



# PMA NIGERIA (LAGOS)

Results from Phase 3 cross-sectional survey

December 2021 - January 2022

## OVERALL KEY FINDINGS



Contraceptive use among married women consistently increased since 2017, but use among unmarried sexually active women increased to 58% in 2022 after a dip to 43% in 2021.



1 in 3 women obtained their current modern method from a public health facility.



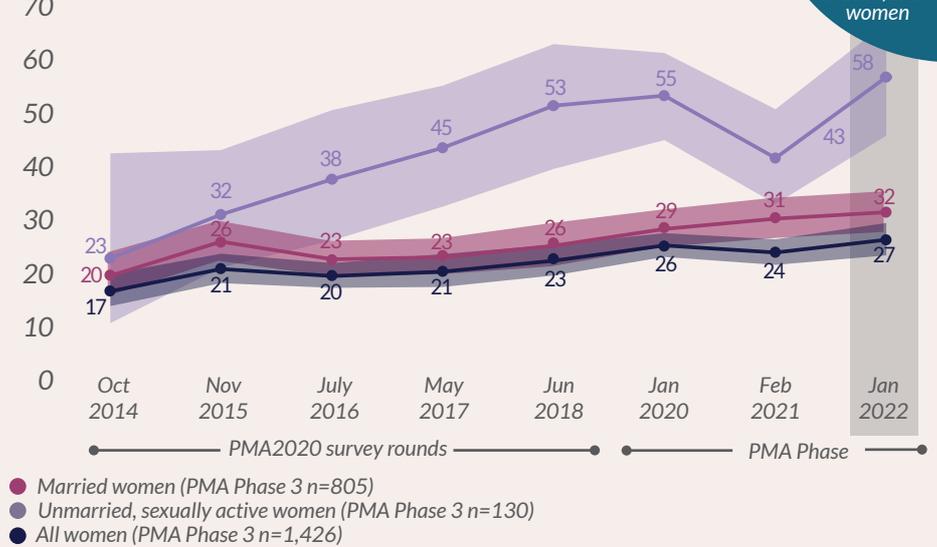
Stockouts of injectables and pills in public facilities were reported to be in the double digits on the day of the most recent survey.

## SECTION 1: CONTRACEPTIVE USE, DYNAMICS, AND DEMAND

### MODERN CONTRACEPTIVE PREVALENCE

Percent of all women age 15-49 currently using modern contraception (mCPR) by marital status

**1.1%**  
average annual increase in mCPR for all women



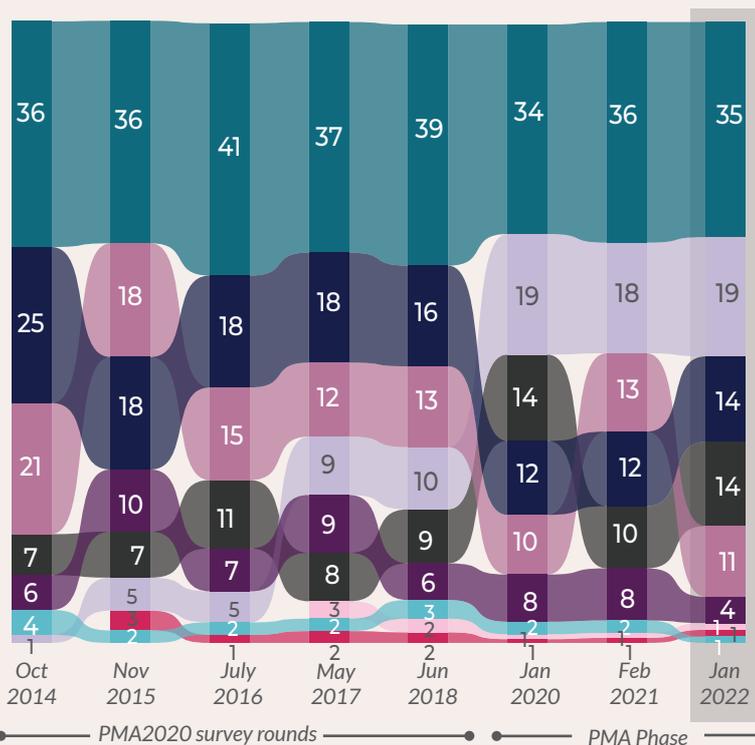
### CONTRACEPTIVE PREVALENCE BY METHOD TYPE

Percent of all women age 15-49 currently using contraception by method type (PMA Phase 3 n=1,426)



