

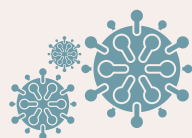
# PMA NIGERIA (LAGOS)

COVID-19 results from recent surveys

December 2020 - February 2021



## OVERALL KEY FINDINGS



Fear of contracting COVID-19 has reduced among women of reproductive age.



Fear of contracting COVID-19 was a major reason why women reported difficulty accessing a health facility. However, 9 in 10 women who wanted to visit a health facility succeeded in doing so.

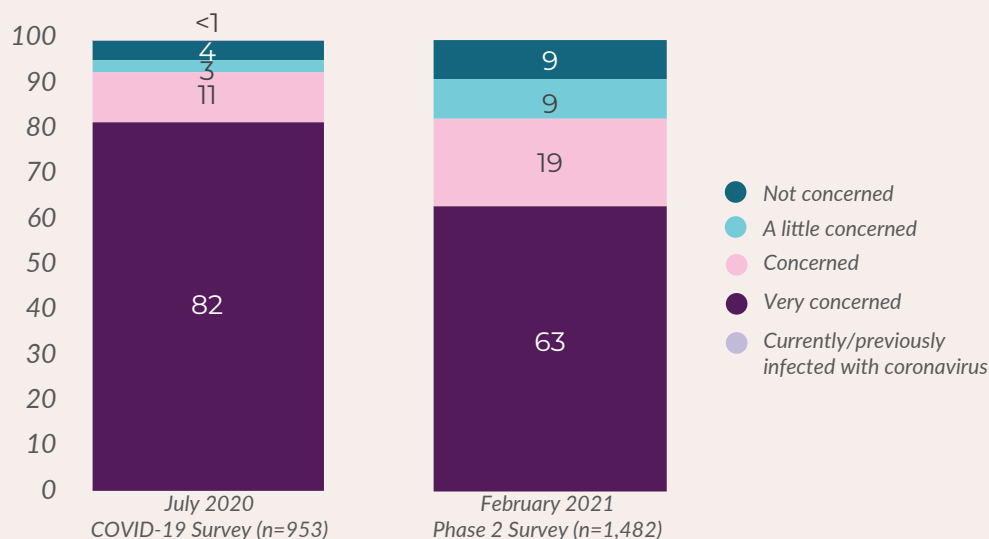


The economic impact of COVID-19 is easing and women are now reporting less food insecurity and less economic reliance on their partners.

## SECTION 1: CONCERN ABOUT COVID-19

### CONCERN ABOUT GETTING COVID-19

Percentage of women who are concerned about getting COVID-19



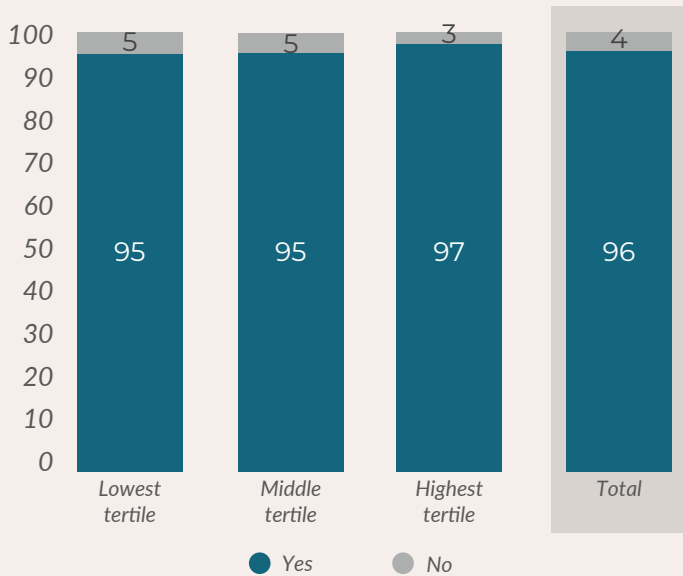
### KEY FINDINGS FOR SECTION 1: CONCERN ABOUT COVID-19

- 8 in 10 women were very concerned about getting COVID-19 in July 2020, decreasing to 6 in 10 women by February 2021.
- In July 2020, 4% of women were not concerned about getting COVID-19, by February 2021, this percentage increased to 9%.

