



PMA NIGER (NIAMEY)

Results from Phase 3 cross-sectional survey

November 2022–February 2023

OVERALL KEY FINDINGS



The modern contraceptive prevalence rate (mCPR) among women in union remained virtually stable (around **30%**) between April 2021 and February 2023.



Contraceptive demand met by a modern method increased between May 2023 (**56%**) and February 2023 (**62%**), reaching its April 2021 level.

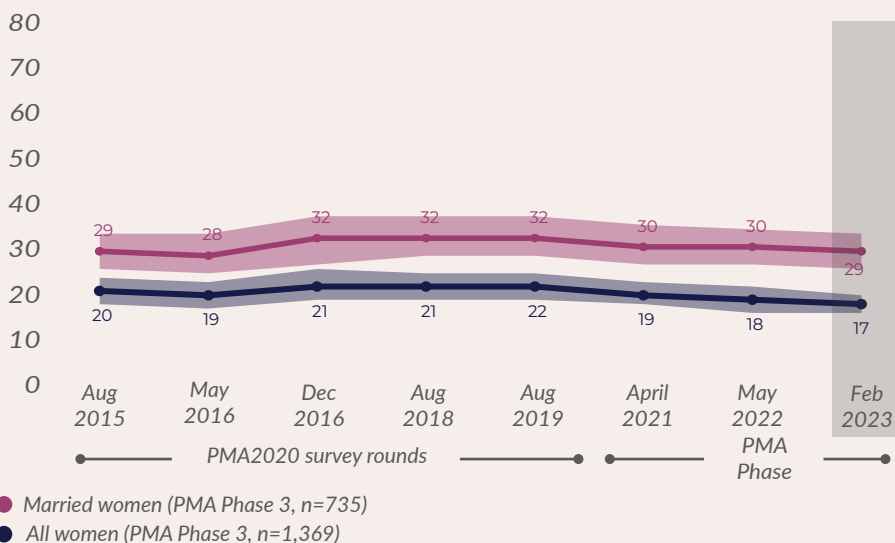


Nearly nine in ten (**87%**) modern contraceptive users obtained their method from a public facility.

SECTION 1: CONTRACEPTIVE USE, DYNAMICS, AND DEMAND

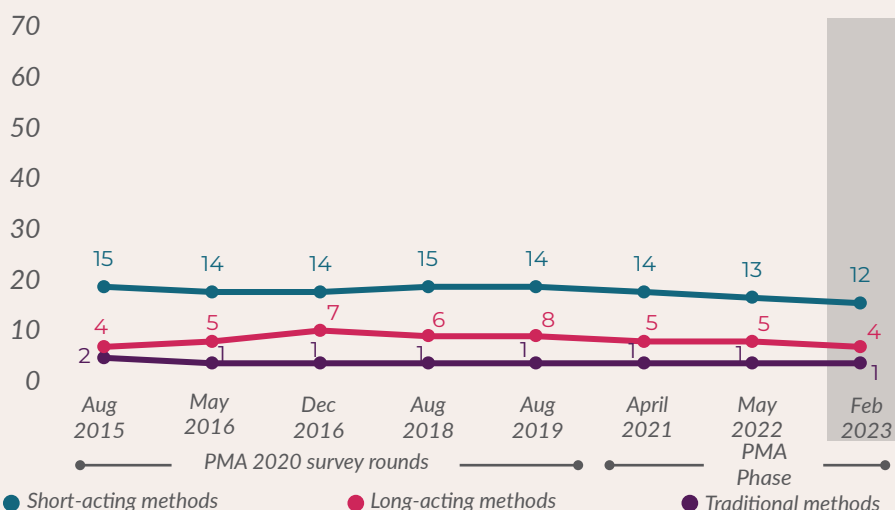
MODERN CONTRACEPTIVE PREVALENCE

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



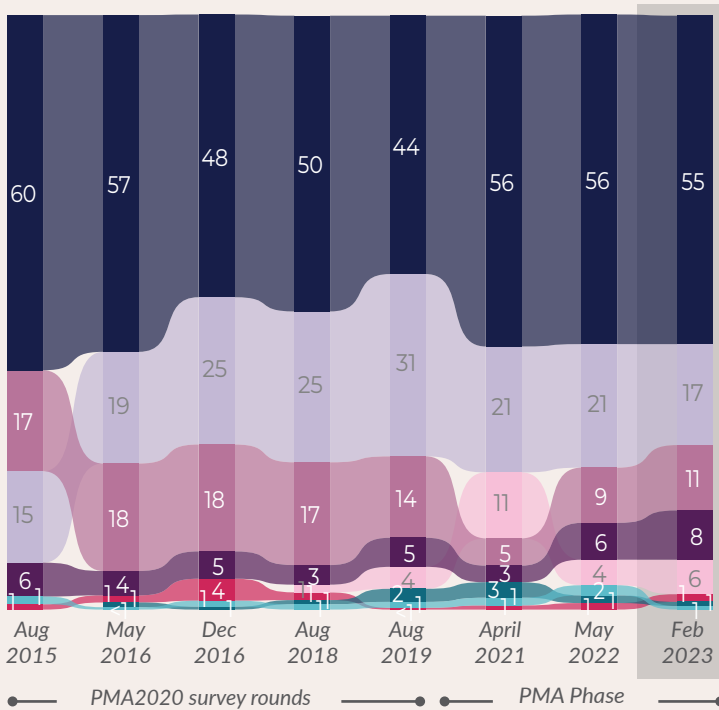
CONTRACEPTIVE PREVALENCE BY METHOD TYPE

Percent of all women age 15-49 currently using contraception by method type (PMA Phase 3, n=1,369)



