

**Saude Inan no Bebe Foin Moris no
Utilizasaun Telefone iha Distritu
Manufahi no Ainaro**

**Peskiza kona ba konesimentu, hahalok, no kobertura ba
programa Mobile Moms/Liga Inan**

**Relatóriu estendidu
Septembru 2012**

Health Alliance International



USAID
FROM THE AMERICAN PEOPLE



Tabela konteúdu

Tabela konteúdu	i
Agradesimentu	ii
Sumáriu peskiza nian	1
Background	3
Métodu	4
Sumáriu Rezultadu Peskiza	7
Rekomendasaun	17
Konkluzau.....	18
List of Tables—English	19
List of Tables—Tetun	21
Tabela Rezultadu Kona ba Demografia Partisipante	23
Tabela Rezultadu Kona ba Saúde Inan no Bebé Foin Moris	27
Tabela Rezultadu Kona ba Planeamentu Familiár	41
Tabela Rezultadu Kona ba Pose no Telemovel iha Manufahi and Ainaro	47
Tabela Rezultadu Kona ba Preferénsia Mensajen SMS iha Distritu Manufahi	53

Agradesimentu

Produzaun relatóriu ne'e ezije ekipa boot ida, tantu iha Timor-Leste no iha Sede *Health Alliance International* (HAI) iha Seattle, Washington. HAI hakarak atu fó agradesimentu sinseru ida ba ema sira hotu ne'ebé mak halo ona relatóriu ne'e:

Dezeñu peskiza

Marisa Harrison
Suzan Thompson
Mary Anne Mercer
Mark Micek

Membru ekipa no supervisor peskiza ()*

Adelina Belo
Agucao Fernandes
Carlito da Costa
Cecilia F. do Carmo
Filomena Mendonca
Henrique Amaral
Juliao Soares

Luizinha Soares*
Maria Chang
Maria Diana li do Santos
Maria Eliza M de Araujo
Marisa Harrison*
Melania Madeira Soares
Paulo Vasconcelos*
Petra Wise*

Ponciano Ximenes Belo
Salvador Torrezao*
Sergio da Silva
Teresinha Sarmento*
Vitoria Neves
Yovita Abuk Bere

Hatama dadus

Barbara J.A. Adelina Soares
Julio Maia
Lucio A.X. Borges
Health Net and HAI team members

Analiza Dadus

Tina Neogi
Marisa Harrison
Gabriella Boyle

Hakerek relatóriu no apoiu adisionál

Suzan Thompson
Marisa Harrison
Beth Elson
Mary Anne Mercer

Health Alliance International mós hakarak fó obrigadu ba Gabinete Peskiza i Desenvolvementu Saúde ba sira-nia konsiderasaun retornu util, Diresaun Nasionál Estatística ba sira-nia apoiu iha dadus sensus, no pesoál sira hosi HealthNet Timor-Leste ne'ebé tulun ona ami hodi halo hotu estudu ne'e.

Sumáriu peskiza nian

Peskiza ne'e fó informasaun importante kona-ba programa xave no indikadór saúde Distritu Manufahi no Ainaro no programa área globál (Distritu kombinadu Manufahi no Ainaro). Jeralmente, maioria ema fetu ba halo tratamentu maixumenus dala ida durante isin-rua, maibé sira la mosu ba atu kompleta komportamentu saúde maternál sira hotu durante isin-rua nein sira hotu simu apoiu durante no hafoin tuur-ahi. Narrativa ne'e ezamina brevemente rezultadu sira-ne'e, no tabela sira tuirmai ne'e hatudu dezeñu ida detailho liu kona-ba saúde maternál no bebé foin moris iha distritu ualu (8) hotu.

Koñesimentu no prátika durante isin-rua

Asesu ba tratamentu durante isin-rua aas: **Feto iha Manufahi no Ainaro 91% halo vizita tratamentu dala ida ka liután tratamentu antenátal (ANC)**. Enkuantu nivel kobertu varidade iha distritu sira, subdistritu ualu hotu hetan kobertura ANC liu husi 80% no barak liu hetan kobertura 90%. Ida-ne'e hanesan rezultadu ne'ebé di'ak, hatudu katak parteira sira iha oportunidade ida atu fó mensajen saúde importante maioria ba fetu sira durante isin-rua. Iha média, **72% hosi fetu iha distritu sira-ne'e filafila halo tratamentu kurakuran dala 4** durante sira-nia isin-rua ikus. Ida-ne'e variasaun luan liu ba subdistritu sira, ho Same iha taxa konkluzaun maka'as liu (83%) no Turiscái iha taxa konkluzaun ANC kí'ik liu (45%).

<i>Persentajen inan ne'ebé ...</i>	Manufahi	Ainaro	Área Programa
Atende vizita ANC ida ka liu	91%	91%	91%
Atende vizita ANC haat ka liu	77%	67%	72%
Simu data estimativa ida entrega durante tratamentu antenátal	74%	96%	85%
Simu vasinasaun TT 2 ka liu durante isin-rua ikus	74%	60%	67%
Simu suplementu besi ruma durante isin-rua	90%	87%	88%
Hemu ai-moruk intestinál parasitoze durante isin-rua	22%	14%	19%
Hatene sinál perigu 2 ka liu durante isin-rua	55%	54%	54%

Durante ANC, fetu sira tenki simu mensajen no servisu importante hanesan fó neo-horis (fó-hanoin) kona-ba sira-nia data estimadu tuur-ahi nian (EDD), tratamentu anti-parasita, vasinasaun tetanus toxoid, no suplementu besi. Sira mós tenki simu informasaun kona-ba sinál perigu durante isin-rua, tuur-ahi, no postpartum ne'ebé tulun fetu atu identifika bainhira sira presiza buka apoiu medikál lalais. Rezultadu hosi peskiza ne'e hatudu katak maske maioria fetu sira hetan ona kurakuran vizita ANC ida, sira la simu servisu mínimu hotu durante sira-nia isin-rua.

Rezultadu ne'e hatudu diferensa entre kobertura relativamente aas kona-ba vizita kuidadu antenatal no servisu saude importante ne'ebé mak tenki fó durante vizita sira-ne'e, hanesan ai-moruk anti-parasita no mensajen edukasaun saude kona-ba sinal perigu durante períodu isin-rua, tuur-ahi no depois de partu.

Prátika saude iha ambiente tuur-ahi

Kuran hosi balun ida husi feto iha Manufahi (48%) mak hetan tulun husi profesionál saude durante tuur-ahi: 32% husi tuur-ahi iha facilidade saude. Ema feto uitoan de'it iha Ainaro mak buka ema profesionál kualifikadu ida bainhira tuur-ahi (38%), maibe relatoriu persentajen atu hanesan tuur-ahi ho facilidade saude (29%).

Prátika saude xave iha durante prosesu partus inklui tratamentu sanitáriu molok ko'a huzar talin, fo susu kedas, no simu konsulta depois de partu husi parteira iha loron rua nia laran. Rezultadu hatudu katak, kobertura komportamentu sei ki'ik hela. Kobertura kada prátika iha Ainaro sei aas liu Manufahi.

<i>Persentajen inan ne'ebé mak ...</i>	Manufahi	Ainaro	Área Programa
Tuur-ahi ho atendimentu kualifikadu	48%	38%	43%
Tuur-ahi iha facilidade saude ida	32%	29%	31%
Tali husar moos	58%	71%	64%
Hasusu kedas hafoin tuur-ahi iha oras 1 nia laran	51%	64%	55%
Simu tratamentu postpartum iha loron 2 nia laran	26%	38%	32%
Hatene sinal perigu iha moris-foun 2 ka liu	42%	37%	40%

Koñesimentu no prátika espasu oan

Espasu oan efetivu mós importante atu hadi'ak saude inan no nia oan sira. Bainhira husu kona-ba períodu tempu ideal hodi fó espasu ba sira-nia oan, **besik 75% relata katak feto ida tenki hein to'o tinan 2 ka liu**, 17% hatete sira bele hein tempu badak ida, no 12% relata sira lahatene. Feto barak iha Manufahi hatete sira hakarak hein tempu naruk entre tuur-ahi: 43% feto sira hakarak hein tinan 3 ka liu. Ema 22% de'it mak hakarak hein tinan 3 iha Ainaro. Ida-ne'e talvés razaun ida katak **nivel prevalénsia kontraseptivu** ba ho labarik ho idade tinan 2 sei aas liu iha **Manufahi (55%) duké iha Ainaro (30%)**.

Aseitasaun no penetrasaun telefone

Peskiza ne'e hatudu katak feto iha asesu ba telefone iha distritu rua ne'e: **feto 69% iha Manufahi no 67% iha Ainaro iha telefone iha uma**. Maski telefone sira-ne'e balu partilla ho membru familia sira, feto sira 70% iha Manufahi no 95% iha Ainaro relata katak ida ka liu telefone uma ne'e pertense ba feto nian rasik. Ida-ne'e hatudu nivel asesu ba telefone aas iha populasaun distritu rua ne'e. Ami husu feto sira ho frekuénsia saida sira uza sira-nia telefone hodi bolu ema seluk no haruka ka simu mensajen SMS.

Feto ne'ebé relata asesu ba telefone uma nian kuaze sira hotu (98%) relata uza telefone atu haruka no simu mensajen SMS, no **liu 72% relata envia testu mensajen loron ida dala ida ka liu.**

Barreira be espeta uza telefone ezamina inklui asesu ba kobertura signal telefone, kapasidade karrega telefone, no potensialmente nivel alfabetizasaun kraik. Peskiza ne'e la hetan sira-ne'e ida mak sai barreira signifikante ba projetu telefone movel. Entre feto sira-ne'e, balu relata iha difikuldade asesu signal: **97% relata katak sira iha kobertura signal iha uma ka la'o durante minutu 5 nia laran.** Ami la husu pergunta ne'e ba feto ne'ebé laiha telefone, tan ne'e ami la hatene se kobertura signal luan loos hanesan rezultadu ne'e ka se rezultadu hatudu katak iha ne'ebé mak iha kobertura, telefone sira sosa uluk tiha ona. Telefone sira barak liu uza loron ida dala ka hamoris hela nune'e bele simu bolun ka mensajen. Enkuantu métodu karrega telefone variadu entre uza eletrisidade, karregamentu solár, bateria no jeradór, liu katoluk rua hosi feto sira karrega telefone iha sira-nia uma.

- ✓ **69% feto iha Manufahi no 67% iha Ainaro iha telefone iha uma**
- ✓ **Hosi feto sira ne'ebé mak iha telefone, 97% relata katak sira hetan signal kobertura tantu iha uma no la'o minutu lima nia laran**
- ✓ **72% hosi feto relata envia testu mensajen loron ida dala ida ka liu**
- ✓ **Tetun mak feto sira 98% husu nu'udar dalen ne'ebé uza hodi simu mensajen saúde**

La'ós surpresa peskiza hatudu **taxa alfabetizasaun dalen ho 68% iha Manufahi no 56% iha Ainaro bele ko'alia no lee Tetun.** Maibé, tanba nivel esperiéncia aas ho haruka no simu testu mensajen (98%) hosi feto sira ne'ebé iha telefone, alfabetizasaun la'ós obstáculos atu uza telefone hodi hakerek testu. Ida-ne'e tanba disponibilidade hosi la'en, oan, viziñu sira, no membru família sira seluk ne'ebé relata tulun feto sira lee Tetun bainhira presiza. Tetun kuaze ema hotu (98%) husu nu'udar dalen atu simu mensajen saúde (opsaun seluk inklui Poertugés, Indonézia, ka dalen lokál sira). Telefone movel la'ós de'it predominante, maibé dala barak liu uza nu'udar instrumentu komunikasaun iha comunidade ida-ne'e.

Background

Iha Fulan-Setembru 2011, Health Alliance International hetan fundu husi USAID atu implementa projetu kuidadu bebe foin moris no inan isin rua iha distritu rua iha Timor-Leste, Manufahi no Ainaro. Objetivu husi projetu Mobile Moms/Liga Inan mak atu redús mortalidade no morbidade inan no oan foin moris ho hadi'ak komportamentu kuidadu saúde ba feto isin-rua. Projetu sei implementa iha tinan haat nia laran husi 30 fulan Setembru 2012 to'o 30 fulan Setembru 2015.

Mortalidade inan no bebe foin moris kontinua sai problema boot iha Timor-Leste: MMR mak inan nain 557 kada 100,000 tuur-ahi no mortalidade neonatal (moris foun) mak 22/1,000 tuur-ahi moris, husi 2009/10 PDS (Peskiza Demográfiku no Saúde). Komprensaun comunidade nian kona-ba kompartamentu saúde optimál durante isin-rua, hanesan matadalan nutrisaun, sinál perigu isin-rua nian, no troka hahalok buka kuidade, sei limitadu. Kontaktu ho parteira sei limitadu vizita kuidadu antenatal (ANC), ne'ebé la permite ba repetisaun no reforsu mensajen

saúde nian ne'ebé mak dala barak liu prodús troka hahalok. Maske, iha ona progresu iha aumentu taxa atendimentu tuur-ahi kualifikadu desde independénsia iha 2002, problema oioin kontinua afeta kapasidade sistema atuál hodi fó ba feto sira kuidadu kualifikadu ho qualidade aas iha tempu sira hahoris, liliu bainhira mosu komplikasaun. Parteira barak mak la hetan formasaun iha kuidadu obstétriku emergjénsia nian (EmOC). Asesu Jeográfiku ba facilidade hahoris nian limitadu tantu komunikaun no transporte ba facilidade sira. Maske ho fornese ho karreta multifungsi iha facilidade tuur-ahí, feto barak laiha transporte atu bá to'o facilidade dala ida iha tuur-ahí.

Projetu Liga Inan sei fasilitakontinuidade kuidadu maternál uza aproximasaun tolu:

- Tulun voluntáriu saúde nasional sira (PSF) kapasita sira atu entrega mensajen **promosaun saúde** iha nivel uma-kain no SISCA.
- Rejista feto isin-rua ne'ebé soi Ka hetan asesu ba telemovel hatama ba sistema automatizadu ne'ebé sei entrega semanalmente **mensajen SMS** promocional saúde bazeia ba etapa jestasionál.
- Hadi'ak no tulun kapasidade parteira sira iha distritu hodi fó **kuidadu obstétiku báziku**.

Objetivu peskiza

Relatóriu ne'e deskreve rezultadu peskiza ne'ebé realize iha fulan Feveireu no Marsu 2012. Peskiza ne'e realiza ho razaun rua: 1) atu avalia nivel atuál kona-ba koñesimentu, prátika, no kobertura servisu saúde iha comunidade, hanesan informasaun atuál kona-ba pose no uza telefone no maneira uza hosi feto ne'ebé iha ona oan ida ho liu ona tinan rua, hodi orienta dezvoltimentu programa, no 2) atu fornese baze dadus hodi halo avaliasaun iha loron ikus. Projetu nia objetivu primeiru no ikus liu (iha kaixa letenbá) sei implementa tantu iha Distritu Ainaro no Manufahi, enkuantu projetu telefone movel sei implementa de'it iha Manufahi. Facilidade peskiza adisionál ida mak kompleta ona iha fulan Janeiru no Feveireu 2012 atu avalia kapasidade facilidade hodi entrega servisu EmOC. Rezultadu estudu ne'e sei publika iha relatóriu seluk ida.

Métodu

Dezvoltimentu kestionáriu

Kestionáriu peskiza halo tuir modelu USAID nian KPC Rapid Catch Survey, kestionáriu estandarte ida ne'ebé uza iha mundu tomak. Pergunta adisionál kona-ba media no prátika iha ámbitu tuur-ahi halo tiha ona no ezame kampu pesoál HAI nian mak halo. Peskiza inklui pergunta kona-ba kuidadu antenatal (inklui númeru tempu no vizita no vasinasaun tetanus toxoid), prátika tuur-ahi (inklui atendimentu tuur-ahi kualifikadu no entrega facilidade sira), fó susu lalais, kuidadu postnatal, fó espasu oan no uza

kontraseptivu, no soi (pose) no uza telemovel. No tan tradusaun ba lian lokál sira intrevistadór sira mak halo ona iha tempu intrevista, maske maioria intrevista halo ho Tetun.