## SECTION 2: ECONOMIC IMPACT OF COVID-19

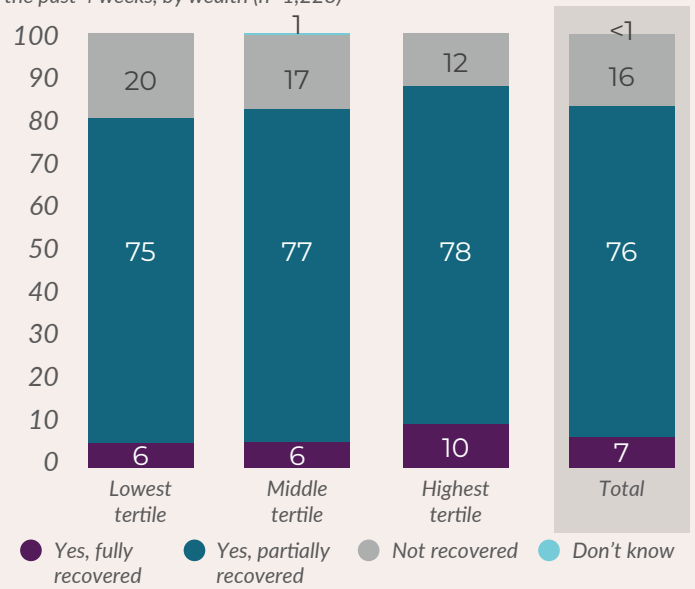
### HOUSEHOLD INCOME LOSS

Percentage of women whose household experienced loss of income due to COVID-19 in the last 12 months, by wealth (n=1,287)



### HOUSEHOLD INCOME RECOVERY

Among women living in households that reported complete or partial income loss in the past 12 months, the percent distribution of recovery status within the past 4 weeks, by wealth (n=1,228)



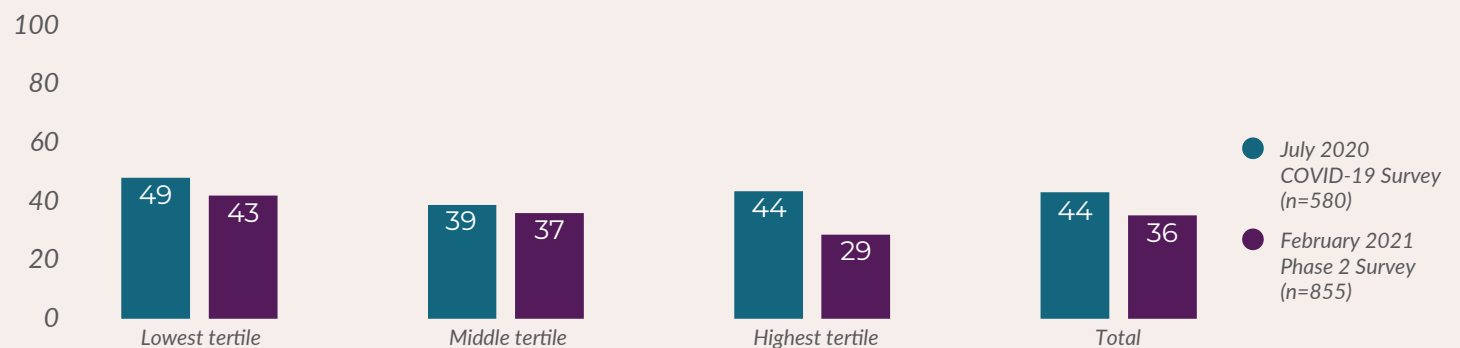
### FOOD INSECURITY

Percentage of women who reported that at least one member of their household went without food recently, by wealth



### ECONOMIC RELIANCE

Percentage of currently married women who are economically reliant on their husband, by wealth



