, which is a follow-up to the 1999 NDHS, is to obtain and provide information on fertility, fertility preferences, use and knowledge of family planning methods, maternal and childhood health, maternal and childhood mortality, breastfeeding practices, nutrition, knowledge of HIV/AIDS, and other health issues. Compared with the 1999 NDHS, the 2003 NDHS has a wider scope. For example, unlike the 1999 survey, the 2003 survey includes a module on malaria and

another on testing for salt. In addition, the 2003 data are geo-referenced to allow for more detailed geographical analysis. Other innovations of the 2003 NDHS include the concurrent processing of data even as fieldwork was ongoing.

This innovation served a dual purpose by facilitating field checks for errors and hastening the process of data entry and analysis. As may be expected, the findings of the 2003 NDHS are more comprehensive than findings for the two previous DHS surveys conducted in the country. Indeed, the production of the survey report within nine months after the completion of fieldwork is unprecedented, making the findings the most timely and up to date. The enforcement of standards and consistency and a response rate of more than 90 percent also make the findings very reliable. In addition to presenting national estimates, the report provides estimates of key indicators of fertility, mortality, and health for rural and urban areas in Nigeria and for the six geo-political zones.

Overall, the report provides information on a number of key topics to guide planners, policymakers, programme managers and researchers in the planning, implementation, monitoring, and evaluation of population and health programmes in Nigeria. Highlights of the 2003 NDHS indicate on the one hand a national total fertility rate of 5.7, and on the other hand, a national infant mortality rate of 100 deaths per 1,000 live births and an under-five mortality rate of 203 deaths per 1,000 live births. The gap between knowledge and use of family planning methods is still wide. Knowledge of HIV/AIDS remains high. The unprecedented success of the 2003 NDHS was made possible by the contributions of a number of organizations and individuals.

the survey.

KIND OF DATA

Census/enumeration data [cen]

UNITS OF ANALYSIS

Individuals, Households

Scope

NOTES

The 2008 Demographic and Health Survey was designed to provide estimates for key indicators such as:

HOUSEHOLD: The household questionnaire (see External resources) for demographic and Health Survey, 2008 included a schedule for collecting household characteristics, demographic and socioeconomic information e.g age, sex, educational attainment, and current school attendance dwelling characteristics, source of water supply, and sanitation facilities and household possessions, and some neglected tropical diseases that affect the population of Nigeria.

MEN: The men questionnaire (see External resources) for demographic and Health Survey, 2008 model men data respondent background, reproduction, contraception marriage and sexual activity, fertility preference, employment and gender roles, HIV/AIDS, other health issues and adult mortality.

WOMEN: The women questionnaire (see External resources) for demographic and Health Survey, 2008 included select demographic and health outcomes, e.g contraceptive use and the receipt of health care services during pregnancy, at delivery, and in the postnatal period, fertility, infant and child mortality immunization levels use of family planning breastfeeding practices nutritional status of mothers and young children use of mosquito nets, female genital cutting, maternal and child health domestic violence and sexual activity and awareness behaviour regarding AIDS and other sexually transmitted infections in Nigeria.

Also included Information on children like birth weight, child vaccinations, and treatment practices for children who have the three most common childhood diseases: acute respiratory infection (ARI), fever, and diarrhoea. Many early childhood deaths can be prevented by immunising children against preventable diseases and by ensuring that children receive prompt and appropriate treatment.