Dezeñu sampling

Peskiza realize iha Distritu Ainaro ho Manufahi no empregadu estratifikadu no sampling previziva. Sampling estratifika tiha uluk iha nivel subdistritu no hafoin área enumerasaun (AE) 8 dezeña kada subdistritu uza dados populasaun husi sensu 2010 nian. Feto total na'in 72-77 intrevista iha kada subdistritu 8 iha Manufahi no Ainaro.

Aldeia asesivel sira iha kada AE nia laran sampling tuir tamañu populasaun, ho populasaun nia tulun rejista husi Xefi Suku lokál. Dala ruma comunidade iha alternativa ida hili tiha bainhira AE dahuluk 1) la iha estrada atu tama ka dook liu husi la'o oras 1 hosi estrada ka 2) aldeia selesionadu orijinalmente laiha partisipante natoon. Bainhira akontese ida uluk ne'e, apoiu hosi AE ida aleatoriamente selesiona hosi suku ida-ne'e nia laran husi AE asesivel ida nia lista. Bainhira akontese ida ikus, ekipa peskiza kontinua ho aldeia tuir mai ne'ebé besik liu.

Hafoin identifika tiha aldeia, uma-kain hahú determina ida husi métodu rua: konta uma-kain no aleatoriamente selesiona ida, ka métodu dulas-botir. Ida uluk uza iha "urban" fatin ne'ebé uma-kain sira naklekar iha estrada barak ne'ebé mak sei halo métodu dulas-botir difisil atu implementa. Iha métodu daruak, supervizór sira sei identifika comunidade nia sentru-área ne'ebé iha número uma sira besik hanesan iha diresaun hotu hanesan identifika ona hosi Xefi Aldeia-no dulas botir ka kaneta, ho botir/kaneta rohan rua hatudu diresaun ekipa par sira atu tuir. Kada par (hasun), iha supervizór ida no intrevistadór ka intrevistadór rua, ne'ebé tuir hanesan liña reta kuandu bele, hosi botir fatin to'o sira alkansa aldeia ninin. Bainhira la'o hela, sira konta uma besik 15 hosi sira-nia dalan. Bainhira sira to'o iha ninin, sira tenki uza osan tahan atu hodi identifika uma ida uluk ne'e no filafali ba uma ne'e hodi hahú prosesu peskiza. Ba métodu rua ne'e, uma adisionál sira identifikadu hanesan odamatan ne'ebé bele haree besik liu hosi odamatan uma inisiál.

Prosesu selesaun no konsentimentu

Inan ne'ebé mak inkluiidu iha peskiza se sira otas entre tinan 15-49 no iha ona oan ida ne'ebé ho otas fulan 24 mai kraik. Se feto rua mak hela hamotuk iha uma ida nia laran, ami intrevista feto ne'ebé nia oan idade ki'ik liu. Se feto ne'ebé prenxe ona kritériu la iha uma, se bele ekipa servisu filafali. Feto elijivel na'in sanulu-resin-noon hasai tiha husi peskiza tanba sira la iha uma no la hein katak nia atu fila ba uma. Informasaun partisipante sira ida-idak fó tuir loloos sira-nia hakarak rasik no ladún iha ema ne'ebé rekuza.

Ekipa peskiza

Intrevistadór sira mai husi pesoál HAI no ekipa rua hosi HealthNet Timor-Leste. Jerente hosi organizaun rua ne'e hola papél hanesan ekipa supervizór. Formasaun hala'o durante loran 4 iha fulan Feveireiru, ho loran ida ba formasaun supervizór no loran adisionál tolu mak inklui supevizór no intrevistadór. Formasaun hala'o husi Marisa Harrison, Beth Elson, no Paul Vasconcelos, pesoál HAI, no kobre abilidade entrevista dí'ak, amostrajen aleatória, konfidensialidade no konsentimentu, no peskiza

kestionériu nia reviu detalladu. Tempu fó atu pratika entrevista, inklui lora balun ida ba teste kampu iha lora datoluk.

Hatama no analiza dados

Hatama dados halo ho EpiInfo 7.0. Analiza prelemináriu ba frekuénsia kestaun xave sira hala’o uza pakote estatística STATA.

Rezultadu peskiza ne’e tetu hotu ona atu akomoda hotu diferensa tamañu populasaun ka tamañu amostrajen entre agrupamentu, entre Subdistritu sira, no entre programa distritu rua. Planu orijinál prevee ona estrata 8 (sub-distritu) no tan sanak 8 feto na’in 9. Iha kazu balu, ami analiza dados ba sanak sira ne’ebé feto na’in 9 la disponivel ba intrevista. Ida-ne’e akontese dala ruma deit, tanba numero populasaun ki’ik husi aldeia balu, ka klima la di’ak ne’ebé hanetik intrevista ba lora tomak ida. Atu kalkula taxa kobertura nivel distritu, ami analiza tiha peskiza nivel subdistritu tuir numeru populasaun subdistritu. Totál área programa analiza tuir numeru relativu distritu rua nian.



Health Alliance International hakarak fó obrigadu ba inan sira hotu ne’ebé partisipa ona iha prosesu peskiza ne’e.

Sumáriu Rezultadu Peskiza

Seksaun 1: Karakterístika no demografia abitasaun husi partisipante peskiza

Totál feto na'in 581 mak intrevista ona iha peskiza ne'e, 293 iha implementasaun inovasaun Distritu Manufahi no 288 iha Distritu Ainaro. Feto bele participa se sira iha oan ho fulan 0-23. Partisipante nia tinan média mak tinan 27.8 no sira ne'e hotu iha otas tinan 16 no 45 (Tabela 1 no Figura 1-3). Média tinan ne'ebé atende eskola mak 6.5, no mos inan iha Manufahi atende tinan 7, tinan ida liu tan tan Ainaro (5.9). Médiu labarik sira ne'ebé moris hosi partisipante peskiza ne'e mak 4.1, no menus uitoan iha Manufahi (3.7) duké iha Ainaro (4.4), maske nune'e ida-ne'e karik tanba amostrajen populasaun iha Ainaro tuan liu uitoan. Iha médiu, feto iha área programa relata tuur-ahi labarik na'in haat no 3.7 mak sei moris.

Maioria feto (83%) relata la servisu sai husi sira-nia uma. Iha variasaun entre distritu rua ho 87% feto iha Manufahi la servisu sai husi uma kompara ho 78% iha Ainaro. Relatóriu kona-ba servisu ne'ebé sira halo sai husi uma bainhira halo kolleta. Persentajen sanulu-resin-ida husi feto iha Ainaro mak iha pozisaun ho saláriu.

Karakterístiku abitasaun no disponibilidade uma-na'in no sasán ne'ebé iha nu'udar indikasaun kondisaun sosioekonómiku jerál husi partisipante peskiza. Peskiza ne'e mós halibur dadus kona-ba materiál uma kakuluk no rai, prezensa husi eletrisidade no sasán sira ne'ebé duravel. 3/4 husi respondente iha distritu Manufahi no Ainaro iha uma kalén (Tabela 2). Husi parte tasi ibun Sub-Distritu Alas, Fatuberlihu, no Hatu-Udo iha persentajen ne'ebé aas liu ba materiál uma kakuluk naturál, karik tanba fasil ba sira asesu ba rekursu naturál no bele fó temperatura ne'ebé malirin liu iha uma laran iha klima tasi-ibun nian ne'ebé manas. Ne-in-nulu persentagen husi feto iha Manufahi no 67% iha Ainaro sira-nia uma la nahe semente (uma rai). Uma ne'ebé nia laran nahe ho ai sei hetan iha uma modelu tradisionál, maibé karik ne'e la hatudu prosperidade maibé ne'e família sira ne'ebé iha pozisaunne'ebé aas iha comunidade sira-nian. Iha 46% feto iha Manufahi no 24% iha Ainaro ne'ebé tama iha peskiza ne'e mak iha eletrisidade iha sira-nia uma. Sira ne'ebé maka iha transporte motorizada menus nafatin ho 18% iha área programa mak iha motorizada no menus husi 2% mak iha karreta ka trek (Tabela 3).

Seksaun 2: Saúde maternál no bebé foin moris

Feto sira hetan pergunta oioin kona-ba sira-nia koñesimentu no utilizaun servisu saúde liu-liu kuidadu durante período isin-rua, partu (tuur-ahi) no mós depois de partu.

KUIDADU ANTENATAL

Kualidade konsultasaun isin rua (antenatal care, ANC) bele sukat liu husi kualifikaun ema ne'ebé hala'o servisu, númeru no frekuénsia vizita ANC, konteúdu husi servisu ne'ebé simu no tipu husi informasaun ne'ebé fornese ba inan sira durante tempu medikál ne'ebé impotante durante isin-rua. Feto sira hetan pergunta iha área hirak ne'e.

Kuase feto hotu iha Manufahi no Ainaro ba hasoru profesionál saúde iha ANC durante sira-nia isin-rua ikus: Manufahi (93%) no Ainaro (91%) (Tabela 4). Iha variasaun entre sub-distritu ho número ne'ebé ki'ik 83% iha Hatu Udo (Ainaro) no 84% iha Turisca (Manufahi). Número husi vizita ANC dala haat (4) ka liu ne'ebé rekomenda durante isin-rua konsidera menus no hatudu variasaun entre distritu rua no entre sub-distritu: 76% husi feto iha Manufahi halo vizita ANC dala haat ka liu kompara ho 67% iha Ainaro, no número ne'e menus to'o 45% iha Sub-Distritu Alas. Número ida ne'e aas liu número indikadór husi sistema saúde nasional nian husi vizita ANC dala haat ka liu, karik tanba indikadór nasional nian prezisa feto sira atu simu vizita ne'e tuir pakote oráriu ida-ida durante trimestre primeiru, ida durante segundu, no rua durante terseiru trimestre ho vizita ANC dala ikus durante fulan ikus isin-rua-la hanesan ami sura número total husi vizita husi pontu bainhira sira halo vizita durante isin-rua.

Fatin tratamentu

Feto barak mak hetan sira-nian ANC liu husi sistema saúde governu nian, ne'ebé gratuita. Iha tipu ne'ebé varia husi facilidade saúde iha sistema governu nian ne'ebé oferese tratamentu ANC: iha ospital referál ida iha Sub-Distritu Maubisse; Sentru Saúde Komunitária (CHC) iha kada sub-distritu iha sub-distritu uaal; Postu Saúde serve liu ba populasau sira iha área remota; no SISCa (*Servisu Integradu Saúde Komunitária*) klínika saúde movel ne'ebé hala'o kada fulan iha postu ne'ebé fiksi iha suku 442 iha Timor-Leste. SISCa supostu konsiste husi parteira ba provizaun ANC nian, maibé grau ba fatin privadu ne'ebé disponivel no parteira nia prezensa variavel no prezisa konsidera. Tuir relatóriu, iha 10% husi feto hotu mak hetan ANC iha SISCa, maske ida-ne'e aas iha Manufahi (16%) duké iha Ainaro (4%) (Tabela 5). Feto barak mak simu ANC iha CHC sub-distritu, maibé signifkamente menus ba feto iha Ainaro (37%) kompara ho Manufahi (62%). Persentajen tolunulu-resin-tolu resposta husi feto iha Ainaro inklui mai ospital hodi hetan ANC, kompara iha Manufahi ne'ebé 14% de'it. Entretantu, ne'e influensia husi 82% husi feto sira iha Maubisse ne'ebé hatete sira ba ANC iha ospital tanba iha ospital referál iha ne'ebá. Feto balun hetan ANC iha uma, ne'ebé la komún maibé dala ruma akontese.

Tempu ba ANC primeiru

Tanba vizita ANC primeiru nu'udar pasajen ba projetu Liga Inan iha Manufahi, ida-ne'e importante atu hatene bainhira feto sira halo vizita primeiru. Ami hetan katak 58% husi feto sira iha Manufahi mai halo sira-nia primeiru ANC iha trimestre primeiru no 34% de'it mak halo hanesan ne'e iha Ainaro (Tabela 6). Feto persentajen neinnulu-resin-ida husi Ainaro mak hein to'o segundu trimestre hodi hetan tratamentu ANC kompara ho 37% iha Manufahi. Se karik feto sira husi Manufahi tama iha programa Mobile Moms/Liga Inan durante sira-nia vizita ANC primeiru, feto barak sei simu mensajen ne'be kompletu, no kuaze feto sira ne'ebé tama iha programa ne'e sei simu kada mensajen ne'ebé sei haruka durante sira-nia trimestre finál.

Asesu servisu durante ANC

Atu avalia qualidade husi tratamentu ANC ne'ebé fornese, feto sira responde ba pergunta kona-ba servisu ne'ebé espesífiku ne'ebé fornese durante sira-nia vizita ANC. Feto sira hatete prátika padraun ANC nian aas tebes hanesan tetu todan, sukat tensaun no koko estómagu, ho liu husi 97% feto husi distritu rua ne'e hatete katak sira simu tratamentu esensial ne'e durante ANC (Tabela 7).

Hetan estimasaun data tuur-ahi (EDD) nian importante ba família atu halo planu tuur-ahi, no ida-ne'e elementu esensial ida hodi garante fetu sira simu mensajen iha tempu isin rua durante programa ne'e. Evidénsia anekdotál sujere katak fetu balu iha Timor-Leste nunca hetan estimasaun data tuur-ahi husi parteira durante ANC, ne'e duni ami presiza determina nivel ne'ebé fetu sira fiar katak sira hetan informasaun ne'e. Prátika fornese EDD konsidera aas iha Ainaro (96%) liu husi Manufahi (74%) (Tabela 8). Totál número ne'ebé menus iha Manufahi liu-liu tanba número ne'ebé menus signifkamente iha Sub-Distritu Same (64%) kompara ho sub-distritu tolu seluk. Investigasaun kle'an sei hala'o iha Same no iha Manufahi tomak atu determina oinsá habelar treinamentu refreskár (refresher training) ne'ebé presiza hodi kalkula data tuur-ahi antes implementa projetu.

Fetu sira hetan pergunta sekarik sira bele temi ho espontáneo simtomas durante isin-rua ne'ebé halo sira tenki buka tratamentu imediatu husi facilidade saúde, no husi ema ne'ebé sira hetan informasaun ne'e. Liu husi meio de número fetu sira (54%) bele identifika rua ka liu sinál perigu ne'ebé relaciona ho isin-rua (Tabela 9). Manufahi ho Ainaro tuir malu iha 54% no 55%. Entretantu, número ne'ebé menus hetan iha sub-distritu balu hanesan Turiscaí (Manufahi) iha 46% no Maubisse (Ainaro) iha 39%.

Vasina Tetanus Toxoid (TT) fó durante isin-rua hodi prevene neonatal tetanus. Protesaun kompletu sei fó ho dose rua inisial ho dose reforsu kada tinan 10, no dose lima konsidera proteje vida tomak. Número husi fetu sira ne'ebé simu injesaun TT dala rua ka liu durante sira-nia isin-rua ikus aas iha Manufahi (74%) liu husi Ainaro (60%); entretantu número vasinasau ba vida tomak husi vasinasau TT dala rua ka liu tuir malu iha 86% no 82% (Tabela 10). Sub-Distritu Hatubuilico no Turiscaí iha número ne'ebé aas liu husi fetu sira ne'ebé nunca simu TT.