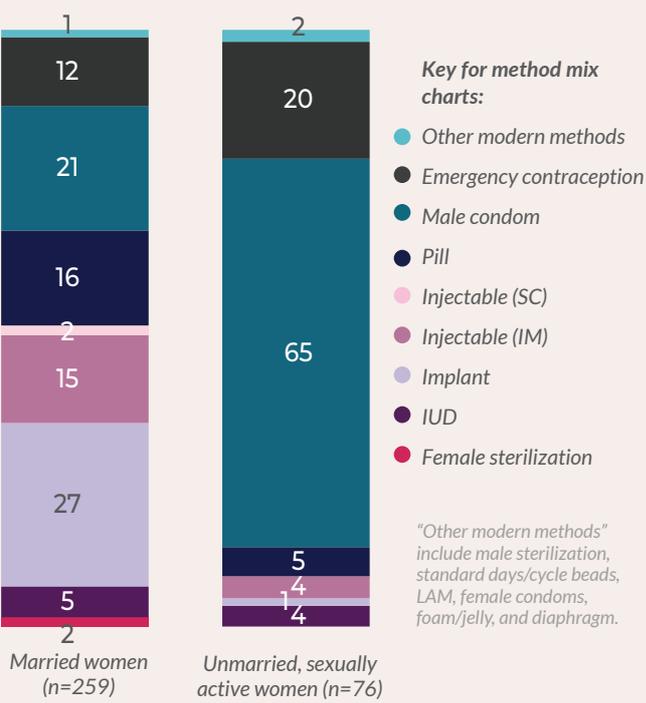
## TRENDS IN MODERN CONTRACEPTIVE MIX

Percent distribution of all women age 15-49 using modern contraceptive methods by method and year (PMA Phase 3 n=379)



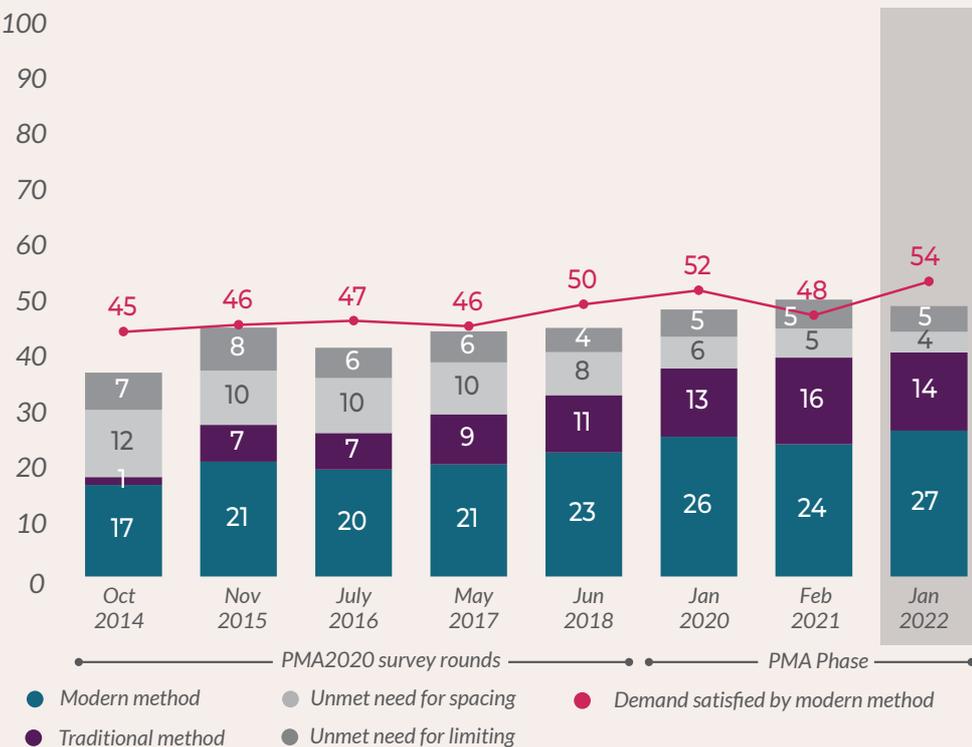
## MODERN CONTRACEPTIVE METHOD MIX

Percent distribution of modern contraceptive users age 15-49 by method and marital status



## METHOD USE, UNMET NEED, AND DEMAND SATISFIED BY A MODERN METHOD

Percent of all women age 15-49 using contraception by method type, unmet need, and demand satisfied by a modern method (PMA Phase 3 n=1,426)



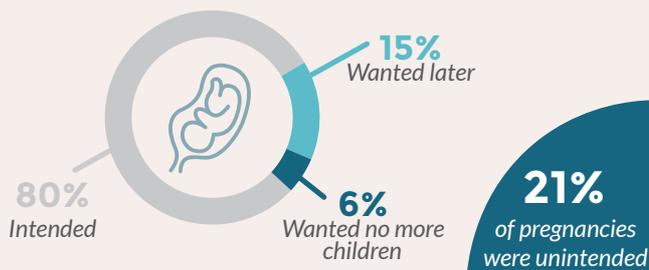
## INTENTION TO USE CONTRACEPTION IN THE NEXT YEAR

Percent of all women age 15-49 who are not currently using contraception but intend to use contraception in the next 12 months (n=786)



## INTENTION OF MOST RECENT BIRTH/CURRENT PREGNANCY

Percent of women by intention of their most recent birth or current pregnancy (n=447)



