PMA2015/KONGO CENTRAL-R1

PERFORMANCE MONITORING & ACCOUNTABILITY 2020

PMA2020 uses innovative mobile technology to support low-cost, rapid-turn-around surveys to monitor key indicators for family planning. The project is implemented by local university and research organizations in 11 countries, deploying a cadre of female resident enumerators trained in mobile-assisted data collection. As in PMA2020/Kinshasa, PMA2020/Kongo Central is led by the University of Kinshasa's School of Public Health, in collaboration with Tulane University School of Public Health and Tropical Medicine. The first three rounds of data collection occurred exclusively in Kinshasa. In Round 4, the PMA2020 DRC team expanded to cover Kongo Central, the province adjacent to Kinshasa. The study is funded by the Bill & Melinda Gates Institute for Population and Reproductive Health at the Johns Hopkins Bloomberg School of Public Health with support from the Bill and Melinda Gates Foundation.

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

KEY FAMILY PLANNING INDICATORS

Selected Family Planning Indicators Across Recent Surveys (Married and All Women, age 15-49)

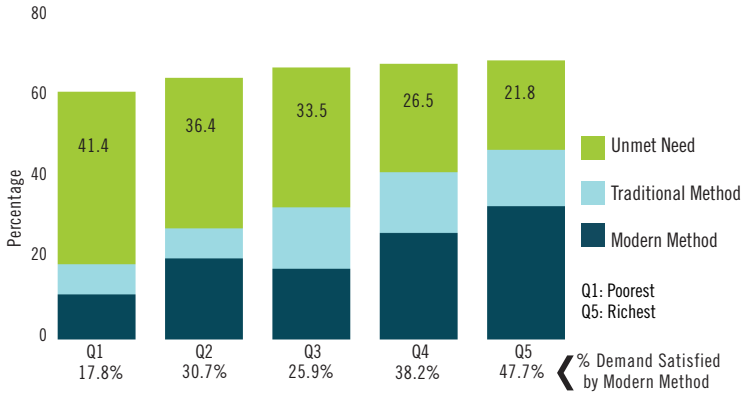
	DHS 2013-14		PMA2015-R1	
	All	Married	All	Married
Contraceptive Prevalence Rate (CPR)				
All Methods CPR	35.0	37.8	29.8	32.5
Modern Method Use mCPR	16.0	17.2	20.0	21.0
Long acting CPR	0.6	0.9	2.6	2.7
Total Unmet Need*	23.5	27.8	26.5	31.9
For Limiting	4.8	6.3	9.9	12.2
For Spacing	18.7	21.4	16.6	19.7
Total Demand	58.5	65.5	56.3	64.4
Demand Satisfied by Modern Method	27.4	26.2	35.5	32.6

Fertility Indicators (All Women, age 15-49)

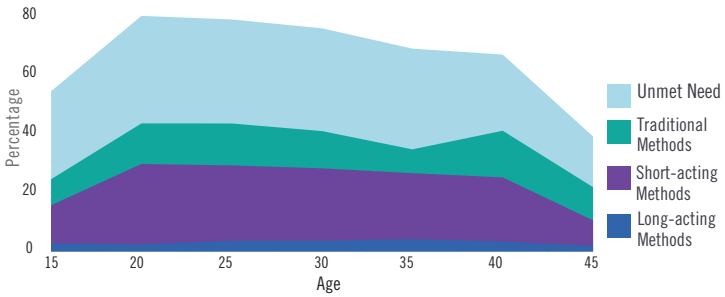
	DHS 2013-14	PMA2015-R1
Recent Births Unintended (%)*	49.4	68.8
Wanted Later	42.4	54.6
Wanted No More	7.0	14.2

