PMA2016/GHANA-R5
PERFORMANCE MONITORING & ACCOUNTABILITY 2020

PMA2020 uses innovative mobile technology to support low-cost, rapid-turn-around surveys to monitor key indicators for family planning. The project is implemented by local university and research organizations in 10 countries, deploying a cadre of female resident enumerators trained in mobile-assisted data collection. PMA2020/Ghana is led by the Kwame Nkrumah University of Science and Technology (KNUST), School of Medical Sciences in collaboration with University of Development Studies (UDS) and with the support of the Ghana Health Service and Ghana Statistical Service. Overall direction and support is provided by the Bill & Melinda Gates Institute for Population and Reproductive Health at the Johns Hopkins Bloomberg School of Public Health through a grant from the Bill & Melinda Gates Foundation.

For more information on PMA2020 please visit http://www.pma2020.org

KEY FAMILY PLANNING INDICATORS

Select Family Planning Indicators Across Recent Surveys (Married and All Women, Age 15-49)						
	PMA2014 - R3		PMA2015 - R4		PMA2016 - R5	
	All	Married	All	Married	All	Married
Contraceptive Prevalence						
All Methods CPR	21.5	25.7	28.3	34.9	**26.0**	**31.2**
Modern Methods mCPR	18.1	21.4	23.6	29.2	**21.6**	**25.8**
Long Acting CPR	3.5	4.8	5.3	7.0	**5.9**	**7.2**
Total Unmet Need	21.9	32.7	21.7	29.6	**23.1**	**31.7**
For Limiting	6.7	10.4	6.5	10.3	**7.9**	**12.1**
For Spacing	15.3	22.2	15.2	19.4	**15.1**	**19.6**
Total Demand	43.4	58.4	45.3	58.9	**49.0**	**62.9**
Demand Satisfied by Modern Method	41.7	36.6	52.1	49.7	**44.1**	**41.0**

Fertility Indicators (All Women)			
	PMA2014 Round 3	PMA2015 Round 4	PMA2016 Round 5
Recent Births Unintended (%)	41.2	42.4	**41.3**
Wanted Later	30.9	31.0	**27.3**
Wanted No More	10.3	11.4	**13.9**

Current Use and Unmet Need Among Married Women of Reproductive Age, by Wealth Quintile

Q1: Poorest quintile
Q5: Wealthiest quintile

❮ % Demand Satisfied by Modern Method

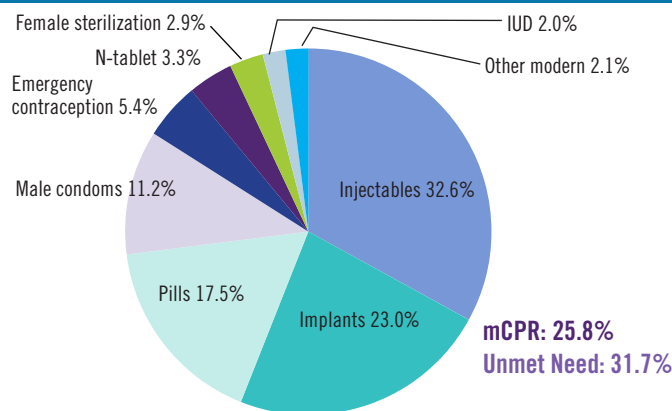|	Q1	Q2	Q3	Q4	Q5
	42.4%	36.4%	47.3%	38.2%	40.5%
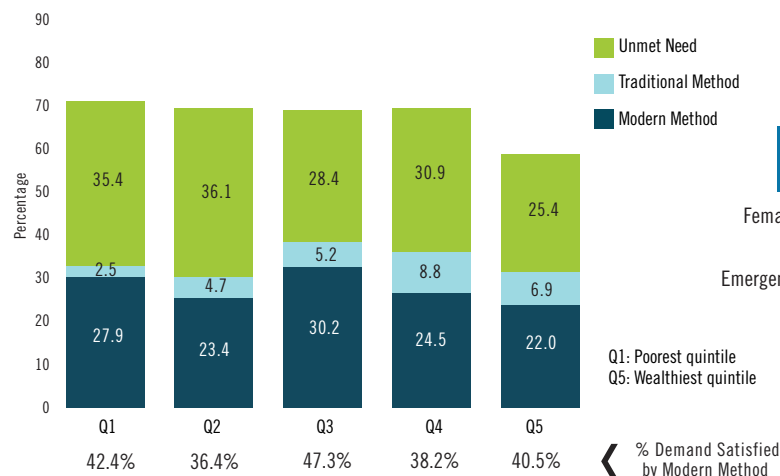
Unmet Need and Contraceptive Use, by Age (all Women)
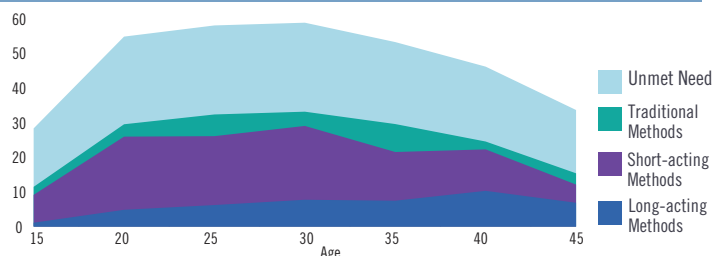
Trends in Modern Contraceptive Prevalence Rate (Married Women, age 15-49)