Komponente importante husi ANC mak simu aimoruk aumenta raan no ai-moruk lumbriga. Peskiza ne'e hetan katak maioria husi fetu sira simu aimoruk aumenta raan durante isin-rua (tabela 11). Sub-distritu Hatu Udo de'it mak menus husi 85% responde katak sira simu ona aimoruk aumenta raan. Tinan hira liu bá husi survey ne'e, iha menus aimoruk aumenta raan iha Timor-Leste. Iha tinan ida antes peskiza fetu barak simu de'it aimoruk musan 7-10 kada vizita, parese ne'e strategia atu hanesan esforsu ida ba controla forneseimentu aimoruk. Iha distritu rua ne'e, fetu 52% de'it mak hemu ai-moruk aumenta raan ba loron 90 ka liu, ho 45% de'it iha Manufahi hetan suplementasaun iron (besi) loron 90 ka liu Kompara ho Ainaro iha 61%. Peskiza mós hatudu katak maioria fetu barak, 77% iha Manufahi no 84% iha Ainaro, hatete katak sira la simu medikasaun intestinál parasite durante isin-rua (Tabela 12). Entretantu, ne'e la klaru sekarik fetu sira hetan ai-moruk ne'e maibé la hatene ai-moruk ne'e ba saida. Ida ne'e sei hetan investigasaun kle'an no sai nu'udar parte husi programa mensajen testu (SMS).

Infeksaun malaria bele halo afeita rezultadu husi tuur-ahi, inklui abortu spontania, bebé moris sedu no todan la to'o no bebé foin moris mai mate. Iha Timor-Leste estratejia prevensaun primeiru ba malaria durante isin-rua mak uza ITNs (Insecticide Treated Nets)/Moskiteiru ne'ebé trata ona ho insetisida. Fetu sira (70%) ne'ebé tama iha peskiza ne'e hateten sira dala barak ka bebeik toba iha ITN nia laran ho fetu barak liu iha Manufahi (73%) kompara ho Ainaro (67%). Dezanove persentajen (19%) fetu sira iha distritu programa nian hateten sira nunca toba uza ITN. Risku malaria iha área foho husi distritu programa nian konsidera menus kompara ho rejaun tasi-ibun. Interessante atu nota katak, sub-distritu

rua ne'ebé iha fatin aas (Turiscái ho Maubisse) hetan porsentajen ne'ebé aas liu husi fetu sira ne'ebé nunka uza moskiteiru (41% no 44%).

Koñesimentu ba sinálperigu durante isin-rua

Kuaze percentu hitu-nulu resi lima (75%) fetu iha Distritu Manufahi no Ainaro hateten sira rona kona-ba sinál perigu husi ema ne'ebé fó tratamentu saúde. Porsentajen 5 hateten sira aprende kona-ba sinál perigu husi "lisio", kaderneta ne'ebé sira lori ba uma ne'ebé inklui materiál edukasionál no registu saúde ba fetu durante isin-rua no tuur-ahi ho bebé oan nia imunizasaun no gráfiku kresimentu depois de bebé moris. Porsentajen 21 husi responden iha Fatuberlihu, 17% husi responden iha Hatu Udo, no 12% husi responden iha Alas hateten sira aprende kona-ba sinál perigu liu husi lisio. Sub-distritu tolu ne'e hetan ona suporta husi HAI iha atividade promosaun saúde iha SISCa durante tinan rua ne'e nia laran, ne'ebé inklui mós fó hanoin nafatin ba fetu sira atu kompara mensajen iha sira-nia lisio no mensajen ne'ebé sira hetan durante SISCa. Husi sub-distritu seluk fetu ne'ebé hateten lisio nu'udar sira-nia rekursu koñesimentu nian la liu husi 5%. Porsentajen nein hateten sira aprende kona-ba sinál perigu husi PSF. Porsentajen husi fetu sira ne'ebé hateten PSF maka nu'udar sira-nia rekursu aas liu iha Alas (15%) no Same (11%). Adisionál 23% hateten aprende sinál perigu husi rekursu seluk. Metade husi responde "seluk" ne'e inklui fetu ne'ebé hateten sira hatene tiha ona, no restante hateten sira rona kona-ba sinál perigu husi ema seluk ka membru família.

Preparasaun tuur-ahi

Iha preprasaun importante barak ne'ebé presiza hala'o antes tuur-ahi, hanesan rai osan, aranja transporte ba fasilidade saúde, kontaktu pesoál saúde hodi alerta sira kona-ba fatin ne'ebé ita prefere atu tuur-ahi, no buka doador raan karik iha emerjénsia. Bainhira husu se karik sira prepara buat ruma ba sira-nia oan ne'ebé ikus, entretantu, responde ne'ebé hateten barak liu mak sosa rupa ba bebé, ka sosa sasán sira ba tuur-ahi nian hanesan termu ba bee manas, sabaun no basia hodi fó haris bebé, ka hahán ka rupa ba ninia inan. Estájiu planu ba tuur-ahi ne'ebé mensiona husi fetu sira mak rai osan antes tuur-ahi, no iha 10% de'it husi inan sira mak hateten sira halo duni. Falta planu ba transporte hatudu barreira xave atu hetan tulun husi ema ne'ebé iha abilidade ka atu bele to'o iha fasilidade hodi tuur-ahi. Entretantu, ekipa peskiza balu hatete sira fiar katak pergunta ida-ne'e ladún klaru no hamosu resposta ne'ebé la akuradu.

TRATAMENTU DURANTE TUUR-AHI

Prezente husi ema ne'ebé iha abilidade saúde bainhira tuur-ahi no ambiente ne'ebé ijiéniku bele redús risku komplikasaun no infeksaun ne'ebé bele fó moras ka mate ba inan ka bebé foin moris. Ema ne'ebé iha abilidade fó partu (skilled birth attendant, SBA) defini nu'udar doutór, parteira ka enfermeira mak prezente iha sira-nia tuur-ahi ikus.

Asesu ba tratamentu

Intrevista hatudu katak fetu sira bele uza métodu variavel hodi kontaktu parteira bainhira tempu besik tuur-ahi (Tabela13). Metade husi inan sira (47%) hateten sira bele kontaktu parteira liu husi telefone (sira-nia telefone ka ema seluk nian), maibé númeru ne'e variadu husi 6% iha Sub-Distritu Fatuberlihu

too 64% iha Sub-Distritu Ainaro. Persentajen 30 husi fetu sira hateten sira bele haruka ema seluk ba hasoru parteira no 12% husi fetu sira tenki ba rasik hasoru parteira. Persentajen 18 husi fetu hateten sira la iha métodu atu kontaktu parteira bainhira atu tuur-ahi. Ida-ne'e aas iha Alas ne'ebé 40% fetu sira labele kontaktu parteira hodi fótulun durante tuur-ahi, no menus iha Sub-Distritu Same no Ainaro ne'ebé sidade liu (8% no 7%). Fetu balun fó resposta ne'ebé múltiplu.

Atendimento tuur-ahi

Menus husi metade fetu iha Manufahi (48%) no iha 38% de'it iha Ainaro hateten tuur-ahi ho SBA bainhira sira-nia oan ikus moris (Tabela 14). Iha variasaun ne'ebé similár husi relatóriu uza SBA iha sub-distritu hotu iha Manufahi no Ainaro. Nu'u ezemplu iha Turiscaí, fetu 16% de'it mak hateten uza SBA kompara ho 63% iha Fatuberlihu, no iha Ainaro, número ne'e komesa husi 18% iha Hatubuilico sa'e to'o 63% iha Sub-Distritu Ainaro. Persentajen 18 fetu sira hateten tuur-ahi uza TBA ka dukun, no 35% fetu tuur-ahi ho membru família de'it ka tulun husi sira-nia kolega.

Elementu esensial husi jestaun ativu husi pasu tolu iha tuur-ahi inklui stimulasiun *kontrasaun uteru* liu husi sona ai-moruk oxytocic antes plasenta sai, no *massage uteru* depois de plasenta sai. Iha de'it 29% fetu maka simu hotu ai-moruk oxytocic no massage uteru ho número aas uitoan iha Ainaro (31%) kompara ho Manufahi (26%). Totál 39% fetu hateten sira hetan sona oxytocic no 46% hateten sira hetan massage uteru. Figura rua ne'e hotu atu hanesan ho 43% fetu sira ne'ebé tuur-ahi ho ema ne'ebé iha abilidade (SBA).

Fasilidade tuur-ahi

Fasilidade tuur-ahi sei menus nafatin iha Timor-Leste. Iha peskiza ne'e fasilidade saúde defini nu'udar ospital, sentru saúde comunidade, uma maternidade (1 iha kada sub-distritu), postu saúde, ka clínica privadu. Iha de'it 32% husi fetu iha Manufahi no 29% iha Ainaro hateten ba tuur-ahi iha fasilidade saúde ba sira-nia oan ne'ebé ikus (Tabela 15). Nota katak, iha Sub-Distritu Turiscaí (Manufahi) no Hatubuilico (Ainaro) iha de'it 1% no 7% maka tuur-ahi iha fasilidade saúde.

Tabela 16 hatudu katak husi sira ne'ebé mak tuur-ahi iha fasilidade saúde (75% husi fetu iha Manufahi no 53% iha Ainaro) maioria hateten sira ba fasilidade ne'e ho ambulánsia ka karreta MS sira seluk. Iha Manufahi iha de'it 2% hateten sira la'o ba fasilidade, bainhira iha Ainaro 24% la'o ba fasilidade saúde ba sira-nia tuur-ahi ikus. Uza karreta privadu menus liu, no laiha relatóriu kona-ba ida-ne'e iha sub-distritu lima husi sub-distritu 8.

Posibilidade ida mak sai barreira atu ba tuur-ahi iha fasilidade mak tempu viajen ba fasilidade saúde nomós menus mode transportasaun privadu no públiku ne'ebé disponivel iha área rural. Tabela 17 hatudu tempu viajen ba fasilidade saúde ne'ebé besik liu. Totál 41% hateten sira bele to'o iha fasilidade iha minutu 30 nia laran. Três quartos fetu iha Manufahi no 1/4 fetu iha Ainaro hateten presiza tempu minutu 30-60 atu to'o iha failidade.

Koñesimentu ba sinal perigu durante tuur-ahi

Tanba númeru tuur-ahi iha uma la hó pessoal saúde aas liu, ida-ne'e kritikál katak fetu sira hatene kona-ba sinal perigu ne'ebé relaciona ho komplikasaun durante tuur-ahi. Fetu sira hetan pergunta ho espontania kona-ba sinal husi komplikasaun durante tuur-ahi ne'ebé presiza hetan atensaun médiku kedas. Totál, ida husi fetu nian tolu sira iha sub-distritu rua ne'e bele temi rua ka liu sinal perigu durante tuur-ahi (Tabela 24).

Kuidadu ba bebé foin moris

Indiferente fatin tuur-ahi ka sé mak atende tuur-ahi, fetu sira hetan pergunta kona-ba instrumentu saida mak uza hodi tesi bebé foin moris nia husar. Tuir tradisaun husar bain-bain tesi uza lámína, tudik, tezoura ka au rohan. Tesi husar ne'ebé "moos" defini hanesan fetu sira ne'ebé uza ema ne'ebé iha abilidade atende tuur-ahi ka tesi husar uza lámína foun, daan lámína (foun ka uzadu) ka tezoura ho bee nakali. Fetu sira ne'ebé hateten uza instrumentu ne'ebé moos iha Manufahi 57% no iha Ainaro 71% (Tabela 18).

Fetu sira hetan pergunta seluk kona-ba pratika relaciona ho sira-nia bebé foin moris depois tuur-ahi. Hitunulu-resin-haat persentajen fetu iha Manufahi no 69% iha Ainaro hateten la tau buat ida antes ka depois tesi husar; 9% hateten sira tau antiséptiku. Relativamente iha resposta uitoan husi "substáncia seluk" ne'ebé uza mak pomada no alkol (Tabela 19).

Rekomenda katak bebé foin moris labele fó haris mais ou menos 24 oras depois tuur-ahi atu prevene malirin. Hamaran no falun kedas bebé depoisde moris maka aspetu importante ida husi kuidadu bebé foin moris ne'ebé apropriadu. Médiu husi 72% fetu sira hateten sira hamaran no falun sira-nia bebé foin moris no, uitoan de'it mak hateten sira hamaran de'it bebé (1%) ka falun de'it (8%). Entretantu, 18% hateten sira la hamaran ka falun. Estensaun kona-ba fó hariis bebé depois de tuur-ahi ne'ebé karik 18% ne'e prátika la klaru.

Provizaun uza ai-moruk matan hodi prevene infeksaun matan menus liu iha área programa nian. Iha fetu 10% de'it iha Manufahi no 20% iha Ainaro mak hateten sira-nia bebé simu ai-moruk matan iha oras primeiru depoisde moris. Indikadór ida-ne'e presiza atensaun liután. Anedotamente, forne simentu ba ai-moruk matan menus hela iha facilidade saúde sira iha tinan uluk no karik parteira haluha atu lori bainhira sira asiste tuur-ahi iha uma.

Susubeen inan nian

Susu been inan nian kuaze universál iha Timor-Leste. Interessante tebes, ami hetan katak iha metade de'it fetu iha Manufahi (51%) no 60% iha Ainaro hateten fósusu sira-nia bebé tuir oras ne'ebé rekomenda ne'ebé oras ida depois tuur-ahi, 95% husi fetu iha Manufahi no 88% iha Ainaro fó susu been kinur ba sira-nia bebé (Tabela 20). Ne'e hatudu katak tarde atu fó susu kedas bebé, maibé positivu katak fo susu been kinur. Esesaun iha Sub-Distritu Maubisse ne'ebé iha de'it 77% inan mak hateten iha susu been kinur.

Fó susu been inan nian ho eskuzivu hatudu katak la fó buat seluk ba bebé hemu só de'it inan nia susubeen, la fó substánsia seluk molok hahú fó inan nia susu been no la fó buat seluk tan. Maioria fetu sira ne'ebé tama iha peskiza ne'e hateten sira la fó han sira-nia bebé buat seluk antes fó susu been inan nian (78%), no fetu barak mak la fó buat seluk ba sira-nia bebé iha fulan primeiru (83%) (Tabela 21). Hahán ne'ebé komún liu fó ba bebé foin moris mak bee ka bee midar, no fetu balu iha Manufahi hatete sira fó inan seluk nia susu been. Fetu uitoan de'it mak hatete sira fó susu been formula/lata. Liu husi 25% fetu iha Turiscaí, Fatuberlihu, no Hatubuilico hatete sira fó hahán seluk ba sira-nia bebé molok fó susu been inan nian, maibé interesante katak iha sub-distritu rua husi sub-distritu sira-ne'e (Turiscaí no Hatubuilico) iha percentajen menus liu husi labarik ne'ebé hetan hahán seluk depois de hahú hemu ona susu been inan nian (Tabela 21). Iha futuru, sei proveitozu atu ezamina provizaun ne'ebé rasionál molok hahú fó susu been inan nian, se karik produsaun susu been inan nian tarde ka fiar seluk, no justifikasaun ikus atu fó hahán seluk durante fulan primeiru bebé moris.

KUIDADU POSTPARTUM NO POSTNATAL

Proporsau boot husi inan no bebé foin moris ne'ebé mate akontese iha 24 oras depois tuur-ahi. Loron rua primeiru depois de tuur-ahi hatene nu'udar período importante ba inan no bebé foin moris atu hetan tratamentu husi profesionál saúde ne'ebé treinadu. Provizaun husi kuidadu postnatal ne'ebé adekua la'ós de'it tulun hamenus mortalidade no morbididade entre inan ho sira-nia bebé, maibé serve mós hanesan tempu ne'ebé ideál atu eduka inan ne'ebé foun oinsá atu kuidadu niaan no mós ninia bebé foin moris. Ami husu inan sira se iha ema ruma mai hare sira-nia saúde ka sira-nia bebé nia saúde depois tuur-ahi, bainhira depois de tuur-ahi mak sira mai hare, no sé mak halo servisu ne'e.

