What PMA panel data can tell us about method use dynamics

Scott Radloff, JHU/Gates Institute

Technical Consultation on Expanding Method Choice
September 25, 2019
KEY ACHIEVEMENTS UNDER PMA2020

2013

66
ROUNDS OF DATA COLLECTION COMPLETED

SURVEYS IN 11 COUNTRIES IN AFRICA AND ASIA

6
NEW SURVEY TOPICS

2,700+
LOCAL DATA COLLECTORS TRAINED

500,000+
INTERVIEWS CONDUCTED

8,600+
DATASETS DOWNLOADED

PLATFORM LAUNCHED
PMA: What’s New

Design: Multi-Panel Design with annual cross-sectional data
- Household/female panel
- Facility panel
- Client-Exit-Interview panel (with phone follow-up)

Content: New panel baseline questions:
- Community norms
- Quality of care
- Women & girls empowerment
- Adolescent-specific questions

Geographies:
- 4 new: Benin, Guinea, Togo, Pakistan
- 8 continuing: Burkina Faso, Cote d’Ivoire, DR Congo, Niger, Nigeria, Kenya, Uganda, India/Rajasthan
PMA to add panel feature to cross-section

- **Panel Enrollment**
- **Open Panel Design**
- **X-Section Results**
  - Linked
  - SDP Panel
  - SDP + CEI
  - SDP Interview + Client Exit Interview
  - 6Mo

- **Panel Results**
  - Linked
  - Public
  - Private

- **YR1**
  - SDP Panel
  - SDP + CEI

- **YR2**
  - Panel Results
  - Linked
  - SDP Interview + Client Exit Interview
  - 6Mo

- **YR3**
  - Panel Results
  - Linked
  - SDP Interview + Client Exit Interview
  - 6Mo

- **+ Age-in Move-in/out**
  - YR1
  - YR2
  - YR3
PMA will continue to collect annual cross-sectional estimates, including...

**DMPA-SC Method Availability: Burkina Faso**

**Method Use Trends: Burkina Faso**

**DMPA-SC has become increasingly available, especially through the public sector**

**Method mix shifting with increased availability of implants and DMPA-SC**
PMA panel can help us understand dynamic change in contraceptive use/demand over time

- Two cross-sectional PMA2020 surveys would yield contraceptive use/demand status for two points in time -- as shown here for 2014 and 2018 in stacked bars.

- PMA panel design reveals the change in contraceptive use/demand status experienced by individual women – as shown here in flows or “ribbons”.

- Panel design allows a depiction of the “churn” in contraceptive use status and for understanding factors that drive change in status.
Need & intention as predictors of time to adoption

* Uganda Round 1 Follow-up after 4 years (2014-2018)
Need & intention as predictors of time to adoption, continued

Need-intention concordance

% Adopting by 24 months

<table>
<thead>
<tr>
<th>Intention to Use</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unmet Need</td>
<td>33</td>
<td>16</td>
</tr>
<tr>
<td>NO</td>
<td>50</td>
<td>16</td>
</tr>
</tbody>
</table>

*Uganda Round 1 Follow-up after 4 years (2014-2018)*
CEI 4-month follow-up: contraceptive status change, Kinshasa

While most women stayed in the same status, there is much “churning”, with
- 45% of SA users discontinue
- 22% of non-users shift to a SA method

Women are more likely to continue use if:
- Cost was not considered a problem
- They received from a higher-level facility
- Heard about FP on the radio
- They were more educated, wealthier
- They were not married
- Distance not a factor (urban only)

https://www.pmadata.org/technical-areas/pma-agile
Thank you!

pmadata.org
/pm4action
@pm4action
@pm4action