



PMA BURKINA FASO

Results from Phase 2 cross-sectional survey

December 2020–March 2021

OVERALL KEY FINDINGS

The modern contraceptive prevalence rate (mCPR) among married women increased from **28%** in February 2020 to **32%** in March 2021.

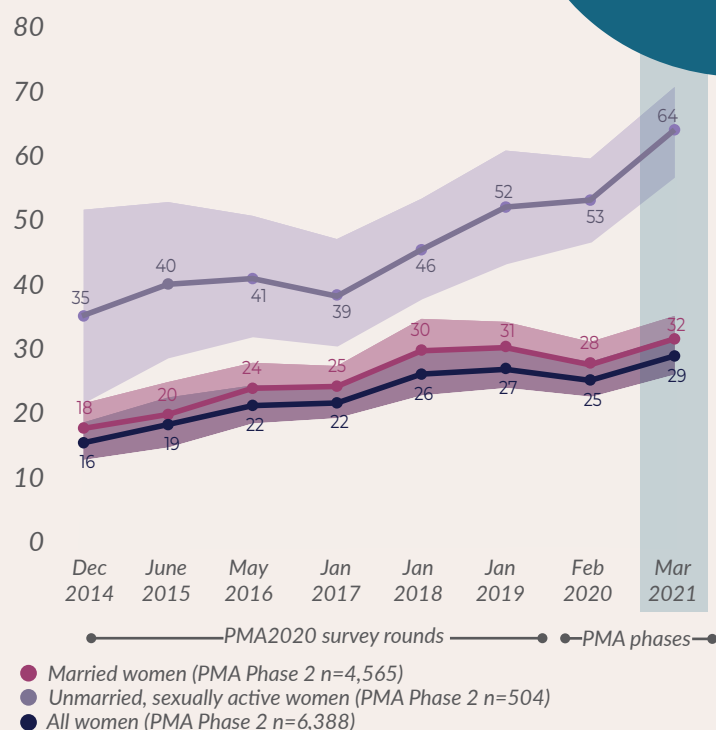
While current or recent stockouts for the implant, the pill and male condoms dramatically increased between February 2020 and March 2021 in public health facilities, IUD stockouts significantly decreased. Current or recent stockouts for the injectable remained quasi-stable.

14% of modern contraceptive users rely on long-acting methods, nearly stagnant since January 2018.

SECTION 1: CONTRACEPTIVE USE, DYNAMICS, AND DEMAND

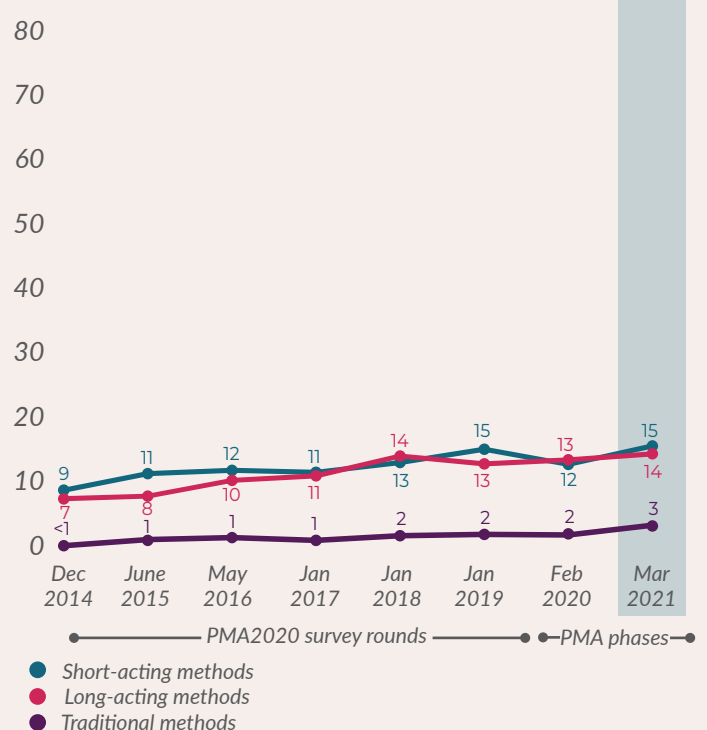
MODERN CONTRACEPTIVE PREVALENCE

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



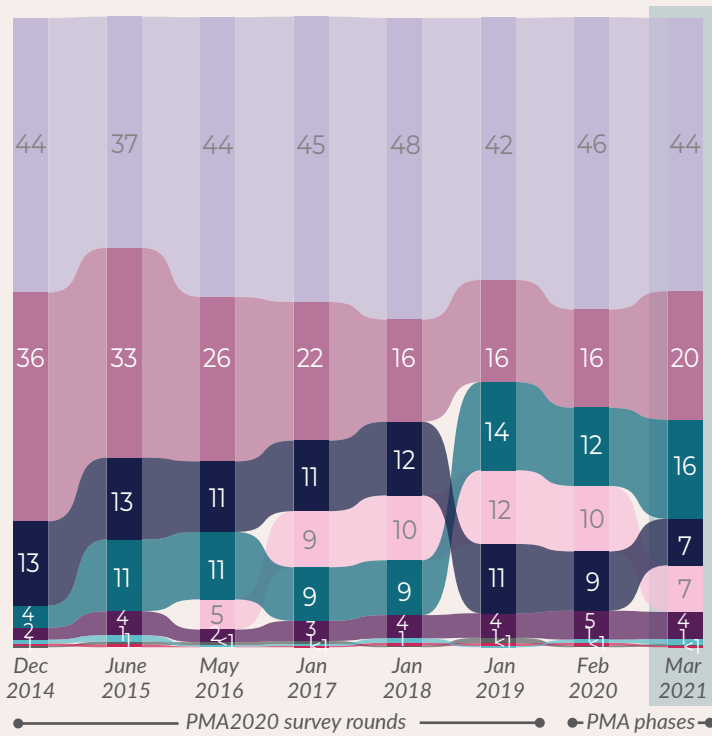
CONTRACEPTIVE PREVALENCE BY METHOD TYPE

Percent of all women age 15-49 currently using contraception by method type (n=6,388)



