

COMOROS

COUNTRY PROFILE



World Health Organization

Department of Making Pregnancy Safer



List of indicators

■ Proportion of births occurring in urban and rural areas
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

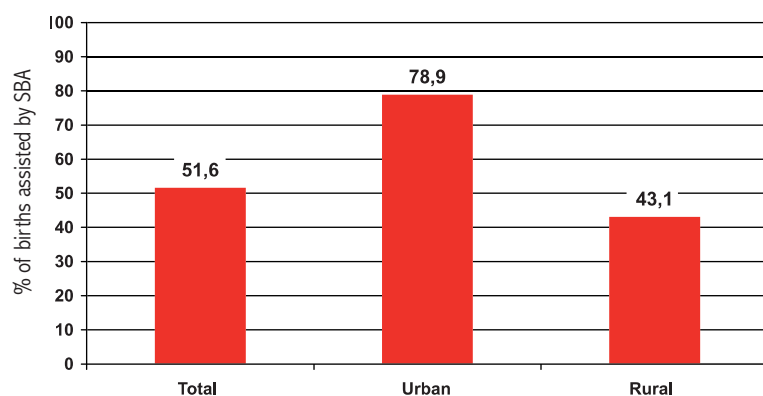
ANALYSIS OF DEMOGRAPHIC AND HEALTH SURVEYS

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 Comoros, 1996)

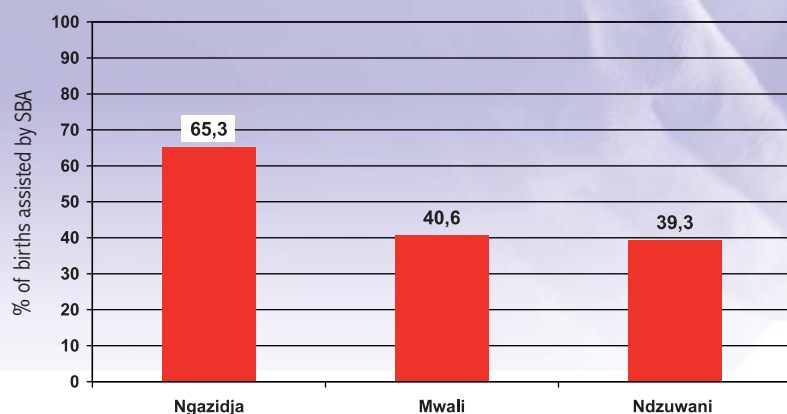
Skilled Birth Attendant (SBA) at delivery

Utilization of services (1996)



The latest survey indicates that 52% of childbirths were assisted by a skilled birth attendant (SBA), showing a higher proportion of SBA-assisted childbirths in urban areas by approximately 27 percentage points.

Utilization of services BY SUBREGION (1996)

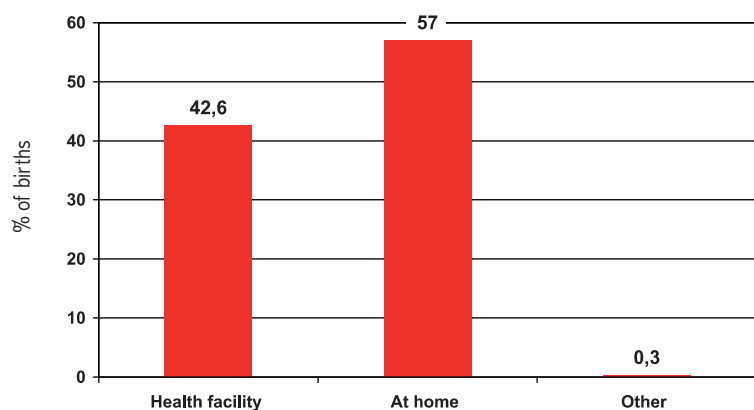


At subregional level, the survey indicated that the coverage was highest in Ngazidja area (65%), while less than 50% of childbirths were assisted by SBAs in the other two areas.

Source: ORC Macro, 2007. MEASURE DHS STATcompiler. <http://www.measuredhs.com>, September 28 2007.

