



# PMA UGANDA

Results from Phase 2 cross-sectional survey

September - November 2021

## OVERALL KEY FINDINGS



A substantial increase in modern contraception use was observed over the past one year. Close to 80% of current nonusers, however, reported having no intention to adopt modern contraception in next 12 months.



The proportion of public facilities offering IUDs and implants, and maintaining stock of these commodities have been steadily increasing over time.



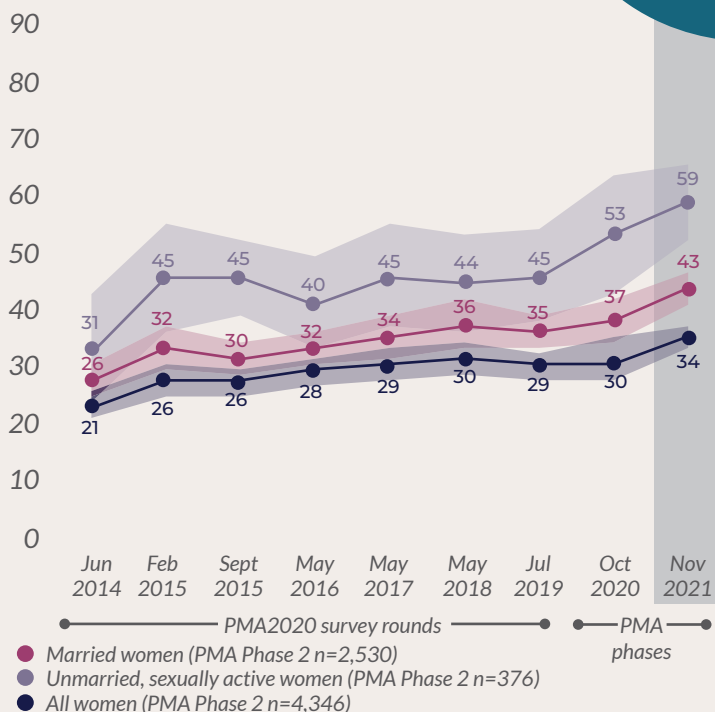
Availability of comprehensive contraceptive counseling continues to be low among women who are current users of modern contraceptive methods.

## SECTION 1: CONTRACEPTIVE USE, DYNAMICS, AND DEMAND

### MODERN CONTRACEPTIVE PREVALENCE

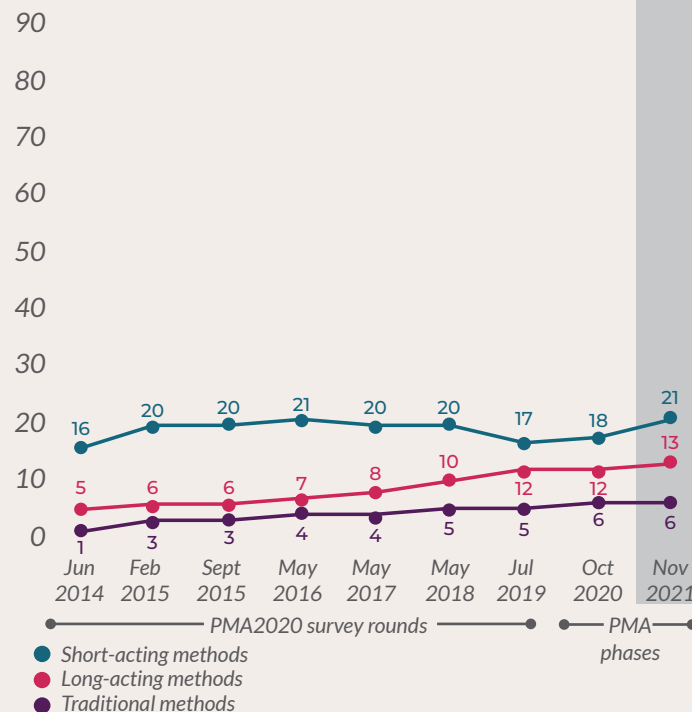
Percent of women age 15-49 currently using modern contraception (mCPR) by marital status

**1.2%**  
average annual increase in mCPR for all women



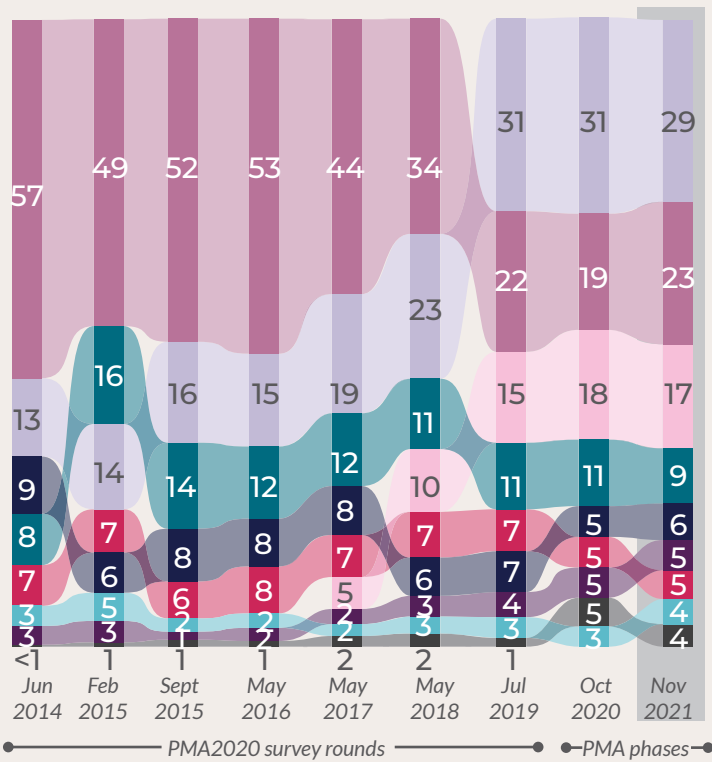
### CONTRACEPTIVE PREVALENCE BY METHOD TYPE

