



Photo: PMA2020/India

PMA2020/RAJASTHAN, INDIA

MAY-JULY 2018 (ROUND 4)

Performance Monitoring and Accountability 2020 (PMA2020) uses innovative mobile technology to support low-cost, rapid-turnaround surveys to monitor key indicators for family planning. The project is implemented by local universities and research organizations in 11 countries, deploying a cadre of female resident interviewers trained in mobile-assisted data collection. PMA2020/India is implemented by the Indian Institute of Health Management Research (IIHMR) University in Jaipur, with endorsement and technical support provided by the International Institute for Population Sciences and the Ministry of Health and Family Welfare. Overall direction and support are provided by the Bill & Melinda Gates Institute for Population and Reproductive Health at the Johns Hopkins Bloomberg School of Public Health through a grant by the Bill & Melinda Gates Foundation.

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

KEY FAMILY PLANNING INDICATORS

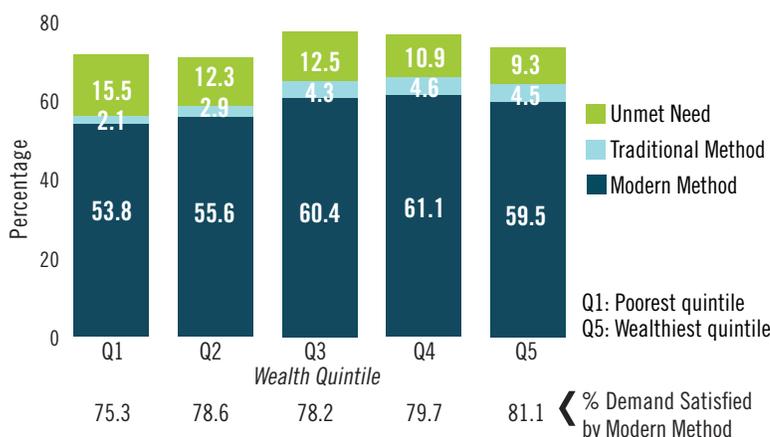
Select Family Planning Indicators Across Recent Surveys
(All and Married Women, Age 15-49)

	Round 2 Feb-April 2017		Round 3 Aug-Oct 2017		Round 4 May-July 2018	
	All	Married	All	Married	All	Married
Contraceptive Prevalence Rate						
All Methods	45.6	59.0	46.4	60.7	48.2	62.2
Modern Methods	42.9	55.4	43.0	56.2	45.3	58.4
Long Acting/Permanent	31.3	40.1	29.8	38.6	32.1	41.1
Total Unmet Need						
For Limiting	5.0	6.4	4.4	5.9	3.8	4.9
For Spacing	5.2	6.8	5.2	7.0	5.4	6.9
Total Demand						
Demand Satisfied by Modern Method (%)	76.8	76.7	76.8	76.4	78.9	78.9

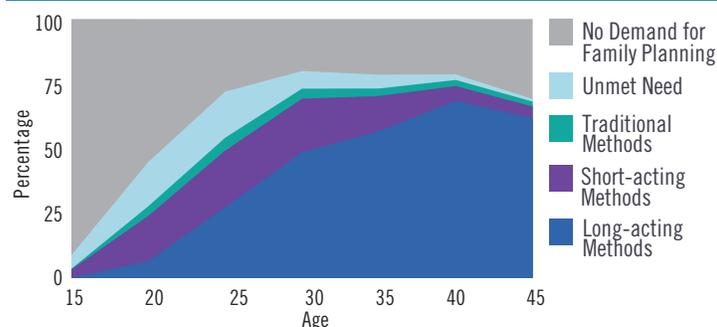
Fertility Indicators (All Women)

	Round 2 Feb-April 2017	Round 3 Aug-Oct 2017	Round 4 May-July 2018
Last Birth Unintended (%)	12.2	14.0	12.6
Wanted Later	10.6	12.8	11.2
Wanted No More	1.7	1.2	1.4

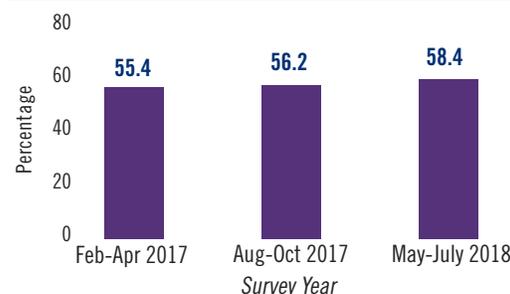
Current Use and Unmet Need Among Married Women of Reproductive Age, by Wealth Quintile