Place of delivery

(1996)

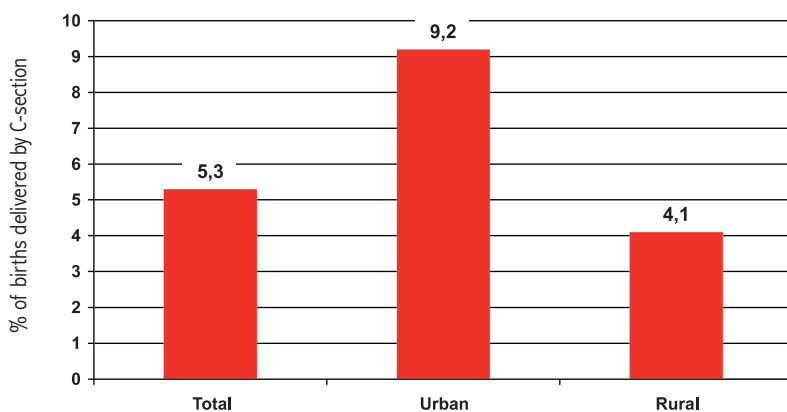


The data showed that less than 50% of births occurred in health facilities.

Source: ORC Macro, 2007. MEASURE DHS STATcompiler. <http://www.measuredhs.com>, September 28 2007.

Caesarean section (C-section)

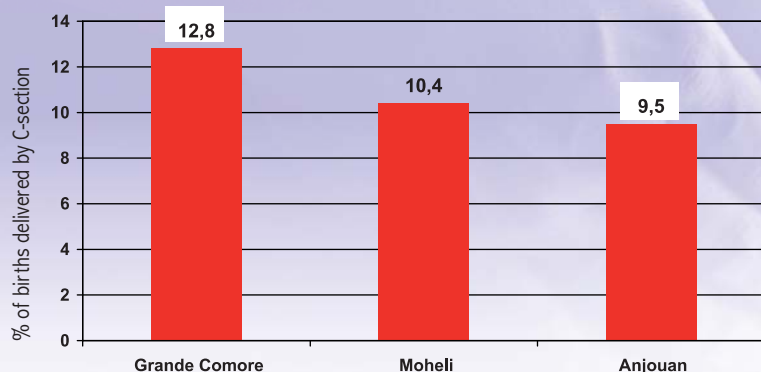
Utilization of services (1996)



At national level, the latest survey showed that approximately 5% of births were delivered by C-section, indicating an approximate 5 percentage points higher proportion in urban areas than in rural areas.

Source: ORC Macro, 2007. MEASURE DHS STATcompiler. <http://www.measuredhs.com>, September 28 2007.

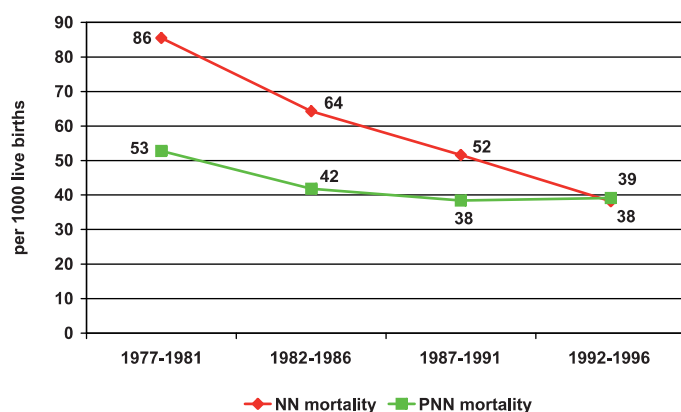
Utilization of services by subregion (1996)



At subregional level, C-section rate ranged from a high of approximately 13% in Grande Comore to a low of 9.5% in Anjouan.

Source: ORC Macro, 2007. MEASURE DHS STATcompiler. <http://www.measuredhs.com>, September 28 2007.