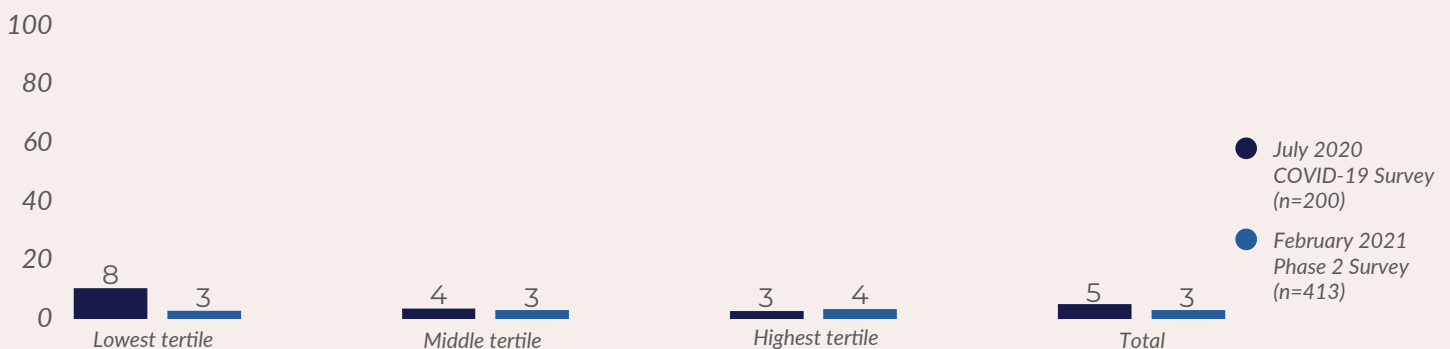
## KEY FINDINGS FOR SECTION 2: ECONOMIC IMPACT OF COVID-19

- Over 9 in 10 women reported that their households experienced a loss in income due to COVID-19 in the 12 months preceding the survey.
- Recent food insecurity has reduced across all three wealth tertiles, comparing the July 2020 and February 2021 surveys, with the poorest women's households showing the greatest improvement.
- 4 in 10 currently married women said they were economically reliant on their partners in the July 2020 survey, but this had decreased by the February 2021 survey.

## SECTION 3: BARRIERS TO ACCESSING HEALTH SERVICES

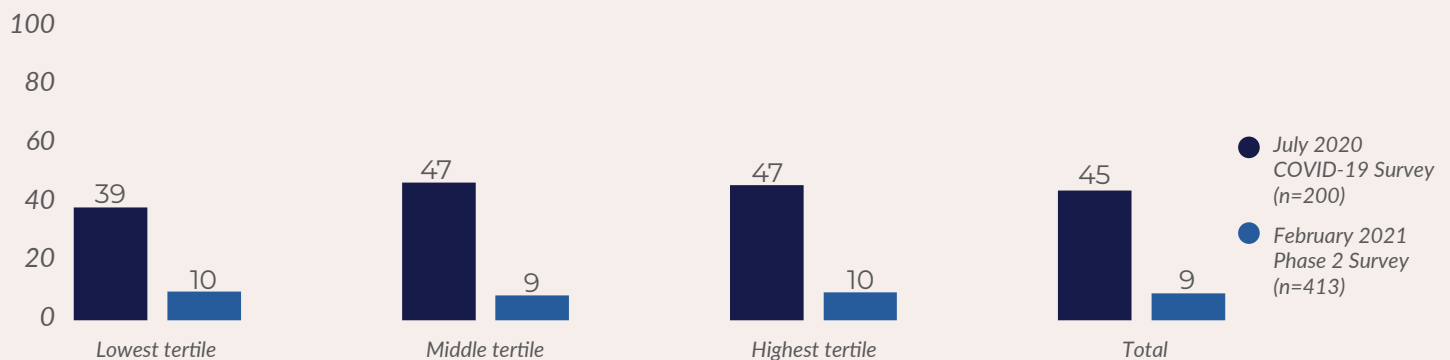
### WANT TO VISIT HEALTH FACILITY

Among women who wanted to visit a health facility, the percentage that went for FP, by wealth