TOPICS

Topic	Vocabulary	URI
economic conditions and indicators [1.2]	CESSDA	http://www.nesstar.org/rdf/common
economic systems and development [1.4]	CESSDA	http://www.nesstar.org/rdf/common
rural economics [1.6]	CESSDA	http://www.nesstar.org/rdf/common
employment [3.1]	CESSDA	http://www.nesstar.org/rdf/common
unemployment [3.5]	CESSDA	http://www.nesstar.org/rdf/common
working conditions [3.6]	CESSDA	http://www.nesstar.org/rdf/common
basic skills education [6.1]	CESSDA	http://www.nesstar.org/rdf/common
compulsory and pre-school education [6.2]	CESSDA	http://www.nesstar.org/rdf/common
general health [8.4]	CESSDA	http://www.nesstar.org/rdf/common
health care and medical treatment [8.5]	CESSDA	http://www.nesstar.org/rdf/common
children [12.1]	CESSDA	http://www.nesstar.org/rdf/common
elderly [12.2]	CESSDA	http://www.nesstar.org/rdf/common
gender and gender roles [12.6]	CESSDA	http://www.nesstar.org/rdf/common
youth [12.10]	CESSDA	http://www.nesstar.org/rdf/common
religion and values [13.5]	CESSDA	http://www.nesstar.org/rdf/common
censuses [14.1]	CESSDA	http://www.nesstar.org/rdf/common
fertility [14.2]	CESSDA	http://www.nesstar.org/rdf/common
morbidity and mortality [14.4]	CESSDA	http://www.nesstar.org/rdf/common

Coverage

GEOGRAPHIC COVERAGE (1)

National

GEOGRAPHIC COVERAGE (2)

Zone

GEOGRAPHIC COVERAGE (3)

State

GEOGRAPHIC UNIT

Household member

UNIVERSE (1)

Household members

UNIVERSE (2)

Women's age 15-49

UNIVERSE (3)

Men age 15-59

UNIVERSE (4)

Children ages 0 - 5

Producers and Sponsors

PRIMARY INVESTIGATOR(S)

Name	Affiliation
National Population Commission (NPC)	Federal Government of Nigeria (FGN)

OTHER PRODUCER(S)

Name	Affiliation	Role
United States Agency for International Development in Nigeria	United States Government,	Support
United Nations Children's Fund	United States Government,	Support
ICF Macro	Calverton, Maryland, USA	Technical assistance
PARIS21		Metadata Producer
National Bureau of Statistics	Federal Government of Nigeria (FGN)	Metadata Documentation

FUNDING

Name	Abbreviation	Role
President's Emergency Plan for AIDS Relief	PEPFAR	funding
United Nations Population Fund	UNFPA	funding
MEASURE DHS Project	MEASURE	funding

OTHER ACKNOWLEDGEMENTS

Name	Affiliation	Role
Federal Ministry of Health	Federal Government of Nigeria (FGN)	Support
National Bureau of Statistics,	Federal Government of Nigeria (FGN)	Support

Name	Affiliation	Role
Akintola Williams Deloitte		Accounting and disbursement services

Metadata Production

METADATA PRODUCED BY

Name	Abbreviation	Affiliation	Role
National Bureau of Statistics	NBS	Federal Government of Nigeria (FGN)	Metadata Producer

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2010-06-24

DDI DOCUMENT VERSION

Version 1.0 (June, 2010)

DDI DOCUMENT ID

DDI-NGA-NBS-DHS-2010-v1.0

Sampling

Sampling Procedure

The primary sampling unit (PSU), or cluster, for the 2003 NDHS is defined as one or more EAs from the 1991 census frame. A minimum requirement of 50 households per cluster was imposed on the design; in the case of less than 50 households, a contiguous EA was added. The number of clusters in each state was not allocated in proportion to the state's population because of the need to obtain estimates for each of the six zones. Since Nigeria is a country where the majority of the population resides in rural areas, the number of clusters allocated to the urban areas in five out of the six zones was increased in order to obtain reasonable urban estimates.

The target of the 2003 NDHS sample was to obtain completed interviews with about 8,250 women. Based on the level of nonresponse found in the 1999 Nigeria DHS survey, a target of 7,935 households was set. When the sample was implemented, three clusters could not be visited because of communal clashes, so 7,864 households were selected, in which all women age 15-49 were eligible to be interviewed. To obtain estimates of fertility and child mortality with a reasonable level of precision, a minimum of 1,200 completed interviews with women was desired in each zone. In each state, the number of households was not distributed proportionally between urban and rural areas. Also, in six designated states, a minimum of 350 completed interviews were targeted to provide selected indicators.

