

### **KEY FAMILY PLANNING INDICATORS**

All Women (n=6.012) and Married Women (n=4.487) Age 15-49 Round 2 Round 3 Feb-April 2017 Aug-Oct 2017 Contraceptive Prevalence Rate (CPR) (%) All Methods CPR 45.6 59.0 46.4 60.7 Modern Methods Use 42.9 55.4 43.0 56.2 29.8 Long Acting/Permanent CPR 31.3 40.1 38.6 **Total Unmet Need** 9.6 12.8 10.2 13.2

5.0

5.2

55.9

76.8

6.4

6.8

72.3

76.7

4.4

5.2

56.0

76.8

5.9

7.0

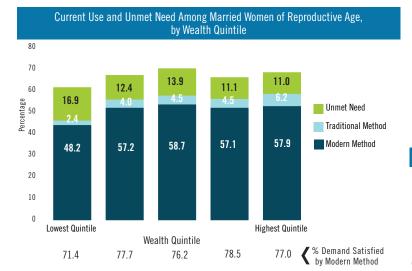
73.5

76.4

40

Select Family Planning Indicators Across Recent Surveys

Fertility Indicate	ors (All Women)	
	Round 2 Feb-April 2017	Round 3 Aug-Oct 2017
Last Birth Unintended (%)	12.2	14.0
Wanted Later	10.5	12.8
Wanted No More	1.7	1.2



# JOHNS HOPKINS BLOOMBERG SCHOOL of PUBLIC HEALTH

For Limiting

For Spacing

Demand Satisfied by Modern Method (%)

**Total Demand** 

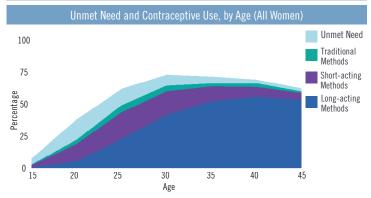


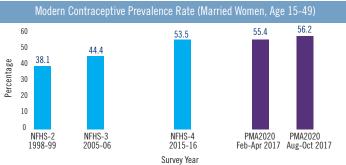
## PMA2020/RAJASTHAN, INDIA

AUGUST-OCTOBER 2017 (ROUND 3)

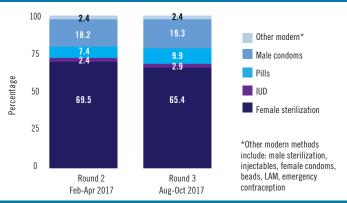
Performance Monitoring and Accountability 2020 (PMA2020) uses innovative mobile technology to support low-cost, rapid-turnaround surveys to monitor key indicators for family planning. The project is implemented by local universities and research organizations in 11 countries, deploying a cadre of female resident enumerators trained in mobile-assisted data collection. PMA2020/ India is implemented by the Indian Institute of Health Management Research (IIHMR) University in Jaipur, with endorsement and technical support provided by the International Institute for Population Sciences and the Ministry of Health and Family Welfare. 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

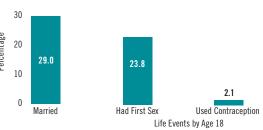




#### Current Modern Method Mix Among Married Contraceptive Users (n=2,498)

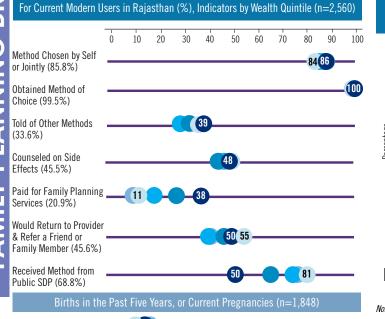


Percent of All Women Age 18-24 (n=1,727)



## PMA2020/RAJASTHAN, INDIA

### INDICATORS FOR ACCESS, EQUITY, QUALITY AND CHOICE



Last Birth Unintended (14.0%)	_	<b>- 10</b> 1	5								_
Indicator (average %) Q1: Poorest quintile Q5: Wealthiest quintile	Ó	10	20	30	40	50	60	70 <b>Q1</b>	80	90	100

