

PMA AGILE-YRDSS/CÔTE D'IVOIRE

Emergency Contraception Use

PMA Agile and the Association Ivoirienne pour le Bien-Etre Familial (AIBEF) conducted the Youth Respondent-Driven Sampling Study (YRDSS) among unmarried youth aged 15 to 24 years living in Abidjan, Côte d'Ivoire using respondent-driven sampling (RDS) methodology, a chain-based, peer-to-peer recruitment method. PMA Agile typically monitors contraception uptake via clinic-based surveys of providers and clients; however, it is expected that unmarried youth and adolescents may be procuring contraceptives via other means, making their use effectively "hidden" from clinic staff and compromising the accuracy of clinic-based survey measures. The study aimed to collect information about awareness, use, and procurement of contraception among unmarried adolescents and youth, both female and male, and enable reach into a population and topic that may be otherwise hidden. The study was conducted in August-November 2018 and enrolled 2,068 female and male participants.

The study found that **among contraceptive users, approximately one-fifth (19.0%) reported using emergency contraception (EC) as a current method.** Among male contraceptive users, 5.8% reported using EC and among female contraceptive users, 31.8% reported using EC. Emergency contraception is available over the counter for a low cost, and the discretion afforded by not seeing a healthcare provider may be appealing to youth contraceptive users.

USERS OF EMERGENCY CONTRACEPTIVE (EC) BY BACKGROUND CHARACTERISTICS

	Total contraceptive users=839		Total male contraceptive users=442		Total female contraceptive users=397	
	Overall (N=185)		Males (N=62)		Females (N=123)	
	N	%^	N	%^	N	%^
Sex						
Male	62	14.9%	--	--	--	--
Female	123	85.1%	--	--	--	--
Age						
15-17 years	11	17.8%	3	4.2%	8	20.2%
18-20 years	78	33.6%	32	48.3%	46	31.1%
21-24 years	96	48.6%	27	47.5%	69	48.8%
Highest level of education						
Never	4	39.2%	0	0.0%	4	46.0%
Primary	1	3.6%	1	24.2%	0	0.0%
Secondary	37	39.0%	9	36.3%	28	39.4%
Tertiary	142	17.1%	51	31.3%	91	14.6%
Koranic/Bible school only	0	0.0%	0	0.0%	0	0.0%
No response	1	1.2%	1	8.3%	0	0.0%

^All percentages shown are weighted for RDS design in addition to a post-estimation weight

The most commonly reported place to obtain EC is a **pharmacy** (54.2% of EC users)



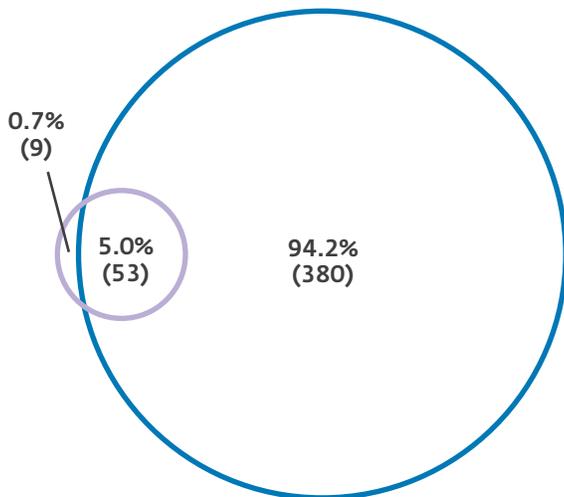
39.7% of EC users* **rely on their partner or someone else** to obtain EC for them

63.4% of whom are **entirely dependent** on the other person to obtain it

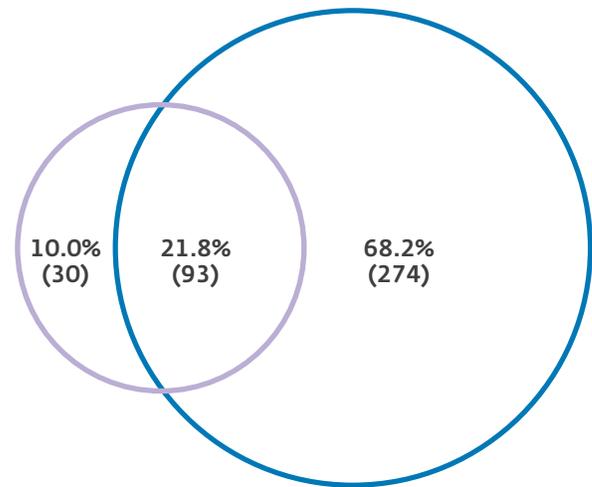
*Among EC users whose highest-ranking current contraceptive method is EC. Participants could select multiple methods and methods were ranked by efficacy. Method ranking list from most to least effective: implant; IUD; injectables; pill; emergency contraception; male condom; female condom; standard days/cycle beads; LAM/breastfeeding; withdrawal; other method

Dual use of EC and other contraceptive methods by gender among current EC users

DUAL USE AMONG MALES
N=442 current users



DUAL USE AMONG FEMALES
N=397 current users



Categories are mutually exclusive and sum to 100%

— Users of EC

— Users of other contraceptive methods

Among youth who reported that they are currently using EC as a method of contraception, **71.3% reported that they currently use at least one other method.** The most commonly reported methods used were male condoms (92.8% of dual users), female condoms (28.9%), and pills (18.4%). **The YRDSS survey asked about current use but not about concurrent use at last sex, so dual use does not indicate dual protection as EC may not have been used in conjunction with another method in the same sexual encounter.**

Dual method users:

- 81.8% are female
- 56.7% are 21-24 years old
- 60.1% have a secondary education or higher
- 92.8% use male condoms

Note: Male EC users are those who report delaying or avoiding a pregnancy with their partners using EC

About PMA Agile-YRDSS/Côte d'Ivoire

PMA Agile is a project within Performance Monitoring and Accountability 2020 (PMA2020) suite implemented by the Gates Institute at Johns Hopkins University's Bloomberg School of Public Health, in collaboration with local research institutes and universities in PMA Agile geographies. PMA Agile seeks to establish an adaptable, replicable M&E platform for application at critical levels of program implementation, including the collection and use of routine and survey data sources that can provide rapid feedback and is cost-effective. The Youth Respondent-Driven Sampling Survey (YRDSS) was implemented in collaboration with the Association Ivoirienne pour le Bien-Etre Familial (AIBEF) in Abidjan with unmarried youth aged 15-24 years. YRDSS used respondent-driven sampling (RDS) methodology, a chain-based recruitment method in which study participants recruit their peers through numbered coupon distribution. Overall direction and support were provided by the Bill & Melinda Gates Institute for Population and Reproductive Health at the Johns Hopkins Bloomberg School of Public Health. YRDSS was supported through funds provided by the Bill & Melinda Gates Foundation. The final sample included 2068 youth. Data collection was conducted between August and November 2018. All results are weighted for RDS design, with a post-estimation weight for comparability with the underlying population of youth ages 15-24 in the study area.



Suggested citation: PMA Agile & AIBEF. YRDSS/Cote d'Ivoire: Emergency Contraception Results. 2019. Baltimore, Maryland, USA: Bill & Melinda Gates Institute for Population and Reproductive Health, Johns Hopkins University Bloomberg School of Public Health.