Percent of all women age 15-49 currently using contraception by method type (PMA Phase 2 n=4,346)



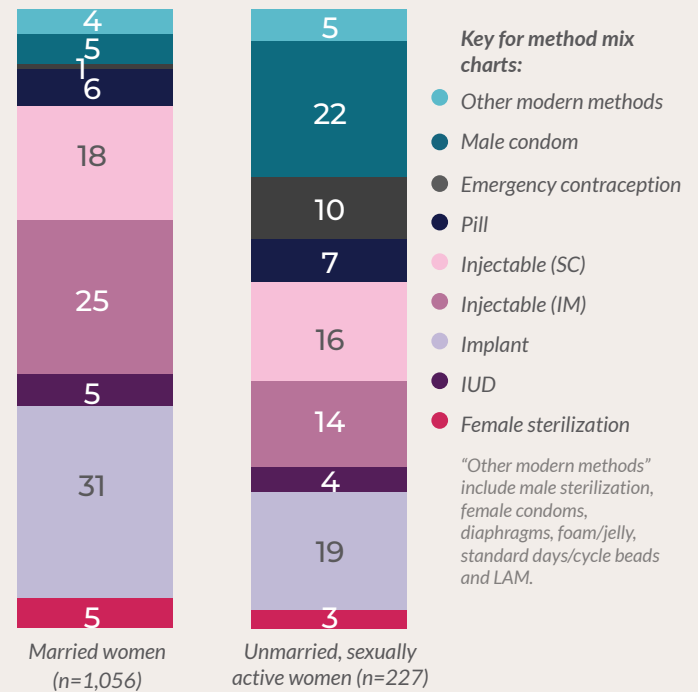
## TRENDS IN MODERN CONTRACEPTIVE MIX

Percent distribution of all women age 15-49 using modern contraceptive methods by method and year (PMA Phase 2 n=1,468)



## MODERN CONTRACEPTIVE METHOD MIX

Percent distribution of modern contraceptive users age 15-49 by method and marital status



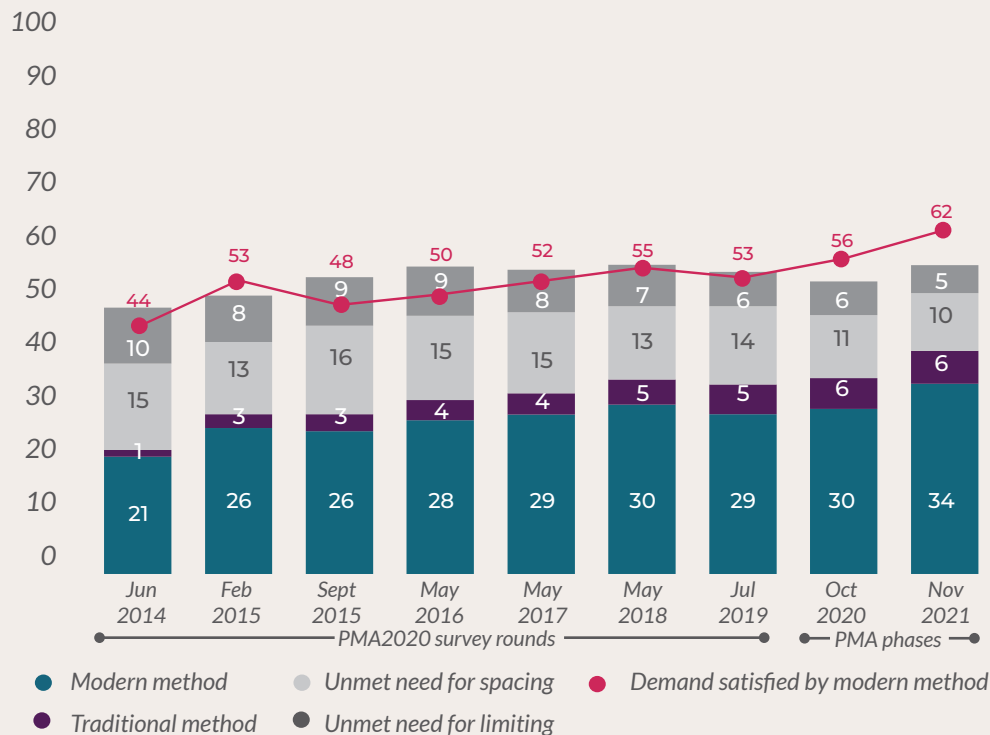
Key for method mix charts:

- Other modern methods
- Male condom
- Emergency contraception
- Pill
- Injectable (SC)
- Injectable (IM)
- Implant
- IUD
- Female sterilization

"Other modern methods" include male sterilization, female condoms, diaphragms, foam/jelly, standard days/cycle beads and LAM.

## 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 2 n=4,346)



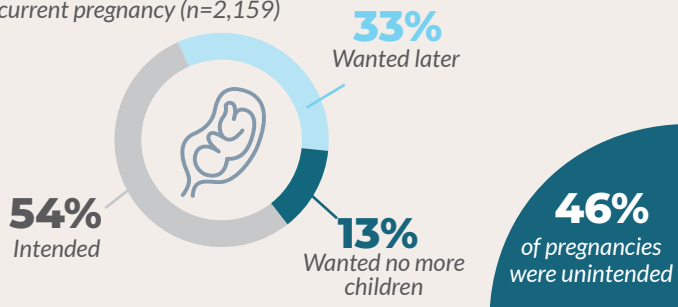
## INTENTION TO USE CONTRACEPTION IN THE NEXT YEAR

Percent of all women age 15-49 who are not currently using contraception but intend to use contraception in the next 12 months (n=2,197)



## INTENTION OF MOST RECENT BIRTH/CURRENT PREGNANCY

Percent of women by intention of their most recent birth or current pregnancy (n=2,159)