Kuidadu depois de partu husi profesionál ne'ebé treinadu iha loron rua nia laran depois de tuur-ahi hato'o husi 26% fetu iha Manufahi no 37% iha Ainaro (Tabela 22). Ida husi fetu tolu sira iha distritu rua ne'e hateten sira la hetan liu kuidadu depois de partu.

Vizita kuidadu ba bebé foin moris husi profesionál saúde ne'ebé treinadu iha loron rua depois de moris nu'udar servisu saúde ne'ebé importante ba bebé foin moris atu evita moras ka mate ne'ebé akontese ba bebé foin moris. Iha de'it 1/4 husi bebé foin moris iha área program nian mak simu konsulta importante ne'e (Tabela 23). Númeru menus liu iha Manufahi ho 20% kompara ho 32% iha Ainaro. Alarmante, 44% husi bebé foin moris iha Manufahi nunca hetan tratamentu postpartum.

Númeru relatóriu kuidadu postpartum no postnatal konsidera menus kompara ho SDA (43%), no númeru relatóriu ba fiskaliza saúde maternál depois de tuur-ahi (32%) ne'ebé aas liu tiha númeru relatóriu fiskaliza saúde ba bebé foin moris (25%). Durante tuur-ahi barak iha fasilidade, konsulta depois de tuur-ahi ne'e fó bainhira inan ne'e sei rekopera iha fasilidade, no númeru kobertura ba tuur-ahi iha fasilidade (32%) hanesan ho percentajen husi fetu sira ne'ebé hetan kuidadu postpartum. Presiza halo investigasaun kle'an atu determina se rezultadu ne'e konsekuénsia husi fetu sira-nia nivel edukasaun saúde ne'ebé la dí'ak kona-ba saida mak konstitui iha kuidadu postpartum no postnatal, ka karik iha espasu iha segmentu husi parteira distritu nian.

Koñesimentu husi sinálperigu durante período post-partum

Importante ba feto sira atu hatene sinál perigu husi período depois de partu. Ne'e loos duni bainhira número tuur-ahi iha facilidade ka tuur-ahi ho ema ne'ebé iha abilidade menus hanesan iha Timor-Leste. Bainhira husu kona-ba sinál perigu postpartum ba inan durante tuur-ahi, médiu iha de'it metade husi feto sira ne'ebé tama iha peskiza ne'e bele temi sinál perigu rua ka liu (Tabela 24). Ne'e aas iha Ainaro (58%) kompara ho Manufahi (42%). Adisionalmente, iha 40% de'it husi inan iha área programa bele identifika sinál perigu ne'ebé hatudu bebé foin moris presiza atensaun médiku lalais kedas (Tabela 24). Interessante atu nota katak koñesimentu ba sinál perigu durante tuur-ahi, depois de partu, no ba bebé foin moris la konsistente entre sub-distritu–dala ruma koñesimentu ne'e aas iha kategoria ida husi kategoria tolu ne'e duké kategoria seluk. Kampaña edukasionál ida ne'ebé foku tenki hadi'a diferença hirak ne'e.

Seksaun 3: Planeamentu familiár

Asesu ba servisu planeamentu familiár bele salva feto sira-nia vida. UNFPA estima ida husi ema na'in tolu ne'ebé mate relaciona ho isin-rua no oan moris bele evita se feto hotu iha asesu ba servisu kontraseptivu. Feto Timor sira ne'ebé tama iha peskiza ne'e hetan pergunta kona-ba sira-nia koñesimentu kona-ba benefísiu fó espasu ba sira-nia isin-rua, métodu kontraseptivu no oinsá sira uza kontraseptivu espesífiku.

Espasu oan ideál

Bainhira husu sira-nia opiniaun kona-ba bainhira mak feto ida tenkir hein atu ko'us fali depois de tuur-ahi oan ida, 81% husi feto sira hatete sira tenki hein maxumenus tinan rua (Tabela 25). Rezultadu ne'e konsistente entre distritu sira. Interessante, feto sira iha Manufahi hakarak hein kleur liu duké feto sira husi Ainaro: 43% feto iha Manufahi hakarak hein maxumenus tinan tolu maibé 22% feto iha Ainaro lakohi hein kleur liu.

Feto sira mós hetan pergunta kona-ba risku isin-rua sedu liu depois tuur-ahi oan ida. Persentajen hitu-nulu resin hitu (77) husi feto bele identifi ka maxumenus risku ida husi intervalu tuur-ahi ne'ebé la adekuaudu (Tabela 26). Persentajen husi feto ne'ebé bele identifika fatór risku iha Manufahi (71%) menus duké iha Ainaro (84%). Risku komún ne'ebé hateten mak "la di'ak ba inan ho bebé nia saúde". Resposta ne'e temi sai husi 44% totál feto. Entretanto, risku ne'ebé espesífiku liu, hanesan bebé nia todan menus (13%), bebé moris seidak to'o fulan (1%), no abortu (2%) temi sai menus liu (Tabela26).

Koñesimentu ba método planeamento familiár

Bainhira husu pergunta ba feto sira atu temi métodu ne'ebé bele uza atu fó espasu ba isin-rua, 91% husi feto iha Manufahi no 85% iha Ainaro bele temi kualkér métodu, no feto menus uitoan de'it husi distritu rua ne'e mak bele temi kualkér métodu modernu (90% no 82% tuir malu) (Tabela26). Sub-Distritu Turiscaí no Maubisse iha persentajen ne'ebé aas, 17% no 28% feto mak labele identifika métodu ida ba espasu oan. Husi métodu hirak ne'ebé feto sira bele identifika, métodu sona mak komún liu iha lista, tuir fali pílula no implanta (Tabela 27).

Uza kontraseptivu

Feto sira hetan pergunta kona-ba se sira uza hela métodu ida atu demora ka evita isin-rua, no ba sira ne'ebé uza hela métodu ida, husu kona-ba kontraseptivu ne'ebé sira uza. Persentajen lima-nulu resin neen (56) husi fetu iha Manufahi hatete uza métodu ida; ne'e signifkamente menus iha 29% iha Ainaro (Tabela 29). Persentajen fetu ne'ebé uza hela métodu kontraseptivu moder numenus uitoan: 54% iha Manufahi no 23% iha Ainaro hateten sira uza hela métodu kontraseptivu modernu. Ne'e interesante hodi haree similarmente persentajen ne'ebé aas husi fetu sira ne'ebé fiar katak sira tenki hein tinan rua ka liu antes isin-rua fali iha distritu tomak: valór husi demora tuur-ahi seidak hatudu ho asaun iha Ainaro.

Entre fetu sira ne'ebé tama iha peskiza ne'e, kontraseptivu sona mak komún liu iha área programa nian (Tabela 30). Persentajen 45% husi fetu iha Manufahi no 13% iha Ainaro mak uza hela kontraseptivu sona. Métodu kontraseptivu seluk mak uza menus 5% husi populasau. Interessante, tuir relatóriu fetu sira ne'ebé mak uza implanta entre 6-8% iha sub-distritu haat-Same, Ainaro, HatuUdo, no Alas-hatudu ninia popularidade ne'ebé sa'e iha Timor-Leste.

Seksaun 4: Pose no uzu telemovel iha Manufahi no Ainaro

Estudu barak ne'ebé hala'o iha Timor-Leste iha tinan hirak liu bá hatudu eskalaun lalais loos iha pose telemovel. HAI nia peskiza KPC halibur dadus kona-ba ema ne'ebé iha telemovel no uza telemovel hodi informa kona-ba implementasaun projetu Mobile Moms/Liga Inan. Relatóriu husi fetu sira ne'ebé tama iha peskiza iha Manufahi no Ainaro hatudu númeru aas husi uma-kain ne'ebé iha telemovel: 69% iha Manufahi no 66% iha Ainaro (Tabela 31). Sub-Distritu Alas iha númeru ne'ebé ki'ik husi uma-kain ne'ebé iha telemovel ho 36%, bainhira maioria fetu iha sub-distritu seluk hatete sira iha telemovel iha sira-nia uma. La'ós iha de'it telefone iha maioria uma kain sira-ne'e, maibé liu husi 1/4 uma-kain hateten sira iha telefone, no 8% hateten sira iha 3 ka liu iha uma laran (Tabela 32).

Husi fetu sira ne'ebé hatete iha telemovel iha uma laran, 70% iha Manufahi no 95% iha Ainaro hatete sira iha sira-nia telefone rasik (Tabela 33). Rezultadu ne'e importante hodi garante katak fetu sira tenke bele simu no rai mensajen ne'e ba sira-nia aan rasik. Programa ne'e halo, entretantu, espera atu kriamensajen ne'ebé bele fahe entre membru família, ne'e duni sub-distritu ne'ebé ho persentajen ne'ebé menus husi fetu ne'ebé iha telefone-Turiscái (58%) no Same (68%)—sei bele fó komprensau liu tán kona-ba dala hira mensajen ne'e fahe no diskuti ho sira-nia parseiru no membru família seluk.

Mensajen testu (SMS) ne'e komún liu iha Timor-Leste. Ema Timor barak mak sosa pulsa baratu ne'ebé fa'an iha estrada hodi aumenta ba sira-nia telefone. Tanba mensajen testu uza kréditu telefone ne'ebé menus kompara ho halo xamada, ne'e sai métodu komunikaun telemovel ne'ebé preferidu. Ne'e duni, la surpresa bainhira fetu sira ne'ebé hatete iha telefone iha esperiénsia ho SMS. Persentajen 98 husi fetu sira ne'ebé iha asesu ba telefone uza telefone hodi haruka ka simu SMS (Tabela 34). Liu husi 70% fetu sira mak iha telemovel haruka SMS maxumenus loron-loron (Tabela 35).

EZAMINA BARREIRA POTENSIÁL BA UZA TELEMOVEL

Uma-kain ne'ebé iha telemovel la garante katak feto sira uza telemovel ne'e, la garante katak telemovel ne'e karregadu no disponivel hodi uza loron-loron ka iha semana nia laran, la garante katak feto sira bele lee SMS ne'ebé sira simu. Iha seksaun tuir mai, ami ezamina possibilidade husi barreira balu.

Karrega Telemovel

Bainhira família sira iha telemovel ida, iha dalan barak ba sira atu hetan métodu karrega sira-nia telefone. Totál 56% husi feto hatete sira karrega telefone iha uma uza eletrisidade, solar panel, ka bateria (Tabela 36). Persentajen sanulu-resin-lima uza eletrisidade iha fatin seluk no 26% uza solar panel iha fatin seluk. Dalaruma sira uza jeradór hodi karrega telefone. Métodu ne'ebé uza variabel entre sub-distritu. Nu'u ezemplu iha Alas, iha feto 16% de'it mak hateten sira karrega telemovel uza eletrisidade iha uma ka fatin seluk versus 61% uza solar panel. Iha Sub-Distritu Ainaro, entretantu, 86% feto hatete uza eletrisidade. Saida mak importante katak telemovel na'in sira bele hetan dalan hodi karrega sira-nia telefone.

Rede Telemovel

Entre feto sira mak tama iha peskiza ne'e iha telemovel iha uma laran, 95% iha Manufahi no 99% iha Ainaro hateten katak iha sira-nia uma iha rede telemovel ka la'ó minutu lime (5) husi sira-nia uma (Tabela 37). Persentajen aas ne'e fó esperansa ba ami katak kobertura rede telemovel adekua ba programa ne'e. Ami husu pergunta ne'e ba de'it feto ne'ebé mak iha ona telefone, entretantu ida-ne'e difisil atu hatene se karik kobertura telemovel iha distritu ne'e universalmente disponivel ka se presensa rede telemovel iha besik sira-nia uma hanesan sinál ba sira atu sosa telemovel.

Alfabetizasaun

Komponente importante ida husi projetu Mobile Moms/Liga Inan mak fornese feto sira ho SMS kona-ba hahalok maternál ne'ebé saudavel no mós prátika oinsá buka tratamentu ne'ebé apropiadu. Feto sira hetan pergunta se sira hatene ko'alia, lee ka hakerek iha Tetun, língua lokál ne'ebé uza maioria Timor no língua ne'ebé sei uza iha SMS Mobile Moms/Liga Inan nian. Persentajen hitu-nulu resin tolu (73) husi feto iha Manufahi no percentagen lima-nulu resin sia (59%) iha Ainaro hateten sira bele lee Tetun (Tabela 38). Husi feto sira ne'ebé hateten sira labele lee língua Tetun, hotu-hotu hateten iha ema ruman iha uma laran ka hela besik ne'ebé bele asiste sira hodi lee SMS iha Tetun (Tabela 39). La'en/kaben mak hatete barak liu, tuir ho membro família seluk.

Seksaun 5: Mensajen preferénsia iha Distritu Manufahi

Atu habelar programa ne'e spesífiku liu ba preferénsia husi feto sira ne'ebé mak sei simu SMS iha programa Mobile Moms/Liga Inan, feto sira iha Distritu Manufahi hetan pergunta kona-ba língua saida mak sira prefere liu hodi simu SMS kona-ba saúde no oras saida mak sira prefere hodi simu SMS. Kuaze feto hotu (98%) hateten sira hakarak simu SMS ho Tetun, língua ne'ebé uza barak liu iha Timor-Leste (Tabela 40). Ida-ne'e variadu uitoan iha sub-distritu haat. Variasaun boot iha tempu SMS: barak mak prefere dadeer ho meiodia, entretantu oras preferénsia variadu entre sub-distritu (Tabela 41).

Rekomendasaun

Pekiza ne'e hatudu katak presiza atu hasa'e númeru atendimentu iha ANC ba feto isin-rua iha área projetu, nomós hasa'e koñesimentu no prátika importante balu ne'ebé relaciona ho isin-rua, tuur-ahi no período depois de partu.

Dezenvolve pose no uza telemovel ne'ebé sa'e lalais entre família iha Distritu Manufahi hodi implementa, koko, no avalia estratégia telemovel ida ne'ebé buka atu hasa'e koñesimentu saúde no kaptasaun husi servisu maternál durante isin-rua

- Hadi'a komprensaun no hanoin kona-ba mensajen saúde
- Fó hanoin feto sira kona-ba importánsia filafali hodi komplementa vizita ANC
- Hasa'e koñesimentu husi sinál perigu durante isin rua, tuur-ahi, no postpartum hodi garante katak sira sei buka tratamentu bainhira presiza atensaun médiku
- Hadi'a koñesimentu kona-ba prátika saúde durante tuur-ahi ba feto sira ne'ebé tuur-ahi iha uma, inklui da'an ho didi'ak ekipamentu hodi tesi husar, fó kedas kolostrum ba bebé, no hasoru parteira depoisde tuur-ahi loron rua
- Fornese meu ligasaun ne'ebé prontu ba parteira ka klínika se presiza transporte ka facilidade

- Review métodou estimasaun data tuur-ahi ho parteiras distritu, liliu iha Sub-distritu Same
- Estandariza prátika atu estabiliza planu tuur-ahi durante vizita ANC hodi facilita númeru tuur-ahi ho SBA ne'ebé sa'e
- Ezamina prátika ne'ebé iha kona-ba distribusaun ai-moruk anti-parasite hodi determina razaun feto sira haluha rejime padraun ANC ne'e

Asiste parteira hodi hametin tratamentu ANC ne'ebé sira fornese

Kontinua tulun PSF hodi hato'o mesanjen promosaun saúde ba feto isin-rua no comunidade

- Hasa'e koñesimentu feto nian kona-ba sinál perigu durante isin-rua, tuur-ahi, no depois de partu hodi garante katak sira sei buka tratamentu bainhira presiza atensaun médiku

Konkluziun

Persentajen ne'ebé aas husi fetu sira ne'ebé halo interasaun maiz ou menus dala ida ho sistema saúde iha Distritu Manufahi no Ainaro. Ne'e fornese plataforma ne'ebé forte hodi hadi'a saúde maternál no bebé foin moris; entretantu ida-ne'e difisil atu fornese tratamentu nesesáriu hotu husi vizita ne'ebé dala ida de'it.