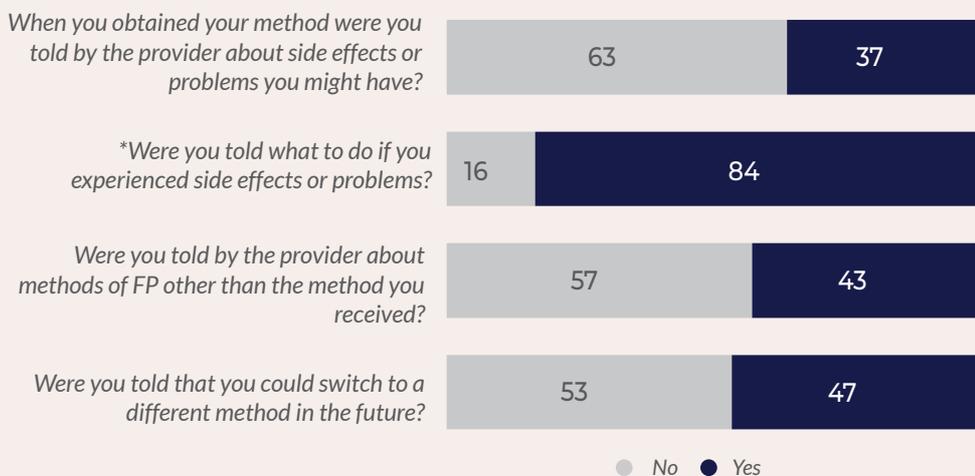
## KEY FINDINGS FOR SECTION 1: CONTRACEPTIVE USE, DYNAMICS, AND DEMAND

- 27% of all women ages 15-49 years reported using a modern method, and 54% of demand was satisfied by a modern method.
- Modern contraceptive use has continued to increase steadily since 2017 among married women, while there has been recovery from the dip in prevalence observed among sexually active unmarried women in 2021.
- The most commonly reported methods among married women were implants and male condoms, while sexually active unmarried women were most likely to use condoms and emergency contraception.

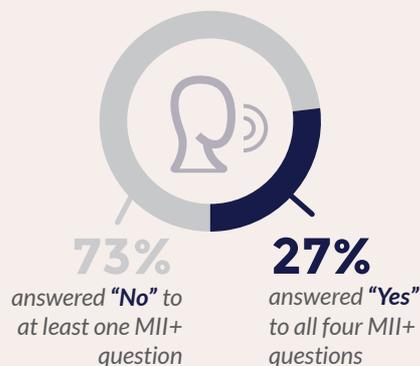
## SECTION 2: CONTRACEPTIVE USER COUNSELING AND OUTREACH

### METHOD INFORMATION INDEX PLUS (MII+)

Percent of women who were told about side effects, what to do about side effects, of other methods, and the possibility of switching methods (n=370)



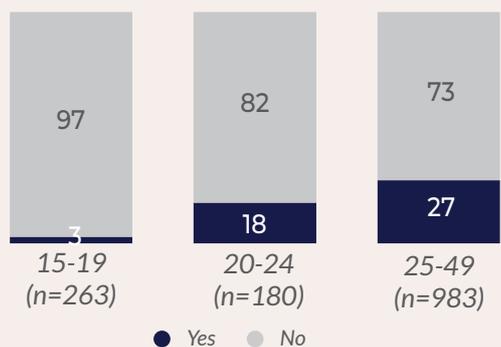
Percent of women who responded "Yes" to all four MII+ questions



\*Only women who said they were told about possible side effects were asked whether they were told about what to do in the event of side effects.

### DISCUSSED FP IN THE PAST YEAR WITH PROVIDER/CHW

Percent of women who received FP information from a provider or community health worker (CHW), by age



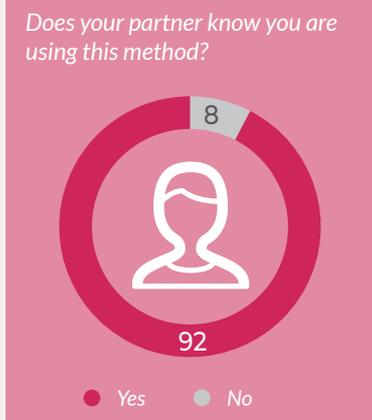
### KEY FINDINGS FOR SECTION 2: COUNSELING AND OUTREACH

- Only 27% of women were given full information about side effects, what to do about side effects, of other methods, and the possibility of switching methods.
- Only 4 in 10 women were told about side effects they may experience, 8 in 10 of those who were told about side effects were told what to do if they experienced side effects.
- Women ages 25-49 years were more likely than their younger counterparts to report that they discussed FP with a provider or CHW in the past year.

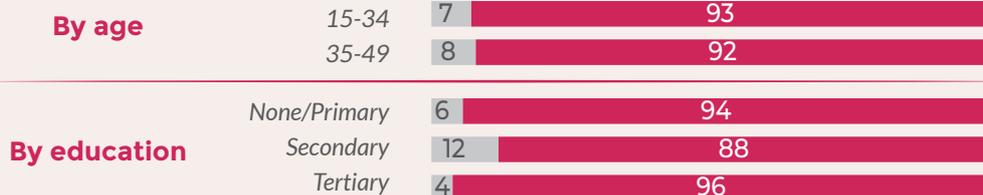
## SECTION 3: PARTNER DYNAMICS

### PARTNER INVOLVEMENT IN FP DECISIONS

Percent of women who are currently using modern, female controlled methods and agree with the following statement, by age and education (n=203)



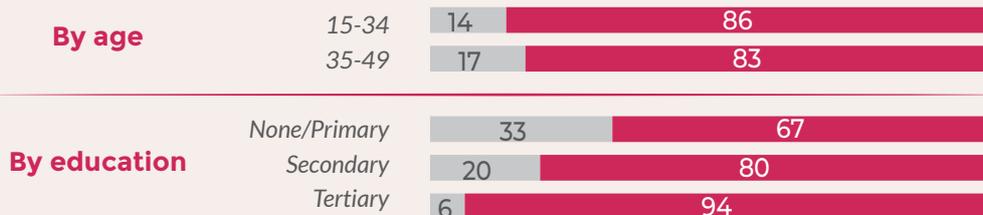
Modern, female controlled methods includes all modern methods except male sterilization and male condoms



