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## **KEY FAMILY PLANNING INDICATORS**

Select Family Planning Indicators Across Recent Surveys (All and Married Women, Age 15-49)						
	PMA2015 - R3 (Aug-Sept 2015)		PMA2016 - R4 (Apr-May 2016)		PMA2017- R5 (Apr-May 2017)	
	AII	Married	AII	Married	AII	Married
Contraceptive Prevalence Rate (CPR)						
All Methods CPR	28.6	34.3	31.1	36.9	32.3	38.4
Modern Methods Use	25.6	30.0	27.5	32.2	28.5	33.9
Long Acting/Permanent CPR	6.0	7.1	6.7	8.6	8.1	10.6
Total Unmet Need	24.5	31.8	23.8	30.5	22.1	29.6
For Limiting	8.7	11.5	8.8	11.3	7.6	10.7
For Spacing	15.8	20.3	15.1	19.2	14.5	18.9
Total Demand	53.2	66.1	55.0	67.4	54.4	68.0
Demand Satisfied by Modern Method (%)	48.1	45.5	50.0	47.7	52.4	49.8

Fertility Indicators (All Women)				
	PMA2015 Round 3	PMA2016 Round 4	PMA2017 Round 5	
Recent Births Unintended (%)	42.6	44.0	40.3	
Wanted Later	27.7	27.2	27.1	
Wanted No More	14.9	16.8	13.2	

#### Current Use and Unmet Need Among Married Women of Reproductive Age, by Wealth Quintile 80 70 Unmet Need 60 Traditional Method 25.7 26.8 50 31.8 6.5 Modern Method Percentage 41.1 40 4.1 30 44.9 40.6 5.0 35.0 20 10 Q1: Poorest quintile Q5: Wealthiest quintile 02 04 05 01 03 % Demand Satisfied 29.8% 48.3% 53.1% 57.5% by Modern Method

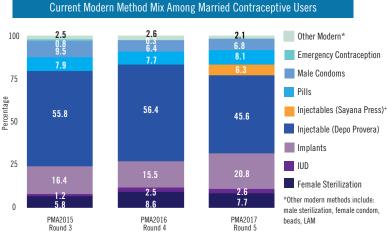
# PMA2017/UGANDA-R5

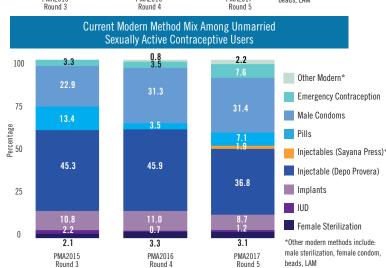
PERFORMANCE MONITORING AND ACCOUNTABILITY 2020

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 university and research organizations in 11 countries, deploying a cadre of female resident enumerators trained in mobile-assisted data collection. PMA2020/Uganda is led by the Makerere University's School of Public Health at the College of Health Sciences (MakU/CHS/MakSPH), in collaboration with the Uganda Bureau of Statistics (UBoS) and the Ministry of Health. 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 and funded by the Bill & Melinda Gates Foundation.

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

#### Unmet Need and Contraceptive Use, by Age (All Women) 100 90 80 70 60 Percentage Unmet Need 50 Traditional 40 Methods 30 Short-acting Methods 20 Long-acting 10 30 Age 45



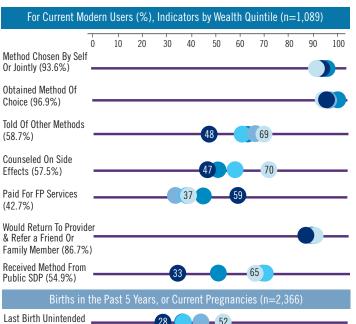


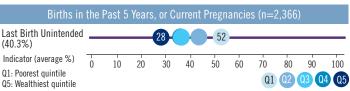




# PMA2017/UGANDA-ROUND 5

## INDICATORS FOR ACCESS, EQUITY, QUALITY AND CHOICE



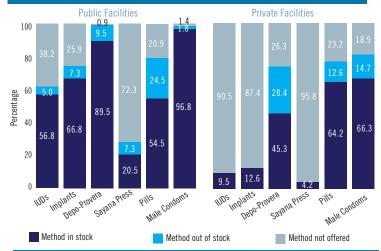


# For Current Female Non-Users (n=1,949) Reasons Mentioned For Non-Use Among All Women Wanting To Delay The Next Birth 2 Or More Years (%)

		Round 4	
Not Married	33.1	28.6	33.7
Perceived Not-At-Risk/Lack of Need	47.4	51.2	54.4
Method or Health-related Concerns	33.2	28.9	30.8
Opposition to Use	15.5	16.4	12.0
Lack of Access/Knowledge	7.8	4.8	4.8
Other	9.7	12.2	12.0

Reproductive Health and Contraceptive Indicators				
	Total	Rural	Urban	
Median Age at First Marriage (25-49 years)	19.5	19.2	20.8	
Median Age at First Sex (15-49 years)	16.9	16.8	17.4	
Median Age at First Contraceptive Use (15-49 years)	22.9	23.4	21.5	
Median Age at First Birth (25-49 years)	20.3	20.2	21.3	
Mean No. Of Living Children At First Contraceptive Use (15-49 years)	2.3	2.6	1.3	
Women Having First Birth by Age 18 (18-24 years, %)	27.3	29.8	19.8	
Received FP Info. From Provider In Last 12 Months (15-49 years, %)	43.8	45.8	36.5	
Exposed to FP Media in Last Few Months (15-49 years, %)	84.5	83.4	88.5	

## Percent of Facilities Offering Family Planning with Methods in Stock on Day of the Interview (n=315; 220 public; 95 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
Higher:		
Hospital	100.0	100.0
Health Center 4	100.0	8.08
<u>Primary:</u>		
Health Center 3	83.6	47.9
Health Center 2	47.5	18.0
Total	80.0	55.5

Service Delivery Points (n= 336, 220 public, 116 private)				
	Public	Private	Total	
Among All Service Delivery Points:				
Offering Family Planning	100.0	81.9	93.8	
With Mobile Teams Visiting Facility In Last 12 Months (%)	83.6	19.8	61.6	
Supporting Community Health Workers From This Service Delivery	59.1	10.3	42.3	
Among Service Delivery Points Offering Family Planning Services:				
Average Number Of Days Per Week Family Planning Is Offered	5.5	6.1	5.7	
Offering Female Sterilization (%)	27.7	7.4	21.6	
Offering Family Planning Counseling/Services To Adolescents (%)	94.5	77.9	89.5	
Charging Fees For Family Planning Services (%)	0.5	8.4	2.9	
Percent Integrating Family Planning Into Their:				
Maternal Health Services (among all offering maternal health services)	99.5	100.0	99.6	
HIV Services (among all offering HIV services)	99.5	65.2	93.1	
Post-Abortion Services (among all offering post-abortion services)	100.0	100.0	100.0	

## SAMPLE DESIGN

PMA2017/Uganda-R5, the fifth round of data collection in Uganda, uses a two-stage cluster design with urban-rural and region as strata. For this survey round, a new set of 110 enumeration areas (EAs) were selected, adjacent to EAs used in the previous four rounds, drawn by the Uganda Bureau of Statistics from its master sampling frame. In each EA, households and health facilities were listed and mapped, with 44 households randomly selected. Households were surveyed and occupants enumerated. All eligible females age 15 to 49 were contacted and consented for interviews. The final sample (and completion rates) included 4,503 households (95.7%), 4,119 de facto females (96.0%) and 336 health facilities (96.3%). Data collection was conducted between April to May 2017.







