

# PMA2017/ETHIOPIA-R5

## PERFORMANCE MONITORING AND ACCOUNTABILITY 2020

**PMA2020** uses innovative mobile technology to support low-cost, rapid-turnaround 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/Ethiopia is led by the Addis Ababa University's School of Public Health at the College of Health Sciences (AAU/SPH/CHS), in collaboration with regional universities, the Federal Ministry of Health and the Central Statistics Agency. 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>



© HBTAMU BOGALE/ ABT ASSOCIATES, COURTESY OF PHOTOSHARE

### KEY FAMILY PLANNING INDICATORS

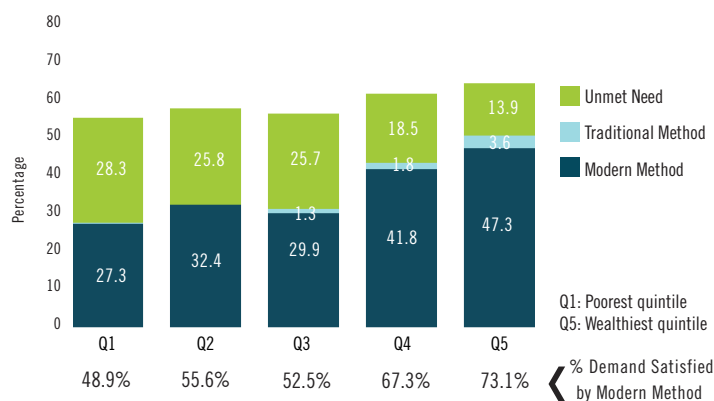
Select Family Planning Indicators Across Recent Surveys (All and Married Women, Age 15-49)

	PMA2015 - R3		PMA2016 - R4		PMA2017 - R5	
	All	Married	All	Married	All	Married
<b>Contraceptive Prevalence Rate (CPR) (%)</b>						
All Methods CPR	26.4	37.0	27.8	39.2	<b>26.4</b>	<b>36.5</b>
Modern Methods Use	25.6	35.8	26.5	37.3	<b>25.5</b>	<b>35.2</b>
Long Acting/Permanent CPR	6.3	8.8	7.1	10.1	<b>7.1</b>	<b>9.8</b>
<b>Total Unmet Need</b>	<b>16.5</b>	<b>24.4</b>	<b>16.2</b>	<b>24.0</b>	<b>16.2</b>	<b>22.8</b>
For Limiting	6.3	9.1	6.0	8.8	<b>5.1</b>	<b>7.5</b>
For Spacing	10.3	15.4	10.2	15.2	<b>11.1</b>	<b>15.3</b>
<b>Total Demand</b>	<b>43.0</b>	<b>61.4</b>	<b>44.1</b>	<b>63.2</b>	<b>42.6</b>	<b>59.3</b>
Demand Satisfied by Modern Method (%)	59.5	58.3	60.1	59.1	<b>59.8</b>	<b>59.3</b>

### Fertility Indicators (All Women)

	PMA2015 Round 3	PMA2016 Round 4	PMA2017 Round 5
<b>Recent Births Unintended (%)</b>	<b>34.3</b>	<b>39.0</b>	<b>34.3</b>
Wanted Later	23.0	27.3	<b>26.9</b>
Wanted No More	11.3	11.8	<b>7.4</b>

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



### Trends in mCPR and Method Mix, by Region and Survey

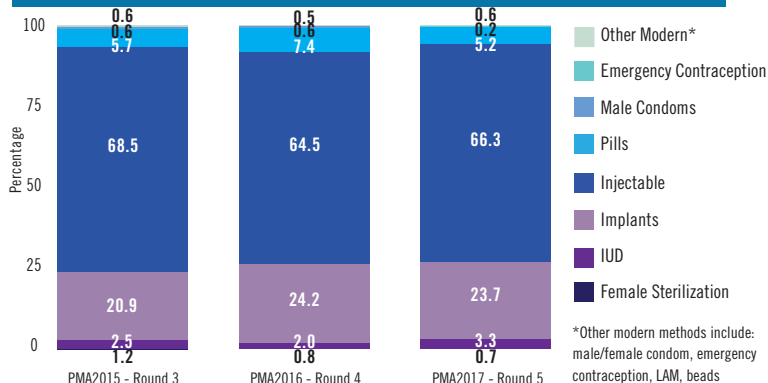
Modern Contraceptive Prevalence Rate (Married Women, Age 15-49)



