

# UZBEKISTAN

## COUNTRY PROFILE



World Health Organization

Department of Making Pregnancy Safer



### List of indicators

■ Proportion of registered births
Antenatal care
✗ Number of antenatal care visits
Skilled Birth Attendant at delivery
✗ Utilization of services
✗ Utilization of services by subregion
■ Utilization of services by subregion (map)
■ Utilization of services by wealth quintile
Place of delivery
✗ Place of delivery
C-section
✗ Utilization of services
✗ Utilization of services by subregion
■ Utilization of services by subregion (map)
■ Utilization of services by wealth quintile
Perinatal mortality Rate
■ Total perinatal mortality rate
■ Perinatal mortality rate by subregion
■ Perinatal mortality rate by wealth quintile
✗ Neonatal and post neonatal mortality rate

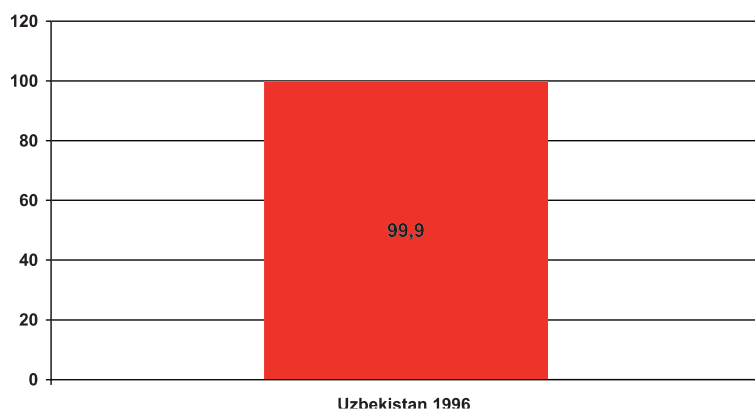
Nutrition
✗ Anaemia in pregnancy
Low Birth Weight
■ Low Birth Weight
Malaria in pregnancy
■ Use of ITN
HIV in pregnancy
■ HIV counselling for pregnant women in ANC visits
Fertility
✗ Total fertility rate
Teenage pregnancy
✗ Teenage pregnancy
✗ Teenage pregnancy by age
✗ Teenage pregnancy by subregion
Family planning
✗ Contraceptive use
✗ Contraceptive use by age
✗ Contraceptive use by subregion

### ANALYSIS OF DEMOGRAPHIC AND HEALTH SURVEYS

For data from the Demographic and Health Surveys, years refer to the years surveys were conducted. Estimates are based on data referring to five years preceding the surveys.

Coverage of interventions (DHS Uzbekistan, 1996)

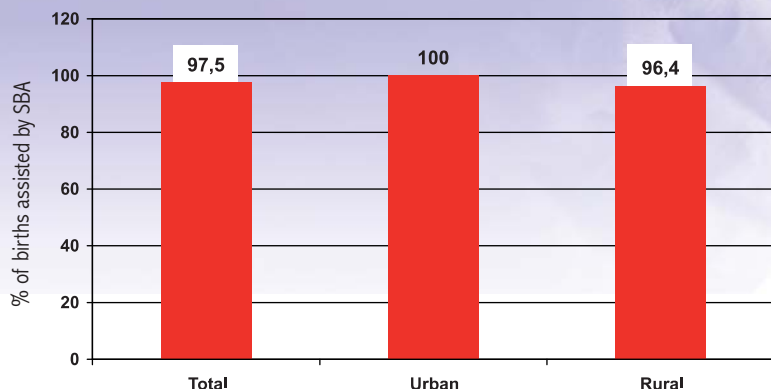
### Number of antenatal care (ANC) visits



The 1996 survey showed that approximately 100% of women received ANC from a skilled provider.

