

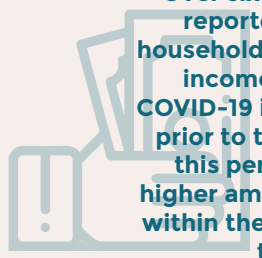
PMA NIGER

COVID-19 results from recent surveys


May 2022



OVERALL KEY FINDINGS



Over six in ten women reported that their households suffered some income loss due to COVID-19 in the 12 months prior to the survey, and this percentage was higher among households within the median wealth tertile.



Only 1% of women reported that they discontinued their contraceptive use due to COVID-19 restrictions.

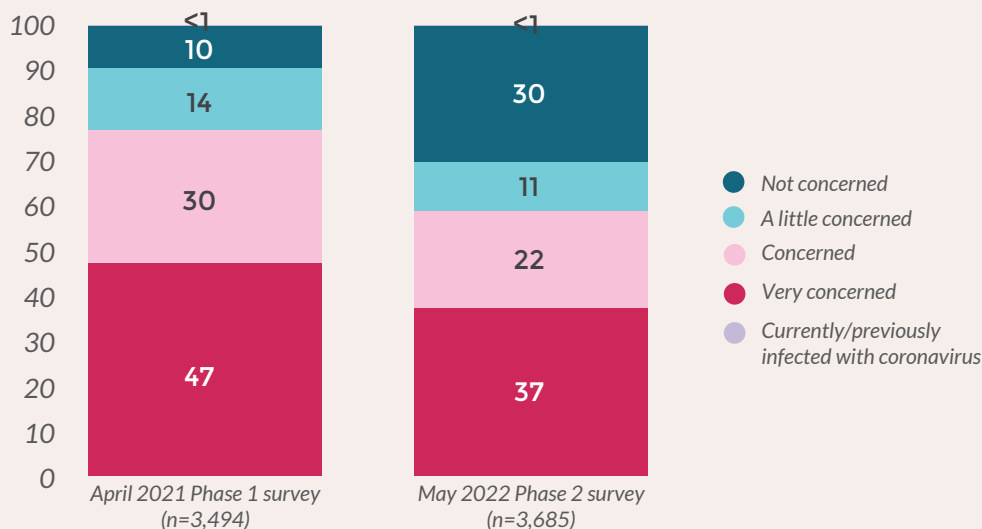


Only 2% of health facilities reported being closed during COVID-19 restrictions, and nearly two in ten (17%) of health facilities reported reduced working hours during this time.

SECTION 1: CONCERN ABOUT COVID-19

CONCERN ABOUT GETTING COVID-19

Percentage of women who are concerned about getting COVID-19



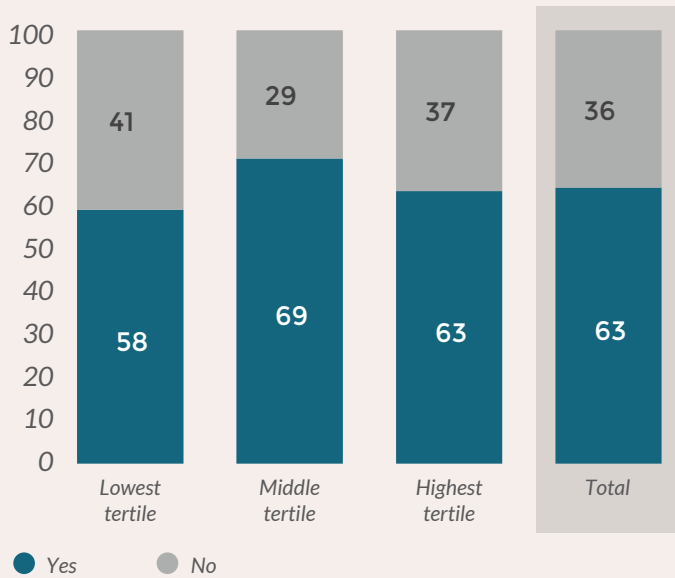
KEY FINDINGS FOR SECTION 1: CONCERN ABOUT COVID-19

- Nearly four in ten women reported that they were very concerned about getting a COVID-19 infection at Phase 2.
- The proportion of women who reported being very concerned about getting a COVID-19 infection decreased by ten percentage points between Phase 1 and Phase 2.
- The proportion of women who reported that they were not concerned about getting a COVID-19 infection increased between Phase 1 (10%) and Phase 2 (30%).

