



PERFORMANCE MONITORING & ACCOUNTABILITY 2020

UGANDA

DETAILED INDICATOR REPORT: UGANDA 2014



BILL & MELINDA GATES INSTITUTE *for*
POPULATION *and* REPRODUCTIVE HEALTH

Performance Monitoring and Accountability 2020 (PMA2020) is a five-year project that uses innovative mobile technology to support low-cost, rapid-turnaround, nationally representative surveys to monitor key indicators for family planning and water and sanitation. The project is implemented by local universities and research organizations in 10 countries and deploys a cadre of female resident enumerators trained in mobile-assisted data collection. PMA2020 in Uganda is led by Makerere University School of Public Health in collaboration with the Uganda Bureau of Statistics (UBOS) and with support of the Ministry of Health. 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 and funding is provided by the Bill & Melinda Gates Foundation.

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List of Indicators

FAMILY PLANNING INDICATORS MEASURED BY PMA2020		FP2020 Core Indicator Number
Utilization Indicators:		
F1:	Contraceptive use Total contraceptive prevalence rate (CPR) Modern contraceptive prevalence (mCPR) Traditional contraceptive prevalence	Core 1
F2:	Contraceptive method mix (Composition of methods currently used among married/in-union and sexually active unmarried women)	Core 1b
Demand Indicators:		
F3:	Unmet need for family planning (for spacing, limiting and in total) Total contraceptive demand (contraceptive prevalence rate and unmet need)	Core 3
F4:	Percent of users whose demand is satisfied by modern contraception	Core 4
F5:	Percent of unintended recent births (wanted later/wanted no more)	Core 7
Indicators for Access, Equity, Quality and Choice:		
F6:	Percent of users who chose their current contraceptive method by themselves or jointly with a provider/partner	Core 13
F7:	Percent of users who paid for family planning services	
F8:	Method information index • Percent of users who were informed about other methods • Percent of users who were informed about side effects • Percent of users who were told what to do if they experienced side effects	Core 12
F9:	Percent who would return and/or refer others to their provider	

F10: Percent who received family planning information in the past 12 months (all women ages 15 to 49) Core 11

Fertility Indicators:

F11: Total fertility rate
Adolescent fertility rate Core 14

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We would like to recognize all the field staff, including the central supervisors, field supervisors, resident enumerators and other personnel of Makerere University School of Public Health and the Uganda Bureau of Statistics, for their dedicated effort. Lastly, we would like to thank all the survey respondents for their cooperation and the community/local leaders for their help to make PMA2020's first round of data collection in Uganda (referred to as "PMA2014/Uganda") a success.

Acronyms

ASFR	Age-specific fertility rate
CDC	US Centers for Disease Control and Prevention
CHW	Community health worker
CPR	Contraceptive prevalence rate
mCPR	Modern contraceptive prevalence rate
DHS	Demographic and Health Survey
EA	Enumeration area
EC	Emergency contraception
FP	Family Planning
FP2020	Family Planning 2020
FQ	Female Questionnaire
GPS	Global Positioning System
HHs	Households
HIV	Human immunodeficiency virus
HQ	Household questionnaire
IUD	Intrauterine device
JHU	Johns Hopkins University
MakSPH	Makerere University School of Public Health
MoH	Ministry of Health
MCH	Maternal and Child Health
MDG	Millennium Development Goal
M&E	Monitoring and Evaluation
MICS	Multiple Indicator Cluster Survey
ODK	Open Data Kit
OS	Operating System
PMA2014/Uganda	Performance Monitoring and Accountability 2014 survey in Uganda
PMA2020	Performance Monitoring and Accountability 2020
PMA2020/Uganda	Performance Monitoring and Accountability 2020 program in Uganda
PPS	Probability Proportional to Size
RE	Resident enumerator

RHS	Reproductive Health Survey
SDP	Service delivery point
SEE	Standard Error Estimate
SRH	Sexual & Reproductive Health
TFR	Total fertility rate
UBOS	Uganda Bureau of Statistics
UDHS	Uganda Demographic and Health Survey
UNICEF	United Nations Children's Fund
WASH	Water, sanitation and hygiene
WHO	World Health Organization

Preface by the Principal Investigator

Fredrick Makumbi, MHS, PhD, Principal Investigator
Simon Peter Kibira, MSc, Co-Principal Investigator
PMA2020/Uganda, Makerere University School of Public Health

Mobile technology is growing in developing countries, including Uganda. The rapid advancement in technology, the falling prices of devices and the improving network coverage make the mobile phone an appropriate and adaptable tool to bridge the digital divide in low-income settings. Mobile phones have been used for a variety of reasons, including point-of-care support, health promotion, and data collection and disease surveillance.

PMA2020 uses the Alcatel Android smartphones equipped with Open Data Kit software, an open-source application, to collect data on family planning indicators from households and females of reproductive age throughout Uganda's 10 sub-regions. Working with the Uganda Bureau of Statistics, 110 enumeration areas were sampled to cover the 10 sub-regions. One of the key features of PMA2020 is real-time data collection that facilitates timely dissemination and decision-making by concerned parties and enhances monitoring of family planning uptake and service availability on an annual basis. The data collection system has built-in mechanisms to improve data quality and collect geographic coordinates of households. The system is built to support multiple languages, which allows data collection in the seven commonly used languages for data collection in Uganda.

When data submission is not possible instantaneously (owing to poor connectivity and network coverage), the application allows resident enumerators to save completed forms and send them once they have a connection. This feature makes the application especially suitable for regions with limited infrastructure. Despite the challenges related to the mobile phone network (especially in getting accurate GPS coordinates), PMA2014/Uganda proved that mobile-based data collection is feasible in the Ugandan context and could be used for routine monitoring of various health programs.

Preface by the Program Director

Scott Radloff, PhD

Director, PMA2020

Bill & Melinda Gates Institute for Population and Reproductive Health

Johns Hopkins University Bloomberg School of Public Health

I am pleased to present the Detailed Indicator Report for the PMA2014/Uganda survey, which is the fifth survey to be launched under the PMA2020 project, following successful implementations in Ghana, the Democratic Republic of Congo, Ethiopia, and Kenya. It provides further evidence of the effectiveness and efficiency of this innovative approach to data collection, most notable for its (a) use of smartphones to gather real-time, sentinel household data and (b) establishing a new cadre of female resident enumerators who can be trained in this technology and deployed for repeated survey rounds.

The PMA2020/Uganda team is the first to use the data collection platform to support an additional module, undertaken shortly after its first round of family planning data collection. This was implemented through a collaboration with Duke University, University of Minnesota, and Makerere University. The survey utilized the same national sampling frame and 105 enumerators from the PMA2020 team with a focus on generating household-level data on surgically treatable conditions. This collaboration demonstrated that the PMA2020 platform can be utilized for other survey modules and has helped inform other new module introductions that are now under development.

Successful implementation was made possible through strong support from the government of Uganda's Ministry of Health and the Uganda Bureau of Statistics.

The Bill & Melinda Gates Institute for Population and Reproductive Health is grateful to the Makerere University's School of Public Health and the leadership provided by Dr. Fredrick Makumbi and his team in guiding this groundbreaking work, and for the lessons that have been generated for other countries where PMA2020 surveys have since been launched. We look forward to a continuing successful partnership with Makerere University and the government of Uganda as we undertake new survey rounds in the coming years.

About PMA2020/Uganda

The Performance Monitoring and Accountability 2020 (PMA2020) project in Uganda is implemented in a nationally representative sample of 110 enumeration areas throughout Uganda. The Makerere University School of Public Health (MakSPH) in collaboration with the Uganda Bureau of Statistics (UBOS) leads the project with support from the Ministry of Health.

For the first round of data collection in Uganda (referred to as PMA2014/Uganda), the project employed a cadre of 105 female resident enumerators, seven supervisors and five mapping and listing supervisors, and three central team members including an IT specialist, a data manager and a study coordinator. Each resident enumerator was expected to interview up to 44 households, including all women of childbearing age (15 to 49 years) in the households. The survey aimed for an overall sample size of 4,840 households and 4,800 women, with one woman per household.

The survey was conducted in the 10 sub-regions of Uganda: Kampala, Central 1, Central 2, East Central, Eastern, Karamoja, North, West Nile, Western and Southwest. The 110 sampled enumeration areas (EAs) were spread across 76 districts with representation at the sub-regional and urban/rural levels, with 20% urban EAs. Data collection was conducted between April 28 and June 27, 2014. In the first two years of the PMA2020 project, data collection is conducted twice a year and then annually for each additional year.

PMA2020 Survey

Objectives

The principal goal of PMA2020 is to support the monitoring efforts of a number of countries by conducting rapid, smartphone-based national surveys with a multistage cluster random sample of enumeration areas. A cluster-based network of female resident enumerators (REs) and field supervisors conducts interviews at the households and with eligible women. Data generated by PMA2020 surveys provide rich information that is useful for reporting, planning, making operational decisions and conducting advocacy at the community, country and global levels. PMA2014/Uganda, in particular, helps Uganda monitor its contribution to the Family Planning 2020 (FP2020) goal of adding 120 million new contraceptive users globally by 2020.

Current Demographic and Health Survey (DHS) data are reported in five-year intervals—a lengthy gap that restricts the ability of stakeholders to make timely adjustments to policies and programs based on these data. PMA2020 data are intended to fill gaps in the availability of current and reliable information on population dynamics; family planning; reproductive health service delivery; and water, sanitation and hygiene (WASH). This nationally representative survey provides updates twice a year on key FP2020 indicators of contraceptive need, use, quality, choice and access as well as a small battery of questions on WASH in households and health facilities.

The goal of PMA2020 is to contribute to a global monitoring and evaluation system for family planning.

The long-term goal of PMA2020 is to strengthen the capacity of local public health institutions and large government agencies, including the Ministry of Health and the national Bureau of Statistics to efficiently monitor health needs and track progress toward meeting health goals. In Uganda, the project has deployed a cadre of 105 female resident enumerators and 15 field supervisors trained in mobile-assisted data collection. The project has an initial focus on performance monitoring and accountability in family planning. An additional PMA2020 goal is to establish a sentinel data collection platform that transforms the way all health survey data are collected—a sustainable platform that can be utilized for other health program areas.

Sample Design

The PMA2020 survey collects annual data at the national and regional levels to allow the estimation of key indicators to monitor progress in family planning. The resident enumerator model enables replication of the surveys each year, and every six months for the first two years, to track progress.

For the first round of data collection in Uganda (referred to as PMA2014/Uganda), the survey targeted a sample size of 110 enumeration areas (EAs), which were randomly selected by the Uganda Bureau of Statistics (UBOS) to be representative at the national level (including urban and rural areas). The EAs areas were selected systematically with probability proportional to size and urban or rural stratification in the 10 regions (excluding Kampala city, which is only urban).

UBOS provided the EA selection probabilities for the PMA2020 sampled clusters for constructing weights.

Prior to data collection, all households and key landmarks in each EA area were mapped and listed by the resident enumerators to create a frame for the second stage of the sampling process. This mapping and listing process took place in the first week of data collection in each EA. Once listed, field supervisors used a phone-based random number-generating application to randomly select 44 households. All occupants in selected households were listed, and all eligible women were approached and asked to give informed consent, or assent and consent if aged 15 to 17 years, to participate in the study.

Weights were adjusted for non-response at the household and individual levels and applied to all household and individual estimates in this report.

Questionnaires

PMA2020 uses standardized questionnaires for households and females to gather data that is comparable across program countries and consistent with existing national surveys. Prior to launching the survey in each country, these questionnaires are reviewed and modified by local experts to ensure all questions are appropriate to each setting (see Appendix C).

Two questionnaires were used to collect PMA2014/Uganda survey data: the household questionnaire, and the female questionnaire. These questionnaires were based on model surveys designed by PMA2020 staff at the Bill & Melinda Gates Institute for Population and Reproductive Health in Baltimore, MakSPH, and fieldwork materials of the 2011 Uganda Demographic and Health Survey (UDHS).

All PMA2020 questionnaires are administered using Open Data Kit software and Android Alcatel smartphones. The PMA2014/Uganda questionnaires appeared in the seven most commonly used local languages in surveys, and in English.

Female resident enumerators in each enumeration area administered the household questionnaire and female questionnaire in selected households to eligible respondents who consented.

PMA2020 provides consistency with DHS measures and introduces new indicators of family planning quality, choice and access.

The household questionnaire gathers basic information about the household that is used to construct a wealth quintile index, such as ownership of livestock and durable goods, as well as characteristics of the dwelling unit, including wall, floor, and roof material, water sources and sanitation facilities. Using PMA2020's innovative mobile technology, the household questionnaire is then linked with the female questionnaire, allowing for disaggregation of the indicators generated by female data into household wealth quintiles.

The first section of the household questionnaire, the household roster, lists basic demographic information about all usual members of the household and visitors who stayed with the household the night before the interview. This roster is used to identify eligible respondents for the female questionnaire.

In addition to the roster, the household questionnaire also gathers data that are used to measure key WASH indicators, including regular sources and uses of water, sanitation facilities used and prevalence of open defecation by household members.

The female questionnaire is used to collect information from all women ages 15 to 49 who were listed on the household roster at selected households. The female questionnaire gathers specific information on education; fertility and fertility preferences; family planning access, choice and use; quality of family planning services; exposure to family planning messaging in the media; and the burden of collecting water on women.

Training

The PMA2014/Uganda fieldwork training started on January 14, 2014 with a training of 15 field supervisors and three central staff. PMA2020 staff led the training from the Bill & Melinda Gates Institute for Population and Reproductive Health, with support from UBOS and MakSPH project staff. These field supervisors then became the trainers for the two subsequent resident enumerator (RE) training sessions that took place between February 24 and March 24, 2014 in Kampala City, at the Global Grand Hotel. The first training had REs from 49 EAs from Kampala, Central 1, and Central 2, while REs from the remaining 61 EAs completed training a week later.

All participants received training in research ethics, comprehensive instruction on how to conduct mapping and listing of households in EAs, and on how to complete the household and female questionnaires using appropriate and ethical interview skills. In addition to PMA2020 survey training, all participants received training on contraceptive methods offered by a professor of obstetrics and gynecology, and a senior nursing officer working at the Mulago National Referral Hospital's family planning clinic.

Throughout the trainings, REs and supervisors were evaluated based on their performance on several written and phone-based assessments, practical field exercises and class participation. As all questionnaires were completed on project smartphones, the training also familiarized participants with Open Data Kit and smartphone use in general. All trainings included three days of practical exercises, during which participants entered a practice EA to conduct mapping and listing, and to administer household and female interviews. All responses were

captured on project smartphones, and submitted to a practice cloud server—a centralized data storage system. Once the data were submitted to the cloud server, only the data manager and the IT specialist had access, and no data remained on the smartphones. The RE trainings were conducted primarily in English, whereas some small group sessions were conducted for all the seven local languages.

Supervisors received additional training prior to and after the RE training to further strengthen their supervisory skills, including conducting re-interviews, carrying out random spot checks, and dealing with local/community leaders while engaging the communities.

Data Processing

Data collection occurred between April 28 and June 27 2014. Unlike traditional paper-and-pencil surveys, PMA2020 uses Open Data Kit Collect, an open-source software application, to collect data using mobile phones. All the questionnaires were programmed using this software and installed onto all project smartphones. The Open Data Kit questionnaire forms are programmed with automatic skip-patterns and built-in response constraints to prevent data entry errors.

The Open Data Kit Collect application enabled REs and supervisors to collect and transfer survey data, via the General Packet Radio Service (GPRS) network, to a central Open Data Kit Aggregate cloud server in real time. This instantaneous aggregation of data also allowed for real-time monitoring of data collection progress, concurrent data processing and course corrections while PMA2020 was still active in the field. Throughout data collection, central staff at MakSPH in Uganda, and the data manager in Baltimore routinely monitored the incoming data and notified field staff of any potential errors, missing data or problems with form submissions to the central server.

The use of mobile phones allowed data collection and data entry to be combined into one step; therefore, data entry was completed when the last interview form was uploaded at the end of data collection in June 27 2014

Once all data were on the server, data analysts cleaned and de-identified the data, applied survey weights, and prepared the final data set for analysis using Stata® version 12 software. Data analysis for the national dissemination of preliminary findings was conducted between August and September 2014. The national dissemination workshop of preliminary results was held on October 8, 2014 at Imperial Royale Hotel in Kampala, Uganda.

Response Rates

Table 1 shows the response rates for household and female respondents by residence (rural/urban) for both the Uganda Demographic and Health Survey 2011 (UDHS 2011) and PMA2014/Uganda. A total of 4,802 households were selected for the PMA2014 survey; 4,576 (95.3%) of those households were found occupied at the time of fieldwork. Ninety-three

percent (4,257) of the occupied households consented to a household-level interview. However, the response rate for the household level was higher in the rural (96.3%) relative to the urban (84.7%) EAs.

In the occupied households that provided an interview, a total of 3,975 eligible women aged 15 to 49 years were identified. Overall, 94.4% of the eligible women were available and consented to the interview. The female response rate was higher in the rural (95.4%) relative to the urban (91.7%) EAs.

The PMA2014/Uganda response rates for the eligible women were comparable with those observed in the UDHS 2011. Although the response rates at the household level in rural areas were comparable between PMA2014/Uganda and UDHS 2011, the PMA2014 household-level response rate was lower than that of the UDHS 2011 in urban areas (84.7% versus 91.3%).

Table 1. Response rates of households and individuals, by residence: UDHS 2011 and PMA2014/Uganda

Result	UDHS 2011			PMA2014/Uganda		
	Urban	Rural	Total	Urban	Rural	Total
Household interviews						
Households selected	2,977	7,109	10,086	1,362	3,440	4,802
Households occupied	2,794	6,686	9,480	1,281	3,295	4,576
Households interviewed	2,551	6,482	9,033	1,085	3,172	4,257
Household response rate*	91.3%	96.9%	95.3%	84.7%	96.3%	93.0%
Interviews with women ages 15 to 49						
Number of eligible women**	2,805	6,442	9,247	1,027	2,948	3,975
Number of eligible women interviewed	2,562	6,112	8,674	942	2,812	3,754
Eligible women response rate	91.3%	94.9%	93.8%	91.7%	95.4%	94.4%

*Household response rate = households interviewed/households selected

**Eligible women response rates include only women identified in completed household interviews

†Eligible response rate = eligible women interviewed/eligible women

Sources: Uganda Bureau of Statistics (UBOS) and ICF International Inc. 2012. *Uganda Demographic and Health Survey 2011. Kampala, Uganda: UBOS and Calverton, Maryland: ICF International Inc.*; and the Performance Monitoring and Accountability PMA2014/Uganda survey

Tabulations presented in this report are weighted and adjusted for non-response at the household and female respondent levels.

