

PMA CÔTE D'IVOIRE

Results from Phase 1 survey

September–November 2020



OVERALL KEY FINDINGS



Almost all women had heard of COVID-19.



More than half of women reported that their households had suffered partial or total income loss during the COVID-19 restrictions.



More than three in ten women do not currently use a contraceptive method for reasons related to COVID-19.

SECTION 1: CONCERN ABOUT COVID-19 AND PREVENTION MEASURES

CONCERN ABOUT COVID-19

Percentage of women who are concerned about getting infected with COVID-19, by education (n=4,704)

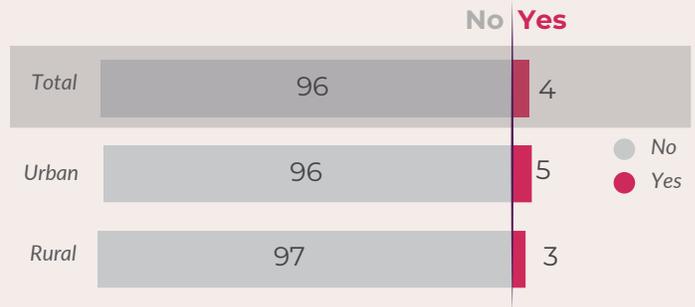
99%

of women know about COVID-19 (n=4,135)



LEFT CURRENT COMMUNITY TO AVOID COVID-19

Percentage of women that left current community to avoid COVID-19, among those that spent a night away from their community in the last 12 months, by residence (n=1,923)



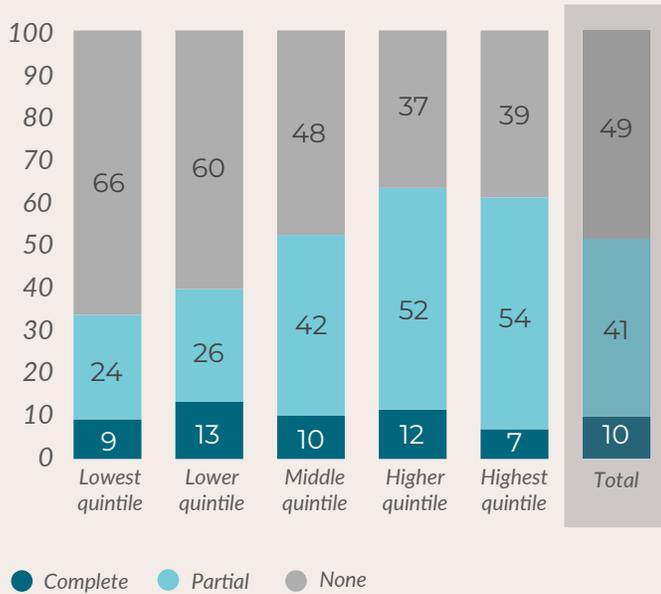
KEY FINDINGS FOR SECTION 1: CONCERN ABOUT COVID-19 AND PREVENTION MEASURES

- Nearly eight in ten women reported that they were concerned about getting COVID-19.
- The lower a woman's education level, the more concerned she was about getting COVID-19.
- Only 4% of female respondents left their communities to avoid getting COVID-19.

SECTION 2: ECONOMIC IMPACT OF COVID-19

HOUSEHOLD INCOME LOSS

Percentage of women whose household experienced loss of income during COVID-19 restrictions, by wealth (n=4,035)



