

KEY FAMILY PLANNING INDICATORS

Select Family Planning Indicators Across Recent Surveys

(All and Married Women, Age 15-49)						
	Round 1 May-July 2016		Round 2 Mar-Apr 2017		Round 3 Apr-May 2018	
	All	Married	AII	Married	All	Married
Contraceptive Prevalence R	ate					
All Methods	12.9	12.5	14.1	13.7	16.1	14.3
Modern Methods	9.9	9.6	10.5	9.0	14.5	12.9
Long Acting/Permanent	0.7	0.9	1.4	1.7	3.0	4.4
Total Unmet Need	27.1	33.2	24.4	30.1	20.4	22.9
For Limiting	5.8	7.3	4.8	6.3	4.4	5.2
For Spacing	21.3	25.8	19.6	23.8	16.0	17.7
Total Demand	40.0	45.7	38.5	43.7	36.5	37.3
Demand Satisfied by Modern Method (%)	24.9	21.0	27.3	20.7	39.7	34.5

Fertility Indicators (All Women)				
	Round 1 May-July 2016	Round 2 Mar-Apr 2017	Round 3 Apr-May 2018	
Last Birth Unintended (%)	37.8	38.5	26.6	
Wanted Later	32.3	31.7	19.4	
Wanted No More	5.6	6.8	7.2	

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



JOHNS HOPKINS



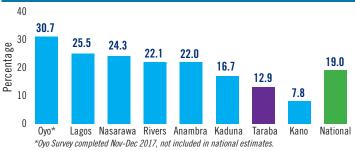
PMA2020/TARABA, NIGERIA

APRIL-MAY 2018 (ROUND 3)

Performance Monitoring and Accountability 2020 (PMA2020) uses innovative mobile technology to support low-cost, rapid-turnaround surveys to monitor key indicators for family planning. The project is implemented by local universities and research organizations in 11 countries, deploying a cadre of female resident interviewers trained in mobile-assisted data collection. PMA2020/Nigeria is led by the Centre for Research, Evaluation Resources and Development (CRERD) and Bayero University Kano (BUK). 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 by the Bill & Melinda Gates Foundation.

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

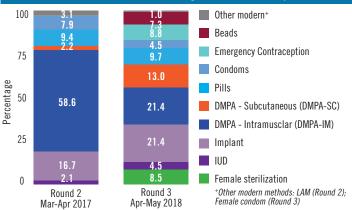
Modern Contraceptive Prevalence Rate (Married Women, Age 15-49)

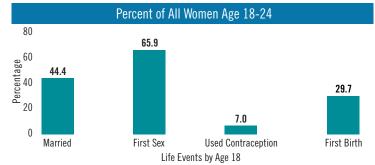


Unmet Need and Contraceptive Use, by Age (All Women) 100 No Demand for Family Planning **Unmet Need** 75 Traditional Percentage 52 Methods Short-acting Methods Long-acting Methods 20 25 30 35 40 45

Current Modern Method Mix Among Married Contraceptive Users

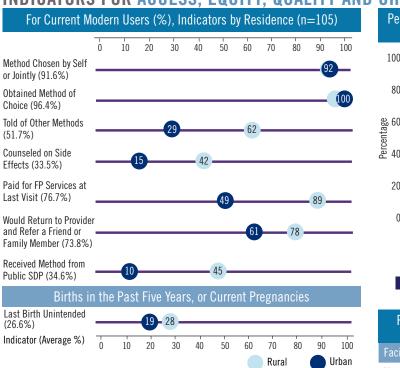
Age





PMA2020/TARABA, NIGERIA (APRIL-MAY 2018)

INDICATORS FOR ACCESS. EQUITY. QUALITY AND CHOICE



For Current Female Non-Users

Reasons Mentioned for Non-Use Among All Women Wanting to Delay the Next Birth Two or More Years



to Use



53.9% Perceived Not-At-Risk/Lack of Need



25.1% Method or Healthrelated Concerns

7.5% Lack of Access/ Knowledge

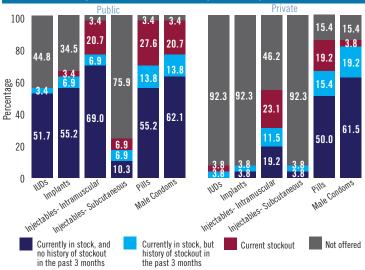


Note: Respondents were able to select more than one answer.

Reproductive Health and Contraceptive Indicators 19.0 First Marriage 💄 Urban 22.0 First Contraceptive 16.5 First 19.7 First Birth **MEDIAN** First 26.8 21.1 15.9 First Sex Rural First Birth Contraceptive Use First Women Marriage First sex, first contraceptive use: 15-49 years

First marriage, first birth: 25-49 years	Total	Rural	Urban
Women Having First Birth by Age 18 (%) (18-24 years)	29.7	32.4	21.6
Received FP Info. From Provider in Last 12 Months (%) (15-49 years)	20.1	17.0	34.0
Exposed to FP Media in Last Few Months (%) (15-49 years)	31.9	30.0	40.4

Percent of Facilities Offering Family Planning with Methods in Stock on Day of Interview (n=55; 26 public, 29 private)



Percent of Public Facilities Offering At Least 3 or At Least 5 Modern Contraceptive Methods, by Facility Type

Facility Type	3 or more methods	5 or more methods
Health Center	78.6	35.7
Total	77.4	45.2

Data from facility types with sample size less than 10 were calculated, but are not presented in this brief.

	· ·				
Select Indicators Among Service Delivery Points					
	Public	Private	Total		
Among All Service Delivery Points:					
Percent Offering Family Planning	93.5	89.7	91.7		
With Mobile Teams Visiting Facility In Last 6 Months (%)	48.4	3.4	26.7		
Supporting CHWs From This Service Delivery Point (%)	41.9	0.0	21.7		
Among Service Delivery Points Offering Family Planning Ser	rvices:				
Average Number Of Days Per Week FP Is Offered	5.2	5.9	5.5		
Offering Female Sterilization (%)	24.1	0.0	12.7		
Offering FP Counseling/Services To Adolescents (%)	82.8	38.5	61.8		
Charging General User Fees For FP Services (%)	17.2	19.2	18.2		
Availability of Instruments or Supplies for Implant Insertion/Removal+	89.5				
Availability of Instruments or Supplies for IUDs++	43.8				

^{*}Among SDPs that provide implants (n=21, 19 public, 2 private). Instruments/supplies include: Clean Gloves, Antiseptic, Sterile Gauze Pad or Cotton Wool, Local Anesthetic, Sealed Implant Pack, Surgical Blade

SAMPLE DESIGN

The PMA2018/Taraba survey used a two-stage cluster design. The same sample from the previous round was used, 20 clusters of enumeration areas (EAs) drawn from the National Population Commission's master sampling frame. In each cluster of EAs, households and private health facilities were listed and mapped, with 35 households randomly selected per cluster of EAs. Households were surveyed and occupants enumerated. All eligible females age 15 to 49 were contacted and consented for interviews. The final completed sample included 648 households (98.8% response rate), 821 de facto females (98.6% response rate) and 60 health facilities (98.4% response rate). Data collection was conducted between April to May 2018.







^{**}Among SDPs that provide IUDs (n=18, 16 public, 2 private). Instruments/supplies include: Sponge-holding forceps, Speculums (large and medium), Tenaculum, and uterine sound.