

(C) 2015 PMA2020/DRC

Method (%)

KEY FAMILY PLANNING INDICATORS

Selected Family Planning Indicators Across Recent Surveys All Women (n=1.689) and Women in Union (n=1.094), Age 15-49 Nov 2015-Jan 2016 Aug-Sept 2016 Sept-Nov 2017 Married Contraceptive Prevalence Rate All Methods CPR 29.8 32.5 30.0 33.0 29.8 31.9 Modern Methods Use (mCPR) 20.0 21.0 16.6 18.1 16.8 16.9 Long acting/Permanent 2.6 2.7 2.4 3.0 2.8 3.2 CPR Total Unmet Need 26.5 31.9 27.5 33.2 27.9 33.1 For Limiting 9.9 12.2 8.9 10.2 7.9 9.3 For Spacing 16.6 19.7 18.6 23.0 19.9 23.3 **Total Demand** 64.4 57.5 66.1 56.3 57.7 65.0 Demand Satisfied by Modern

Fertility Indicators (All Women, Age 15-49)					
	Nov 2015-Jan 2016	Aug-Sept 2016	Sept-Nov 2017		
Last Birth Unintended (%)	68.8	65.1	62.4		
Wanted Later	54.6	50.8	46.5		
Wanted No More	14.2	14.3	15.9		

32.6

28.9

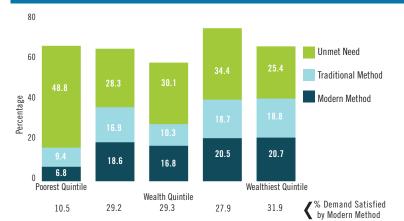
27.4

29.1

26.0

35.5

Current Use and Unmet Need Among Women in Union of Reproductive Age, by Wealth Quintile







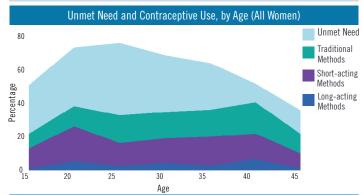


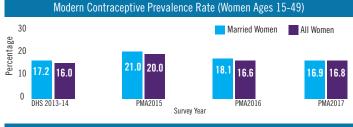
PMA2020/KONGO CENTRAL, DRC

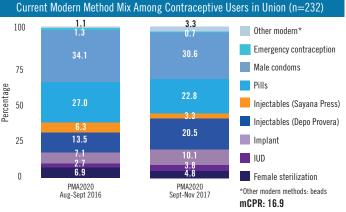
SEPT-NOV 2017 (ROUND 6 IN DRC, ROUND 3 IN KONGO CENTRAL)

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/DRC is led by the University of Kinshasa's School of Public Health, in collaboration with Tulane University School of Public Health and Tropical Medicine. The study is funded by the Bill & Melinda Gates Institute for Population and Reproductive Health at the Johns Hopkins Bloomberg School of Public Health with support from the Bill and Melinda Gates Foundation.

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



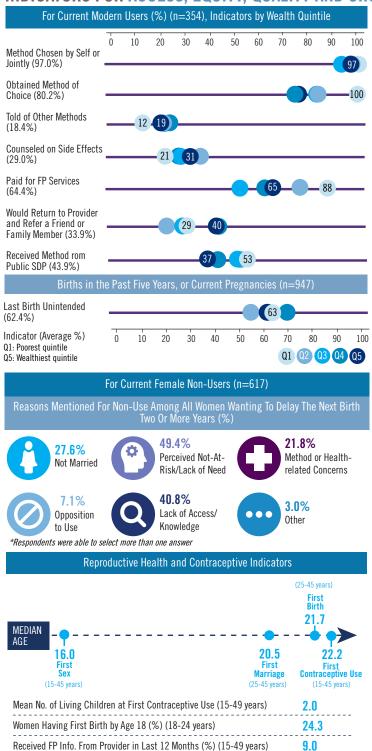


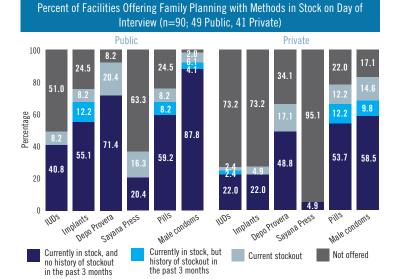


Current Modern Method Mix Among Unmarried Sexually Active Contraceptive Users (n=79) 100 4.2 Other modern* Emergency contraception Male condoms 75 Pills Percentage Injectables (Sayana Press) 50 Injectables (Depo Provera) Implant 25 *Other modern methods include: beads and female condoms PMA2020 PMA2020 Aug-Sept 2016 mCPR: 34.0

PMA2020/KONGO CENTRAL, DRC

INDICATORS FOR ACCESS, EQUITY, QUALITY AND CHOICE





by Facility Type				
Facility Type	3 or more methods	5 or more methods		
Health Center (n=39)	69.2	43.6		
Hospital (n=12)	91.7	58.3		
Total	69.9	44.6		

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

Service Delivery Points (n=116; 56 Public, 60 Private)						
	Public	Private	Total			
Among All Service Delivery Points:						
Offering Family Planning (%)	87.5	68.3	77.6			
With Mobile Teams Visiting Facility In Last 6 Months (%)	10.7	1.7	6.0			
Supporting CHWs From This Service Delivery Point (%)	42.9	8.3	25.0			
Among Service Delivery Points Offering FP Services:						
Average Number Of Days Per Week FP Is Offered	6.0	5.4	5.7			
Offering Female Sterilization (%)	32.7	17.7	25.6			
Offering FP Counseling/Services To Adolescents (%)	59.2	51.2	55.6			
Charging General User Fees For FP Services (%)	6.1	31.7	17.8			
Availability of Instruments or Supplies for Implant Insertion/Removal ⁺ (%)	75.7	63.6	72.9			
Availability of Instruments or Supplies for IUDs++ (%)	62.5	36.4	54.3			

^{*}Among SDPs that provide implants; includes: Clean Gloves, Antiseptic, Sterile Gauze Pad or Cotton Wool, Local Anesthetic, Sealed Implant Pack, Surgical Blade

SAMPLE DESIGN

Exposed to FP Media in Last Few Months (%) (15-49 years)

PMA2020/DRC used a two stage cluster design to draw a representative sample for the province of Kongo Central. A total of 52 enumeration areas (EA) were randomly sampled using probabilities proportional to size. After completing a household listing in each EA, 33 households per EA were randomly selected. All women of reproductive age (ages 15-49) within each selected household were contacted and consented for interviews. Private and public service delivery points (SDP) who provide services to the EA were also interviewed. The final sample included 1,664 households (97.9% response rate), and 1,689 females (98.2% response rate), and 116 SDPs (response rate 98.3%). Data collection for this round in Kongo Central was conducted between September and November 2017.



22.7





^{**}Among SDPs that provide IUDs; includes: Sponge-holding forceps, Speculums (large and medium), and Tenaculum