OVERALL KEY FINDINGS

The modern contraceptive prevalence rate (mCPR) among women in union remained virtually stable (around 30%) between April 2021 and February 2023.

Contraceptive demand met by a modern method increased between May 2023 (56%) and February 2023 (62%), reaching its April 2021 level.

Nearly nine in ten (87%) modern contraceptive users obtained their method from a public facility.

SECTION 1: CONTRACEPTIVE USE, DYNAMICS, AND DEMAND

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

CONTRACEPTIVE PREVALENCE BY METHOD TYPE
Percent of all women age 15-49 currently using contraception by method type (PMA Phase 3, n=1,369)
TRENDS IN MODERN CONTRACEPTIVE MIX
Percent distribution of all women age 15-49 using modern contraceptive methods by method and year (PMA Phase 3, n=230)

MODERN CONTRACEPTIVE METHOD MIX
Percent distribution of modern contraceptive users age 15-49 by method and marital status

“Other modern methods” include male sterilization, female condoms, standard days/cycle beads, emergency contraception, and diaphragm.

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 3, n=1,369)

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=1,054)

Demand satisfied by a modern method is total number of modern method users over the sum of contraceptive users and those with unmet need.
SECTION 2: CONTRACEPTIVE USER COUNSELING AND OUTREACH

INTENTION OF MOST RECENT BIRTH/CURRENT PREGNANCY
Percent of women by intention of their most recent birth or current pregnancy (n=548)

- 78% Intended
- 21% Wanted later
- 1% Wanted no more children
- 22% of pregnancies were unintended

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

- Unmet needs for family planning decreased between August 2015 and February 2023, from 17% to 10%.
- The proportion of IUD users increased between April 2021 and February 2023, from 3% to 8%. Simultaneously, the proportion of implant users decreased from 21% in April 2021 to 17% in February 2023.
- More than one in five women (22%) reported that their recent birth or current pregnancy was undesired, 21% of whom would have preferred for it to happen later, and 1% did not want it at all.

SECTION 2: CONTRACEPTIVE USER COUNSELING AND OUTREACH

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

- 98% Yes (15-19, n=373)
- 85% Yes (20-24, n=282)
- 82% Yes (25-49, n=714)

KEY FINDINGS FOR SECTION 2: COUNSELING AND OUTREACH

- About four in ten current modern contraceptive users (39%) were not counseled on possible side effects or issues related to the method they selected at the time of their visit.
- In the past twelve months, adolescent girls (15-19) received FP information from a health provider nine times less often than older women (25-49).
- Over half (53%) of all current contraceptive users received comprehensive counseling services from a health provider in February 2023.

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=230)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>When you obtained your method were you told by the provider about side effects or problems you might have?</td>
<td>39</td>
<td>61</td>
</tr>
<tr>
<td>Were you told what to do if you experienced side effects or problems?</td>
<td>5</td>
<td>95</td>
</tr>
<tr>
<td>Were you told by the provider about methods of FP other than the method you received?</td>
<td>30</td>
<td>70</td>
</tr>
<tr>
<td>Were you told that you could switch to a different method in the future?</td>
<td>26</td>
<td>74</td>
</tr>
</tbody>
</table>

53% answered “Yes” to at least one MII+ question
47% answered “No” to at least one MII+ question

Only women who said they were told about possible side effects were asked whether they were told about what to do in the event of side effects.
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=221)

Does your partner know you are using this method?

By age

<table>
<thead>
<tr>
<th>Age</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-24</td>
<td>15</td>
<td>95</td>
</tr>
<tr>
<td>25-49</td>
<td>8</td>
<td>92</td>
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</table>

By education

<table>
<thead>
<tr>
<th>Education</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>None/Primary</td>
<td>8</td>
<td>92</td>
</tr>
<tr>
<td>Secondary</td>
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<td>90</td>
</tr>
<tr>
<td>Tertiary</td>
<td>2</td>
<td>98</td>
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</table>

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=221)

Before you started using this method had you discussed the decision to delay or avoid pregnancy with your partner?

By age

<table>
<thead>
<tr>
<th>Age</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-24</td>
<td>16</td>
<td>84</td>
</tr>
<tr>
<td>25-49</td>
<td>19</td>
<td>81</td>
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By education

<table>
<thead>
<tr>
<th>Education</th>
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<th>No</th>
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</thead>
<tbody>
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<td>75</td>
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<tr>
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<td>16</td>
<td>84</td>
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<tr>
<td>Tertiary</td>
<td>4</td>
<td>96</td>
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</tbody>
</table>

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=230)

Would you say that using FP is mainly your decision?

