

PMA DEMOCRATIC REPUBLIC OF CONGO (KINSHASA)

Results from Phase 2 cross-sectional survey

November – February 2021



OVERALL KEY FINDINGS



The implant is the most common contraceptive method among married women, and emergency contraception is the most common method among unmarried women who are sexually active.



The percentage of women reporting that their most recent birth or their current pregnancy was unintended increased from 49% in 2020 to 61% in 2021.

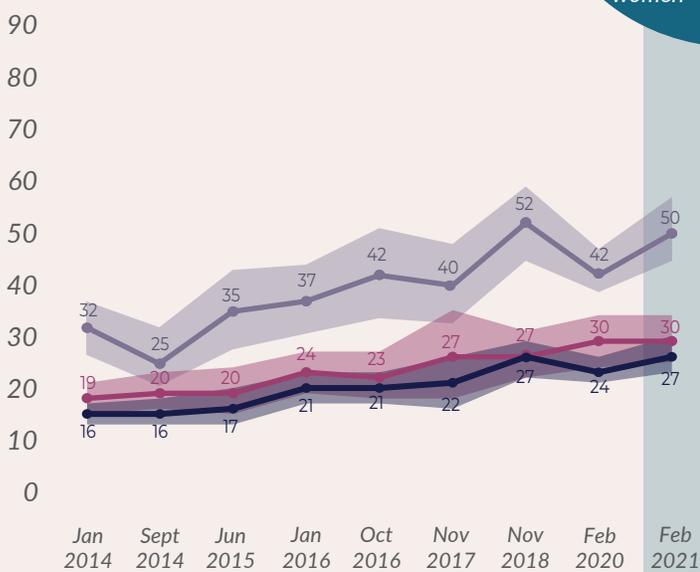


Stock-outs of oral contraceptive pills and male condoms in public service delivery points increased in 2021 and were more frequent in public service delivery points compared to private service delivery points.

SECTION 1: CONTRACEPTIVE USE, DYNAMICS, AND DEMAND

MODERN CONTRACEPTIVE PREVALENCE

Percent of women age 15-49 currently using modern contraception (mCPR) by marital status



1.7%
average annual increase in mCPR for all women

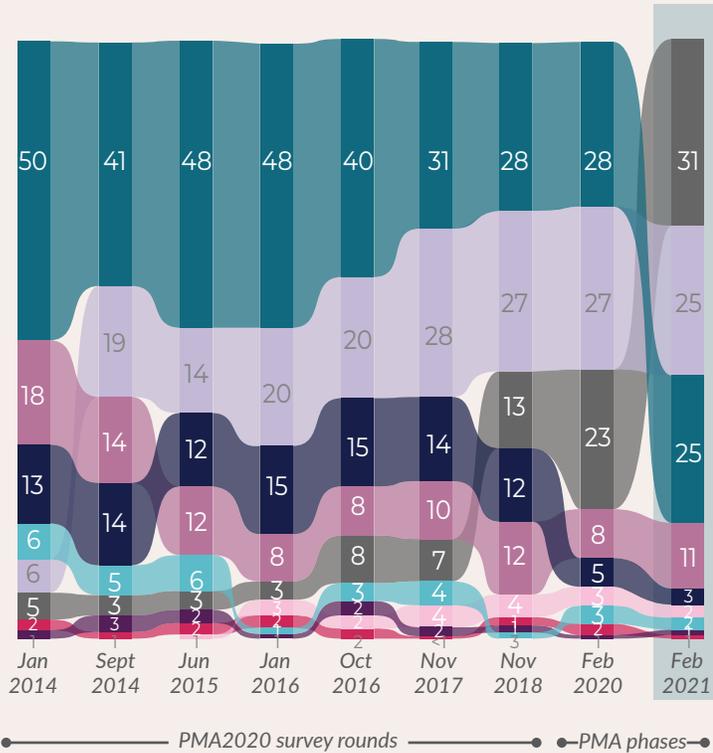
CONTRACEPTIVE PREVALENCE BY METHOD TYPE

Percent of all women age 15-49 currently using contraception by method type (PMA Phase 2 n=2,369)



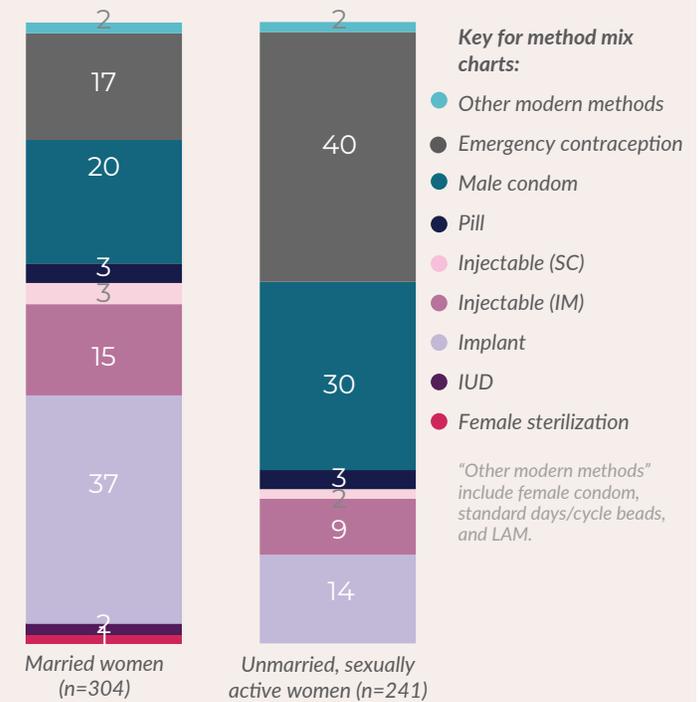
TRENDS IN MODERN CONTRACEPTIVE MIX

Percent distribution of all women age 15-49 using modern contraceptive methods by method and year (PMA Phase 2 n=630)