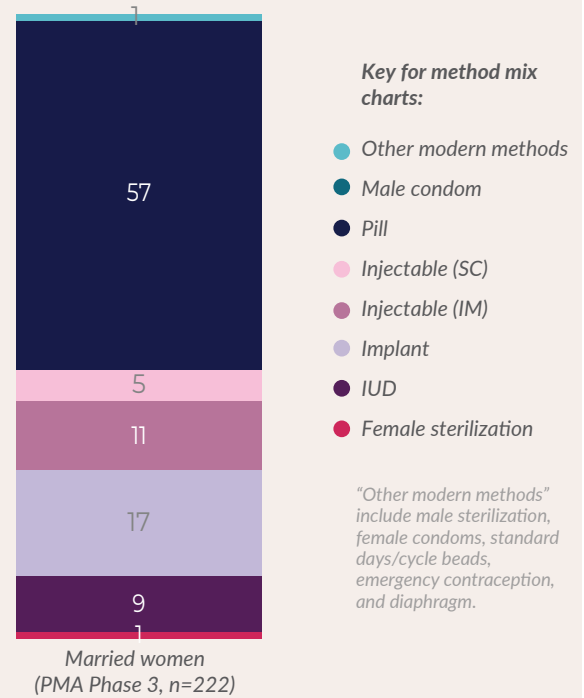
TRENDS IN MODERN CONTRACEPTIVE MIX

Percent distribution of all women age 15-49 using modern contraceptive methods by method and year (PMA Phase 3, n=230)



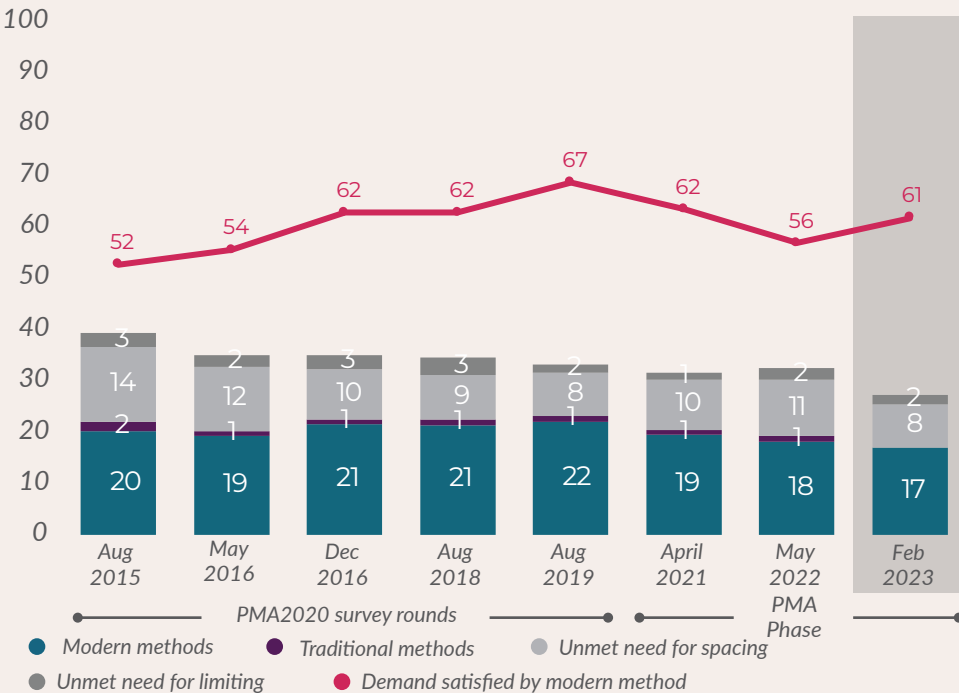
MODERN CONTRACEPTIVE METHOD MIX

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



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 3, n=1,369)



INTENTION TO USE CONTRACEPTION IN THE NEXT YEAR

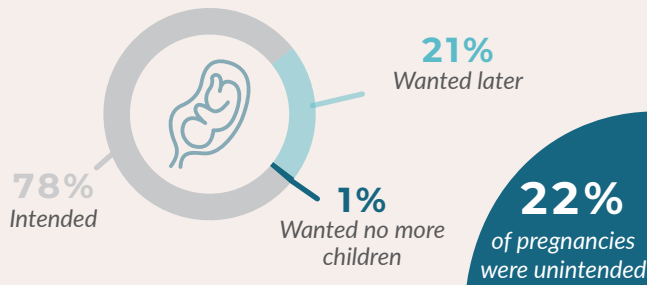
Percent of all women age 15-49 who are not currently using contraception but intend to use contraception in the next 12 months (n=1,054)



Demand satisfied by a modern method is total number of modern method users over the sum of contraceptive users and those with unmet need.

