



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 11 countries, deploying a cadre of female resident enumerators trained in mobile-assisted data collection. PMA2020/Indonesia Round 1 was led by the National Population and Family Planning Board of Indonesia (BKKBN) in collaboration with field implementation teams at three top Indonesian Universities - Universitas Gadjah Mada (UGM), Universitas Hasanuddin (UNHAS) and Universitas Sumatera Utara (USU). Round 2 was led by UGM. 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 from the Bill & Melinda Gates Foundation.

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

KEY FAMILY PLANNING INDICATORS

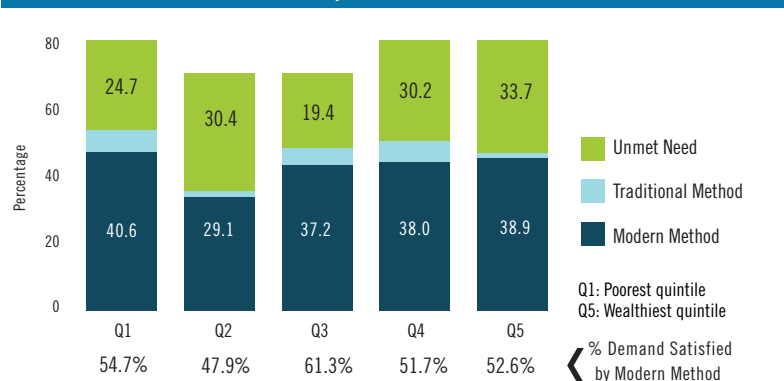
Select Family Planning Indicators Across Recent Surveys
(Women in Union and All Women, Age 15-49)

	PMA2015/ Indonesia-R1		PMA2015 Makassar-R1		PMA2016 Makassar-R2	
	All Women	Women in Union	All Women	Women in Union	All Women	Women in Union
Contraceptive Prevalence Rate (CPR)						
All Methods CPR	47.1	61.1	27.8	43.0	24.7	40.6
Modern Method Use CPR	45.8	59.5	26.1	40.4	22.5	37.0
Long Acting/Permanent CPR	10.3	13.2	5.2	7.8	7.0	10.7
Total Unmet Need	11.2	14.4	16.7	25.4	16.2	27.3
For Limiting	6.1	7.9	8.3	13.0	8.6	14.6
For Spacing	5.1	6.5	8.4	12.4	7.6	12.8
Total Demand	58.2	75.5	44.5	68.4	40.8	68.0
Demand Satisfied by Modern Method (%)	78.7	78.8	58.7	59.0	55.2	54.5

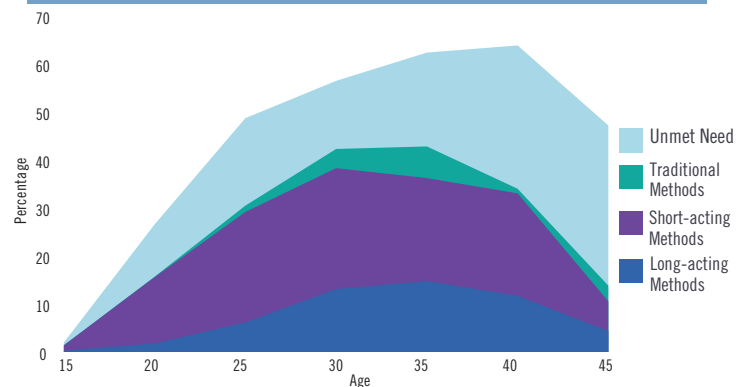
Fertility Indicators (All Women)

	PMA2015 Indonesia-R1	PMA2015 Makassar-R1	PMA2016 Makassar-R2
Recent Births Unintended (%)	16.0	26.3	20.9
Wanted Later	12.1	23.8	16.6
Wanted No More	3.9	2.5	4.2

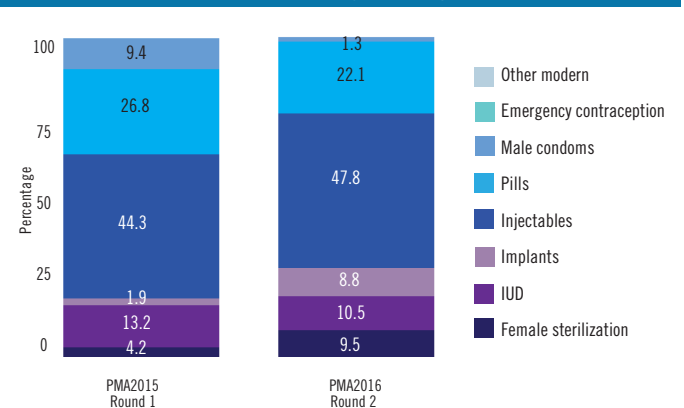
Current Use and Unmet Need Among Women in Union of Reproductive Age, by Wealth Quintile