Background Characteristics

Households

The PMA2020 surveys follow the Demographic and Health Survey (DHS) definition of a household: a person or a group of persons, related or unrelated, who live together in the same house or compound, share the same housekeeping arrangements and eat together as a unit. The household survey obtained the age, sex, marital status and *de jure* (usual) or *de facto* (visitor) residential status of each member in the household. Visitors were individuals who spent the night preceding the survey in the household, but do not normally sleep there. The household information identified all eligible women in the household, ages 15 to 49 years, irrespective of their marital status. Eligible women were then contacted and requested to give informed individual consent, or assent and guardian consent if a minor (aged 15 to 17 years), prior to conducting the individual interviews.

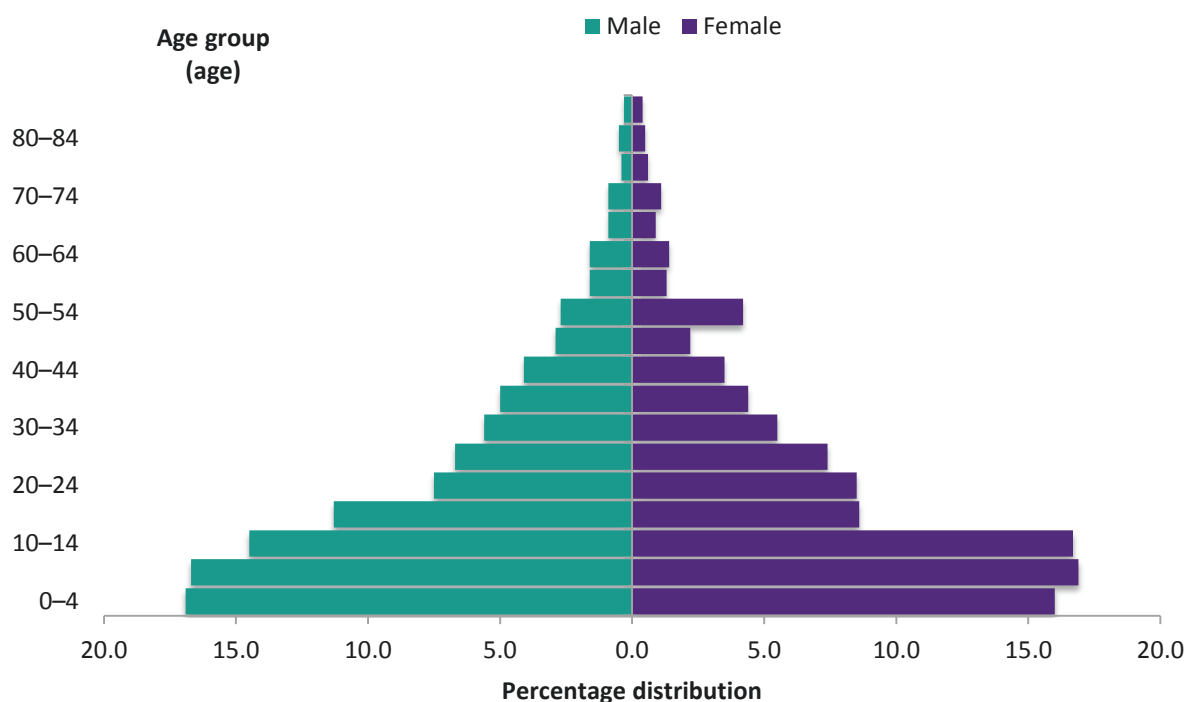
Table 2 shows the percentage distribution of all household residents (*de jure* and *de facto*) by five-year age groups, sex, and urban or rural residence as defined by UBOS. A total of 19,033 household members were enumerated from 4,257 households interviewed. Just over half (51.1%) of the enumerated household members were female, and nearly half (48.8%) of all household members were young (aged 0 to 14 years). The percentage of young (0 to 14 years) population was higher in the rural (50.1%) compared to the urban (42.5%) enumeration areas. The dependence ratio (DR), defined as the ratio of the population between 0 to 14 years or 65+ years of age to the population aged 15 to 64 years, was high overall (1.08), but lower in urban (0.79) compared to rural (1.16) EAs. The percentage of women of reproductive age (15-49 years) was higher in the urban (48.1%) compared to the rural (38.3%) EAs.

Figure-1a shows the population pyramid for the total weighted study population. The pyramid shows a typical young population with a wide base and narrow top where only 10% of the population is aged 50 or older. However, ages 10 to 14 and 50 to 54 have a higher percent than expected. This may be due to age heaping, either due to REs shifting potential respondents or respondents' own age shifting if they did not want to take part in the survey.

Table 2. Percent distribution of household population by age, sex and residence

Age group	Total population			Urban population			Rural population		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
0-4	16.9	16.0	16.4	15.0	15.9	15.4	17.3	16.0	16.6
5-9	16.7	16.9	16.8	13.9	15.1	14.5	17.2	17.3	17.3
10-14	14.5	16.7	15.6	11.7	13.4	12.6	15.0	17.3	16.2
15-19	11.3	8.6	9.9	12.1	9.0	10.5	11.1	8.5	9.8
20-24	7.5	8.5	8.0	10.6	13.7	12.6	6.8	7.5	7.2
25-29	6.7	7.4	7.1	9.9	9.6	9.8	6.1	6.9	6.5
30-34	5.6	5.5	5.5	9.1	6.1	7.6	4.9	5.3	5.1
35-39	5.0	4.4	4.7	4.7	5.0	4.9	5.1	4.2	4.6
40-44	4.1	3.5	3.8	4.9	2.8	3.8	3.9	3.6	3.8
45-49	2.9	2.2	2.6	2.1	1.9	2.0	3.1	2.3	2.7
50-54	2.7	4.2	3.5	2.1	3.5	2.8	2.9	4.3	3.6
55-59	1.6	1.3	1.5	1.7	1.2	1.4	1.6	1.4	1.5
60-64	1.6	1.4	1.5	1.1	0.7	0.9	1.7	1.5	1.6
65-69	0.9	0.9	0.9	0.4	0.8	0.6	1.0	0.9	1.0
70-74	0.9	1.1	1.0	0.2	0.6	0.4	1.1	1.2	1.1
75-79	0.4	0.6	0.5	0.1	0.2	0.2	0.5	0.7	0.6
80-84	0.5	0.5	0.5	0.2	0.4	0.3	0.5	0.5	0.5
85 or older	0.3	0.4	0.4	0.2	0.2	0.2	0.3	0.5	0.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Weighted N	9,304	9,725	19,033	1,972	2,082	4,054	7,330	7,649	14,979

Figure-1a: Population age-sex pyramid: Uganda 2014



*The population pyramid shows a rather sharp drop in population between females ages 10- to 14 and ages 15 to 19. This was probably due to age heaping, in which eligible females may have been included in age categories for which they were not eligible. For example, girls who were 15 years old may have been lumped into the 10 to 14 age category, and 49-year-old women may have been included in the 50 to 54 age category.

Table 3 shows household composition. Specifically, it shows the percent distribution of households, by sex of head of household and by household size. About a quarter (25.6%) of the households are headed by females, with a higher proportion of female-headed households in urban (29.4%) compared to rural (24.6%) EAs. Overall, a majority (55%) of the households have fewer than five usual household members. The overall average number of usual members in the household is 4.5 members, but the average is higher in the rural (4.7 members) relative to the urban (3.7 members) EAs.

Table 3. Household composition: Percent distribution of households, by sex of head of household and by household size

Household characteristics	Residence		
	Urban	Rural	Total
Household headship			
Male	70.6	75.4	74.4
Female	29.4	24.6	25.6
Number of usual members			
1–4	70.2	51.2	55.1
5–9	27.2	43.7	40.3
10 or more	2.6	5.0	4.5
Total	100.0	100.0	100.0
Mean size of households	3.7	4.7	4.5
Weighted N	869	3,368	4,237
Unweighted N	1,079	3,158	4,237

Table 4 shows household composition by wealth quintile, residence and region. The lowest wealth quintile was more common in rural (93.5%) compared to urban (6.5%) EAs. The highest wealth quintile was split between rural (51.9%) and urban (48.1%) EAs. By region, the highest wealth quintile was most common in Central (62.0%), followed by Western (19.1%), Eastern (13.7%) and Northern (5.2%) regions.

Table 4. Household composition: Percent distribution of the de jure population, by wealth quintile, residence and region

Residence/ Region	Wealth quintiles					Total	Weighted N	Unweighted N
	Lowest	Lower	Middle	Higher	Highest			
Residence								
Urban	6.5	12.2	6.4	15.0	48.1	16.9	3,186	4,028
Rural	93.5	87.8	93.6	85.0	51.9	83.2	15,726	14,884
Region								
Central	3.1	11.0	18.5	28.0	62.0	23.6	4,462	4,513
Eastern	39.4	28.9	28.4	35.7	13.7	29.6	5,605	4,834
Northern	47.9	40.5	12.0	6.4	5.2	22.7	4,300	5,076
Western	9.6	19.5	41.1	29.9	19.1	24.0	4,545	4,489

Female Respondents

Table 5 shows the background characteristics of women ages 15 to 49 years. A total of 3,719 women of ages 15 to 49 were interviewed. Forty-two percent were young women (15 to 24 years old) and only 5.7% were aged 45 to 49 years. For all age groups, over 80% of the women were from rural areas, except the two age groups 20 to 24 years (72.5%) and 25 to 29 years (78.2%). Rural residence was highest (85%) for interviewed women of ages 40 to 49.

Nearly two thirds (65.3%) of women were either married (35.1%) or living with a partner (30.2%), while 22.8% were never-married women. Rural residence had the highest percentage of women by all marital status, married (83.9%), living together (79.2%), never married (74.4%), divorced (75.2%) and widowed (84.1%).

About a quarter of female respondents (24.7%) had never had a child, while 28.3% of them reported having had five or more children. The distribution of parity by residence shows decreasing contribution from urban areas as parity increases; 19.2% of women with three to four children were in urban areas, and only 11.1% of women with five or more children were in urban areas. The percentage of women with primary education (58.0%) or no education (13.6%) was high, at 71.6%. Only 5.6% had attained technical/vocational education (2.9%) or university-level (2.7%) education. Education level was overall lower in rural areas; 85.4% of women who had never attended school lived in rural areas, and only 29.7% of women who attended university lived in rural areas.

Just over a third (36.3%) of the women were either in the lowest or lower wealth quintiles (18.2% and 18.1%, respectively). The percentage of women in each wealth quintile increases

with increasing level of wealth quintiles, ranging from 18.2% in the lowest to 22.4% in the highest quintile. The percentage of women in the highest wealth quintile is higher in urban EAs relative to the rural EAs (53.9% and 46.1%, respectively), but not in any other wealth quintile.

Table 5. Percent distribution of background characteristics of women ages 15 to 49

Background characteristics	Urban	Rural	Total	Percentage of sample	Weighted N	Unweighted N
Age group						
15-19	17.9	82.1	100.0	21.0	780	784
20-24	27.6	72.5	100.0	21.2	790	787
25-29	21.9	78.1	100.0	18.9	702	690
30-34	18.5	81.5	100.0	13.6	506	523
35-39	18.5	81.6	100.0	10.9	404	409
40-44	14.5	85.5	100.0	8.7	325	305
45-49	15.0	85.0	100.0	5.7	213	221
Marital status						
Never married	25.6	74.4	100.0	22.8	845	860
Married	16.1	83.9	100.0	35.1	1,302	1,315
Living together	20.8	79.2	100.0	30.2	1,120	1,091
Divorced	24.8	75.2	100.0	8.7	323	324
Widowed	15.9	84.1	100.0	3.3	123	123
Parity						
None	25.3	74.7	100.0	24.7	914	941
1-2	26.5	73.5	100.0	27.0	999	998
3-4	19.2	80.8	100.0	20.0	738	737
5 or more	11.1	88.9	100.0	28.3	1,045	1,020
Education						
Never attended	14.6	85.4	100.0	13.6	504	563
Primary	14.4	85.6	100.0	58.0	2,153	2,063
Secondary	30.2	69.8	100.0	22.9	850	888
Technical/Vocational	42.1	57.9	100.0	2.9	109	93
University	70.3	29.7	100.0	2.7	99	108
Wealth quintile						
Lowest	6.7	93.3	100.0	18.2	675	679
Lower	11.6	88.4	100.0	18.3	681	656
Middle	5.9	94.2	100.0	19.5	727	723
Higher	17.8	82.2	100.0	21.6	803	772
Highest	53.9	46.1	100.0	22.4	833	889
Region						
Central	40.2	59.8	100.0	25.8	960	991
Eastern	12.0	88.0	100.0	28.1	1,045	920
Northern	10.9	89.1	100.0	21.4	796	897
Western	17.5	82.6	100.0	24.7	918	911
Total	20.4	79.6	100.0	100.0	3,719	3,719

Table 6 shows percent distribution of women ages 15 to 49 by education level, age, residence and household wealth quintile. A primary-level education was most common for women across all age groups, with rates ranging from 53.3% in the 20-24 year age group to 63.1% in the 15-19 year age group. The percentage of women who never attended school increases with increasing age, from 2.2% among the 15-19 year age group to 32.8% among 45-49 year olds; conversely, the percentage of women with secondary school decreases with increasing age, from 32.4% among 15-19 year olds to 6.7% among 45-49 year olds. The highest education level, university-level, was more common among urban (9.2%) compared to rural (1.0%) women, while it was less common to have never attended school in urban (9.7%) relative to rural (14.5%) areas.

The percentage of women who never attended school decreases with increasing wealth quintile, from 25.9% in the lowest quintile to 3.5% in the highest quintile. The percentage of women with secondary education increases with increasing wealth quintile, from 6.9% in the lowest quintile to 42.2% in the highest quintile. Overall, a majority of women had attained primary education (58.0%) while only 5.6% had either technical/vocation (2.9%) or university (2.7%) education.

Table 6. Percent distribution of women ages 15 to 49 by education level, age, residence and household wealth quintile

Background characteristics	Never attended	Primary	Secondary	Technical/Vocational	University	Total	Weighted N	Unweighted N
Age group								
15–19	2.2	63.1	32.4	1.7	0.7	100.0	780	784
20–24	6.9	53.3	31.5	3.6	4.8	100.0	789	787
25–29	9.4	56.0	24.4	4.9	5.2	100.0	702	690
30–34	18.8	60.9	16.7	1.6	2.0	100.0	506	523
35–39	26.1	59.9	10.6	2.7	0.7	100.0	403	409
40–44	29.9	53.5	11.1	3.6	1.9	100.0	323	305
45–49	32.8	59.1	6.7	1.2	0.2	100.0	212	221
Residence								
Urban	9.7	41.0	34.0	6.1	9.2	100.0	756	927
Rural	14.5	62.3	20.1	2.1	1.0	100.0	2,959	2,792
Wealth quintile								
Lowest	25.9	67.1	6.9	0.1	0.0	100.0	675	679
Lower	18.1	68.6	12.4	0.5	0.4	100.0	681	656
Middle	13.7	66.1	18.6	1.6	0.0	100.0	726	723
Higher	9.7	58.7	29.0	2.2	0.6	100.0	802	772
Highest	3.5	34.0	42.2	9.2	11.0	100.0	831	889
Total	13.6	58.0	22.9	2.9	2.7	100.0	3,719	3,719

Findings for Family Planning Indicators

PMA2020 is focused on generating, analyzing and disseminating data on an array of indicators for tracking family planning program performance across dimensions of access, quality, choice, equity and utilization.

This section presents PMA2014/Uganda data on these various indicators, all of which are disaggregated by various socio-demographic characteristics of survey respondents, including rural or urban residence, wealth quintile, marital status, age, parity and education (see Appendix E for definitions).

Contraceptive Prevalence Rate

The contraceptive prevalence rate (CPR) is defined as the proportion of women of reproductive age who are using (or whose partners are using) a contraceptive method at the time of the survey. This indicator is also a tracking indicator for Millennium Development Goal 5 target 5B—to achieve universal access to reproductive health by 2015. It is also included on the World Health Organization's list of indicators on health and rights.

CPR is further grouped into contemporary methods labeled *modern*, which include female and male sterilization, intrauterine device (IUD), injectable, implant, pill, male and female condom, emergency contraception, diaphragm, foam/jelly, standard days method, and lactational amenorrhea method. Traditional methods include rhythm (also called periodic abstinence), withdrawal, folk and herbs.

As indicated in Table F1, PMA2014/Uganda found that 22.2% of all women ages 15 to 49 and 27.3% of women currently married or in union at the time of the survey reported that they or their partner were using a contraceptive method.

Modern CPR (mCPR) was 21.0% for all women and 25.7% for women currently married or in union at the time of the survey. Traditional CPR was reported to be very low, at 1.2% for all women and 1.6% for married women.

As measured by the most recent Uganda Demographic and Health Survey (UDHS), in 2011 the mCPR among married women was similar (26%).

CPR was highest among unmarried sexually active women; CPR was 33.7% and mCPR was 33.1%.

Table F1 shows the percentage of women aged 15 to 49 who are currently using a contraceptive method, by type and background characteristics. Among currently married women, contraceptive use is 27.3%, and contraceptive use is lowest for young (15 to 19 years old) women (12.3%) and highest (32.7%) for women aged 35 to 39 years. Contraceptive use was also high among women in urban EAs (33.2%) and the highest wealth quintile (39.1%). Contraceptive use was similar in Western (26.9%) and Central (26.9%) regions, and lower in Eastern (19.1%) and Northern (15.2%) regions.