#### For Current Female Non-Users in Rajasthan (n=2,068)

Reasons Mentioned for Non-Use Among All Women Wanting to Delay the Next Birth Two or More Years (%)



**53.1%** Not Married



35.6% Perceived Not-At-Risk/Lack of Need



9.8% Method or Healthrelated Concerns





1.3% Lack of Access/ Knowledge

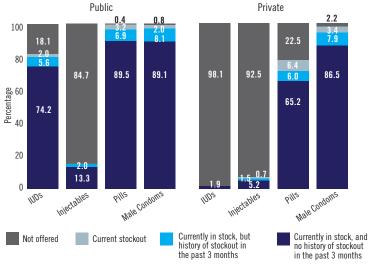


\*Respondents were able to select more than one answer

#### Reproductive Health and Contraceptive Indicators First Urban Marriage 18.5 19.2 21.7 25.0 MEDIAN AGE 24.6 18.0 18.5 21.4 Rural First First Sex Marriage First Women **Contraceptive Use** First sex, first contraceptive use: 15-49 years First marriage, first birth: 25-49 years Total Rural Urban

Mean No. of Living Children at First Contraceptive Use (15-49 years)	2.4	2.5	2.2
Women Having First Birth by Age 18 (%) (18-24 years)	8.5	9.4	6.8
Received FP Info. From Provider in Last 12 Months (%) (15-49 years)	27.7	30.7	22.2
Exposed to FP Media in Last Few Months (%) (15-49 years)	65.4	56.6	81.5

### Percent of Facilities Offering Family Planning with Methods in Stock on Day of Interview (n=515, 248 public, 267 private)



Note: SDP estimates are weighted for this survey

#### Percent of All Public Facilities With At Least 3 or 5 Modern Contraceptive Methods, by Facility Type (n=252)

Facility Type	3 or more methods	5 or more methods
Hospital (n=34)	100.0	97.1
Community Health Center (CHC) (n=44)	97.7	68.2
Primary Health Center (PHC) (n=90)	96.7	23.3
Sub-center (n=75)	70.7	5.3
Total	87.7	35.3

<sup>\*\*</sup>Data from facility types with sample size less than 10 were calculated, but are not presented in this brief.

Service Delivery Points (n=603; 319 Public, 284 Private)						
	Public	Private	Total			
Among All Service Delivery Points:						
Offering Family Planning (%)	98.4	76.9	88.3			
With Mobile Teams Visiting Facility in Last 6 Months (%)	27.0	1.5	15.0			
Supporting Community Health Workers from this SDP (%)	86.1	0.3	45.8			
Among Service Delivery Points Offering Family Planning Services:						
Average Number of Days Per Week Family Planning is Offered	6.7	6.7	6.7			
Offering Female Sterilization (%)	33.9	1.8	20.7			
Offering Family Planning Counseling/Services to Adolescents (%)	40.7	25.2	34.4			
Charging General User Fees for Family Planning Services** (%)	23.4	13.2	19.2			
Availability of Instruments or Supplies for IUDs+	95.6		95.6			

<sup>\*\*</sup>Question wording was changed from Round 1

#### SAMPLE DESIGN

The PMA2017/Rajasthan Round 3 survey used a two-stage cluster design. A sample of 147 enumeration areas (EAs) was drawn by the International Institute for Population Sciences from a 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 completed sample included 4,893 households (98.3% response rate), 6,012 females (98.7% response rate) and 603 health service delivery points (91.5% response rate). Private service delivery points (SDPs) in contiguous geographic areas to the EA were included in Rounds 2 and 3 to increase the sample size of private SDPs. Weights were generated to account for oversampling. All estimates are weighted. Data collection was conducted between August to October 2017.





<sup>\*</sup>Among SDPs that provide IUDs; includes: Sponge-holding forceps, Speculums (large and medium), and