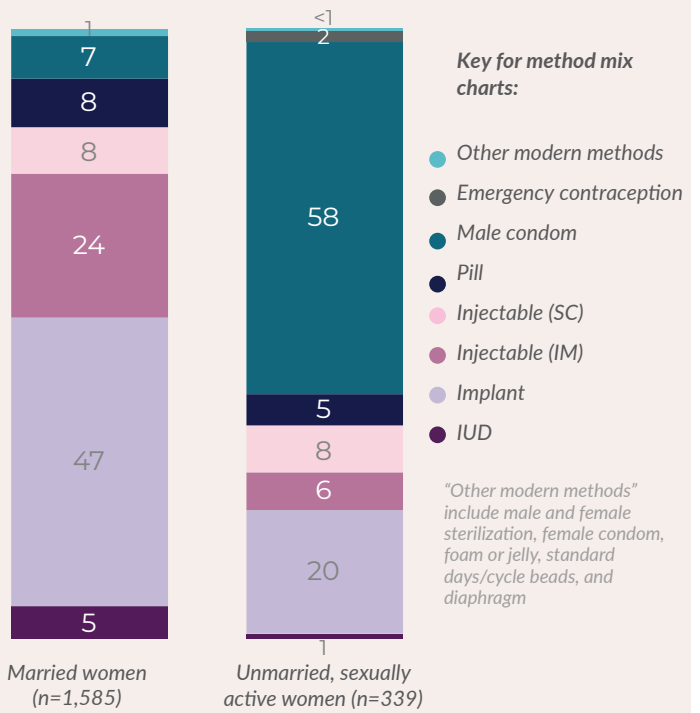
TRENDS IN MODERN CONTRACEPTIVE MIX

Percent distribution of all women age 15-49 using modern contraceptive methods by method and year (PMA Phase 2 n=2,135)



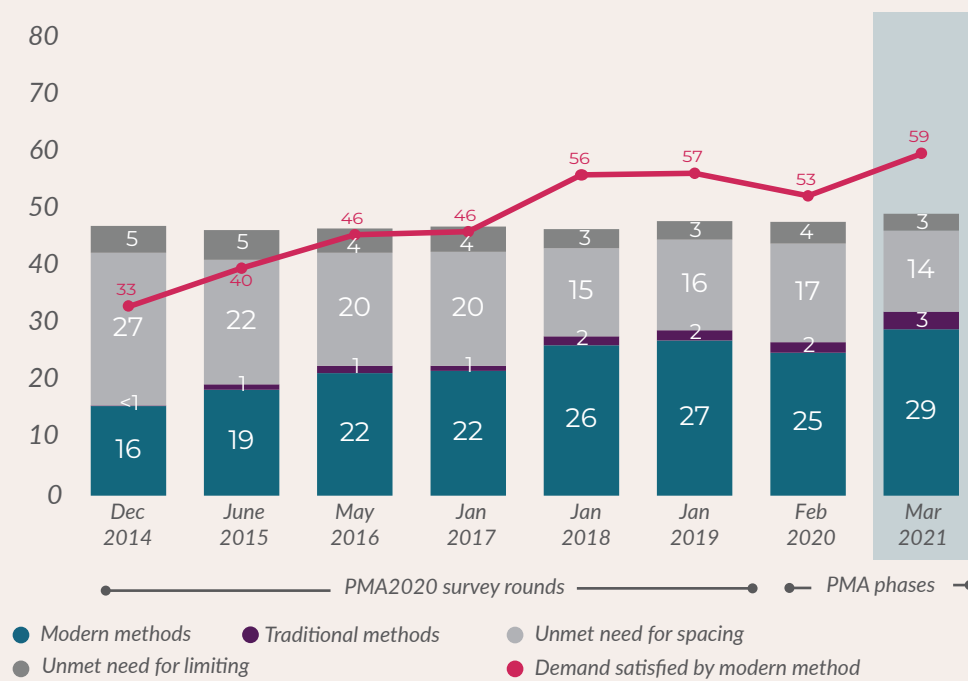
MODERN CONTRACEPTIVE METHOD MIX

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 2 n=6,388)



Demand satisfied by a modern method is use of modern contraceptive methods divided by the sum of unmet need plus total contraceptive use.

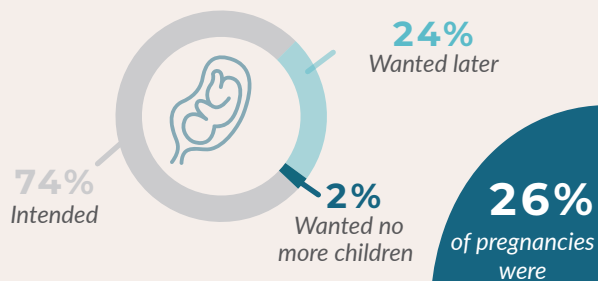
INTENTION TO USE CONTRACEPTION IN THE NEXT YEAR

Percent of all women age 15-49 who are not currently using contraception but intend to use contraception in the next 12 months (n=3,531)



INTENTION OF MOST RECENT BIRTH/CURRENT PREGNANCY

Percent of women by intention of their most recent birth or current pregnancy (n=3,312)