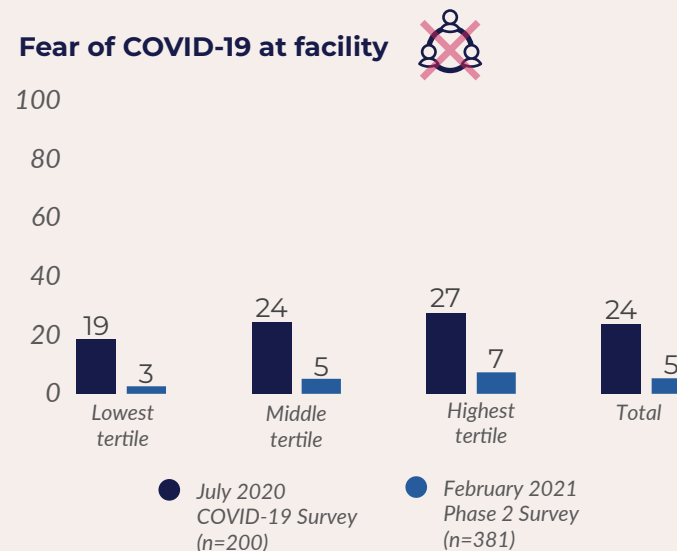
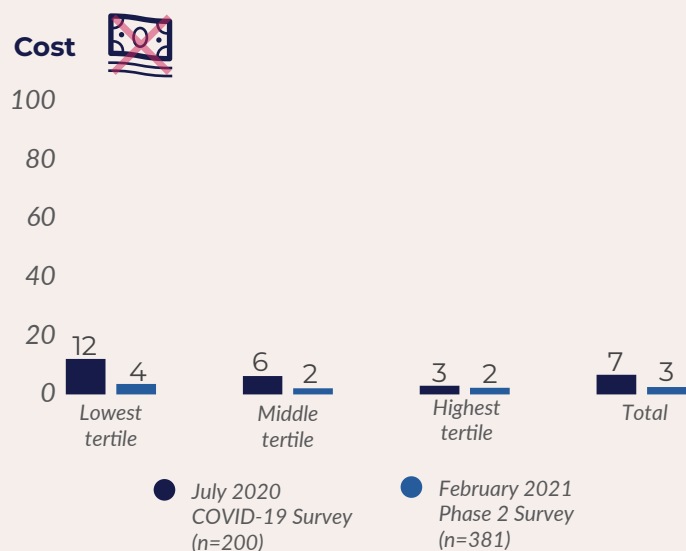
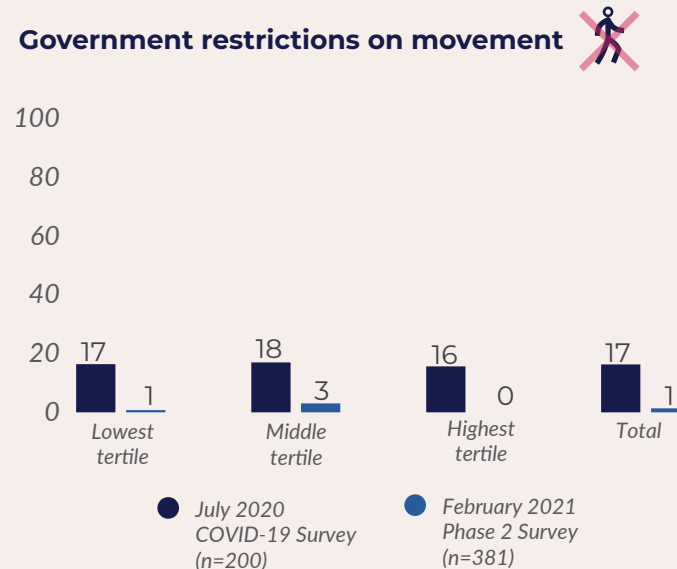
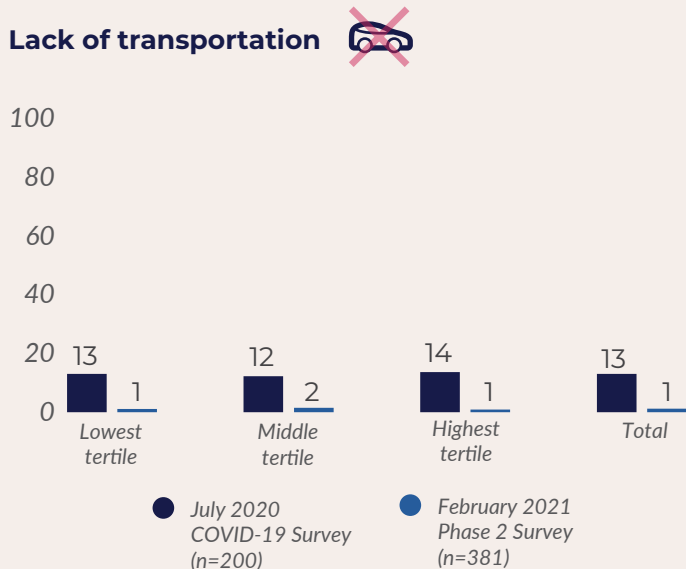
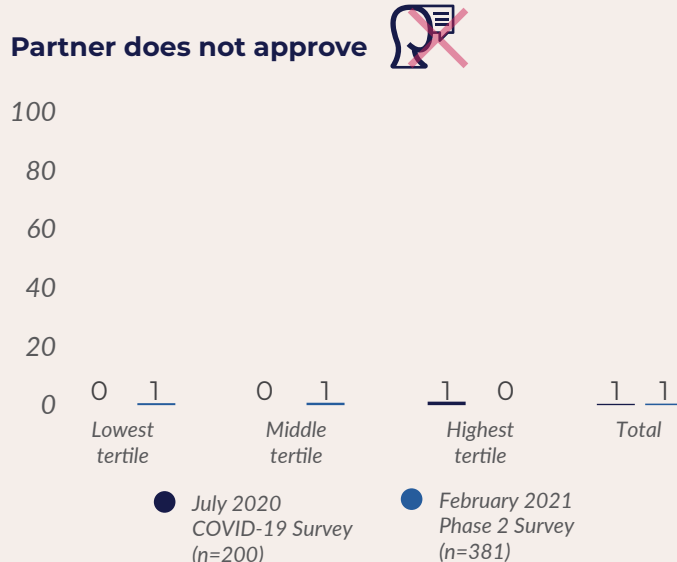
### DIFFICULTY ACCESSING HEALTH FACILITY