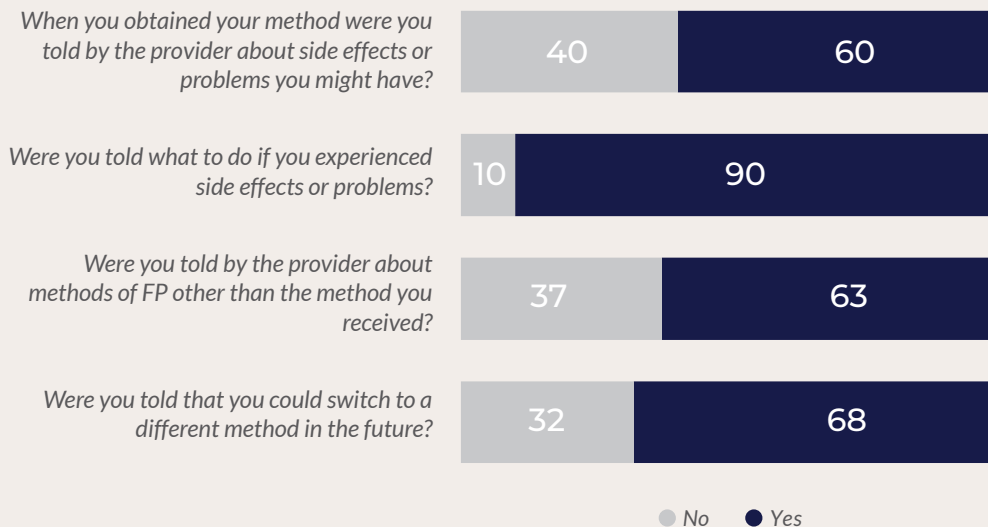
## KEY FINDINGS FOR SECTION 1: CONTRACEPTIVE USE, DYNAMICS, AND DEMAND

- A substantial increase in use of modern contraception from 30% in 2020 to 34% in 2021 was observed among all women.
- Among women who were not currently using contraception, only one in five intend to use contraception in the next 12 months.
- Women continue to report high levels of unintended pregnancies.

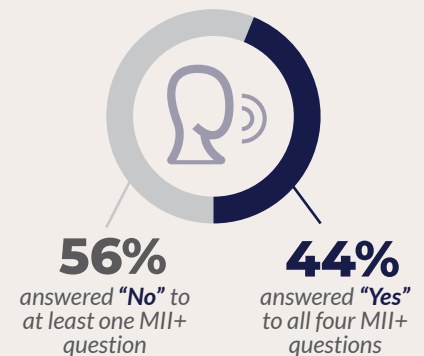
## SECTION 2: CONTRACEPTIVE USER COUNSELING AND OUTREACH

### 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=1,434)

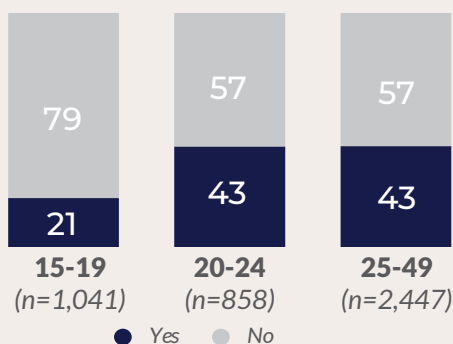


Percent of women who responded "Yes" to all four MII+ questions



### 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



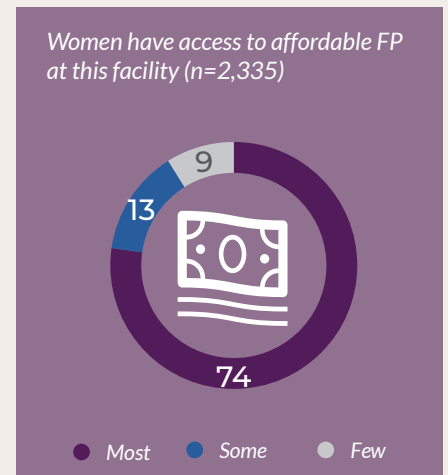
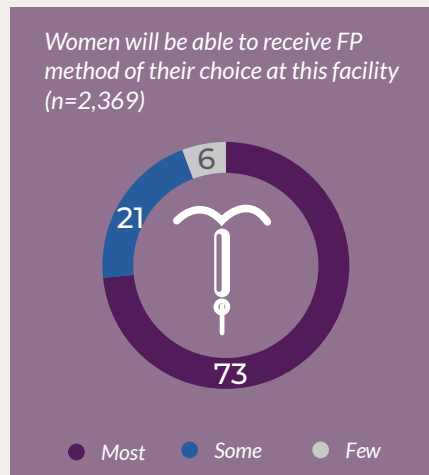
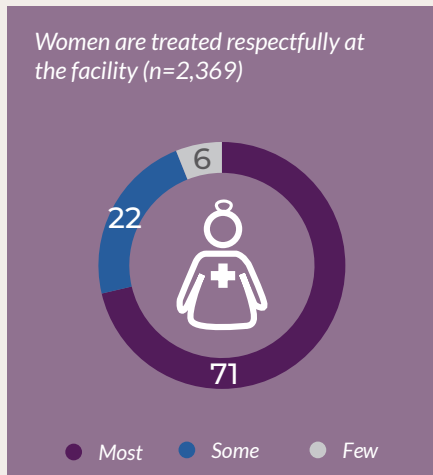
### KEY FINDINGS FOR SECTION 2: COUNSELING AND OUTREACH

- A low percentage of women reported receiving comprehensive contraceptive counseling.
- Only 2 in 5 contraceptive users report receiving comprehensive information on family planning/contraceptive method use.
- Adolescent girls (15-19 years) were less likely than women aged 20 and over to receive FP information from primary care or community health providers.