GDHS 2008: 16.6
PMA2013-R1: 18.4
PMA2013-R2: 17.8
PMA2014-R3: 21.4
GDHS2014: 26.7
PMA2015-R4: 29.2
PMA2016-R5: 25.8
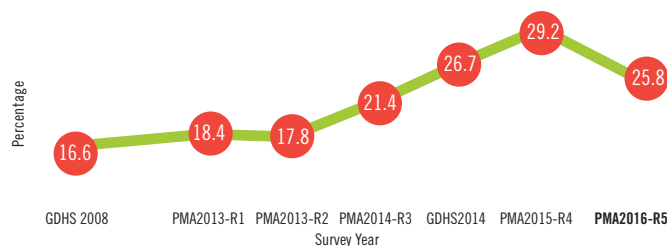
Current Modern Method Mix Among Married Contraceptive Users

Female sterilization 2.9%
N-tablet 3.3%
Emergency contraception 5.4%
Male condoms 11.2%
Pills 17.5%
Implants 23.0%
Injectables 32.6%
IUD 2.0%
Other modern 2.1%

mCPR: 25.8%
Unmet Need: 31.7%

Current Modern Method Mix Among Unmarried Sexually Active Contraceptive Users

Female sterilization 2.5%
N-tablet 3.0%
Emergency contraception 10.6%
Male condoms 24.2%
Pills 16.9%
Injectables 19.7%
Implants 20.8%
IUD 1.2%
Other modern 1.1%

mCPR: 37.6%
Unmet Need: 39.9%

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PMA2020
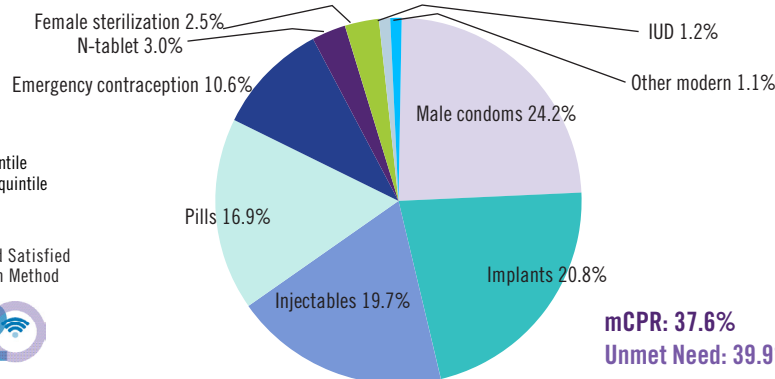
PMA2016/GHANA-R5
INDICATORS FOR ACCESS, EQUITY, QUALITY AND CHOICE

FAMILY PLANNING BRIEF

For Current Female Users (%) (n=1,895), Indicators by Wealth Quintile

- Method Chosen By Self Or Jointly (91.7%) — 91
- Obtained Method Of Choice (97.3%) — 98
- Told Of Other Methods (58.9%) — 55, 66
- Counseled On Side Effects (55.4%) — 49, 55
- Paid For FP Services (66.9%) — 50, 61
- Would Return To Provider & Refer a Friend Or Family Member (74.8%)
- Received Method From Public SDP (53.9%) — 39, 68
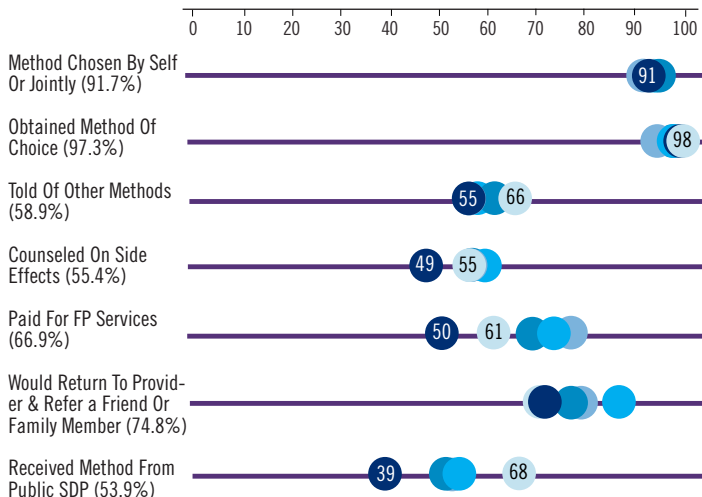
Births in the Past Five Years, or Current Pregnancies