The 2003 NDHS sample was selected using a stratified, two-stage cluster design. A total of 365 clusters were selected, 165 in urban and 200 in rural areas. Table A.1 shows the distribution of clusters selected for the 2003 NDHS. Once the number of households was allocated to each state by urban and rural areas, the numbers of clusters was calculated based on an average sample take of 20 completed women's interviews (in 19 selected households) in urban areas, and 25 completed interviews (in 24 selected households) in rural areas. In each urban or rural area in a given state, clusters were selected systematically with equal probability. The selection was done using the following formula:

In every third household selected, all men age 15-59 listed in the household were eligible to be interviewed. Based on data from the 1999 NDHS, this was expected to produce a total of about 2,800 successfully completed male interviews in the 2003 NDHS.

NOTE:

See the formula page 233 and more about the sampling procedure in table A1 page 232 in the report attached in external resources.

Deviations from Sample Design

No deviation was reported in the survey report use for the documentation.

Response Rate

The household and individual response rates for the 2003 NDHS. A total of 7,864 households were selected for the sample, of which 7,327 were found.

The shortfall is largely due to structures that were found to be vacant. Of the 7,327 existing households, 7,225 were successfully interviewed, yielding a household response rate of 99 percent. In these households, 7,985 women were identified as eligible for the individual interview. Interviews were completed with 95 percent of them. Of the 2,572 eligible men identified, 91 percent were successfully interviewed.

There is little difference between urban and rural response rates.

NOTE:

Results of the household and individual interviews response rates for the 2003 NDHS are shown in Table 1.2 in the report page 36 attached as external resources.

Questionnaires

Overview

Three questionnaires were used for the 2003 NDHS:

The Household Questionnaire

The Women's Questionnaire age 15-49

The Men's Questionnaire age 15-59.

The content of these questionnaires was based on the model questionnaires developed by the MEASURE DHS+ programme for use in countries with low levels of contraceptive use.

The adapted questionnaires were translated from English into the three major languages (Hausa, Igbo, and Yoruba) and pretested during November 2002.

Data Collection

Data Collection Dates

Start	End	Cycle
2003-03-03	2003-08-05	Five months

Time Periods

Start	End	Cycle
2003		5 years

Data Collection Mode

Face-to-face [f2f]

DATA COLLECTION NOTES

Over 100 people were recruited by the NPC to serve as supervisors, field editors, male and female interviewers, quality control personnel, and reserve interviewers. Efforts were made to recruit highcalibre personnel who came from all of the 36 states and the FCT to ensure appropriate linguistic and cultural diversity. They all participated in the main interviewer training, which was conducted from February 17 to March 8, 2003. The training was conducted in English and included lectures, presentations by outside experts, practical demonstrations, and practice interviewing in small groups.

The practice interviews were conducted in the languages that the questionnaires were translated into: English, Hausa, Igbo, and Yoruba.

Practice in certain less common dialects was also accomplished by translating directly from the English questionnaires. All of the field staff participated in three days of field practice. Finally, a series of special lectures was held specifically for the group comprising supervisors, field editors, quality control personnel, and field coordinators.

Fieldwork for the 2003 NDHS took place over a five-month period, from March to August 2003.

Twelve interviewing teams carried out data collection. Each team consisted of one team supervisor, one field editor, four female interviewers, one male interviewer, and one driver. Special care was taken to monitor the quality of data collection. First, the field editor was responsible for reviewing all questionnaires for quality and consistency before the team's departure from the cluster.

Data Collectors

Name	Abbreviation	Affiliation
National Population Commission	NPC	Federal Government of Nigeria (FGN)

SUPERVISION

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Twelve staff assigned from the NPC coordinated fieldwork activities and visited the teams at regular intervals to monitor the work. In addition, quality control personnel independently reinterviewed selected households after the departure of the teams. These checks were performed periodically through the duration of the fieldwork. ORC Macro also participated in field supervision.

Data Processing

Data Editing

The processing of the 2003 NDHS results began shortly after the fieldwork commenced. Completed questionnaires were returned periodically from the field to NPC headquarters in Abuja, where they were entered and edited by data processing personnel who were specially trained for this task.

The data processing personnel included two supervisors, a questionnaire administrator (who ensured that the expected numbers of questionnaires from all clusters were received), three office editors, 12 data entry operators, and a secondary editor.