Among women who wanted to visit a health facility recently, the percentage who reported any difficulties in access, by wealth



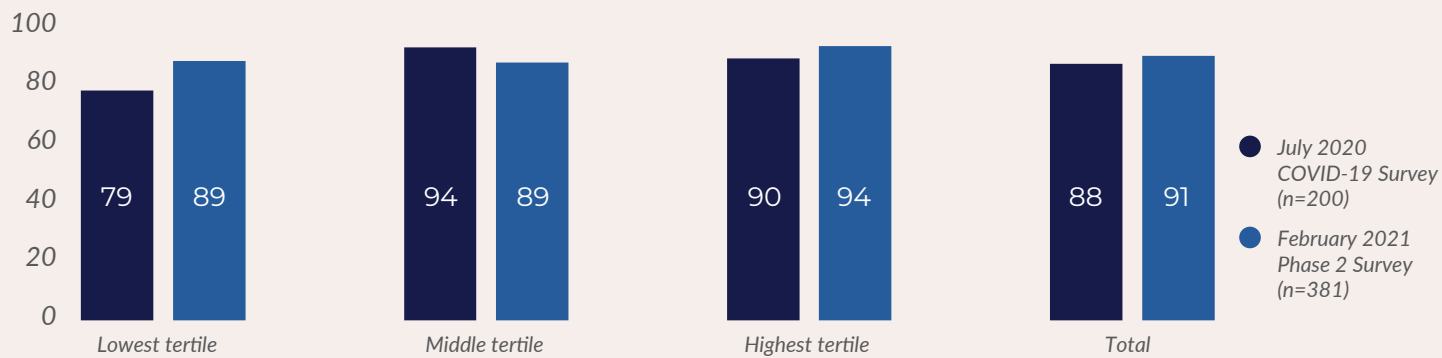
# REASONS FOR DIFFICULTY ACCESSING HEALTH FACILITY

Among women who wanted to visit a health facility recently and reported any difficulty in access, the percent who reported the following difficulties (multiple responses allowed), by wealth