## SECTION 3: QUALITY OF FP SERVICES

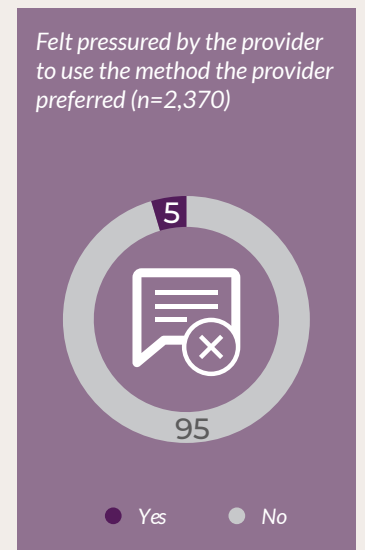
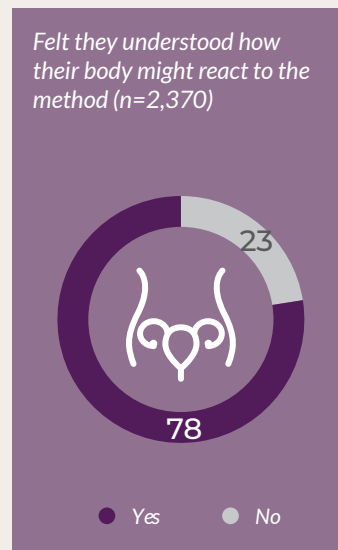
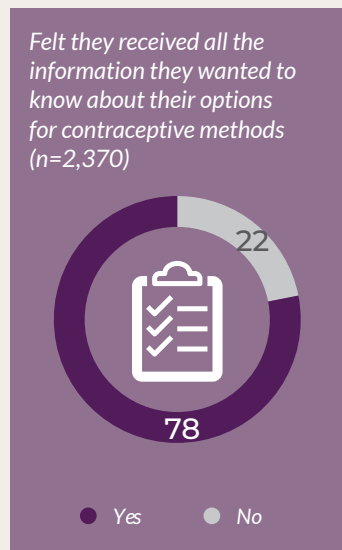
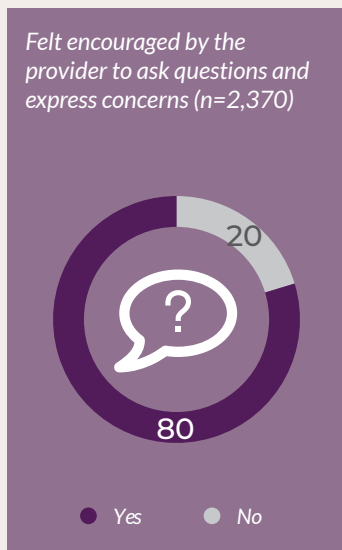
### COMMUNITY PERCEPTION OF QUALITY OF CARE

Percent distribution of community agreement with the following statements, as reported by female FP clients



### PERSONAL PERCEPTION OF QUALITY OF CARE

Percent of female FP clients that agreed with the following statements



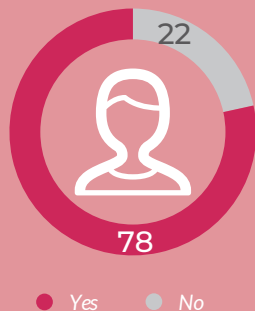
### KEY FINDINGS FOR SECTION 3: QUALITY OF FP SERVICES

- 7 in 10 female FP clients at health facilities agree that women are treated with respect at the health facility where they were interviewed.
- 2 in 10 female FP clients did not feel encouraged by the provider to ask questions at the health facility where they were interviewed.
- 5% of female FP clients reported feeling pressured by the provider to use a method.

## 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=1,294)

Does your partner know you are using this method?



**By age**



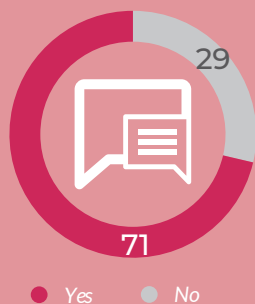
**By education**



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=1,295)

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



**By age**



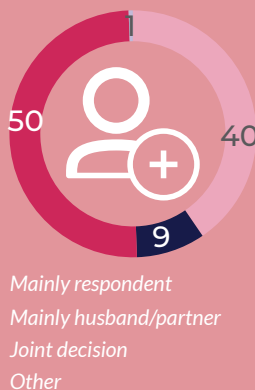
**By education**



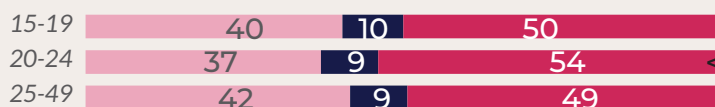
Modern, female controlled methods Includes all modern methods except male sterilization and male condoms

Percent of women who are currently using FP and agree with the following statement, by age and education (n=1,704)

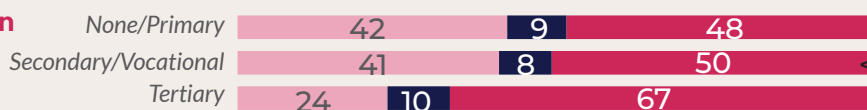
Would you say that using FP is mainly your decision?



**By age**

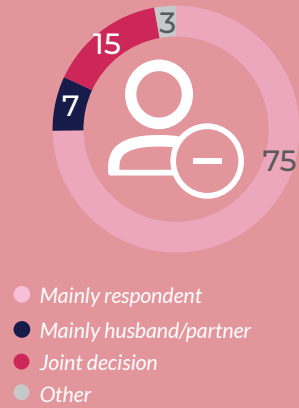


**By education**



Percent of women who are not currently using FP and agree with the following statement, by age and education (n=2,251)

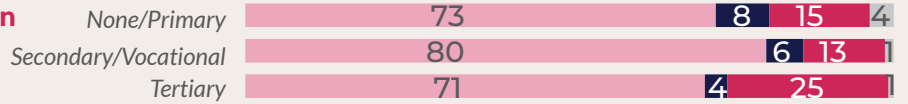
Would you say that not using FP is mainly your decision?