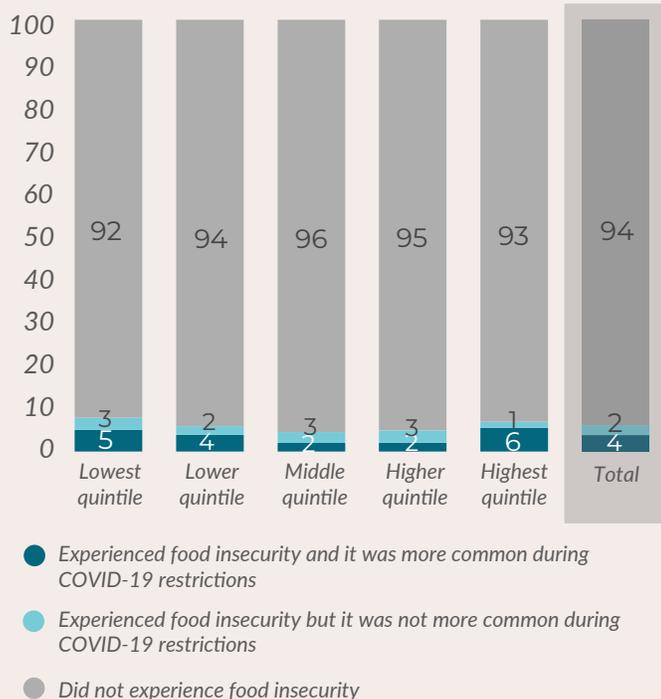
PERSONAL INCOME LOSS

Among women living in a household that lost partial income, the percent distribution of personal income loss magnitude, by wealth (n=1,491)



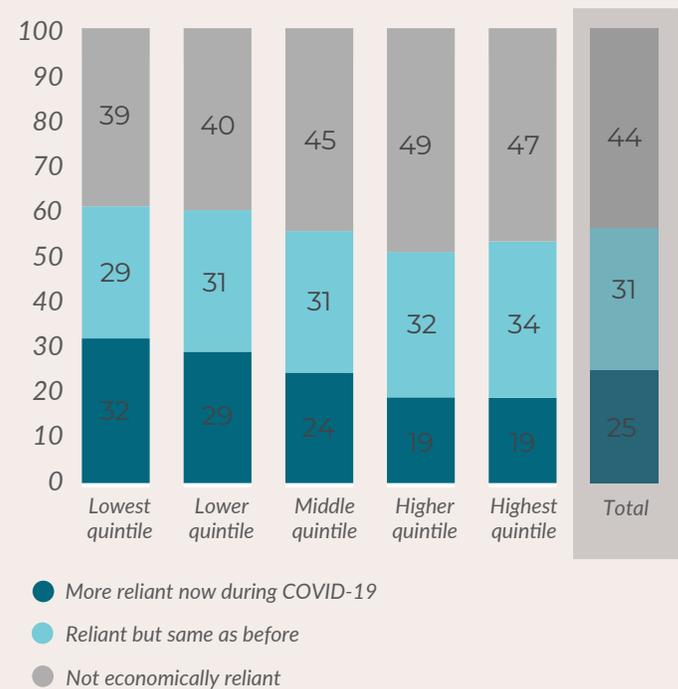
FOOD INSECURITY

Percentage of women who reported that at least one member of their household went without food during the COVID-19 restrictions, by wealth (n=4,068)



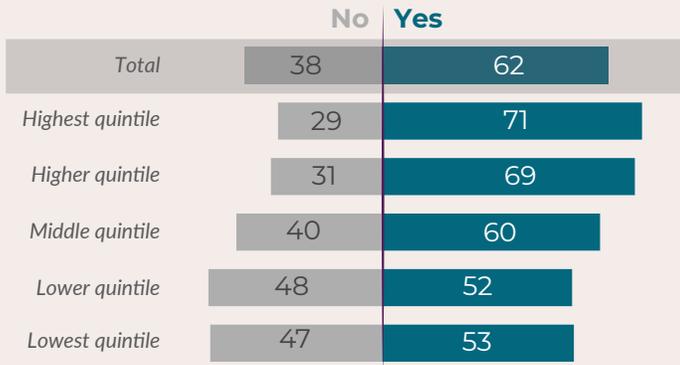
CHANGE IN ECONOMIC RELIANCE ON PARTNER

Among currently married women, the percentage who say they are more economically reliant on their husband now compared to before the COVID-19 restrictions, by wealth (n=2,548)



FINANCIAL WORRY

Percentage of women who are worried about the impact of COVID-19 on their household's future finances, by wealth (n=3,937)



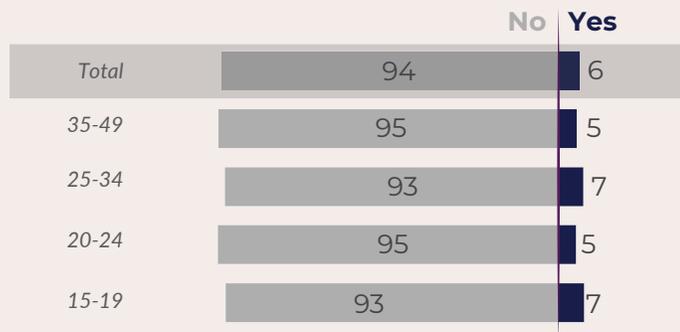
KEY FINDINGS FOR SECTION 2: ECONOMIC IMPACT OF COVID-19

- During the COVID-19 restrictions, 10% of female respondents reported that their households lost all of their income.
- Regardless of the wealth quintile, at least two in ten married women grew more economically dependent on their partners. This proportion amounted to 32% in the lowest wealth quintile.
- Nearly six in ten women reported that they were worried about the impact of COVID-19 on their households' future income.