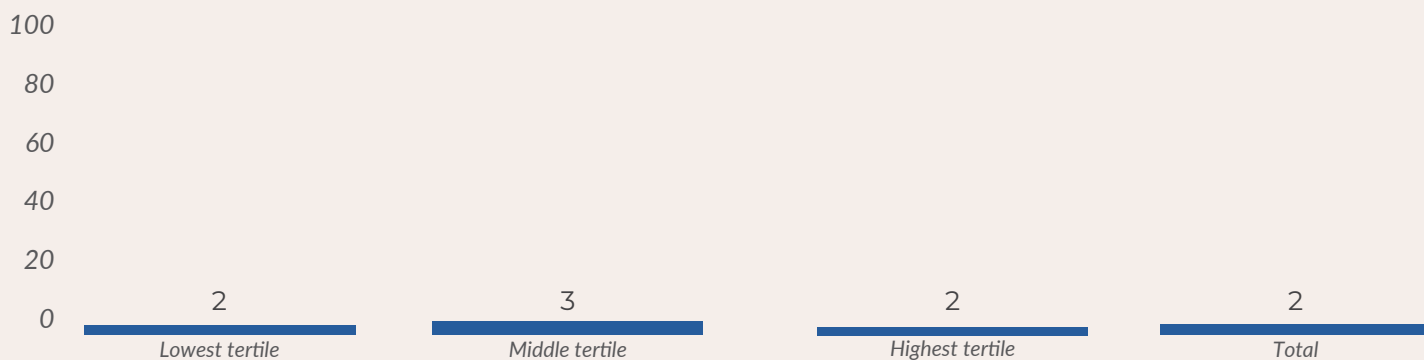
## SUCCESS IN ACCESSING HEALTH SERVICES

Among women who wanted to visit a health facility recently, the percentage who were able to access those services, by wealth



## FP INTERRUPTION DUE TO COVID-19

The percentage of women who stopped or interrupted their contraceptive method use due to the COVID-19 restrictions, by wealth (n=391)



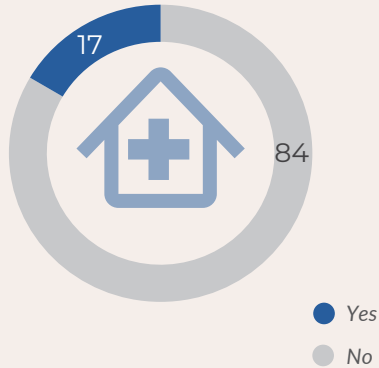
## KEY FINDINGS FOR SECTION 3: BARRIERS TO ACCESSING HEALTH SERVICES

- Among those who wanted to visit a health facility, 45% had difficulty accessing one in July 2020, while 9% reported difficulty in February 2021.
- Women in the lowest wealth tertile were less likely than wealthier women to report difficulty in accessing a health facility in the earlier survey.
- 9 in 10 women who wanted to visit a health facility succeeded in doing so.

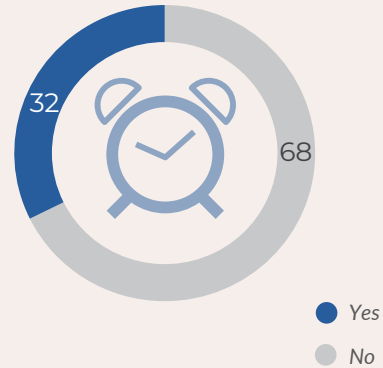
## SECTION 4: COVID-19 IMPACT ON SERVICE DELIVERY POINTS

### IMPACT ON HEALTH AND FP SERVICES DURING COVID-19 RESTRICTIONS

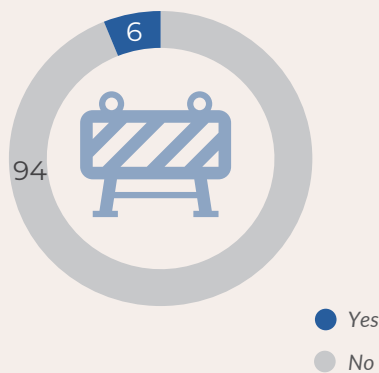
Percentage of facilities that closed during the COVID-19 restrictions when they would have otherwise been open (n=127)