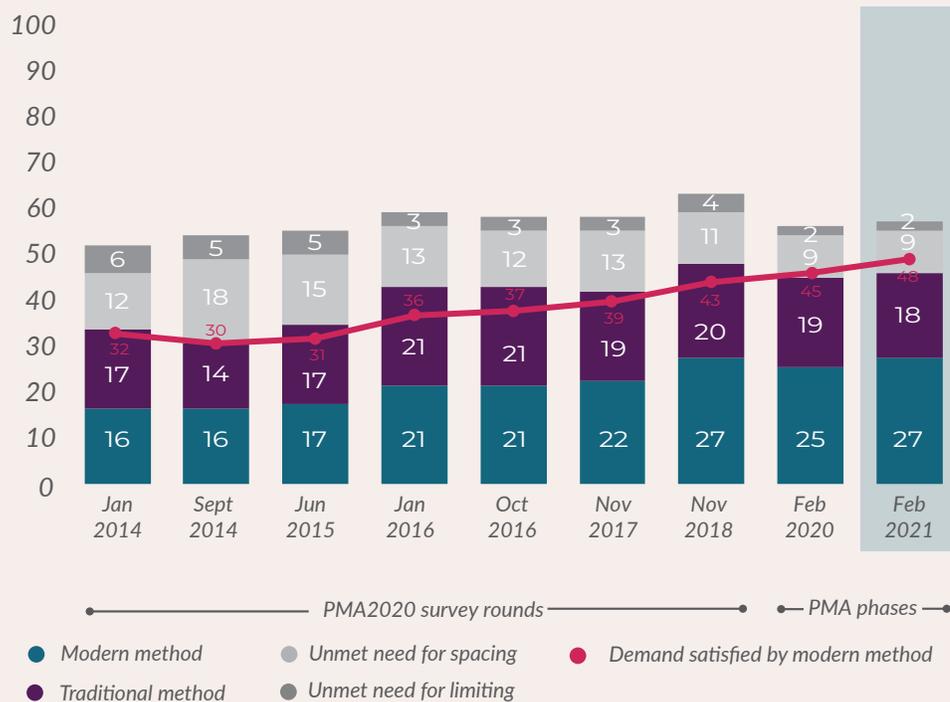
MODERN CONTRACEPTIVE METHOD MIX

Percent distribution of modern contraceptive users age 15-49 by method and marital status



METHOD USE, UNMET NEED, AND DEMAND SATISFIED BY A MODERN METHOD

Percent of all women age 15-49 using contraception by method type, unmet need, and demand satisfied by a modern method (PMA Phase 2 n=2,369)



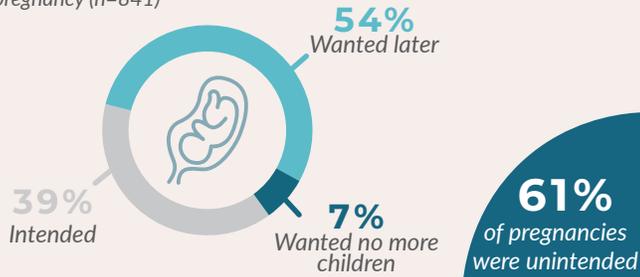
INTENTION TO USE CONTRACEPTION IN THE NEXT YEAR

Percent of all women age 15-49 who are not currently using contraception but intend to use contraception in the next 12 months (n=1,182)



INTENTION OF MOST RECENT BIRTH/CURRENT PREGNANCY

Percent of women by intention of their most recent birth or current pregnancy (n=841)



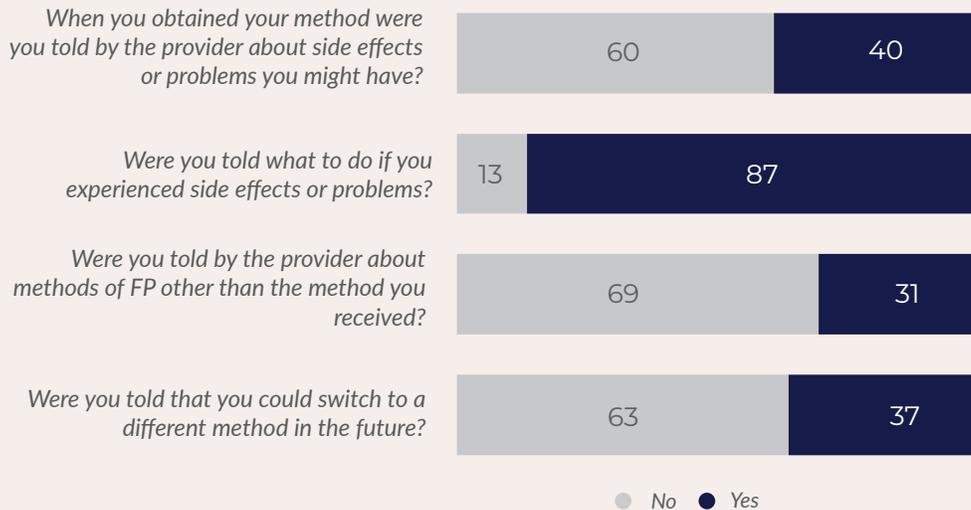
KEY FINDINGS FOR SECTION 1: CONTRACEPTIVE USE, DYNAMICS, AND DEMAND