SECTION 3: HEALTH SERVICE ACCESS BARRIERS

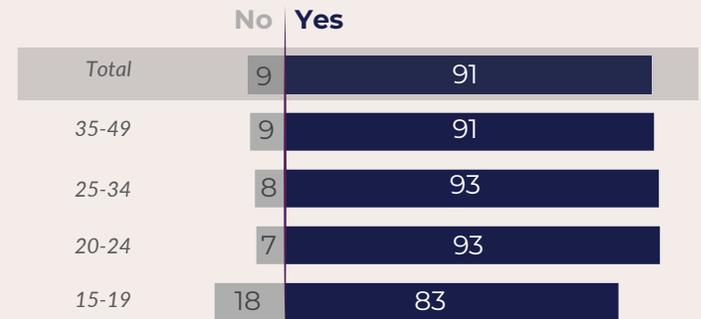
NEED TO VISIT HEALTH FACILITY FOR FP

Among women who needed to visit a health facility during the COVID-19 restrictions, the percentage of women who needed to visit a health facility for FP services, by age (n=1,866)



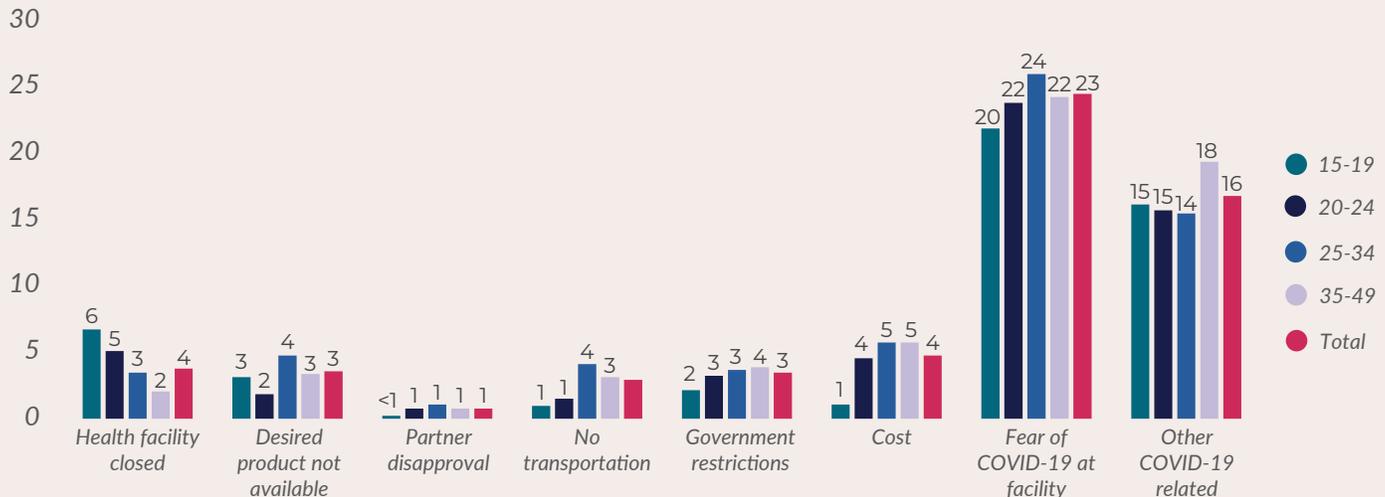
SUCCESS IN ACCESSING HEALTH SERVICES

Among women who needed to visit a health facility during the COVID-19 restrictions, the percentage who were able to access those services, by age (n=1,810)