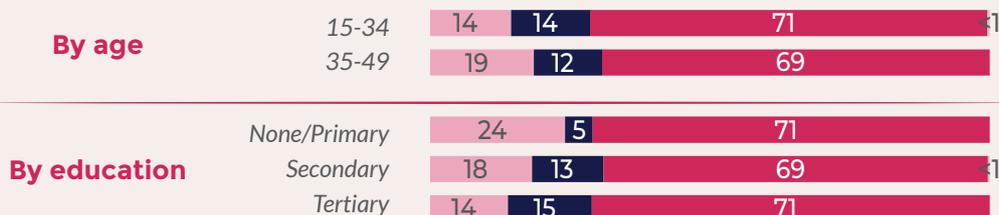
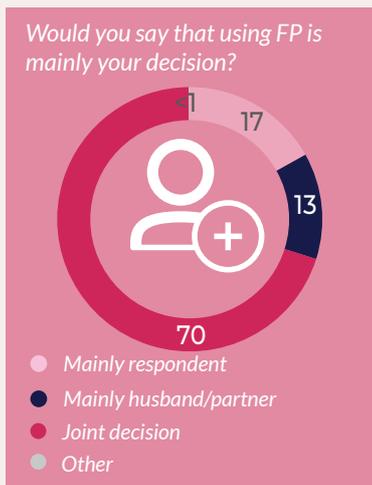
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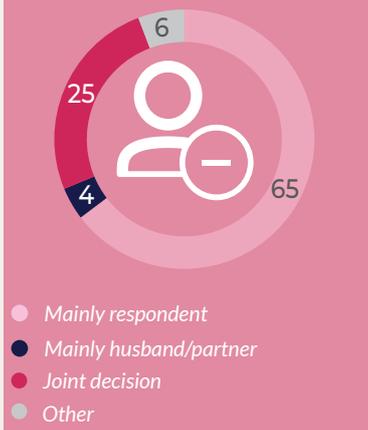


Percent of women who are currently using FP and agree with the following statement, by age and education (n=451)

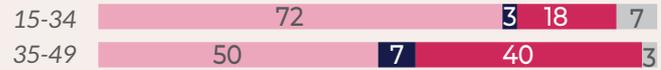


Percent of women who are not currently using FP and agree with the following statement, by age and education (n=782)

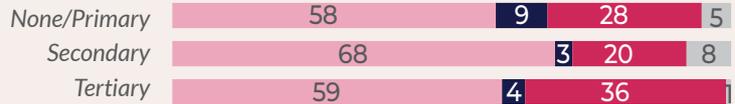
Would you say that not using FP is mainly your decision?



**By age**

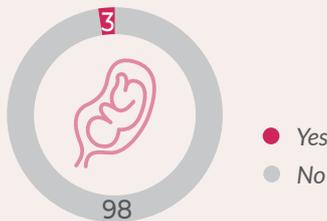


**By education**



**PREGNANCY COERCION**

Percent of currently married women who report that their partner tried to force or pressure them to become pregnant in the past 12 months (n=805)



Percent of currently married women who report that their partner made them feel badly for wanting to use an FP method to delay or prevent pregnancy in the past 12 months (n=804)



Percent of currently married women who report that their partner said he would leave them if they did not get pregnant in the past 12 months (n=804)



Percent of currently married women who report that their partner took away their FP method or kept them from a clinic in the past 12 months (n=803)



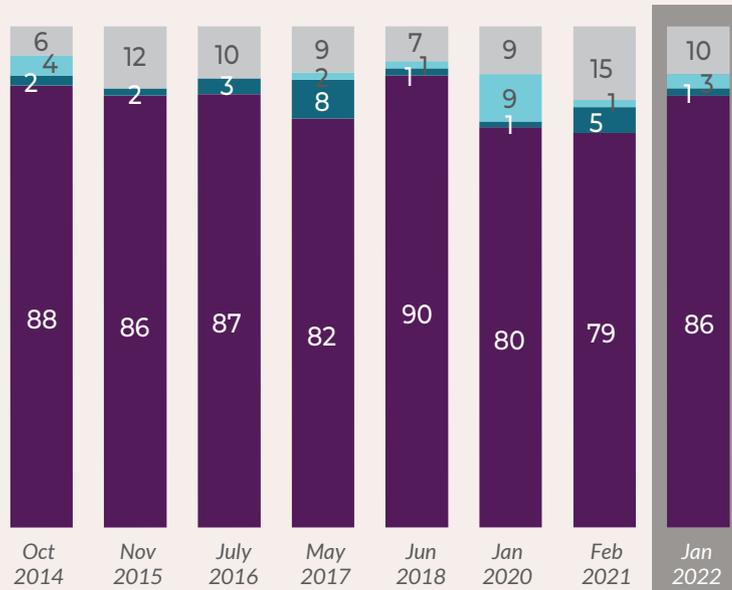
**KEY FINDINGS FOR SECTION 3: PARTNER DYNAMICS**

- Among women using a modern, female controlled method, 8% reported that their partners were unaware that they were using a method.
- 16% of women using modern, female controlled methods reported that they had not discussed the decision to delay or avoid pregnancy with their partners prior to using their current method, with variations by level of education.
- Among women not currently using a FP method, 25% reported this decision was jointly made with their partner, while 65% said they mainly decided not to use a method on their own; findings varied by age and level of education.