INTENTION OF MOST RECENT BIRTH/CURRENT PREGNANCY

Percent of women by intention of their most recent birth or current pregnancy (n=548)



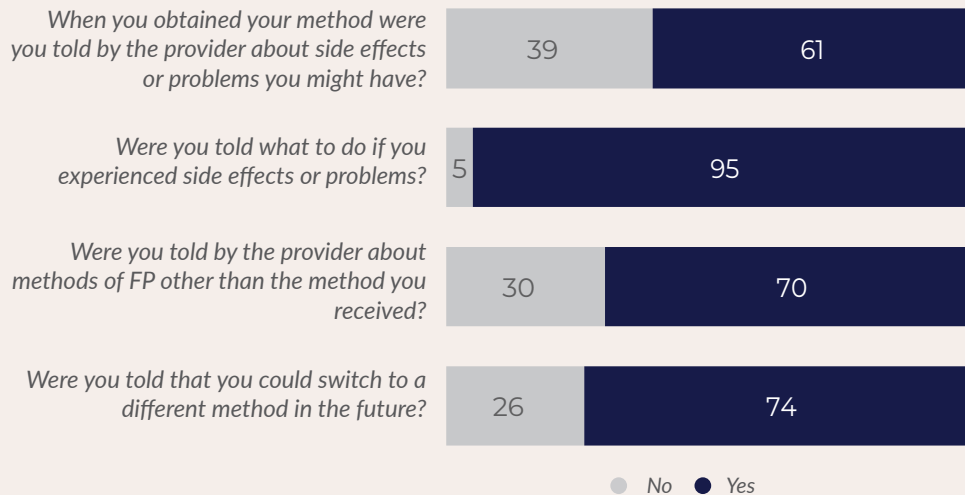
KEY FINDINGS FOR SECTION 1: CONTRACEPTIVE USE, DYNAMICS, AND DEMAND

- Unmet needs for family planning decreased between August 2015 and February 2023, from 17% to 10%.
- The proportion of IUD users increased between April 2021 and February 2023, from 3% to 8%. Simultaneously, the proportion of implant users decreased from 21% in April 2021 to 17% in February 2023.
- More than one in five women (22%) reported that their recent birth or current pregnancy was undesired, 21% of whom would have preferred for it to happen later, and 1% did not want it at all.

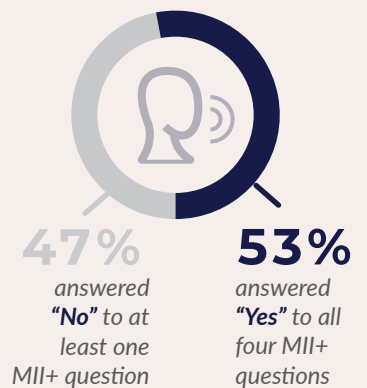
SECTION 2: CONTRACEPTIVE USER COUNSELING AND OUTREACH

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=230)



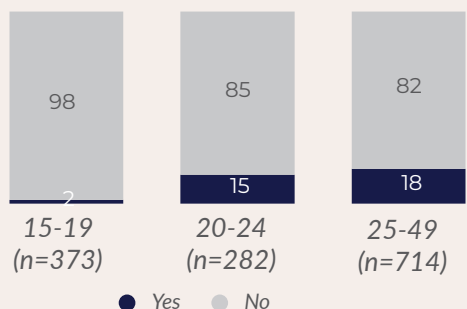
Percent of women who responded "Yes" to all four MII+ questions



Only women who said they were told about possible side effects were asked whether they were told about what to do in the event of side effects.

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



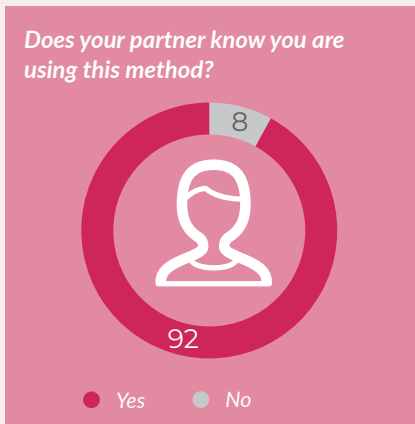
KEY FINDINGS FOR SECTION 2: COUNSELING AND OUTREACH

- About four in ten current modern contraceptive users (39%) were not counseled on possible side effects or issues related to the method they selected at the time of their visit.
- In the past twelve months, adolescent girls (15-19) received FP information from a health provider nine times less often than older women (25-49).
- Over half (53%) of all current contraceptive users received comprehensive counseling services from a health provider in February 2023.

SECTION 3: PARTNER DYNAMICS

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=221)



By age



By education



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

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By age

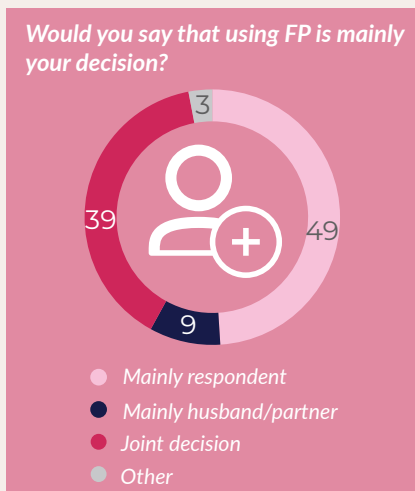


By education

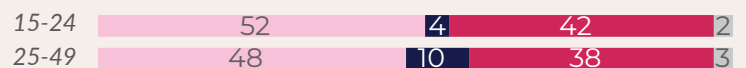


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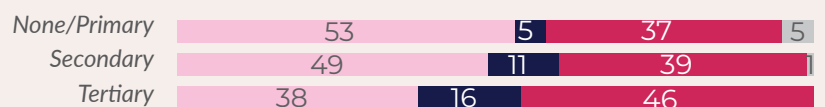
Percent of women who are currently using FP and agree with the following statement, by age and education (n=230)