### Trends in Modern Method Mix Across Recent Surveys (Married Women, Age 15-49)

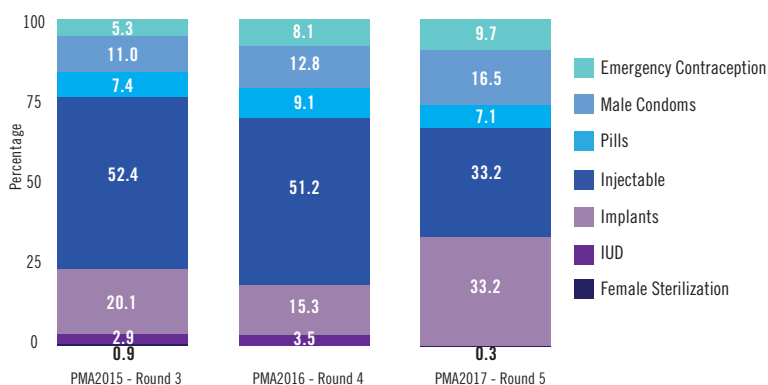
Modern Method	PMA2014-R2	PMA2015-R3	PMA2016-R4	PMA2017-R5
Injectables	69.7	68.5	64.5	<b>66.3</b>
Implant	21.1	20.9	24.2	<b>23.7</b>
Pill	4.6	5.7	7.4	<b>5.2</b>
IUD	2.1	2.5	2.0	<b>3.3</b>

### Current Modern Method Mix Among Married Contraceptive Users



\*Other modern methods include: male/female condom, emergency contraception, LAM, beads

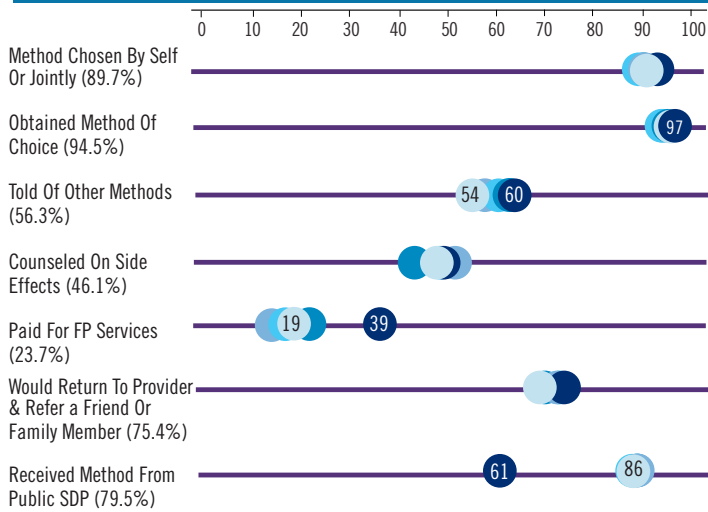
### Current Modern Method Mix Among Unmarried Sexually Active Contraceptive Users



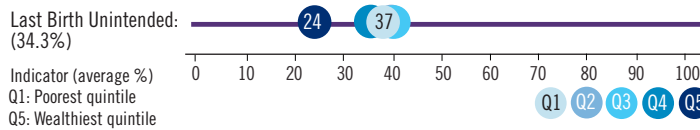
# PMA2017/ETHIOPIA-ROUND 5

## INDICATORS FOR ACCESS, EQUITY, QUALITY AND CHOICE

For Current Modern Users (%), Indicators by Wealth Quintile (n=1,860)



Among All Women Who Have Given Birth in the Last 5 Years (n=3,106)



For Current Female Non-Users (n=3,526)

