

The Impact of and Response to COVID-19 in Sub-Saharan Africa

Philip Anglewicz

1/7/25



KEY ACHIEVEMENTS UNDER PMA AND PMA2020

2013



PLATFORM
LAUNCHED

71

ROUNDS OF
DATA
COLLECTION
COMPLETED



SURVEYS IN
11
COUNTRIES
IN AFRICA
AND ASIA

6

NEW
SURVEY
MODULES



2019



PHASE 2
LAUNCHED

3,000+

LOCAL DATA
COLLECTORS
TRAINED



750,000+

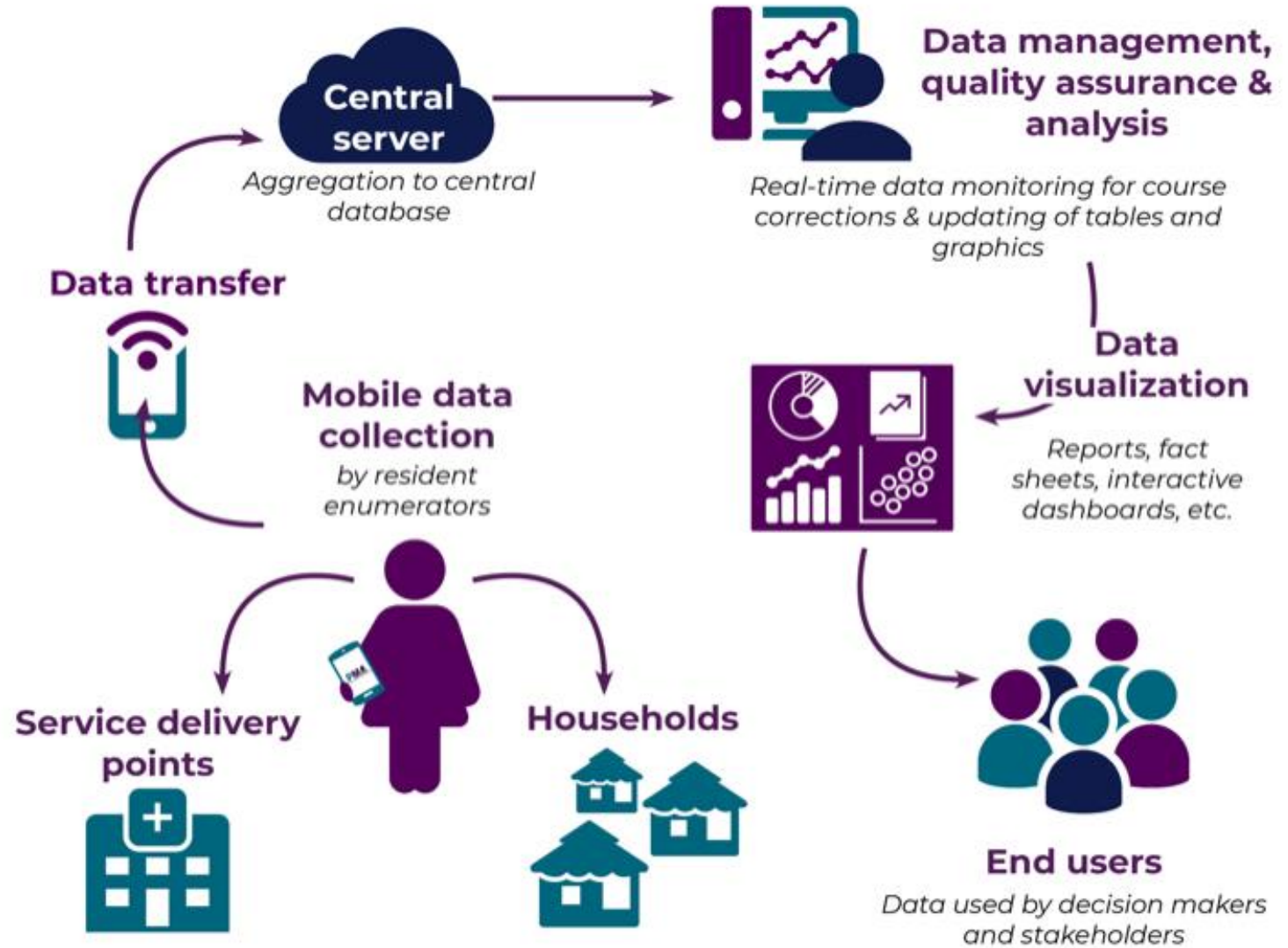
INTERVIEWS CONDUCTED