- There is an increase in the use of emergency contraception among women of reproductive age in the city of Kinshasa. Its prevalence has increased from 23% to 31% between 2020 and 2021.
- Nearly one in six non-users (16%) intend to use a contraceptive method in the next 12 months.
- Six in ten women reported that their most recent birth or their current pregnancy was unintended. In 2021, 54% of women reported that their most recent birth or their current pregnancy was wanted later, while 7% wanted no more children.

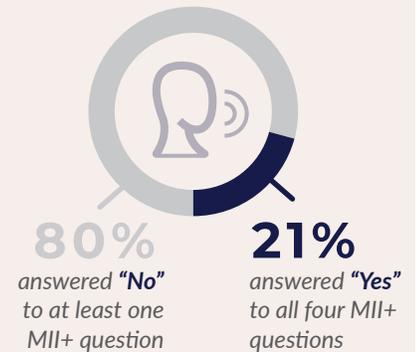
SECTION 2: CONTRACEPTIVE USER COUNSELING AND OUTREACH

METHOD INFORMATION INDEX PLUS (MII+)

Percent of women who were told about side effects, what to do about side effects, of other methods, and the possibility of switching methods (n=554)

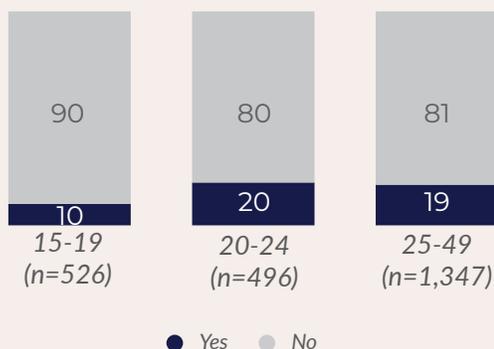


Percent of women who responded "Yes" to all four MII+ questions



DISCUSSED FP IN THE PAST YEAR WITH PROVIDER/CHW

Percent of women who received FP information from a provider or community health worker (CHW), by age



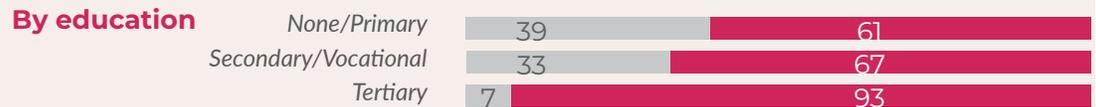
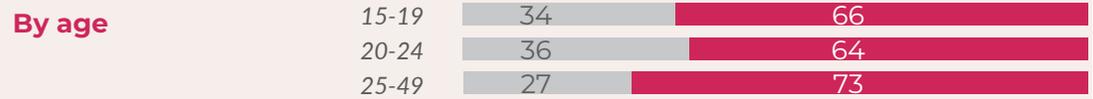
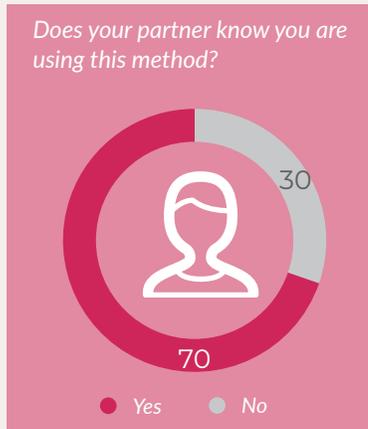
KEY FINDINGS FOR SECTION 2: COUNSELING AND OUTREACH

- Only one in five women (21%) received comprehensive information when receiving FP services.
- One in five women had discussed FP with a provider in the last 12 months. Adolescents were even less likely than older women to have had these discussions.

SECTION 3: PARTNER DYNAMICS

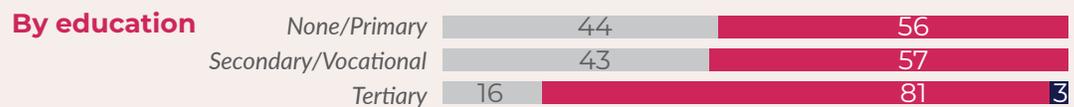
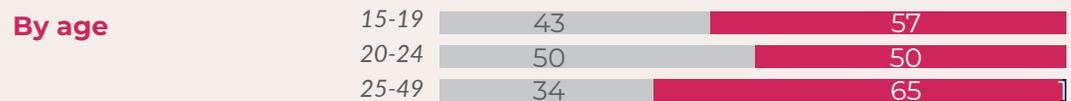
PARTNER INVOLVEMENT IN FP DECISIONS

Percent of women who are currently using modern, female controlled methods and agree with the following statement, by age and education (n=424)