**By age**

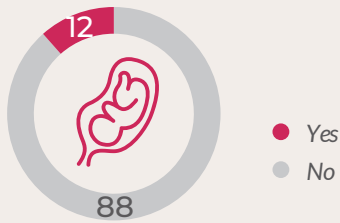


**By education**

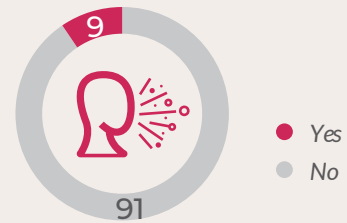


**PREGNANCY COERCION**

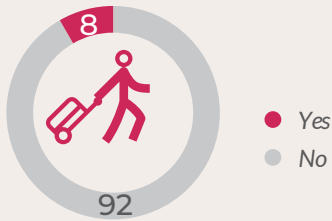
Percent of currently married women who report that their partner tried to force or pressure them to become pregnant in the past 12 months (n= 2,528)



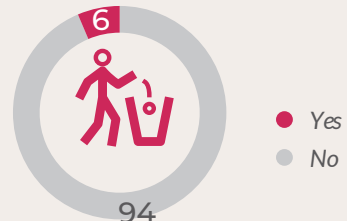
Percent of currently married women who report that their partner made them feel badly for wanting to use an FP method to delay or prevent pregnancy in the past 12 months (n= 2,527)



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= 2,528)



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= 2,524)



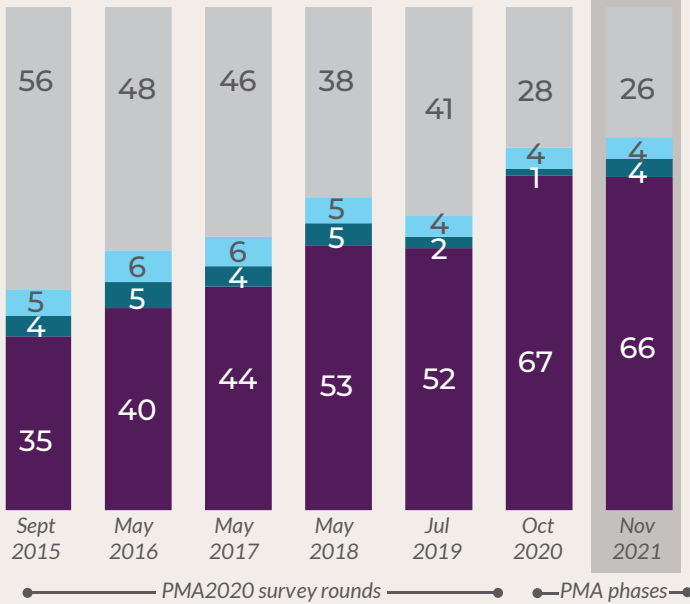
**KEY FINDINGS FOR SECTION 4: PARTNER DYNAMICS**

- 12% of married women reported that their partner pressured them to become pregnant in the last 12 months.
- Women with tertiary education and those aged 20-24 reported greater partner involvement.
- 9% of the women currently using contraception reported that the decision to use contraception was made mainly by their partner.

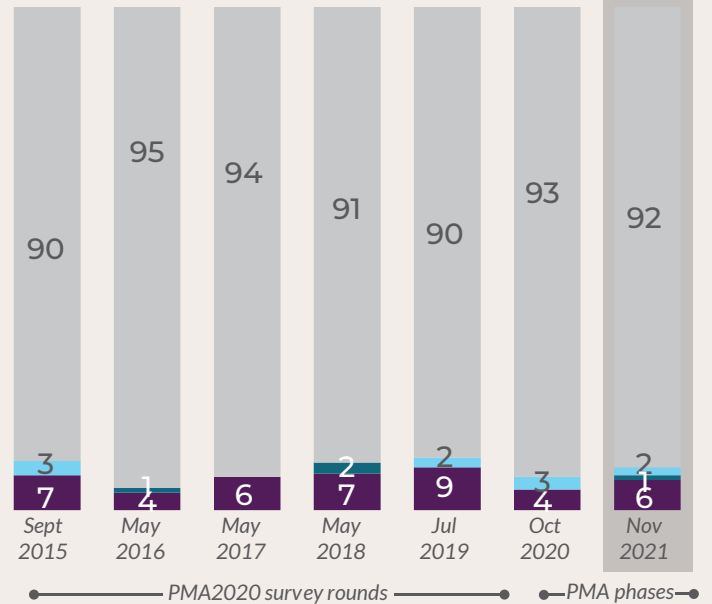
# SECTION 5: SERVICE DELIVERY POINTS

## TRENDS IN METHOD AVAILABILITY: IUD

Public facilities (PMA Phase 2 n=255)



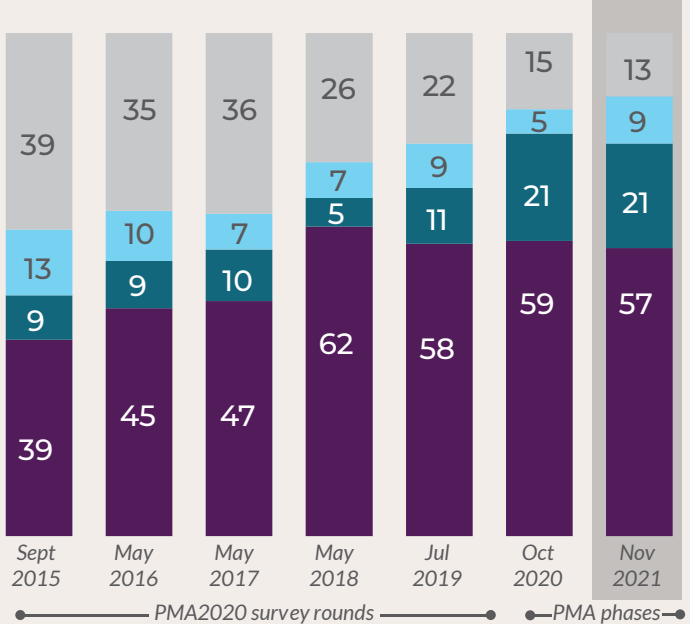
Private facilities (PMA Phase 2 n=118)