Table F1. Percentage of women aged 15 to 49 currently using a contraceptive method, by type and background characteristics

Background characteristic	CPR		Modern CPR		Traditional CPR	
	All women (n=3,719)	Married women (n = 2,406)	All women (n = 3,719)	Married women (n = 2,406)	All women (n = 3,719)	Married women (n = 2,406)
Total	22.2	27.3	21.0	25.7	1.2	1.6
Age group						
15–19	6.6	12.3	6.3	11.6	0.3	0.7
20–24	23.0	24.9	22.4	24.8	0.6	0.1
25–29	30.3	31.8	28.6	29.7	1.7	2.1
30–34	26.3	26.9	24.8	25.1	1.5	1.8
35–39	31.2	32.7	29.4	30.4	1.8	2.3
40–44	25.9	32.0	23.9	29.3	2.0	2.7
45–49	16.7	20.5	14.9	18.3	1.9	2.2
Marital status						
Married or in union	27.3	--	25.7	--	1.6	--
Not married	12.7	--	12.2	--	0.5	--
Unmarried, sexually active	33.7	--	31.2	--	2.2	--
Parity						
0–1	11.4	17.3	10.6	16.1	0.8	1.2
2–3	31.0	30.6	29.8	29.3	1.1	1.3
4 or more	28.1	30.2	26.5	28.2	1.7	2.0
Residence						
Urban	27.1	33.2	25.7	31.3	1.4	1.9
Rural	20.9	25.9	19.8	24.4	1.1	1.5
Education						
Never attended	12.6	13.5	11.9	12.8	0.7	0.7
Primary	22.0	26.1	21.0	24.9	0.9	1.2
Secondary	26.6	39.4	25.0	36.7	1.6	2.7
Technical/Vocational	26.9	38.6	20.0	29.8	6.9	8.9
University	32.7	40.3	32.7	40.3	0.0	0.0
Wealth quintile						
Lowest	12.7	15.8	12.6	15.5	0.2	0.2
Lower	19.4	22.1	18.7	21.3	0.6	0.8
Middle	23.0	27.5	22.3	26.7	0.6	0.8
Higher	24.0	31.1	22.6	29.3	1.4	1.8
Highest	29.7	39.1	26.9	35.0	2.8	4.1
Region						
Central	26.9	34.2	24.4	30.3	2.5	3.9
Eastern	19.1	23.3	18.5	22.8	0.6	0.5
Northern	15.2	17.5	15.2	17.5	0.0	0.0
Western	26.9	34.5	25.3	32.3	1.6	2.2

Contraceptive Method Mix

The contraceptive method mix is the composition of current methods used by women ages 15 to 49 who are currently married or in union, or all users.

The most frequently reported methods among all current users are injectables (54.0 percent), implants (11.9 percent), and pills (8.6 percent). Among married or in-union current users, the most frequently reported methods are also injectables (55.1 percent), implants (12.0 percent) and pills (7.6 percent) (Figures F2a and F2b).

Figure F2a. Contraceptive method mix among all contraceptive users ages 15 to 49

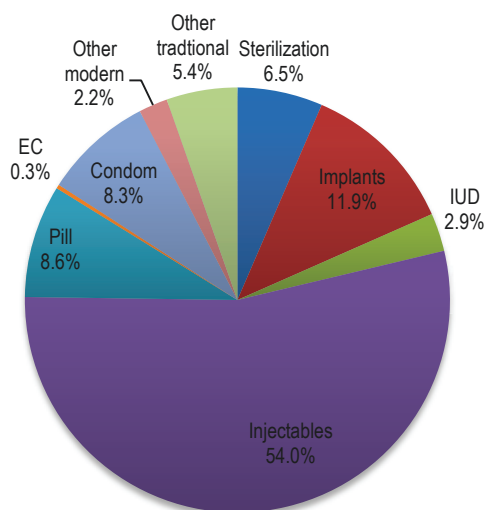
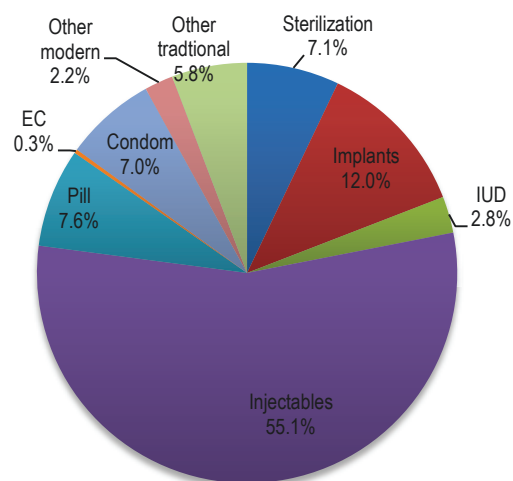


Figure F2b. Contraceptive method mix among married or in-union contraceptive users ages 15 to 49



The method mix can be used to calculate an overall level of contraceptive use-effectiveness by applying use-effectiveness weights (Table F2a). A higher percent of women report using long-acting methods (IUD and implants) and a lower percent report using traditional methods in 2014 compared to 2011, the use-effectiveness score rose to 22.3% in 2014 from 21.8% in 2011.

Table F2a. Percent distribution of all contraceptive users ages 15 to 49, by method type

Year	Sterilization	IUD	Injectables	Implants	Pill	Condom	Other modern methods	Traditional methods	Use-effectiveness
PMA2014/ Uganda	1.4	0.6	12.3	2.7	2.2	2.3	0.8	1.7	22.3
UDHS 2011	2.3	0.4	10.7	1.9	2.1	3.2	0.1	2.9	21.8
Weight	0.995	0.995	0.97	0.9995	0.92	0.85	0.75	0.73	

Table F2b. Contraceptive users ages 15 to 49, by method type, marital status, and background characteristics

	All users (n = 816)									
	Sterilization	Implants	IUD	Injectables	Pill	EC	Condom	Other modern	Other traditional	Total
Total	6.5	11.9	2.9	54.0	8.6	0.3	8.3	2.2	5.4	100.0
Age group										
15–19	0.0	9.0	4.5	52.7	11.4	1.0	17.0	0.0	4.5	100.0
20–24	0.0	14.2	3.4	59.8	8.4	0.0	8.3	3.4	2.5	100.0
25–29	1.0	10.7	3.5	63.4	6.3	0.2	7.1	2.3	5.6	100.0
30–34	3.7	13.5	2.3	56.4	12.2	1.3	4.2	0.7	5.8	100.0
35–39	11.5	10.8	3.7	46.9	10.8	0.0	8.5	2.1	5.8	100.0
40–44	25.4	12.5	0.0	33.1	6.5	0.0	12.7	2.1	7.7	100.0
45–49	29.1	7.8	0.0	37.1	2.3	0.0	6.9	5.9	11.1	100.0
Marital status										
Married or in union	7.1	12.0	2.8	55.1	7.6	0.3	7.0	2.2	5.8	100.0
Not married	3.8	11.2	2.9	49.8	12.5	0.4	13.6	2.2	3.6	100.0
Unmarried sexually active	1.0	9.1	3.4	49.7	12.2	0.5	17.6	0.0	6.7	100.0
Parity										
0–1	0.0	7.5	3.0	49.1	15.2	0.4	16.2	1.9	6.7	100.0
2–3	1.2	14.6	3.0	60.3	8.3	0.0	5.8	3.2	3.7	100.0
4 or more	12.8	11.8	2.7	51.8	6.0	0.5	6.7	1.7	6.0	100.0
Residence										
Urban	2.1	8.8	1.4	55.8	12.8	1.0	11.3	1.6	5.2	100.0
Rural	7.9	12.9	3.3	53.5	7.2	0.1	7.3	2.5	5.4	100.0
Education										
Never attended	18.3	16.0	2.7	44.3	3.0	0.8	8.8	0.7	5.4	100.0
Primary	8.0	13.3	2.9	56.9	6.0	0.3	5.9	2.5	4.2	100.0
Secondary	1.7	8.7	3.3	55.0	12.0	0.2	12.6	0.5	5.9	100.0
Technical/Vocational	0.0	10.8	0.0	42.1	9.8	0.0	5.6	6.0	25.7	100.0
University	0.0	5.9	2.1	34.9	32.5	1.1	14.0	9.7	0.0	100.0
Wealth quintile										
Lowest	14.1	18.3	2.8	49.3	4.6	0.6	5.7	3.5	1.2	100.0
Lower	9.4	16.7	4.6	51.3	5.2	1.1	4.9	3.9	3.0	100.0
Middle	3.0	12.7	3.1	64.5	6.2	0.0	5.4	2.4	2.8	100.0
Higher	8.1	10.3	1.7	60.7	5.6	0.2	6.8	0.8	5.9	100.0
Highest	3.3	7.7	2.7	45.0	15.7	0.1	14.2	2.0	9.3	100.0
Region										
Central	1.3	7.4	2.8	48.5	13.1	0.3	14.7	2.9	9.1	100.0
Eastern	15.3	9.1	1.4	57.6	6.3	0.0	4.2	3.0	3.1	100.0
Northern	4.3	26.7	7.6	44.0	5.2	1.6	8.4	2.3	0.0	100.0
Western	5.7	11.6	1.8	62.0	7.4	0.0	4.8	0.9	5.8	100.0

Table F2c. Percent distribution of contraceptive users among married women ages 15 to 49, by method type and background characteristics

	Married users (n = 655)									
	Sterilization	Implants	IUD	Injectables	Pill	EC	Condom	Other modern	Other Traditional	Total
Total	7.1	12.0	2.8	55.1	7.6	0.3	7.0	2.2	5.8	100.0
Age group										
15–19	0.0	12.3	3.9	65.4	4.2	2.0	6.8	0.0	5.4	100.0
20–24	0.0	16.4	2.7	65.8	4.9	0.0	7.5	2.4	0.5	100.0
25–29	1.1	10.3	4.0	63.2	5.9	0.0	6.2	2.7	6.6	100.0
30–34	3.6	11.9	2.0	56.6	13.1	1.3	4.5	0.4	6.7	100.0
35–39	11.1	10.1	4.4	48.9	10.3	0.0	5.7	2.5	7.0	100.0
40–44	28.2	12.2	0.0	27.5	7.2	0.0	14.1	2.3	8.5	100.0
45–49	28.3	10.0	0.0	35.4	3.0	0.0	5.2	7.5	10.6	100.0
Parity										
0–1	0.0	9.9	3.7	57.4	10.2	0.0	11.8	0.0	6.9	100.0
2–3	1.5	13.6	2.5	59.4	8.0	0.0	7.2	3.7	4.2	100.0
4 or more	12.7	11.6	2.9	51.7	6.6	0.6	5.5	2.0	6.5	100.0
Residence										
Urban	2.5	10.0	2.0	56.8	11.8	1.0	9.9	0.5	5.6	100.0
Rural	8.5	12.6	3.1	54.6	6.4	0.1	6.2	2.7	5.8	100.0
Education										
Never attended	20.6	17.8	2.0	40.7	3.7	1.0	8.1	0.8	5.3	100.0
Primary	8.5	12.6	3.3	56.3	6.2	0.4	5.2	3.0	4.6	100.0
Secondary	2.2	9.6	2.4	60.4	6.3	0.0	11.6	0.7	6.9	100.0
Technical/Vocational	0.0	11.2	0.0	46.3	12.2	0.0	0.0	7.4	23.0	100.0
University	0.0	9.2	3.3	30.9	50.5	0.0	6.1	0.0	0.0	100.0
Wealth quintile										
Lowest	14.5	15.3	0.9	53.0	5.3	0.7	4.8	4.1	1.4	100.0
Lower	10.1	13.2	5.6	55.9	1.4	1.3	5.1	3.6	3.7	100.0
Middle	3.3	15.0	2.9	63.0	6.2	0.0	3.6	3.0	3.0	100.0
Higher	8.6	11.9	2.2	60.9	4.3	0.0	5.6	1.0	5.8	100.0
Highest	4.2	8.3	2.5	45.6	15.4	0.0	12.2	1.3	10.6	100.0
Region										
Central	1.2	7.4	2.7	49.8	12.5	0.0	12.8	2.5	11.3	100.0
Eastern	15.5	7.6	1.8	59.6	5.6	0.0	4.3	3.7	1.9	100.0
Northern	5.3	28.0	7.7	45.3	3.2	2.0	6.9	1.6	0.0	100.0
Western	7.0	12.4	1.5	61.4	6.6	0.0	3.5	1.1	6.4	100.0

Unmet Need

Unmet need for family planning is defined as the percentage of fecund, sexually active women who do not want to become pregnant but are not using contraception and are therefore exposed to unintended pregnancies. Total unmet need is disaggregated into the percentage of women who wish to space births and those who wish to limit births. The PMA2020 measure follows the guidance for the revised definition adopted by the DHS.

Table F3 shows the percentage of women ages 15 to 49 with unmet need for family planning, by marital status and background characteristics. The PMA2014/Uganda survey found that 25.3% of all women ages 15 to 49 and 34.6% of women ages 15 to 49 who are currently married or in union had unmet need for contraception. In the UDHS 2011, total unmet need was 34% among married women. PMA2014 data showed that the level of need for spacing births was greater than that for limiting, at 20.7% and 14.0% respectively, among married women, and 15.3% and 10.0% respectively, among all women. Unmet need was highest among women in the poorest households and lowest among those in the highest wealth quintile (33.4% and 18.5%, respectively). Unmet need was also highest among women of parity four or more (33.1%) and in the Northern (30.9%) region.

Figure F3a. Percentage of all and currently married women ages 15 to 49 with unmet contraceptive need, by household wealth quintile

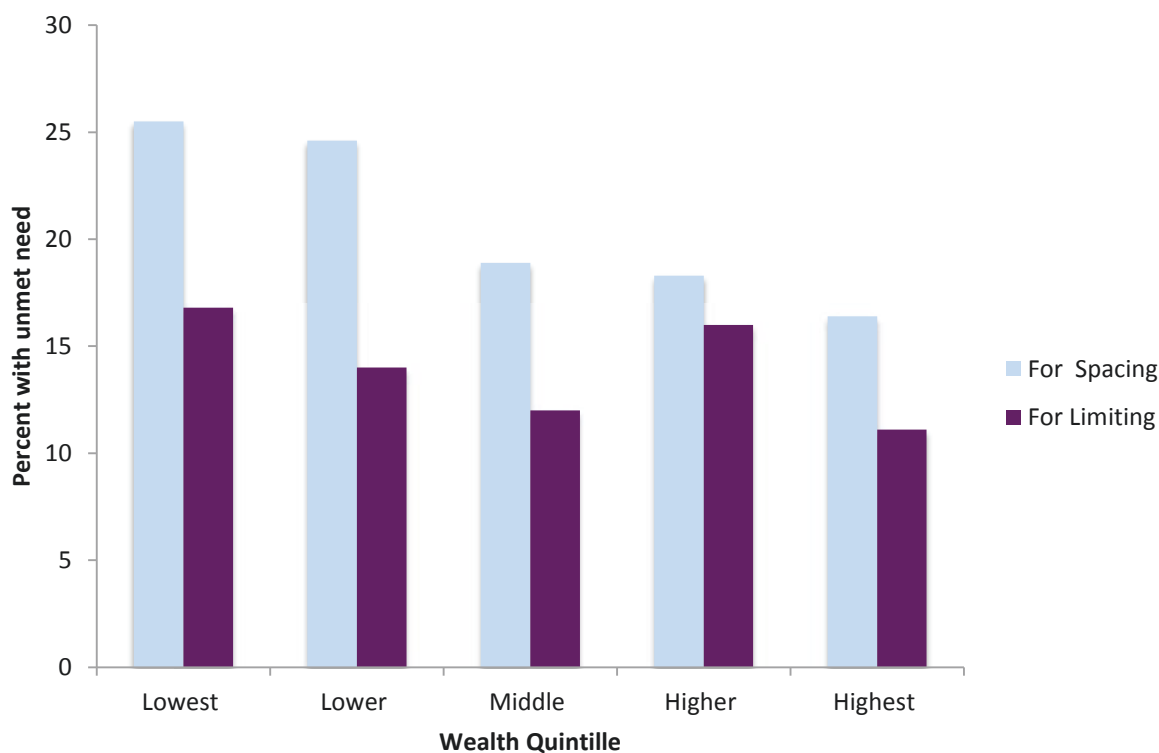


Table F3. Percentage of women ages 15 to 49 with unmet need for family planning, by marital status and background characteristics

	All women (n = 3,719)			Married women (n = 2,406)		
	For spacing	For limiting	Total	For spacing	For limiting	Total
Total	15.4	10.0	25.3	20.7	14.0	34.6
Age group						
15–19	12.7	2.2	14.9	32.0	5.4	37.4
20–24	21.2	3.6	24.8	28.3	4.0	32.3
25–29	22.1	7.0	29.1	26.0	8.0	34.0
30–34	16.7	17.0	33.7	19.2	18.3	37.5
35–39	13.4	19.8	33.2	15.0	24.0	39.0
40–44	2.4	21.4	23.8	2.6	28.5	31.1
45–49	1.3	19.3	20.6	1.3	27.6	28.8
Marital status						
Married or in union	20.7	14.0	34.6	--	--	--
Not married	5.4	2.6	8.0	--	--	--
Unmarried, sexually active	24.8	10.5	35.3	--	--	--
Parity						
0–1	13.4	2.3	15.6	25.8	2.9	28.7
2–3	22.5	6.5	29.0	26.3	7.2	33.5
4 or more	12.9	20.3	33.1	14.6	23.6	38.2
Residence						
Urban	13.6	8.2	21.7	20.5	12.3	32.8
Rural	15.8	10.5	26.3	20.7	14.3	35.1
Education						
Never attended	16.5	19.1	35.6	20.9	23.2	44.1
Primary	17.2	10.6	27.8	21.9	14.1	36.0
Secondary	10.9	4.7	15.7	17.5	7.6	25.0
Technical/Vocational	10.4	5.8	16.2	14.8	10.4	25.1
University	12.9	1.2	14.0	20.8	2.2	23.0
Wealth quintile						
Lowest	20.3	13.1	33.4	25.5	16.8	42.3
Lower	19.4	10.9	30.3	24.6	14.0	38.7
Middle	14.2	8.9	23.1	18.9	12.0	30.9
Higher	12.8	10.7	23.5	18.3	16.0	34.3
Highest	11.5	7.0	18.5	16.4	11.1	27.5
Region						
Central	12.5	7.8	20.3	17.4	11.6	29.0
Eastern	17.0	13.1	30.1	22.9	17.9	40.7
Northern	20.0	10.9	30.9	25.5	14.3	39.9
Western	12.4	8.0	20.4	16.7	11.2	27.9

Demand Satisfied by Modern Contraception

Demand satisfied by modern contraception is an indicator that measures the percentage of women ages 15 to 49 who do not want to get pregnant and are using modern contraception. It is defined as the ratio of modern contraceptive prevalence to total contraceptive demand, where the latter is the sum of contraceptive prevalence and unmet need and is expressed as a percentage of all or married women with unmet need.

$$\begin{aligned} \text{Total demand} &= \text{Contraceptive prevalence} + \text{Unmet need} \\ \text{Demand satisfied} &= \text{Modern contraceptive prevalence} / \text{Total demand} \times 100 \end{aligned}$$

The maximum value for this indicator can be 100% if there is no unmet need and all contraceptive use is with modern methods. Because unmet need can be substantial and modern contraceptive use is low in low-resource settings, the proportion of demand satisfied will be suboptimal.

