Conclusions: Pregnancy remains a major health risk for the women in many developing countries. Deaths and sufferings can be prevented by timely referral to hospital. Women in Bangladesh rely very much on services provided by trained or untrained persons in their neighbourhood. Knowledge of the signs of emergency, requiring timely and adequate services, is lacking in the community. Cost of services and behaviour of hospital staff are also important issues that influence the decision-making process. These findings will help design interventions to reduce the delay between the onset of complications and the arrival at the hospital, and improve quality of care at the THC level.

Presence of a Daughter in the Family and Old-Age Survival of Mothers in Matlab, Bangladesh

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Objective: Examine if having a daughter in the household improves the survival of older women in Bangladesh.

Methods: Data for this study came from the ICDDR,B's Demographic Surveillance System (DSS) which records all vital events in Matlab, a rural area of Bangladesh. A cohort of more than 4,500 women aged 60 years and over in the 1982 DSS census of Matlab was followed up for ten years to record survival, marital status, and presence of sons and daughters in the family. The effect of these variables on survival was modelled by using discrete-time hazards regression. Independent variables, obtained from the DSS database, were included in the models as time-varying covariates.

Results: A woman with at least one son living with the family had 17% lower risk of mortality than a woman with no son present. Living with a daughter reduced the risk of mortality by about 24%. The positive effects of living with a son or daughter on old-age survival are similar for both married and widowed women. A woman who is married, household head, literate, Muslim, or who lives in the intervention area (where maternal and child health services are provided) has lower risk of mortality than a woman who is a widow, not a household head, illiterate, Hindu, or lives in the comparison area (where normal government health services are provided).

Conclusions: Previous studies have shown that Bangladeshi parents have a preference for sons, and that a widow living with her adult son has better survival chances. Research has also shown that parents desire at least one daughter. Our findings that women living with daughters have a higher survival probability provide a justification of parents' preference for having at least one daughter. Since preference for a son has a negative effect on contraceptive use, the family planning programme could use our findings to show parents that a daughter can provide the same old-age security as a son can. This may reduce preference for sons and thereby enhance the pace of fertility decline.

Prevention of Diarrhoea in Rural Bangladesh: Evaluation of an Intervention for Hygiene Behaviour Change

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Objective: Evaluate the SAFE Pilot Project, an intervention to change hygiene behaviour implemented by CARE Bangladesh.

Methods: This intervention took place in rural Chittagong, southeastern Bangladesh. Priorities and interventions were developed for hygiene behaviour change based on initial quantitative and qualitative studies. Two models of