13,500+

DATASETS
DOWNLOADED

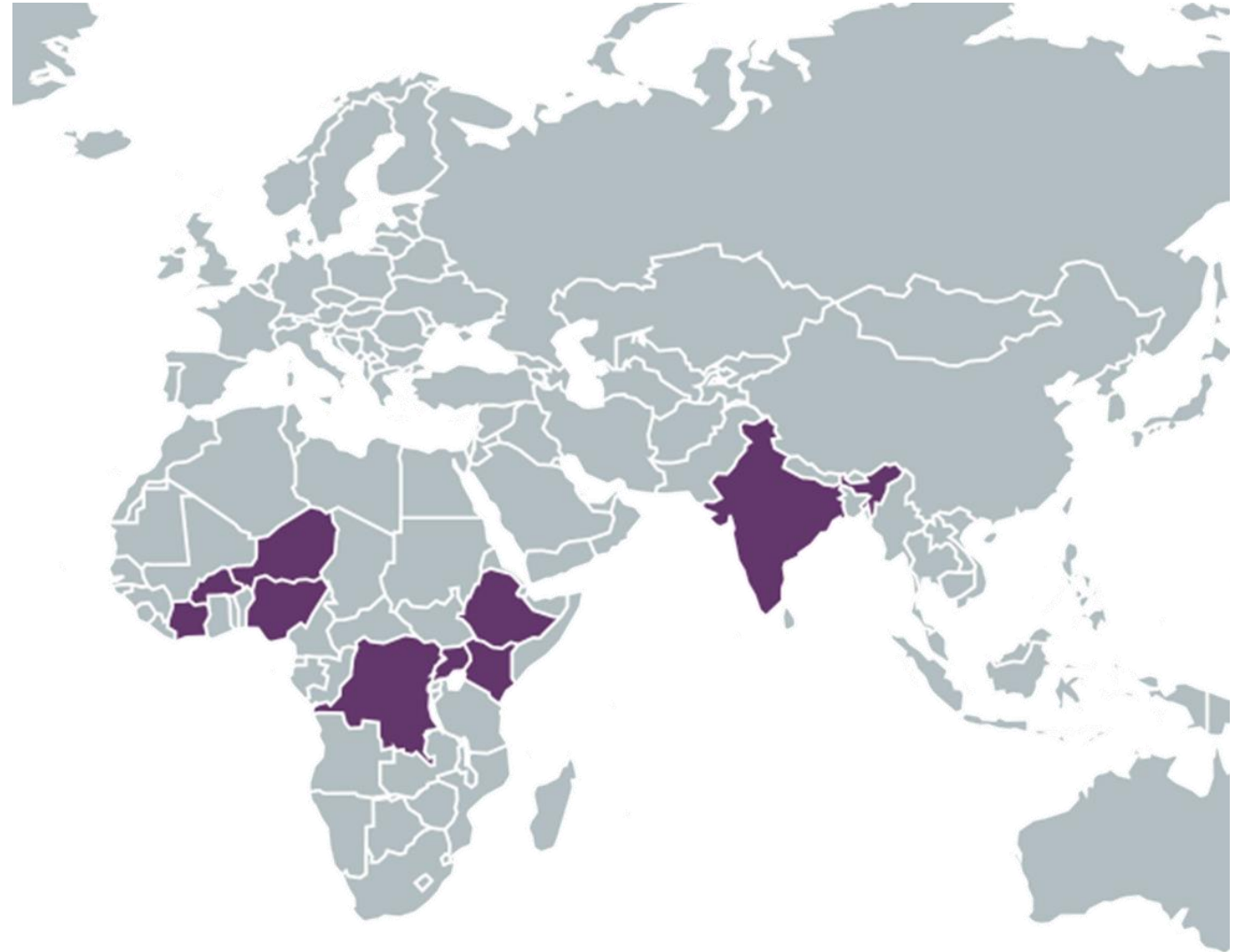
How PMA Works



Where We Work

Countries/Partners

DR Congo	University of Kinshasa
Uganda	Makerere University
Kenya	International Centre for Reproductive Health
Nigeria	CRERD
Burkina Faso	ISSP/University of Ouagadougou
Niger	National Statistical Institute (INS)
India	Indian Institute of Health Management Research
Côte d'Ivoire	ENSEA