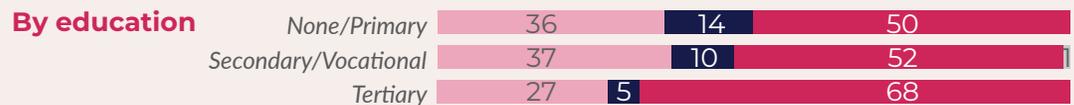
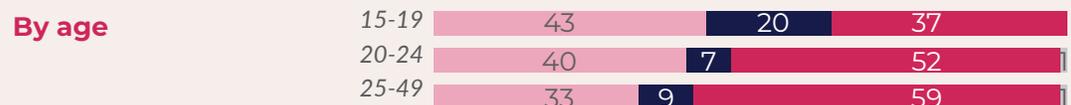
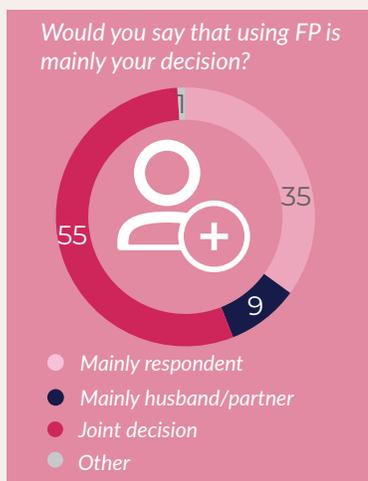
Modern, female controlled methods Includes all modern methods except male sterilization and male condoms

Percent of women who are currently using modern, female controlled methods and agree with the following statement, by age and education (n=424)



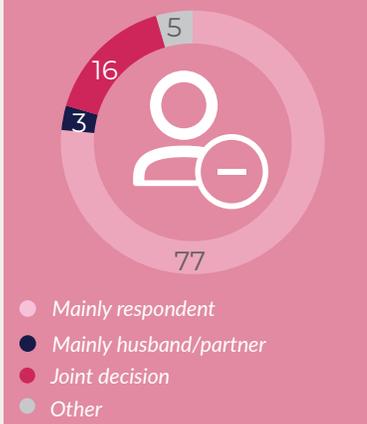
Modern, female controlled methods Includes all modern methods except male sterilization and male condoms

Percent of women who are currently using FP and agree with the following statement, by age and education (n=1,228)

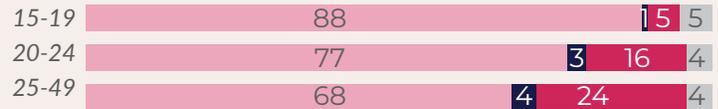


Percent of women who are not currently using FP and agree with the following statement, by age and education (n=991)

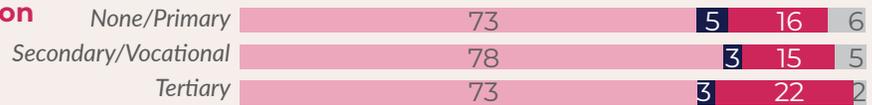
Would you say that not using FP is mainly your decision?



By age



By education

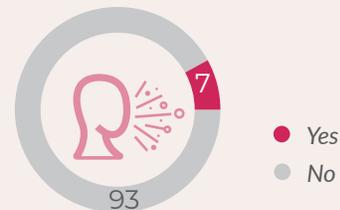


PREGNANCY COERCION

Percent of currently married women who report that their partner tried to force or pressure them to become pregnant in the past 12 months (n=1,037)



Percent of currently married women who report that their partner made them feel badly for wanting to use an FP method to delay or prevent pregnancy in the past 12 months (n=1,037)



Percent of currently married women who report that their partner said he would leave them if they did not get pregnant in the past 12 months (n=1,037)



Percent of currently married women who report that their partner took away their FP method or kept them from a clinic in the past 12 months (n=1,037)



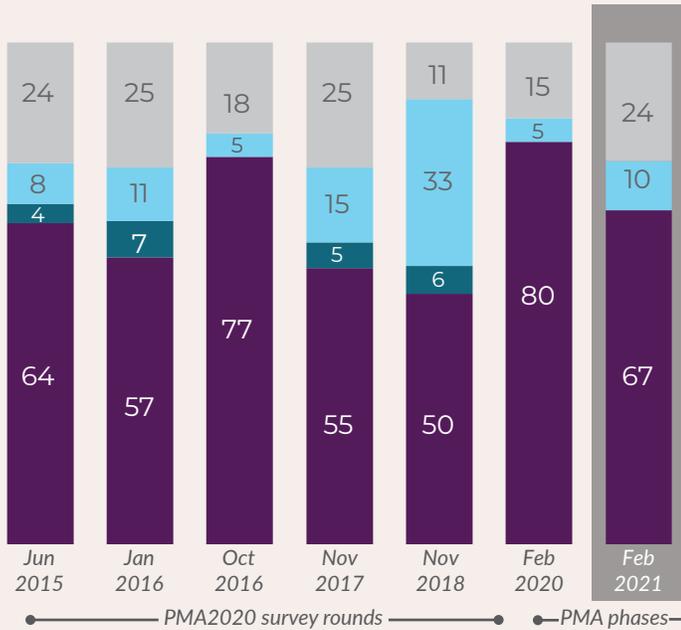
KEY FINDINGS FOR SECTION 4: PARTNER DYNAMICS

- Among women who currently use a female-controlled modern contraceptive method, seven in ten reported that their partners knew the method they were using. This percentage was higher among women with a university-level education.
- More than half of users (55%) reported that the decision to use contraception was made jointly with their partners. More than seven in ten non-users (77%) made the decision to not use contraception by themselves.
- Eight percent of married women reported that their partner tried to force or to pressure them to become pregnant in the last 12 months. Four percent reported that their partners took away their contraceptive method or kept them from going to a clinic in the last 12 months.