## ■ SKILLED BIRTH ATTENDANT *at delivery*

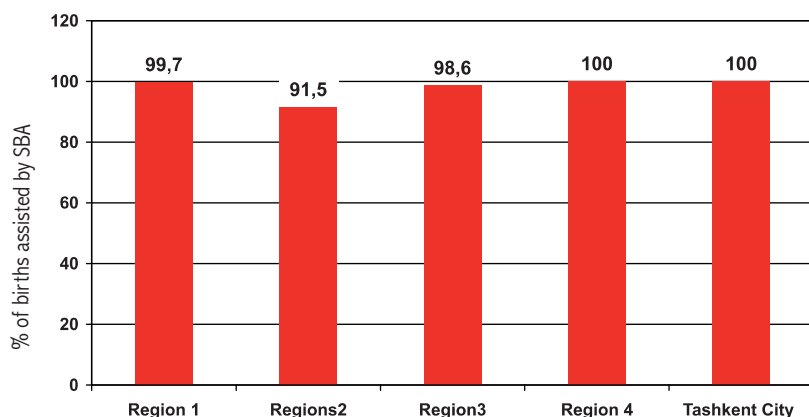
### Utilization of services (1996)



Three quarters of all maternal deaths occur during delivery and the immediate post-partum period. One of the most critical interventions for safe motherhood is to ensure skilled care provided by skilled professionals during pregnancy and childbirth.

The latest survey indicated that 98% of childbirths were assisted by a skilled birth attendant (SBA).

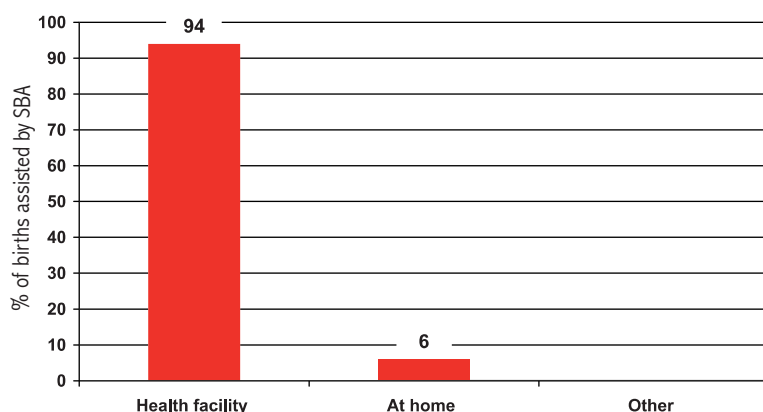
### Utilization of services by subregion (1996)



At subregional level, utilization of SBA was high among all areas (91.5-100%).

## ■ Place of delivery

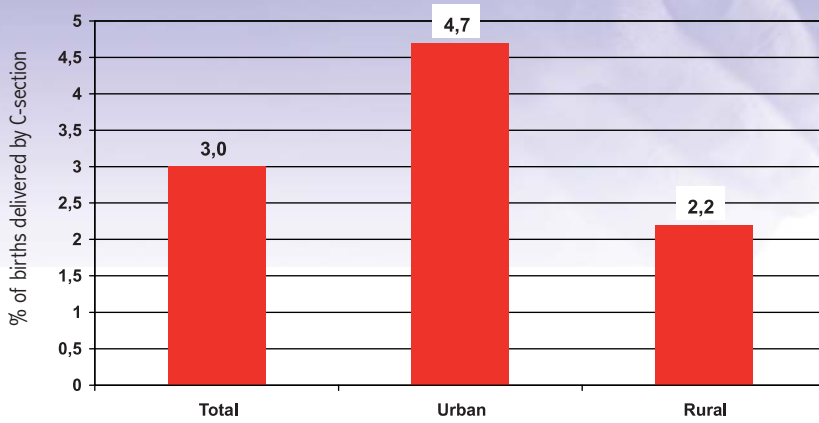
(1996)



The data showed approximately 94% of births in the five years preceding the survey occurred in health facilities.

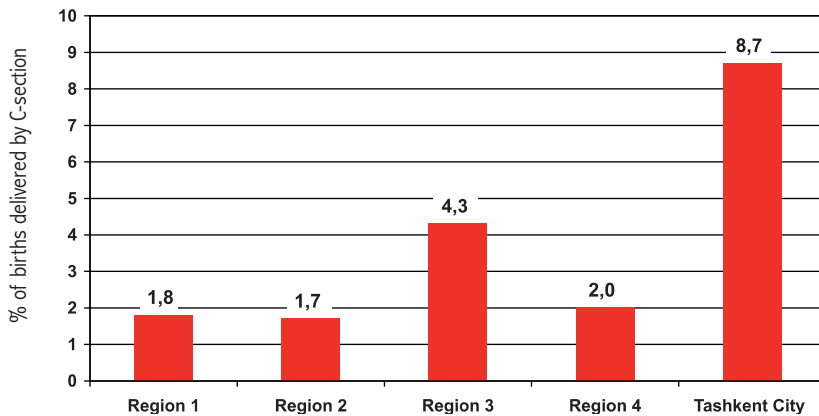
## ■ Caesarean section (C-section)