The concurrent processing of the data was an advantage since the NPC was able to advise field teams of problems detected during the data entry. In particular, tables were generated to check various data quality parameters. As a result, specific feedback was given to the teams to improve performance. The data entry and editing phase of the survey was completed in September 2003.

Other Processing

This innovation served a dual purpose by facilitating field checks for errors and hastening the process of data entry and analysis. As may be expected, the findings of the 2003 NDHS are more comprehensive than findings for the two previous DHS surveys conducted in the country. Indeed, the production of the survey report within nine months after the completion of fieldwork is unprecedented, making the findings the most timely and up to date. The enforcement of standards and consistency and a response rate of more than 90 percent also make the findings very reliable. In addition to presenting national estimates, the report provides estimates of key indicators of fertility, mortality, and health for rural and urban areas in Nigeria and for the six geo-political zones.

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Data Appraisal

Estimates of Sampling Error

Sampling errors for the 2003 NDHS are calculated for selected variables considered to be of primary interest for woman's survey and for man's surveys, respectively. The results are presented in this appendix for the country as a whole, for urban and rural areas, and for each of the 6 regions. For each variable, the type of statistic (mean, proportion, or rate) and the base population are given in Table B.1.

Tables B.2 to B.10 present the value of the statistic (R), its standard error (SE), the number of unweighted (N) and weighted (WN) cases, the design effect (DEFT), the relative standard error (SE/R), and the 95 percent confidence limits ($R \pm 2SE$), for each variable. The DEFT is considered undefined when the standard error considering simple random sample is zero (when the estimate is close to 0 or 1).

In the case of the total fertility rate, the number of unweighted cases is not relevant, as there is no known unweighted value for woman-years of exposure to childbearing. The confidence interval (e.g., as calculated for children ever born to women aged 40-49) can be interpreted as follows: the overall average from the national sample is 6.808 and its standard error is 0.134.

Therefore, to obtain the 95 percent confidence limits, one adds and subtracts twice the standard error to the sample estimate, i.e., $6.808 \pm 2 \times 0.134$. There is a high probability (95 percent) that the true average number of children ever born to all women aged 40 to 49 is between 6.540 and 7.077.

Sampling errors are analyzed for the national woman sample and for two separate groups of estimates:

- (1) means and proportions, and
- (2) complex demographic rates.

The relative standard errors (SE/R) for the means and proportions range between 1.1 percent and 32.7 percent with an average of 6.36 percent; the highest relative standard errors are for estimates of very low values (e.g., currently using female sterilization). If estimates of very low values (less than 10 percent) were removed, then the average drops to 4.2 percent. So in general, the relative standard error for most estimates for the country as a whole is small, except for estimates of very small proportions. The relative standard error for the total fertility rate is small, 2.5 percent. However, for the mortality rates, the average relative standard error is much higher, 6.04 percent.

There are differentials in the relative standard error for the estimates of sub-populations. For example, for the variable want no more children, the relative standard errors as a percent of the estimated mean for the whole country, and for the urban areas are 4.9 percent and 6.1 percent, respectively. For the total sample, the value of the design effect (DEFT), averaged over all variables, is 1.78 which means that, due to multi-stage clustering of the sample, the average standard error is increased by a factor of 1.78 over that in an equivalent simple random sample.

Note: Further table on this can be seen in Appendix Bs page 239 to 248 in the report attached to external resources.

Other forms of Data Appraisal

Data quality tables in Appendix D in the report attached to external resources.

Related Materials

Questionnaires

Demographic and Health Survey Household Questionnaire-2003

Title	Demographic and Health Survey Household Questionnaire-2003
Author(s)	National Population Commission (NPC)
Date	2010-06-24T09:25
Country	Nigeria
Language	English
Contributor(s)	National Population Commission (NPC) , ICF Macro , Federal Ministry of Health (FMH) , National Bureau of Statistics (NBS)
Publisher(s)	National Population Commission (NPC) , ICF Macro
Description	Demographic and Health survey on demographic and socioeconomic characteristics of the population in the households sampled 2003
Table of contents	The Household Questionnaire: HOUSEHOLD SCHEDULE SUPPORT FOR SICK PEOPLE SUPPORT FOR PERSONS WHO HAVE DIED SUPPORT FOR ORPHANS AND VULNERABLE CHILDREN CODING CATEGORIES WEIGHT AND HEIGHT MEASUREMENT FOR CHILDREN AGE 0-5 WEIGHT AND HEIGHT MEASUREMENT FOR WOMEN AGE 15-49
Filename	DHS-2003-Doc/DHS-2003-HH-Questionnaire.pdf

