

PERFORMANCE MONITORING AND ACCOUNTABILITY 2020

Progress Report | January 2017



Bill & Melinda Gates Institute for Population and Reproductive Health







FROM THE DIRECTOR



Scott Radloff, PhD
PMA2020 Director

In the past year PMA2020 has continued on a fast pace of progress and innovation. We have launched our survey program in Rajasthan, India; expanded our survey to cover 5 additional states in Nigeria; taken on a new province in DR Congo; added two counties to data collection in Kenya; and expanded from a subnational to a national survey round in Niger. Across all countries, we have conducted 12 rounds of core data collection — bringing our total to 36 rounds in just over 3 years of activity. We have launched 3 new modules in the last year: primary health care in Ghana, maternal/newborn health in Ethiopia, and water/schistosomiasis in Uganda. Our data are increasingly being utilized with over **11,000 key** indicator reports downloaded, in addition to nearly 1,000 datasets **downloaded**. We have worked to increase the accessibility of our data through our recently launched PMA DataLab online visualization tool. We have trained over 1,700 resident enumerators who have administered more than 325,000 interviews.

Looking ahead, we have laid the groundwork for a **new launch in Côte d'Ivoire** and are exploring possibilities in other countries. We have received a **new grant to field a nutrition module in Kenya and Burkina Faso**. And we have **two other new grants, PMA Plus and PMA/Agile** that will expand innovations that work from our platform in a number of countries. In the year ahead, I look forward to continuing to strengthen our partnerships and build upon the PMA2020 platform. Our adventure continues!

PROGRESS TO DATE



Surveys launched in

10 countries





36

Rounds of data collection completed



1,700+

REs trained



325,000+
interviews conducted



6

New health modules developed and being implemented

GEOGRAPHIC EXPANSIONS



During the Ouagadougou Partnership's 5th annual meeting held in Abidjan in December 2016, **the Côte d'Ivoire Ministry of Health announced a commitment to use PMA2020** towards monitoring the progress of their National Costed Implementation Plan for Family Planning 2015-2020.



PMA2020 increased the number of states covered in Nigeria from two to seven. In addition to Lagos and Kaduna, PMA2020/Nigeria covers Anambra, Kano, Nasarawa, Rivers and Taraba states. With this expansion, PMA2020/Nigeria is able to generate both state and national estimates of key indicators.



The PMA2020/Kenya team has increased its geographic coverage, adding two new counties, West Pokot and Kakamega, for a total of 11 counties.



PMA2020's sample in its first survey round in **Niger** covered Niamey only. The second round was expanded to cover the whole country.



A new province in DR Congo has been added and **PMA2020/DRC** is now implemented in both **Kinshasa** and **Kongo Central**.



The **PMA2020/India** program completed the first round of data collection in **Rajasthan** in late 2016.

NEW HEALTH MODULES ADDED

New survey modules have been added to the core questionnaire, demonstrating the adaptability of the PMA2020 platform. These include:





Schistosomiasis

in Uganda





Nutrition in Kenya and Burkina Faso



Contraceptive implant removal questions in Burkina Faso, Kenya and Ethiopia



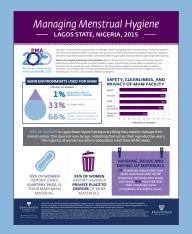
Menstrual Hygiene Management in all countries

NEW PUBLICATIONS

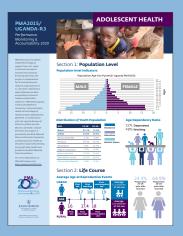
PMA2020 has increased the number and type of publications available. PMA2020 is now producing a variety of topical briefs in addition to our flagship family planning results.



PMA2020 SDG Indicators
Briefs help track targets
of the United Nations
Sustainable Development
Goals. PMA2020 provides
data for several SDG indicators,
allowing countries to track
progress towards achieving
these ambitious goals more
frequently than ever before.



PMA2020 Menstrual Hygiene Management (MHM) Briefs are a one-page snapshot of select MHM indicators. PMA2020 looks at how menstrual hygiene is managed across age groups and wealth categories, including the types of materials used, and the safety, privacy, and cleanliness of the places where women manage their menstrual hygiene needs. PMA2020 is currently the only nationally representative survey program that collects data on MHM.



and Young Adult Health
Briefs present various health
and socio-economic metrics
of young people in both
urban and rural settings,
including educational
attainment, early marriage,
and quality of care received
at health facilities.

PMA2020 Adolescent

INNOVATIONS



In order for data to be actionable, they must be accessible. In 2016, PMA2020 launched the **PMA DataLab** (datalab.pma2020.org), an interactive **data visualization** tool that allows any user to easily create custom charts and graphs using PMA2020 data online.

With 31 PMA2020 datasets across 6 countries now available on PMA DataLab with more to come, users can compare indicators across and within countries and chart trends over time. PMA DataLab also allows users to compare indicators across age groups, education status, sub-national region, marital status and other background characteristics.