SECTION 2: ECONOMIC IMPACT OF COVID-19

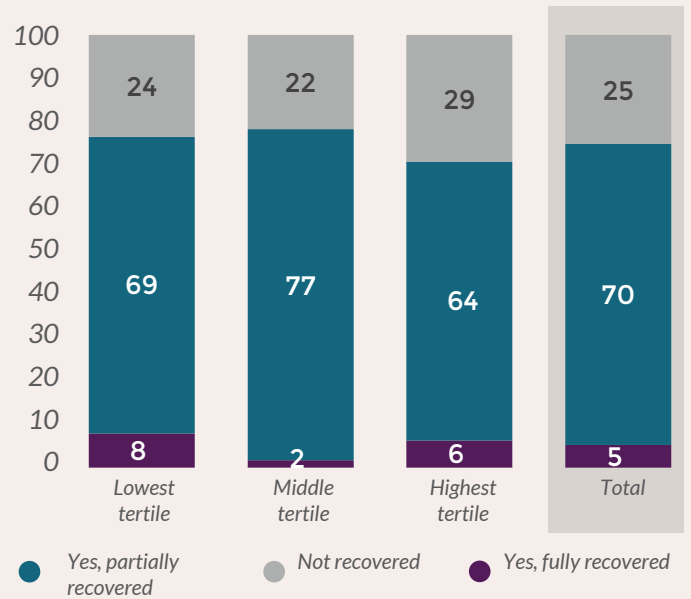
HOUSEHOLD INCOME LOSS

Percentage of women whose household experienced loss of income due to COVID-19 in the last 12 months, by wealth (n= 1,086)



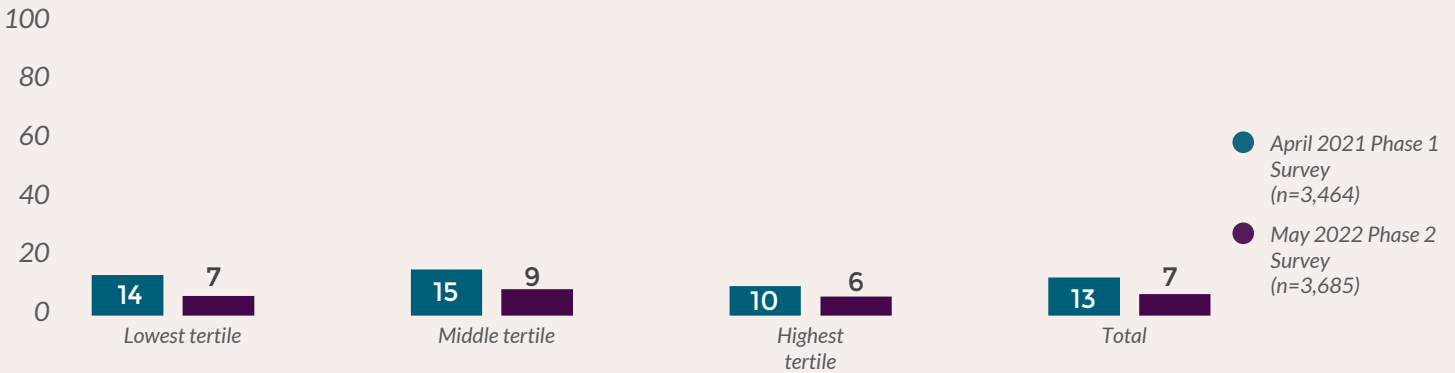
HOUSEHOLD INCOME RECOVERY

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=744)