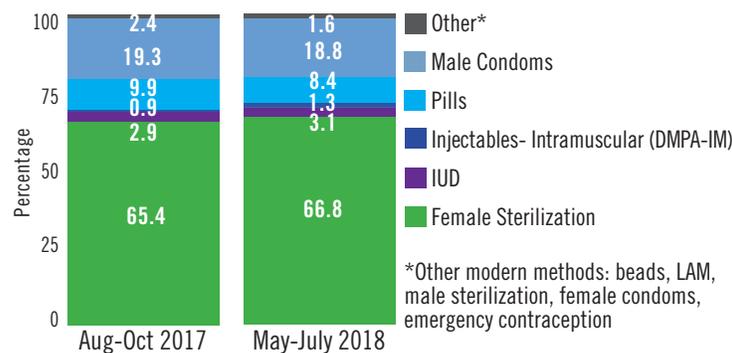
Unmet Need and Contraceptive Use, by Age (All Women)



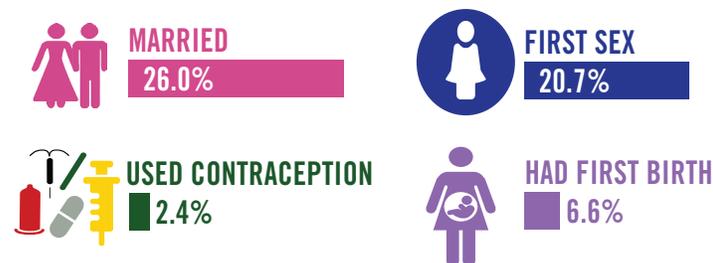
Modern Contraceptive Prevalence Rate (Married Women, Age 15-49)



Current Modern Method Mix Among Married Contraceptive Users



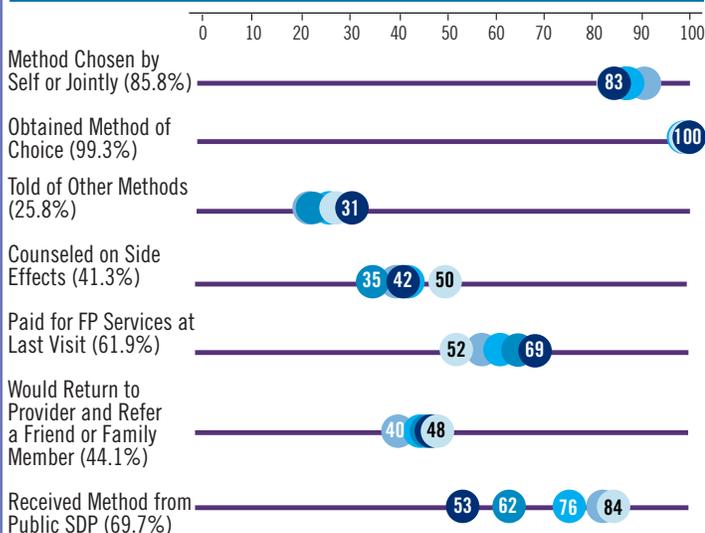
Life Events by Age 18 (Percent of All Women Age 18-24)



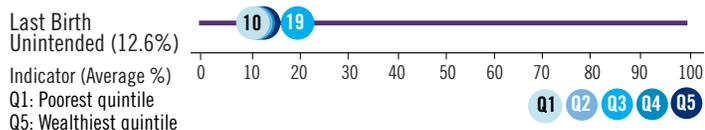
PMA2020/RAJASTHAN, INDIA (MAY-JULY 2018)

INDICATORS FOR ACCESS, EQUITY, QUALITY AND CHOICE

For Current Modern Users, Indicators by Wealth Quintile (n=2,567)

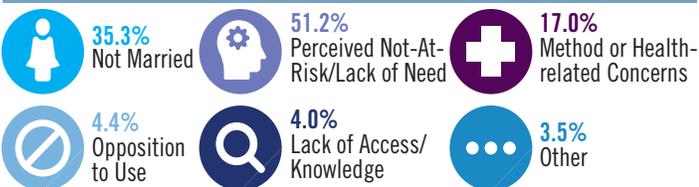


Births in the Past Five Years, or Current Pregnancies (n=1,853)



