

## What is **MICS**?

In 1990, the World Summit for Children was held at the United Nations Headquarters in New York City. The Summit was the first time that heads of state and government gathered to discuss child-related issues and established an agreed set of major goals in child survival, protection, and development. Following the Summit, MICS (Multiple Indicator Cluster Surveys) was developed by UNICEF to support countries in filling data gaps on children’s well-being and tracking progress towards achieving the goals.

MICS is a standardized household survey tool, and it has become one of the world’s largest sources of statistical information on children and women. As an important tool for monitoring national development goals and the Sustainable Development Goals (SDGs), MICS provides nationally representative and internationally comparable data on children, adolescents, women, men, and their living environment.

Since the first round of MICS launched globally in the mid-1990s, UNICEF has been supporting seven rounds of MICS. MICS7 was officially launched in March 2023 and will run until the end of 2026. As of February 2024, 363 surveys have been carried out in 120 countries over the past 29 years (<https://mics.unicef.org/about>).



Note: (1) Numbers of surveys and countries stated above this map are based on surveys that have completed data collection activities, including those that have not released final reports. (2) This map does not reflect a position by UNICEF on the legal status of any country or territory or the delimitation of any frontiers.

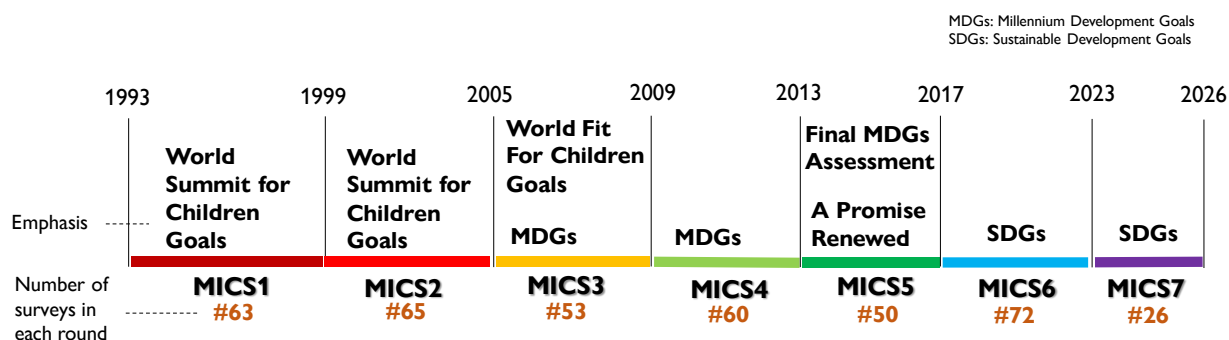
## MICS in China

Following the successful collaboration with UNICEF on the 1992 National Sample Survey on the Situation of Children in China, the National Bureau of Statistics of China participated in the first round of MICS and conducted the survey in 1995 with the support of UNICEF. The survey supported the monitoring of the Mid-Decade Goals of the World Summit for Children and China's national development goals. In total, 60,000 sample households from urban and rural areas in 30 provinces, municipalities, and autonomous regions were covered. In addition to the basic situation of the household, the survey also collected information on access to safe drinking water and sanitary latrines, consumption of iodized salt, basic education for children aged 6-14 years, as well as nutrition and immunization for children aged 0-4 years. The Government of China has attached great importance to the survey results, which have been used in monitoring reports at both national and provincial levels and have played a significant role in promoting child development work.

Despite not participating in the subsequent rounds of MICS, China has been customizing and integrating relevant MICS modules for various large-scale surveys in recent years, including Breastfeeding and Dietary Intake, Early Childhood Development, Water and Sanitation, and Handwashing.

## MICS Keeping Up with the Times

With different rounds of MICS rolled out across the globe over the years, MICS tools and methodology have been improved and advanced. Each round of MICS has been responsive to the situation and focuses on the main objectives and monitoring priorities of global development goals. The addition, deletion and adjustment of the MICS survey topics are based on rigorous methodological processes, extensive consultations, and thorough field testing. At the same time, by tapping into experiences of other well-developed survey tools, MICS has increasingly enhanced its alignment and comparability with global surveys. For instance, its health-related modules are highly consistent with the Demographic and Health Survey (DHS).