By age

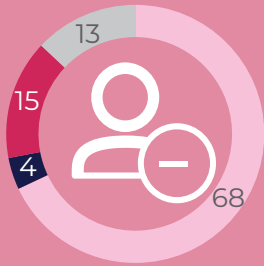


By education



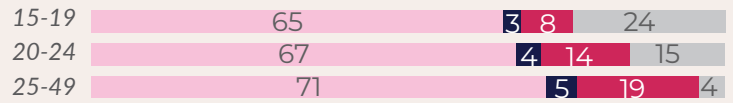
Percent of women who are not currently using FP and agree with the following statement, by age and education (n=1,040)

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

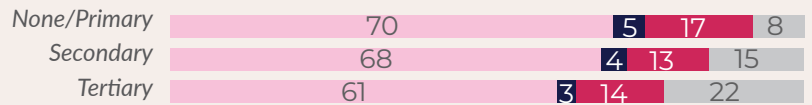


- Mainly respondent
- Mainly husband/partner
- Joint decision
- Other

By age

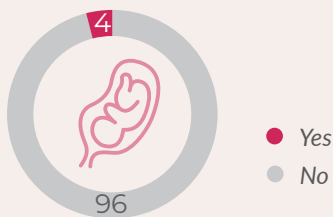


By education

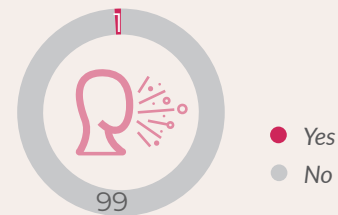


PREGNANCY COERCION

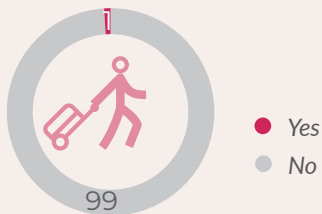
Percent of currently married women who report that their partner tried to force or pressure them to become pregnant in the past 12 months (n=718)



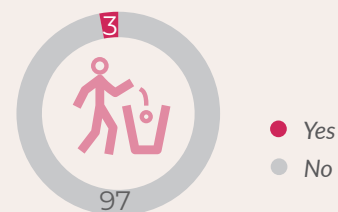
Percent of currently married women who report that their partner made them feel badly for wanting to use an FP method to delay or prevent pregnancy in the past 12 months (n=716)



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=718)



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=718)



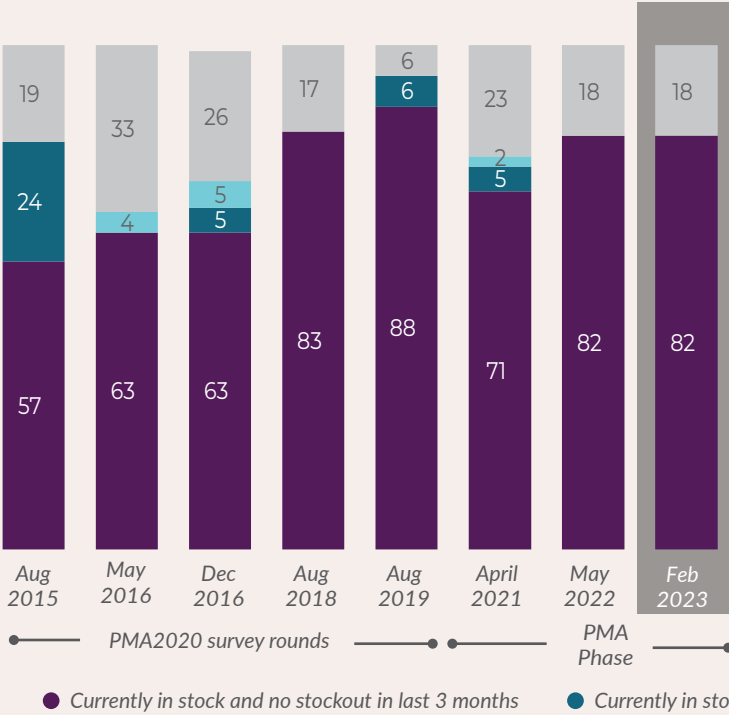
KEY FINDINGS FOR SECTION 3: PARTNER DYNAMICS

- Among women who were using a female-controlled modern contraceptive method, only 8% reported that their partner did not know they were using a contraceptive method. This proportion was lower among adolescents and youths (5%) and among women with higher education (2%).
- Nearly two in ten women (18%) who were using a female-controlled contraceptive method reported that they did not discuss with their partner the decision to delay or prevent a pregnancy before starting using their current method. This proportion was higher among women who never attended school or who had a primary school level (25%).
- Only 39% of current users reported that the decision to use a contraceptive method was made jointly with their partner, and this proportion was higher among adolescents and youths (42%) and among women who attended university (46%).