Garante katak mensajen xave ne'e hato'o durante vizita ne'e no servisu relevante hotu disponivel ne'e importante, maibé ita mós prezisa foku hodi garante katak fetu sira sei mai fali halo konsulta adisionál. Hadi'a ligasaun entre parteira ho inan sira, no garante katak konsulta ida-ne'e positivu, hametin esperiénsia, ne'e importante atu hasa'e koñesimentusaúde no hahalok saudavel entre fetu sira.

Projetu Mobile Moms/Liga Inan ne'e dezeña atu tulun parteira MdS fó hanoin ba fetu sira mensajen xave saúde no fila fali ba tratamentu saúde importante seluk, nomós hadi'a sentimentu husi ligasaun entre fetu sira ho parteira. Ho uza telemovel, ne'ebé fetu sira iha ona, no haruka SMS ne'ebé simples, ne'ebé fetu sira uza bebeik, ita bele haruka SMS ba fetu sira iha sira-nia uma. Fetu balun karik bele lee mensajen ne'e mesak iha sira-nia telefone rasik, maibé karik fetu balun fahe mensajen ne'e ho membru família liu husi telemovel ne'ebé sira uza hamutuk ka bainhira prezisa ajuda tradusaun. Fahe mensajen ne'e ka husu ajuda hasa'e número ema ne'ebé haree mensajen saúde xave ne'e, no ne'e forsa ida husi programa ne'e, la'ós fraku. Ema barak sei lee kona-ba importánsia hemu aimoruk aumenta raan, simu vasinasaun TT, ka komesa fó susu been inan nian iha oras ida nia laran depois de partu.

List of Tables—English

Section 1: Participant Demographics

Table 1: Demographics of study population

Figure 1: Distribution of participant's age in 2 year increments from Manufahi and Ainaro

Figure 2: Distribution of years of school attended by participants from Manufahi and Ainaro

Figure 3: Distribution of number of children per woman from Manufahi and Ainaro

Table 2: Materials used floor and roofing among survey participants

Table 3: Women who report having specific household commodities

Section 2: Maternal Health Indicators

Table 4: Percent of women with children between the ages of 0-23 months who received antenatal care (ANC) from a skilled health provider

Table 5: Reported sites of antenatal care among women who reported they attended at least one ANC visit

Table 6: Timing of initiation of the first antenatal care visit

Table 7: Women who obtained at least one ANC visit who received selected services

Table 8: Women who received any antenatal care who report that a midwife calculated their Estimated Due Date (EDD) during ANC

Table 9: Women surveyed who can identify 2 or more danger signs of pregnancy

Table 10: Women who received tetanus toxoid (TT) vaccinations during their last pregnancy and over their lifetime

Table 11: Percent of women who received iron supplementation during their last pregnancy

Table 12: Women who took intestinal parasite drugs during their last pregnancy

Table 13: Reported methods available for women to contact midwives around the time of birth

Table 14: Percentage of women who had a skilled birth attendant present at last birth

Table 15: Place of last delivery for women with a child 0-23 months of age

Table 16: Method of transportation used to reach health facility among women who delivered at a health facility

Table 17: Reported travel time to nearest health facility where a woman could deliver

Table 18: Women who reported clean cord cutting practices during the birth of their last child

Table 19: Women reporting application of substance on the umbilical cord before or after delivery of the placenta, by substance

Table 20: Percentage of children 0-23 months of age who were put to the breast within one hour after delivery and/or were given colostrum

Table 20: Percentage of children 0-23 months of age who were put to the breast within one hour after delivery and percentage who were given colostrum

Table 21: Percentage of newborns who received another food prior to receiving breastmilk or during their first month after birth

Table 22: Women who received a postpartum visit within two days of delivery

Table 23: Percent of babies that received a postnatal visit from a trained health worker within two days after birth

Table 24: Knowledge of danger signs during delivery and in newborns

Section 3: Family Planning

Table 25: Reported ideal birth interval among women with children 0-23 months of age

Table 26: Reported risks of getting pregnant too soon after the birth of a child

Table 27: Women who could spontaneously name a contraceptive method

Table 28: Knowledge of contraceptive methods by women as determined by spontaneous recall

Table 29:

Table 30: Family planning methods used by women with children under 2 years of age

Section 4: Cell phone ownership and use in Manufahi and Ainaro

Table 31: Women who reported mobile phone ownership in household

Table 32: Number of mobile phones per household for women with any mobile phones in the home

Table 33: Percentage of women who report there is their “own” phone in the household

Table 34: Women who report using their mobile phone to send or receive text message

Table 35: Frequency of text message sending among women who own mobile phones

Table 36: Methods reported by women to charge mobile phones

Table 37: Reported distance to cell phone signal among women with children 0-23 months of age who have a cell phone in their household

Table 38: Level of Tetun language literacy reported by women with children 0-23 months of age

Table 39: Available assistance in reading tetun messages by women who reported being unable to read the Tetun language themselves

Section 5: Message preferences in Manufahi District

Table 40: Preferred language for text messages among women in Manufahi District

Table 41: Preferred time of day to receive health-related text messages in Manufahi District

List of Tables—Tetun

Section 1: Demografia participante

Table 1: Estudo demografia populasaun

Figure 1: Distribusaun participante nia idade iha grupo tinan rua husi Manufahi no Ainaro

Figure 2: Numeru tinan participantes ba eskola husi Manufahi no Ainaro

Figure 3: Distribusaun numeru oan per inan husi Manufahi no Ainaro

Table 2: Materias ne'ebe uja ba uma kakuluk no rai (Uma laran) husi participante

Table 3: Inan ne'ebe relata iha sasan uma laran spesifiko

Section 2: Indicadores saúde maternais no infantil

Table 4: Percentajen inan ho oan ho idade fulan 0-23 ne'ebe simu konsulta isin rua (ANC) husi pesoal saúde

Table 5: Reporta fatin ne'ebe inan uja atu hetan konsulta isin rua entre inan ne'ebe reporta katak sira atende Vizita ANC maizumenus dala ida.

Table 6: Fulan ne'ebe inan simu konsulta isin rua dala primero

Table 7: Inan ne'ebe hetan vizita ANC maizumenus dala ida mak servi ho selesionado

Table 8: Inan ne'ebe simu ANC ne'ebe dehan katak parteira halo kalkulasaun ba estimasaun loron partus (EDD) nian durante inan mai halo kuido antenatal

Table 9: Inan ne'ebe iha estudo nee bele identifika sinal perigu durante isin rua nina 2 ka liu

Table 10: Inan ne'ebe simu vacina tetanus toxoid (TT) durante isin rua ba sira nia oan ida ikus (kiik) ka inan ne'ebe simu durante moris tomak

Table 11: Persentajen inan ne'ebe hemu aimoruk aumenta ran durante isin rua ikus

Table 12: Inan ne'ebe hemu aimoruk intestinal parasite durante sira nia isin rua ida ikus nee

Table 13: Relatori ba metode sira ne'ebe iha ba inan sira hodi kontakto parteira iha tempu ne'ebe atu partus

Table 14: Persentajen inan ne'ebe simu supporta husi pesoal saúde treinado (Dotor, Parteira ka Enfermeiro) durante partus ida ikus nee

Table 15: Fatin partu ida ikus nian ba inan ho oan idade 0-23

Table 16: Metode ba uza transporte atu ba to iha facilidade saúde ba inan sira ne'ebe partus iha facilidade saúde

Table 17: Relatori kona ba tempu viajen ba besik facilidade saúde atu hodi partus

Table 18: Inan ne'ebe relata pratika koa husar moos durante partus sira nian oan ida ikus

Table 19: Inan ne'ebe relata tau buat ruma ba bebe nia husar antes ka depois deka'an moris

Table 20: Percentajen husi oan idade fulan 0-23 ne'ebe simu susu ona iha oras ida nia laran depois the partus no simu susuben kinur

Table 21: Percentajem bebe foin moris ne'ebe hemu buat ruma antes de simu susuben inan nian ka hemu buat seluk durante fulan primero depois de moris

Table 22: Inan sira ne'ebe simu vizita postpartum iha loron rua nia laran husi partus

Table 23: Persentajen bebe ne'ebe simu vizita postnatal husi pesoal saúde treinado iha loron rua nia laran husi moris

Table 24: Inan sira ne'ebe hatene sinal perigu durante partus no iha ba bebe foin moris

Section 3: Indicadores kona ba planementu familiar

Table 25: Relatorio kona ba espaso oan ideal husi inan ne'ebe ho oan idade fulan 0-23

Table 26: Relata risiko husi hetan isin rua fali iha tempu badak nia laran depois partus

Table 27: Inan ne'ebe bele identifika naran methodu contraceptive ruma

Table 28: Koinesimentu kona ba methodu kontraseptivu husi inan sira ne'ebe sira identifika rasik

Table 29: Inan ne'ebe ho oan idade fulan 0-23 mak agora dadaun uza metode planeamentu familiar modernu ka tradisional

Table 30: Methodu planementu familiar ne'ebe uza husi inan ne'ebe iha bebe tinan 2 mai kraik

Section 4: Cell phone ownership and use in Manufahi and Ainaro

Table 31: Inan sira ne'ebe iha telemovel rasik iha uma

Table 32: Numero telemovel kada uma kain husi inan ne'ebe iha telemovel ida ka liu

Table 33: Persentajen inan sira ne'ebe iha telemovel rasik

Table 34: Inan ne'ebe iha relatori uza sira nia telemovel rasik hodi haruka no simu mensagen

Table 35: Entre inan sira ne'ebe haruka mensagen frequentemente husi sira nia telemovel rasik

Table 36: Relaori kona ba metode husi inan sira atu chas telemovel

Table 37: Relatori kona ba distancia ba signal telemovel husi inan ho oan idade fulan 0-23 ne'ebe iha telemovel rasik iha uma

Table 38: Nivel education iha lingua Tetun tuir relatori husi Inan ne'ebe iha oan idade fulan 0-23

Table 39: Iha ema ne'ebe ajuda le'e mensagen iha tetun ba inan sira ne'ebe tuir relatori labele atu le'e iha lian Tetun

Section 5: Message preferences in Manufahi District

Table 40: Lingua ne'ebe prefere liu ba texto mensagen nian husi inan iha Distritu Manufahi

Table 41: Tempu iha loron ne'ebe prefere liu atu simu mensagen saude nian iha Distrito Manufahi

Tabela Rezultadu Kona ba Demografia Partisipante

Table 1: Demographics of study population*

*Table 1: Estudo demografia populasaun**

Area	Average age of Woman (Years)	Average Years of School	Average Number of Children per Woman	Number of Women Interviewed
<i>Area</i>	<i>Medida idade inan (Tinan)</i>	<i>Medida tinan eskola</i>	<i>Medida numeru oan husi kada inan</i>	<i>Numeru inan tuir intervista</i>
Alas	27.4	5.5	3.6	72
Fatuberliu	27.8	8.5	3.9	72
Same	26.6	7.0	3.5	72
Turiscail	28.2	7.1	4.5	77
Manufahi District Total	27.0	7.0	3.7	293
Ainaro	28.8	8.6	4.0	72
Hatu Udo	27.2	6.2	3.4	72
Hatubuilico	28.9	5.3	4.6	72
Maubisse	28.8	4.5	5.1	72
Ainaro District Total	28.5	5.9	4.4	288
Combined District Total	27.8	6.5	4.1	581

*The data presented in this and all following tables are weighted with respect to variations at the sample level, the subdistrict population, and district population as follows:

- at the **subdistrict** level: the data is weighted with respect to variations in sample size only
- at the **district** level: the data is weighted with respect to variations in sample size and the variations in population of the subdistrict
- at the **combined district** level: the data is weighted with respect to variations in sample size, the variations in population of the subdistrict, and variations in the population of the district

*Dadus ne'ebé apresenta iha ne'e no tabela sira tuir mai ne'e tetu ona ho variasaun iha nivel amostra, populasaun sub-distritu, no distritu hanesan tuirmai ne'e:

- Iha nivel **sub-distritu**: dadus sira tetu haktuir variasaun iha amostra nia tamañu de'it
- Iha nivel **distritu**: dadus analiza tuir variasaun iha tamañu amostra, variasaun populasaun iha sub-distritu
- Iha nivel **distritu kombinadu**: dadus analiza ka tetu tuir variasaun iha tamañu amostra, variasaun populasain iha distritu

Figure 1: Distribution of participants's age in 2 year increments from Manufahi and Ainaro
Figure 1: Distribusaun participante nia idade iha grupo tinan rua husi Manufahi no Ainaro

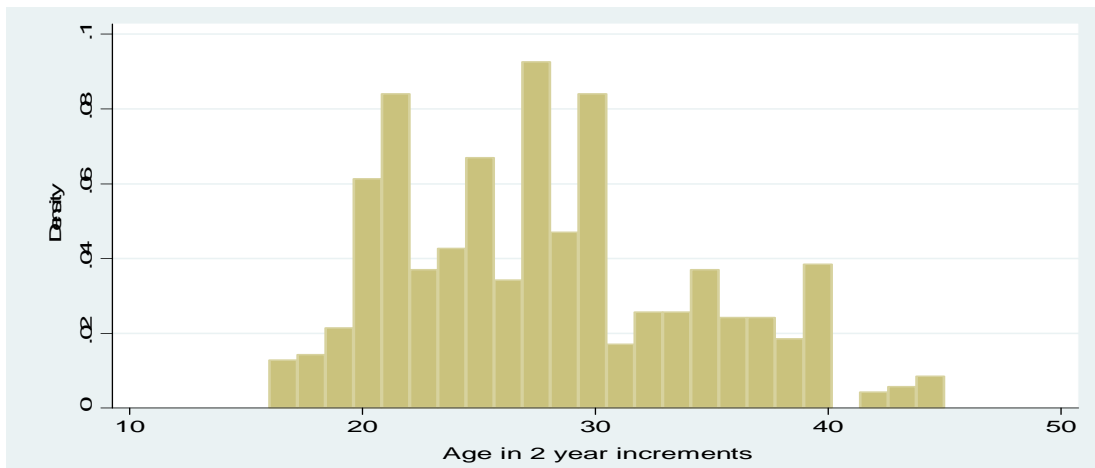


Figure 2: Distribution of years of school attended by participants from Manufahi and Ainaro
Figure 2: Numeru tinan participantes atende eskola husi Manufahi no Ainaro

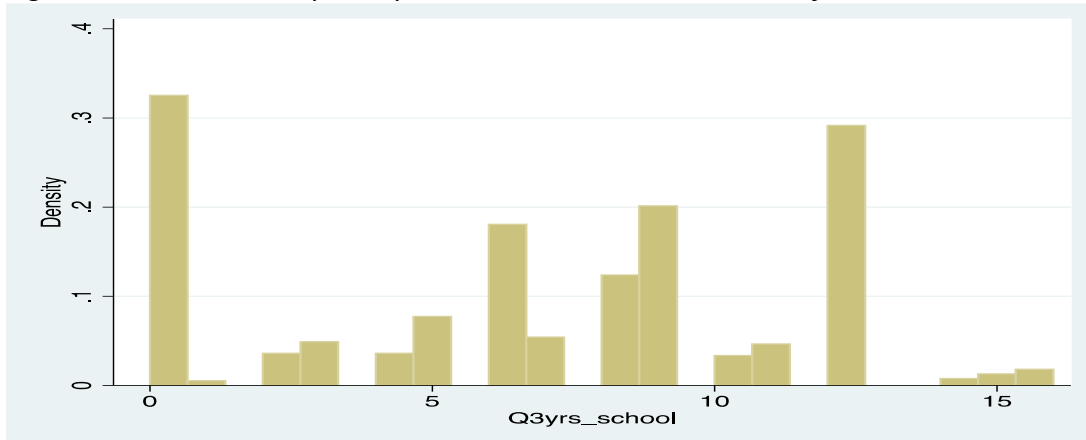


Figure 3: Distribution of number of children per woman from Manufahi and Ainaro
Figure 3: Distribusaun numeru oan kada inan husi Manufahi no Ainaro