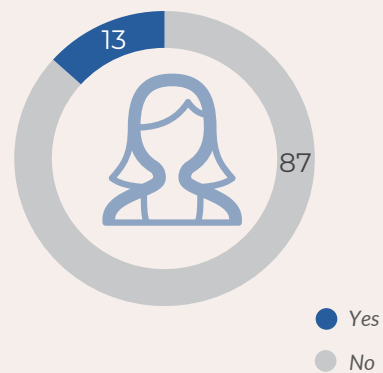
Percentage of facilities reporting reduction in hours of operations during the COVID-19 restrictions (n=127)



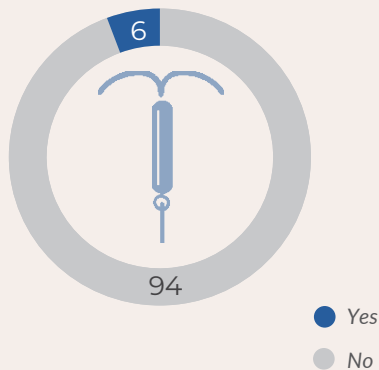
Among facilities offering FP, percentage reporting a suspension of FP services during COVID-19 restrictions (n=114)



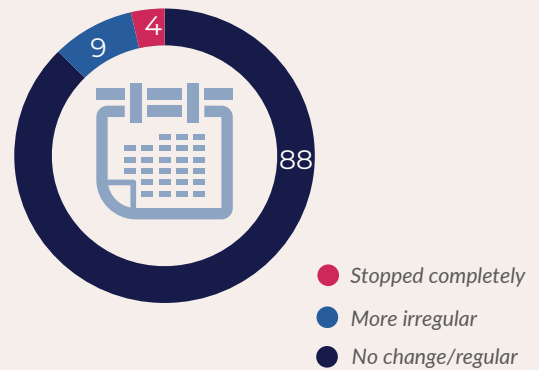
Among facilities offering FP, percentage where personnel were reassigned from FP services to COVID-19 related duties during the COVID-19 restrictions (n=113)



Among facilities offering FP, percentage reporting a period of time when provider-administered methods were not offered during COVID-19 restrictions (n=88)



Among facilities offering FP services, the percentage distribution of FP method supplies during the COVID-19 restrictions (n=112)



## KEY FINDINGS FOR SECTION 4: COVID-19 IMPACT ON SERVICE DELIVERY POINTS

- 17% of facilities closed down, while 32% reduced their hours of operation during the COVID-19 restrictions.
- Among facilities offering FP, 6% suspended their FP services while 13% had FP staff reassigned to COVID-19 related duties during the COVID-19 restrictions.
- Among facilities offering FP, 6% reported a disruption in the offer of provider-administered methods during COVID-19 restrictions, while 4% reported that FP method supplies stopped completely during the COVID-19 restrictions.

PMA Nigeria (Lagos) collects information on knowledge, practice, and coverage of family planning services in 52 enumeration areas selected using a multi-stage stratified cluster design. The results are representative at the state-level. Phase 2 data were collected between December 2020 and February 2021 from 1597 households (93.3% response rate), 1482 females age 15-49 (95.5% response rate), 127 facilities (90.7% completion rate), and 561 client exit interviews. For sampling information and full data sets, visit [www.pmadata.org/countries/nigeria](http://www.pmadata.org/countries/nigeria)

The COVID-19 phone survey was conducted among females age 15-49 in July 2020 who consented to a phone follow-up and owned or had access to a phone at the time of the PMA Phase 1 survey (conducted December 2019 and January 2020). Of the 1174 (82.6%) eligible respondents, 15.6% were not reached. Of those reached, 96.6% completed the survey for a response rate of 81.5% among contacted women.

In the COVID-19 phone survey, women were asked about events since the COVID-19 restrictions were implemented. For the Phase 2 survey, women were asked about events in the past 4 weeks. This brief displays the results from both surveys.

Percentages presented in this brief have been rounded and may not add up to 100%.

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 Nigeria is led by the Centre for Research, Evaluation Resources and Development (CRERD). 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.

Link to questionnaire and PMA COVID-19 website: <https://www.pmadata.org/technical-areas/covid-19>