By age

<table>
<thead>
<tr>
<th>Age</th>
<th>Mainly respondent</th>
<th>Joint decision</th>
<th>Mainly husband/partner</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-24</td>
<td>52</td>
<td>42</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>25-49</td>
<td>48</td>
<td>38</td>
<td>10</td>
<td>3</td>
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</table>

By education

<table>
<thead>
<tr>
<th>Education</th>
<th>Mainly respondent</th>
<th>Joint decision</th>
<th>Mainly husband/partner</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>None/Primary</td>
<td>53</td>
<td>5</td>
<td>37</td>
<td>5</td>
</tr>
<tr>
<td>Secondary</td>
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<td>11</td>
<td>39</td>
<td>1</td>
</tr>
<tr>
<td>Tertiary</td>
<td>38</td>
<td>16</td>
<td>46</td>
<td></td>
</tr>
</tbody>
</table>
Percent of women who are not currently using FP and agree with the following statement, by age and education (n=1,040)

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

- By age
  - 15-19: 65% Yes, 8% No, 24% Other
  - 20-24: 67% Yes, 14% No, 15% Other
  - 25-49: 71% Yes, 19% No, 4% Other

- By education
  - None/Primary: 70% Yes, 17% No, 8% Other
  - Secondary: 68% Yes, 13% No, 15% Other
  - Tertiary: 61% Yes, 14% No, 22% Other

**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=718)

- Yes: 96%
- No: 4%

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=718)

- Yes: 99%
- No: 1%

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=716)

- Yes: 65%
- No: 35%

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=716)

- Yes: 67%
- No: 33%

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=718)

- Yes: 70%
- No: 30%

**KEY FINDINGS FOR SECTION 3: PARTNER DYNAMICS**

- Among women who were using a female-controlled modern contraceptive method, only 8% reported that their partner did not know they were using a contraceptive method. This proportion was lower among adolescents and youths (5%) and among women with higher education (2%).

- Nearly two in ten women (18%) who were using a female-controlled contraceptive method reported that they did not discuss with their partner the decision to delay or prevent a pregnancy before starting using their current method. This proportion was higher among women who never attended school or who had a primary school level (25%).

- Only 39% of current users reported that the decision to use a contraceptive method was made jointly with their partner, and this proportion was higher among adolescents and youths (42%) and among women who attended university (46%).
TRENDS IN METHOD AVAILABILITY: INJECTABLES

Public facilities (PMA Phase 3, n=61)

Private facilities (PMA Phase 3, n=47)

TRENDS IN METHOD AVAILABILITY: PILLS

Public facilities (PMA Phase 3, n=61)

Private facilities (PMA Phase 3, n=47)
**Trends in Method Availability: Male Condoms**

**Public facilities (PMA Phase 3, n=61)**

- **August 2015**: 10%
- **May 2016**: 4%
- **December 2016**: 11%
- **August 2018**: 13%
- **August 2019**: 13%
- **April 2021**: 6%
- **May 2022**: 8%
- **February 2023**: 2%

**Private facilities (PMA Phase 3, n=47)**

- **August 2015**: 20%
- **May 2016**: 40%
- **December 2016**: 25%
- **August 2018**: 20%
- **August 2019**: 20%
- **April 2021**: 46%
- **May 2022**: 5%
- **February 2023**: 2%

**Main Reason for Episodes of Stockout of Any Method by Type of Facility**

**Public facilities (n=11 episodes)**

- **100%** Ordered but did not receive 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.”**

**Private facilities (n=14 episodes)**

- **57%** Ordered but did not receive shipment
- **14%** Ordered but did not receive the right quantities

**Facility Readiness**

- **Public facilities**: 72% Yes, 28% No
- **Private facilities**: 55% Yes, 45% No
KEY FINDINGS FOR SECTION 4: SERVICE DELIVERY POINTS

- In February 2023, 9% of public service delivery points (SDP) were or had recently been out of stock of implants.
- Failure to deliver orders (100%) was the only reason for contraceptive stockouts at the public SDP level.
- While 72% of public facilities provide the implant and have a trained provider with the necessary equipment for its insertion and removal, they were only 55% to provide the IUD and to have a trained provider and the necessary equipment for its insertion and removal.
### TABLES: CONTRACEPTIVE PREVALENCE AND UNMET NEED