NEW GRANTS

PMA2020 received two additional grants from the Bill & Melinda Gates Foundation to expand data collection activities in low-resource settings for performance monitoring of health programs.

The first is called *PMA Plus*, which will build a female empowerment questionnaire to monitor gender equality. It will also conduct longitudinal studies to answer key questions around contraceptive demand and use dynamics and test PMA2020's platform as a sample civil registration system to improve vital statistics.

The second is a grant called *PMA/Agile*, which will be **focused on rapid monitoring of contraceptive service delivery at the health facility level** in multiple countries. PMA/Agile will largely be focused on urban areas and rely on mobile data collection methods.



PMA2020 COUNTRIES AT A GLANCE



BURKINA FASO

National data

4 survey rounds completed First survey: December 2014

Implementing partner:Institut Superieur des Sciences de la Population (ISSP)





DEMOCRATIC REPUBLIC OF THE CONGO

Kinshasa

5 survey rounds completed First survey: January 2013 Kongo Central

2 survey rounds complete First survey: January 2016

Implementing partners: Tulane University, Kinshasa School of Public Health



ETHIOPIA

National data

4 survey rounds completed First survey: March 2014

Implementing partner: Addis Ababa University





GHANA

National data

5 survey rounds completed First survey: October 2013

Implementing partners:

Kwame Nkrumah University of Science & Technology (KNUST) School of Medicine, University of Development Studies (UDS)

PMA2020 COUNTRIES AT A GLANCE





KENYA

National data

5 survey rounds completed First survey: July 2014

Implementing partner: International Centre for Reproductive Health Kenya (ICRHK)



INDIA

Rajasthan

1 survey round completed First survey: September 2016

Implementing partner: Indian Institute of Health Management Research (IIHMR)



INDONESIA

Makassar, South Sulawesi, and national data

2 survey rounds completed First survey: August 2015

Implementing partners:
National Population and
Family Planning Board of
Indonesia (BkkbN) (round
1); Universitas Gadjah Mada
(subsequent rounds)





NIGER

Niamey

3 survey rounds completed First survey: August 2015 National data

1 survey round completed First survey: April 2016

Implementing partner:Institut National de la
Statistique (INS) du Niger

PMA2020 COUNTRIES AT A GLANCE



NIGERIA

Lagos State, Kaduna State

3 survey rounds completed First survey: October 2014

Implementing partners:

Centre for Population and Reproductive Health at the University of Ibadan (CPRH), the Centre for Research, Evaluation Resources and Development (CRERD), the Population and Reproductive Health Program (PRHP) at the Obafemi Awolowo University in Ilelfe, and Bayero University Kano (BUK) (round 1); CRERD and BUK (subsequent rounds)

Anambra, Kano, Nasarawa, Rivers, Taraba states, and national

1 survey round completed First survey: June 2016

Implementing partners:

CRERD and BUK



UGANDA

National data

4 survey rounds completed First survey: June 2014

Implementing partner:

Makerere University School of Public Health



CÔTE D'IVOIRE

National data

First survey: 2017 (to be determined)

Implementing partner:

La Direction de Coordination du Programme National de Santé de la Mère et de L'Enfant (DC-PNSME), L'Institut National de la Statistique de la Côte D'Ivoire "One of the most inspiring people I met this year is a woman named Christine, who spends her days going door to door in her Kenyan community to survey women about their lives and experiences. The data she gathers is used by policymakers to make decisions about improving healthcare in these areas.

When you stop and think about it, what Christine is doing is actually pretty incredible: For most of human history, the world hasn't paid much attention to the voices of women living in poverty. But data collectors like Christine are making sure that these women's voices are heard. As Christine puts it, asking these women questions "is a way of showing that someone cares."

Melinda Gates,
Co-chair of the Bill & Melinda
Gates Foundation



WHAT IMPACT DOES PMA2020 MAKE?

"Here are five reasons why I am optimistic that 2016 will be the turning point towards a future full of promise for millions of women and girls.

No. 1: Data. There is a **data revolution** going on in family planning that is helping to focus support where it's needed. It all comes from an **innovative smartphone-based system** called **Performance Monitoring and Accountability 2020 (PMA2020)**. The data mean **governments are better informed than ever before** and better able to respond more quickly to what women need and want."

Melinda Gates, Co-chair of the Bill & Melinda Gates Foundation

SOURCE: MEDIUM BLOGPOST, "WE'RE FALLING BEHIND ON FAMILY PLANNING: FIVE WAYS TO GET US BACK ON TRACK"

Performance Monitoring and Accountability 2020

Bill & Melinda Gates Institute for Population and Reproductive Health Department of Population, Family and Reproductive Health Johns Hopkins Bloomberg School of Public Health

> 615 N. Wolfe Street Baltimore, MD 21205 www.pma2020.org

f facebook.com/GATES.PMA2020 💟 Twitter: @PMA2020JHU