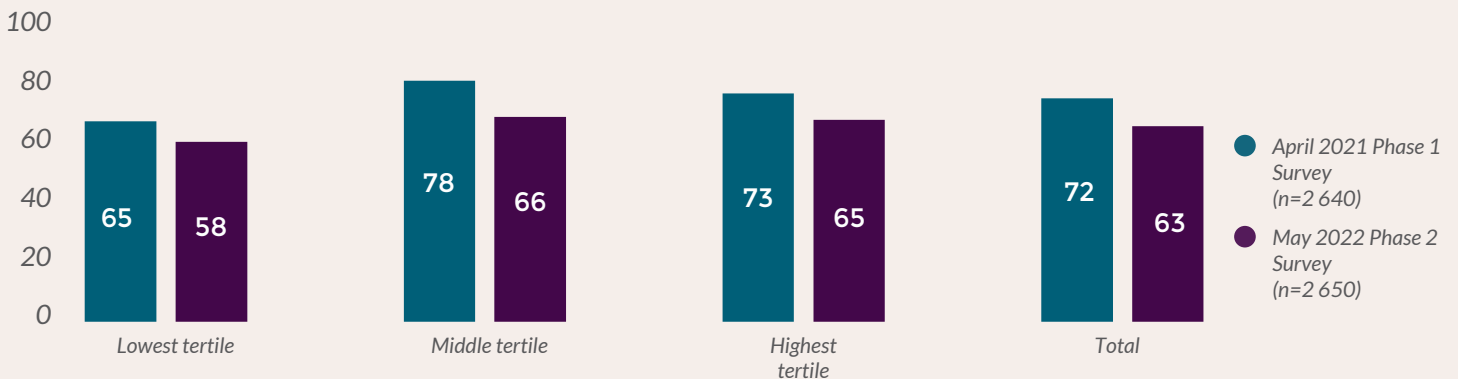
FOOD INSECURITY

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



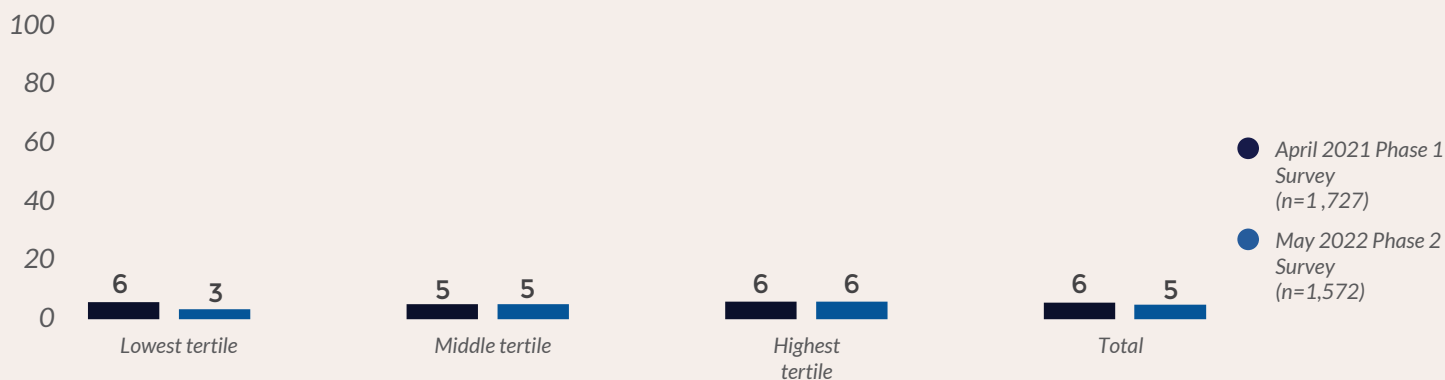
KEY FINDINGS FOR SECTION 2: ECONOMIC IMPACT OF COVID-19

- Over six and ten women reported that their households suffered some income loss due to COVID-19 in the 12 months prior to the survey, and this percentage was higher among households within the median wealth tertile.
- Among households who suffered partial or total income loss in the 12 months prior to the survey, three in four women reported that this loss was partially or totally recovered in the four weeks prior to the survey.
- The proportion of women who reported that at least one member of their household slept a whole day and night without eating decreased by 6 percentage points, from 13% to 7% between April 2021 and May 2022.