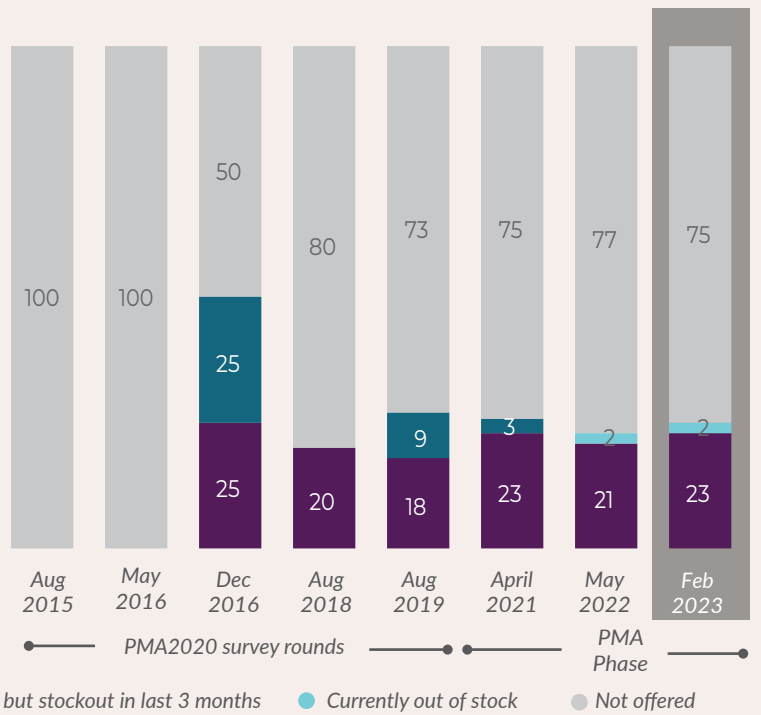
SECTION 4: SERVICE DELIVERY POINTS

TRENDS IN METHOD AVAILABILITY: IUD

Public facilities (PMA Phase 3, n=61)

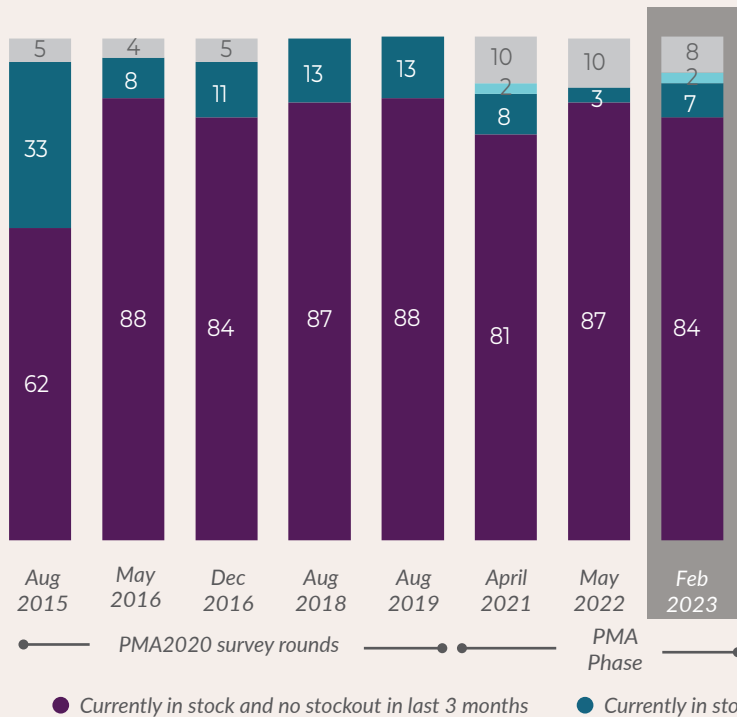


Private facilities (PMA Phase 3, n=47)

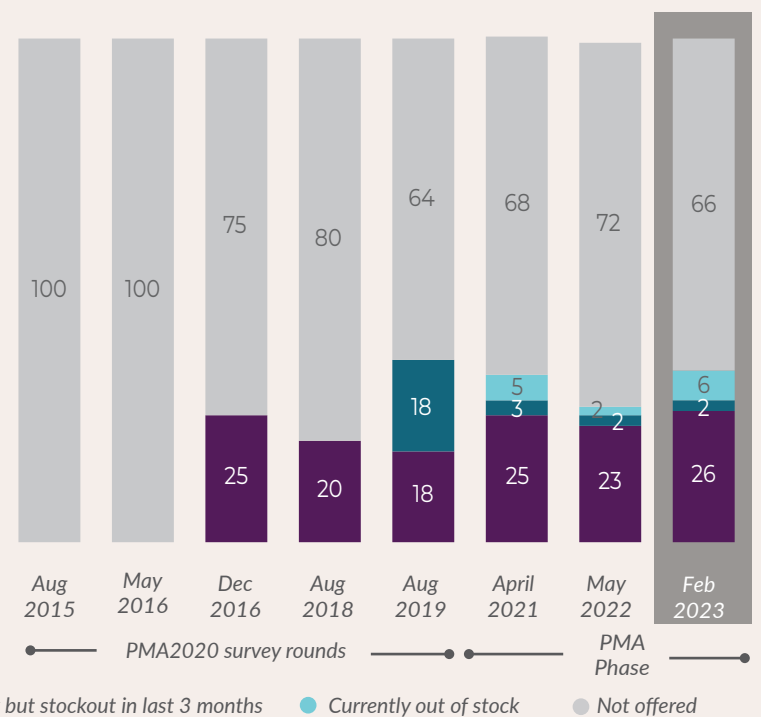


TRENDS IN METHOD AVAILABILITY: IMPLANT

Public facilities (PMA Phase 3, n=61)



