Subject: Discrepancy in Frequency of Antenatal Care & Post Natal Care (Pakistan's BR-file 2017-18
Posted by shujaat.smc@gmail.com on Fri, 16 Oct 2020 09:24:07 GMT

Dear DHS Representative,

Kindly explain the reason behind the fact that antenatal care for last birth in the preceding five years before the conduct of the survey (PDHS 2017-18) the simple tabulation of variable m71 & m72 (Postnatal care variables) is showing that nearly two thousand women received the postnatal care. However, the variable represents ANC care (for example the place of delivery m15) its tabulation is showing the total response of nearly 8 thousand women if we exclude those women who had the delivery at home and who respond as "other" still those women who had the delivery in any type of health facility outnumber those women who had taken postnatal care.

Please elaborate on what this discrepancy means (Missing data by data collector or Missing Postnatal care by Pakistani women even those who had the opportunity to get the antenatal care for their last birth.

Please see my stata output. (BR-file 2017-18)

Best Regards

Dr. Hussain

File Attachments
1) For DHS Representative Discripancy Antenatal Care & Post Natal Care Variables Frequecies.pdf, downloaded 228 times

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Subject: Re: Discrepancy in Frequency of Antenatal Care & Post Natal Care (Pakistan's BR-file 2017-18
Posted by Bridgette-DHS on Fri, 16 Oct 2020 14:05:16 GMT

Following is a response from DHS Research & Data Analysis Director, Tom Pullum:

The children in the KR file have a code "bidx" that is 1 for the most recent birth, 2 for the next most recent, etc. Because of multiple births, bidx ranges from 1 to 5 in this survey. If you open the KR file and enter "tab m15 bidx" you will see that m15 is provided for all values of bidx. But if you enter "tab m71 bidx" you will see that m71 is only asked about the latest birth, the one with bidx=1. It is coded "NA" for births with bidx>1. In all DHS surveys, some MCH questions are asked about all births and some are asked just about the most recent birth. As a general rule, the limitation to the most recent birth is made for outcomes that would be most affected by recall error.