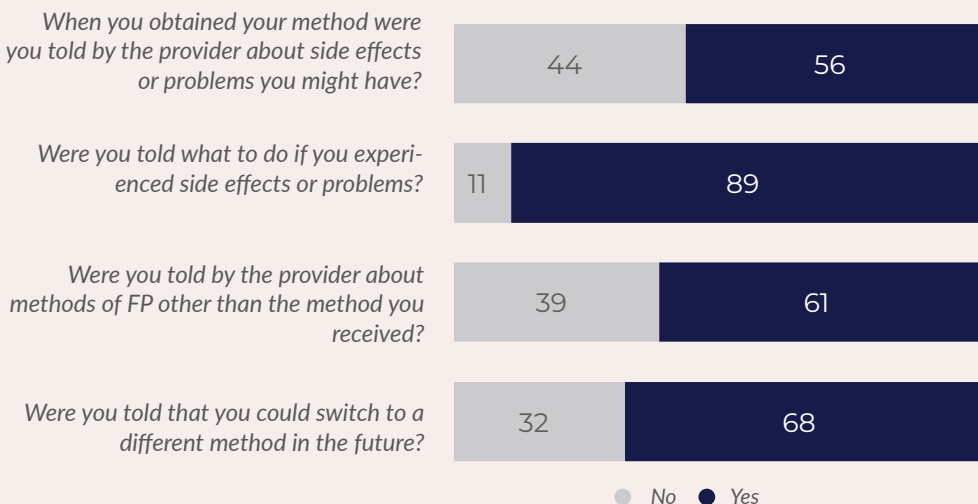
KEY FINDINGS FOR SECTION 1: CONTRACEPTIVE USE, DYNAMICS, AND DEMAND

- Unmet need for family planning went down from 32% in December 2014 to 17% in March 2021.
- The percentage of sub-cutaneous injectable users has been decreasing since January 2019, from 12% to 7% in March 2021. In the meantime, the percentage of intra-muscular injectable users has gone up from 16% in January 2019 to 20% in March 2021.
- More than one in four women (26%) reported that their recent birth or current pregnancy was undesired, with 24% reporting that they would have preferred to have it later, and 2% who did not want the pregnancy at all.

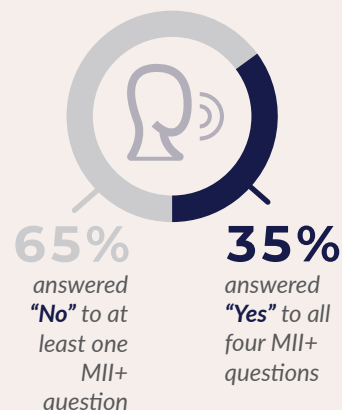
SECTION 2: CONTRACEPTIVE USER COUNSELING AND OUTREACH

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=1,909)

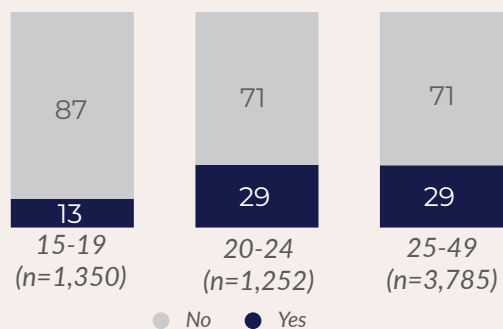


Percent of women who responded "Yes" to all four MII+ questions



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



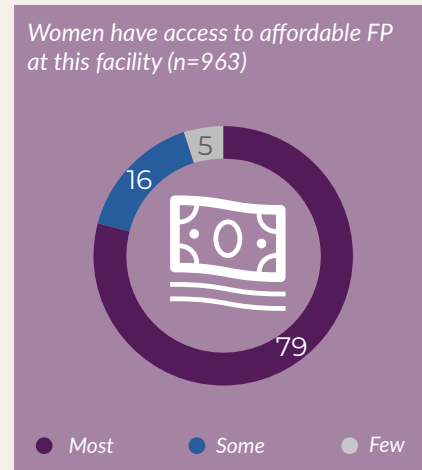
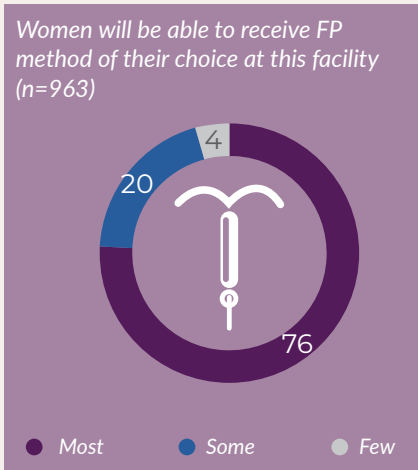
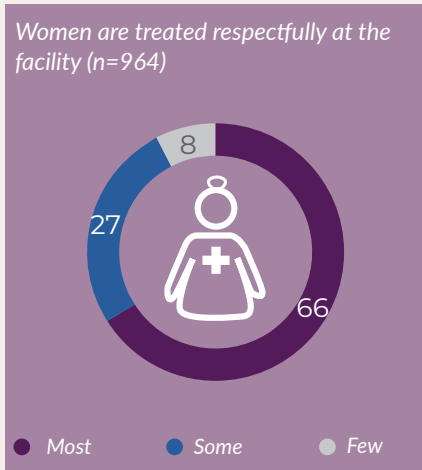
KEY FINDINGS FOR SECTION 2: QUALITY OF FP SERVICES AND COUNSELING

- Nearly half (44%) of current modern contraceptive method users were not counseled on possible side effects or issues related to the method they selected during their visit or at the time of their consultation.
- In the past 12 months, adolescents received information on FP from health providers half as often as older women.
- Only 35% of all current contraceptive users answered "Yes" to the four questions of the Method Information Index Plus (MII+).