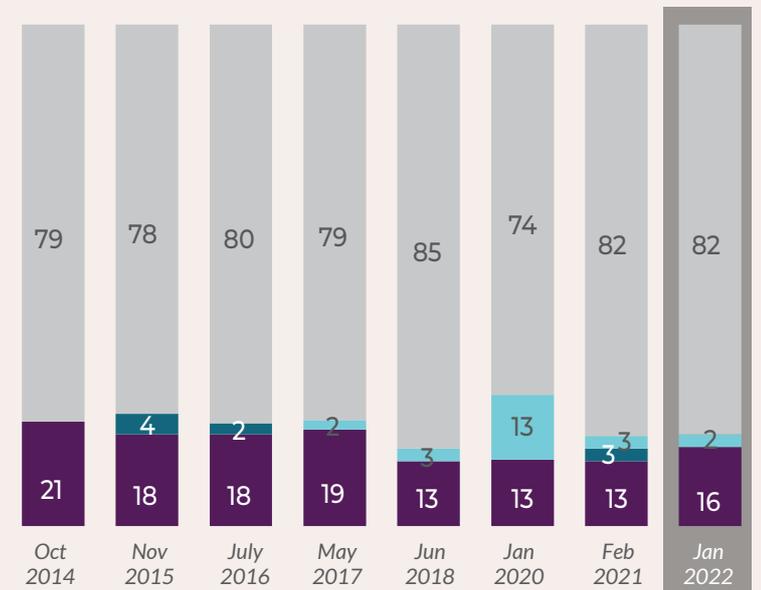
## SECTION 4: SERVICE DELIVERY POINTS

### TRENDS IN METHOD AVAILABILITY: IUD

Public facilities (PMA Phase 3 n=73)



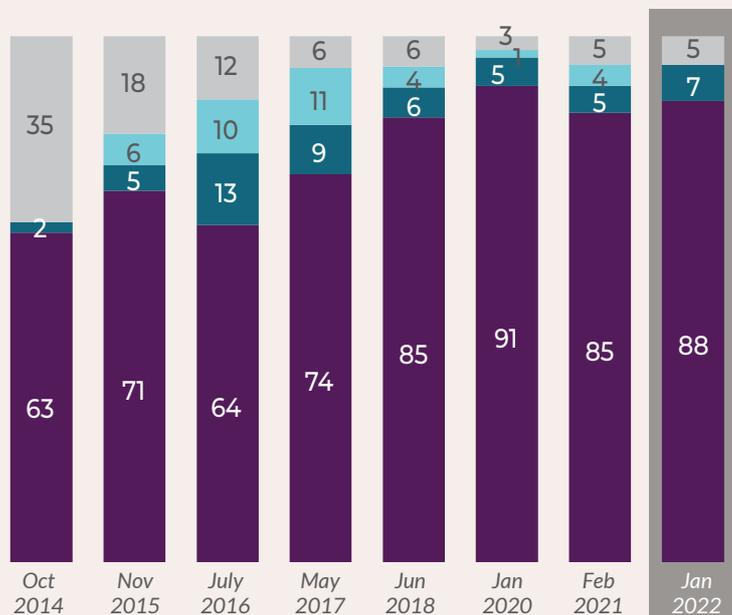
Private facilities (PMA Phase 3 n=44)



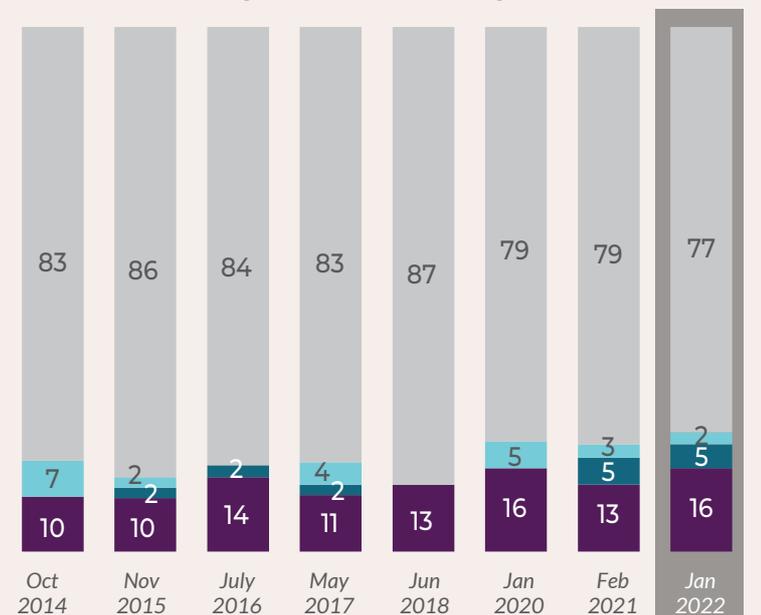
● Currently in stock and no stockout in last 3 months  
 ● Currently in stock but stockout in last 3 months  
 ● Currently out of stock  
 ● Not offered