SECTION 3: BARRIERS TO ACCESSING HEALTH SERVICES

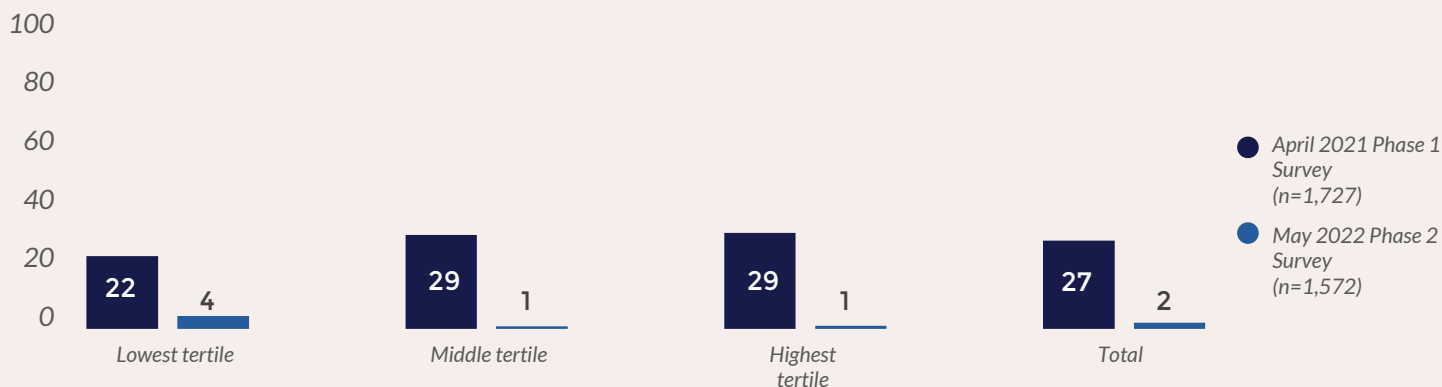
WANT TO VISIT HEALTH FACILITY

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



DIFFICULTY ACCESSING HEALTH FACILITY

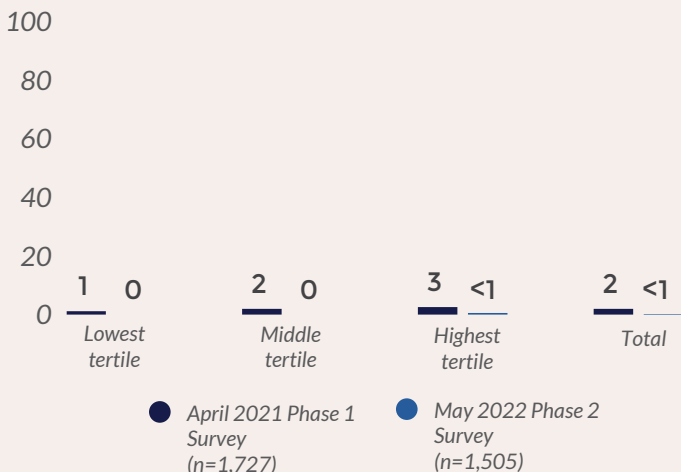
Among women who wanted to visit a health facility recently, the percentage who reported any difficulties in access, by wealth