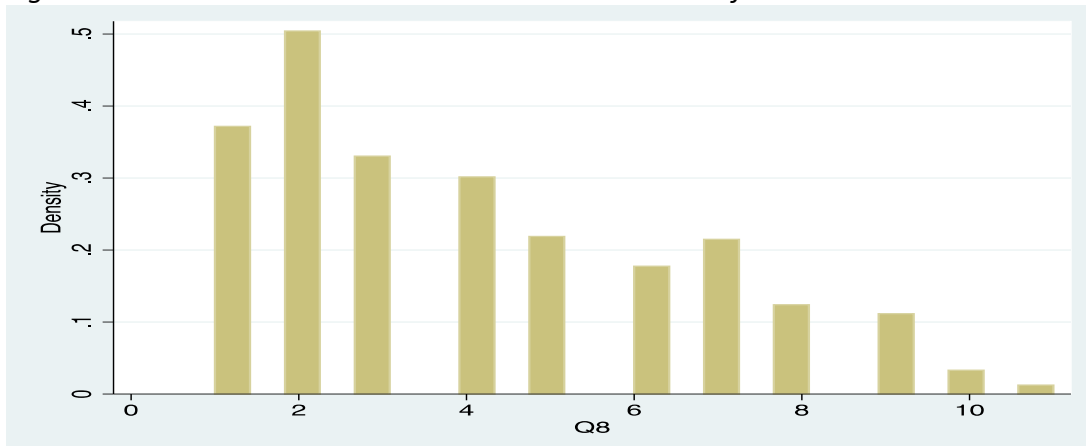


Table 2: Materials used floor and roofing among survey participants

Table 2: Materias ne'ebe uja ba uma kakuluk no rai (Uma Laran) husi participante

Program Area	Roof Material			Floor Material				Total Women
	Palm Leaves	Sheet Iron	Other	Earth	Concrete	Wood/Bamboo	Other	
Area Programa	Uma Kakuluk			Rai iha Uma Laran				Inan total
	Tali Tahan	Kalen	Seluk	Rai	Semente	Ai ou Fafulu ka Au	Seluk	
Alas	51%	43%	6%	68%	19%	12%	0%	72
Fatuberliu	22%	78%	0%	53%	43%	4%	0%	72
Same	22%	78%	0%	60%	35%	6%	0%	72
Turiscai	3%	87%	10%	65%	34%	1%	0%	77
Manufahi District Total	23%	75%	2%	60%	34%	6%	0%	293
Ainaro	7%	93%	0%	56%	39%	3%	3%	72
Hatu Udo	51%	46%	3%	64%	32%	4%	0%	72
Hatubuilico	10%	90%	0%	71%	29%	0%	0%	72
Maubisse	22%	68%	10%	75%	25%	0%	0%	72
Ainaro District	21%	75%	4%	67%	30%	1%	1%	288
Combined District Totals	22%	75%	3%	64%	32%	4%	0%	581

Table 3: Women who report having specific household commodities*

Table 3: Inan ne'ebe relata iha sasan uma laran spesifiko

Program Area	Electricity	Radio	Television	Mobile Phone	Bicycle	Motor bike	Car/ Truck	Horse/ Animal Transport	Total Women
<i>Area Programa</i>	<i>Electricidade</i>	<i>Radio</i>	<i>Televizaun</i>	<i>Telemovel</i>	<i>Bicikleta</i>	<i>Motor</i>	<i>Kareta ka trek</i>	<i>Kuda ka animale ne'ebe usa ba transporte</i>	<i>Inan total</i>
Alas	19%	22%	7%	36%	22%	13%	1%	43%	72
Fatuberliu	54%	19%	22%	59%	48%	21%	6%	20%	72
Same	50%	35%	24%	69%	17%	18%	0%	44%	72
Turiscai	42%	36%	20%	49%	6%	13%	2%	67%	77
Manufahi District Total	46%	31%	21%	62%	20%	17%	1%	44%	293
Ainara	54%	29%	42%	72%	6%	31%	4%	15%	72
Hatu Udo	19%	38%	7%	60%	1%	8%	3%	56%	72
Hatubuilico	3%	46%	14%	65%	0%	24%	0%	35%	72
Maubisse	17%	46%	13%	47%	4%	11%	1%	49%	72
Ainara District Total	24%	40%	19%	59%	3%	18%	2%	39%	288
Combined District Totals	35%	35%	20%	61%	12%	18%	1.6%	41%	581

*This table displays the proportion of total responses. Women could report more than one answer.

*Tabela ne'e hatudu proporsionalidade husi total resposta. Inan bele reporta liu tan husi resposta ida.

Tabela Rezultadu Kona ba Saúde Inan no Bebê Foin Moris

Table 4: Percent of women with children between the ages of 0-23 months who received antenatal care (ANC) from a skilled health provider

Table 4: Percentajen inan ho oan ho idade fulan 0-23 ne'ebe simu konsulta isin rua (ANC) husi pesoal saúde

Program Area	Percent women who received at least 1 ANC visit	Percent women who received 4 or more ANC visits	No ANC visits	Total Women
<i>Area Programa</i>	<i>Percentajen husi inan ne'ebe simu vizita ANC dala 1 ka liu</i>	<i>Percentajen husi inan ne'ebe simu vizita ANC dala 4 ka liu</i>	<i>Percentajen husi inaan ne'ebe la simu ANC</i>	<i>Inan Total</i>
Alas	96%	75%	4%	72
Fatuberliu	99%	72%	1%	72
Same	93%	83%	7%	72
Turiscari	84%	45%	16%	77
Manufahi District Total	93%	76%	7%	293
Ainaro	90%	67%	10%	72
Hatu Udo	83%	71%	17%	72
Hatubuilico	93%	69%	7%	72
Maubisse	94%	64%	6%	72
Ainaro District Total	91%	67%	9%	288
Combined District Totals	92%	72%	8%	581

Table 5: Reported sites of antenatal care among women who reported they attended at least one ANC visit*

Table 5: Reporta fatin ne'ebe inan uja atu hetan konsulta isin rua entre inan ne'ebe reporta katak sira atende Vizita ANC maizumenus dala ida

Program Area	Home	Hospital	Maternity	Community Health Center (CHC)	Health Post	SISCA	Outreach Event	Private Clinic	Other	Women who received at least 1 ANC
<i>Area Programa</i>	<i>Uma</i>	<i>Hospital</i>	<i>Maternidade</i>	<i>CHC</i>	<i>Postu Saúde</i>	<i>SISCa</i>	<i>Eventu outreach</i>	<i>Clinika privadu</i>	<i>Seluk</i>	<i>Inan ne'ebe simu ANC dala 1 ka liu</i>
Alas	0%	1%	1%	26%	42%	35%	4%	0%	0%	69
Fatuberliu	0%	1%	0%	85%	14%	1%	0%	0%	16%	71
Same	0%	21%	1%	58%	22%	18%	0%	0%	0%	67
Turiscari	2%	6%	0%	94%	0%	2%	0%	0%	0%	66
Manufahi District Total	0%	14%	1%	62%	21%	16%	1%	0%	2%	273
Ainaro	0%	0%	0%	83%	15%	0%	0%	2%	0%	65
Hatu Udo	2%	0%	0%	48%	42%	7%	0%	0%	0%	60
Hatubuilico	1%	1%	0%	27%	31%	13%	0%	25%	0%	67
Maubisse	0%	82%	0%	9%	7%	0%	0%	6%	0%	68
Ainaro District Total	1%	33%	0%	37%	21%	4%	0%	8%	0%	260
Combined District Totals	0%	23%	1%	50%	21%	10%	0%	4%	1%	533

*This table displays the proportion of total responses. Women could report more than one answer.

**Tabela ne'e hatudu proporsionalidade husi total resposta. Inan bele reporta liu tan husi resposta ida.*

Table 6: Timing of initiation of the first antenatal care visit

Table 6: Fulan ne'ebe inan simu konsulta isin rua dala primero

Program Area	1-3 months	4-6 moths	7-9 months	Don't Know or Forgot	Women who received ANC
<i>Area Programa</i>	<i>Fulan 1-2</i>	<i>Fulan 4-6</i>	<i>Fulan 7-9</i>	<i>La hatene ka haluha</i>	<i>Inan ne'ebe simu ANC</i>
Alas	78%	19%	3%	0%	69
Fatuberliu	71%	29%	0%	0%	71
Same	55%	40%	4%	0%	67
Turiscai	37%	51%	12%	0%	66
Manufahi District Total	58%	37%	4%	0%	273
Ainaro	40%	60%	0%	0%	65
Hatu Udo	52%	48%	0%	0%	60
Hatubuilico	49%	46%	3%	1%	67
Maubisse	15%	75%	10%	0%	68
Ainaro District Total	34%	61%	5%	0%	260
Combined District Totals	46%	49%	5%	0%	533

Table 7: Women who obtained at least one ANC visit who received selected services

Table 7: Inan ne'ebe hetan visita ANC maizumenus dala ida mak servi ho selesionado

Program Area	Weight Taken	Blood Pressure Measured*	Stomach Examined	Women who received ANC
<i>Area Programa</i>	<i>Tetu Todan</i>	<i>Koko tensaun</i>	<i>Koko kabun</i>	<i>Inan ne'ebe simu ANC</i>
Alas	91%	93%	100%	69
Fatuberliu	96%	88%	100%	71
Same	99%	100%	99%	67
Turiscai	69%	79%	90%	66
Manufahi District Total	95%	96%	98%	273
Ainaro	100%	98%	100%	65
Hatu Udo	100%	100%	100%	60
Hatubuilico	100%	97%	97%	67
Maubisse	100%	100%	99%	68
Ainaro District	100%	99%	99%	260
Combined District Totals	97%	97%	98%	533

Table 8: Women who received any antenatal care who report that a midwife calculated their Estimated Due Date (EDD) during ANC

Table 8: Inan ne'ebe simu ANC ne'ebe dehan katak parteira halo kalkulasaun ba estimasaun loron partus (EDD) nian durante inan mai halo kuidado antenatal

Program Area	Women who received EDD	No EDD	Do not know	Women who received any ANC
<i>Area Programa</i>	<i>Inan ne'ebe simu EDD</i>	<i>Inan ne'ebe la simu EDD</i>	<i>La hatene</i>	<i>Inan ne'ebe simu ANC</i>
Alas	91%	9%	0%	69
Fatuberliu	99%	1%	0%	71
Same	64%	34%	1%	67
Turiscail	86%	14%	0%	63
Manufahi District Total	74%	25%	1%	270
Ainaro	100%	0%	0%	65
Hatu Udo	97%	3%	0%	60
Hatubuilico	97%	1%	1%	67
Maubisse	93%	7%	0%	68
Ainaro District Total	96%	4%	0%	260
Combined District Total	85%	14%	1%	530

Table 9: Women surveyed who can identify 2 or more danger signs of pregnancy

Table 9: Inan ne'ebe iha estudo nee bele identifika sinal perigo durante isin rua nina 2 ka liu

Program Area	Knows 0-1 danger signs in pregnancy	Knows 2 or greater danger signs in pregnancy	Total women
<i>Area programa</i>	<i>Hatene Sinal perigo 0-1 iha isin rua</i>	<i>Hatene sinal perigo 2 ka liu husi isin rua</i>	<i>Total Inan</i>
Alas	51%	49%	72
Fatuberliu	48%	52%	72
Same	43%	57%	72
Turiscail	54%	46%	77
Manufahi District Total	46%	54%	293
Ainaro	31%	69%	72
Hatu Udo	46%	54%	72
Hatubuilico	35%	65%	72
Maubisse	61%	39%	72
Ainaro District Total	46%	55%	288
Combined District Total	46%	54%	581

Table 10: Women who received tetanus toxoid (TT) vaccinations during their last pregnancy and over their lifetime

Table 10: Inan ne'ebe simu vacina tetanus toxoid (TT) durante isin rua ba sira nia oan ida ikus (kiik) ka inan ne'ebe simu durante moris tomak

Program Area	Last pregnancy		Lifetime		Total Women
	Any TT	2+ TT	2+ TT	Never	
Area Programa	<i>Isin rua ikus</i>		<i>Durante moris tomak</i>		Total Inan
	<i>Dala 1 ka liu</i>	<i>2+ TT</i>	<i>2+ TT</i>	<i>Nunka</i>	
Alas	85%	75%	93%	4%	71
Fatuberliu	96%	89%	95%	1%	72
Same	86%	75%	85%	7%	72
Turiscai	67%	51%	78%	11%	77
Manufahi District Total	85%	74%	86%	6%	292
Ainaro	76%	64%	83%	4%	72
Hatu Udo	78%	71%	89%	8%	72
Hatubuilico	69%	63%	78%	15%	72
Maubisse	72%	51%	79%	7%	72
Ainaro District Total	74%	60%	82%	8%	288
Combined District Total	79%	67%	84%	7%	580

Table 11: Percent of women who received iron supplementation during their last pregnancy

Table 11: Persentajen inan ne'ebe hemu aimoruk aumanta ran durante isin rua ikus

Program Area	Women who took any iron tablets	Women who took more than 90 tablets	Did not know or do not remember	Total Women
<i>Area Programa</i>	<i>Inan ne'ebe hemu tableta aumanta ran</i>	<i>Inan ne'ebe hemu tablet 90 ka liu</i>	<i>La hatene ka haluhan</i>	<i>Total Inan</i>
Alas	86%	66%	0%	72
Fatuberliu	96%	84%	0%	72
Same	90%	31%	0%	72
Turiscail	87%	53%	2%	77
Manufahi District Total	90%	45%	0%	293
Ainaro	88%	33%	0%	72
Hatu Udo	78%	77%	0%	72
Hatubuilico	92%	62%	0%	72
Maubisse	88%	71%	1%	72
Ainaro District Total	87%	61%	1%	288
Combined District Total	88%	52%	0%	581

Table 12: Women who took intestinal parasite drugs during their last pregnancy

Table 12: Inan ne'ebe hemu aimoruk intestinal parasite durante sira nia isin rua ida ikus nee

Program Area	Women who took intestinal parasite drugs	Women who did not take intestinal parasite drugs	Did not know	Total Women
<i>Program Area</i>	<i>Inan ne'ebe hemo aimoruk contra intestinal parasite</i>	<i>Inan ne'ebe la hemu aimoruk contra intestinal parasite</i>	<i>La hatene</i>	<i>Total Inan</i>
Alas	17%	81%	3%	72
Fatuberliu	6%	89%	5%	72
Same	23%	77%	0%	71
Turiscail	45%	55%	0%	77
Manufahi District Total	22%	77%	1%	292
Ainaro	1%	99%	0%	72
Hatu Udo	24%	71%	6%	72
Hatubuilico	11%	89%	0%	72
Maubisse	21%	78%	1%	72
Ainaro District Total	14%	84%	1%	288
Combined District Total	19%	80%	1%	580

Table 13: Reported methods available for women to contact midwives around the time of birth (multiple responses possible)*

*Table 13: Relatori ba metode sira ne'ebe iha ba inan sira hodi kontakto parteira iha tempu ne'ebe atu partus**

Program Area	In person only	By household phone	By other phone	Send messenger	Other ¹	Not able to contact midwife
<i>Area Programa</i>	<i>Ba hasoru deit</i>	<i>Husi telefone uma</i>	<i>Husi telefone seluk</i>	<i>Haruka mensagen</i>	<i>Seluk¹</i>	<i>La bele atu kontakto ho parteira</i>
Alas	6%	15%	3%	38%	1%	40%
Fatuberliu	2%	0%	6%	74%	0%	17%
Same	10%	50%	25%	13%	0%	8%
Turiscai	3%	16%	8%	66%	0%	17%
Manufahi District Total	7%	35%	18%	30%	0%	14%
Ainaro	24%	54%	10%	21%	0%	7%
Hatu Udo	18%	18%	7%	43%	0%	19%
Hatubuilico	15%	40%	4%	21%	0%	21%
Maubisse	11%	22%	4%	38%	3%	31%
Ainaro District Total	16%	33%	6%	31%	1%	21%
Combined District Total	12%	35%	12%	30%	1%	18%

¹ Other methods include via community health worker.