** Indicator measurement based on different questions posed in the DHS and PMA2020*

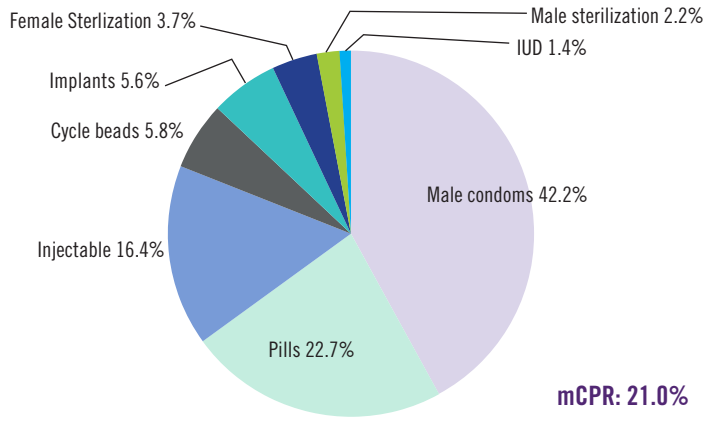
Current Use and Unmet Need Among Married Women of Reproductive Age, by Wealth Quintile PMA2015-R1



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

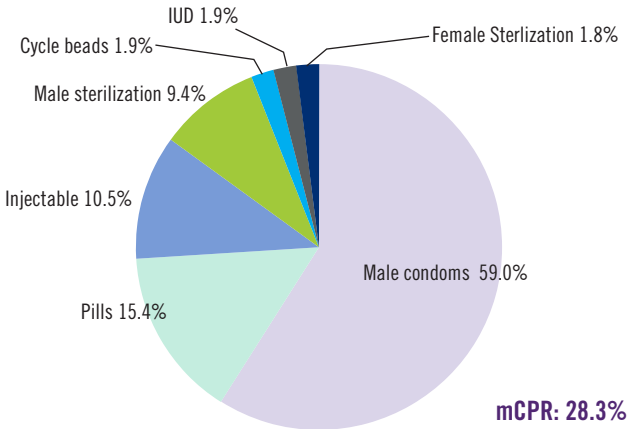


Current Modern Method Mix Among Married Contraceptive Users, PMA2015-R1



mCPR: 21.0%

Current Modern Method Mix Among Unmarried Sexually Active Contraceptive Users, PMA2015-R1