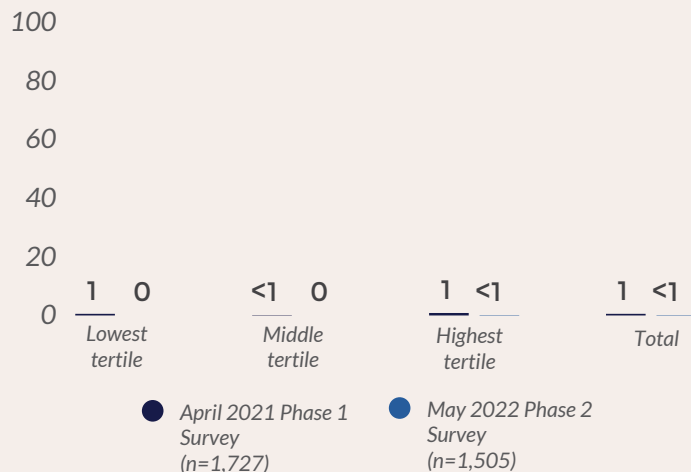
REASONS FOR DIFFICULTY ACCESSING HEALTH FACILITY

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

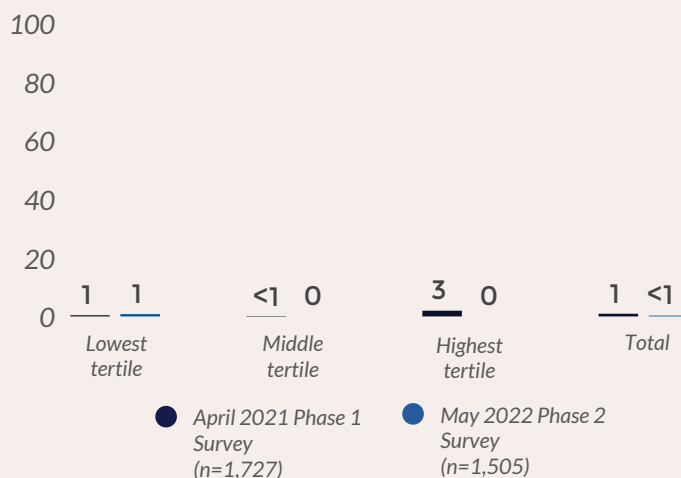
Facility closed



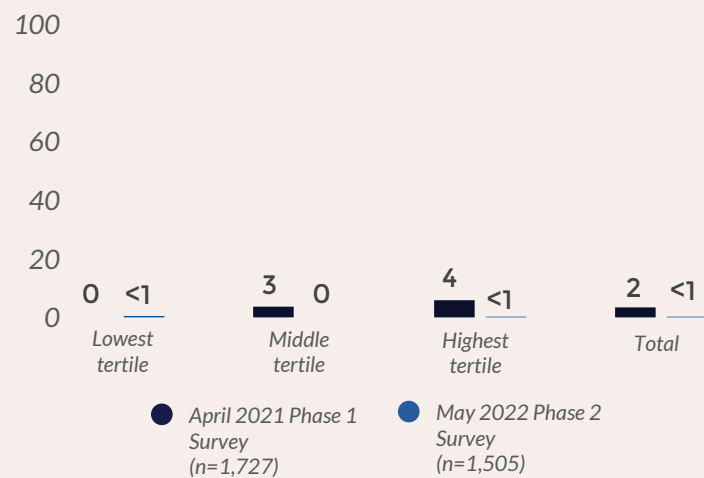
Partner does not approve



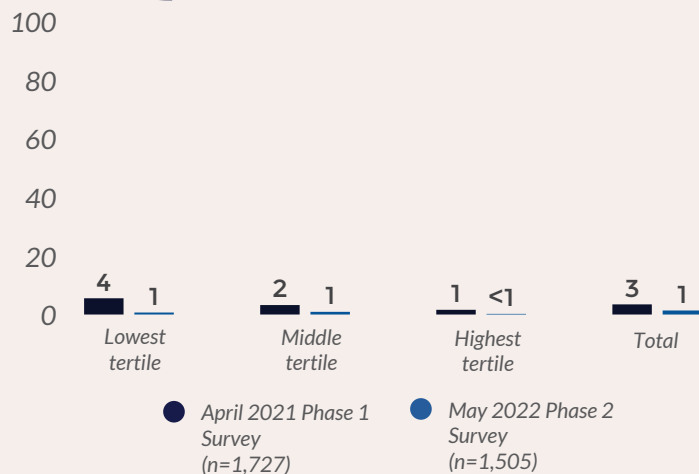
Lack of transportation



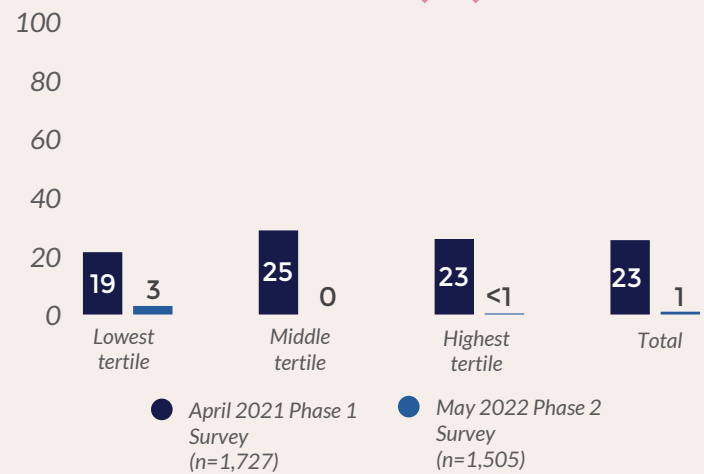
Government restrictions on movement



Cost

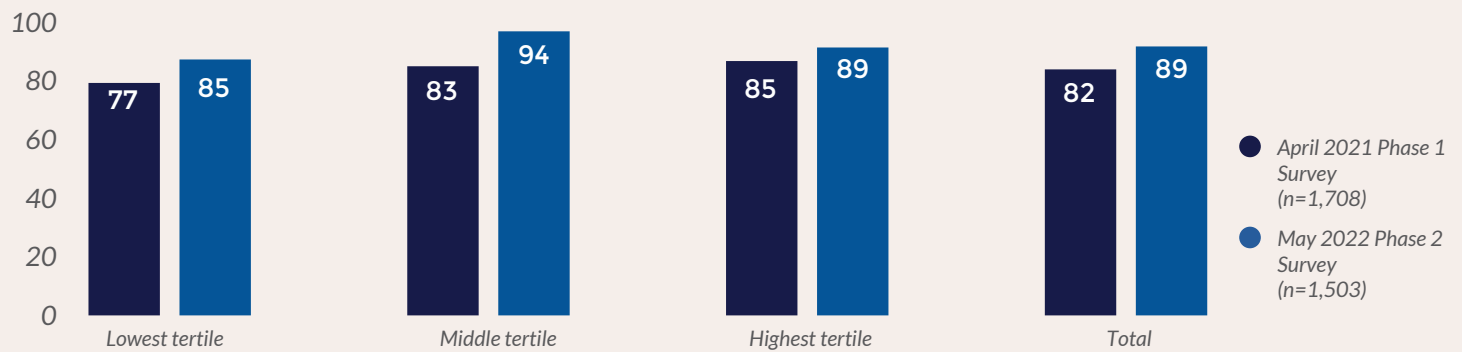


Fear of COVID-19 at facility



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 (May 2022 Phase 2 Survey; n=581)



KEY FINDINGS FOR SECTION 3: FAMILY PLANNING AND HEALTH SERVICE ACCESS BARRIERS

- Among women who recently sought care from a health facility, the proportion who reported that they faced challenges in accessing care decreased from 27% to 2% between Phase 1 and Phase 2.
- Among women who recently sought care from a health facility and who faced challenges to access care, the proportion who mentioned being concerned about getting a COVID-19 infection at the health facility strongly decreased from 23% at Phase 1 to only 1% at Phase 2.
- Only 1% of women reported that they discontinued their contraceptive use due to COVID-19 restrictions in 2022.