Table F4 shows percent of demand satisfied among women ages 15 to 49, by marital status and background characteristics. In 2014, total contraceptive demand was 47.5% among all women ages 15 to 49, 61.9% among married women, 20.7% among unmarried women, and 69.0% among unmarried sexually active women. Demand satisfied by modern contraception was higher for unmarried women compared to married women (58.9% versus 41.5%). This is due to relatively lower unmet need among unmarried women (8.0%, Table F4). Among married women, demand satisfied was 47.5% for those living in urban areas and 52.5% for those in the highest wealth quintile. Demand satisfied is higher for women in the wealthiest households and lowest in the poorest households, implying inequity in contraceptive needs being met. A similar picture is seen for women who have no education (22.2%) compared to those with university education (63.7%). By region, demand satisfied was highest in the Western region (51.8%) and lowest in the Northern (30.5%) region.

Table F4. Percent of demand satisfied among women ages 15 to 49, by marital status and background characteristics

Background characteristic	All women (n = 3,719)					Married women (n = 2,406)				
	mCPR	Any method	Unmet need	Total demand	Demand satisfied	mCPR	Any method	Unmet need	Total demand	Demand satisfied
Total	21.0	22.2	25.3	47.5	44.1	25.7	27.3	34.6	61.9	41.5
Age group										
15–19	6.3	6.6	14.9	21.5	29.2	11.6	12.3	37.4	49.7	23.3
20–24	22.4	23.0	24.8	47.9	46.8	24.8	24.9	32.3	57.2	43.3
25–29	28.6	30.3	29.1	59.4	48.1	29.7	31.8	34.0	65.9	45.1
30–34	24.8	26.3	33.7	60.0	41.3	25.1	26.9	37.5	64.4	39.0
35–39	29.4	31.2	33.2	64.4	45.7	30.4	32.7	39.0	71.7	42.4
40–44	23.9	25.9	23.8	49.7	48.2	29.3	32.0	31.1	63.1	46.4
45–49	14.9	16.7	20.6	37.3	39.9	18.3	20.5	28.8	49.3	37.1
Marital status										
Married/in union	25.7	27.3	34.6	61.9	41.5	--	--	--	--	--
Not married	12.2	12.7	8.0	20.7	58.9	--	--	--	--	--
Unmarried sexually active	31.2	33.7	35.3	69.0	45.2					
Parity										
0–1	10.6	11.4	15.6	27.0	39.1	16.1	17.3	28.7	46.0	35.0
2–3	29.8	31.0	29.0	60.0	49.7	29.3	30.6	33.5	64.1	45.7
4 or more	26.5	28.1	33.1	61.3	43.2	28.2	30.2	38.2	68.4	41.3
Residence										
Urban	25.7	27.1	21.7	48.9	52.7	31.3	33.2	32.8	66.0	47.5
Rural	19.8	20.9	26.3	47.2	41.9	24.4	25.9	35.1	61.0	40.0
Education										
Never attended	11.9	12.6	35.6	48.2	24.7	12.8	13.5	44.1	57.6	22.2
Primary	21.0	22.0	27.8	49.8	42.2	24.9	26.1	36.0	62.1	40.1
Secondary	25.0	26.6	15.7	42.2	59.2	36.7	39.4	25.0	64.4	56.9
Technical/Vocational	20.0	26.9	16.2	43.1	46.4	29.8	38.6	25.1	63.8	46.7
University	32.7	32.7	14.0	46.7	70.0	40.3	40.3	23.0	63.2	63.7
Wealth quintile										
Lowest	12.6	12.7	33.4	46.1	27.2	15.5	15.8	42.3	58.0	26.8
Lower	18.7	19.4	30.3	49.7	37.6	21.3	22.1	38.7	60.8	35.0
Middle	22.3	23.0	23.1	46.1	48.5	26.7	27.5	30.9	58.4	45.7
Higher	22.6	24.0	23.5	47.5	47.5	29.3	31.1	34.3	65.4	44.8
Highest	26.9	29.7	18.5	48.1	55.9	35.0	39.1	27.5	66.6	52.5
Region										
Central	24.4	26.9	20.3	47.1	51.8	30.3	34.2	29.0	63.1	48.0
Eastern	18.5	19.1	30.1	49.2	37.6	22.8	23.3	40.7	64.0	35.7
Northern	15.2	15.2	30.9	46.1	32.9	17.5	17.5	39.9	57.4	30.5
Western	25.3	26.9	20.4	47.3	53.5	32.3	34.5	27.9	62.4	51.8

Unintended Births

Pregnancies may occur at a time when women and their partners either did not want (additional) children or wanted to delay the next birth. This indicator is based on responses to the question, “At the time you became pregnant, did you want to become pregnant then, did you want to wait until later, or did you not want to have any/any more children at all?” It is measured as the percentage of women who gave birth in the last five years or who are currently pregnant reporting whether their most recent or current pregnancy was wanted then, wanted later, or not wanted at all.

Table F5 shows unintended births among women ages 15 to 49 with one or more births. Among all women with at least one birth, 52.0% reported that their last or current pregnancy was intended. Twenty-nine percent wanted their pregnancy to be timed later, and 18.6% did not want any additional children. Mistimed pregnancies were higher among women younger than 35 years old, whereas unwanted pregnancies were higher among women aged 35 and older. Of the women from the poorest households, 56.5% reported that their last pregnancy was unintended (mistimed or unwanted), compared to 36.4% of women from the wealthiest households. Women from the Northern region (61.9%), those with the highest parity (55.6%), and those who never attended school (64.4%) had the highest proportion of unwanted or mistimed pregnancies. It is worth noting that the proportions of mistimed and unwanted pregnancies were nearly equal for women in urban and rural areas. These observations did not differ among married women with at least one birth.

Figure F5. Percentage distribution of all women who reported last or current pregnancy was wanted then, wanted later or not wanted at all, by wealth quintile

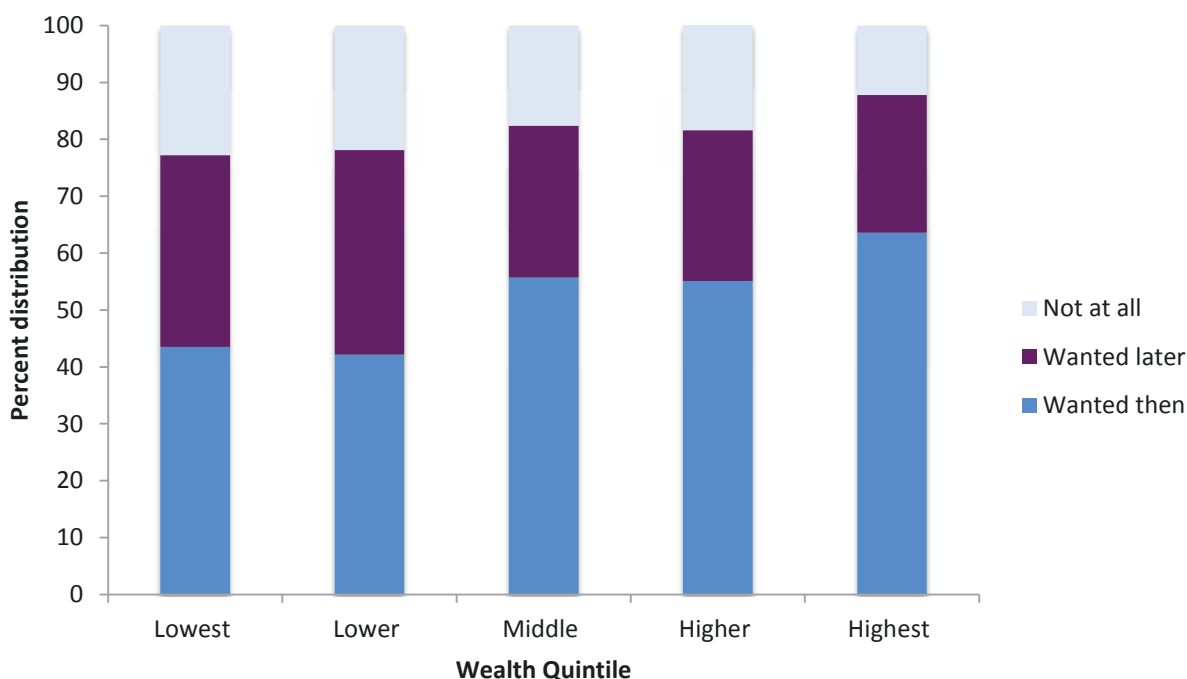


Table F5. Unintended births among women ages 15 to 49 with one or more births: Percent distribution reporting last or current pregnancy wanted then, wanted later or not wanted at all, by marital status and background characteristics

	All women with 1 or more births (n = 2,092)				Married women with 1 or more births (n = 1,772)			
	Wanted then	Wanted later	Not at all	Total	Wanted then	Wanted later	Not at all	Total
Total	52.0	29.4	18.6	100.0	53.8	29.1	17.1	100.0
Age group								
15–19	46.7	34.9	18.4	100.0	56.1	32.2	11.7	100.0
20–24	56.0	32.5	11.5	100.0	57.5	32.7	9.8	100.0
25–29	57.5	31.1	11.4	100.0	58.5	30.5	11.1	100.0
30–34	50.3	28.9	20.8	100.0	52.0	29.4	18.7	100.0
35–39	44.3	27.9	27.8	100.0	45.7	27.7	26.6	100.0
40–44	44.0	14.7	41.3	100.0	43.5	14.4	42.1	100.0
45–49	40.9	8.4	50.7	100.0	42.6	6.2	51.2	100.0
Marital status								
Married or in union	53.8	29.1	17.1	100.0	--	--	--	--
Not married	41.9	31.2	26.9	100.0	--	--	--	--
Unmarried sexually active	44.2	30.8	25.0	100.0	--	--	--	--
Parity								
0–1	58.7	28.2	13.1	100.0	66.1	25.0	8.9	100.0
2–3	58.4	31.3	10.3	100.0	59.2	32.2	8.7	100.0
4 or more	44.4	28.6	27.0	100.0	45.7	28.4	25.9	100.0
Residence								
Urban	52.5	29.2	18.3	100.0	53.7	29.9	16.3	100.0
Rural	51.8	29.5	18.7	100.0	53.8	28.9	17.3	100.0
Education								
Never attended	45.6	26.3	28.2	100.0	46.3	25.5	28.2	100.0
Primary	49.0	31.3	19.7	100.0	51.3	30.8	17.9	100.0
Secondary	60.0	29.0	11.1	100.0	61.8	29.4	8.9	100.0
Technical/Vocational	77.0	17.9	5.1	100.0	76.2	19.4	4.4	100.0
University	79.8	10.1	10.1	100.0	80.1	11.2	8.7	100.0
Wealth quintile								
Lowest	43.5	33.7	22.8	100.0	48.1	31.6	20.3	100.0
Lower	42.2	35.9	21.9	100.0	43.9	37.0	19.1	100.0
Middle	55.7	26.7	17.6	100.0	57.8	25.4	16.9	100.0
Higher	55.1	26.5	18.5	100.0	55.0	26.6	18.4	100.0
Highest	63.6	24.2	12.2	100.0	64.5	24.7	10.8	100.0
Region								
Central	60.4	26.8	12.9	100.0	62.1	26.9	11.0	100.0
Eastern	49.5	27.4	23.1	100.0	51.9	27.1	21.1	100.0
Northern	38.1	38.1	23.8	100.0	40.6	37.8	21.7	100.0
Western	58.9	26.8	14.3	100.0	60.4	25.8	13.7	100.0

Method Chosen by Self or Jointly

Following quality counseling by the provider, contraceptive users should be able to decide on the type of method they will use. This indicator, method chosen by self or jointly, is based on responses by women regarding who made the final decision about the method obtained at the last visit to a family planning provider—the woman herself, the provider, her partner, the woman and the provider, or the woman and her partner. As a measure of service quality, the preferred responses are that the woman alone or her and her provider or partner made the final decision.

Table F6 shows percent distribution of women ages 15 to 49 who used contraception in the past 12 months reporting on who decided on their contraceptive method, by background characteristics. Fifty-nine percent of users decided on their most recent contraceptive method themselves and 31.5% decided with their partner or provider. One in ten women had no say in the decision of which contraceptive method they used. Women in urban areas and unmarried women were the most likely to decide themselves (69%) and women in the lowest wealth quintile (50.6%) and in the Northern region (50.4%) were least likely to decide on their own. Women with no education (14.7%) and those in the lowest wealth quintile (12.2%) were most likely to have no say in their decisions compared to other women.

Figure F6. Who decided method obtained among all users in the past 12 months (n = 1,014)

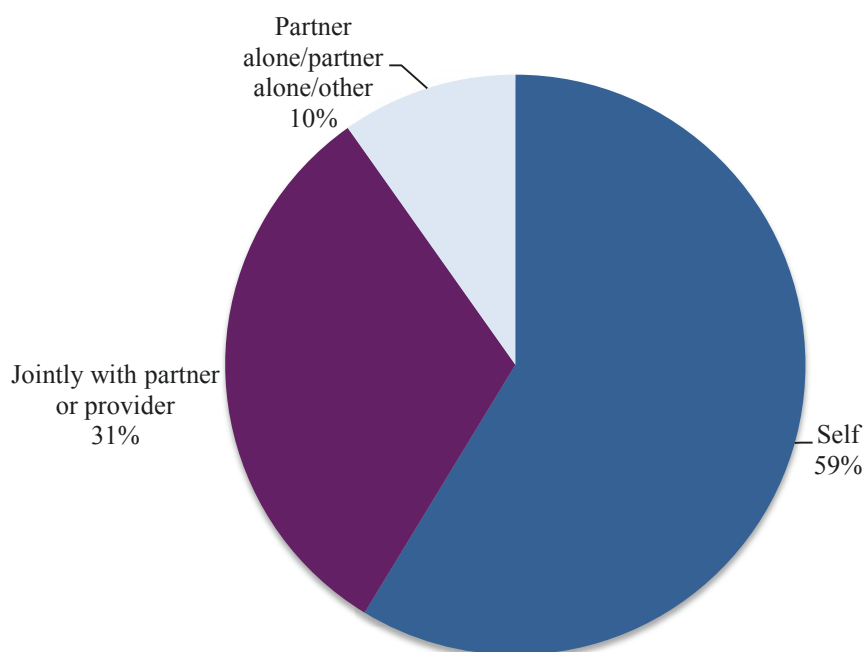


Table F6. Percent distribution of women ages 15 to 49 who used contraception in the past 12 months reporting on who decided on the contraceptive method, by background characteristics

Background characteristics	Self	Jointly with partner or provider	Provider alone/partner alone/other	Total
Total (n = 1,014)	58.7	31.5	9.8	100.0
Age group				
15–19	48.6	43.0	8.5	100.0
20–24	55.7	34.7	9.6	100.0
25–29	59.5	30.2	10.3	100.0
30–34	64.0	27.0	8.9	100.0
35–39	63.3	27.8	8.9	100.0
40–44	54.7	30.8	14.5	100.0
45–49	60.6	35.0	4.3	100.0
Marital status				
Married	56.0	33.5	10.5	100.0
Not married	69.4	23.9	6.7	100.0
Unmarried sexually active	60.9	31.8	7.4	100.0
Parity				
0–1	51.2	41.6	7.2	100.0
2–3	62.8	27.5	9.7	100.0
4 or more	59.4	29.6	11.1	100.0
Residence				
Urban	69.0	22.5	8.5	100.0
Rural	55.4	34.4	10.2	100.0
Education				
Never attended	52.8	32.6	14.7	100.0
Primary	58.1	32.0	10.0	100.0
Secondary	59.7	29.9	10.4	100.0
Technical/Vocational	67.8	30.3	2.0	100.0
University	63.3	36.8	0.0	100.0
Wealth quintile				
Lowest	50.6	37.2	12.2	100.0
Lower	56.4	32.6	11.1	100.0
Middle	61.1	27.8	11.1	100.0
Higher	59.3	30.0	10.7	100.0
Highest	60.9	32.6	6.5	100.0
Region				
Central	61.7	25.7	12.6	100.0
Eastern	54.9	32.3	12.8	100.0
Northern	50.4	43.8	5.8	100.0
Western	62.8	31.2	6.1	100.0

Paying for Contraceptive Services

Contraceptive services are often highly subsidized by the government or other sources of financing, but clients may still pay significant amounts out of pocket. Monitoring the costs incurred by women, particularly by wealth quintile, shows equity of access to contraception. Similarly, monitoring costs for particular groups—young women, higher parity women, less educated women or rural women—may also inform decisions about extending subsidies to enable better contraceptive access. The PMA2020 survey asked women who were recent or current users, “In the last 12 months, have you paid any fees for family planning services (including the most recent/current method)?”

Table F7a shows number of users who paid for services, by average price and method. The most expensive method was sterilization, with an average fee of approximately 101.55USD (284,235.10 Uganda Shillings), while the least expensive was injectables, with an average fee of 2.20USD (6,165.46 Uganda Shillings). The most expensive method also had the highest variability, while the least expensive had the least variability.