#### All Women

<table>
<thead>
<tr>
<th>Data source</th>
<th>Round/Phase</th>
<th>Data collection</th>
<th>Female sample</th>
<th>CPR%</th>
<th>SE</th>
<th>95% CI</th>
<th>mCPR%</th>
<th>SE</th>
<th>95% CI</th>
<th>Unmet need for family planning</th>
</tr>
</thead>
<tbody>
<tr>
<td>PMA 2020</td>
<td>R2</td>
<td>Feb-May 2016</td>
<td>1,276</td>
<td>20.09</td>
<td>1.60</td>
<td>17.03-23.5</td>
<td>18.82</td>
<td>1.62</td>
<td>15.75-22.3</td>
<td>14.48-1.54-11.64-17.89</td>
</tr>
<tr>
<td>PMA 2020</td>
<td>R3</td>
<td>Nov-Dec 2016</td>
<td>1,398</td>
<td>22.01</td>
<td>1.89</td>
<td>18.39-26.10</td>
<td>21.10</td>
<td>1.90</td>
<td>17.47-25.26</td>
<td>12.29-1.18-10.08-14.90</td>
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<tr>
<td>PMA Phase 2</td>
<td></td>
<td>Jan-May 2022</td>
<td>1,359</td>
<td>18.82</td>
<td>1.25</td>
<td>16.41-21.49</td>
<td>17.77</td>
<td>1.25</td>
<td>15.37-20.46</td>
<td>13.07-1.70-10.00-16.92</td>
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<tr>
<td>PMA Phase 3</td>
<td></td>
<td>Nov 2022-Feb 2023</td>
<td>1,369</td>
<td>17.46</td>
<td>1.21</td>
<td>15.13-20.06</td>
<td>16.67</td>
<td>1.09</td>
<td>14.56-19.01</td>
<td>10.09-1.19-7.91-12.78</td>
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#### Married Women

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<tr>
<th>Data source</th>
<th>Round/Phase</th>
<th>Data collection</th>
<th>Female sample</th>
<th>CPR%</th>
<th>SE</th>
<th>95% CI</th>
<th>mCPR%</th>
<th>SE</th>
<th>95% CI</th>
<th>Unmet need for family planning</th>
</tr>
</thead>
<tbody>
<tr>
<td>PMA 2020</td>
<td>V2</td>
<td>Feb-May 2016</td>
<td>812</td>
<td>29.77</td>
<td>2.22</td>
<td>25.45-34.47</td>
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<td>2.21</td>
<td>23.51-32.47</td>
<td>21.20-2.22-17.03-26.07</td>
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<tr>
<td>PMA 2020</td>
<td>V3</td>
<td>Nov-Dec 2016</td>
<td>911</td>
<td>32.69</td>
<td>2.71</td>
<td>27.40-38.46</td>
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<td>26.19-37.30</td>
<td>17.24-1.74-13.96-21.09</td>
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<td>Jul-Aug 2018</td>
<td>828</td>
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<td>2.09</td>
<td>30.08-38.57</td>
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<td>27.87-36.73</td>
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<tr>
<td>PMA 2020</td>
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<td>Jul-Aug 2019</td>
<td>793</td>
<td>33.09</td>
<td>2.04</td>
<td>29.06-37.39</td>
<td>32.00</td>
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<td>PMA Phase 1</td>
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<td>2.24</td>
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<td>30.18</td>
<td>2.03</td>
<td>26.21-34.46</td>
<td>17.46-1.66-14.33-21.10</td>
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<td>PMA Phase 2</td>
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<td>Jan-May 2022</td>
<td>777</td>
<td>31.38</td>
<td>2.06</td>
<td>27.36-35.71</td>
<td>29.59</td>
<td>2.05</td>
<td>25.59-33.39</td>
<td>21.09-2.48-16.50-26.56</td>
</tr>
</tbody>
</table>

PMA Niger (Niamey) collects information on knowledge, practice, and coverage of family planning services in 33 enumeration areas selected using a multi-stage stratified cluster design with urban-rural strata. The results are regionally representative. Data were collected between November 2022 and February 2023 from 1,087 households (97.8% response rate), 1,369 females age 15-49 (96.1% response rate), and 132 facilities (93.6% response rate). For sampling information and full data sets, visit https://www.pmadata.org/countries/niger.

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 Niger (Niamey) is led by Institut National de la Statistique du Niger. 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.