Data: Performance Monitoring for Action (PMA)

■ PMA study design COVID-19 updates

PMA Panel Surveys: Timeline													
Country	2019	2020				2021				2022			
	QTR 4	QTR 1	QTR 2	QTR 3	QTR 4	QTR 1	QTR 2	QTR 3	QTR 4	QTR 1	QTR 2	QTR 3	QTR 4
DR Congo	P1		FQ		P2		SDP		P3		SDP		
Nigeria	P1		FQ		P2		CEI		P3		CEI		
Kenya	P1		FQ		P2		CEI		P3		CEI		
Burkina Faso	P1		FQ		P2		CEI		P3		CEI		
India		----->	----->	P1		SDP		P2		SDP		P3	
Cote d'Ivoire		----->	----->	P1		SDP		P2		SDP		P3	
Uganda		----->	----->	P1		CEI		P2		CEI		P3	
Niger		----->	----->	P1		CEI		P2		CEI		P3	
	P1	Phase 1	SDP	SDP+CEI	P2	Phase 2	SDP	SDP+CEI	P3	Phase 3	SDP	SDP+CEI	
			CEI	CEI follow-up			CEI	CEI follow-up			CEI	CEI follow-up	

PMA COVID-19 Surveys: Approach



Correspondence with PMA countries

Our PIs in-country liaised with COVID-19 authorities in their countries, considered logistical feasibility, reviewed proposed topics and questions

Survey Instrument topics covered

- Awareness of COVID-19
- Exposure to COVID-19 messages in the media
- COVID-19 risk perception
- Knowledge of COVID-19 symptoms and transmission
- Risk mitigation practices
- Socioeconomic consequences of COVID-19
- Impact of COVID-19 on access to and use of family planning & health services, and fertility intentions

Training of interviewers (Resident Enumerators)

- Completely virtual in Nigeria, Kenya, and the DRC
- In person (socially-distanced) in Burkina Faso

PMA COVID-19: Data Collection

PMA COVID-19 Data Collection

- Phone numbers collected for participating women in baseline core survey
- Interviewers conduct COVID-19 interviews via phone, enter information on smart phones via ODK
- Target samples: women providing phone numbers in Kenya (nationally-representative), Burkina Faso (nationally-representative), DRC (Kinshasa), and Nigeria (Kano, Lagos)
- Can link baseline core survey (socioeconomic characteristics, family planning characteristics, etc...) with COVID-19 information