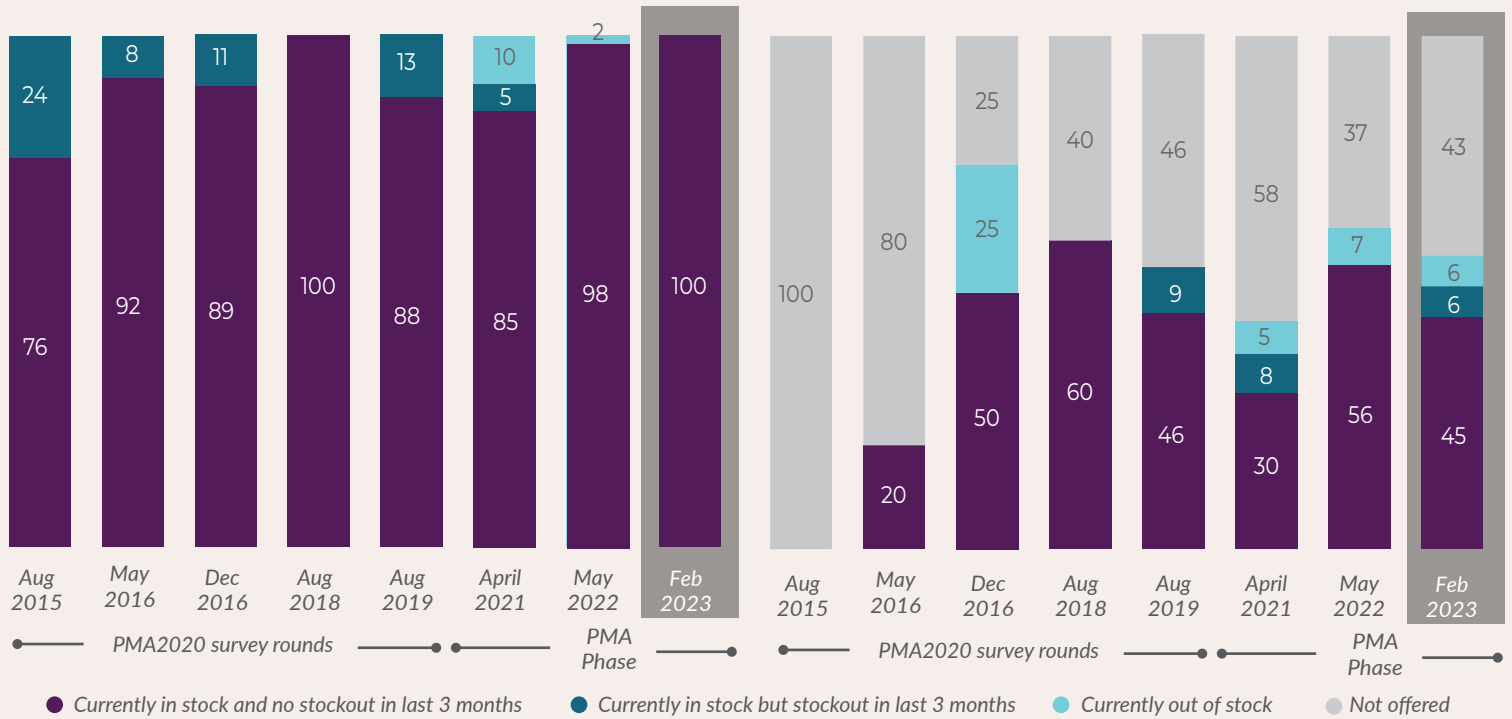
Private facilities (PMA Phase 3, n=47)



TRENDS IN METHOD AVAILABILITY: INJECTABLES

Public facilities (PMA Phase 3, n=61)

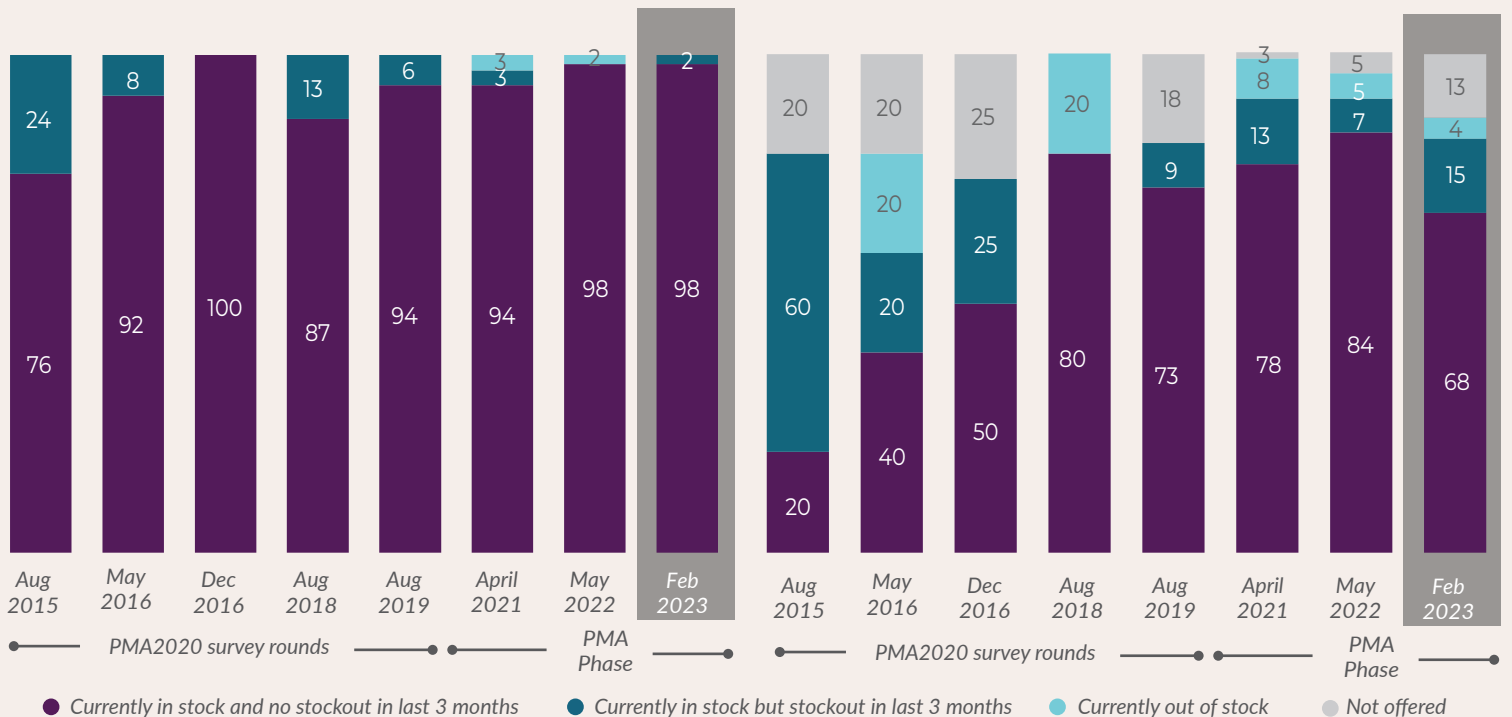
Private facilities (PMA Phase 3, n=47)