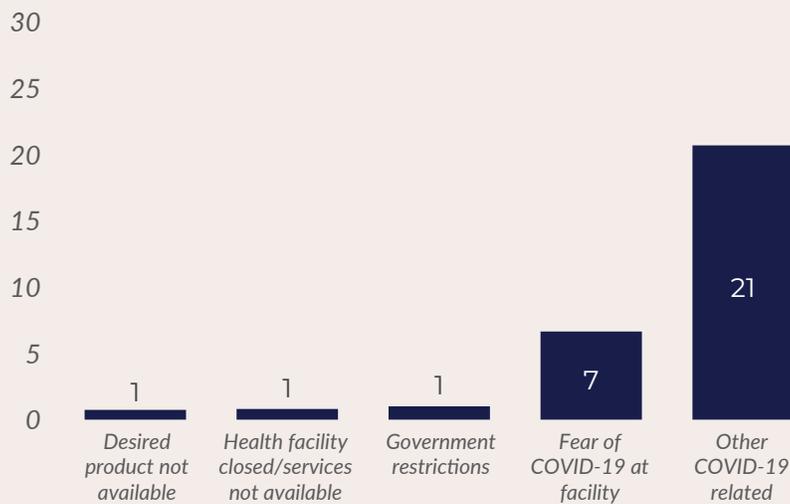
DIFFICULTY ACCESSING HEALTH FACILITY

Among women who needed to visit a health facility during the COVID-19 restrictions, the percentage who reported any difficulties in access, by age (multiple responses allowed), by age (n=1,865)



NOT USING FP FOR COVID-RELATED REASONS

Among women not using an FP method, the percentage who reported the following COVID-19 reasons (n=1,276)



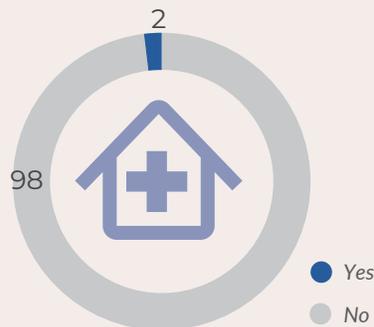
KEY FINDINGS FOR SECTION 3: HEALTH SERVICE ACCESS BARRIERS

- At least two in ten women who needed to go to a health facility during the COVID-19 restrictions reported that “fear of getting COVID-19” was a challenge to accessing health services.
- 7% of women who were not using any contraceptive method reported not using a method due to fear of getting COVID-19 at a health facility.

SECTION 4: COVID-19 IMPACT ON SERVICE DELIVERY POINTS

HEALTH FACILITY CLOSURE DURING COVID-19 RESTRICTIONS

Percentage of public and private facilities that closed during COVID-19 restrictions when they would have otherwise been open (n=214)

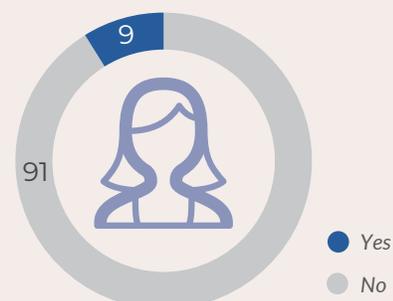


IMPACT ON FP SERVICES DURING COVID-19 RESTRICTIONS

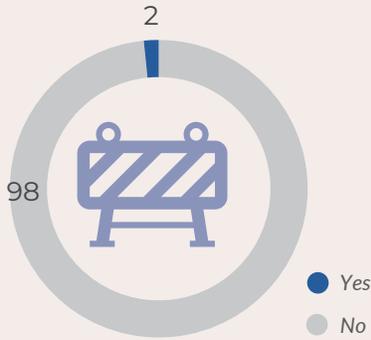
Percentage of all facilities reporting reduction in number of hours of operation during COVID-19 restrictions (n=214)



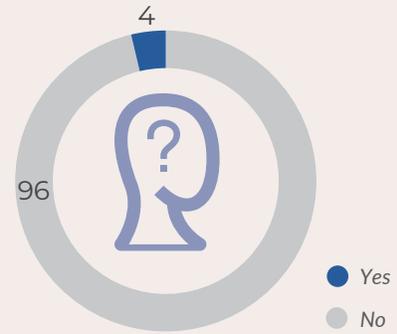
Among facilities offering FP, percentage where personnel were reassigned from FP services to COVID-19 related duties during the COVID-19 restrictions (n=192)



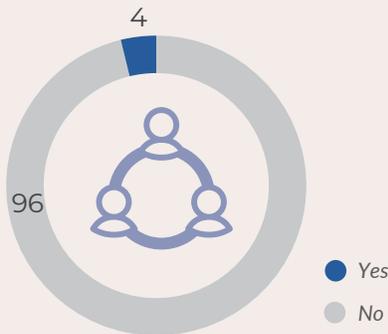
Among facilities offering FP, percentage reporting a suspension of FP services during COVID-19 restrictions (n=192)