### TRENDS IN METHOD AVAILABILITY: IMPLANT

Public facilities (PMA Phase 3 n=73)



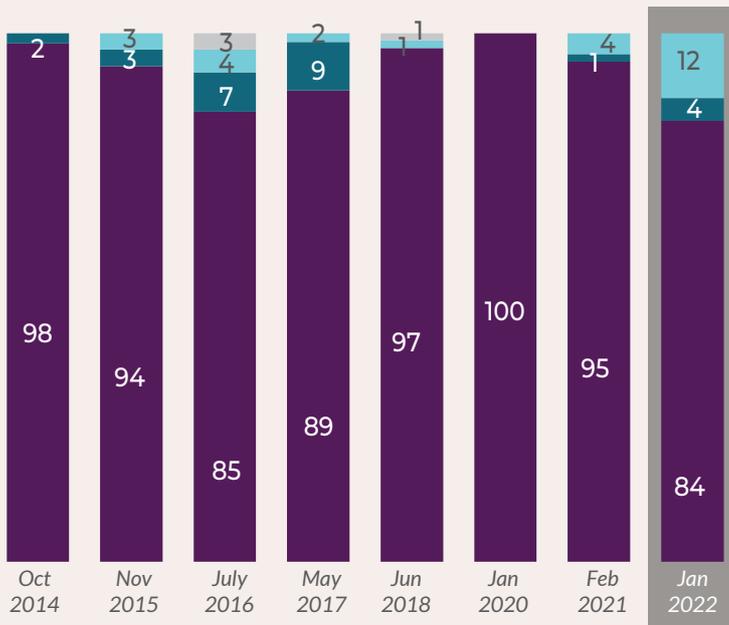
Private facilities (PMA Phase 3 n=44)



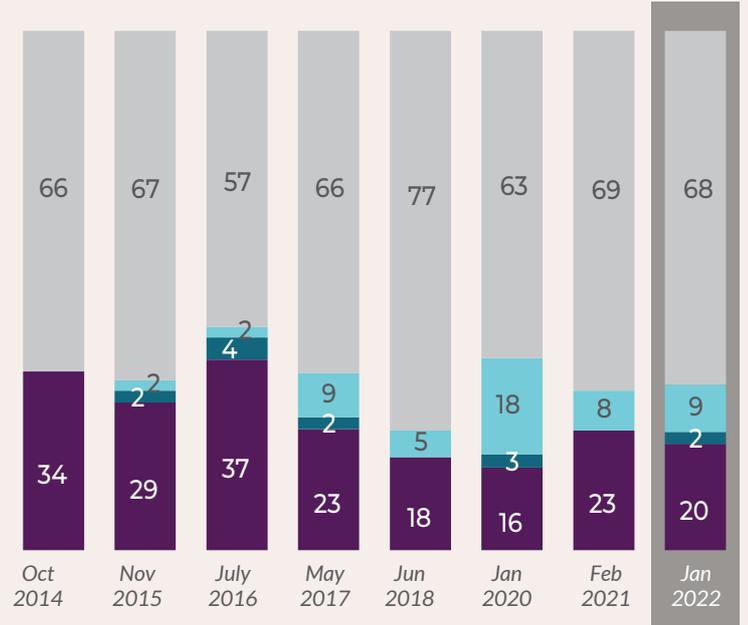
● Currently in stock and no stockout in last 3 months  
 ● Currently in stock but stockout in last 3 months  
 ● Currently out of stock  
 ● Not offered

## TRENDS IN METHOD AVAILABILITY: INJECTABLES

Public facilities (PMA Phase 3 n=73)



Private facilities (PMA Phase 3 n=44)



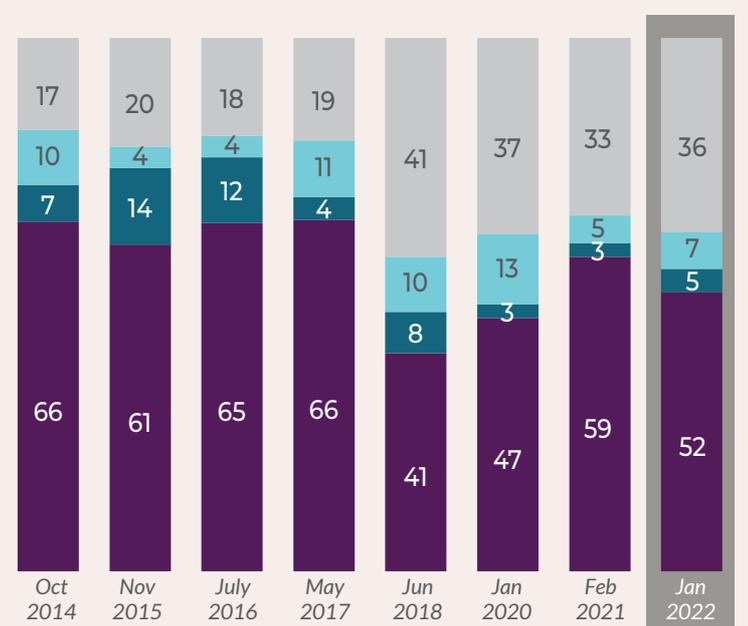
● Currently in stock and no stockout in last 3 months ● Currently in stock but stockout in last 3 months ● Currently out of stock ● Not offered