SECTION 3: QUALITY OF FP SERVICES

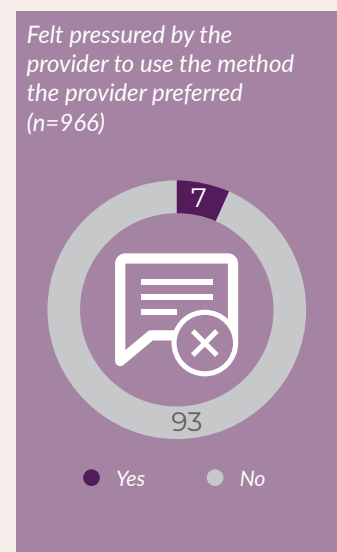
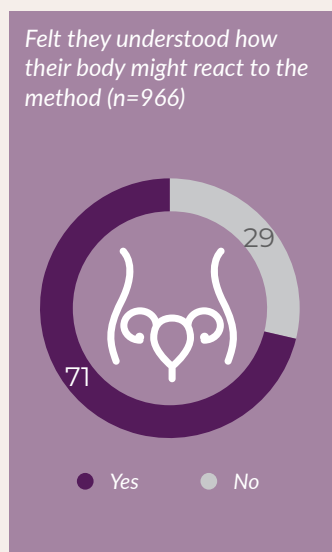
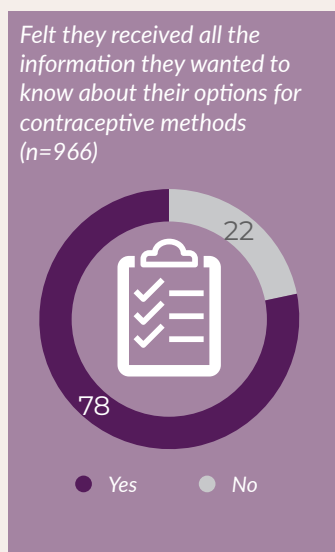
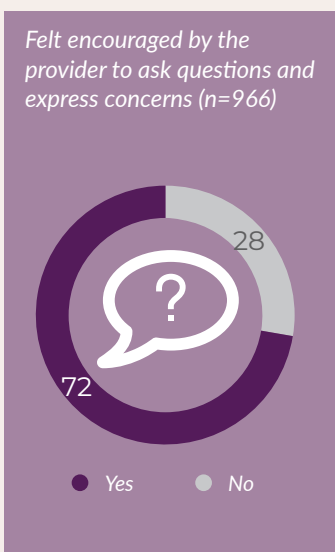
COMMUNITY PERCEPTION OF QUALITY OF CARE

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

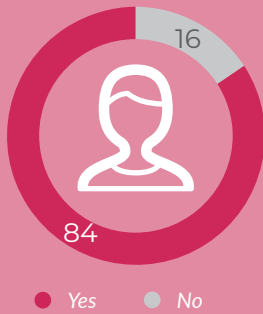
- 66% of FP clients reported that most of the members of their community think women are treated with respect in health facilities.
- More than one in four FP clients (28%) felt that they were not encouraged by their provider to ask questions or to voice their concerns during their visit that day.
- 29% of FP clients reported that they felt they did not understand how their bodies might react to the method after their visit that day.

SECTION 4: 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=1,661)

Does your partner know that you are using this method?



By age



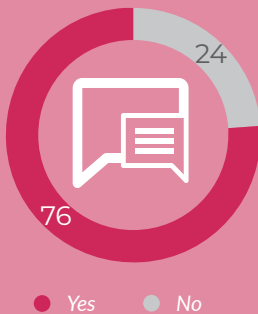
By education



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

Before you started using this method had you discussed the decision to delay or avoid pregnancy with your partner? (n=1,660)

Percent of women who are currently using FP and agree with the following statement, by age and education



By age



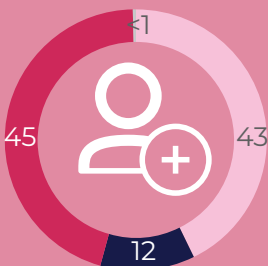
By education



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

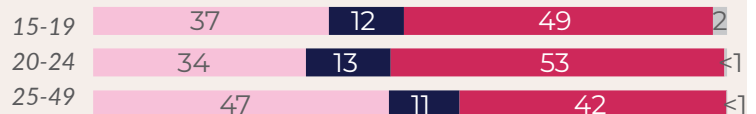
Percent of women who are currently using FP and agree with the following statement, by age and education (n=2,384)

Would you say that using FP is mainly your decision?

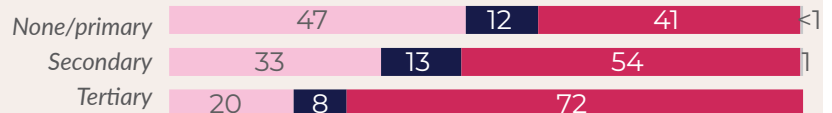


- Mainly respondent
- Mainly partner
- Joint decision
- Other

By age

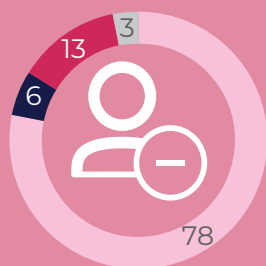


By education



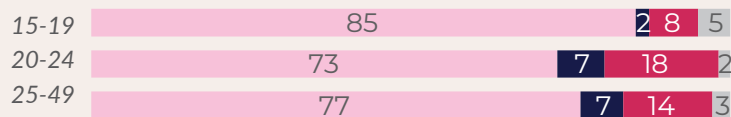
Percent of women who are not currently using FP and agree with the following statement, by age and education (n=3,549)

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

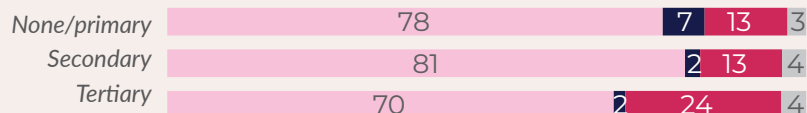


- Mainly respondent
- Mainly partner
- Joint decision
- Other

By age

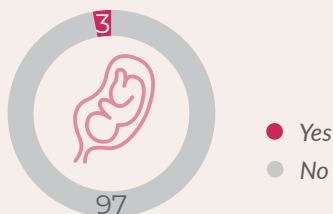


By education

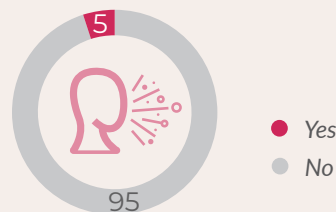


PREGNANCY COERCION

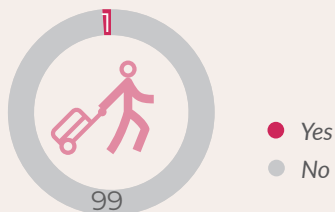
Percent of currently married women who report that their partner tried to force or pressure them to become pregnant in the past 12 months (n=4,257)