### Utilization of services (1996)



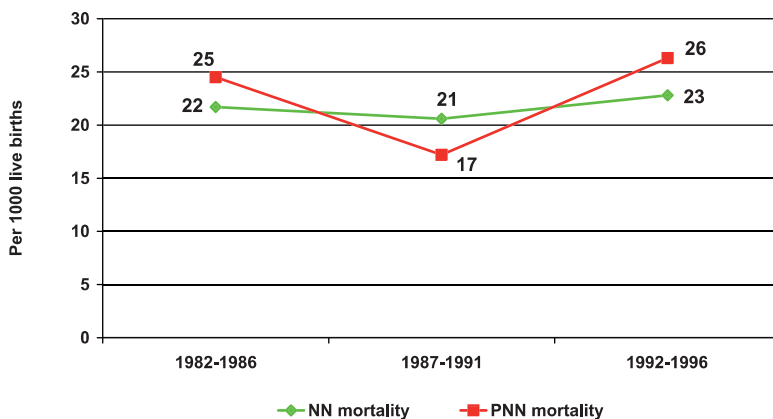
At national level, approximately 3% of births is delivered by C-section. The proportion of C-section was reported to have been approximately 3 percentage points higher in urban areas than in rural areas.

### Utilization of services BY SUBREGION (1996)



At subregional level, the proportion of C-section ranged from 1.7% in region 2 to 8.7% in Tashkent city. This difference can be translated into a 5-fold difference between these areas.

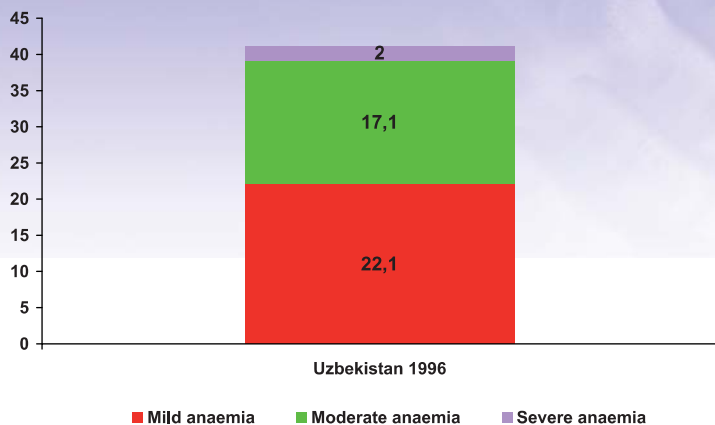
## ■ INFANT MORTALITY RATE



The survey in 1996 reported that the neonatal mortality rate was 23, and the post neonatal mortality was 26 per 1000 live births.

## NUTRITION

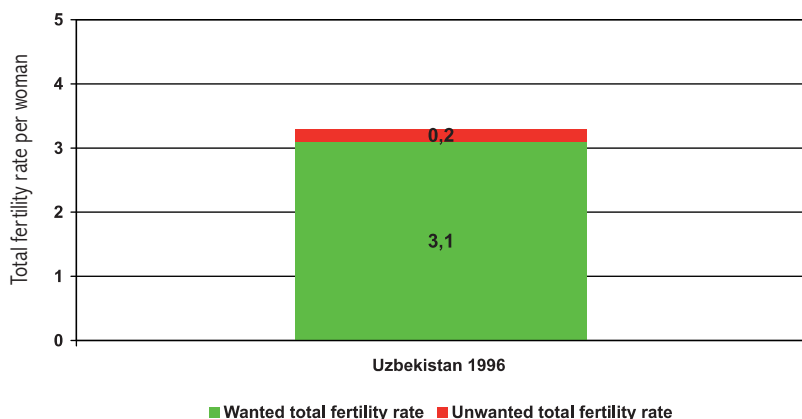
### ANAEMIA IN PREGNANCY (1996)



According to the latest survey, 41% of pregnant women were reported to be anaemic. Of those who were anaemic, the majority were reported to suffer from mild anaemia (22%)

