

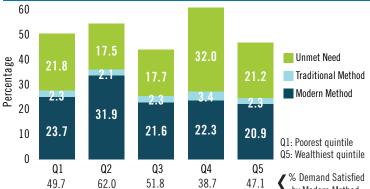
KEY FAMILY PLANNING INDICATORS

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	AII	Married
Contraceptive Prevalence R	ate					
All Methods	18.9	21.5	18.9	22.6	21.2	26.8
Modern Method	16.6	18.9	16.9	20.4	18.8	24.3
Long Acting/Permanent	6.0	7.7	5.2	7.6	8.0	12.1
Total Unmet Need	18.0	22.0	21.0	25.7	17.0	22.2
For Limiting	6.0	8.1	6.2	8.2	4.2	6.2
For Spacing	11.9	13.9	14.8	17.6	12.8	16.0
Total Demand	36.9	43.5	39.9	48.3	38.2	49.0
Demand Satisfied by Modern Method (%)	44.9	43.5	42.3	42.3	49.2	49.6

Fertility Indicators (All Women)				
	Round 1 May-July 2016	Round 2 Mar-Apr 2017	Round 3 Apr-May 2018	
Last Birth Unintended (%)	30.0	31.2	26.5	
Wanted Later	22.0	24.0	18.2	
Wanted No More	8.0	7.2	8.3	

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





by Modern Method

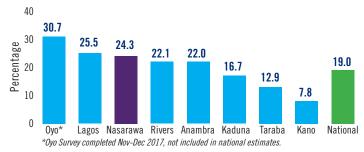
PMA2020/NASARAWA, NIGERIA

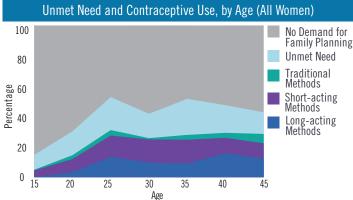
APRIL-MAY 2018 (ROUND 3)

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.

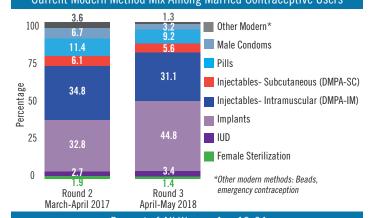
For more information please visit http://www.pma2020.org

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

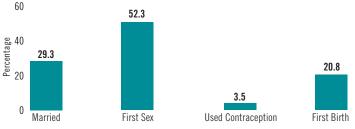




Current Modern Method Mix Among Married Contraceptive Users



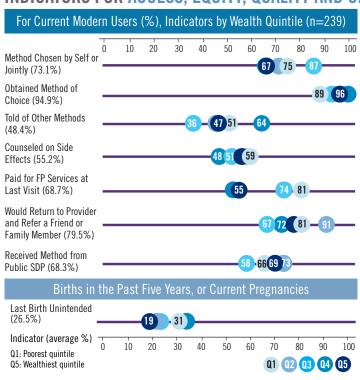
Percent of All Women Age 18-24



Life Events by Age 18

PMA2020/NASARAWA, 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









15.7% Method or Healthrelated Concerns

Opposition to Use







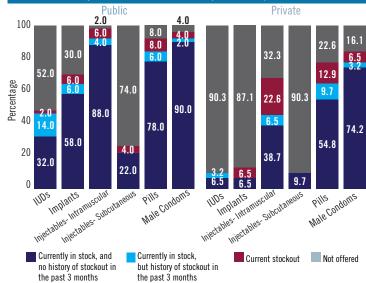
Note: Respondents were able to select more than one answer.

Reproductive Health and Contraceptive Indicators				
Urban Women MEDIAN	First Sex 17.9	First Marriage 19.7 21.0 First Birth	First Contraceptive Use 25.5	Average 2.0 children at 1st use
Rural First	19.: t Sex Firs Mai		26.8 First Contraceptive Use	Average 2.9 children at 1st use
First sex, first con First marriage, fi			Total R	Rural Urban

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Women Having First Birth by Age 18 (%) (18-24 years)	20.8	22.2	14.2	
Received FP Info. From Provider in Last 12 Months (%) (15-49 years)	29.6	30.0	27.9	
Exposed to FP Media in Last Few Months (%) (15-49 years)	49.3	44.2	70.5	

SAMPLE DESIGN

Percent of Facilities Offering Family Planning with Methods in Stock on Day of Interview (n= 81; 50 public, 31 private)



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

Facility Type	3 or more methods	5 or more methods
Hospital	90.0	90.0
Health Center	82.5	57.5
Total	84.3	62.7

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	98.0	75.6	88.0		
	With Mobile Teams Visiting Facility In Last 6 Months (%)	49.0	4.9	29.3		
	Supporting CHWs From This Service Delivery Point (%)	41.2	2.4	23.9		
	Among Service Delivery Points Offering Family Planning Services:					
	Average Number Of Days Per Week FP Is Offered	5.2	5.9	5.5		
	Offering Female Sterilization (%)	14.0	0	8.6		
	Offering FP Counseling/Services To Adolescents (%)	78.0	48.4	66.7		
	Charging General User Fees For FP Services (%)	10.0	6.5	8.6		
	Availability of Instruments or Supplies for Implant Insertion/Removal+	91.4				
	Availability of Instruments or Supplies for IUDs**	62.5				
	+Among CDPs that provide implants (n=30, 35 public / private)	netrumant	re/eunnlige			

⁺Among SDPs that provide implants (n=39, 35 public, 4 private). Instruments/supplies include: Clean Gloves, Antiseptic, Sterile Gauze Pad or Cotton Wool, Local Anesthetic, Sealed Implant Pack, Surgical Blade

BAYERO UNIVERSITY KANO

The PMA2018/Nasarawa-R3 survey used a two-stage cluster design with urban-rural as strata. The same sample from the previous round was used, 40 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 sample (and completion rates) included 1,289 households (99.5%), 1,536 de facto females (99.4%) and 92 health facilities (96.8%). Data collection was conducted between April and May 2018.

⁺⁺Among SDPs that provide IUDs (n=27, 24 public, 3 private). Instruments/supplies include: Sponge-holding forceps, Speculums (large and medium), Tenaculum, and uterine sound.