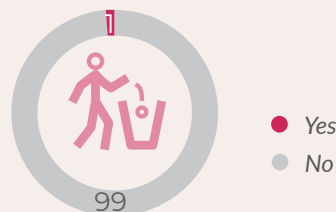
Percent of currently married women who report that their partner made them feel badly for wanting to use an FP method to delay or prevent pregnancy in the past 12 months (n=4,254)



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=4,254)



Percent of currently married women who report that their partner took away her FP method or kept her from a clinic in the past 12 months (n=4,254)



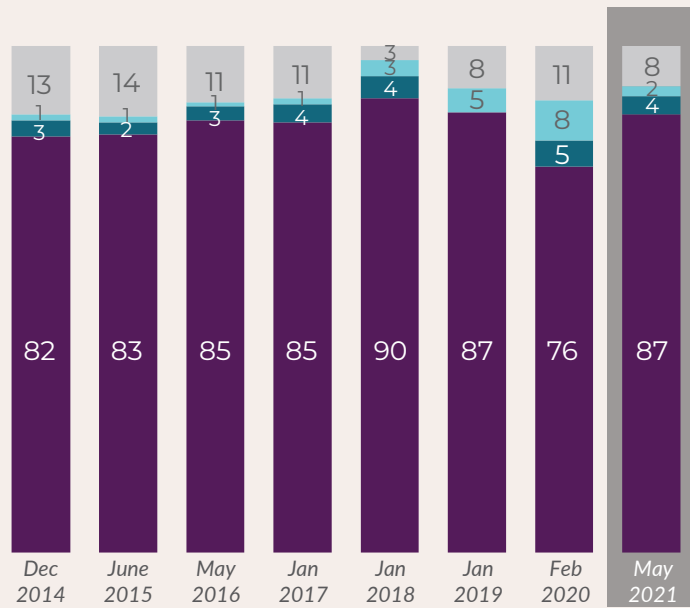
KEY FINDINGS FOR SECTION 4: PARTNER DYNAMICS

- Among women using a female controlled modern contraceptive method, **16%** reported that their husband/partner did not know they were using a contraceptive method, with higher proportions among adolescents and women with less education.
- Nearly one in four women (**24%**) who use a female controlled contraceptive method reported that they did not discuss with their partner/husband the decision to delay or prevent a pregnancy before starting using their current method. This proportion is higher among adolescents and women with less education.
- Only **45%** of current users reported that the decision to use a contraceptive method was jointly made with their partner/husband.

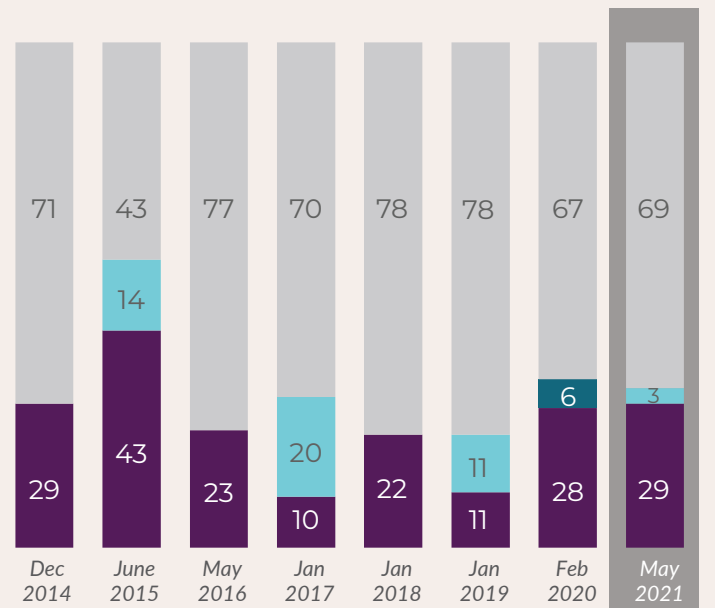
SECTION 5: SERVICE DELIVERY POINTS

TRENDS IN METHOD AVAILABILITY: IUD

Public facilities (PMA Phase 2 n=193)



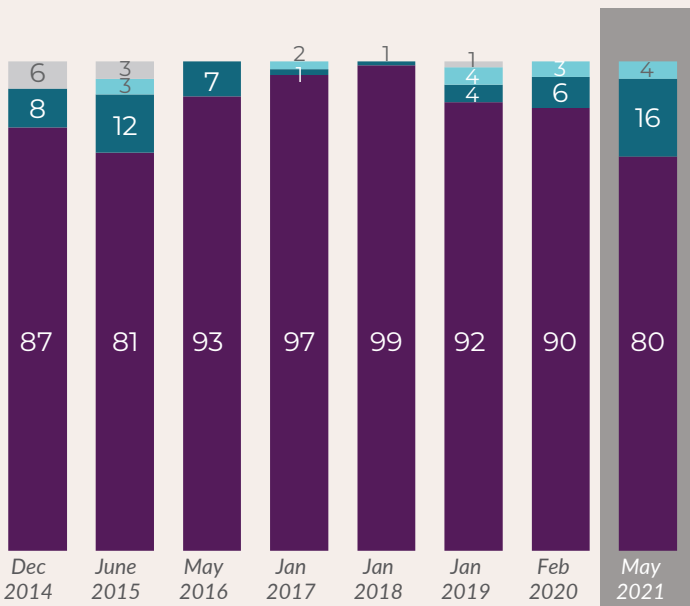
Private facilities (PMA Phase 2 n=35)