## FERTILITY

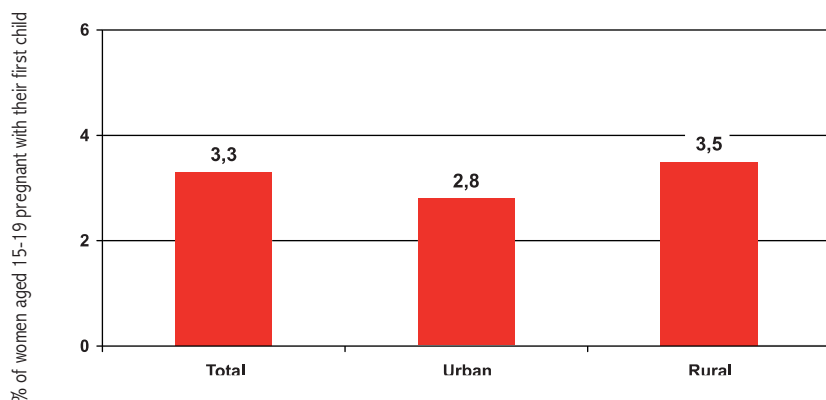
### TOTAL FERTILITY RATE (1996)



Total fertility rate consists of wanted total fertility rate and unwanted total fertility rate. The average Tanzanian women would have approximately 3 children by the end of her reproductive age. Of those, according to the survey in 1996, approximately 3 are reported to be wanted fertility.

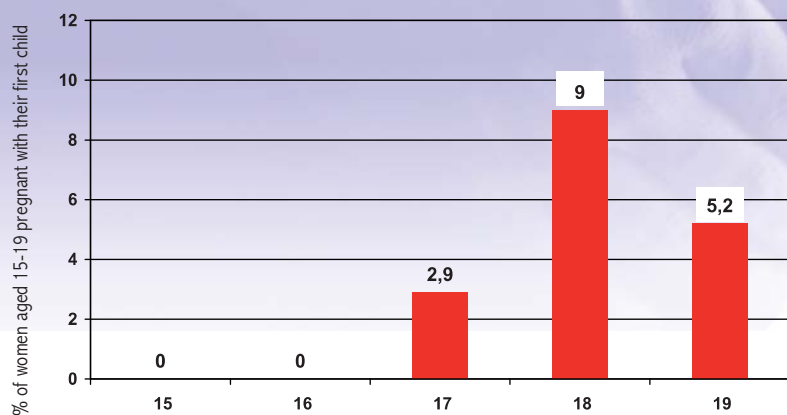
## TEENAGE PREGNANCY

### TEENAGE PREGNANCY (1996)



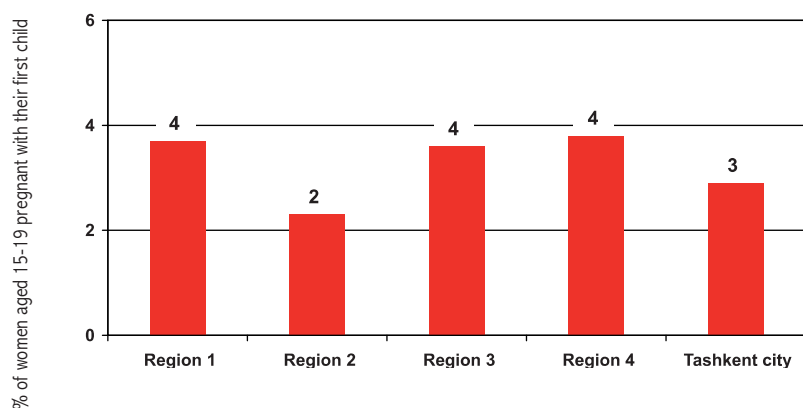
At national level, approximately 3% of women aged 15–19 were reported to be currently pregnant with their first child. Teenage pregnancy was higher in rural areas.

### TEENAGE PREGNANCY BY age (1996)



By age, the highest proportion was observed in women aged 18.

