

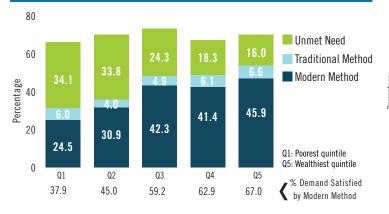
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KEY FAMILY PLANNING INDICATORS

Select Family Planning Indicators Across Recent Surveys (All and Married Women, Age 15-49)								
	Round 4 (Apr-May 2016)		Round 5 (Apr-May 2017)		Round 6 (Apr-May 2018)			
	All	Married	AII	Married	AII	Married		
Contraceptive Prevalence Rate								
All Methods	31.1	36.9	32.3	38.4	34.7	41.8		
Modern Methods	27.5	32.2	28.5	33.9	30.3	36.3		
Long Acting/Permanent	6.7	8.6	8.1	10.6	10.2	14.0		
Total Unmet Need	23.8	30.5	22.1	29.6	20.5	26.0		
For Limiting	8.8	11.3	7.6	10.7	7.4	9.3		
For Spacing	15.1	19.2	14.5	18.9	13.1	16.6		
Total Demand	55.0	67.4	54.4	68.0	55.2	67.7		
Demand Satisfied by Modern Method (%)	50.0	47.7	52.4	49.8	54.9	53.6		

Fertility Indicators (All Women)							
	Round 4 (Apr-May 2016)	Round 5 (Apr-May 2017)	Round 6 (Apr-May 2018)				
Last Birth Unintended (%)	44.0	40.3	46.2				
Wanted Later	27.2	27.1	30.9				
Wanted No More	16.8	13.2	15.3				

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



JOHNS HOPKINS BLOOMBERG SCHOOL of PUBLIC HEALTH

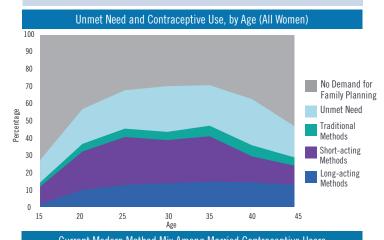


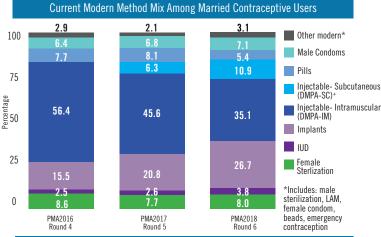
PMA2020/UGANDA

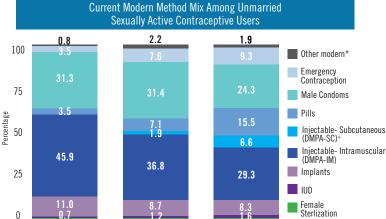
APRIL-MAY 2018 (ROUND 6)

Performance Monitoring and Accountability (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 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 (Mak/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







⁺The PMA2020/Uganda survey began collecting data on subcutaneous injectables (DMPA-SC) use in 2017, Round 5.

3.3

3.1

PMA2017

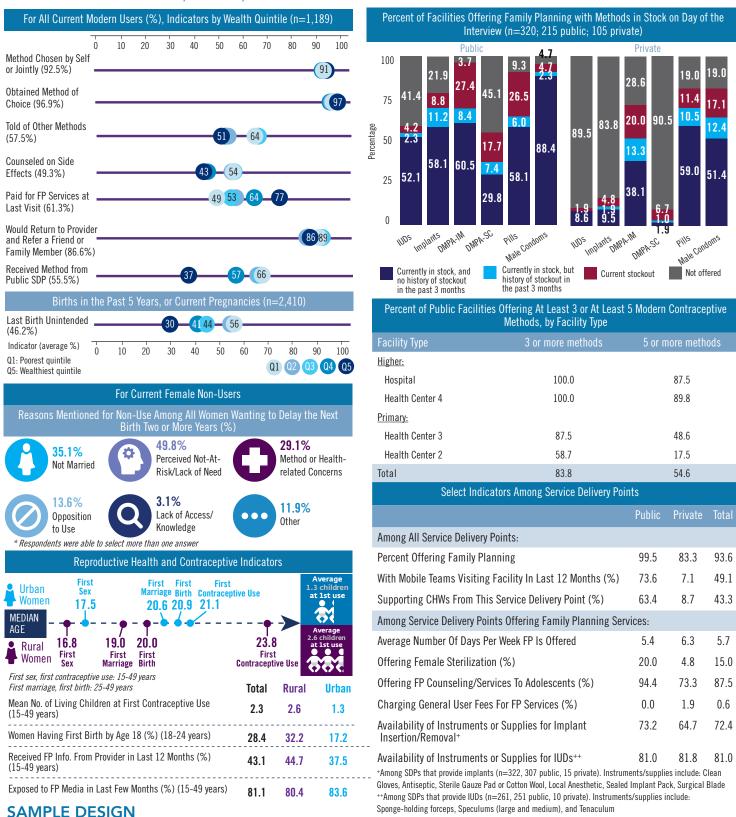
3.3

PMA2016 Round 4 *Includes: male

sterilization, female condom, beads, LAM

PMA2020/UGANDA ROUND 6

INDICATORS FOR ACCESS, EQUITY, QUALITY AND CHOICE



PMA2018/Uganda Round 6, the sixth round of data collection in Uganda, uses a two-stage cluster design with urban-rural and region as strata. The project used the same set of 110 enumeration areas (EAs) as those that were selected in the previous round and 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 4,558 households (96.8%), 4,225 de facto females (96.8%) and 342 health facilities (94.7%). Data collection was conducted between April to May 2018.