Demographic and Health Survey Men Questionnaire-2003

Title	Demographic and Health Survey Men Questionnaire-2003
Author(s)	National Population Commission (NPC)
Date	2010-06-24T09:40
Country	Nigeria
Language	English
Contributor(s)	National Population Commission (NPC) , ICF Macro , Federal Ministry of Health (FMH) , National Bureau of Statistics (NBS)
Publisher(s)	National Population Commission (NPC) , ICF Macro
Description	Demographic and Health Survey, 2003 model men questionnaire with HIV/AIDS and malaria
Table of contents	SECTION 1. RESPONDENT'S BACKGROUND SECTION 2. REPRODUCTION SECTION 3. CONTRACEPTION SECTION 4. MARRIAGE AND SEXUAL ACTIVITY SECTION 5. FERTILITY PREFERENCES SECTION 6. EMPLOYMENT AND GENDER ROLES SECTION 7. HIV/AIDS SECTION 8. OTHER HEALTH ISSUES SECTION 9. MATERNAL AND ADULT MORTALITY
Filename	DHS-2003-Doc/DHS-2003-Men-Questionnaire.pdf

Demographic and Health Survey Women Questionnaire-2003

Title	Demographic and Health Survey Women Questionnaire-2003
Author(s)	National Population Commission (NPC)

Date	2010-06-24T10:10
Country	Nigeria
Language	English
Contributor(s)	National Population Commission (NPC) , ICF Macro , Federal Ministry of Health (FMH) , National Bureau of Statistics (NBS)
Publisher(s)	National Population Commission (NPC) , ICF Macro
Description	Demographic and Health Survey, 2003 model women questionnaire with HIV/AIDS and malaria. This chapter presents information on factors affecting women's status such as employment, type of earnings, women's control over cash earnings, and the magnitude of their earnings relative to those of their partner's. This chapter also defines three summary indices of women's empowerment derived from women's responses.
Description	The indices are based on the number of household decisions in which the respondent participates, her opinion on the number of circumstances in which a woman is justified in refusing to have sexual intercourse with her husband, and her opinion on the number of reasons wife beating is justified. The ranking of women on these three indices is then related to select demographic and health outcomes, including contraceptive use and the receipt of health care services during pregnancy, at delivery, and in the postnatal period.
Table of contents	SECTION 1. RESPONDENT'S BACKGROUND SECTION 2. REPRODUCTION SECTION 3. CONTRACEPTION SECTION 4. PREGNANCY AND POSTNATAL CARE SECTION 5. CHILD IMMUNIZATION AND HEALTH AND CHILD'S AND WOMAN'S NUTRITION SECTION 6. MARRIAGE AND SEXUAL ACTIVITY SECTION 7. FERTILITY PREFERENCES SECTION 8. HUSBAND'S BACKGROUND AND WOMAN'S WORK SECTION 9. HIV/AIDS SECTION 10. OTHER HEALTH ISSUES FEMALE GENITAL CUTTING SECTION 11. OBSTETRIC FISTULA (VVF) MODULE - LONG SECTION 12. MATERNAL AND ADULT MORTALITY SECTION 13. DOMESTIC VIOLENCE
Filename	DHS-2003-Doc/DHS-2003-Women-Questionnaire.pdf

Reports

Demographic and Health Survey Report-2003

Title Demographic and Health Survey Report-2003
 Author(s) National Population Commission (NPC)
 Date 2010-06-24T10:10
 Country Nigeria
 Language English
 Contributor(s) National Population Commission (NPC) , ICF Macro , Federal Ministry of Health (FMH) , National Bureau of Statistics (NBS)
 Publisher(s) National Population Commission (NPC) , ICF Macro
 Description The 2003 Nigeria Demographic and Health Survey (DHS) main report

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Other materials

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