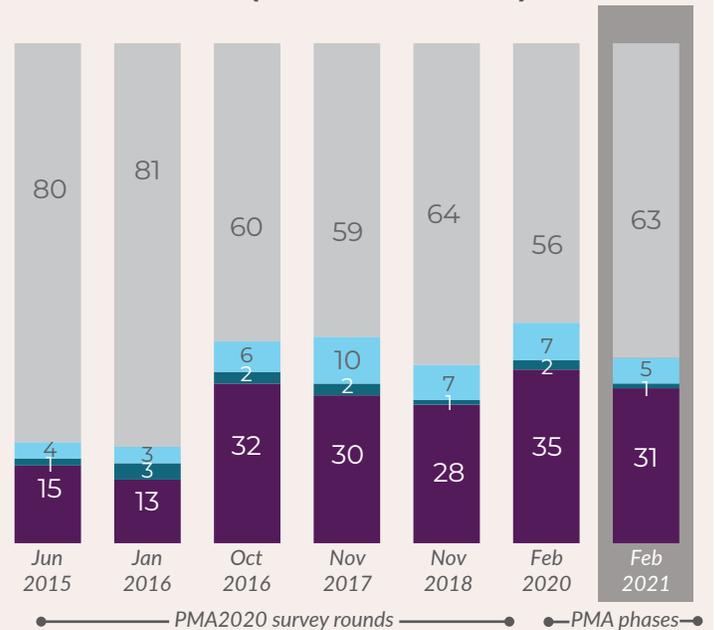
SECTION 4: SERVICE DELIVERY POINTS

TRENDS IN METHOD AVAILABILITY: IUD

Public facilities (PMA Phase 2 n=21)



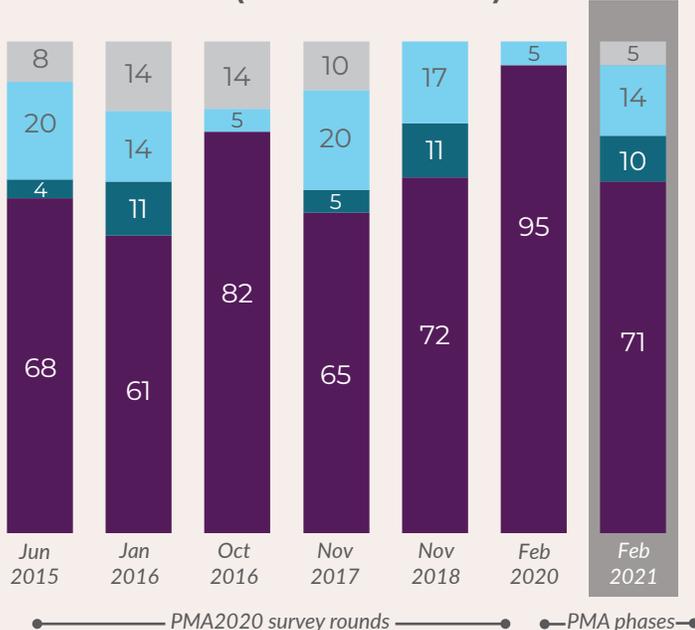
Private facilities (PMA Phase 2 n=116)



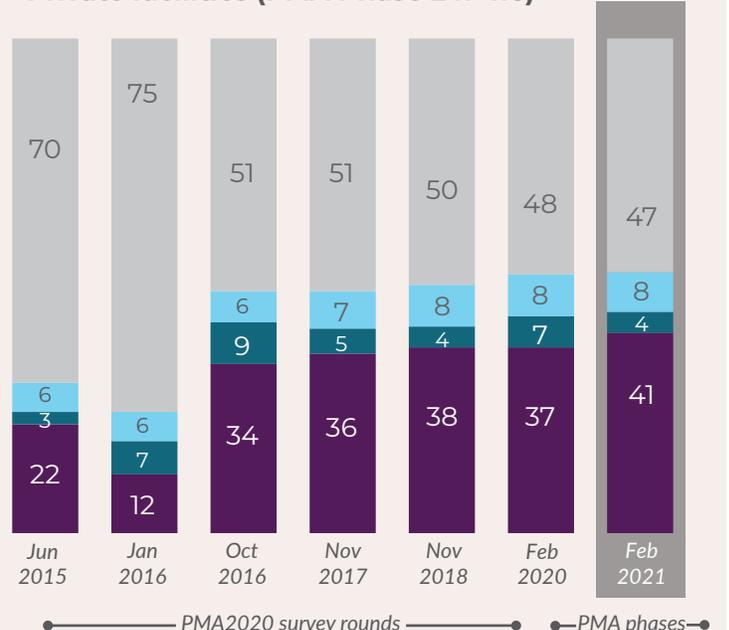
● Currently in stock and no stockout in last 3 months ● Currently in stock but stockout in last 3 months ● Currently out of stock ● Not offered

TRENDS IN METHOD AVAILABILITY: IMPLANT

Public facilities (PMA Phase 2 n=21)