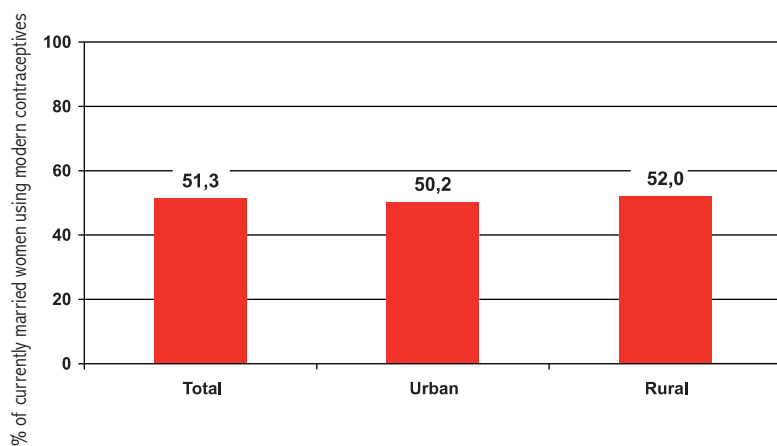
### TEENPREGNANCY BY SUBREGION (1996)



By regional level, the proportion ranged from 2% in Region 2 to approximately 4% in Regions 1, 3 and 4.

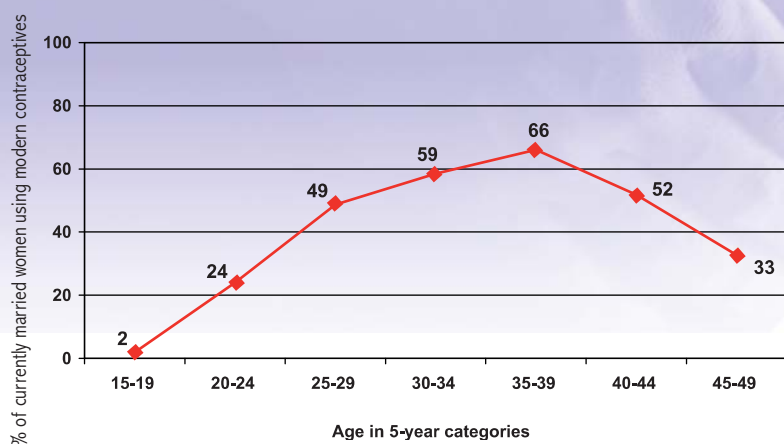
## ■ FAMILY PLANNING

### Use of MODERN CONTRACEPTIVES (1996)



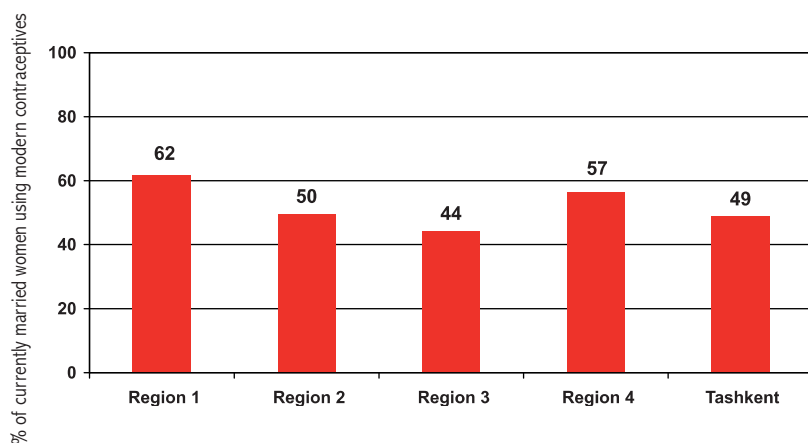
At national level, the latest survey showed that 51% of currently married women are reported to use modern contraceptive methods. The modern contraceptive use was higher in rural areas by 1.8 percentage points than in urban areas.

### Use of MODERN CONTRACEPTIVES BY age (1996)



Data from the five surveys indicated that the prevalence steadily increased with age and peaked at the 35–39 age group. This increase was followed by a decline to the 45–49 age group.

### Use of MODERN CONTRACEPTIVES BY subregion (1996)



At regional level, the prevalence ranged from 44% in Region 3 to 62% in Region 1. The survey also indicated that less than 50% of women used modern contraceptive methods in Region 3 and Tashkent city.

## ■ REFERENCE

Institute of Obstetrics and Gynecology [Uzbekistan] and Macro International Inc. 1997. Uzbekistan Demographic and Health Survey, 1996. Calverton, Maryland: Institute of Obstetrics and Gynecology and Macro International Inc.