Table F7b shows the percentage of women aged 15 to 49 who used a modern contraceptive method in the past 12 months and paid fees for services, by background characteristics. Overall, 45.4% of recent or current users in Uganda reported paying fees for family planning services in the past 12 months. Compared to other women, teenage women (ages 15 to 19) and women with zero or one child (50.6%) were more likely to pay for family planning services (51.3%), as were women living in urban areas (55.3%) when compared to rural women (42.1%). Fifty-five percent of users from the households in the richest wealth quintile paid fees, compared to 35.6% from the poorest households.

Table F7a. Number of users who paid for services, by average price and method

Recent Method	Number of users	Mean fees paid (value in UgSh)	Standard Deviation (value in UgSh)	Median fees paid (value in UgSh)
Sterilization	7	284,235.10	3671,479.80	150,000.00
Implants	24	10,744.68	12,099.17	3,000.00
IUD	11	9,559.83	13,287.59	5,000.00
Injectables	332	6,165.46	8,388.53	3,000.00
Pill	62	17,613.47	101,691.10	3,000.00
EC	3	11,714.99	26,289.45	600.00
Condom	25	13,942.26	13,942.26	9,000.00
LAM	1	1,000.00	--	1,000.00
Other traditional	4	6,895.98	11,270.49	500.00

Table F7b. Percentage of women ages 15 to 49 who used a modern contraceptive method in the past 12 months and paid fees for services, by background characteristics

Background characteristics	All women who used in past 12 months (n = 1,028)	All married women who used in past 12 months (n = 818)
Total	45.4	44.8
Age group		
15–19	51.3	44.0
20–24	49.6	50.0
25–29	49.7	50.3
30–34	46.1	45.8
35–39	39.2	41.1
40–44	25.6	23.3
45–49	48.6	44.8
Marital status		
Married or in union	44.8	--
Not married	47.8	--
Unmarried, sexually active	48.6	--
Parity		
0–1	50.6	49.8
2–3	48.8	48.9
4 or more	40.4	40.1
Residence		
Urban	55.3	56.5
Rural	42.1	41.4
Education		
Never attended	34.6	36.3
Primary	43.4	42.5
Secondary	53.7	53.6
Technical/Vocational	32.6	32.3
University	49.8	47.6
Wealth quintile		
Lowest	35.6	37.1
Lower	37.9	39.5
Middle	44.5	40.1
Higher	42.5	39.7
Highest	55.7	57.6
Region		
Central	51.0	51.3
Eastern	43.8	43.0
Northern	40.6	39.7
Western	42.9	42.1

Method Information Index

Provider counseling on family planning is an important indicator of quality of services. Recent users (those using in the past 12 months, including current users) were asked about the information they received at their last family planning visit. They responded yes or no to the following questions:

- Were you told by the family planning provider about methods of family planning other than the most recent/current method that you could use?
- When you obtained your most recent/current method, were you told by the provider about side effects or problems you might have with a method to delay or avoid getting pregnant?
- Were you told what to do if you experienced side effects or problems?

Table F8 shows percent of recent/current users who reported whether their provider informed them about other methods, side effects and, if informed of side effects, what to do, by marital status and background characteristics, in the past 12 months. Sixty percent of recent or current users reported being told by their provider of alternative methods, but only about half (51.0%) were informed about side effects. Eighty-five percent were told what to do if they experienced side effects. A higher percentage of married or rural women were informed about other methods, side effects and what to do if they experienced side effects, compared to unmarried or urban women.

Figure F8. Percentage of all recent/current users who received information about other methods, side effects and, if informed about side effects, what to do, by age

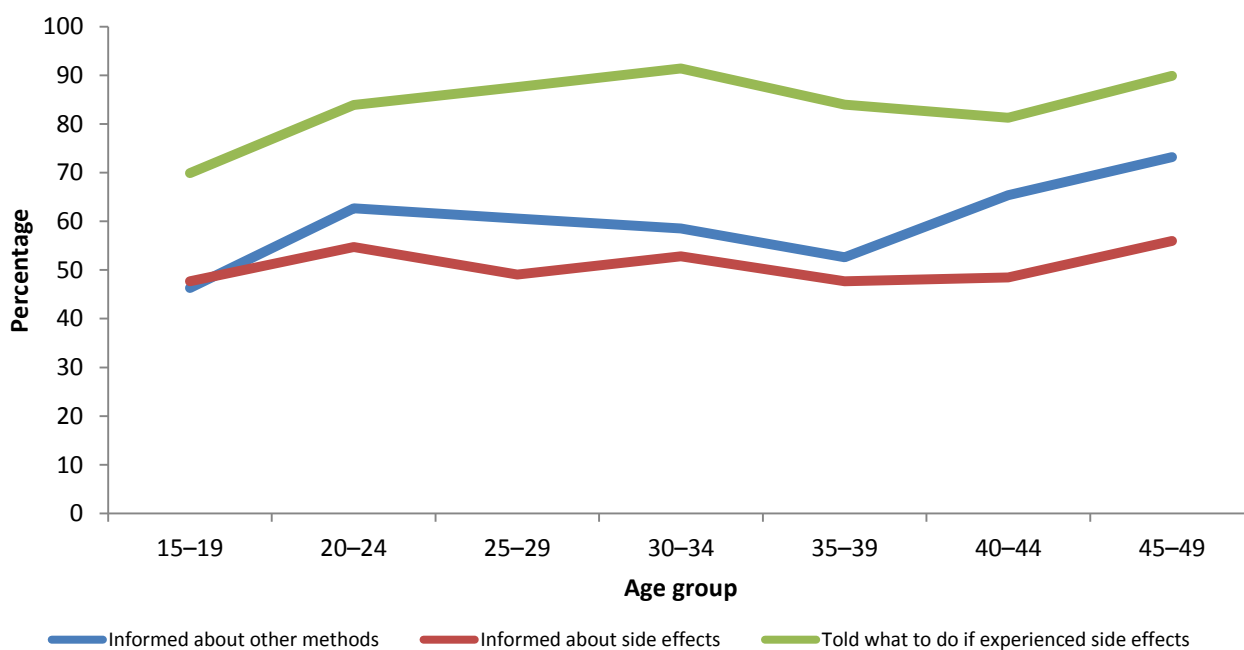


Table F8. Percent distribution of recent/current users who reported whether provider informed them about other methods, side effects and, if informed of side effects, what to do, by marital status and background characteristics in the past 12 months

Background characteristics	Informed about other methods		Informed about side effects		Told what to do if experienced side effects	
	All users (n = 1,028)	Married users (n = 818)	All users (n = 977)	Married users (n = 775)	All users (n = 513)	Married users (n = 427)
Total	59.5	61.2	50.9	52.7	85.2	88.6
Age group						
15–19	46.3	55.6	47.7	49.4	69.9	84.8
20–24	62.7	64.9	54.7	56.9	83.9	90.3
25–29	60.6	60.3	49.1	49.0	87.6	89.0
30–34	58.5	59.7	52.8	55.4	91.4	91.9
35–39	52.6	53.5	47.7	49.9	84.0	83.4
40–44	65.4	65.6	48.5	50.7	81.3	83.9
45–49	73.2	79.6	56.0	63.7	89.9	94.6
Marital status						
Married or in union	61.2	--	52.7	--	88.6	--
Not married	52.7	--	43.9	--	69.2	--
Unmarried, sexually active	54.0	--	46.5	--	65.8	--
Parity						
0–1	52.0	57.8	48.8	52.6	79.6	90.9
2–3	60.1	58.4	50.4	50.4	84.2	86.0
4 or more	62.8	64.4	52.3	54.4	88.4	89.6
Residence						
Urban	52.1	53.0	46.8	50.0	81.8	85.4
Rural	61.9	63.6	52.3	53.6	86.2	89.5
Education						
Never attended	58.5	59.0	53.6	57.9	81.9	83.7
Primary	61.2	63.2	52.0	53.7	87.2	89.4
Secondary	58.3	59.6	50.0	50.3	82.7	88.6
Technical/Vocational	54.9	54.1	39.2	41.7	80.9	86.3
University	48.6	51.8	46.3	56.0	81.5	89.5
Wealth quintile						
Lowest	67.4	67.8	63.9	70.3	88.8	87.8
Lower	67.6	68.5	58.7	59.8	82.3	86.5
Middle	59.8	63.0	45.4	44.2	91.4	97.0
Higher	55.7	57.3	47.5	47.7	84.5	89.6
Highest	55.4	56.8	48.2	51.4	81.8	85.1
Region						
Central	48.9	49.6	44.5	45.4	79.6	83.4
Eastern	52.8	54.2	41.0	45.3	83.1	84.3
Northern	86.5	86.3	72.2	74.0	90.6	92.9
Western	63.8	66.8	55.4	55.3	87.7	93.1

Satisfaction with Provider

Provider performance, from the client's perspective, is an important indicator of quality of care. Clients are often subjective, however, in their assessments. Nonetheless, reported satisfaction with a provider can reveal clients' ability to express their preferences. The PMA2014/Uganda survey gauged provider satisfaction using two questions, and the combination of responses was used to gauge overall satisfaction. The following questions were asked of recent/current contraceptive users:

- Would you return to this provider?
- Would you refer your relative or friend to this provider/facility?

Table F9 shows the percent distribution of recent/current users who would return, would refer a friend/relative to the provider, or who would return *and* refer a friend/relative to the provider, by background characteristics. A total of 951 women provided data for this indicator. Overall, 86.1% of all recent/current users would return to their provider, 87% would refer their relative or friend to the provider/facility, and 80.7% would return and also refer a friend/relative for services. A higher percentage of women in rural compared to urban areas reported that they would return, refer a relative/friend or return and refer relative/friend. Older women (aged 45 to 49) had the highest service satisfaction with over 90% reporting positively on all indicators of satisfaction.

Table F9. Percentage of recent/current users who would return, would refer or would return and refer friend/relative to provider, by background characteristics

Background characteristics	Percent who would return to provider	Percent who would refer relative/friend	Percent who would return and refer friend/relative
Total (n = 951)	86.1	87.0	80.7
Age group			
15–19	81.3	83.0	76.3
20–24	86.0	89.4	82.1
25–29	89.5	87.8	84.6
30–34	85.7	84.6	78.3
35–39	82.6	83.5	74.8
40–44	83.1	88.6	78.1
45–49	95.0	94.4	92.8
Marital status			
Married or in union	86.9	88.0	81.6
Not married	82.9	83.2	77.0
Unmarried sexually active	83.4	85.8	78.5
Parity			
0–1	85.8	85.9	81.7
2–3	86.9	88.4	82.5
4 or more	85.6	86.4	78.7
Residence			
Urban	81.9	80.3	73.0
Rural	87.5	89.2	83.2
Education			
Never attended	76.1	79.1	69.0
Primary	88.3	88.4	81.9
Secondary	85.8	87.9	82.5
Technical/Vocational	92.9	88.4	88.4
University	71.2	74.7	67.3
Wealth quintile			
Lowest	83.2	85.3	76.2
Lower	86.9	87.5	81.6
Middle	86.1	86.2	78.3
Higher	88.2	88.7	82.9
Highest	84.8	86.4	81.5
Region			
Central	85.6	88.2	81.8
Eastern	85.6	88.2	80.7
Northern	88.1	90.6	84.2
Western	85.9	82.7	77.5

Visit by a Health Worker Who Talked About Family Planning

PMA2020 measures the proportion of women aged 15 to 49 who reported being visited by a health worker who discussed family planning in the past 12 months. Specifically, women responded to the following question:

- ≠ “In the last 12 months, were you visited by a health worker who talked to you about family planning?”

Table F10 shows the percent distribution of women aged 15 to 49 who reported receiving family planning information from a health worker in the past 12 months, by marital status and background characteristics. Among all women, 16.9% reported being visited by a health worker at home who discussed family planning in the past 12 months, while among married women specifically, 19.2% reported such similar visits. Health worker home visits were more common in rural enumeration areas (17.2%), among women with parity of four or more (20.2%), women in lower wealth quintiles (19.9%), as well as in the Eastern (21.6%) and Northern (21.8%) regions.

Figure 10. Percentage of all women ages 15 to 49 who reported receiving family planning information during a visit from a health worker in the past 12 months, by wealth quintile

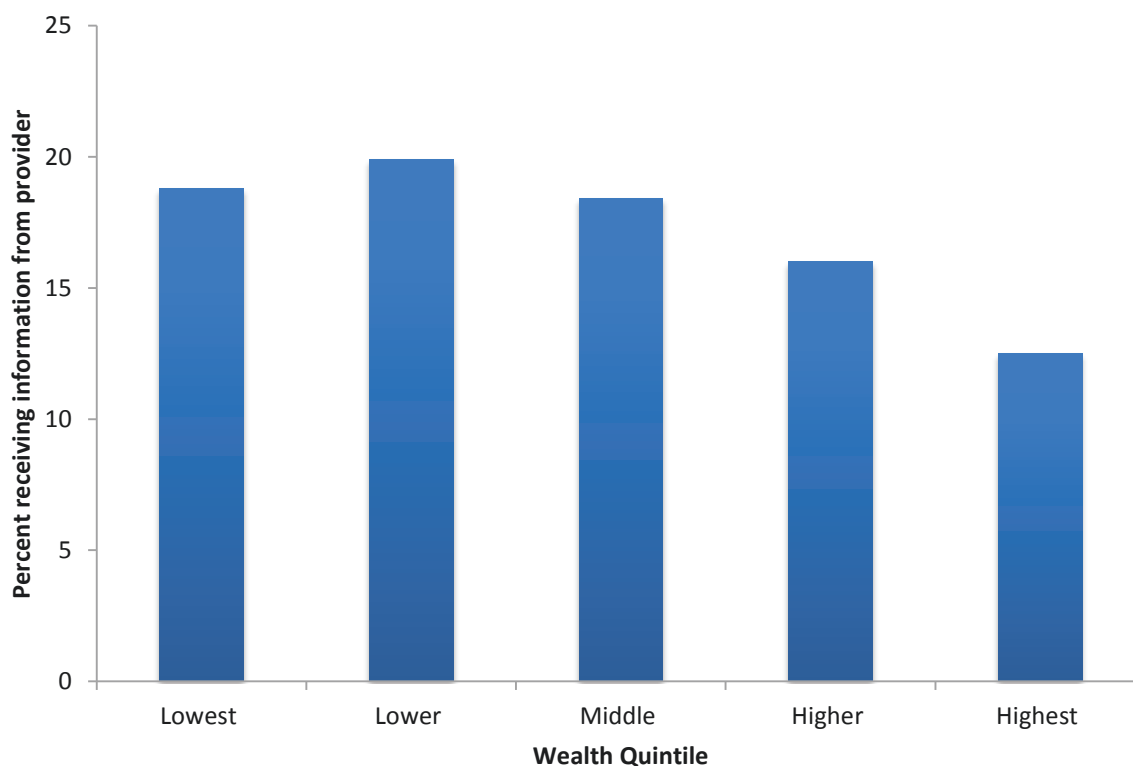


Table F10. Percent distribution of women aged 15 to 49 who reported receiving family planning information from a health worker in the past 12 months, by marital status and background characteristics

Background characteristics	All women (n = 3,719)	Married women (n = 2,406)
Total	16.9	19.2
Age group		
15–19	12.6	16.8
20–24	17.3	19.0
25–29	20.9	22.0
30–34	17.7	18.5
35–39	18.6	20.1
40–44	14.9	16.0
45–49	15.7	17.2
Marital status		
Married or in union	19.2	--
Not married	12.6	--
Unmarried sexually active	12.9	--
Parity		
0–1	12.8	15.4
2–3	18.5	18.9
4 or more	20.2	21.2
Residence		
Urban	15.6	19.3
Rural	17.2	19.2
Education		
Never attended	20.4	23.1
Primary	17.2	19.8
Secondary	14.6	15.1
Technical/Vocational	17.3	16.6
University	11.3	8.9
Wealth quintile		
Lowest	18.8	23.0
Lower	19.9	21.7
Middle	18.4	21.0
Higher	16.0	18.0
Highest	12.5	12.6
Region		
Central	9.3	10.6
Eastern	21.6	24.3
Northern	21.8	24.7
Western	15.2	16.2

Total Fertility Rate and Adolescent Fertility Rate

Total fertility rate (TFR) is the number of children who would be born to a woman if she were to pass through reproductive years bearing children according to the current schedule of age-specific fertility rates (ASFR). TFR is sometimes referred to as a synthetic rate because it does not represent the actual experience of a cohort of women. It is calculated as follows:

$$\text{Total fertility rate} = 5 \sum \text{ASFR}_a$$

Where ASFR_a is the age-specific fertility rate for women in age group A. The ASFR for group A is the number of live births to women in age group A, divided by the total number of women in age group A.

The adolescent fertility rate is the ASFR for women of ages 15 to 19, which is a core FP2020 indicator and also a tracking indicator for Millennium Development Goal 5 target 5B: achieving universal access to reproductive health. Too-early childbearing carries the risk of adverse health and social outcomes for the young mother and newborn. Low or near-zero adolescent fertility rates are protective for young females from a public health standpoint.

The PMA2014/Uganda estimates are based on a two-year period before the survey, whereas the Uganda Demographic and Health Survey (UDHS) 2011 fertility rates are based on a three-year period before the survey. The 2014 ASFRs are adjusted using the age-specific multiple birth percentages for the five-year period before the UDHS 2011.

Table F11. Age-specific and total fertility rates among women aged 15 to 49, by residence: UDHS 2011 and PMA2014/Uganda

Age group	UDHS 2011			PMA2014/Uganda		
	Urban	Rural	Total	Urban	Rural	Total
15–19	0.091	0.146	0.134	0.103	0.148	0.139
20–24	0.205	0.350	0.313	0.222	0.275	0.260
25–29	0.194	0.318	0.291	0.178	0.308	0.280
30–34	0.171	0.248	0.232	0.174	0.255	0.240
35–39	0.087	0.187	0.172	0.195	0.171	0.175
40–44	0.016	0.082	0.074	0.041	0.066	0.063
45–49	0.002	0.026	0.023	0.084	0.013	0.023
TFR	3.8	6.8	6.2	4.982	6.182	5.906

Table F11 shows the age-specific and total fertility rates among women aged 15 to 49, by residence, comparing rates from UDHS 2011 and PMA2014/Uganda. TFR was 5.9 in PMA2014/Uganda compared to 6.2 in UDHS 2011. PMA2014/Uganda's urban TFR of 4.98 was higher than that of UDHS 2011 (urban TFR of 3.8). However, PMA2014/Uganda's rural TFR of 6.18 was lower than that of UDHS 2011 (rural TFR of 6.8).