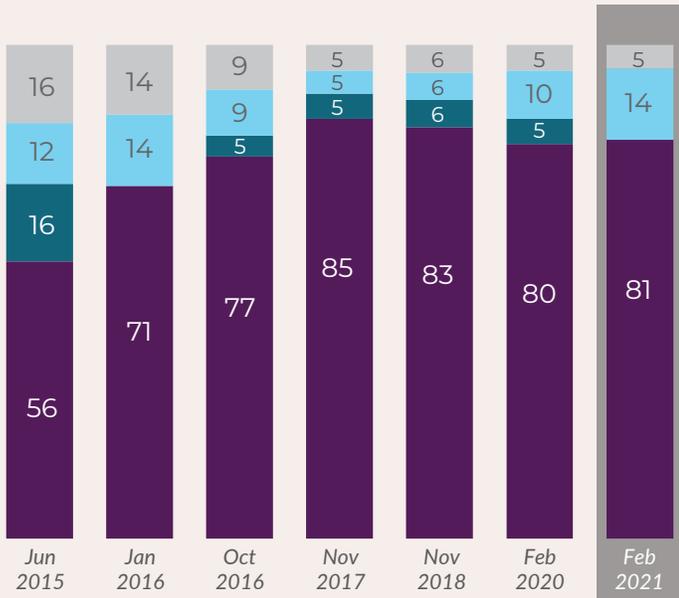
Private facilities (PMA Phase 2 n=116)



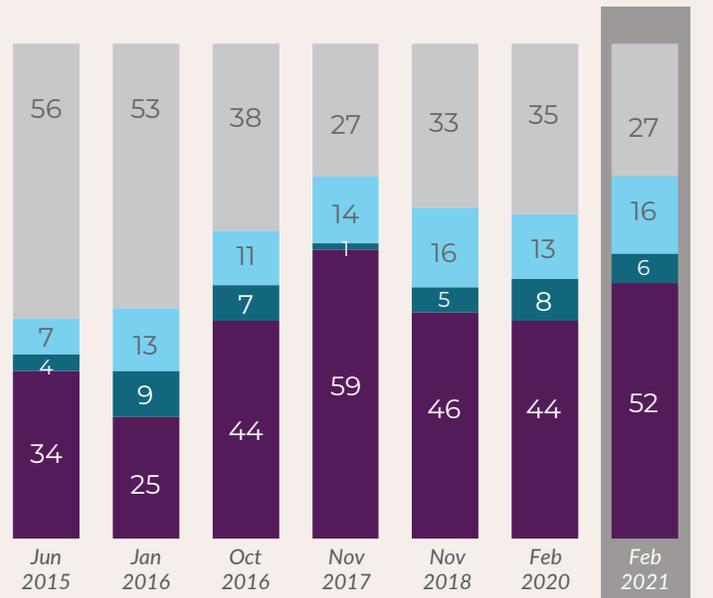
● Currently in stock and no stockout in last 3 months ● Currently in stock but stockout in last 3 months ● Currently out of stock ● Not offered

TRENDS IN METHOD AVAILABILITY: INJECTABLES

Public facilities (PMA Phase 2 n=21)



Private facilities (PMA Phase 2 n=116)

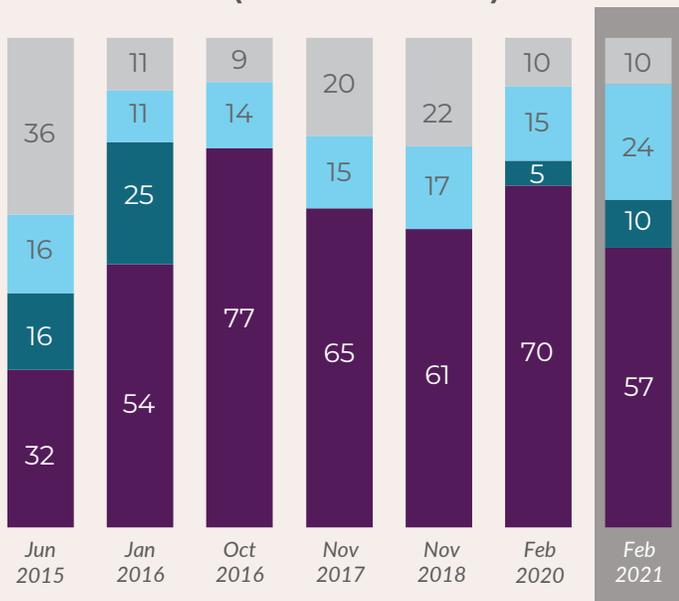


— PMA2020 survey rounds — PMA phases —

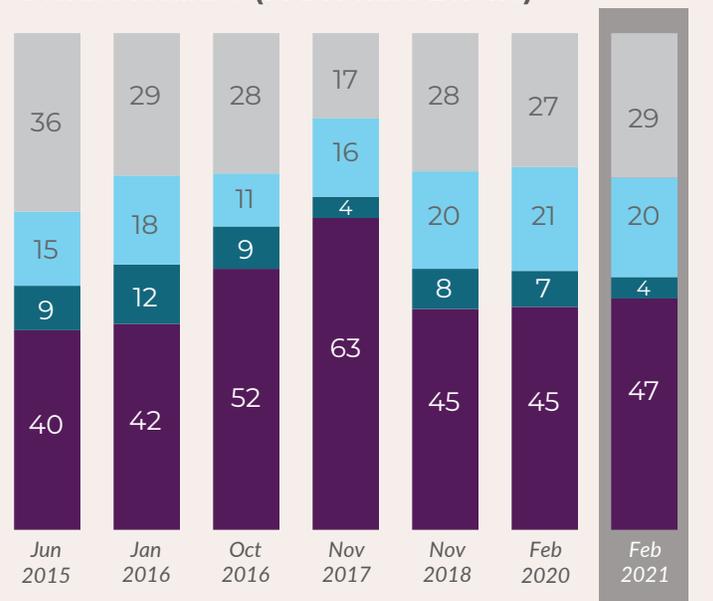
● Currently in stock and no stockout in last 3 months ● Currently in stock but stockout in last 3 months ● Currently out of stock ● Not offered