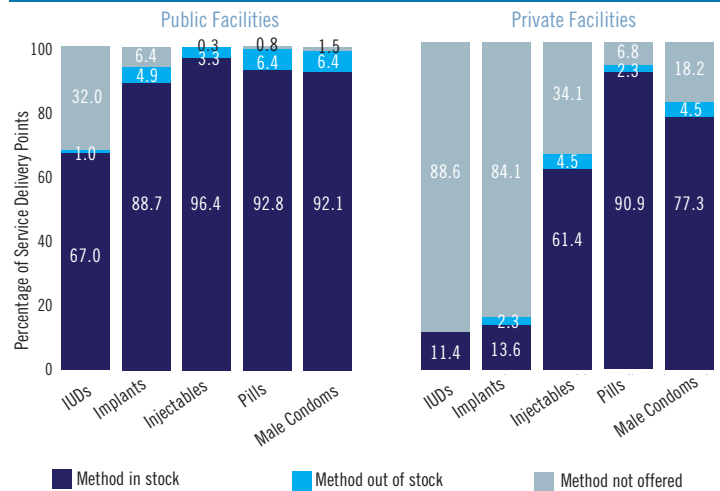
Reasons Mentioned For Non-Use Among All Women Wanting To Delay The Next Birth 2 Or More Years (%)

Not Married	42.6
Perceived Not-At-Risk/Lack of Need	39.5
Method or Health-related Concerns	11.4
Opposition to Use	8.6
Lack of Access/Knowledge	2.2
Other	8.3

### Reproductive Health and Contraceptive Indicators

	Total	Rural	Urban
Median Age at First Marriage (25-49 years)	17.9	17.4	19.5
Median Age at First Sex (15-49 years)	16.5	16.1	18.2
Median Age at First Contraceptive Use (15-49 years)	22.9	23.5	21.9
Median Age at First Birth (25-49 years)	20.1	20.0	21.1
Mean No. Of Living Children at First Contraceptive Use (15-49 years)	2.1	2.4	1.1
Women Having First Birth by Age 18 (18-24 years) (%)	18.1	22.1	8.5
Received FP Info From Provider in Last 12 Months (15-49 years) (%)	26.1	27.3	22.5
Exposed to FP Media in Last Few Months (15-49 years) (%)	40.2	31.1	68.3

Percent of Facilities Offering Family Planning with Methods in Stock on Day of Interview (n=435; 391 public, 44 private)



Percent of Public Facilities Offering At Least 3 or At Least 5 Modern Contraceptive Methods

Facility Type	3 or more methods	5 or more methods
Hospital (n=97)	99.0	97.9
Health Center (n=198)	99.5	88.4
Health Post (n=97)	87.6	14.4
Total	96.4	72.3

Service Delivery Points (n= 442; 393 public, 49 private)

	Public	Private	Total
Among All Service Delivery Points:			
Percent Offering Family Planning	99.5	89.8	98.4
With Mobile Teams Visiting Facility In Last 12 Months (%)	18.8	20.4	19.0
Supporting CHWs From This Service Delivery Point (%)	30.8	0.0	27.4
Among Service Delivery Points Offering FP Services:			
Average Number Of Days Per Week Family Planning Is Offered	5.4	6.0	5.5
Offering Female Sterilization (%)	22.0	4.5	20.2
Offering Family Planning Counseling/Services To Adolescents (%)	91.8	72.7	89.9
Charging Fees For Family Planning Services (%)	15.6	36.4	17.7
Percent Integrating Family Planning Into Their:			
Maternal/Postnatal Health Services (among all offering postnatal health services)	99.7	100	99.7
HIV Services (among all offering HIV services)	99.2	72.7	97.7
Post-Abortion Services (among all offering post-abortion services)	100.0	100.0	100.0

## SAMPLE DESIGN

PMA2017/Ethiopia-R5, the fifth round of PMA2020 data collection in Ethiopia, used a two-stage cluster design with urban-rural, major regions as strata. For this survey round, a new set of 221 enumeration areas (EAs) were selected, adjacent to EAs used in the previous four rounds, drawn by the Central Statistical Agency from its master sampling frame. For each EA, 35 households and 3-6 health service delivery points (SDPs) were selected. Households were systematically sampled using random selection. Households with eligible females of reproductive age (15-49 years) were contacted and consented for interviews. The final sample included 7,616 households, 7,361 de facto females and 452 SDPs (98.9%, 98.7% and 97.8% response rates respectively). Data collection was conducted between April and May 2017.