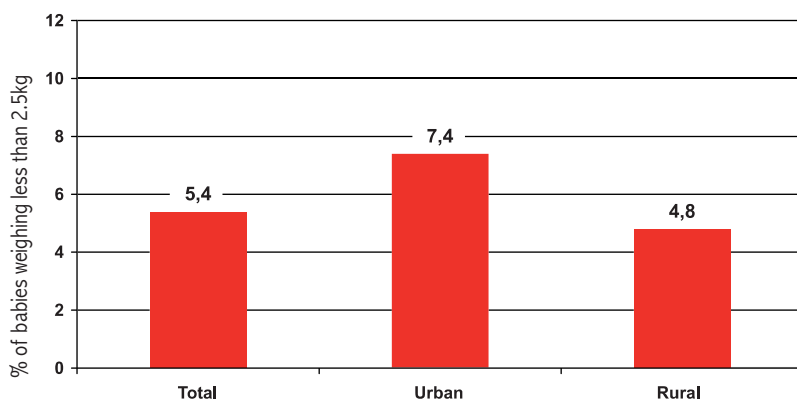
■ Neonatal (NN) and post-neonatal (PNN) mortality rate



According to the survey in 1996, the neonatal mortality rate was 38, and the post neonatal mortality was 39 per 1000 live births.

Source: ORC Macro, 2007. MEASURE DHS STATcompiler. <http://www.measuredhs.com>, September 28 2007.

■ Low Birth Weight

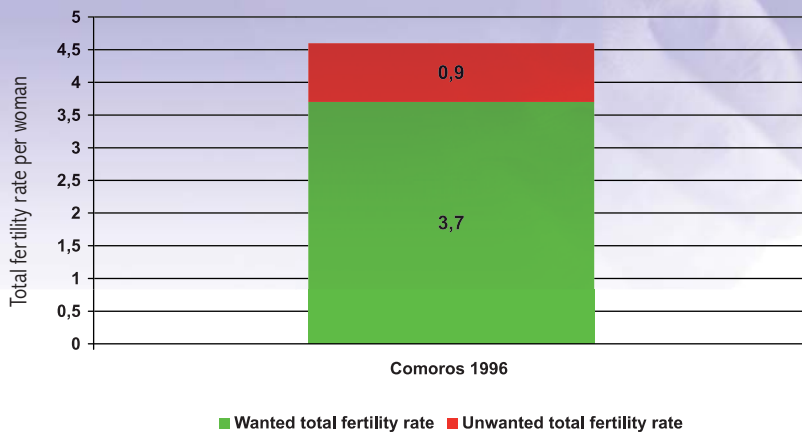


The survey in 1996 indicated that, of those who were weighed, 5.4% were reported to weigh less than 2.5 kg at birth.

Source: ORC Macro, 2007. MEASURE DHS STATcompiler. <http://www.measuredhs.com>, September 28 2007.

■ FERTILITY

TOTAL FERTILITY RATE (1996)

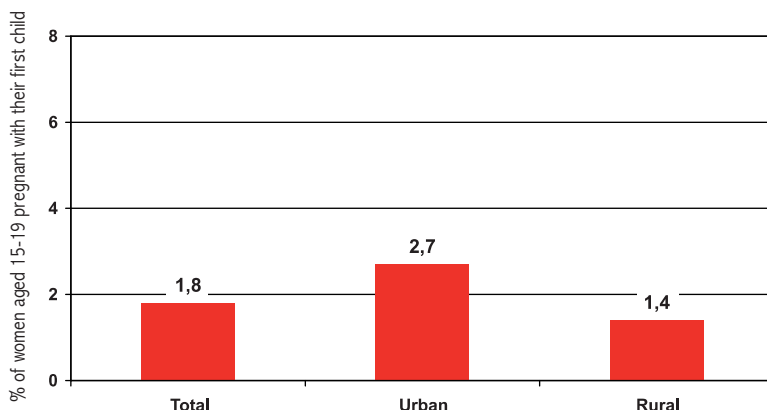


Total fertility rate consists of wanted total fertility rate and unwanted total fertility rate. The average women in Comoros would have approximately 5 children by the end of her reproductive age. Of those, according to the survey in 1996, approximately 4 were reported to be wanted pregnancy.