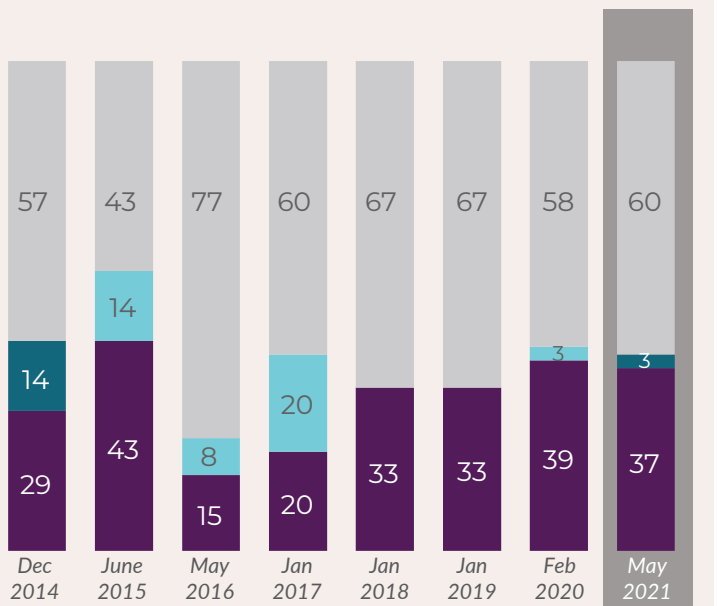
● Currently in stock and no stockout in past 3 months
 ● Currently in stock but stockout in past 3 months
 ● Currently out of stock
 ● Not offered

TRENDS IN METHOD AVAILABILITY: IMPLANT

Public facilities (PMA Phase 2 n=193)



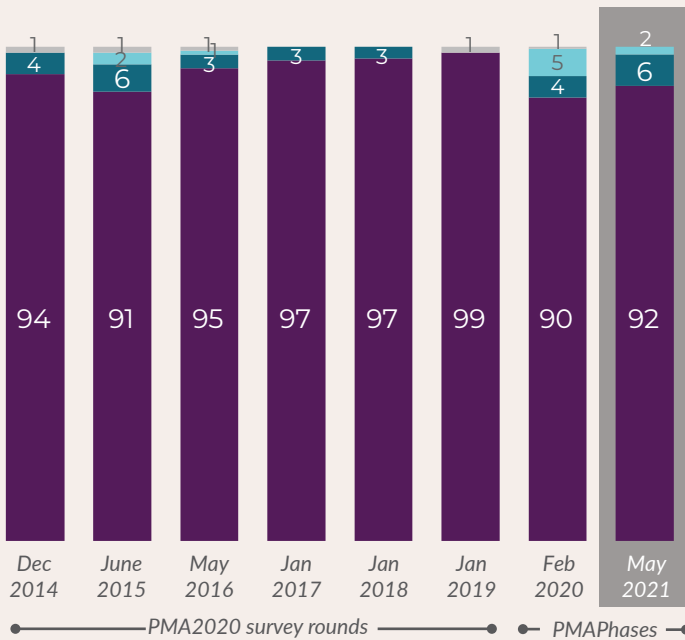
Private facilities (PMA Phase 2 n=35)



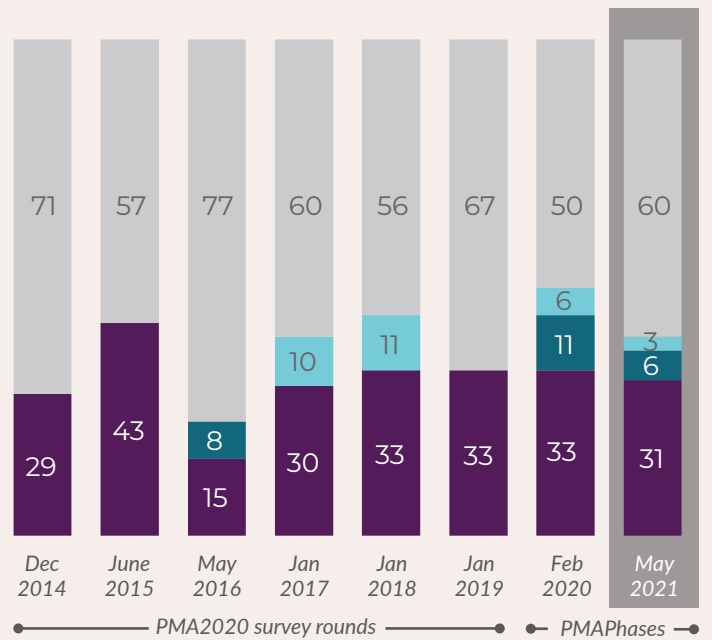
● Currently in stock and no stockout in past 3 months
 ● Currently in stock but stockout in past 3 months
 ● Currently out of stock
 ● Not offered

TRENDS IN METHOD AVAILABILITY: INJECTABLE

Public facilities (PMA Phase 2 n=193)



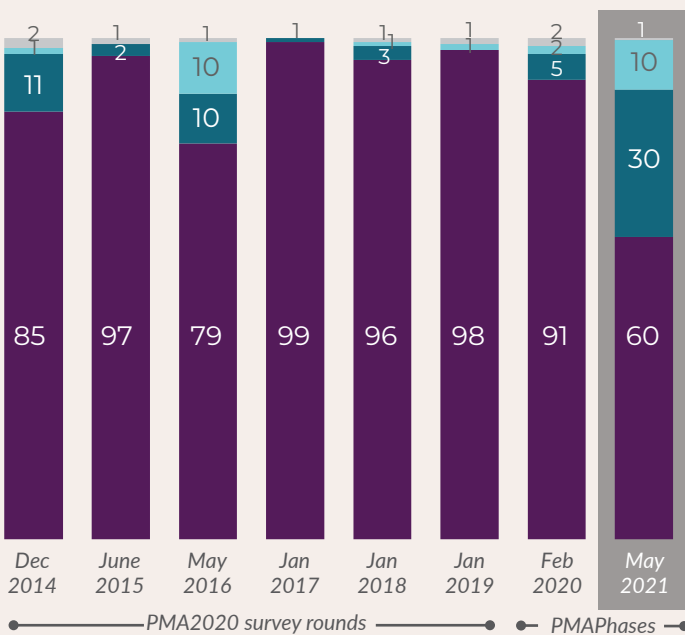
Private facilities (PMA Phase 2 n=35)



