

KEY FAMILY PLANNING INDICATORS

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

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	PMA2013-R1	PMA2014-R2	PMA2015-R3
Contraceptive Prevalence Rate (CPR)			
All Methods CPR	38.7	35.6	42.3
Modern Method Use mCPR	18.5	20.4	20.4
Long acting CPR	2.5	6.1	5.3
Total Unmet Need	32.5	32.3	31.3
For Limiting	8.3	8.6	10.4
For Spacing	24.2	23.6	20.9
Total Demand	71.2	67.9	73.7
Demand Satisfied by Modern Method	26.0	30.0	27.6

Fertility Indicators (All Women, age 15-49)			
Total Fertility Rate	4.3	4.0	4.4
Adolescent Birth Rate (per 1000, age 15-19)	62.0	62.0	74.0
Recent Births Unintended (%)	48.2	56.5	57.7
Wanted Later	37.2	44.2	45.2
Wanted no More	11.0	12.3	12.5

Current Use and Unmet Need Among Married Women of Reproductive Age, by Wealth Quintile PMA2015-R3







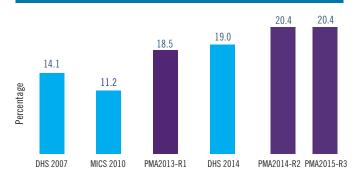


PMA2015/KINSHASA-R3 PERFORMANCE, MONITORING & ACCOUNTABILITY 2020

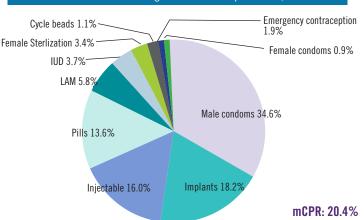
PMA2020 is a five-year project that uses innovative mobile technology to support low-cost, rapid-turnaround, nationally representative surveys to monitor key indicators for family planning. The project is implemented by local university and research organizations in ten countries, deploying a cadre of female resident enumerators trained in mobile-assisted data collection. PMA2020/Kinshasa 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 study was 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 Founda-

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

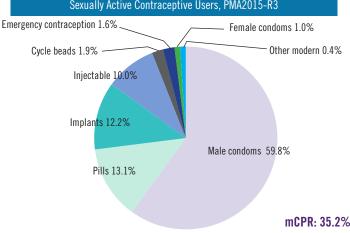
Modern Contraceptive Prevalence Rate of (Married Women, age 15-49)



Current Modern Method Mix Among Married Contraceptive Users, PMA2015-R3

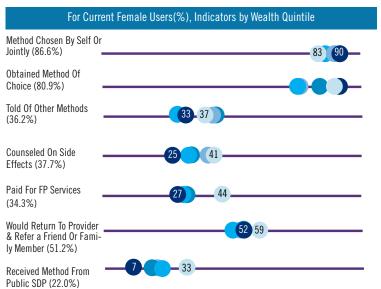


Current Modern Method Mix Among Unmarried Sexually Active Contraceptive Users, PMA2015-R3



PMA2015/KINSHASA-R3

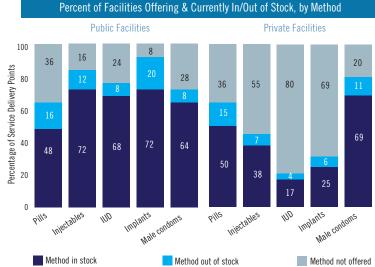
INDICATORS FOR ACCESS, EQUITY, QUALITY AND CHOICE





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	39.6	
Perceived Not-At-Risk/Lack of Need	44.8	
Method or Health-related Concerns	19.4	
Opposition to Use	11.8	
Lack of Access/Knowledge	9.0	
Other	7.9	

For All Women of Reproductive Age, 15-49			
	Round 1	Round 2	Round 3
Median Age at First Marriage (25 to 49 years)	23.0	22.0	21.8
Median Age at First Sex (25 to 49 years)	17.0	18.0	17.3
Median Age at First Contraceptive Use	19.0	20.0	20.4
Median Age at First Birth		20.8	22.1
Mean No. Of Living Children At First Contraceptive Use	0.8	1.6	1.3
Women Having First Birth by Age 18 (18-24 years) (%)		7.1	9.2
Received FP Info. From Provider In Last 12 Months (%)	1.7	6.4	18.7
Exposed to media in last few months (%)	49.4	55.8	58.1



Methods, by Facility Type		
Facility Type	3 or more methods (n=84)	5 or more methods (n=42)
Health center	28.7	19.7
Pharmacy	31.8	1.2
Hospital	70.8	54.2
Health clinic	50.0	50.0
Health post	25.0	0.0
Other	27.3	27.3

Percent of Public Facilities Offering at Least 3 or 5 Modern Contracentive

Service Delivery Points (n= 248; 30 public, 218 private)			
	Public	Private	Total
Among All Service Delivery Points:			
Offering Family Planning (%)	83.3	65.6	67.7
With Mobile Teams Visiting Facility In Last 12 Months (%)	26.7	3.2	6.0
Supporting CHWs From This Service Delivery Point (%)	61.5	28.7	34.5
Among Service Delivery Points Offering Family Planning Services:			
Average Number Of Days Per Week Family Planning Is Offered	5.2	5.7	5.7
Offering Female Sterilization (%)	20.0	8.4	10.1
Offering Family Planning Counseling/Services To Adolescents (%)	40.0	30.1	31.6
Charging Fees For Family Planning Services (%)	84.0	79.7	80.4
Percent Integrating Family Planning Into Their:			
Maternal Health Services (among all offering maternal health services)	87.5	59.6	65.5
HIV Services (among all offering HIV services)	96.2	89.6	91.4
Post-Abortion Services (among all offering post-abortion services)	90.0	63.8	70.5

SAMPLE DESIGN

PMA2015/Kinshasa-R3 used a two stage cluster design to draw a representative urban sample in Kinshasa. A sample of 58 enumeration areas (EA) was drawn (PPS). For each EA, 30 households were selected, and a random start method was used to systematically select households. All women of reproductive age (15-49) within each selected household were contacted and consented for interviews.

Data collection was conducted between October, 2013 and January, 2014 for round 1 and August to September 2014 for round 2; and May to June 2015 for round 3.