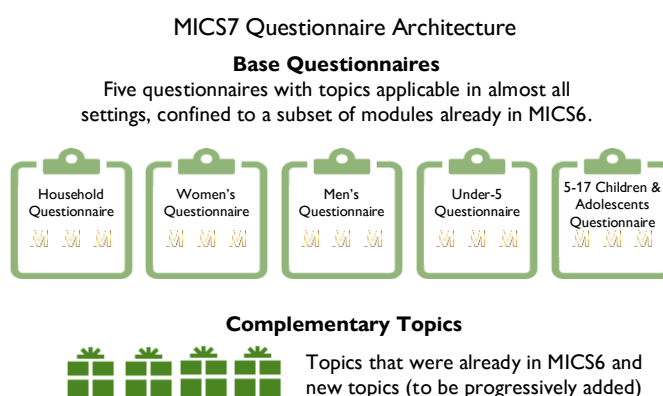


Note: For the 6<sup>th</sup> and 7<sup>th</sup> round of MICS, the indicated number of surveys include 26 surveys at the design stage, data collection stage, or put on-hold as of February 2024.

## MICS7 Questionnaire Architecture and Survey Design

MICS questionnaire follows an indicator-based module design, allowing flexibility and adaptability. Users can either conduct a separate survey with relevant MICS modules or add selected modules to existing household surveys. In practice, users usually conduct necessary customization of MICS questions based on the specific situation. MICS tools customization meets the domestic data needs and facilitates the field survey administration while keeping modules' standardization and international comparability.

MICS7 questionnaires consist **Base Questionnaires** and **Complementary Topics**. There are five Base Questionnaires containing modules applicable to almost all countries and have been used in MICS6. The five questionnaires target households, women aged 15-49 years, men aged 15-49 years, children under five, and children and adolescents aged 5-17 years, respectively. Complementary Topics consist of MICS6 modules not included in the Base Questionnaires or newly developed MICS7 modules. Please refer to the Annex for the list of topics/modules included in MICS7.



Countries conducting MICS7 are encouraged to ‘build’ their questionnaire starting with selective modules in Base Questionnaires and have quality discussion at the country level on the addition of specific Complementary Topics. With continuous expansion in survey content, MICS7 tools can produce data for more than half of the 80 SDGs indicators sourced from household surveys.

MICS7 uses probability sampling, and the sample is nationally representative and/or representative for a geographical area or population group within a country. Relevant indicators can be disaggregated by region, residence, gender, level of education, age, wealth status, ethnicity, migration status, disability status, and other characteristics.

MICS7 mainly collects data through face-to-face interviews, observations (e.g. places for handwashing), and measurements and testing (e.g. anthropometry, water quality testing, and literacy/numeracy tests).

## **MICS Tools**

A lot of useful tools are available on UNICEF’s MICS global website (<http://mics.unicef.org/>), covering all stages of survey design, data collection, data processing, analysis, and reporting. Specifically, users can find questionnaires, indicators and definitions, documents on sample design, instructions for interviewers and instructions for supervisors, data editing guidelines, tabulation plans and the corresponding SPSS syntax files. Templates are also provided for survey findings reports and statistical snapshots. As of February 2024, MICS7 tools are still in development, so please continue refer to MICS website for updates. A self-paced e-Course is recommended for those who would like to have a quick overview and improve their knowledge on MICS (<https://agora.unicef.org/course/info.php?id=40208>). The course was just released and is currently available only in English, taking about 3 hours to complete.

The [Chinese version](#) of the MICS6 questionnaires and indicator list are available online for users to download. UNICEF China organizes and reviews the Chinese translation, striving to present to the Chinese audience the high-quality design of MICS and promote the application of relevant modules. Together with partners in the field of statistical surveys, UNICEF China has customized some frequently used MICS modules and developed corresponding instruction in Chinese. Please contact us at [beijing@unicef.org](mailto:beijing@unicef.org) for more information.

## **MICS Innovations**

**MICS Plus:** With increasing ownership of mobile phones and expanding mobile network coverage, there is an unprecedented opportunity to use phones to collect population-based data. MICS Plus is a method that takes advantage of this. MICS Plus uses households of a regular MICS (or a representative list of households with phone numbers) as the sampling frame. One or more representative sub-samples of households are selected, and data collection is conducted via short telephone interviews, accumulating longitudinal data which are quickly analyzed and disseminated. MICS Plus is a different mode of data collection and does not replace MICS. It focuses on data gaps that are best measured with high frequency and which change seasonally (further details at <https://mics.unicef.org/mics-plus/methodology-and-use>).

**MICS Link:** MICS and various administrative data systems (e.g. Education Management Information System, Health Management Information System) collect complementary information on different aspects of households and population. Linking MICS data with administrative data will broaden analytical perspectives and contribute to the better understanding of the situation of households and population. The integration of different data collection systems can also substantially reduce the burden of survey data collection.