* This table displays the proportion of total responses. Women could respond to more than one method.

¹ Métopu seluk inklui liuhosi traballadór saúde comunidade.

* Tabela ne'e hatudu proporsau total resposta. Inan bele hatán liu hosi métopu ida.

Table 14: Percentage of women who had a skilled birth attendant (doctor, midwife, or nurse) present at last birth

Table 14: Persentajen inan ne'ebe simu supporta husi pesoal saúde treinado (Dotor, Parteira ka Infermeiro) durante partus ida ikus nee

Program Area	Skilled birth attendant present	Total women
<i>Area Programa</i>	<i>Presensa pesoal saúde treinado</i>	<i>Total inan</i>
Alas	36%	72
Fatuberliu	63%	72
Same	53%	72
Turiscái	16%	77
Manufahi District Total	48%	293
Ainaro	63%	72
Hatu Udo	44%	72
Hatubuilico	18%	72
Maubisse	29%	72
Ainaro District Total	38%	288
Combined District Total	43%	581

Table 15: Place of last delivery for women with a child 0-23 months of age

Table 15: Fatin partu ida ikus nian ba inan ho oan idade 0-23

Program Area	At Home	Health facility (Hospital, CHC, or health post)	Totals women
<i>Area Programa</i>	<i>Iha uma</i>	<i>Fasilidade Suade (Ospital, CHC, ka postu saúde)</i>	<i>Total Inan</i>
Alas	83%	17%	72
Fatuberliu	71%	29%	72
Same	58%	42%	72
Turiscái	99%	1%	77
Manufahi District Total	68%	32%	293
Ainaro	46%	54%	72
Hatu Udo	76%	24%	72
Hatubuilico	93%	7%	72
Maubisse	72%	28%	72
Ainaro District Total	71%	29%	288
Combined District Total	69%	31%	581

Table 16: Method of transportation used to reach health facility among women who delivered at a health facility

Table 16: Metode ba uza transporte atu ba to iha fasilidade saúde ba inan sira ne'ebe partus iha fasilidade saúde

Program Area	Walk	Private Car	Public	Ambulance or MOH vehicle	Other ¹	Total Women Who Reported Transportation
<i>Area Programa</i>	<i>Lao</i>	<i>Kareta Privado</i>	<i>Transporte publiko</i>	<i>Ambulancia ka kareta MdS</i>	<i>Seluk¹</i>	<i>Total inan ne'ebe relata kona ba transporte</i>
Alas	9%	18%	18%	55%	0%	11
Fatuberliu	9%	0%	22%	69%	0%	21
Same	0%	0%	13%	77%	10%	30
Turiscai	0%	0%	0%	100%	0%	1
Manufahi District Total	2%	1%	15%	75%	8%	63
Ainara	21%	8%	8%	49%	15%	39
Hatu Udo	29%	0%	6%	59%	6%	17
Hatubuilico	0%	0%	40%	60%	0%	5
Maubisse	30%	5%	5%	55%	5%	20
Ainara District Total	24%	5%	8%	53%	10%	81
Combined District Total	12%	3%	12%	64%	9%	144

¹ Other includes: rental truck, fireman care, police car, motorcycle, other family's motorcycle, private motor cycle, and family's transport.

¹ Seluk inklui: aluga kamioneta, bonbeirus, polísia nia karreta, motór, família seluk sira-nia motór, motór privadu, no família nia transporte.

Table 17: Reported travel time to nearest health facility where a woman could deliver

Table 17: Relatori kona ba tempu viajen ba besik fasilidade saúde atu hodi partus

Program Area	30 minutes or less	30-60 minutes	60-90 minutes	90-120 minutes	120-150 minutes	150-180 minutes	Greater than 180 minutes	Total women
<i>Area Programa</i>	<i>Minutu 30 ka menus</i>	<i>Minutu 30-60</i>	<i>Minutu 60-90</i>	<i>Minutu 90-120</i>	<i>Minutu 120-150</i>	<i>Minutu 150-180</i>	<i>Liu tan 180 minutu</i>	<i>Total inan</i>
Alas	48%	23%	1%	18%	0%	3%	7%	71
Fatuberliu	42%	28%	10%	7%	6%	2%	4%	72
Same	44%	39%	4%	7%	1%	4%	0%	72
Turiscari	36%	21%	13%	9%	2%	18%	1%	77
Manufahi District Total	44%	33%	6%	9%	2%	5%	1%	292
Ainaro	53%	31%	7%	10%	0%	0%	0%	72
Hatu Udo	43%	18%	6%	15%	4%	4%	10%	72
Hatubuilico	44%	29%	11%	13%	0%	3%	0%	72
Maubisse	24%	21%	17%	22%	4%	10%	3%	72
Ainaro District Total	38%	25%	11%	16%	2%	5%	3%	288
Combined District Total	41%	29%	8%	12%	2%	5%	2%	580

Table 18: Women who reported clean cord cutting practices during the birth of their last child

Table 18: Inan ne'ebe relata pratika koa husar moos durante partus sira nian oan ida ikus

Program Area	% of children age 0-23 months who had clean cord cutting at the time of birth	Total women
<i>Area Programa</i>	<i>% husi oan idade fulan 0-23 ne'ebe husar koa ho mos iha tempu partu</i>	<i>Total Inan</i>
Alas	43%	72
Fatuberliu	63%	72
Same	58%	72
Turiscail	64%	77
Manufahi District Total	58%	293
Ainaro	75%	72
Hatu Udo	60%	72
Hatubuilico	61%	72
Maubisse	78%	72
Ainaro District Total	71%	288
Combined District Total	64%	581

Table 19: Women reporting application of substance on the umbilical cord before or after delivery of the placenta, by substance

Table 19: Inan ne'ebe relata tau buat ruma ba bebe nia husar antes ka depois de ka'an moris

Program Area	Cow Dung	Any type of oil	Antiseptic	Ashes	Other	Nothing	Total Women
<i>Area Programa</i>	<i>Karau ten</i>	<i>Mina ruma</i>	<i>Betadin</i>	<i>Aahukdes an</i>	<i>Seluk</i>	<i>La tau buat ruma</i>	<i>Inan Total</i>
Alas	0%	0%	7%	7%	8%	77%	71
Fatuberliu	0%	3%	12%	0%	17%	69%	68
Same	1%	1%	7%	4%	4%	81%	67
Turiscail	0%	1%	7%	2%	15%	75%	77
Manufahi District Total	1%	1%	8%	4%	7%	78%	283
Ainaro	0%	1%	30%	1%	19%	46%	69
Hatu Udo	0%	1%	7%	0%	25%	65%	71
Hatubuilico	0%	0%	10%	1%	27%	62%	71
Maubisse	0%	0%	0%	8%	0%	92%	71
Ainaro District Total	0%	1%	10%	4%	14%	69%	283
Combined District Totals	0%	1%	9%	4%	11%	74%	566

Table 20: Percentage of children 0-23 months of age who were put to the breast within one hour after delivery and percentage who were given colostrum

Table 20: Percentajen husi oan idade fulan 0-23 ne'ebe simu susu ona iha oras ida nia laran depois the partus no simu susuben kinur

Program Area	Percentage of children who received breastmilk within one hour of delivery	Percentage of children who received colostrums	Total women
<i>Area Programa</i>	<i>Persentajen husi oan ne'ebe tau kedas ba inan atu fo susu iha oras ida nia laran depois de moris</i>	<i>Persentajen husi oan ne'ebe simu susuben kinur</i>	<i>Total inan</i>
Alas	47%	97%	72
Fatuberliu	36%	99%	72
Same	56%	93%	72
Turiscai	43%	100%	75
Manufahi District	51%	95%	291
Ainaro	75%	99%	72
Hatu Udo	41%	93%	70
Hatubuilico	70%	93%	71
Maubisse	51%	77%	70
Ainaro District	60%	88%	283
Combined District Total	55%	92%	574

Table 21: Percentage of newborns who received another food prior to receiving breastmilk or during their first month after birth

Table 21: Percentajem bebe foin moris ne'ebe hemu buat ruma antes de simu susuben inan nian ka hemu buat seluk durante fulan primero depois de moris

Program Area	Gave other foods prior to breastfeeding	Total Women	Provided substance other than breastmilk during first month	Total Women
<i>Program Area</i>	<i>Fo hahan ruma ba bebe antes de fo susuben inan nian</i>	<i>Inan Total</i>	<i>Fo hahan ruman durante fulan primero depois de moris</i>	<i>Total Women</i>
Alas	15%	72	18%	72
Fatuberliu	27%	72	26%	72
Same	17%	71	24%	72
Turiscai	31%	74	7%	75
Manufahi District	20%	289	21%	291
Ainaro	19%	72	25%	72
Hatu Udo	23%	70	7%	69
Hatubuilico	41%	71	3%	71
Maubisse	17%	70	10%	70
Ainaro District	24%	283	12%	282
Combined District Totals	22%	572	17%	573

Table 22: Women who received a postpartum visit within two days of delivery

Table 22: Inan sira ne'ebe simu vizita postpartum iha loron rua nia laran husi partus

Program Area	Postpartum Visit within 2 days	Postpartum Visit after 2 days	No Post Partum Care	Total Women
<i>Area Programa</i>	<i>Vizita postpartum iha loron 2 nia laran</i>	<i>Vizita postpartum depois de loron 2</i>	<i>La hetan kuidadus postpartum</i>	<i>Inan total</i>
Alas	19%	56%	25%	72
Fatuberliu	22%	44%	34%	72
Same	31%	36%	33%	72
Turiscail	9%	42%	49%	77
Manufahi District	26%	40%	34%	293
Ainaro	61%	15%	24%	72
Hatu Udo	32%	40%	28%	72
Hatubuilico	44%	1%	55%	71
Maubisse	22%	46%	32%	72
Ainaro District	38%	28%	34%	287
Combined District Total	32%	34%	34%	580

Table 23: Percent of babies that received a postnatal visit from a trained health worker within two days of birth

Table 23: Persentajen bebe ne'ebe simu vizita postnatal husi pesoal saude treinado iha loron rua nia laran husi moris

Area	Newborn Check within 2 days	Newborn Check after 2 days	No Newborn Check	Total Women
<i>Area</i>	<i>Vizita postnatal iha loron 2 nia laran</i>	<i>Vizita postnatald epois de loron 2</i>	<i>La hetan kuidadus postnatal</i>	<i>Inan total</i>
Alas	13%	57%	31%	72
Fatuberliu	18%	21%	62%	72
Same	24%	28%	49%	72
Turiscail	8%	68%	25%	77
Manufahi District	20%	37%	44%	293
Ainaro	63%	15%	22%	72
Hatu Udo	31%	33%	36%	72
Hatubuilico	18%	40%	42%	72
Maubisse	18%	64%	18%	72
Ainaro District	32%	43%	25%	288
Combined District Totals	25%	38%	36%	581

Table 24: Knowledge of danger signs danger signs during delivery and in newborns

Table 24: Inan sira ne'ebe hatene sinal perigu durante partus no iha ba bebe foin moris

Program Area	Knows 2 or more danger signs during delivery	Knows 2 or more danger signs in newborns	Knows 2 or more danger signs for women postpartum	Total women
Area Programa	<i>Hatene sinal perigo durante partus 2 ka liu</i>	<i>Hatene sinal perigo bebe foin moris 2 ka liu</i>	<i>Hatene sinal perigu ba inan depois de partus 2 ka liu</i>	<i>Total inan</i>
Alas	36%	56%	50%	72
Fatuberliu	37%	75%	38%	72
Same	29%	32%	39%	72
Turiscaili	35%	48%	51%	77
Manufahi District Total	32%	42%	42%	293
Ainaro	51%	40%	75%	72
Hatu Udo	36%	36%	60%	72
Hatubuilico	26%	11%	65%	72
Maubisse	24%	50%	42%	72
Ainaro District Total	33%	37%	58%	288
Combined District Total	32%	40%	50%	581

Tabela Rezultadu Kona ba Planeamentu Familiár

Table 25: Reported ideal birth interval among women with children 0-23 months of age

Table 25: Relatorio kona ba espaso oan ideal husi inan ne'ebe ho oan idade fulan 0-23

Program Area	Number of years women reported was best to space between children:				Total Women
	One Year	Two Years	Three or more years	Don't Know	
Area Programa	Numeru tinan katak inan sira hanoin apropiadu atu espasu entre oan:				Inan Total
	Tinan ida	Tinan rua	Tinan tolu ka liu	La Hatene	
Alas	19%	31%	43%	7%	72
Fatuberliu	15%	36%	46%	4%	72
Same	17%	38%	44%	1%	72
Turiscai	17%	44%	35%	4%	77
Manufahi District Total	17%	37%	43%	3%	292
Ainaro	22%	49%	26%	3%	72
Hatu Udo	19%	56%	24%	1%	72
Hatubuilico	19%	67%	14%	0%	72
Maubisse	13%	65%	22%	0%	72
Ainaro District Total	18%	60%	22%	1%	288
Combined District Total	17%	48%	33%	2%	580

Table 26: Reported risks of getting pregnant too soon after the birth of a child*

Table 26: Relata risiko husi hetan isin rua fali iha tempu badak nia laran depois partus

Program Area	Baby born too small	Baby born too early	Mother can die	Mother can miscarry	Mother can suffer anemia	Bad for health of mother and/or baby	Mother cannot work between pregnancies	Other	Total Women
<i>Area Programa</i>	<i>Bebe moris kik liu</i>	<i>Bebe moris sedu liu</i>	<i>Inan bele mate</i>	<i>Ina bele abortus</i>	<i>Inan bele sofre anemia</i>	<i>Ladiak ba inan ka bebe nia saúde</i>	<i>Laiha tempo atu halo servico</i>	<i>Seluk</i>	<i>Inan Total</i>
Alas	10%	0%	15%	4%	17%	33%	35%	1%	72
Fatuberliu	4%	0%	13%	6%	0%	55%	46%	4%	72
Same	18%	0%	24%	4%	22%	22%	26%	11%	72
Turiscái	2%	5%	9%	6%	3%	36%	58%	7%	77
Manufahi District	13%	1%	20%	5%	16%	29%	34%	8%	293
Ainaro	29%	0%	3%	0%	3%	74%	15%	18%	72
Hatu Udo	7%	1%	11%	0%	1%	43%	40%	4%	72
Hatubuilico	21%	3%	7%	1%	0%	79%	21%	11%	72
Maubisse	1%	0%	4%	0%	4%	44%	71%	4%	72
Ainaro District	13%	1%	6%	0%	3%	59%	42%	9%	288
Combined District Totals	13%	1%	13%	2%	10%	44%	38%	9%	581

*This table displays the proportion of total responses. Women could report more than one answer.

*Tabela ne'e hatudu proporsionalidade husi total resposta. Inan bele reporta liu tan husi resposta ida.