For Current Female Non-Users (n=1,567)

Reasons Mentioned for Non-Use Among All Women Wanting to Delay the Next Birth Two or More Years (%)



Note: Respondents were able to select more than one answer

Reproductive Health and Contraceptive Indicators



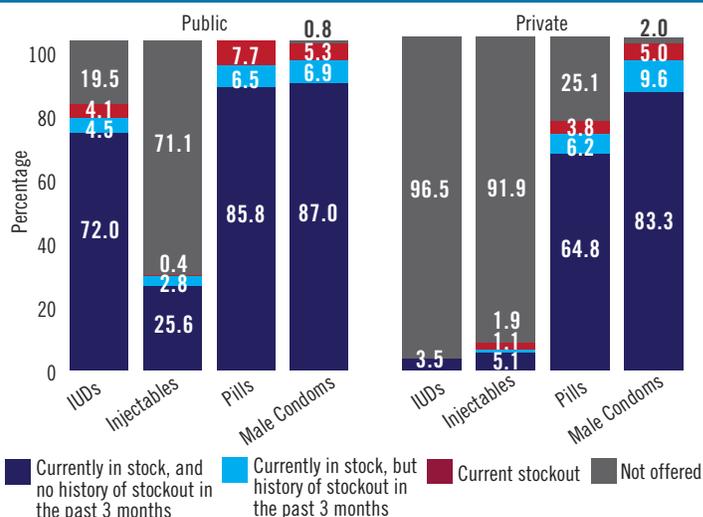
First sex, first contraceptive use: 15-49 years
First marriage, first birth: 25-49 years

	Total	Rural	Urban
Women Having First Birth by Age 18 (18-24 years)	6.6	7.9	4.0
Received FP Info. From Provider in Last 12 Months (%) (15-49 years)	27.5	29.7	23.4
Exposed to FP Media in Last Few Months (%) (15-49 years)	61.7	53.3	77.4

SAMPLE DESIGN

The PMA2018/Rajasthan Round 4 survey used a two-stage cluster design. A sample of 147 enumeration areas (EAs) was drawn by the International Institute for Population Sciences from a master sampling frame. In each EA households and private health facilities were listed and mapped, with 35 households randomly selected. Households were surveyed and occupants enumerated. All eligible females age 15 to 49 were contacted and consented for interviews. The final completed sample included 4,933 households (98.3% response rate), 5,832 females (98.4% response rate) and 610 health service delivery points (97.6% response rate). Private service delivery points (SDPs) in contiguous geographic areas to the EA were included in Rounds 2 to 4 to increase the sample size of private SDPs. Weights were generated to account for oversampling. All estimates are weighted. Data from facility types with sample size less than 10 were calculated, but are not presented in this brief. Data collection was conducted between May and July 2018.

Percent of Facilities Offering Family Planning with Methods in Stock on Day of Interview (n=523, 303 public, 220 private)



Legend: Currently in stock, and no history of stockout in the past 3 months; Currently in stock, but history of stockout in the past 3 months; Current stockout; Not offered

Percent of Public Facilities With At Least 3 or 5 Modern Contraceptive Methods, by Facility Type

Facility Type	3 or more methods	5 or more methods
Hospital	100.0	100.0
Community Health Center	95.2	81.0
Primary Health Center	89.7	27.6
Dispensary	81.8	0.0
Sub-center	69.7	0.0
Total	85.5	36.5

Select Indicators Among Service Delivery Points

	Public	Private	Total
Among All Service Delivery Points:			
Percent Offering Family Planning	98.8	75.3	87.3
With Mobile Teams Visiting Facility In Last 6 Months (%)	24.1	1.9	13.3
Supporting CHWs From This Service Delivery Point (%)	85.5	0.2	43.9
Among Service Delivery Points Offering Family Planning Services:			
Average Number Of Days Per Week FP Is Offered	6.6	6.7	6.7
Offering Female Sterilization (%)	34.6	2.8	21.2
Offering FP Counseling/Services To Adolescents (%)	47.6	19.2	35.6
Charging General User Fees For FP Services (%)	24.8	20.8	23.1
Availability of Instruments or Supplies for IUDs**	89.4	--	--

**Among SDPs that provide IUDs (n=207, 201 public, 6 private). Instruments/supplies include: Sponge-holding forceps, Speculums (large and medium), Tenaculum, Uterine Sound