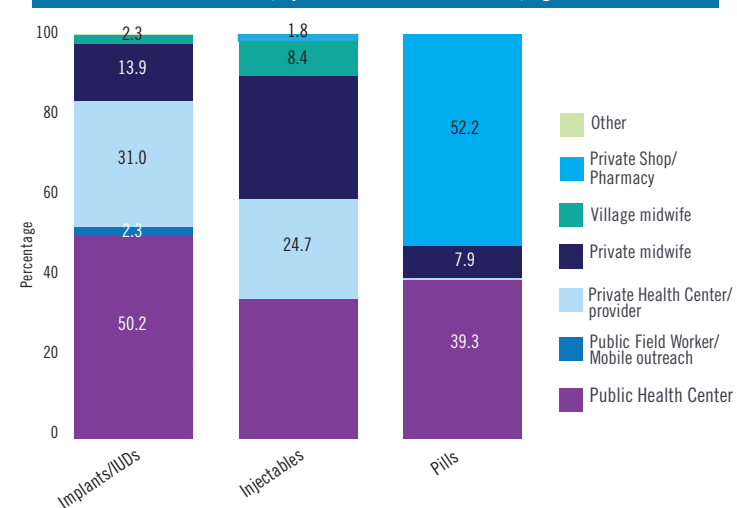
Unmet Need and Contraceptive Use, by Age (All Women)



Current Modern Method Mix Among Contraceptive Users in Union



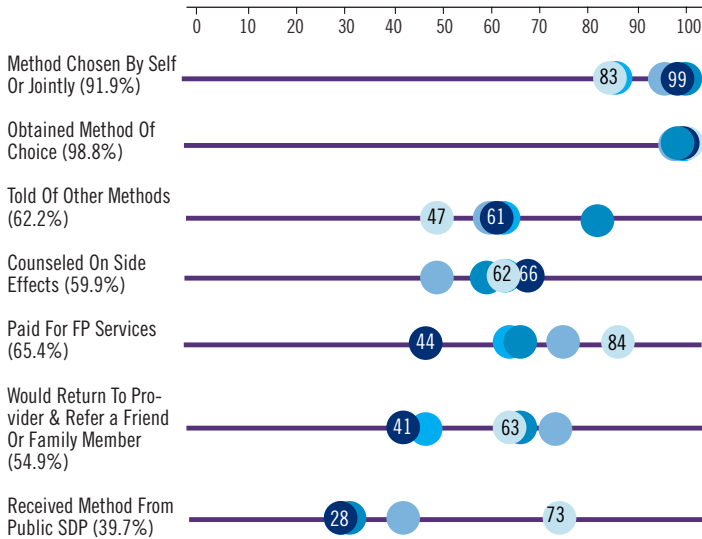
Source of Method, by Provider (Women in Union, Age 15-49)



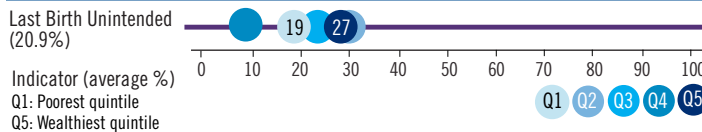
PMA2016/MAKASSAR/INDONESIA-R2

INDICATORS FOR ACCESS, EQUITY, QUALITY AND CHOICE

For Current Female Users (n=306) (%), Indicators by Wealth Quintile:



Births in the Past Five Years, or Current Pregnancies:



For Current Female Non-Users:

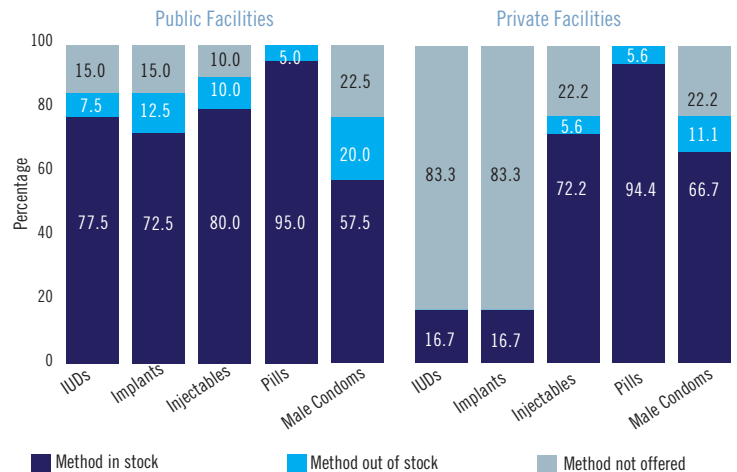
Reasons Mentioned For Non-Use Among All Women Wanting To Delay The Next Birth 2 Or More Years (%)

Not Married	56.7
Perceived Not-At-Risk/Lack of Need	18.0
Method or Health-related Concerns	23.1
Opposition to Use	8.4
Lack of Access/Knowledge	2.5
Other	4.0

Reproductive Health and Contraceptive Indicators

Indicator	Total
Median Age at First Marriage (Age 25-49)	22.6
Median Age at First Sex (Age 15-49)	21.3
Median Age at First Contraceptive Use (Age 15-49)	23.9
Median Age at First Birth (Age 25-49)	22.6
Mean No. of Living Children at First Contraceptive Use (Age 15-49)	1.5
Women Having First Birth by Age 18 (Age 18-24, %)	1.7
Received FP Info from Provider in Last 12 Mths (Age 15-49, %)	21.4
Exposed to FP Media in Last Few Months (age 15-49, %)	78.4

Percent of Facilities Offering & Currently In/Out of Stock, by Method (n=58, 40 public, 18 private)



Method in stock (dark blue), Method out of stock (light blue), Method not offered (grey)

Percent of Public Facilities Offering At Least 3 or At Least 5 Modern Contraceptive Methods, by Facility Type (n=40)

Facility Type	3 or more methods	5 or more methods
Hospital	100.0	100.0
Health Center	96.8	54.8
Sub-Health Center	0.0	0.0
Total	82.5	50.0

Service Delivery Points (n= 59; 40 public, 19 private)

	Public	Private	Total
Among All Service Delivery Points:			
Offering Family Planning (%)	100.0	94.7	98.3
With Mobile Teams Visiting Facility In Last 12 Months (%)	67.5	10.5	49.2
Supporting CHWs From This Service Delivery Point (%)	55.0	0.0	37.3
Among Service Delivery Points Offering Family Planning Services:			
Average Number Of Days Per Week Family Planning Is Offered	5.5	6.5	5.8
Offering Female Sterilization (%)	7.5	5.6	6.9
Offering Family Planning Counseling/Services To Adolescents (%)	17.5	16.7	17.2
Charging Fees For Family Planning Services* (%)	7.5	44.4	19.0
Percent Integrating Family Planning Into Their:			
Maternal Health Services (among all offering maternal health services)	100.0	100.0	100.0
HIV Services (among all offering HIV services)	97.2	--	97.2
Post-Abortion Services (among all offering post-abortion services)	100.0	100.0	100.0

*Question wording was changed from Round 1 to specify routine user fees only

SAMPLE DESIGN

The second round of data collection for PMA2020 in Indonesia used a multi-stage cluster design with province at the first and census blocks at the second stage. The number of enumeration areas (EAs) determined to provide a national estimate of modern contraceptive prevalence with 1.5% margin of error and 2.0% for urban-rural strata, was 372 census blocks. The Indonesian Central Bureau of Statistics (BPS) drew a sample of 372 EAs from its master sampling frame to accommodate an oversample for one province (South Sulawesi with 60 EAs) and one district (Makassar, with 37 EAs). In each EA, the survey team listed and mapped households and public and private health facilities and randomly selected 35 households and up to three private service delivery points. Each Resident Enumerator contacted 35 households for interview, enumerated all household occupants, and interviewed all eligible females age 15 to 49 in each household. Field supervisors interviewed three levels of public health facilities assigned to provide services to residents of each of the selected EAs residents. The final district sample for Makassar included 1,122 households, 1,224 females and 52 health facilities (88.9%, 88.3% and 98.3% response rates, respectively). Data collection was conducted between October 2016 and January 2017.