Source: ORC Macro, 2007. MEASURE DHS STATcompiler. <http://www.measuredhs.com>, September 28 2007.

■ TEENAGE PREGNANCY

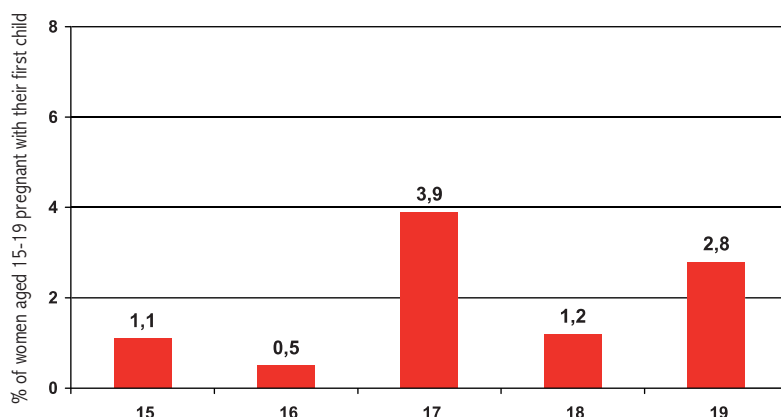
TEENAGE PREGNANCY (1996)



At national level, the survey indicated that approximately 2% of women aged 15 to 19 were reported to be currently pregnant with their first child, showing a higher teenage pregnancy rate in urban areas.

Source: ORC Macro, 2007. MEASURE DHS STATcompiler. <http://www.measuredhs.com>, September 28 2007.

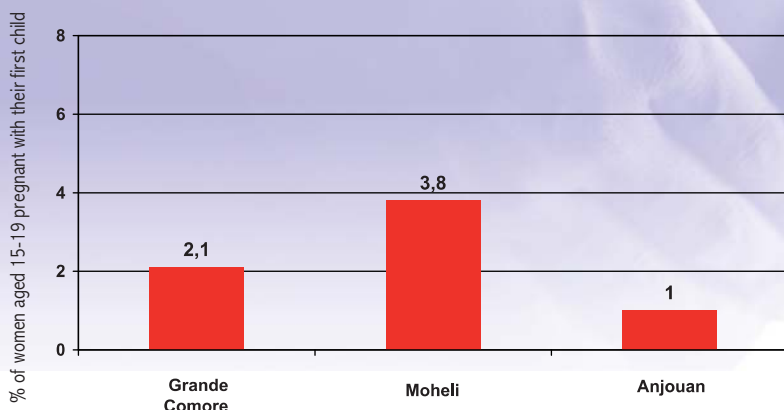
TEENAGE PREGNANCY BY AGE (1996)



Women aged 17 were reported to have the highest proportion of teenage pregnancy prevalence among other age groups (3.9%).

Source: ORC Macro, 2007. MEASURE DHS STATcompiler. <http://www.measuredhs.com>, September 28 2007.

TEENAGE PREGNANCY BY SUBREGION (1996)

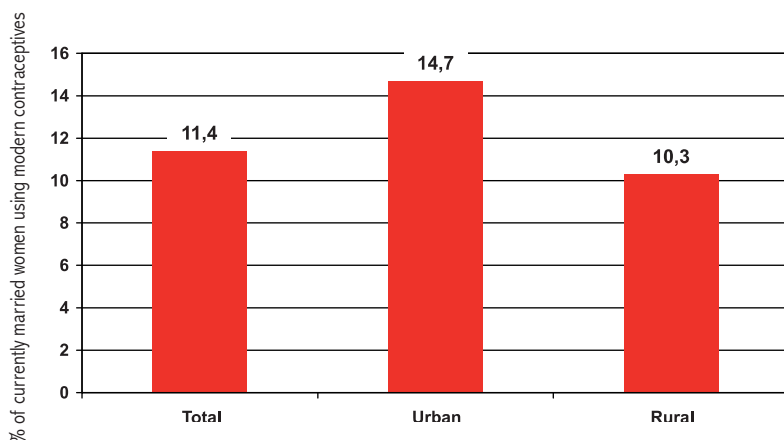


At subregional level, the proportion varied from 1% in Anjouan to approximately 4% in Moheli.