TRENDS IN METHOD AVAILABILITY: PILLS

Public facilities (PMA Phase 3, n=61)

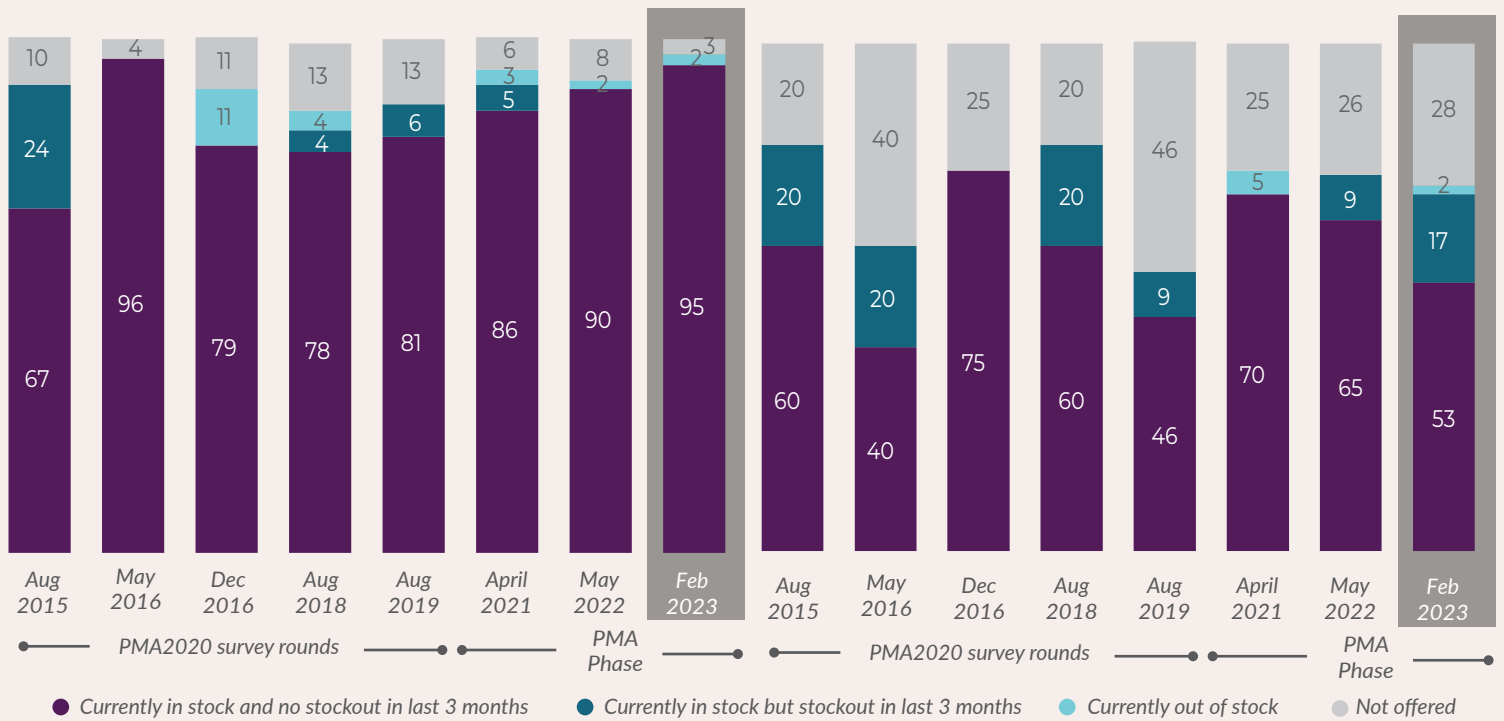
Private facilities (PMA Phase 3, n=47)



TRENDS IN METHOD AVAILABILITY: MALE CONDOMS

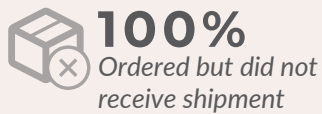
Public facilities (PMA Phase 3, n=61)

Private facilities (PMA Phase 3, n=47)

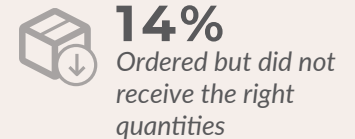


MAIN REASON FOR EPISODES OF STOCKOUT OF ANY METHOD BY TYPE OF FACILITY

Public facilities (n=11 episodes)