IMPACT ON HEALTH AND FP SERVICES DURING COVID-19 RESTRICTIONS

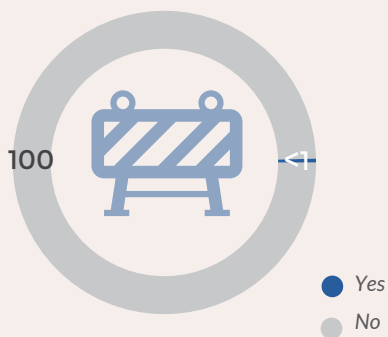
Percentage of facilities that closed during the COVID-19 restrictions when they would have otherwise been open (n=286)



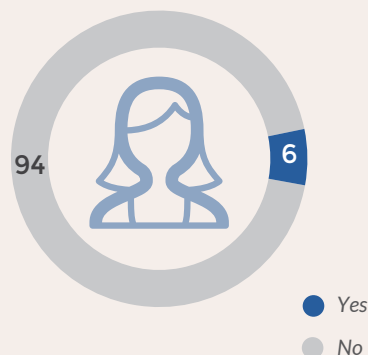
Percentage of facilities reporting reduction in hours of operations during the COVID-19 restrictions (n=285)



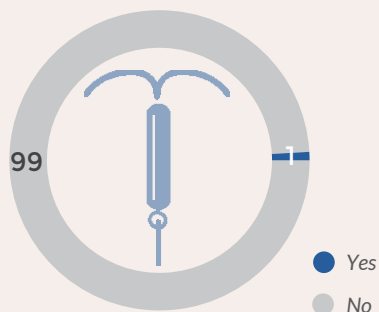
Among facilities offering FP, percentage reporting a suspension of FP services during COVID-19 restrictions (n=245)



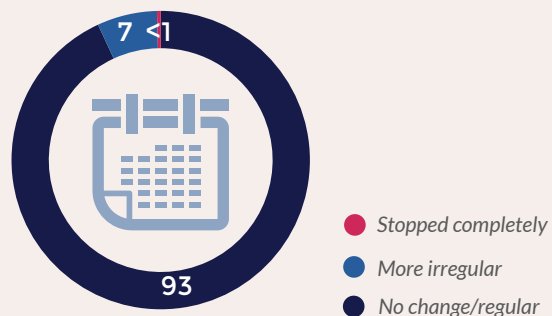
Among facilities offering FP, percentage where personnel were reassigned from FP services to COVID-19 related duties during the COVID-19 restrictions (n=245)



Among facilities offering FP, percentage reporting a period of time when provider-administered methods were not offered during COVID-19 restrictions (n=227)



Among facilities offering FP services, the percentage with regular or irregular method supply during COVID-19 restrictions (n=245)



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

- Only 2% of health facilities reported being closed during COVID-19 restrictions, and nearly two in ten health facilities (17%) reported reduced working hours during this time.
- Virtually all health facilities (<1%) providing family planning (FP) services reported no FP service interruption during COVID-19 restrictions.
- Only 6% of health facilities providing family planning (FP) services reported that members of their FP staff were assigned other tasks related to COVID-19 during restrictions related to the pandemic.

PMA Niger collects information on knowledge, use, and coverage of family planning services in 103 enumeration areas using a multi-stage stratified cluster design in urban and rural areas. The results are nationally representative. Data were collected in 8 regions for PMA Phases 1 and 2. Phase 2 data were collected between January and May 2022 from 3,428 households (98.9% response rate), 3,696 women aged 15-49 (96.3% response rate), and 288 health delivery sites (97.6% response rate). For sampling information and complete data sets, visit www.pmadata.org/countries/niger.

Phase 1 data were collected between November and December 2019 from 3,515 households (98.8% response rate) and 3,633 women aged 15-49 (95.4% response rate).

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 Niger is led by the l'Institut National de la Statistique du Niger. 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>