## **MICS Data Access and Usage**

MICS data plays a significant role in formulating country policies on children and women, identification of vulnerable groups, and public advocacy for issues concerning children and women.

MICS are typically led by national governments with technical support of UNICEF. Countries have full ownership of the MICS data. MICS reports and anonymized microdata, with the countries' consent, are freely available for legitimate research purposes, and research results on MICS data are encouraged to be shared with countries.

Users can request/download MICS micro datasets from the website of respective implementing agencies of the countries, or from UNICEF MICS web page <https://mics.unicef.org/surveys>. Users can also access various MICS dissemination materials, such as media reports and videos at <https://mics.unicef.org/dissemination>.

## **Annex: MICS7 Questionnaire Content**

Note: Numbers of modules are stated after '#'. MICS6 modules are shaded in green, and new MICS7 modules are shaded in orange. Other information are shaded in grey.

Base Questionnaires (23 modules)				
Household Questionnaire (#7)	Questionnaire for Women aged 15-49 (#5)	Questionnaire for Men aged 15-49 (#2)	Questionnaire for Children and Adolescents aged 5-17 (#4)	Questionnaire for Children Under Five (#5)
Household Information Panel	Woman's Information Panel	Man's Information Panel	5-17 Child Information Panel	Under-Five Child Information Panel
List of Household Members	Woman's Background	Man's Background	Child's Background	Under-Five's Background
Education: Attainment (+3)	ICT Use	ICT Use	Child Labor	Early Childhood Development
Education: School Attendance (3-24)	Fertility/Birth History	Marriage/Union	Child Discipline (5-14)	Child Discipline (1-4)
Household Characteristics	Antenatal Care		Household Involvement in Education (7-14)	Immunization (0-2)
Water	Delivery Care		Learning Skills (direct, 7-14)	
Sanitation	Marriage/Union			Anthropometric Measurement Form
Hygiene				Facility-Based Records of Vaccination
Water Quality Testing Form				

Complementary Modules/Topics (44 modules)				
Household Questionnaire (#5)	Questionnaire for Women aged 15-49 (#28)	Questionnaire for Men aged 15-49 (#10)	Questionnaire for Children and Adolescents aged 5-17 (#4)	Questionnaire for Children Under Five (#7)
Household Energy Use	Malaria: IPTp	Migration	Health Insurance (5-14)	Health Insurance
Malaria: ITNs <sup>1</sup>	IYCF: Initial Breastfeeding	Health Insurance	Child Functioning	Birth Registration
Social Transfers	PN&NC: PNC for Babies and Mothers	Employment and Training (15-24)	Children's Time Use (10-14)	Child Functioning (2-4)
Post-Emergency	PN&NC: Thermal Care	Time Use (15-17)	Anthropometric Measurements Form (5-9)	IYCF: Breastfeeding and Dietary Intake (0-1)
Food Insecurity Experience	PN&NC: Cord Care	Attitudes towards Domestic Violence		Care-seeking and Treatment of Diarrhea
	PN&NC: Birthweight	SDG16: Safety		Care-seeking and Treatment of Symptoms of ARI
	PN&NC: Signal Care Functions	SDG16: Discrimination		Malaria: Care-seeking and Treatment
	RC: Unmet Need	Adult Functioning (18-49)		
	RC: Contraception	Tobacco Use		
	RC: Sexual Activity	Mental Health (15-24)		
	RC: Period Return			
	RC: Decision-making on Reproductive Health			
	RC: Desire for Last Birth			
	Menstrual Health and Hygiene			
	Female Genital Mutilation			
	HPV (15-17)			
	Maternal Mortality			
	Violence Against Women (forthcoming)			
	Migration			
	Health Insurance			
	Employment and Training (15-24)			
	Time Use (15-17)			
	Attitudes towards Domestic Violence			
	SDG16: Safety			
SDG16: Discrimination				
Adult Functioning (18-49)				
Tobacco Use				
Mental Health (15-24)				

MIC6 Module

New MICS7 Module

<sup>1</sup> List of acronyms: ITNs – Insecticide Treated Nets; IPTp – Intermittent Preventive Care in pregnancy; IYCF – Infant and Young Child Feeding; PN&NC – Postnatal and Neonatal Care; RC – Reproductive Care; HPV – Human Papillomavirus; SDG16 – Topics that relate to Sustainable Development Goal 16; ARI – Acute Respiratory Infection