TRENDS IN METHOD AVAILABILITY: PILLS

Public facilities (PMA Phase 2 n=21)



Private facilities (PMA Phase 2 n=116)

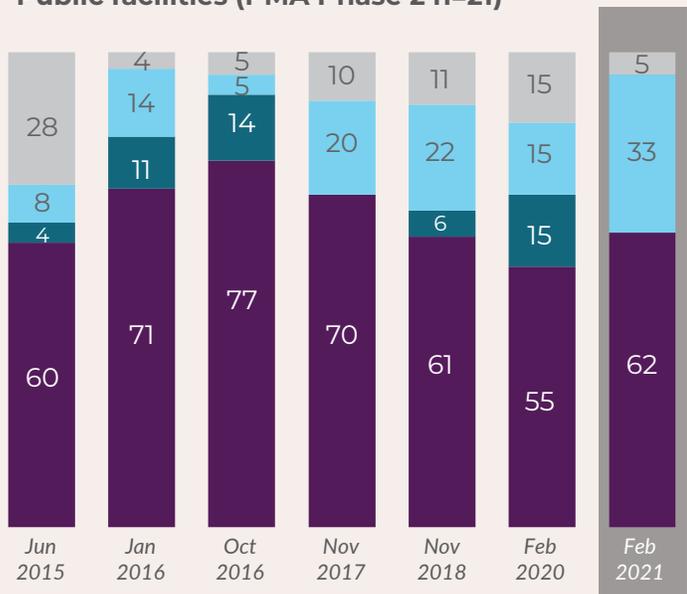


— PMA2020 survey rounds — PMA phases —

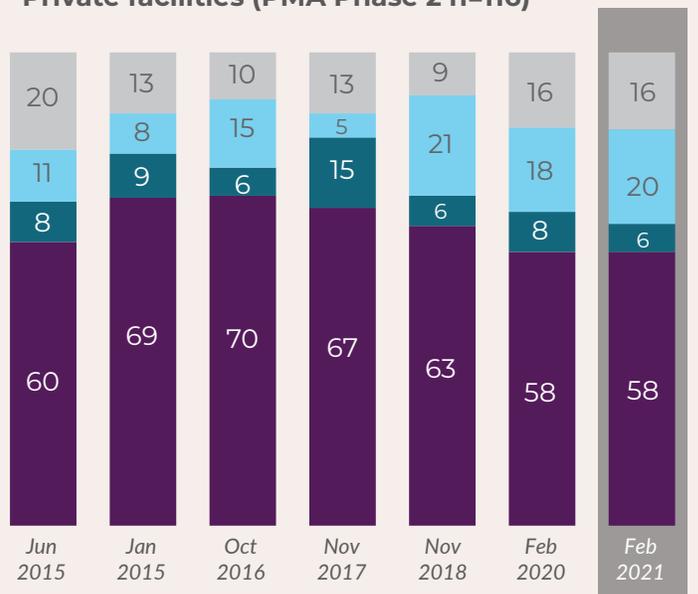
● Currently in stock and no stockout in last 3 months ● Currently in stock but stockout in last 3 months ● Currently out of stock ● Not offered

TRENDS IN METHOD AVAILABILITY: MALE CONDOMS

Public facilities (PMA Phase 2 n=21)



Private facilities (PMA Phase 2 n=116)



● Currently in stock and no stockout in last 3 months
 ● Currently in stock but stockout in last 3 months
 ● Currently out of stock
 ● Not offered

MAIN REASON FOR EPISODES OF STOCKOUT OF ANY METHOD BY TYPE OF FACILITY

Public facilities (n=51 episodes)



78%
Ordered but did not receive shipment



22%
Other

Private facilities (n=179 episodes)



53%
Ordered but did not receive shipment

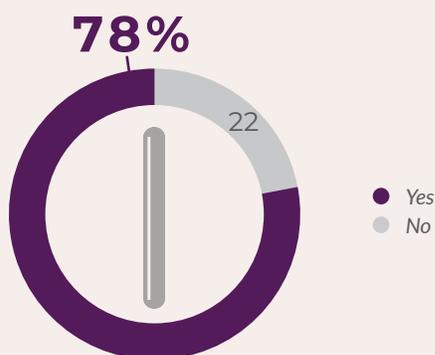


15%
Did not place order for shipment

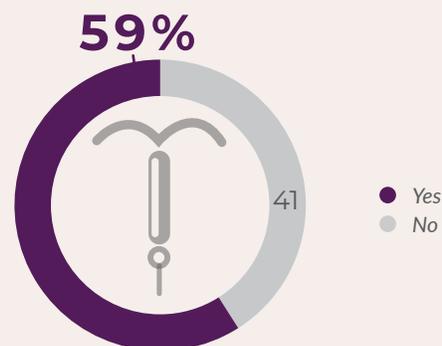
Possible answers were "Did not place order for shipment", "Ordered but did not receive shipment", "Did not order the right quantities", "Ordered but did not receive the right quantities", "Unexpected increase in consumption", "Stock out due to COVID-19 disruption", and "Other."