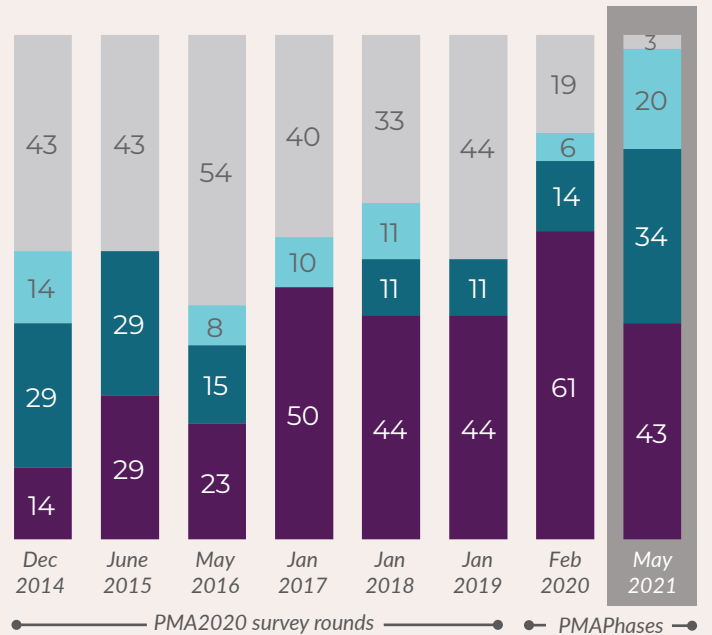
● Currently in stock and no stockout in past 3 months ● Currently in stock but stockout in past 3 months ● Currently out of stock ● Not offered

TRENDS IN METHOD AVAILABILITY: PILL

Public facilities (PMA Phase 2 n=193)



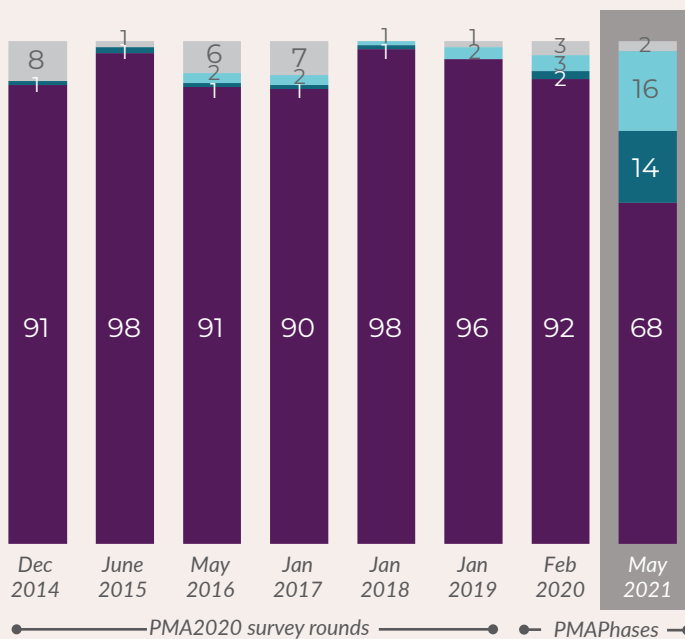
Private facilities (PMA Phase 2 n=35)



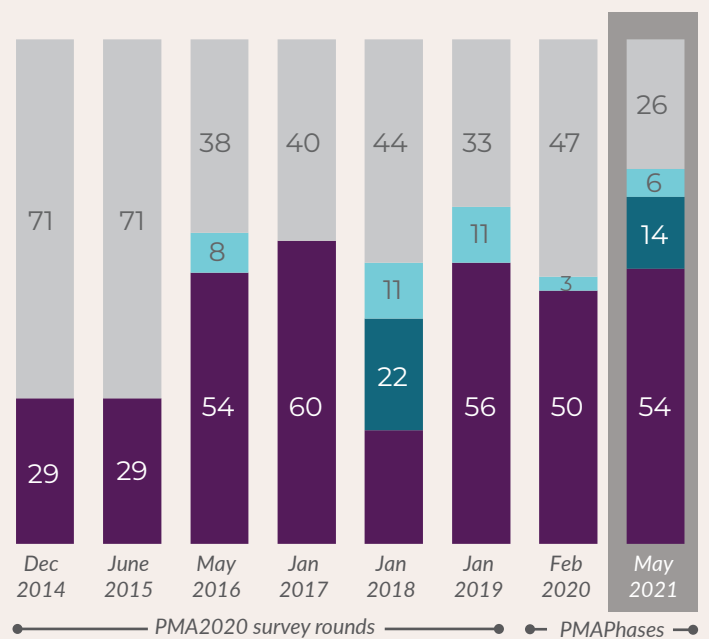
● Currently in stock and no stockout in past 3 months ● Currently in stock but stockout in past 3 months ● Currently out of stock ● Not offered

TRENDS IN METHOD AVAILABILITY: MALE CONDOM

Public facilities (PMA Phase 2 n=193)



Private facilities (PMA Phase 2 n=35)



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

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

Public facilities (n=153 episodes)



52%
Ordered but did not receive shipment



35%
Did not place order for shipment

Private facilities (n=16 episodes)