The difference between the PMA2014 and UDHS 2011 values of urban TFR may be explained by the higher ASFR for women aged 35 and older in the PMA2014 survey. Conversely, the lower rural TFR in PMA2014 compared to UDHS 2011 may be explained by the lower ASFR for women aged 35 or older in the PMA2014 survey.

The adolescent fertility rate (for women aged 15 to 19) in UDHS 2011 was 134 per 1000 compared to 139 per 1000 in PMA2014. The adolescent fertility rate in rural areas was similar between UDHS 2011 (146 per 1000) and PMA2014 (148 per 1000). However, PMA2014 recorded a higher urban adolescent fertility rate (103 per 1000) compared to UDHS 2011 (91 per 1000).

Appendix

Appendix A. Persons Involved in the PMA2014/Uganda Survey

Resident Enumerators:

Wambani	Esther	Nakanwagi	Rashidah	Karungi	Racheal
Tusiime	Irene	Nakamatte	Sarah	Kagoya	Eunice
Tukashaba	Annita	Nakabirye	Scovia	Isiko	Racheal
Tugumisirize	Joventa	Najjuuko	Prossy	Imuceri	Debulah
Teefe	Mariam	Naigaga	Josephine	Harriet	Kisakyamaria
Teddy	Namusisi	Nabwire	Margret	Hamidah	Rashidah
Syeunda	Lilian	Nabukera	Juliet	Gimogoi	Sandra
Ruth	Nakyejwe	Nabirye	Christine	Dawa	Sauda
Paculal	Comfort	Nabimanya	Hope	Candiru	Beatrice
Nyirazikwiye	Sarah	Nabalayo	Sheila	Businge	Jackline
Nume	Sharon	Nabagala	Caroline	Birungi	Sarah
Niransaba	Agnes	Mwije	Dinah	Bangi	Viola
Ninsiima	Auleria	Musinguzi	Domitira	Bajwaha	Alice
Ngole	Osire	Mulindwa	Maxy	Awor	Mary
Neema	Bernadette	Mukhaye	Christine	Awino	Winny
Natukunda	Christine	Mudondo	Stella	Auma	Betty
Nassuna	Suzan	Mubeezi	Ruth	Aturinda	Ireen
Nasia	Fatuma	Moru	Benah	Atimango	Francisca
Nantongo	Zaina	Mayimba	Grace	Asio	Proscovia
Nantongo	Jennifer	Masamba	Stella	Asinduru	Loyce
Nankya	Nusula	Mabangi	Mirika	Asiimwe	Miriam
Nangonzi	Assumpta	Luwedde	Passy	Asasira	Ronah
Namutosi	Peninah	Loono	Rosetta	Apiyo	Irene
Nampijja	Specioza	Lillian	Nabanghindde	Apio	Margret
Nampeera	Phiona	Layet	Susan	Angucia	Jane
Namirembe	Joy	Kyoshabire	Molly	Angella	Sarah
Nambwayo	Sulaitina	Kuteesa	Rebecca	Amoding	Juliet
Nambozo	Jackline	Kushaba	Eunice	Amito	Irene
Nalukwago	Assumpta	Kokoi	Emmanuela	Alum	Sharon
Nalukenge	Rose	Kizito	Libby	Akullo	Caroline
Nakumoro	Harriet	Kiyai	Joyce	Akello	Winnie
Nakasango	Haawa	Kemirembe	Jacqueline	Akello	Proscovia
Nakanwagi	Rashidah	Kemigisa	Dorothy	Akello	Proscovia
Nakamatte	Sarah	Kawuma	Fima	Teresia	Bwire

Akatukwasa	Annet	Adiaka	Cathy
Akankwasa	Catherine	Acaa	Alice
Aisha	Ali	Aboce	Pamela
Adur	Christine	Nakanwagi	Rashidah
Adoch	Paska	Nabagala	Caroline
Adoch	Paska	Nampijja	Specioza

Field Supervisors:

Prossy	Aliwebwa	Otudeku	Ezra	Kyanjo	Erimiah
Brenda	Nakimbugwe	Leo	Amanya	Mande	Sulait
*Mabel	Luzze	Kashaija	Mark	Guma	Victor
*Hassard	Sempeera	Wilfred	Olwortho		
Omar	Kigenyi	Okello	Gerald		
*Christine	Muhumuza	Sewannonda	Andrew		

** Also Core Central team members*

Central team:

Makumbi	Fredrick
Simon	Kibira
Vivian	Zalwango
Kagongwe	Samuel

Appendix B. Sample Error Estimates Table

Table A.1. List of indicators for sampling errors, PMA2014/Uganda

Variable	Estimate	Base population
ASFR for ages 15 to 19	Rate	All adolescents ages 15–19
Currently using a modern method	Proportion	All women ages 15–49 Married women ages 15–49
Currently using a traditional method	Proportion	All women ages 15–49 Married women ages 15–49
Currently using any contraceptive method	Proportion	All women ages 15–49 Married women ages 15–49
Currently using injectables	Proportion	All women ages 15–49 Married women ages 15–49
Currently using condoms	Proportion	All women ages 15–49 Married women ages 15–49
Currently using implants	Proportion	All women ages 15–49 Married women ages 15–49
Chose method by self or jointly in past 12 months	Proportion	All women ages 15–49 Married women ages 15–49
Paid fees for family planning services in past 12 months	Proportion	All women ages 15–49 Married women ages 15–49
Informed by provider about other methods	Proportion	All women ages 15–49 Married women ages 15–49
Informed by provider about side effects	Proportion	All women ages 15–49 Married women ages 15–49
Satisfied with provider: Would return and refer friend/relative to provider	Proportion	All women ages 15–49 Married women ages 15–49
Visited by health worker who talked about family planning information in past 12 months	Proportion	All women ages 15–49 Married women ages 15–49

Table A.2a. Sampling errors, PMA2014/Uganda

Variable	Value[R]	Standard error	Confidence interval	
			R-2SE	R+2SE
ASFR for ages 15 to 19	0.139	0.014	0.119	0.161
All women ages 15 to 49				
Currently using a modern method	0.210	0.013	0.185	0.235
Currently using a traditional method	0.012	0.002	0.007	0.017
Currently using any contraceptive method	0.222	0.013	0.196	0.248
Currently using injectables	0.122	0.009	0.103	0.141
Currently using condoms	0.213	0.003	0.015	0.027
Currently using implants	0.026	0.004	0.018	0.034
Chose method by self or jointly in past 12 months	0.902	0.022	0.859	0.945
Paid fees for family planning services in past 12 months	0.454	0.031	0.393	0.515
Informed by provider about other methods	0.595	0.027	0.541	0.648
Informed by provider about side effects	0.509	0.026	0.457	0.561
Satisfied with provider: Would return and refer friend/relative to provider	0.806	0.021	0.765	0.848
Visited by health worker who talked about family planning information in past 12 months	0.169	0.017	0.135	0.203

Table A.2b. Sampling errors, PMA2014/Uganda

Variable	Value[R]	Standard error	Confidence interval	
			R-2SE	R+2SE
Married women ages 15 to 49				
Currently using a modern method	0.257	0.016	0.225	0.288
Currently using a traditional method	0.016	0.004	0.008	0.023
Currently using any contraceptive method	0.273	0.017	0.240	0.306
Currently using injectables	0.153	0.012	0.128	0.178
Currently using condoms	0.020	0.004	0.013	0.027
Currently using implants	0.033	0.005	0.023	0.043
Chose method by self or jointly in past 12 months	0.895	0.023	0.848	0.941
Paid fees for family planning services in past 12 months	0.448	0.031	0.386	0.510
Informed by provider about other methods	0.612	0.030	0.553	0.671
Informed by provider about side effects	0.527	0.032	0.463	0.591
Satisfied with provider: Would return and refer friend/relative to provider	0.816	0.023	0.770	0.863
Visited by health worker who talked about family planning information in past 12 months	0.192	0.021	0.151	0.232

Appendix C. PMA2014/Uganda Questionnaires

Household Questionnaire

NO	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIP
IDENTIFICATION						
Please record the following identifying information prior to beginning the interview.						
A	How many times have you visited this household?	1 st time	1			
		2 nd time	2			
		3 rd time.....	3			
B	Your name: Is this your name?	Yes.....	1			
		No.....	0			
	<p>CHECK THE BUTTON NEXT TO THE NAME IF THAT IS YOUR NAME AND SELECT 'YES' HERE. DO NOT CHECK THE BUTTON IF THAT IS NOT YOUR NAME AND SELECT 'NO' HERE (LONG PRESS TO REMOVE RESPONSE NEXT TO THE NAME IF NEEDED).</p> <p>Enter your name below. PLEASE RECORD YOUR NAME:</p> <p><i>ODK will display the name associated with the phone's serial number.</i></p>	Interviewer's Name				
C	<p>CURRENT DATE AND TIME DISPLAYED ON SCREEN</p> <p>Is this date and time correct?</p>	Yes.....	1			Skip to E if Yes
		No.....	0			
D	Record the correct date and time	Date	Month	Day	Year	
		Time	Hour	Minutes	AM/PM	
E	REGION	Southwest	1			
		Central 1	2			
		Central 2	3			
		Kampala	4			
		East Central	5			
		Eastern.....	6			
		Karamoja.....	7			
		North.....	8			
		West Nile.....	9			
		Western.....	10			
F	DISTRICT (SUB-COUNTY)	<i>ODK will populate a list of appropriate districts based on the County selected for HQ E.</i>				

G	DIVISION	<i>ODK will populate a list of appropriate divisions based on the district (sub-county) selected for HQ F.</i>	
H	LOCATION	<i>ODK will populate a list of appropriate locations based on the division selected for HQ G.</i>	
I	ENUMERATION AREA	<i>ODK will populate a list of appropriate enumeration areas based on the location selected for HQ H.</i>	
J	STRUCTURE NUMBER PLEASE RECORD THE NUMBER OF THE STRUCTURE FROM THE HOUSEHOLD LISTING FORM.		
K	HOUSEHOLD NUMBER PLEASE RECORD THE NUMBER OF THE HOUSEHOLD FROM THE HOUSEHOLD LISTING FORM.		
	Check: Have you already sent a form for this structure and household? DO NOT DUPLICATE ANY FORM UNLESS YOU ARE CORRECTING A MISTAKE IN AN EARLIER FORM.	Yes..... 1 No..... 0	
L	Is a member of the household and competent respondent present and available to be interviewed today?	Yes..... 1 No..... 0	Skip to P if No
INFORMED CONSENT			
Find the competent member of the household. Read the following greeting:			
<p>Hello. My name is _____ and I am working for the Makerere University School of Public Health in Uganda, in collaboration with the Ministry of Health and the Uganda Bureau of Statistics. We are conducting a local survey about various health issues. We would very much appreciate your participation in this survey. This information will help us inform the government to better plan health services. Whatever information you provide will be kept strictly confidential and will not be shown to anyone other than members of our survey team.</p> <p>Participation in this survey is voluntary, and if we should come to any question you don't want to answer, just let me know and I will go on to the next question; or you can stop the interview at any time. However, we hope that you will participate in this survey since your views are important.</p> <p>I am going to ask you questions about your family and other household members. We would then like to ask a different set of questions to female members of this household who are between the ages of 15 and 49 years.</p> <p>At this time, do you want to ask me anything about the survey?</p>			
M	Provide a paper copy of the Consent Form to the respondent and explain it. Then, ask: May I begin the interview now?	Yes..... 1 No..... 0	Skip to P if No
	Respondent's signature PLEASE ASK THE RESPONDENT TO SIGN OR CHECK THE BOX IN AGREEMENT OF THEIR PARTICIPATION.	GATHER SIGNATURE: Check box: <input type="checkbox"/>	

O	Interviewer's name PLEASE RECORD YOUR NAME AS A WITNESS TO THE CONSENT PROCESS.		
P	Respondent's first name PLEASE RECORD THE FIRST NAME OF THE RESPONDENT.		

SECTION 1 – Household Roster

I am now going to ask you questions about each usual members of the household or anyone who slept in the house last night.

No	1	2	3	4	5	6	7	8
	First name	Sex	Age (years)	Marital Status	Relationship to head of household	Family ID	Is this person a usual member of the household or has he/she slept in the house last night?	Eligible female respondent
		Male..... 1 Female 2		Married..... 1 Living with a partner 2 Divorced / separated 3 Widow / widower 4 Never Married 5 No response -99	Head..... 1 Wife/Husband 2 Son/Daughter 3 Son/Daughter-in-law 4 Grandchild 5 Parent 6 Parent in law 7 Brother/Sister 8 Other 9 Don't know -88 No response..... -99		Usual member of the household who slept in the house last night 1 Usual member of the household who did not sleep in the house last night 2 Visitor who slept in the house last night 3 No response -99	Yes..... 1 No..... 0 <i>ODK will determine and display eligibility</i>
1								
2								
3								
4								
5								
6								
<i>After recording information for one household member, the following prompt is asked to activate a looping script to record information for another member</i>								
7	Are there any other usual members of your household or persons who slept in the house last night?			Yes..... 1 No 0			Skip to 10 if No	

Section 2 – Household Characteristics

Now I would like to ask you a few questions about the characteristics of your household.

		<u>Yes</u>	<u>No</u>
10	Please tell me about items that your household owns. Does your household have:		
	Electricity?	1	0
	A wall clock?	1	0
	A radio?	1	0
	A black/white television?	1	0
	A color television?	1	0
	A mobile phone?	1	0
	A landline telephone?	1	0
	A refrigerator?	1	0
	A freezer?	1	0
	Electric generator/invertor(s)?	1	0
	A washing machine?	1	0
	A computer?	1	0
	A digital photo camera?	1	0
	A non digital photo camera?	1	0
	A video deck?	1	0
	A DVD/CD?	1	0
	A sewing machine?	1	0
	A bed?	1	0
	A table?	1	0
	A cabinet/cupboard?	1	0
	A bicycle?	1	0
A motorcycle or motor scooter?	1	0	
A car or truck?	-77		
A boat with a motor?	-99		
A boat without a motor?			
None of the above			
No response			
READ OUT ALL TYPES AND SELECT ALL THAT APPLY. SCROLL TO BOTTOM TO SEE ALL CHOICES.			
IF AN ITEM IS REPORTED BROKEN BUT SAID TO BE OUT OF USE ONLY TEMPORARILY, SELECT THE ITEM. OTHERWISE DO NOT SELECT THE ITEM.			

11a	<p>Does this household own any livestock, herds, other farm animals, or poultry?</p> <p>THESE LIVESTOCK CAN BE KEPT ANYWHERE, NOT NECESSARILY ON THE HOMESTEAD.</p>	<p>Yes.....1</p> <p>No.....0</p>	<p>Skip to 12a if No</p>
11b	<p>How many of the following animals does this household own?</p> <p>Cattle (Indigenous)</p> <p>Cows/Bulls</p> <p>Horses, Donkeys, Mules</p> <p>Goats.....</p> <p>Sheep</p> <p>Chickens</p> <p>ZERO IS A POSSIBLE ANSWER. ENTER -88 FOR DO NOT KNOW. ENTER -99 FOR NO RESPONSE.</p> <p>THE HOUSEHOLD CAN KEEP THE LIVESTOCK ANYWHERE, BUT MUST OWN THE LIVESTOCK RECORDED HERE.</p>		
12a	<p>Does this household keep any livestock, herds, other farm animals, or poultry ON THE HOMESTEAD, regardless of who owns these livestock?</p>	<p>Yes..... 1</p> <p>No..... 0</p>	<p>Skip to 13 if No</p>
12b	<p>How many of the following animals does this household keep ON THE HOMESTEAD?</p> <p>The household does not need to own the livestock recorded here.</p> <p>Cattle (Indigenous)</p> <p>Cows/Bulls</p> <p>Horses/Donkeys/Mules</p> <p>Goats.....</p> <p>Sheep</p> <p>Chicken.....</p> <p>THE HOUSEHOLD DOES NOT NEED TO OWN THE LIVESTOCK RECORDED HERE.</p> <p>ZERO IS A POSSIBLE ANSWER. ENTER -88 FOR DO NOT KNOW, -99 FOR NO RESPONSE.</p>		

Section 3 – Household Observation

Please observe the floors, roof and exterior walls

13	Main material of the floor OBSERVE	Natural Floor Earth/Sand 1 Dung 2 Rudimentary Floor Wood Planks 3 Palm/Bamboo 4 Finished Floor Parquet or polished wood 5 Vinyl or Asphalt strips 6 Ceramic Tiles 7 Cement 8 Carpet 9 Other 10 No response -99
14	Main material of the roof OBSERVE	No Roof 10 Natural Roofing Grass/Thatch/Makuti 11 Dung/Mud 12 Rudimentary Roofing Corrugated Iron (Mabati) 21 Tin Cans 22 Finished Roofing Asbestos Sheet 31 Cement 32 Tiles 33 Other 96 No response -99
15	Main material of the exterior walls OBSERVE	No Walls 11 Natural Walls Cane/Palm/Trunks 12 Dirt 13 Rudimentary Walls Bamboo with Mud 21 Stone with Mud 22 Uncovered Adobe 23 Plywood 24 Cardboard 25 Reused Wood 26 Finished Walls Cement 31 Stone with Lime/Cement 32 Bricks 33 Cement Blocks 34 Covered Adobe 35 Wood Planks/Shingles 36 Other 96 No response -99