- Last Birth Unintended (41.3%) — 33, 42

Indicator (average %)
Q1: Poorest quintile
Q5: Wealthiest quintile

Q1 Q2 Q3 Q4 Q5
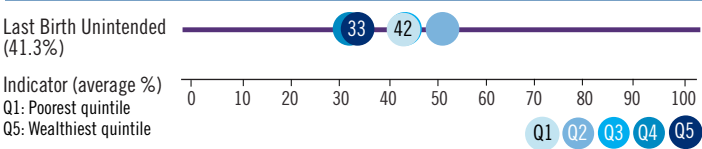
For Current Female Non-Users in Ghana (n=1,802)

Reasons Mentioned for Non-Use Among All Women Wanting to Delay the Next Birth 2 or More Years (%)

Not Married	33.7
Perceived Not-at-Risk/Lack of Need	42.9
Method or Health-Related Concerns	36.2
Opposition to Use	11.0
Lack of Access/Knowledge	6.6
Other	5.8

Reproductive Health and Contraceptive Indicators

	Total	Rural	Urban
Median Age at First Marriage (25-49 years)	22.5	20.9	23.6
Median Age at First Sex (15-49 years)	18.2	17.3	18.8
Median Age at First Contraceptive Use (15-49 years)	24.3	23.6	24.8
Median Age at First Birth (25-49 years)	21.4	20.9	22.5
Mean No. of Living Children at First Contraceptive Use	1.8	2.3	1.4
Women Having First Birth by Age 18 (18-24 years) (%)	9.9	14.7	4.9
Received FP Info. from Provider in Last 12 Months (15-49 years) (%)	25.2	32.1	19.2
Exposed to FP Media in Last Few Months (15-49 years) (%)	77.8	66.9	87.4

Percent of Facilities Offering/Not Offering & Currently In/Out of Stock on Day of the Interview, by Method

Public Facilities / Private Facilities

■ Method in stock ■ Method out of stock ■ Method not offered
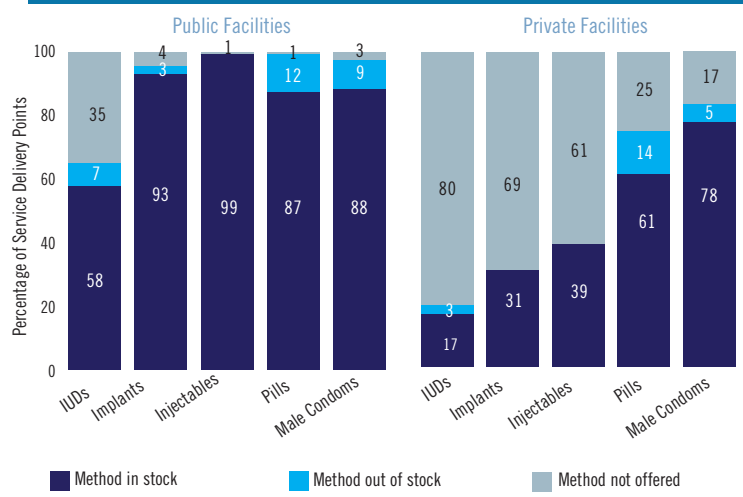
Percent of Public Facilities Offering at Least 3 or 5 Modern Contraceptive Methods, by Facility Type

Facility Type	3 or more methods	5 or more methods
Hospital (n=51)	100.0	96.1
Health Center (n=34)	100.0	94.1
Health Clinic (n=2)	100.0	100.0
CHPS* (n=24)	91.7	54.2
Total	98.2	86.5

CHPS: Community-Based Health Planning and Services

Service Delivery Points (n= 154; 111 public, 43 private)

	Public	Private	Total
Among All Service Delivery Points:			
Offering Family Planning (%)	100.0	83.7	95.5
With Mobile Teams Visiting Facility In Last 12 Months (%)	44.1	18.6	37.0
Supporting CHWs From This Service Delivery Point (%)	41.4	11.6	33.1
Among Service Delivery Points Offering Family Planning Services:			
Average Number Of Days Per Week Family Planning Is Offered	5.6	6.3	5.8
Offering Female Sterilization (%)	35.1	13.9	29.9
Offering Family Planning Counseling/Services To Adolescents (%)	100.0	83.3	95.9
Charging Fees For Family Planning Services (%)	2.7	5.6	3.4
Percent Integrating Family Planning Into Their:			
Maternal Health Services *(among all offering maternal health services)*	100.0	84.2	97.6
HIV Services *(among all offering HIV services)*	90.4	81.0	88.7
Post-Abortion Services *(among all offering post-abortion services)*	100.0	69.2	95.6

SAMPLE DESIGN

PMA2016/Ghana-R5, the fifth round of data collection in Ghana, used a two-stage cluster design with urban-rural, major ecological zones as the strata. A sample of 100 enumeration areas (EA) was drawn by the Ghana Statistical Service from its master sampling frame. For each EA, 42 households and 3-6 health service delivery points (SDPs) were selected. A random start method was used to systematically select households. Households with eligible females of reproductive age (15-49) were contacted and consented for interviews. The final sample included 3,992 households (98.7% response rate), 3,663 females (97.4% response rate) and 154 SDPs (90.6% reponse rate). Data collection was conducted between August and November, 2016.