38%
Ordered but did not receive shipment

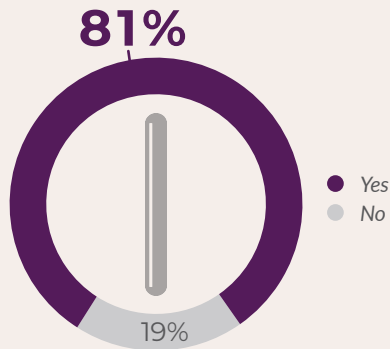


38%
Did not place order for shipment

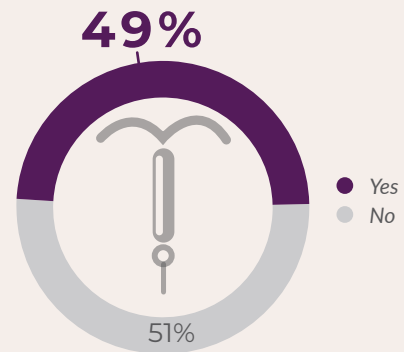
Possible answers were: "Did not place order for shipment", "Ordered but did not receive shipment", "Did not order the right quantities", "Ordered but did not receive the right quantities", "Unexpected increase in consumption", "Stock out due to COVID-19 disruption", and "Other".

FACILITY READINESS

Percent of facilities that provide implants and have a trained provider and instruments/supplies needed for implant insertion/removal (n=207)



Percent of facilities that provide IUDs and have a trained provider and instruments/supplies needed for IUD insertion/removal (n=189)



83%

of women obtained their current modern method from a public health facility (n=2,126)

KEY FINDINGS FOR SECTION 5: SERVICE DELIVERY POINTS

- In public health facilities, the pill, the implant, and male condoms are the most likely to be currently or to have recently been out of stock.
- The reason most frequently mentioned to explain stockouts of contraceptive methods in public health facilities relates to delays in the delivery of orders.
- While **81%** of health facilities provide the implant and have at least one trained provider and the instruments/supplies needed for insertion/withdrawal, only **49%** provide the IUD and have at least one trained provider and the instruments/supplies needed for insertion/withdrawal.

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	Round 1	Nov-Dec 2014	2,064	15.82	1.45	13.12	18.95	15.74	1.45	13.05	18.88	31.50	2.37	26.96	36.42
PMA 2020	Round 2	May-June 2015	2,102	19.47	1.95	15.85	23.68	18.55	1.94	14.98	22.76	27.09	2.11	23.07	31.51
PMA 2020	Round 3	Mar-May 2016	3,261	22.81	1.52	19.92	25.98	21.53	1.49	18.71	24.63	24.16	1.46	21.38	27.17
PMA 2020	Round 4	Nov 2016-Jan 2017	3,203	22.86	1.30	20.37	25.55	21.91	1.24	19.54	24.47	24.44	1.51	21.57	27.55
PMA 2020	Round 5	Nov 2017-Jan 2018	3,512	28.00	1.77	24.62	31.65	26.39	1.75	23.07	30.00	18.83	1.43	16.14	21.85
PMA 2020	Round 6	Dec 2018-Jan 2019	3,329	29.01	1.61	25.92	32.31	27.26	1.58	24.24	30.50	19.11	1.30	16.66	21.83
PMA	Phase 1	Dec 2019-Feb 2020	6,590	27.35	1.42	24.64	30.24	25.47	1.38	22.84	28.29	21.10	1.33	18.59	23.85
PMA	Phase 2	Dec 2020-Mar 2021	6,388	32.33	1.62	29.21	35.61	29.22	1.49	26.36	32.34	17.21	1.12	15.12	19.55

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	Round 1	Nov-Dec 2014	1,502	18.09	1.78	14.80	21.93	18.00	1.78	14.71	21.84	38.11	2.87	32.55	44.00
PMA 2020	Round 2	May-June 2015	1,440	20.85	2.33	16.57	25.89	20.11	2.32	15.86	25.15	32.96	2.77	27.65	38.73
PMA 2020	Round 3	Mar-May 2016	2,239	25.50	1.94	21.83	29.54	24.19	1.89	20.63	28.15	29.29	1.67	26.08	32.73
PMA 2020	Round 4	Nov 2016-Jan 2017	2,224	25.42	1.55	22.46	28.63	24.52	1.51	21.65	27.64	28.85	1.85	25.31	32.66
PMA 2020	Round 5	Nov 2017-Jan 2018	2,413	31.67	2.36	27.17	36.54	30.14	2.33	25.73	34.96	22.74	1.85	19.28	26.61
PMA 2020	Round 6	Dec 2018-Jan 2019	2,228	32.48	1.90	28.82	36.37	30.68	1.86	27.11	34.49	23.30	1.57	20.33	26.55
PMA	Phase 1	Dec 2019-Feb 2020	4,391	30.11	1.68	26.91	33.51	28.13	1.60	25.08	31.39	25.97	1.63	22.89	29.30
PMA	Phase 2	Dec 2020-Mar 2021	4,265	35.24	1.89	31.63	39.06	31.89	1.75	28.55	35.44	21.29	1.32	18.81	24.01

PMA Burkina Faso collects information on knowledge, practice, and coverage of family planning services in 167 enumeration areas selected using a multi-stage stratified cluster design with urban-rural strata. The results are representative at the national level and in the urban/rural areas. Results from the Centre region are representative of the urban environment only and results from the Hauts-Bassins region are representative of the region and the urban/rural areas. Phase 2 data were collected between December 2020 and March 2021 from 5,522 households (97.9% response rate), 6,388 women 15-49 years old (93.4% response rate), 241 service delivery points (97.6% response rate), and 966 client exit interviews. For sampling information and full datasets, visit www.pmadata.org/countries/burkina-faso.

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 Burkina Faso is led by l'Institut Supérieur des Sciences de la Population at l'Université Joseph Ki-Zerbo, Ouagadougou, Burkina Faso. 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.