## TRENDS IN METHOD AVAILABILITY: PILLS

Public facilities (PMA Phase 3 n=73)



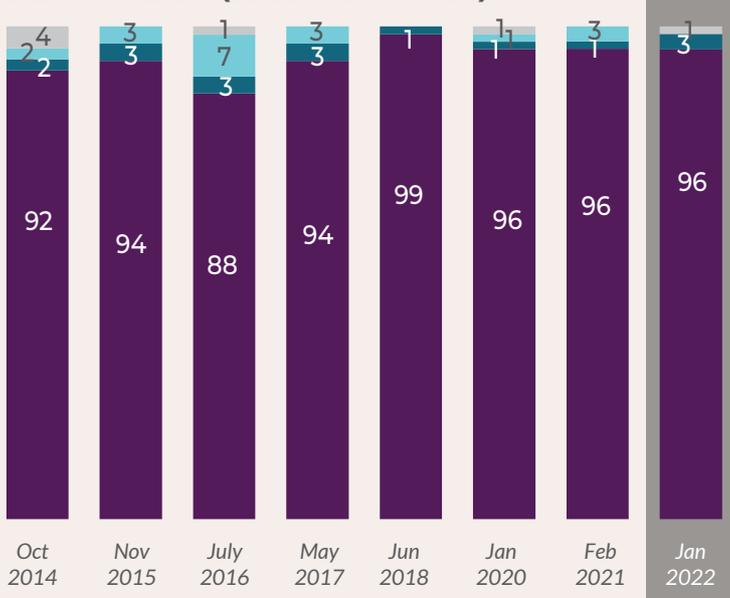
Private facilities (PMA Phase 3 n=44)



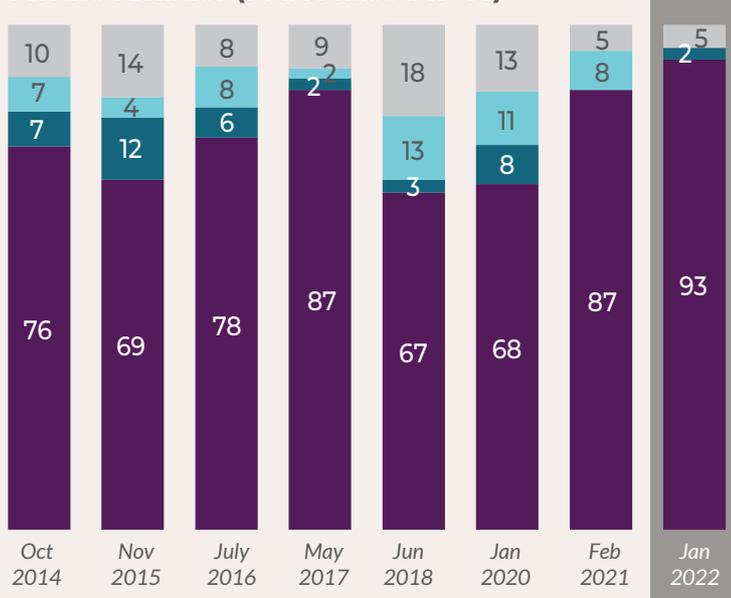
● Currently in stock and no stockout in last 3 months ● Currently in stock but stockout in last 3 months ● Currently out of stock ● Not offered

# TRENDS IN METHOD AVAILABILITY: MALE CONDOMS

Public facilities (PMA Phase 3 n=73)



Private facilities (PMA Phase 3 n=44)



● Currently in stock and no stockout in last 3 months  
 ● Currently in stock but stockout in last 3 months  
 ● Currently out of stock  
 ● Not offered

## MAIN REASON FOR EPISODES OF STOCKOUT OF ANY METHOD BY TYPE OF FACILITY

Public facilities (n=71 episodes)



**73%**  
Ordered but did not receive shipment



**11%**  
Unexpected increase in consumption

Private facilities (n=19 episodes)



**63%**  
Did not place order for shipment

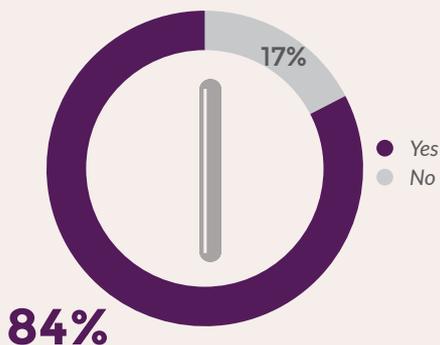


**32%**  
Other reasons

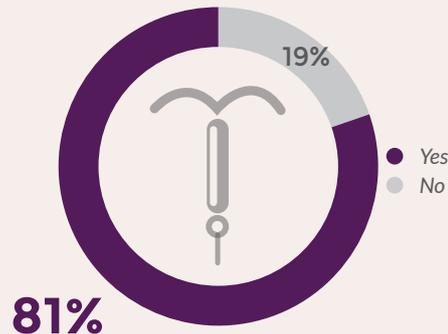
Possible answers were "Did not place order for shipment", "Ordered but did not receive shipment", "Did not order the right quantities", "Ordered but did not receive the right quantities", "Unexpected increase in consumption", "Stock out due to COVID-19 disruption", and "Other."