Source: ORC Macro, 2007. MEASURE DHS STATcompiler. <http://www.measuredhs.com>, September 28 2007.

FAMILY PLANNING

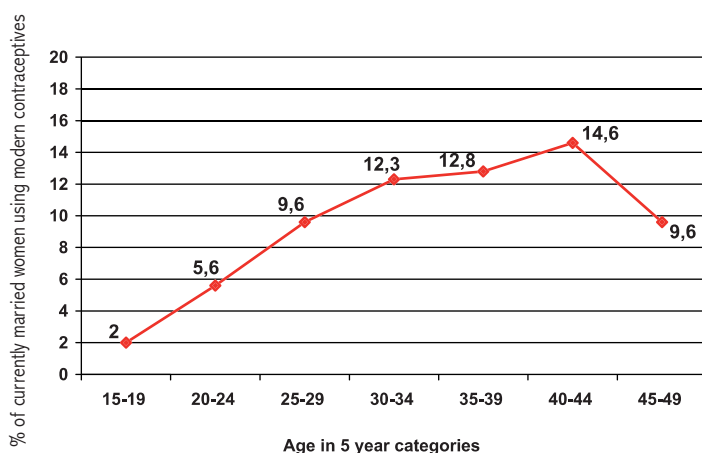
MODERN CONTRACEPTIVE use (1996)



At national level, approximately 11% of currently married women were reported to use modern contraceptive methods. The prevalence was higher among women living in urban areas than those in rural areas.

Source: ORC Macro, 2007. MEASURE DHS STATcompiler. <http://www.measuredhs.com>, September 28 2007.

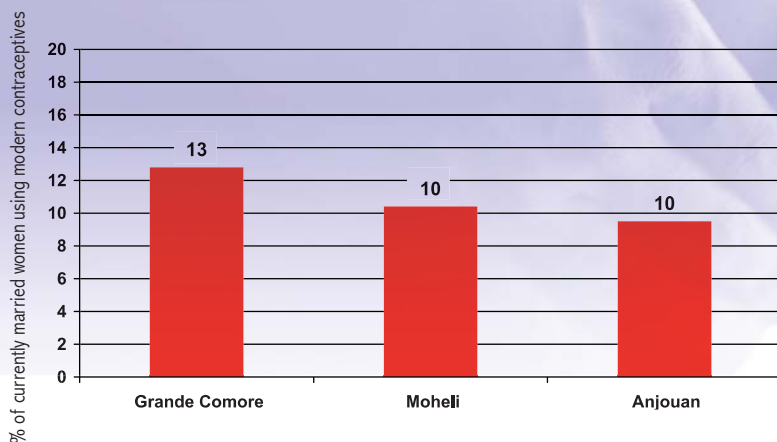
MODERN CONTRACEPTIVE use BY age (1996)



Data indicated that the prevalence increased with age and peaked at the 40 to 44 age group (approximately 15%). This was followed by a decline towards the 45 to 49 age group (approximately 10%).

Source: ORC Macro, 2007. MEASURE DHS STATcompiler. <http://www.measuredhs.com>, September 28 2007.

MODERN CONTRACEPTIVE use BY SUBREGION (1996)



At subregional level, the Grande Comore area was observed with 1.3 times higher use of modern contraceptive methods than the other two areas.

Source: ORC Macro, 2007. MEASURE DHS STATcompiler. <http://www.measuredhs.com>, September 28 2007.

■ REFERENCE

Mondoha, Kassim A., Juan Schoemaker et Monique Ban'ère. 1997. Enquête Démographique et de Santé, Comores 1996. Calverton, Maryland : Centre National de Documentation et de Recherche Scientifique et Macro International Inc.