

THE NIGERIAN URBAN REPRODUCTIVE HEALTH INITIATIVE: MID-TERM FINDINGS FOR KADUNA

This fact sheet presents key findings from a mid-term survey of 1,243 women ages 15 to 49 in Kaduna, conducted in 2012 by the Measurement, Learning & Evaluation (MLE) Project and the Nigerian Urban Reproductive Health Initiative (NURHI)¹. Trends between the baseline survey (conducted in 2010–2011) and the mid-term survey are presented.

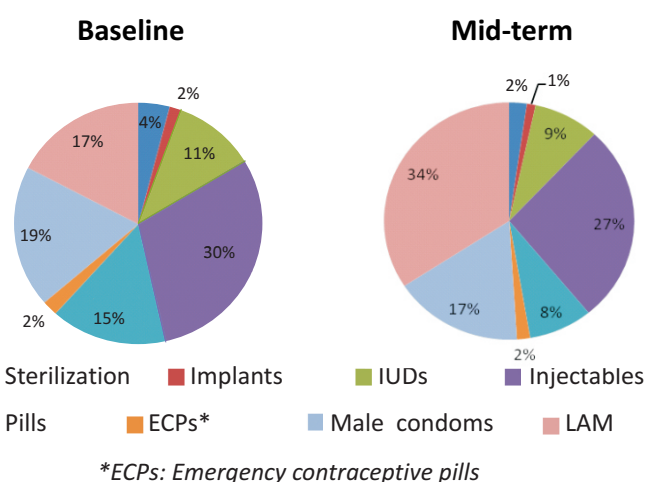
Positive trends

- Large increases between baseline and mid-term in spontaneous or probed knowledge of any modern method. For women, it increased from baseline to mid-term—76% to 99%, respectively. It also improved for men, from 81% to 100%.
- A significant decline in the percentage of women in union not using a method, from 73% at baseline to 57% at mid-term.
- A significant increase in the use of modern contraceptive methods by women in union from 20% to 35%.
- Decline in unmet need for family planning (FP) for both spacing and limiting births.

MODERN METHOD MIX

Among all women in union, modern contraceptive use was higher at mid-term as compared to baseline. Kaduna saw the largest increase among the four intervention cities. However, the shares of long-acting and short-term method use declined between the two survey periods for all methods, except for Emergency Contraceptive Pills (ECPs), which remained at 2%, and the lactational amenorrhea method (LAM)/other modern methods, which increased substantially, from 17% to 34%.

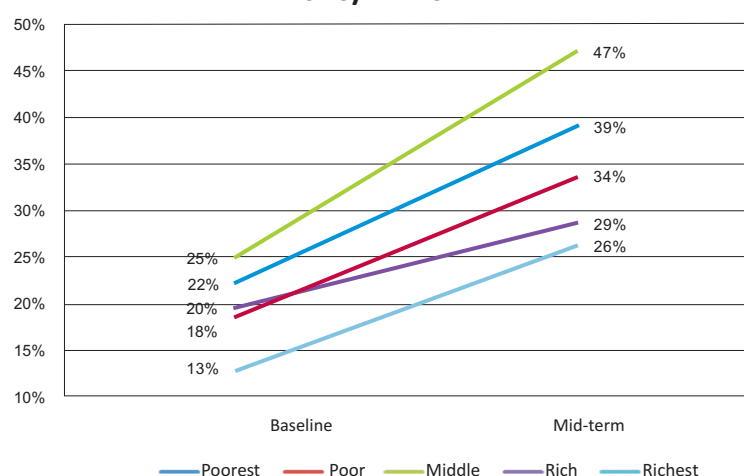
Trends in the Method Mix Among Modern Method Users, Kaduna, 2010/11–2012



CONTRACEPTIVE USE

- As noted, use of modern methods by women in union² increased by 15 percentage points between baseline and mid-term. Use of traditional methods also rose, albeit slightly, from 7% to 9%.
- Use of modern methods increased among all wealth quintiles between baseline and mid-term.

Trends in Modern Contraceptive Use, Kaduna, 2010/11-2012



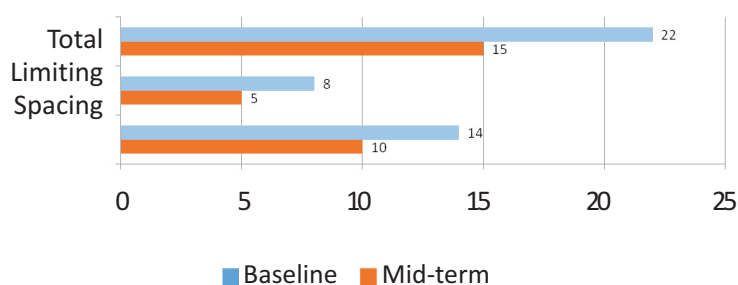
UNMET NEED

- Unmet need for FP decreased between baseline and mid-term, from 22% to 15%.
- Unmet need at mid-term is higher for spacing births (10%) than for limiting births (5%).

¹ For the full report, see "Measurement, Learning & Evaluation of the Urban Health Initiative: Nigeria 2012 Mid-term Survey" (February 2013). http://www.urbanreproductivehealth.org/sites/mle/files/nigeria_midterm_twp2_2013.pdf.

² Unless otherwise noted, data presented in this fact sheet are among women in union (defined as married or living with a partner).

Trends in Unmet Need for Family Planning, Kaduna 2010/11-2012



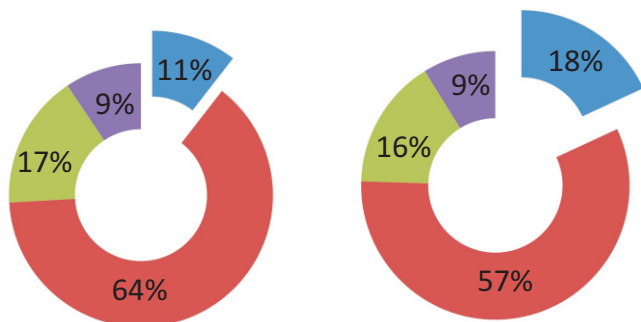
BARRIERS TO USE

- Intention to use: The number of women who intend to use FP in the next 12 months increased by 7 percentage points (11% to 18%) among the 56% of women in union who currently do not use any modern or traditional contraceptive method.

Intention to Use Family Planning in Next 12 Months, Kaduna, 2010/11–2012 Among Women Not Currently Using Contraception

Baseline

Mid-term



■ Intends to Use ■ Does Not Intend to Use ■ Does Not Know ■ Missing

REASONS FOR NON-USE:

- Fertility-related reasons: As at baseline, reasons for non-use include infrequent or no sex (43%), want more children (12%), pregnant (11%) or breastfeeding (8%).
- Opposition to use declined between baseline and mid-term. For example, personal opposition declined dramatically from 18% to 4%, and partner opposition from 9% to 4%. Religious prohibition likewise decreased, by one-half a percentage point.
- Method-related reasons: Such reasons also declined. For example, fewer women reported not using contraception due to fear of side effects, which decreased from 14% to 8%. However, health concerns increased by nearly 1 percentage point.
- Other reasons: As was found at baseline, at mid-term virtually no women cited lack of access and cost (0.3% and 0% respectively). No women cited lack of knowledge about how to use a method as a barrier.

For more information about urban reproductive health, please visit www.urbanreproductivehealth.org and www.nurhitoolkit.org.

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