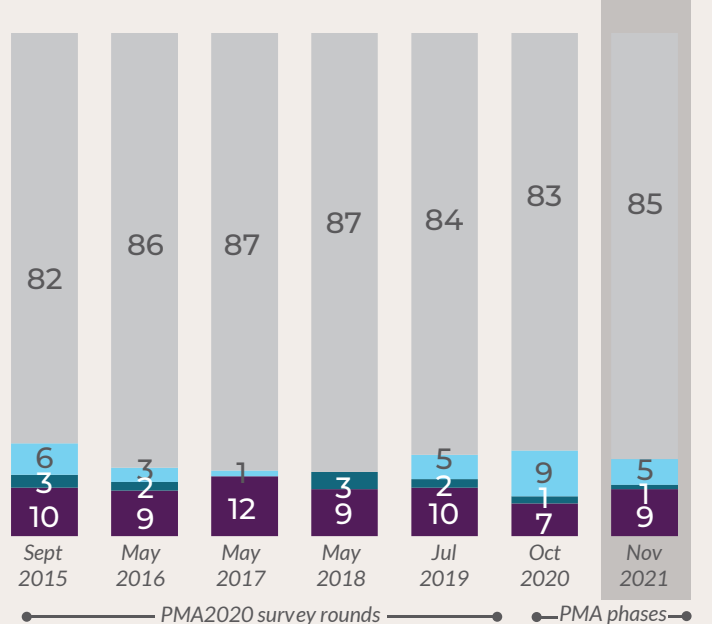
● Currently in stock and no stockout in last 3 months ● Currently in stock but stockout in last 3 months ● Currently out of stock ● Not offered

## TRENDS IN METHOD AVAILABILITY: IMPLANT

Public facilities (PMA Phase 2 n=255)



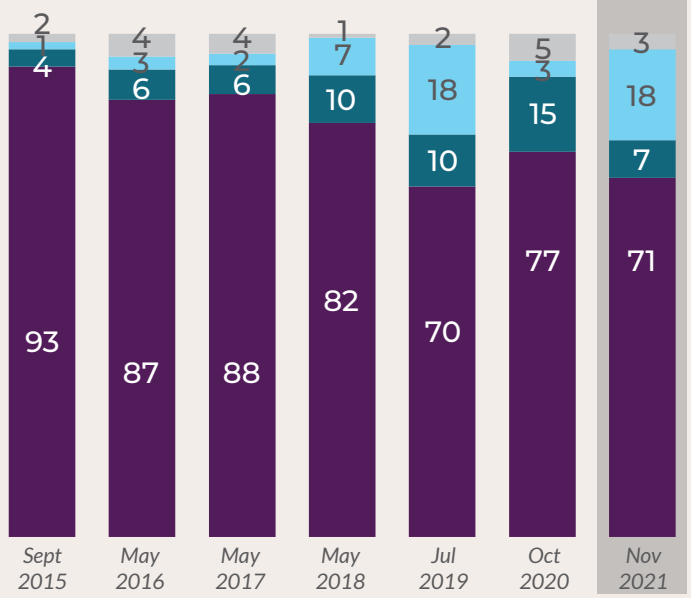
Private facilities (PMA Phase 2 n=118)



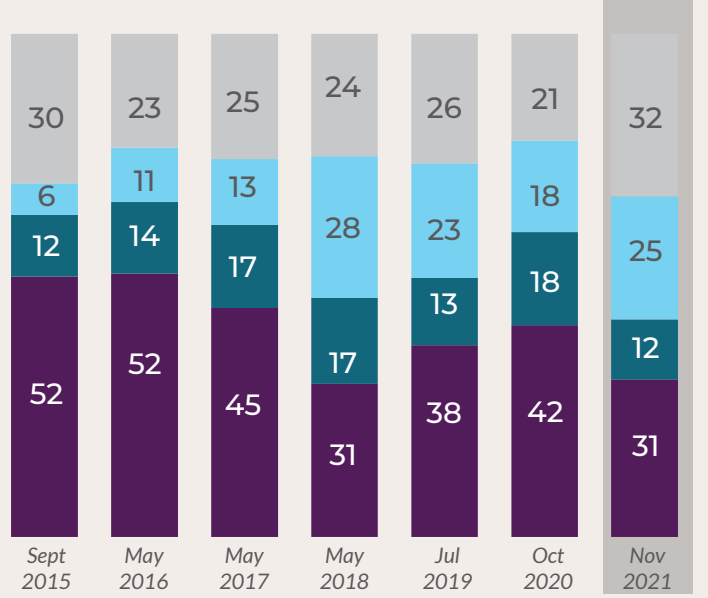
● Currently in stock and no stockout in last 3 months ● Currently in stock but stockout in last 3 months ● Currently out of stock ● Not offered

## TRENDS IN METHOD AVAILABILITY: INJECTABLE

Public facilities (PMA Phase 2 n=255)



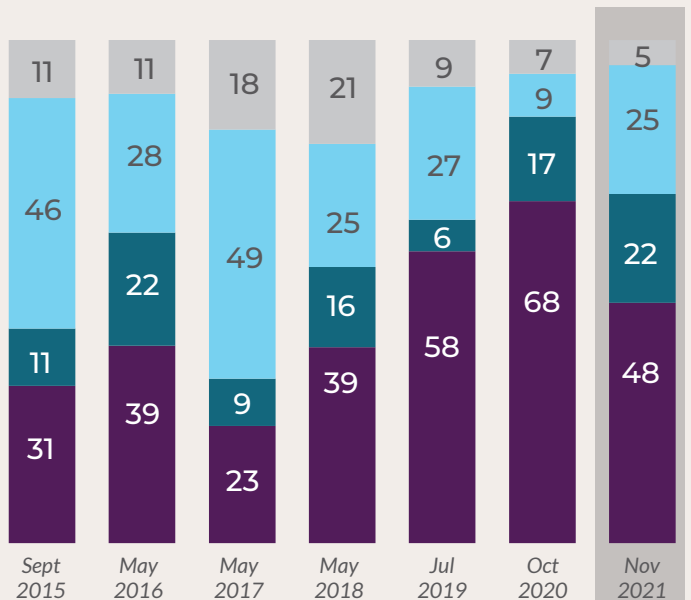
Private facilities (PMA Phase 2 n=118)