## FACILITY READINESS

Percent of facilities that provide implants and have a trained provider and instruments/supplies needed for implant insertion/removal (n=79)



Percent of facilities that provide IUDs and have a trained provider and instruments/supplies needed for IUD insertion/removal (n=74)



**33%**

of women  
obtained  
their current  
modern method  
from a public  
health facility (n=370)

#### **KEY FINDINGS FOR SECTION 4: SERVICE DELIVERY POINTS**

- IUDs and implants have been reported to be offered and in stock on the day of the survey by 79% or more of public facilities since 2020, but only 16% or less of private facilities reported the same.
- 12-21% of public facilities and 7-9% of private facilities reported stockouts for injectables and pills on the day of the most recent survey in 2022.
- 84% and 81% of public and private facilities that provide implant or IUD showed readiness for provision and removal of implants and IUDs respectively.

## TABLES: CONTRACEPTIVE PREVALENCE AND UNMET NEED

ALL WOMEN				CPR			mCPR			Unmet need for family planning					
Data source	Round/Phase	Data collection	Female sample	CPR%	SE	95% CI		mCPR%	SE	95% CI		Unmet need (%)	SE	95% CI	
PMA 2020	R1	Sept-Oct 2014	764	18.11	1.64	15.03	21.67	16.72	1.54	13.83	20.07	19.18	1.58	16.18	22.58
PMA 2020	R2	Oct-Nov 2015	1429	27.78	1.87	24.19	31.68	21.03	1.42	18.33	24.01	17.83	1.44	15.13	20.90
PMA 2020	R3	May-Jul 2016	1432	26.42	1.86	22.87	30.30	19.68	1.19	17.41	22.18	15.60	1.43	12.95	18.68
PMA 2020	R4	Apr-May 2017	1535	29.72	2.22	25.47	34.36	20.55	1.59	17.55	23.93	15.17	1.19	12.94	17.71
PMA 2020	R5	Apr-Jun 2018	1590	33.14	1.85	29.54	36.94	22.66	1.50	19.80	25.80	12.32	0.95	10.54	14.36
PMA	Phase 1	Nov-Jan 2020	1469	38.17	1.48	35.25	41.17	25.63	1.16	23.38	28.02	10.77	1.12	8.72	13.23
PMA	Phase 2	Dec-Feb 2021	1483	40.12	1.87	36.44	43.93	24.23	1.23	21.85	26.79	10.57	1.15	8.47	13.11
PMA	Phase 3	Dec-Jan 2022	1426	41.03	1.94	37.21	44.96	26.72	1.57	23.69	29.98	8.44	0.86	6.86	10.33

WOMEN IN UNION				CPR			mCPR			Unmet need for family planning					
Data source	Round/Phase	Data collection	Female sample	CPR%	SE	95% CI		mCPR%	SE	95% CI		Unmet need (%)	SE	95% CI	
PMA 2020	R1	Sept-Oct 2014	490	21.26	2.16	17.22	25.97	19.74	2.08	15.87	24.28	26.76	2.06	22.81	31.13
PMA 2020	R2	Oct-Nov 2015	951	34.63	2.54	29.72	39.89	26.36	1.93	22.67	30.41	23.70	1.73	20.41	27.33
PMA 2020	R3	May-Jul 2016	883	32.50	2.39	27.90	37.47	22.92	1.71	19.68	26.53	21.47	1.88	17.95	25.47
PMA 2020	R4	Apr-May 2017	1001	35.88	2.53	30.97	41.10	23.31	1.75	20.00	26.99	20.86	1.64	17.76	24.35
PMA 2020	R5	Apr-Jun 2018	978	40.29	2.68	35.06	45.76	25.53	2.09	21.57	29.94	17.72	1.29	15.28	20.46
PMA	Phase 1	Nov-Jan 2020	877	46.53	2.22	42.12	50.99	28.82	1.81	25.33	32.59	15.38	1.67	12.32	19.02
PMA	Phase 2	Dec-Feb 2021	855	52.66	2.61	47.42	57.83	30.80	1.96	27.02	34.87	15.00	1.58	12.10	18.45
PMA	Phase 3	Dec-Jan 2022	805	53.33	2.49	48.33	58.27	32.06	1.97	28.24	36.12	13.44	1.55	10.62	16.85

PMA Nigeria (Lagos) collects information on knowledge, practice, and coverage of family planning services in 52 enumeration areas selected using a multi-stage stratified cluster design. The results are representative at the state-level. Phase 3 data were collected between December 2021 and January 2022 from 1588 households (93.3% response rate), 1426 females age 15-49 (95.2% response rate), and 126 facilities (85.1% completion rate). For sampling information and full data sets, visit [www.pmadata.org/countries/nigeria](http://www.pmadata.org/countries/nigeria)

Percentages presented in this brief have been rounded and may not add up to 100%.

PMA uses mobile technology and female resident data collectors to support rapid-turnaround surveys to monitor key family planning and health indicators in Africa and Asia. PMA Nigeria is led by the Centre for Research, Evaluation Resources and Development (CRERD). Overall direction and support are provided by the Bill & Melinda Gates Institute for Population and Reproductive Health at The Johns Hopkins University and Jhpiego. Funding is provided by the Bill & Melinda Gates Foundation.