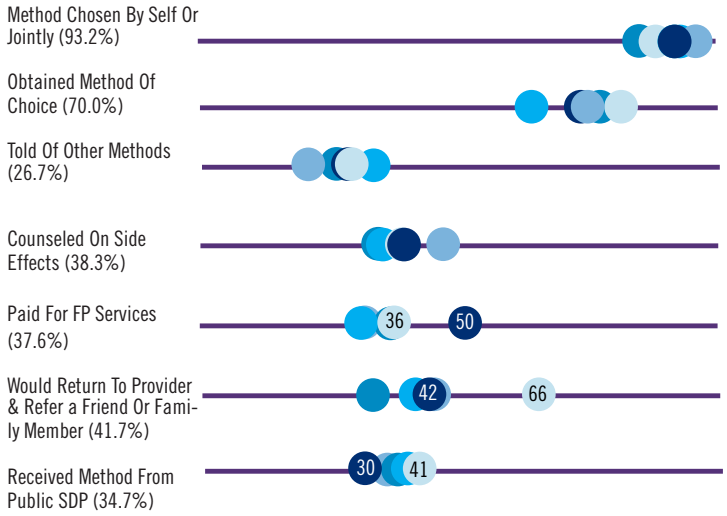


mCPR: 28.3%

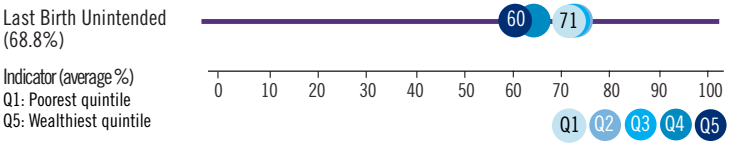
PMA2015/KONGO CENTRAL-R1

INDICATORS FOR ACCESS, EQUITY, QUALITY AND CHOICE

For Current Female Users (%), Indicators by Wealth Quintile



Births in the Past Five Years, or Current Pregnancies



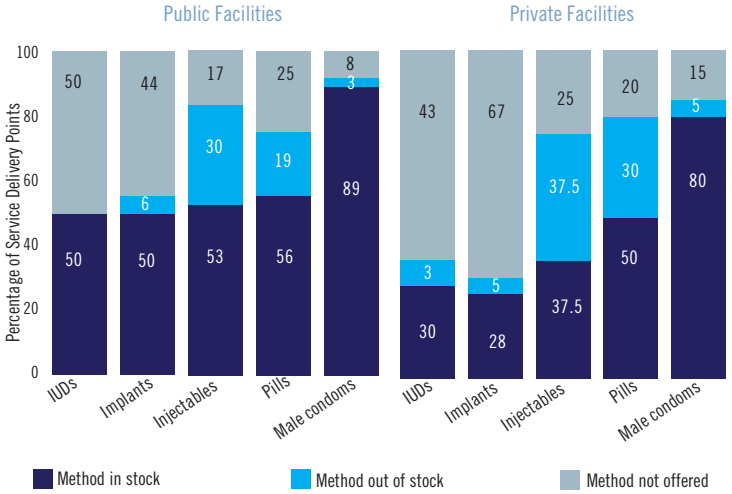
For Current Female Non-Users

Reasons Mentioned For Non-Use Among All Women Wanting To Delay The Next Birth 2 Or More Years (%)	
Not Married	30.1
Perceived Not-At-Risk/Lack of Need	37.4
Method or Health-related Concerns	20.2
Opposition to Use	4.3
Lack of Access/Knowledge	27.4
Other	15.4

For All Women of Reproductive Age, 15-49

	PMA2015-R1
Median Age at First Marriage (25 to 49 years)	20.8
Median Age at First Sex (25 to 49 years)	16.5
Median Age at First Contraceptive Use	20.2
Median Age at First Birth	21.6
Mean No. Of Living Children At First Contraceptive Use	1.8
Women Having First Birth by Age 18 (18-24 years) (%)	15.8
Received FP Info. From Provider In Last 12 Months (%)	16.3
Exposed to FP Media in Last Few Months (%)	34.6

Percent of Facilities Offering & Currently In/Out of Stock, by Method



Percent of Public Facilities Offering at Least 3 or 5 Modern Contraceptive Methods, by Facility Type

Facility Type	3 or more methods	5 or more methods
Health center (n=35)	45.7	20.0
Hospital (n=12)	83.3	75.0
Health clinic (n=1)	0.0	0.0
Other (n=3)	33.3	33.3
Total	52.9	33.3

Service Delivery Points (n= 120; 51 public, 69 private)

	Public	Private	Total
Among All Service Delivery Points:			
Offering Family Planning (%)	70.6	58.0	63.3
With Mobile Teams Visiting Facility In Last 12 Months (%)	5.9	5.8	5.8
Supporting CHWs From This Service Delivery Point (%)	30.0	16.4	22.2
Among Service Delivery Points Offering Family Planning Services:			
Average Number Of Days Per Week Family Planning Is Offered	6.1	5.3	5.7
Offering Female Sterilization (%)	38.9	45.0	42.1
Offering Family Planning Counseling/Services To Adolescents (%)	69.4	55.0	61.8
Charging Fees For Family Planning Services (%)	61.1	82.5	72.4
Percent Integrating Family Planning Into Their:			
Maternal Health Services *(among all offering maternal health services)*	68.0	63.4	65.9
HIV Services *(among all offering HIV services)*	88.9	84.6	87.1
Post-Abortion Services *(among all offering post-abortion services)*	83.3	80.0	40.0

SAMPLE DESIGN

Similar to previous rounds of data collection in Kinshasa, PMA2015/Kongo Central used a two stage cluster design to draw a representative sample for the province of Kongo Central. A total of 52 enumeration areas (EA) were randomly sampled using probabilities proportional to size (PPS). After completing a household listing in each EA, 30 households per EA were randomly selected. All women of reproductive age (ages 15-49) within each selected household were contacted and consented for interviews. Private and public service delivery points (SDP) who provide services to the EA were also interviewed. A total of 1,625 households (96.3% response rate), and 1,565 females (95.8% response rate), were interviewed, along with 76 SDPs.

Data collection for this first round in Kongo Central was conducted between November 2015 and January 2016.

PMA2020
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