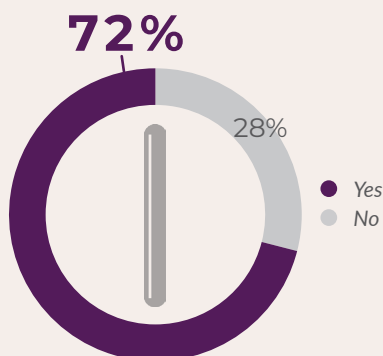
Private facilities (n=14 episodes)



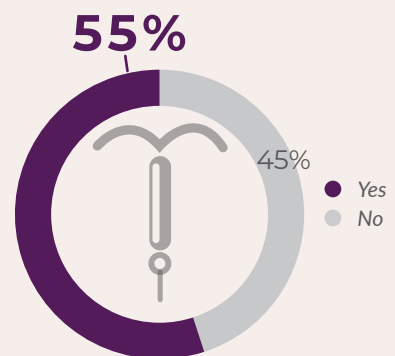
Possible answers were "Did not place order for shipment", "Ordered but did not receive shipment", "Did not order the right quantities", "Ordered but did not receive the right quantities", "Unexpected increase in consumption", "Stock out due to COVID-19 disruption", and "Other."

FACILITY READINESS

Percent of facilities that provide implants and have a trained provider and instruments/supplies needed for implant insertion/removal (n=72)



Percent of facilities that provide IUDs and have a trained provider and instruments/supplies needed for IUD insertion/removal (n=62)



87%

of women obtained their current modern method from a public health facility (n=230)

KEY FINDINGS FOR SECTION 4: SERVICE DELIVERY POINTS

- In February 2023, 9% of public service delivery points (SDP) were or had recently been out of stock of implants.
- Failure to deliver orders (100%) was the only reason for contraceptive stockouts at the public SDP level.
- While 72% of public facilities provide the implant and have a trained provider with the necessary equipment for its insertion and removal, they were only 55% to provide the IUD and to have a trained provider and the necessary equipment for its insertion and 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	July-Aug 2015	1,336	21.37	1.63	18.24	24.88	19.75	1.55	16.78	23.10	16.90	1.70	13.70	20.66
PMA 2020	R2	Feb-May 2016	1,276	20.09	1.60	17.03	23.54	18.82	1.62	15.75	22.33	14.48	1.54	11.64	17.89
PMA 2020	R3	Nov-Dec 2016	1,398	22.01	1.89	18.39	26.10	21.10	1.90	17.47	25.26	12.29	1.18	10.08	14.90
PMA 2020	R4	Jul-Aug 2018	1,341	22.31	1.46	19.48	25.42	21.02	1.46	18.20	24.14	11.86	1.14	9.72	14.39
PMA 2020	R5	Jul-Aug 2019	1,281	22.36	1.46	19.52	25.47	21.67	1.37	19.00	24.60	9.84	1.18	7.68	12.52
PMA	Phase 1	Dec 2020-April 2021	1,355	19.95	1.30	17.43	22.74	19.12	1.21	16.78	21.69	10.80	1.20	8.59	13.48
PMA	Phase 2	Jan-May 2022	1,359	18.82	1.25	16.41	21.49	17.77	1.25	15.37	20.46	13.07	1.70	10.00	16.92
PMA	Phase 3	Nov 2022-Feb 2023	1,369	17.46	1.21	15.13	20.06	16.67	1.09	14.56	19.01	10.09	1.19	7.91	12.78

MARRIED 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	V1	July-Aug 2015	894	30.96	2.08	26.89	35.36	28.63	2.05	24.64	32.99	24.43	2.33	19.99	29.49
PMA 2020	V2	Feb-May 2016	812	29.77	2.22	25.45	34.47	27.77	2.21	23.51	32.47	21.20	2.22	17.03	26.07
PMA 2020	V3	Nov-Dec 2016	911	32.69	2.71	27.40	38.46	31.48	2.73	26.19	37.30	17.24	1.74	13.96	21.09
PMA 2020	V4	Jul-Aug 2018	828	34.20	2.09	30.08	38.57	32.14	2.18	27.87	36.73	18.26	1.58	15.25	21.70
PMA 2020	V5	Jul-Aug 2019	793	33.09	2.04	29.06	37.39	32.00	1.93	28.19	36.07	15.27	1.75	12.14	19.29
PMA	Phase 1	Dec 2020-April 2021	789	31.57	2.24	27.20	36.30	30.18	2.03	26.21	34.46	17.46	1.66	14.33	21.10
PMA	Phase 2	Jan-May 2022	777	31.38	2.06	27.36	35.71	29.59	2.05	25.59	33.93	21.09	2.48	16.50	26.56
PMA	Phase 2	Nov 2022-Feb 2023	735	30.06	1.87	26.40	33.99	28.64	1.87	24.99	32.60	17.47	1.78	14.13	21.39

PMA Niger (Niamey) collects information on knowledge, practice, and coverage of family planning services in 33 enumeration areas selected using a multi-stage stratified cluster design with urban-rural strata. The results are regionally representative. Data were collected between November 2022 and February 2023 from 1,087 households (97.8% response rate), 1,369 females age 15-49 ans (96.1% response rate), and 132 facilities (93.6% response rate). For sampling information and full data sets, visit <https://www.pmadata.org/countries/niger>.

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 Niger (Niamey) is led by Institut National de la Statistique du Niger. 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.