20	<p>What is the main source of drinking water for members of your household?</p> <p>Piped Water</p> <p> Piped into dwelling/indoor 1</p> <p> Pipe to yard/plot..... 2</p> <p>Public tap/standpipe..... 3</p> <p>Tube well or borehole..... 4</p> <p>Dug Well</p> <p> Protected Well 5</p> <p> Unprotected Well..... 6</p> <p>Water from Spring</p> <p> Protected Spring 7</p> <p> Unprotected Spring 8</p> <p>Rainwater..... 9</p> <p>Tanker Truck 10</p> <p>Cart with Small Tank..... 11</p> <p>Surface water (River / Dam / Lake / Pond / Stream / Canal / Irrigation Channel)..... 12</p> <p>Bottled Water..... 13</p> <p>Sachet Water..... 14</p> <p>No response-99</p> <p>READ OUT HQ19 SELECTIONS ONLY.</p>		
21	<p>What is the main source of water used by your household for other purposes such as cooking and handwashing?</p> <p>Piped Water</p> <p> Piped into dwelling/indoor 1</p> <p> Pipe to yard/plot..... 2</p> <p> Public tap/standpipe..... 3</p> <p>Tube well or borehole..... 4</p> <p>Dug Well</p> <p> Protected Well 5</p> <p> Unprotected Well..... 6</p> <p>Water from Spring</p> <p> Protected Spring 7</p> <p>Rainwater..... 8</p> <p>Tanker Truck 9</p> <p>Cart with Small Tank..... 10</p> <p>Surface water (River / Dam / Lake / Pond / Stream / Canal / Irrigation Channel)..... 11</p> <p>Bottled Water..... 12</p> <p>Sachet Water..... 13</p> <p>No response-99</p> <p>READ OUT HQ19 SELECTIONS ONLY.</p>		

22	<p>QUESTIONS HQ 22 TO HQ 25 WILL REPEAT X TIMES, ONCE FOR EACH WATER SOURCE SELECTED IN HQ 19. THESE SOURCES INCLUDE:</p> <p><i>The ODK software will list all sources selected in HQ 19.</i></p> <p>You mentioned that you use [WATER SOURCE]. At any time of the year, does your family use water from this source for:</p> <p>Drinking.....</p> <p>Cooking.....</p> <p>Livestock.....</p> <p>Gardening / agriculture.....</p> <p>Business venture.....</p> <p>Washing.....</p> <p>No response.....</p> <p><i>The same question will be generated by the ODK software for all water sources selected in HQ19</i></p>		<p><u>Yes</u></p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>-99</p>	<p><u>No</u></p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p>	
23	<p>Is [WATER SOURCE] typically available:</p> <p>All of the year.....</p> <p>Some of the year.....</p> <p>Small part of the year.....</p> <p>READ ALL CHOICES OUT LOUD.</p> <p><i>The same question will be generated by the ODK software for all water sources selected in HQ19</i></p>			<p>1</p> <p>2</p> <p>3</p>	
24	<p>At a time when you expect to have water from [WATER SOURCE], is it usually available?</p> <p>Yes, always.....</p> <p>No, intermittent and predictable.....</p> <p>No, intermittent and unpredictable.....</p> <p><i>The same question will be generated by the ODK software for all water sources selected in HQ19</i></p>			<p>1</p> <p>2</p> <p>3</p>	

25	<p>How long does it take to go to [WATER SOURCE], get water, and come back?</p> <p>ZERO IS A POSSIBLE ANSWER. CONVERT ANSWER TO MINUTES INCLUDES WAITING TIME IN LINE. ENTER -88 FOR DO NOT KNOW, -99 FOR NO RESPONSE.</p> <p><i>The same question will be generated by the ODK software for all water sources selected in HQ19.</i></p>	Minutes			
26	Does your household have a garden?	Yes..... 1 No 0 No response.....-99			
27	<p>Do members of your household use any of the following toilet facilities?</p> <p>Flush/pour flush toilets connected to:</p> <p>Piped sewer system.....</p> <p>Septic tank</p> <p>Elsewhere</p> <p>Unknown / Not sure / Don't know.....</p> <p>Ventilated improved pit latrine</p> <p>Pit latrine with slab</p> <p>Pit latrine without slab</p> <p>Composting toilet</p> <p>Bucket toilet.....</p> <p>Hanging toilet /Hanging latrine</p> <p>Other (please explain):.....</p> <p>No facility / bush / field</p> <p>No response</p> <p>READ OUT ALL TYPES AND CHECK ALL THAT ARE USED. SCROLL TO THE BOTTOM TO SEE ALL CHOICES.</p>		<u>Yes</u> 1 1 1 1 1 1 1 1 1 1 -99	<u>No</u> 0 0 0 0 0 0 0 0 0 0 0	
28	<p>What is the main toilet facility used by members of your household?</p> <p>Flush/pour flush toilets connected to:</p> <p>Piped sewer system.....</p> <p>Septic tank</p> <p>Elsewhere</p> <p>Unknown / Not sure / Don't know.....</p> <p>Ventilated improved pit latrine</p> <p>Pit latrine with slab</p> <p>Pit latrine without slab</p> <p>Composting toilet</p> <p>Bucket toilet.....</p> <p>Hanging toilet /Hanging latrine</p> <p>Other:.....</p> <p>No facility / bush / field</p> <p>No response</p> <p>THE MAIN FACILITY MUST BE SELECTED IN HQ 27.</p>		1 2 3 4 5 6 7 8 9 10 11 12 -99		
	<p>QUESTIONS HQ 29-29b WILL REPEAT X TIMES, ONCE FOR EACH SANITATION FACILITY SELECTED IN HQ 27. THESE</p>				

	FACILITIES INCLUDE: <i>The ODK software will list all sources selected in HQ 27.</i>			
29	How often does your household typically use [TOILET FACILITY TYPE]? REGULAR PRACTICES AT THE HOUSEHOLD ONLY.	Always..... 1 Most of the time..... 2 Occasionally 3 Rarely 4 No response -99		
29b	Do you share this toilet facility with other households or the public? [Select one]	Not shared..... 1 Shared with less than ten households 2 Shared with ten or more households..... 3 Shared with the public 4 No response -99		Skip to HQ30 if not 2
29c	Enter the number of households that share this facility (including your own). [TOILET FACILITY TYPE] MUST BE BETWEEN 2 AND 10. IF 10 OR GREATER, SWIPE BACK TO HQ29b AND CHOOSE “SHARED WITH TEN OR MORE HOUSEHOLDS.” ENTER -99 FOR NO RESPONSE.			
30	How many people within your household regularly use the bush / field at home or at work? THERE ARE X PEOPLE IN THIS HOUSEHOLD. ENTER -88 FOR DO NOT KNOW, -99 FOR NO RESPONSE.	Number of people		
CHECK HQ 3: Are there any household members aged 5 years or under?				Skip to HQ 32 if NO
31	For all children under age five: what methods, if any, does your household use to dispose of children's fecal waste? Children use a latrine / toilet..... Leave waste where it is..... Bury waste in field / yard..... Dispose of waste in latrine / toilet Dispose of waste with rubbish / garbage Dispose of waste with waste water Use it as manure Burn it..... Don't know No response		<u>Yes</u> 1 1 1 1 1 1 1 -88 -99	<u>No</u> 0 0 0 0 0 0 0 0
	DO NOT READ THE POSSIBLE ANSWERS OUT LOUD.			
32	Ask permission to take a photo of the entrance of the house. Did you get consent to take the photo?	Yes.....1 No.....0		Skip to R if No

Thank the respondent for his/her time.

THE RESPONDENT IS FINISHED, BUT THERE ARE STILL TWO MORE QUESTIONS FOR YOU TO COMPLETE OUTSIDE THE HOUSE.

LOCATION AND QUESTIONNAIRE RESULT

Q	<p>Take a GPS point outside near the entrance to the household. Record location when the accuracy is smaller than 6m. GPS COORDINATES CAN ONLY BE COLLECTED WHEN OUTSIDE.</p>	<p><i>Instructions are given directly by the ODK software</i> RECORD LOCATION</p>	
R	<p>Ensure that no people are in the photo</p>	<p><i>Instructions are given directly by the ODK software</i> TAKE PICTURE CHOOSE IMAGE</p>	
S	<p>Record the result of the Household Questionnaire</p>	<p>Completed..... 1 No household member at home or no competent respondent at home at time of visit..... 2 Postponed 3 Refused 4 Partly completed 5 Dwelling vacant or address not a dwelling 6 Dwelling destroyed..... 7 Dwelling not found..... 8 Entire household absent for extended period.... 9</p>	

NO	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIP
IDENTIFICATION						
Please record the following identifying information prior to beginning the interview.						
A	Are you in the correct household? This is the picture of the front of the home taken during the Household Questionnaire. <i>ODK will display the photo taken as part of the Household Questionnaire linked to this Female Questionnaire.</i>	Yes..... 1 No..... 0				
B	How many times have you visited this household to interview this female respondent?	1 st time 1 2 nd time 2 3 rd time..... 3				
C	Your name: Is this your name?	Yes..... 1 No..... 0				
	If not, please record your name: <i>ODK will display the name associated with the phone's serial number</i>					
D	CURRENT DATE AND TIME.. Is this date and time correct?	Yes..... 1 No..... 0				Skip to F if Yes
E	Record the correct date and time.	Date	Day	Month	Year	
		Time	Hours	Minutes	AM/PM	
F	The following information is from the Household Questionnaire. Please review to make sure you are interviewing the correct respondent. <i>ODK will display the County, District (Sub-County), Division, Location, Sub-location, Enumeration Area, Structure Number, and Household Number entered into the Household Questionnaire linked to this Female Questionnaire.</i>					
G	How well acquainted are you with the respondent?	Very well acquainted 1 Well acquainted 2 Not well acquainted 3 Not acquainted 4				
H	Is the respondent present and available to be interviewed today?	Yes..... 1 No..... 0				Skip to M if No

INFORMED CONSENT

Find the woman between the ages of 15-49 associated with this Female Respondent Questionnaire. The interview must have auditory privacy. Read the following greeting:

Hello. My name is _____ and I am working for the Makerere University School of Public Health in Uganda, in collaboration with the Ministry of Health and the Uganda Bureau of Statistics. We are conducting a local survey that asks women about various reproductive health issues. We would very much appreciate your participation in this survey. This information will help us inform the government to better plan health services. The survey usually takes between 15 and 20 minutes to complete. Whatever information you provide will be kept strictly confidential and will not be shown to anyone other than members of our survey team. Participation in this survey is voluntary, and if we should come to any question you don't want to answer, just let me know and I will go on to the next question; or you can stop the interview at any time. However, we hope that you will participate in this survey since your views are important. At this time, do you want to ask me anything about the survey?

I	Provide a paper copy of the Consent Form to the respondent and explain it. Then, ask: May I begin the interview now? WARNING: TO CONDUCT THE SURVEY, THE RESPONDENT MUST SIGN OR TOUCH THE CHECKBOX.	Yes..... 1 No..... 0	Skip to M if No
K	Interviewer's name PLEASE RECORD YOUR NAME AS A WITNESS TO THE CONSENT PROCESS.		
L	Respondent's first name YOU MAY CORRECT THE SPELLING HERE IF IT IS NOT CORRECT, BUT YOU MUST BE INTERVIEWING THE PERSON WHOSE NAME APPEARS IN ODK.		
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
Section 1 – Respondent's Background, Marital Status, HH characteristics			
Now I would like to ask about your background and socioeconomic conditions.			
0	In what month and year were you born?	Month: Year:	
1	How old were you at your last birthday? MUST BE LESS THAN 130. MUST AGREE WITH FQ0.	Year:	
2	What is the highest level of school you attended?	Never Attended..... 0 Primary 1 Post-Primary/Vocational..... 2 Secondary/'A' Level..... 3 College (Middle Level)..... 4 University 5 No response -99	
3	Are you currently married or living together with a man as if married? IF NO, ASK WHETHER THE RESPONDENT IS DIVORCED, SEPARATED, OR WIDOWED.	Yes, currently married 1 Yes, living with a man 2 Not currently in union: Divorced / separated 3 Not currently in union: Widow 4 No, never in union 5 No response -99	Skip to 8 if No, never in union

4	Have you been married or lived with a man only once or more than once?	Only once.....1 More than once2 No response-99	Skip to 5b if Only once	
5a	In what month and year did you start living with your FIRST husband / partner? ENTER JAN 2020 FOR NO RESPONSE.	Month: Year:		
5b	Now I would like to ask about when you started living with your CURRENT OR MOST RECENT husband / partner. In what month and year was that? ENTER JAN 2020 FOR NO RESPONSE.	Month: Year:		
	CHECK 3: Currently married/cohabitating?	Yes.....1 No0	Skip to 8 if No	
6	Does your husband / partner have other wives or does he live with other women as if married?	Yes.....1 No0 Don't know-88 No response.....-99		
7	Is your husband / partner living with you now or is he staying elsewhere?	Living with respondent1 Staying elsewhere2 No response-99		
Section 2 – Reproduction, Pregnancy & Fertility Preferences				
Now I would like to ask about all the births you have had during your life.				
8	How many times have you given live birth? ENTER -88 FOR DO NOT KNOW AND -99 FOR NO RESPONSE. 0 IS A POSSIBLE ANSWER.	Number of live births	Skip to 13 if 0	
	Were all of those live births? IF NO, GO BACK AND CHANGE FQ8 TO RECORD ONLY LIVE BIRTH EVENTS	Yes.....1 No0		
8a	When was your FIRST live birth? PLEASE RECORD THE DATE OF THE FIRST BIRTH. THE DATE SHOULD BE FOUND BY CALCULATING FORWARD OR BACKWARD FROM MEMORABLE EVENTS IF NEEDED. ENTER JAN 2020 FOR NO RESPONSE.	Month	Year	
9	When was your MOST RECENT live birth? PLEASE RECORD THE DATE OF THE LAST BIRTH. THE DATE SHOULD BE FOUND BY CALCULATING BACKWARDS FROM MEMORABLE EVENTS IF NEEDED. ENTER JAN 2020 FOR NO RESPONSE.	Month	Year	Skip to 11 if not in last year and/or FQ8 is 1
10	When did you give birth before the most recent one? PLEASE RECORD THE DATE OF THE BIRTH	Month	Year	

	BEFORE THE LAST. THE DATE SHOULD BE FOUND BY CALCULATING BACKWARDS FROM MEMORABLE EVENTS IF NEEDED. ENTER JAN 2020 FOR NO RESPONSE.			
11	Is your last baby / child still alive?	Yes..... 1 No0 Don't know -88		Skip to 13 if Yes
12	When did your last baby / child die? PLEASE RECORD THE DATE OF THE CHILD'S DEATH. THE DATE SHOULD BE FOUND BY CALCULATING BACKWARDS FROM MEMORABLE EVENTS IF NEEDED. ENTER JAN 2020 FOR NO RESPONSE.	Month	Year	
13	When did your last menstrual period start? IF YOU SELECT DAYS, WEEKS, MONTHS OR YEARS, YOU WILL ENTER A NUMBER FOR X ON THE NEXT SCREEN.	Days ago: Weeks ago: Months ago: Years ago: Menopausal / Hysterectomy 5 Before last birth 6 Never menstruated 7		
14	Are you pregnant now?	Yes..... 1 No0 Unsure.....-88 No response -99		Skip to 16 if No
15	How many months pregnant are you? PLEASE RECORD THE NUMBER OF COMPLETED MONTHS. ENTER -88 FOR DO NOT KNOW AND -99 FOR NO RESPONSE.	Number of months		
	CHECK 14: Currently pregnant?	Yes..... 1 No0 Unsure.....-88 No response -99		16a if no 16b if yes
16a	Now I have some questions about the future. Would you like to have a/another child or would you prefer not to have any / any more children?	Have a/another child 1 No more/prefer no children.....2 Says she can't get pregnant.....3 Undecided / Don't know -88 No response -99		Skip to 17a if 1 and 18 for all other

16b	Now I have some questions about the future.	Have a/another child 1	Skip to 17b if 1
-----	--	------------------------------	------------------

	After the child you are expecting now, would you like to have another child, or would you prefer not to have any more children?	No more/prefer no children.....2 Says she can't get pregnant.....3 Undecided / Don't know-88 No response-99	and 18 for all other
17a	How long would you like to wait from now before the birth of a/another child? IF YOU SELECT MONTHS OR YEARS, YOU WILL ENTER A NUMBER FOR X ON THE NEXT SCREEN. PLEASE CHECK THAT YOU CORRECTLY ENTERED THE VALUE FOR MONTHS/YEARS.	Months: Years: Soon / now3 Says she can't get pregnant.....4 Other5 Don't know-88 No response-99	
17b	After the birth of the child you are expecting now, how long would you like to wait before the birth of another child? IF YOU SELECT MONTHS OR YEARS, YOU WILL ENTER A NUMBER FOR X ON THE NEXT SCREEN. PLEASE CHECK THAT YOU CORRECTLY ENTERED THE VALUE FOR MONTHS/YEARS.	Months: Years: Soon / now3 Other4 Says she can't get pregnant.....5 Don't know-88 No response-99	
	CHECK 8: Number of births CHECK 14: Currently pregnant?	Number of births Yes.....1 No.....0 Unsure.....-88 No response-99	Skip to 19 if 0 births and 14: No. Skip to 18a if 14: no and 18b if 14: yes
18a	Now I would like to ask a question about your last live birth. At the time you became pregnant, did you want to become pregnant then, did you want to wait until later, or did you not want to have any / any more children at all?	Then1 Later.....2 Not at all3 No response-99	
18b	Now I would like to ask a question about your current pregnancy. At the time you became pregnant, did you want to become pregnant then, did you want to wait until later, or did you not want to have any / any more children at all?	Then1 Later.....2 Not at all3 No response-99	
Section 3 – Contraception			
Now I would like to talk about family planning – the various ways or methods that a couple can use to delay or avoid a pregnancy.			
19	Have you ever used anything or tried in any way to delay or avoid getting pregnant?	Yes.....1 No0 No response.....-99	Skip to 25 if No
20	How old were you when you first used a method to delay or avoid getting pregnant? ENTER THE AGE IN YEARS. ENTER -88 IF RESPONDENT DOES NOT KNOW, ENTER -99 IF THERE IS NO RESPONSE. CANNOT BE YOUNGER THAN 9.	Age	