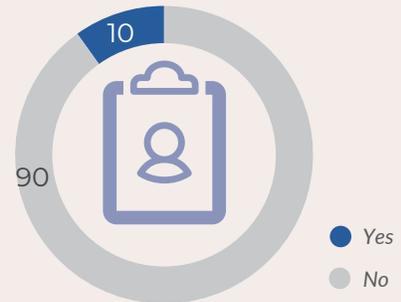
Percentage of all facilities reporting increased absenteeism of personnel during the COVID-19 restrictions (n=214)



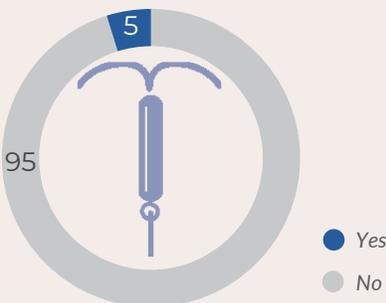
Percentage of all facilities reporting disruption of support services to community health workers during the COVID-19 restrictions (n=26)



Among facilities offering FP, percentage reporting that they kept records of FP clients up-to-date during COVID-19 restrictions (n=192)

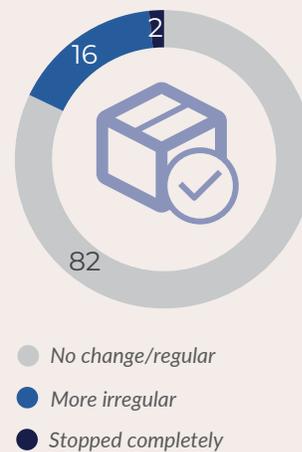


Among facilities offering FP, percentage reporting a period of time when provider-administered methods were not offered during COVID-19 restrictions (n=186)



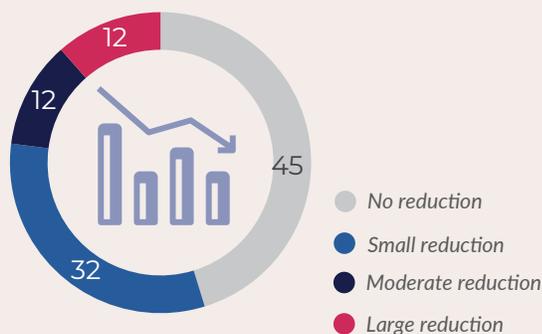
SUPPLY OF FP METHODS

Among facilities offering FP, percentage reporting an irregular or stopped supply of FP methods during the COVID-19 restrictions (n=192)



REDUCTION IN FP CLIENTS

Among facilities offering FP, percentage that reported a reduction in FP clients during the COVID-19 restrictions (n=192)



KEY FINDINGS FOR SECTION 4: COVID-19 IMPACT ON SERVICE DELIVERY POINTS

- Among the health facilities providing FP, 18% reported that they provided irregular FP services or completely suspended FP service delivery during the COVID-19 restrictions.
- Among the health facilities providing FP, more than half reported a decrease in the number of FP clients during the COVID-19 restrictions.

PMA Côte d'Ivoire collects information on knowledge, practice, and coverage of family planning services in 122 enumeration areas selected using a multi-stage stratified cluster design with urban-rural and region strata. The results are representative at the national level and within urban/rural strata. Data were collected between September and November 2020 from 3,988 households (96.0% response rate), 4,135 females age 15-49 (97.0% response rate), 215 facilities (97.7% completion rate), and 928 client exit interviews. For sampling information and full data sets, visit www.pmadata.org/countries/cote-divoire.

Percentages presented in this brief have been rounded and may not add up to 100%.

PMA uses mobile technology and female resident data collectors to support rapid-turnaround surveys to monitor key family planning and health indicators in Africa and Asia. PMA Côte d'Ivoire is led by École Nationale Supérieure de Statistique et d'Économie Appliquée d'Abidjan (ENSEA). Overall direction and support are provided by the Bill & Melinda Gates Institute for Population and Reproductive Health at the Johns Hopkins University and Jhpiego. Funding is provided by the Bill & Melinda Gates Foundation.

Link to questionnaire and PMA COVID-19 website: <https://www.pmadata.org/technical-areas/covid-19>.