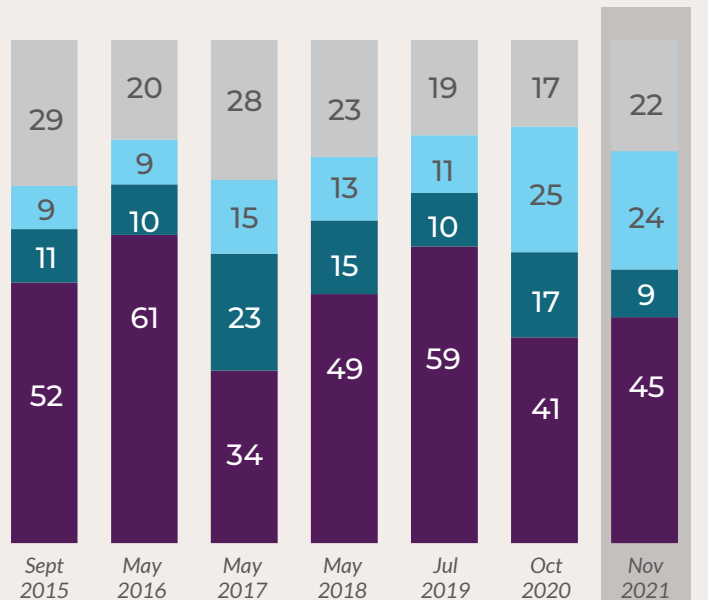
● Currently in stock and no stockout in last 3 months ● Currently in stock but stockout in last 3 months ● Currently out of stock ● Not offered

## TRENDS IN METHOD AVAILABILITY: PILLS

Public facilities (PMA Phase 2 n=255)



Private facilities (PMA Phase 2 n=118)

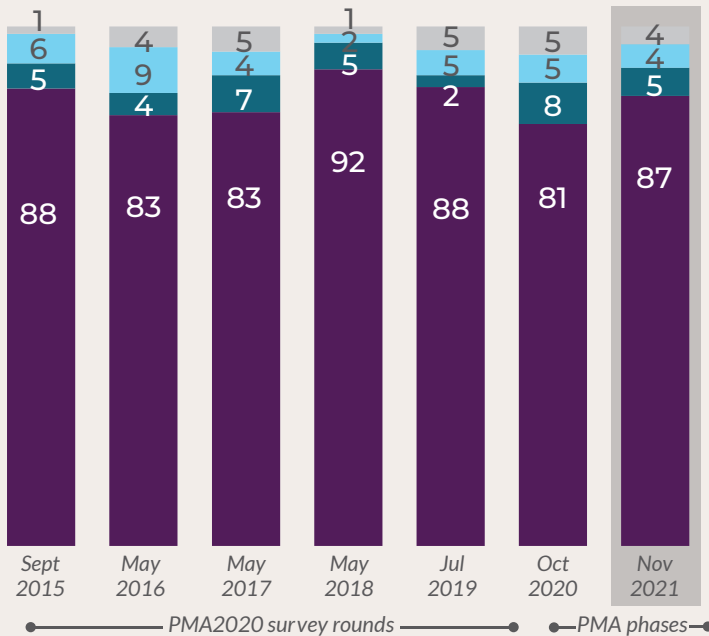


● Currently in stock and no stockout in last 3 months ● Currently in stock but stockout in last 3 months ● Currently out of stock ● Not offered

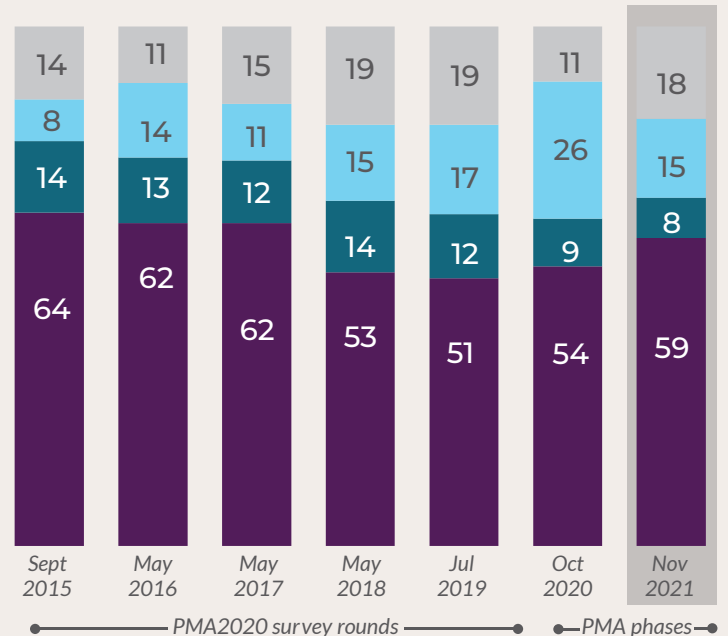


## TRENDS IN METHOD AVAILABILITY: MALE CONDOMS

Public facilities (PMA Phase 2 n=255)



Private facilities (PMA Phase 2 n=118)



● Currently in stock and no stockout in last 3 months ● Currently in stock but stockout in last 3 months ● Currently out of stock ● Not offered

## MAIN REASON FOR STOCKOUT OF ANY METHOD BY TYPE OF FACILITY

Public facilities (n=457 episodes)



**45%**  
Ordered but did not receive shipment



**20%**  
Ordered but did not receive correct quantities

Private facilities (n=161 episodes)



**37%**  
Did not place order for shipment

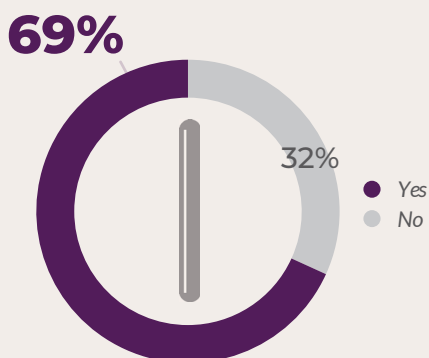


**27%**  
Ordered but did not receive shipment

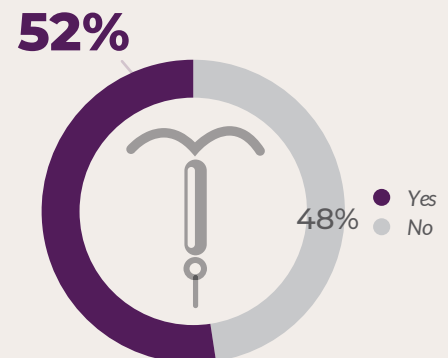
Possible answers were "Did not place order for shipment", "Ordered but did not receive shipment", "Did not order the right quantities", "Ordered but did not receive the right quantities", "Unexpected increase in consumption", "Stock out due to COVID-19 disruption", and "Other".