26a	You said that you are not currently using a contraceptive method. Do you think you will use a contraceptive method to delay or avoid getting pregnant at any time in the future?	Yes..... 1 No 0 No response.....-99	
26b	Do you think you will use a contraceptive method to delay or avoid getting pregnant at any time in the future?	Yes..... 1 No 0 No response.....-99	
	CHECK 19: Ever used contraceptives?	Yes..... 1 No 0	Skip to 43 if No
27	In the last 12 months, have you ever done something or used a method to delay or avoid getting pregnant?	Yes..... 1 No 0 No response.....-99	Skip to 43 if No
28	Which method did you use most recently? PROBE: ANYTHING ELSE? SELECT MOST EFFECTIVE METHOD (HIGHEST METHOD IN LIST). BE SURE TO SCROLL TO BOTTOM TO SEE ALL CHOICES	Implant..... 3 IUD..... 4 Injectables..... 5 Pill 7 Emergency Contraception..... 8 Male condom..... 9 Female condom..... 10 Diaphragm..... 11 Foam/Jelly 12 Standard Days/Cycle beads..... 13 LAM 14 Rhythm method 15 Withdrawal 16 Other traditional method..... 17 No response -99	
29	When did you begin using your (MOST RECENT / CURRENT METHOD)? PLEASE RECORD THE DATE. THE DATE SHOULD BE FOUND BY CALCULATING BACKWARDS FROM MEMORABLE EVENTS IF NEEDED. MUST BE AFTER FQ29. ENTER JAN 2020 FOR NO RESPONSE.	Month	Year
	CHECK 22: Currently using contraceptives?	Yes..... 1 No 0	Skip to 32 if Yes
30	When did you stop using your (MOST RECENT METHOD)? PLEASE RECORD THE DATE. THE DATE SHOULD BE FOUND BY CALCULATING BACKWARDS FROM MEMORABLE EVENTS IF NEEDED. MUST BE AFTER FQ29. ENTER JAN 2020 FOR NO RESPONSE.	Month	Year
31	Why did you stop using your (MOST RECENT METHOD)?	Infrequent sex / husband away 1 Became pregnant while using..... 2 Wanted to become pregnant 3 Husband / partner disapproved 4 Wanted a more effective method..... 5 No method available..... 6	

		Health concerns 7 Fear of side effects..... 8 Lack of access / too far 9 Costs too much 10 Inconvenient to use 11 Fatalistic 12 Difficult to get pregnant / menopausal 13 Interferes with body’s processes..... 14 Other 15 Don’t know-88 No response-99	
32	Where did you obtain your (MOST RECENT / CURRENT METHOD) when you started using it? SCROLL TO BOTTOM TO SEE ALL CHOICES	PUBLIC SECTOR: GOVT HOSPITAL..... 1 GOVT HEALTH CENTER 2 GOVERNMENT DISPENSARY 3 OTHER PUBLIC 4 PRIVATE MEDICAL SECTOR: FAITH-BASED, CHURCH, MISSION HOSPITAL/CLINIC 5 FHOK/FPAK HEALTH CENTER/CLINIC 6 PRIVATE HOSPITAL/CLINIC 7 PHARMACY/CHEMIST 8 NURSING/MATERNITY HOME..... 9 OTHER SOURCE: MOBILE CLINIC 10 COMMUNITY-BASED DISTRIBUTOR . 11 SHOP 12 FRIEND/RELATIVE..... 13 OTHER 14 DON'T KNOW-88 NO RESPONSE-99	
33	In the last 12 months, have you paid any fees for family planning services (including the most recent/current method)?	Yes 1 No 0	Skip to 35 if No
34	How much did you pay? ENTER ALL PRICES IN UGANDA SHILLINGS. ENTER -88 IF RESPONDENT DOES NOT KNOW, -99 FOR NO RESPONSE.	Fee: _____	
35	When you obtained your (MOST RECENT / CURRENT METHOD), were you told by the provider about side effects or problems you might have with a method to delay or avoid getting pregnant?	Yes 1 No 0 No response-99	Skip to 37 if No
36	Were you told what to do if you experienced side effects or problems?	Yes 1 No 0	
37	At that time, were you told by the family planning provider about methods of family planning other than the (MOST RECENT/CURRENT METHOD) that you could use?	Yes 1 No 0 No response-99	
38	During that visit, did you obtain the method you wanted to delay or avoid getting pregnant?	Yes 1 No 0 No response-99	Skip to 40 if yes
39		Method out of stock that day 1	

	Why didn't you obtain the method you wanted?	Method not available at all2 Provider not trained to provide the method3 Provider recommended a different method4 Not eligible for method.....5 Decided not to adopt a method6 Too costly7 Other8 No response-99	
40	During that visit, who made the final decision about what method you got?	You alone1 Provider2 Partner3 You and provider4 You and partner5 Other6 No response-99	
	CHECK 32: Where did you obtain your (MOST RECENT / CURRENT METHOD)?	PUBLIC SECTOR: GOVT HOSPITAL1 GOVT HEALTH CENTER2 GOVERNMENT DISPENSARY3 OTHER PUBLIC4 PRIVATE MEDICAL SECTOR: FAITH-BASED, CHURCH, MISSION HOSPITAL/CLINIC5 FHOK/FPAK HEALTH CENTER/CLINIC 6 PRIVATE HOSPITAL/CLINIC7 PHARMACY/CHEMIST8 NURSING/MATERNITY HOME.....9 OTHER SOURCE: MOBILE CLINIC10 COMMUNITY-BASED DISTRIBUTOR .11 SHOP12 FRIEND/RELATIVE.....13 OTHER14 DO NOT KNOW-88 NO RESPONSE-99	Skip to 44 if 32 is 13 or -88
41	Would you return to this provider?	Yes1 No0 No response-99	
42	Would you refer your relative or friend to this provider / facility?	Yes1 No0 No response-99	
	CHECK 16: Desire for future child? CHECK 17: 2 or more years before next child?	Have a/another child1 No more/none2 Says she can't get pregnant3 Undecided / Do not know-88 No response-99 No more/none1 Less than 2 years2 2 or more years3	Ask 43 to non users (current or ever) who do

	CHECK 22: Currently using contraceptive method?	Yes, using contraceptive 1 No, not using contraceptive 0													
	CHECK 19: Ever use a method?	Yes 1 No 0													
43	<p>You said that you do not want any / anymore children and that you are not using a method to avoid pregnancy.</p> <p>Can you tell me the main reason why you are not using a method to prevent pregnancy?</p> <p>CANNOT SELECT “DO NOT KNOW” OR “NO RESPONSE” WITH OTHER OPTIONS. CANNOT SELECT “NOT MARRIED’ IF FQ3 IS “YES, CURRENTLY MARRIED.” SCROLL TO BOTTOM TO SEE ALL CHOICES.</p>	Not married 1 Infrequent sex / not having sex 2 Menopausal / hysterectomy 3 Subfecund / infecund 4 Not menstruated since last birth 5 Breastfeeding 6 Husband away for multiple days 7 Up to God / fatalistic 8 Respondent opposed 9 Husband / partner opposed 9 Others opposed 10 Religious prohibition 11 Knows no method 12 Knows no source 13 Fear of side effects 14 Health concerns 15 Lack of access / too far 16 Costs too much 17 Preferred method not available 18 No method available 19 Inconvenient to use 20 Interferes with body’s processes 21 Other 22 Don’t know -88 No response -99													
44	In the last 12 months, were you visited by a health worker who talked to you about family planning?	Yes 1 No 0 No response -99													
45	In the last 6 months, have you visited a health facility for care for yourself? FOR ANY HEALTH SERVICES.	Yes 1 No 0 No response -99	Skip to 47 if no												
46	Did any staff member at the health facility speak to you about family planning methods?	Yes 1 No 0 No response -99													
47	In the last few months have you: Heard about family planning on the radio?..... Seen anything about family planning on the television? . Read about family planning in a newspaper or magazine? ENTER -99 FOR NO RESPONSE.	<table border="1"> <thead> <tr> <th></th> <th><u>Yes</u></th> <th><u>No</u></th> </tr> </thead> <tbody> <tr> <td>.....</td> <td>1</td> <td>0</td> </tr> <tr> <td>.....</td> <td>1</td> <td>0</td> </tr> <tr> <td>.....</td> <td>1</td> <td>0</td> </tr> </tbody> </table>		<u>Yes</u>	<u>No</u>	1	0	1	0	1	0	
	<u>Yes</u>	<u>No</u>													
.....	1	0													
.....	1	0													
.....	1	0													
48	How old were you when you first had sexual intercourse? ANSWER MUST AGREE WITH THE CURRENT AGE, PREGNANCY STATUS, AND NUMBER OF BIRTHS. ENTER 0 IF SHE HAS NEVER HAD SEX. - 88 IF DOES NOT KNOW.	Age	Skip to 50 if 0												
	If age at first sex <10 years: CHECK: You have entered that the respondent was X	Yes 1													

	years old when she first had sexual intercourse. Is this what she said? IF NO, GO BACK AND CORRECT FQ48	No 0			
49	When was the <u>last</u> time you had sexual intercourse? IF 12 MONTHS (ONE YEAR) OR MORE AGO, ANSWER MUST BE RECORDED IN YEARS. IF LESS THAN 12 MONTHS AGO, ANSWER MUST BE RECORDED IN DAYS, WEEKS OR MONTHS. ENTER 0 DAYS FOR TODAY. YOU WILL ENTER A NUMBER FOR X ON THE NEXT SCREEN.	DAYS AGO	WEEKS AGO	MONTHS AGO	YEARS AGO
Section 4 – Water					
Now I would like to ask you a couple of questions about your water practices.					
50	On a typical day in the DRY season, how much time each day do you spend collecting water? ONLY RECORD RESPONDENT’S TIME; NOT ANYONE ELSE’S TIME. IF YOU SELECT MINUTES OR HOURS YOU WILL ENTER A NUMBER FOR X ON THE NEXT SCREEN	X Minutes per day	_____		
		X Hours per day.....	_____		
		No time, someone else collects water.....	3		
		No time, no one collects water.....	4		
		Don’t know.....	-88		
		No response.....	-99		
51	On a typical day in the WET season, how much time each day do you spend collecting water? ONLY RECORD RESPONDENT’S TIME; NOT ANYONE ELSE’S TIME. IF YOU SELECT MINUTES OR HOURS YOU WILL ENTER A NUMBER FOR X ON THE NEXT SCREEN.	X Minutes per day	_____		
		X Hours per day.....	_____		
		No time, someone else collects water.....	3		
		No time, no one collects water.....	4		
		Don’t know.....	-88		
		No response.....	-99		
Thank the respondent for her time THE RESPONDENT IS FINISHED, BUT THERE ARE STILL 2 MORE QUESTIONS FOR YOU TO COMPLETE OUTSIDE THE HOME					
LOCATION					
M	TAKE A GPS POINT NEAR THE ENTRANCE TO THE HOUSEHOLD. RECORD LOCATION WHEN THE ACCURACY IS SMALLER THAN 6 M.	<i>Instructions are given directly by the ODK software</i>			
		RECORD LOCATION			
QUESTIONNAIRE RESULT					
N	RECORD THE RESULT OF THE FEMALE RESPONDENT SURVEY	Completed	1		
		Not at home	2		
		Postponed	3		
		Refused	4		
		Partly completed.....	5		
		Incapacitated.....	6		

Appendix D. Family Planning 2020 Core Indicators

Criteria used to identify indicators: (1) Progress under each of the Family Planning Summit Monitoring & Accountability Conceptual Framework's five domains is tracked by at least one indicator (the five domains are enabling environment, process, output, outcome, and impact); (2) Indicator is relevant to the domain and methodologically sound (i.e., based to the greatest extent possible on existing definitions and standards and with documentation readily available); and (3) Data are currently available for the indicator. Additionally, special consideration was given to (4) indicators proposed by the Rights and Empowerment Working Group (to ensure dimensions of availability, accessibility, quality and informed decision making were reflected) and (5) indicators already used by countries to monitor other initiatives or goals (e.g., the Global Strategy for Women's and Children's Health and MDGS).

The core Indicator table is separated into three categories:

- (1) Indicators that will be reported annually for all 69 FP2020 countries. Data sources and methodology will vary between pledging and non-pledging countries, based on presence of the Track20 Project. The final two indicators (which are highlighted below) will not have data in year one. Mechanisms to collect this information will be established within the next year.
- (2) Indicators that are based on estimated impacts of family planning and therefore not directly collected.
- (3) Indicators that will be reported annually in a subset of countries and will be based on the PMA2020 survey. The total number countries that will have annual data on these indicators are 10, but full scale up will not occur for two years. In years when there is a DHS, data will be included for that country in annual reporting.

1. Indicators that will be reported annually for all 69 FP2020 countries					
Indicator Name	Definition	Data Source and Availability	Conceptual Framework Category	Disaggregation	Links to Other Initiatives
1. Contraceptive Prevalence Rate, Modern Methods (mCPR)	The proportion of women of reproductive age who are using (or whose partner is using) a modern contraceptive method at a particular point in time.	Surveys such as the Demographic and Health Surveys (DHS), the CDC-assisted Reproductive Health Surveys (RHS), MICS and other nationally sponsored surveys. Service Statistics	Outcome	When possible (in years with a DHS) by: wealth quintile, age, marital status, urban/rural, ethnicity, etc.	Contraceptive prevalence rate (any method) is a tracking indicator for MDG 5 target 5B: Achieve, by 2015, universal access to reproductive health. Included in draft WHO indicator shortlist
1b. Percent distribution of users by method	The proportion of total family planning users using each method of family planning.	Surveys such as the Demographic and Health Surveys (DHS), the CDC-assisted Reproductive Health Surveys (RHS), MICS and other nationally sponsored surveys. Service Statistics	Outcome		
2. Number of additional family planning users	The number of additional women (or their partners) of reproductive age currently using a contraceptive method compared to 2012.	Service Statistics	Output		
3. Percentage of women with an unmet need	The percentage of fecund women of reproductive age who want no more children or to postpone having the next child, but are not using a contraceptive method.	Surveys such as the DHS, RHS, MICS, and other nationally sponsored surveys. Service Statistics	Output	When possible (in years with a DHS) by: method, wealth quintile (comparing the lowest to the highest quintile), age, marital status, urban/rural, ethnicity, etc.	The proportion of women (married/union) with an unmet need for family planning is a tracking indicator for MDG 5 target 5B: Achieve, by 2015 universal access to reproductive health. Included in draft WHO indicator shortlist
4. Percent of women whose demand for modern contraception is satisfied	The percent of women (or their partners) who desire either to have no further children or to postpone the next child who are currently using a modern contraceptive method.	Surveys such as the DHS, RHS, MICS, and other nationally sponsored surveys. Service Statistics	Outcome	When possible (in years with a DHS) by: wealth quintile (comparing the lowest to the highest quintile), age, marital status, urban/rural, ethnicity, etc.	The proportion of demand for family planning that is satisfied (any method) is a tracking indicator for the Global Strategy for Women's and Children's Health.
5. Annual expenditure on FP from government domestic budget	Total annual public sector recurrent expenditures on family planning. This includes expenditures by all levels of government.	COIA, NIDI, KFF Country availability will depend on COIA and NIDI implementation. All 69 countries	Enabling Environment		

		are expected to be available at some point.			
6. Couple-Year of Protection (CYP)	The estimated protection provided by family planning services during a one year period, based upon the volume of all contraceptives sold or distributed free of charge to clients during that period. The CYP is calculated by multiplying the quantity of each method distributed to clients by a conversion factor, which yields an estimate of the duration of contraceptive protection provided per unit of that method.	Service Statistics	Output		USAID
2. Indicators that model impact for all 69 FP2020 countries					
Indicator Name	Definition	Data Source and Availability	Conceptual Framework Category	Disaggregation	Links to Other Initiatives
7. Number of unintended pregnancies	The number of pregnancies that occurred at a time when women (and their partners) either did not want additional children or wanted to delay the next birth. Usually measured with regard to last or recent pregnancies, including current pregnancies.	Estimated using modeling	Impact		
8. Number of unintended pregnancies averted due to contraceptive use	The number of unintended pregnancies that did not occur during a specified reference period as a result of the protection provided by contraceptive use during the reference period.	Estimated using modeling	Impact		
9. Number of maternal deaths averted due to contraceptive use	The number of maternal deaths that did not occur during a specified reference period as a result of the protection provided by contraceptive use during the reference period.	Estimated using modeling	Impact		
10. Number of unsafe abortions averted due to contraceptive use	The number of unsafe abortions that did not occur during a specified reference period as a result of the protection provided by contraceptive use during the reference period.	Estimated using modeling	Impact		

Appendix E. Glossary of PMA2020 Indicators

Family Planning Indicators		
F1	Contraceptive Use by Modern/Traditional	Proportion of women ages 15 to 49 who are using (or whose partner is using) a contraceptive method at the time of the survey
F2	Method Mix	Composition of current methods used by women ages 15 to 49
F3	Unmet Need	Percentage of fecund, sexually active women ages 15 to 49 who do not want to become pregnant but are not using contraception
F4	Demand Satisfied By Modern Contraception	Percentage of women ages 15 to 49 who do not want to get pregnant who are using modern contraception
F5	Unintended Births	Percentage of births in the past 5 years to females age 15-49 that are reported to be mistimed (wanted later) or unwanted
F6	Method Chosen By Self Or Jointly	Percentage of women ages 15 to 49 currently using a modern contraceptive method, or who used a modern method in past 12 months, reporting they decided on method themselves or jointly with a partner or provider
F7	Paid For Services	Percentage of women currently using a modern contraceptive method, or who used a modern method in past 12 months, who have paid any fees for family planning services in past 12 months
F8	Method Information Index	Percentage of recent/current users reporting they were informed about other methods and side effects, and if informed of side effects, what to do
F9	Satisfaction With Provider	Percentage of women ages 15 to 49 using a modern contraceptive method, or who used a modern method in past 12 months, who would return to their provider and would refer a relative or friend to that provider
F10	Received FP information From Provider	Percentage of women ages 15 to 49 reporting they received family planning information from a provider who visited them in the last 12 months
F11	Total Fertility Rate	Number of children who would be born to a woman if she were to pass through her reproductive years bearing children according to the current schedule of age-specific fertility rates (ASFR).
	Adolescent Fertility Rates	The adolescent fertility rate is the ASFR for 15 to 19 year old women



PMA2020 uses innovative mobile technology to support low-cost, rapid-turnaround, nationally representative surveys for monitoring key indicators for family planning in support of FP2020 goals. The project is implemented by local university and research organizations in 10 countries, deploying a cadre of resident enumerators trained in mobile-assisted data collection. PMA2020 establishes a sentinel data collection platform that can be utilized for other health program areas.

PMA2020

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