FACILITY READINESS

Percent of facilities that provide implants and have a trained provider and instruments/supplies needed for implant insertion/removal (n=81)



Percent of facilities that provide IUDs and have a trained provider and instruments/supplies needed for IUD insertion/removal (n=59)



28%

of women obtained their current modern method from a public health facility (n=575)

KEY FINDINGS FOR SECTION 5: SERVICE DELIVERY POINTS

- Contraceptive stock outs in public service delivery points were very high in 2021 compared to the year 2020.
- The main reported reason for stock outs was that products were ordered but shipment was not delivered.
- Nearly eight in ten service delivery points offering implants have a trained provider and the supplies needed for their insertion and removal.

TABLES: CONTRACEPTIVE PREVALENCE AND UNMET NEED

ALL WOMEN				CPR				mCPR				Unmet need for family planning			
Data source	Round/Phase	Data collection	Female sample	CPR%	SE	95% CI		mCPR%	SE	95% CI		Unmet need (%)	SE	95% CI	
PMA 2020	R1	Oct-Jan 2014	2,129	33.22	1.26	30.75	35.79	16.24	0.95	14.42	18.24	17.65	0.92	15.89	19.56
PMA 2020	R2	Aug-Sept 2014	2,860	30.35	2.14	26.24	34.80	15.98	1.30	13.55	18.74	22.36	1.41	19.67	25.29
PMA 2020	R3	May-Jun 2015	2,665	34.20	2.33	29.71	38.99	16.92	1.72	13.75	20.64	20.08	1.50	17.25	23.25
PMA 2020	R4	Oct-Jan 2016	2,733	42.32	1.86	38.65	46.09	20.94	1.53	18.04	24.17	16.00	1.52	13.2	19.27
PMA 2020	R5	Aug-Oct 2016	2,582	42.28	2.29	37.79	46.90	20.89	1.31	18.39	23.63	14.57	1.77	11.38	18.47
PMA 2020	R6	Aug-Nov 2017	2,568	40.50	2.18	36.23	44.91	22.01	2.52	17.40	27.43	15.75	1.74	12.59	19.54
PMA 2020	R7	Oct-Nov 2018	2,583	46.62	2.10	42.44	50.84	26.54	1.86	22.98	30.43	14.95	2.59	10.49	20.85
PMA	Phase 1	Dec-Feb 2020	2,611	43.61	1.58	40.47	46.8	24.48	1.40	21.78	27.40	10.67	0.93	8.94	12.69
PMA	Phase 2	Nov-Feb 2021	2,369	45.26	2.08	41.14	49.45	27.29	1.74	23.96	30.91	11.39	1.24	9.14	14.11

MARRIED WOMEN				CPR				mCPR				Unmet need for family planning			
Data source	Round/Phase	Data collection	Female sample	CPR%	SE	95% CI		mCPR%	SE	95% CI		Unmet need (%)	SE	95% CI	
PMA 2020	R1	Oct-Jan 2014	1,073	38.83	1.98	34.95	42.85	18.86	1.62	15.83	22.32	31.07	1.43	28.28	34.01
PMA 2020	R2	Aug-Sept 2014	1,396	35.64	2.52	30.77	40.83	20.26	1.76	16.97	23.99	33.34	2.05	29.38	37.55
PMA 2020	R3	May-Jun 2015	1,200	42.24	2.99	36.41	48.29	20.39	2.27	16.22	25.30	31.37	2.24	27.07	36.02
PMA 2020	R4	Oct-Jan 2016	1,173	50.22	2.59	45.06	55.37	23.78	1.83	20.31	27.63	25.60	2.34	21.22	30.54
PMA 2020	R5	Aug-Oct 2016	1,190	49.90	3.38	43.20	56.61	23.40	2.18	19.34	28.03	22.58	2.90	17.33	28.88
PMA 2020	R6	Aug-Nov 2017	1,166	47.33	2.83	41.75	52.99	26.70	4.12	19.34	35.63	24.77	2.07	20.87	29.13
PMA 2020	R7	Oct-Nov 2018	1,197	51.26	3.22	44.85	57.63	27.37	2.21	23.19	32.00	23.52	3.78	16.84	31.83
PMA	Phase 1	Dec-Feb 2020	1,159	54.65	2.20	50.24	59.00	29.63	2.40	25.07	34.63	15.60	1.21	13.33	18.18
PMA	Phase 2	Nov-Feb 2021	1,044	54.93	1.96	50.98	58.82	30.33	2.11	26.29	34.69	17.62	1.66	14.55	21.18

In Kinshasa province, PMA Democratic Republic of Congo collects information on knowledge, practice and coverage of family planning services in 57 enumeration areas. The results are representative at the provincial level. Phase 2 data were collected between November 2020 and February 2021 from 1,866 households (95.1% response rate), 2,369 females age 15-49 (93% response rate), and 204 service delivery points (98.5% response rate).

For sampling information and full datasets, visit www.pmadata.org/countries/democratic-republic-congo.

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 Democratic Republic of Congo is led by l'École de Santé Publique de l'Université de Kinshasa. 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.