Table 27: Women who could spontaneously name a contraceptive method

Table 27: Inan ne'ebe bele identifika naran methodu contraceptive ruma

Program Area	Any Method	Any modern method	No method known	Total Women
<i>Area Programa</i>	<i>Identifika methodu 1 ka liu</i>	<i>Identifika methodu modernu 1 ka liu</i>	<i>La hatene methodu ida</i>	<i>Inan Total</i>
Alas	83%	82%	17%	72
Fatuberliu	79%	76%	21%	72
Same	81%	79%	19%	72
Turiscai	70%	69%	30%	77
Manufahi District	80%	78%	20%	293
Ainaro	79%	75%	21%	72
Hatu Udo	90%	89%	10%	72
Hatubuilico	83%	81%	17%	72
Maubisse	57%	47%	43%	72
Ainaro District	70%	64%	30%	288
Combined District Totals	75%	72%	25%	581

Table 28: Knowledge of contraceptive methods by women as determined by spontaneous recall *

Table 28: Koinesimentu kona ba methodu kontraseptivu husi inan sira ne'ebe sira identifika rasik

Program Area	Female Sterilization	Male Sterilization	Pill	IUD	Injectables	Implants	Condom	LAM	Cyclebeads	Rhythm Method	Other	Total Women
Alas	14%	0%	46%	36%	78%	40%	14%	1%	17%	11%	1%	72
Fatuberliu	4%	0%	63%	26%	73%	55%	23%	4%	16%	14%	0%	72
Same	1%	0%	25%	15%	74%	31%	6%	3%	1%	3%	4%	72
Turisc'ai	2%	2%	52%	6%	64%	8%	0%	0%	2%	7%	5%	77
Manufahi District Total	3%	0%	36%	18%	73%	32%	8%	2%	5%	6%	3%	293
Ainara	11%	1%	46%	21%	65%	33%	8%	12%	18%	18%	4%	72
Hatu Udo	6%	0%	50%	32%	82%	51%	3%	0%	3%	6%	1%	72
Hatubuilico	11%	0%	50%	15%	76%	36%	1%	0%	4%	3%	1%	72
Maubisse	8%	3%	28%	10%	40%	18%	10%	8%	6%	14%	10%	72
Ainara District Total	9%	1%	41%	17%	61%	31%	7%	6%	8%	11%	5%	288
Combined District Totals	6%	1%	38%	18%	67%	32%	7%	4%	7%	9%	4%	581

*This table displays the proportion of total responses. Women could report more than one answer.

*Tabela ne'e hatudu proporsionalidade husi total resposta. Inan bele reporta liu tan husi resposta ida.

Table 29: Women with children 0-23 months of age who are currently using any family planning method, by whether it is a modern or traditional method

Table 29: Inan ne'ebe ho oan idade fulan 0-23 mak agora dadaun uza metode planeamentu familiar modernu ka tradisional

Program Area	Any Modern Method	Other Method	Not Using Contraception	Total Women
<i>Area programa</i>	<i>Usa methodu modernu</i>	<i>Usa methodu seluk</i>	<i>La usa methodu</i>	<i>Inan Total</i>
Alas	50%	1%	49%	72
Fatuberliu	39%	4%	57%	72
Same	61%	0%	39%	72
Turiscai	36%	8%	56%	77
Manufahi District Total	54%	2%	45%	293
Ainaro	27%	8%	65%	72
Hatu Udo	42%	1%	57%	72
Hatubuilico	17%	3%	80%	72
Maubisse	25%	6%	69%	72
Ainaro District Total	23%	6%	71%	288
Combined District Totals	40%	3%	57%	581

Table 30: Family planning methods used by women with children under 2 years of age*

Table 30: Methodu planementu familiar ne'ebe uza husi inan ne'ebe iha bebe tinan 2 mai kraik

Program Area	Not Using Contraception	Female Sterilization	Male Sterilization	Pill	IUD	Injectable	Implant	Condom	LAM	Standard Days Beads	Calendar Method	Other	Total Women
Alas	49%	3%	0%	6%	1%	31%	8%	0%	0%	1%	1%	0%	72
Fatuberliu	57%	0%	1%	3%	0%	35%	0%	0%	0%	0%	5%	0%	72
Same	39%	0%	0%	1%	1%	52%	6%	0%	0%	0%	0%	0%	72
Turiscari	56%	0%	0%	5%	0%	31%	0%	0%	1%	0%	1%	7%	77
Manufahi District	45%	0%	0%	3%	1%	45%	5%	0%	0%	0%	1%	1%	293
Ainara	65%	0%	0%	1%	1%	13%	6%	0%	3%	3%	8%	0%	72
Hatu Udo	57%	0%	0%	3%	0%	31%	7%	0%	1%	0%	0%	1%	72
Hatubuilico	80%	0%	0%	0%	1%	13%	1%	1%	0%	0%	3%	0%	72
Maubisse	69%	4%	1%	4%	0%	13%	0%	1%	0%	1%	3%	3%	72
Ainara District	71%	2%	1%	2%	1%	13%	2%	1%	1%	1%	4%	1%	288
Combined District Totals	57%	1%	0%	2%	1%	30%	3%	0%	0%	1%	2%	1%	581

* Note that some rows do not add up to 100% given that these results are rounded to the nearest full number and this table includes many variables.

* Nota katak linha balu la bele aumenta tan to'o 100% tanba rezultadu sira-ne'e iha besik hela n'umeru kompletu (hanesan 1.13% ka 1.06%) no tabela ne'e inklui variable balu.

Tabela Rezultadu Kona ba Pose no Telemovel iha Manufahi and Ainaro

Table 31: Women who reported mobile phone ownership in household

Table 31: Inan sira ne'ebe iha telemovel rasik iha uma

Program Area	Household owns mobile phone	Household does not have mobile phone	Total women
<i>Area Programa</i>	<i>Iha telemovel iha uma</i>	<i>Laiha telemovel</i>	<i>Total Inan</i>
Alas	36%	64%	72
Fatuberliu	60%	40%	72
Same	79%	21%	72
Turiscail	54%	46%	77
Manufahi District	69%	31%	293
Ainaro	75%	25%	72
Hatu Udo	64%	36%	72
Hatubuilico	69%	31%	72
Maubisse	58%	42%	72
Ainaro District	66%	34%	288
Combined District Total	67%	33%	581

Table 32: Number of mobile phones per household for women with any mobile phones in the home

Table 32: Numero telemovel kada uma kain husi inan ne'ebe iha telemovel ida ka liu

Program Area	No phone	One	Two	Three or more phones	Total women
<i>Area Programa</i>	<i>Telemovel la iha</i>	<i>Ida</i>	<i>Rua</i>	<i>Telemovel tolu ka liu</i>	<i>Inan total</i>
Alas	64%	21%	10%	5%	72
Fatuberliu	40%	32%	17%	11%	72
Same	21%	43%	25%	11%	72
Turiscail	46%	35%	12%	7%	77
Manufahi District	31%	38%	21%	10%	293
Ainaro	25%	21%	39%	15%	72
Hatu Udo	37%	37%	23%	3%	72
Hatubuilico	31%	34%	35%	0%	72
Maubisse	42%	35%	19%	4%	72
Ainaro District	34%	30%	9%	7%	288
Combined District Totals	33%	35%	24%	8%	581

Table 33: Percentage of women who report there is their “own” phone in the household

Table 33: Persentajen inan sira ne’ebe iha telemovel rasik

Program Area	Own Phone	Uses Family Phone	Total Women with Household Mobile Phone
<i>Area Programa</i>	<i>Telemovel rasik</i>	<i>Uza telemovel familia nian</i>	<i>Total inan ho telemovel iha uma kain</i>
Alas	81%	19%	26
Fatuberliu	84%	14%	43
Same	68%	32%	57
Turiscail	58%	42%	46
Manufahi District	70%	30%	172
Ainaro	96%	4%	54
Hatu Udo	91%	9%	46
Hatubuilico	98%	2%	50
Maubisse	93%	7%	42
Ainaro District	95%	5%	192
Combined District Total	82%	18%	364

Table 34: Women who report using their mobile phone to send or receive text message

Table 34: Inan ne’ebe iha relatori uza sira nia telemovel rasik hodi haruka no simu mensagen

Program Area	Women who send or receive SMS messages	Women who do not send or receive messages	Women with a phone in the household
<i>Area Programa</i>	<i>Inan ne’ebe simu ka haruka mensagen</i>	<i>Inan ne’ebe la simu ka haruka mensagen</i>	<i>Inan ho telemovel iha uma kain</i>
Alas	100%	0%	26
Fatuberliu	98%	2%	43
Same	100%	0%	57
Turiscail	96%	4%	46
Manufahi District	99%	1%	172
Ainaro	98%	2%	54
Hatu Udo	96%	4%	46
Hatubuilico	94%	6%	50
Maubisse	98%	2%	42
Ainaro District	97%	3%	192
Combined District Total	98%	19%	364

Table 35: Frequency of text message sending among women who own mobile phones

Table 35: Entre inan sira ne'ebe haruka mensagen frequentemente husi sira nia telemovel rasik

Program Area	Once a day or more	Once a Week	Once a Month	Never	Women who own a phone in their household
<i>Area Programa</i>	<i>Loron ida dala ida ka liu</i>	<i>Semana ida dala ida</i>	<i>Fulan ida dala ida</i>	<i>Nunka</i>	<i>Inan ne'ebe iha telemovel rasik iha sira nia uma kain</i>
Alas	77%	19%	0%	4%	26
Fatuberliu	74%	24%	0%	2%	43
Same	81%	12%	4%	4%	57
Turiscari	52%	33%	5%	10%	46
Manufahi District Total	77%	16%	3%	4%	167
Ainara	58%	23%	8%	11%	54
Hatu Udo	76%	11%	2%	11%	46
Hatubuilico	42%	26%	0%	32%	50
Maubisse	86%	10%	2%	2%	42
Ainara District Total	67%	17%	3%	13%	191
Combined District Total	72%	16%	3%	8%	358

Table 36: Methods reported by women to charge mobile phones

Table 36: Relatori kona ba metode husi inan sira atu chas telemovel

Program Area	Electricity at home	Solar charger at home	Battery at home	Electricity other site	Solar charger at other site	Other ¹	Total Women with Household Mobile Phone
<i>Area Programa</i>	<i>Eletricidade iha uma</i>	<i>Solar cell iha uma</i>	<i>Bataria iha Uma</i>	<i>Eletricidade iha fatin seluk</i>	<i>Solar cell iha fatin seluk</i>	<i>Seluk¹</i>	<i>Total inan ho telemovel iha uma</i>
Alas	12%	38%	12%	4%	23%	12%	26
Fatuberliu	56%	7%	0%	9%	29%	0%	43
Same	51%	9%	8%	11%	15%	6%	53*
Turiscai	36%	26%	3%	8%	25%	2%	46
Manufahi District Totals	34%	10%	1%	20%	33%	2%	168
Ainaro	67%	0%	0%	19%	13%	2%	54
Hatu Udo	24%	7%	0%	26%	35%	9%	46
Hatubuilico	10%	24%	4%	2%	60%	0%	50
Maubisse	26%	12%	0%	31%	31%	0%	42
Ainaro District Totals	47%	13%	6%	10%	18%	5%	192
Combined District Total	41%	11%	4%	15%	26%	3%	360

¹ Other methods include: own generator, generator in another location, another person's generator, and the community's office.

*3 non-responses in Same

¹ Métodu seluk inklui: jeradór rasik, jeradór iha fatin seluk, jeradór ema seluk nian, no comunidade nia ofisiu.

*Participante nain 3 la fo resposta iha Same

Table 37: Reported distance to cell phone signal among women with children 0-23 months of age who have a cell phone in their household

Table 37: Relatori kona ba distancia ba signal telemovel husi inan ho oan idade fulan 0-23 ne'ebe iha telemovel rasik iha uma

Program Area	Have Signal at home or within 5 minute Walk	Total Women with Household Mobile Phone
<i>Area Programa</i>	<i>Hetan Signal iha uma ka lao 5 minutus</i>	<i>Total inan ho telemovel iha uma</i>
Alas	85%	25
Fatuberliu	96%	43
Same	96%	57
Turiscail	94%	46
Manufahi District	95%	172
Ainaro	100%	54
Hatu Udo	100%	46
Hatubuilico	100%	50
Maubisse	98%	42
Ainaro District	99%	192
Combined District Total	97%	364

Table 38: Level of Tetun language literacy reported by women with children 0-23 months of age

Table 38: Nivel education iha lingua Tetun tuir relatori husi inan ne'ebe iha oan idade fulan 0-23

Program Area	Cannot Speak, Read or Write	Speak Only	Speak and Read Only	Speak, Read and Write	Total Women
<i>Area Programa</i>	<i>La koalia, le'e ka hakerek</i>	<i>Koalia deit</i>	<i>Koalia no le'e deit</i>	<i>Koalia, le'e no hakerek</i>	<i>Total Inan</i>
Alas	18%	17%	7%	58%	72
Fatuberliu	8%	8%	0%	85%	72
Same	8%	21%	4%	67%	72
Turiscail	6%	14%	9%	71%	77
Manufahi District	9%	18%	5%	68%	293
Ainaro	0%	22%	0%	78%	72
Hatu Udo	6%	32%	1%	61%	72
Hatubuilico	1%	43%	8%	47%	72
Maubisse	0%	54%	3%	43%	72
Ainaro District	1%	40%	3%	56%	288
Combined District Total	5%	29%	4%	62%	581

Table 39: Available assistance in reading tetun messages by women who reported being unable to read the Tetun language themselves (multiple answers reported*)

Table 39: Iha ema ne'ebe ajuda le'e mensagen iha tetun ba inan sira ne'ebe tuir relatori labele atu le'e iha lian Tetun

Program Area	Husband	Child	Other Family Member	Neighbor
<i>Area Programa</i>	<i>Laen/Kaben</i>	<i>Oan</i>	<i>Membru familia seluk</i>	<i>Vizinho</i>
Alas	40%	20%	28%	4%
Fatuberliu	58%	26%	32%	8%
Same	29%	10%	33%	38%
Turiscail	20%	61%	39%	16%
Manufahi District	32%	17%	33%	29%
Ainaro	19%	13%	69%	13%
Hatu Udo	41%	15%	41%	0%
Hatubuilico	31%	19%	47%	6%
Maubisse	54%	33%	21%	5%
Ainaro District	42%	25%	36%	6%
Combined District Total	38%	21%	35%	15%

*This table displays the proportion of total response. Women could report more than one person.

*Tabela ne'e hatudu proporsaan total resposta. Feto sira bele relata liu hosi ema ida.

Tabela Rezultadu Kona ba Preferénsia Mensajen SMS iha Distritu Manufahi

Table 40: Preferred language for text messages among women in Manufahi District

Table 40: Lingua ne'ebe prefere liu ba texto mensajen nian husi inan iha Distritu Manufahi

Program Area	Tetun	Bahasa	Mambae	Other ¹	Total women
<i>Area Programa</i>	<i>Tetun</i>	<i>Bahasa</i>	<i>Mambae</i>	<i>Seluk¹</i>	<i>Total inan</i>
Alas	100%	0%	0%	0%	72
Fatuberliu	95%	1%	0%	4%	72
Same	99%	0%	0%	1%	72
Turiscail	97%	0%	3%	0%	77
Manufahi District Total	98%	0%	0%	1%	293

¹ Other responses included Tetun Terik and no preference. Portuguese and English were other options, but no women reported either language.

¹ Resposta seluk inklui Tetun Terik no laiha preferénsia. Portugés no Inglés hanesan opsaun seluk, maibé laiha feto ida mak relata prefere dalen dalen sira-ne'e.

Table 41: Preferred time of day to receive health-related text messages in Manufahi District

Table 41: Tempu iha loron ne'ebe prefere liu atu simu mensajen saúde nian iha Distritu Manufahi

Program Area	Morning	Afternoon	Evening	No Preference	Total women
<i>Area Programa</i>	<i>Dader</i>	<i>Lokraik</i>	<i>Kalan</i>	<i>Laiha preferensia</i>	<i>Total inan</i>
Alas	51%	27%	14%	7%	72
Fatuberliu	72%	16%	10%	2%	72
Same	28%	44%	14%	14%	72
Turiscail	18%	27%	16%	40%	77
Manufahi District Total	36%	36%	14%	15%	293