

KEY FAMILY PLANNING INDICATORS

Select Family Planning Indicators Across Recent Surveys (Married and All Women, Age 15-49)				
	NDHS 2013, Kano		PMA2016/Kano-R1	
	AII Women	Married Women	AII Women	Married Women
Contraceptive Prevalence Rate (CPR)				
All Methods CPR	0.5	0.6	5.6	7.0
Modern Method Use mCPR	0.4	0.5	4.8	6.0
Long Acting CPR	0.1	0.2	1.1	1.5
Total Unmet Need*	8.8	11.1	30.3	38.3
For Limiting	1.3	1.7	4.7	5.9
For Spacing	7.5	9.4	25.6	32.3
Total Demand	9.3	11.7	35.9	45.3
Demand Satisfied by Modern Method	4.3	4.4	13.5	13.4

Fertility Indicators (All Women)			
	NDHS 2013 Kano	PMA2016/ Kano	
Recent Births Unintended* (%)	1.2	45.3	
Wanted Later	0.6	39.5	
Wanted No More	0.6	5.8	

 $^{^{\}star}$ Indicator measurement based on different questions posed in the DHS and PMA2020

Current Use and Unmet Need Among Married Women of Reproductive Age, by Wealth Quintile, PMA2016/Kano-R3





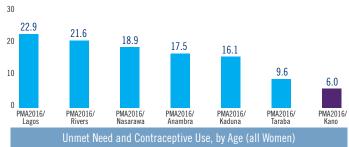
BILL & MELINDA GATES INSTITUTE for POPULATION and REPRODUCTIVE HEALTH

PMA2016/KANO-R1 PERFORMANCE MONITORING & 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

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 university and research organizations in 10 countries, deploying a cadre of female resident enumerators trained in mobile-assisted data collection. PMA2020/Nigeria was carried out in Lagos and Kaduna states in 2014 and 2015, and in seven states in 2016 for round 3 (Anambra, Kaduna, Kano, Lagos, Nasarawa, Rivers and Taraba). PMA2020/Nigeria is led by the Centre for Research, Evaluation Resources and Development (CRERD) and Bayero University Kano (BUK). The survey is endorsed and supported by the Federal Ministry of Health, the National Population Commission, the National Bureau of Statistics, and the State Ministries of Health. 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.

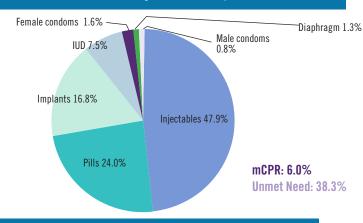
For more information on PMA2020 please visit http://www.pma2020.org

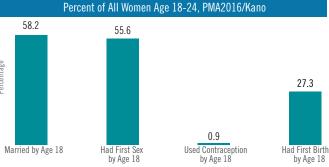
Modern Contraceptive Prevalence Rate (Married Women, Age 15-49)



80 70 60 50 Unmet Need 40 Traditional 30 Methods 20 Short-acting Methods 10 Long-acting 35 40 30

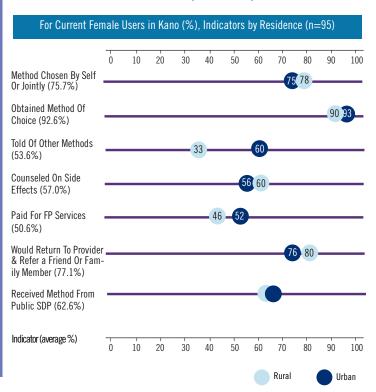
Current Modern Method Mix Among Married Contraceptive Users PMA2016/Kano





PMA2016/KANO-R1

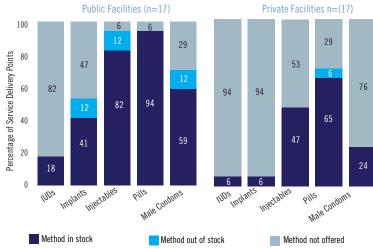
INDICATORS FOR ACCESS, EQUITY, QUALITY AND CHOICE



For Current Female Non-Users in Kano (n=812	2)	
Reasons Mentioned For Non-Use Among All Women Wanting To Delay The Next Birth 2 Or More Years (%)		
Not Married	22.8	
Perceived Not-At-Risk/Lack of Need	47.1	
Method or Health-related Concerns	15.0	
Opposition to Use	22.3	
Lack of Access/Knowledge	3.5	
Other	9.4	

Reproductive Health and Contraceptive Indicators				
	Total	Rural	Urban	
Median Age at First Marriage (25 to 49 years)	16.4	16.0	18.1	
Median Age at First Sex (15 to 49 years)	15.7	15.4	17.1	
Median Age at First Contraceptive Use (15 to 49 years)	25.1	23.4	25.5	
Median Age at First Birth (15 to 49 years)	19.1	18.8	19.8	
Mean No. Of Living Children at First Contraceptive Use	3.5	2.9	3.7	
Women Having First Birth by Age 18 (ages 18-24) (%)	27.3	41.2	9.6	
Received FP Info From Provider in Last 12 Months (ages 15-49 years) (%)	17.3	14.0	21.8	
Exposed to FP Media in Last Few Months (ages 15-49 years) (%)	60.8	47.8	78.6	

Percent of Facilities Offering & Currently In/Out of Stock on Day of the Interview, by Method



Percent of Public Facilities in Kano Offering at Least 3 or at Least 5 Modern Contra- ceptive Methods, by Facility Type			
Facility Type	3 or more methods	5 or more methods	
Hospital (n=5)	80.0	80.0	
Health Center (n=15)	53.3	13.3	
Health Clinic (n=3)	0.0	0.0	
Total	54.2	29.2	

Service Delivery Points in Kano (n= 44; 24 public, 20 private)			
	Public	Private	Total
Among All Service Delivery Points:			
Offering Family Planning (%)	70.8	85.0	77.3
With Mobile Teams Visiting Facility In Last 12 Months (%)	25.0	0.0	13.6
Supporting CHWs From This Service Delivery Point (%)	16.7	0.0	9.1
Among Service Delivery Points Offering Family Planning Services:			
Average Number Of Days Per Week Family Planning Is Offered	4.5	5.6	5.0
Offering Female Sterilization (%)	0.0	0.0	0.0
Offering Family Planning Counseling/Services To Adolescents (%)	11.8	0.0	5.9
Charging Fees For Family Planning Services (%)	11.8	88.2	50.0
Percent Integrating Family Planning Into Their:			
Maternal Health Services (among all offering maternal health services)	93.3	100.0	93.8
HIV Services (among all offering HIV services)	100.0	0.0	100.0
Post-Abortion Services (among all offering post-abortion services)	90.9	0.0	90.9

SAMPLE DESIGN

The PMA2016/Kano-R1 survey used a two-stage cluster design with urban-rural as strata. A sample of 36 enumeration areas (EAs) was drawn from the National Population Commission's master sampling frame. In each EA households and private health facilities were listed and mapped, with 35 households randomly selected. Households were surveyed and occupants enumerated. All eligible females age 15 to 49 were contacted and consented for interviews. The final sample included 1,243 households (99.2% response rate), 1,690 females (99.0% response rate) and 44 health facilities (95.7% response rate). Data collection was conducted between May and June 2016.