## FACILITY READINESS

Percent of facilities that provide implants and have a trained provider and instruments/supplies needed for implant insertion/removal (n=241)



Percent of facilities that provide IUDs and have a trained provider and instruments/supplies needed for IUD insertion/removal (n=199)



**59%**

*of women obtained their current modern method from a public health facility (n=1,434)*

#### **KEY FINDINGS FOR SECTION 5: SERVICE DELIVERY POINTS**

- *There has been a steady increase in the proportion of public facilities offering and maintaining stock of long-acting reversible contraception.*
- *Reports of stockout for pills and injectables in public facilities increased in the past year.*
- *Nearly half of facilities that offer IUDs and a third of those offering implants did not have a provider and/or all associated equipment/supplies needed for method provision & removal.*

## TABLES: CONTRACEPTIVE PREVALENCE AND UNMET NEED

ALL WOMEN				CPR				mCPR				Unmet need for family planning			
Data source	Round/Phase	Data Collection	Female sample	CPR %	SE	95%CI		mCPR %	SE	95%CI		Unmet need (%)	SE	95%CI	
PMA 2020	R1	May-June 2014	3716	22.17	1.30	19.69	24.86	20.98	1.26	18.59	23.6	25.36	1.31	22.86	28.03
PMA 2020	R2	Jan-Feb 2015	3631	28.60	1.57	25.58	31.82	26.12	1.52	23.23	29.24	21.14	1.19	18.87	23.6
PMA 2020	R3	Aug-Sept 2015	3690	28.69	1.39	26.01	31.52	25.59	1.35	23.00	28.37	24.48	1.47	21.68	27.51
PMA 2020	R4	Apr-May 2016	3793	31.13	1.36	28.5	33.89	27.51	1.29	25.03	30.14	23.85	1.12	21.7	26.13
PMA 2020	R5	Apr-May 2017	4119	32.27	1.66	29.07	35.64	28.51	1.54	25.55	31.66	22.13	1.50	19.29	25.25
PMA 2020	R6	Apr-May 2018	4227	34.73	1.76	31.33	38.3	30.28	1.54	27.31	33.43	20.49	1.35	17.95	23.29
PMA 2020	R7	May-Jul 2019	4481	33.9	1.36	31.26	36.64	28.58	1.30	26.08	31.22	20.01	1.21	17.72	22.51
PMA	Phase1	Aug-Oct 2020	3938	34.95	1.57	31.71	38.34	29.47	1.94	25.56	33.71	17.33	1.20	14.95	20.00
PMA	Phase2	Sept-Nov 2021	4346	39.92	1.15	37.67	42.22	33.99	1.09	31.87	36.17	15.28	0.84	13.69	17.03

WOMEN IN UNION				CPR				mCPR				Unmet need for family planning			
Data source	Round/Phase	Data Collection	Female sample	CPR %	SE	95%CI		mCPR %	SE	95%CI		Unmet need (%)	SE	95%CI	
PMA 2020	R1	May-June 2014	2404	27.27	1.66	24.1	30.69	25.69	1.58	22.68	28.95	34.66	1.56	31.63	37.82
PMA 2020	R2	Jan-Feb 2015	2252	34.93	2.05	30.98	39.11	31.8	1.99	27.98	35.88	29.92	1.74	26.59	33.47
PMA 2020	R3	Aug-Sept 2015	2369	34.35	1.78	30.91	37.95	30.04	1.67	26.83	33.46	31.72	2.00	27.9	35.8
PMA 2020	R4	Apr-May 2016	2511	36.94	1.65	33.74	40.26	32.16	1.61	29.06	35.43	30.5	1.41	27.77	33.36
PMA 2020	R5	Apr-May 2017	2590	38.4	1.93	34.64	42.3	33.88	1.87	30.28	37.68	29.62	2.05	25.73	33.83
PMA 2020	R6	Apr-May 2018	2675	41.78	2.33	37.24	46.46	36.29	2.12	32.19	40.59	25.98	1.69	22.77	29.47
PMA 2020	R7	May-Jul 2019	2801	41.92	1.77	38.45	45.47	34.98	1.7	31.68	38.43	26.21	1.56	23.23	29.43
PMA	Phase1	Aug-Oct 2020	2325	44.76	1.42	41.79	47.77	37.27	1.95	33.27	41.45	24.27	1.79	20.7	28.23
PMA	Phase2	Sept-Nov 2021	2530	50.17	1.5	47.2	53.14	42.74	1.47	39.85	45.67	20.94	1.27	18.54	23.56

PMA Uganda collects information on knowledge, practice, and coverage of family planning services in 141 enumeration areas selected using a multi-stage stratified cluster design with urban-rural and region strata. Of the 141 enumeration areas, 19 new enumeration areas were added for a CIFF (Children's Investment Fund Foundation) sponsored study that are now part of the PMA Uganda cross-sectional sample. The results are representative at the national level and within urban/rural strata. Data were collected between September and November 2021 from 4,399 households (96% response rate), 4,346 females age 15-49 (96% response rate), 384 facilities (93% completion rate), and 2,370 client exit interviews. For sampling information and full data sets, visit [www.pmadata.org/countries/uganda](http://www.pmadata.org/countries/uganda).

Percentages presented in this brief have been rounded and may not add up to 100%.

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 Uganda is led by the Makerere University 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 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.