

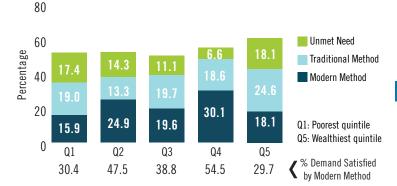
KEY FAMILY PLANNING INDICATORS

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

(All and Married Women, Age 15-49)						
	Round 1 May-July 2016		Round 2 Mar-Apr 2017			und 3 lay 2018
	All	Married	AII	Married	All	Married
Contraceptive Prevalence R	ate					
All Methods	25.1	33.5	24.2	33.3	31.3	41.2
Modern Methods	15.6	17.5	13.9	15.3	19.2	22
Long Acting/Permanent	2.1	3.3	1.9	3.9	3.3	5.5
Total Unmet Need	14.4	20.4	12.0	16.8	10.5	13.4
For Limiting	4.6	8.3	4.4	7.2	4.2	5.9
For Spacing	9.8	12.1	7.6	9.5	6.3	7.5
Total Demand	39.5	53.9	36.2	50.0	41.7	54.6
Demand Satisfied by Modern Method (%)	39.6	32.6	38.3	30.6	45.9	40.3

Fer	Fertility Indicators (All Women)				
	Round 1 May-July 2016	Round 2 Mar-Apr 2017	Round 3 Apr-May 2018		
Last Birth Unintended (%)	28.5	32.6	23.2		
Wanted Later	16.7	19.9	15.3		
Wanted No More	11.8	12.6	7.9		

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



PMA2 2°

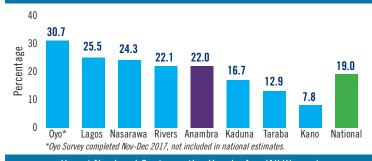
PMA2020/ANAMBRA, NIGERIA

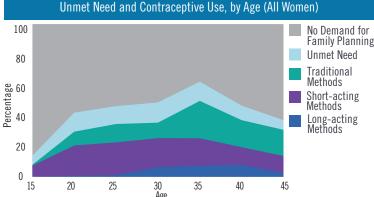
APRIL-MAY 2018 (ROUND 3)

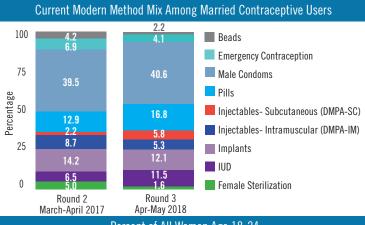
Performance Monitoring and Accountability 2020 (PMA2020) uses innovative mobile technology to support low-cost, rapid-turnaround surveys to monitor key indicators for family planning. The project is implemented by local universities and research organizations in 11 countries, deploying a cadre of female 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.

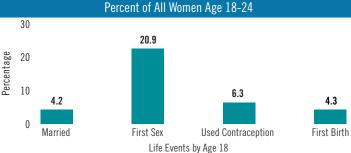
For more information please visit http://www.pma2020.org

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





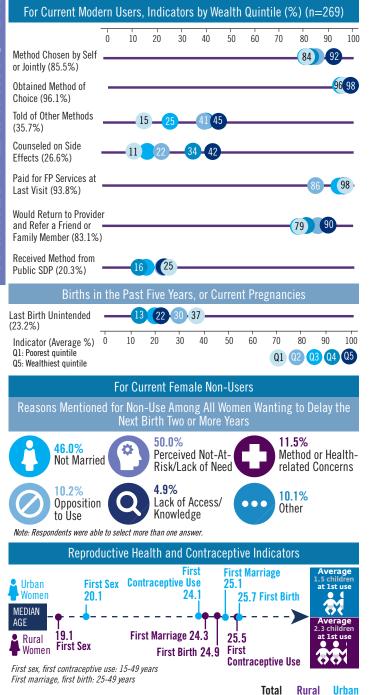




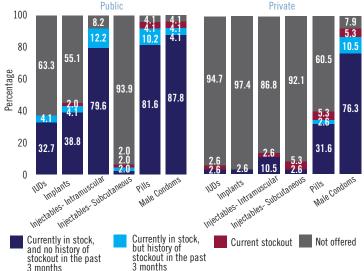


PMA2020/ANAMBRA, NIGERIA (APR-MAY 2018)

INDICATORS FOR ACCESS, EQUITY, QUALITY AND CHOICE



Percent of Facilities Offering Family Planning with Methods in Stock on Day of Interview (n=78; 40 public; 38 private)



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

Facility Type	3 or more methods	5 or more methods
Hospital	92.3	76.9
Health Center	86.2	48.3
Health Post	60.0	13.3
Total	80.7	45.6

Select Indicators Among Service Delivery Points

	Public	Private	Total			
Among All Service Delivery Points:						
Percent Offering Family Planning	86.0	74.5	80.6			
With Mobile Teams Visiting Facility In Last 6 Months (%)	26.3	2.0	14.8			
Supporting CHWs From This Service Delivery Point (%)	33.3	0.0	17.6			
Among Service Delivery Points Offering Family Planning Service	vices:					
Average Number Of Days Per Week FP Is Offered	5.2	5.9	5.5			
Offering Female Sterilization (%)	8.2	5.3	6.9			
Offering FP Counseling/Services To Adolescents (%)	75.5	23.7	52.9			
Charging General User Fees For FP Services (%)	22.4	7.9	16.1			
Availability of Instruments or Supplies for Implant Insertion/Removal+	81.8					
Availability of Instruments or Supplies for IUDs**	66.7					

*Among SDPs that provide implants (n=23, 22 public, 1 private). Instruments/supplies include: Clean Gloves, Antiseptic, Sterile Gauze Pad or Cotton Wool, Local Anesthetic, Sealed Implant Pack, Surgical Blade

**Among SDPs that provide IUDs (n=20, 18 public, 2 private). Instruments/supplies include: Sponge-holding forceps, Speculums (large and medium), Tenaculum, and uterine sound.

SAMPLE DESIGN

Women Having First Birth by Age 18 (%) (18-24 years)

Received FP Info. From Provider in Last 12 Months (%)

Exposed to FP Media in Last Few Months (%) (15-49 years) 74.3

The PMA2018/Anambra survey used a two-stage cluster design. The same sample from the previous round was used, 41 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 completed sample included 1,355 households (98.3% response rate), 1,419 de facto females (98.5% response rate) and 108 health facilities (89.3% response rate). Data collection was conducted between April and May 2018.

4.3

27.1

7.6

24.5

3.0

28.1

76.5





