Why do we measure what we do? Reflecting on the history and current use of demand-side family planning indicators

Measuring Demand side of FP: Case for Uganda

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May 31\textsuperscript{st} 2023

Acknowledgement: Simon Peter Kibira
Fertility desires, Intended Pregnancies, and total demand for FP:
ALL women, age 15-49 yrs; Sept 2022 survey

Intended pregnancy/desire within 2 years

- mCPR
- Traditional CPR
- Unmet need

Total demand = mCPR + Traditional CPR + Unmet need (=56.7)

Demand satisfied by modern FP
• mCPR / (Total demand)
• =34.9/56.7 = 61.6%
**4.2 PROGRAMMATIC GOALS**

Two programmatic mCPR goals are provided under an ambitious scenario.

<table>
<thead>
<tr>
<th>Ambitious Goals</th>
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<tr>
<td>1. Increase national mCPR from 30.4% in 2020 to 39.6% (All Women) by 2025 through improving access to sexual and reproductive health and rights information and services.</td>
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<tr>
<td>2. Increase national mCPR from 38.7% in 2020 to 46.6% (married women or women in union) by 2025 through improving access to sexual and reproductive health and rights information and services.</td>
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<td>3. Reduce the unmet need to 15% with the ultimate goal of achieving below 10% by 2025.</td>
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**COMMITMENT OBJECTIVES**

**OBJECTIVE 1: INCREASE EQUITABLE ACCESS AND VOLUNTARY USE OF MODERN CONTRACEPTIVE METHODS FOR ALL WOMEN AND COUPLES**

1.1 **OBJECTIVE STATEMENT:** The Government of Uganda commits to increase the mCPR for all women from 30.4% in 2020 to 39.6% by 2025 and reduce unmet need from 17% in 2020 to 15% by 2025.

1.2 **TIMELINE:** September 2021-July 2025
Limitations of two key FP indicators

1. Unmet need
   • *Estimated for:* All women, married women and sexually active unmarried women
   • Unmet need is *not individual-level/person defined,* but been used as such
     • Pregnant women with unintended pregnancy at the time, are now included
   • Total demand
     • Limitations of unmet need directly affect this measure too
     • What does a changing demand, or demand satisfied mean?
**Suggested adjustments to key indicators for enhanced monitoring for FP program progress & Impact**

1) **Define a “risk set”** for the unmet need focusing only on the sexually active irrespective of marital status;
   
i. Then non-sexually active will not contribute to estimate of “need”

2) **Intention for future use** of contraceptive
   
i. Individual or Person-centered/defined measure

   ii. **All non-current FP users are included**, unlike in unmet where women non-FP users and wish to limit and postpone childbearing 2+ years

   iii. Likely to yield a better estimate of potentially needed FP services

3) **Comprehensive/Adequate FP knowledge**
   
i. Comprehensive/Adequate FP knowledge is not defined/assessed yet may be important for informing individual’s decision on FP method use or non use
Thank you