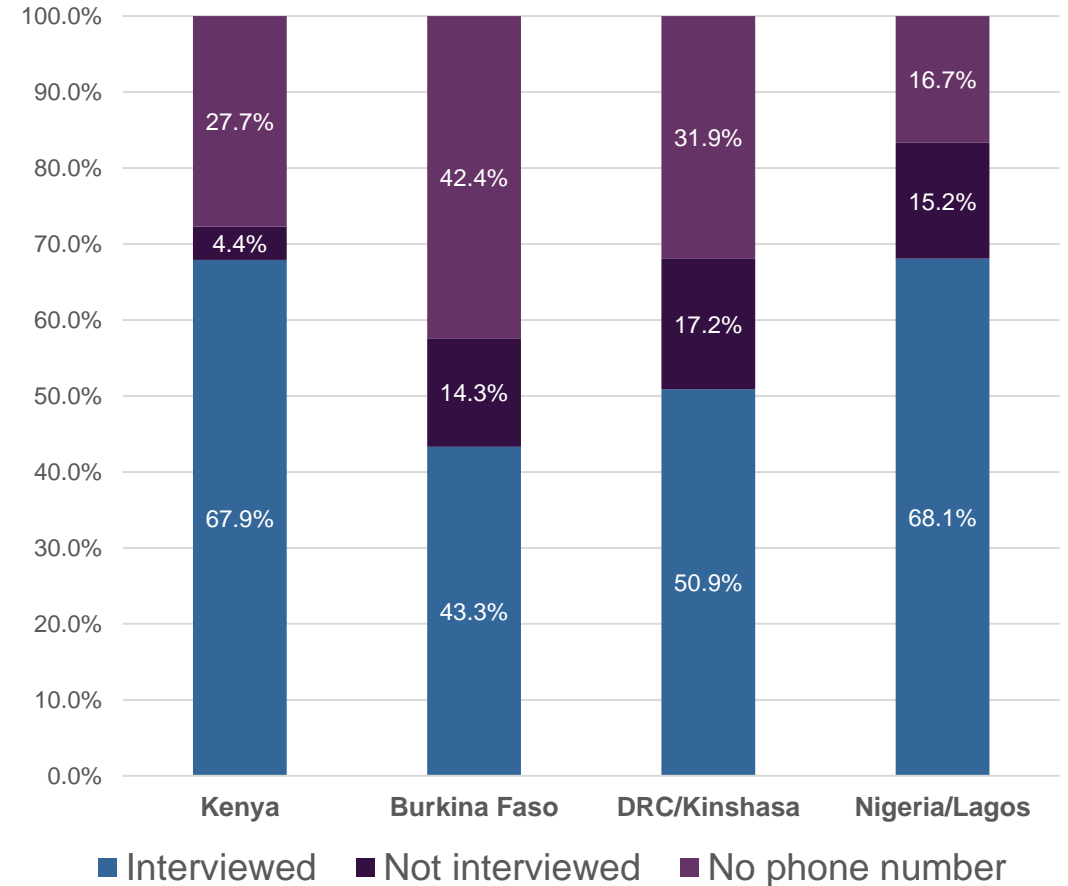


PMA: COVID-19 Data Collection

■ PMA COVID-19 study design

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- REs conduct COVID-19 interviews via phone, enter information on smart phones via ODK
- Target samples: women providing phone numbers in Kenya (nationally-representative), Burkina Faso (nationally-representative), DRC (Kinshasa), and Nigeria (Lagos)
- Can link baseline core survey (socioeconomic characteristics, family planning characteristics, etc...) with COVID-19 information
- PMA used inverse probability weighting to adjust for women not providing a phone number, and not responding to the survey- using baseline

PMA COVID-19 Phone Survey Response Rates





Good reproductive health policy starts with credible research

OUR WORK TOPICS REGIONS AREA



Crisis on the Horizon: Devastating Losses for Global Reproductive Health Are Possible Due to COVID-19

EQUIPOP.ORG NOTRE ORGANISATION NOS ACTUALITÉS NOS ACTIONS NOTRE EXPERTISE NOUS SOUTIENONS

Protecting women's health and rights during Covid-19

Experiences and feminist perspectives from West African civil society

INCLUDE SEXUAL AND REPRODUCTIVE HEALTH IN COVID-19 FUNDING APPEALS

ADVOCACY RESOURCES AVAILABLE AT IAWG.NET/COVID19/ADVOCACY

IAWG Inter-Agency Working Group on Reproductive Health in Crises



GLOBAL HEALTH: SCIENCE AND PRACTICE
Dedicated to what works in global health programs

OPEN ACCESS

COMMENTARY

Opportunities and Challenges of Delivering Postabortion Care and Postpartum Family Planning During the COVID-19 Pandemic

Anne Pfitzer,^a Eva Lathrop,^b Alison Bodenheimer,^c Saumya RamaRao,^d Megan Christofield,^a Patricia MacDonald,^e Bethany Arnold,^a Neeta Bhatnagar,^a Erin Mielke,^e Meridith Mikulich^e

PERSPECTIVE



SRHM SEXUAL AND REPRODUCTIVE HEALTH MATTERS
MORE THAN A JOURNAL

Reproductive health under COVID-19 – challenges of responding in a global crisis

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DOI: 10.1080/26410397.2020.1773163

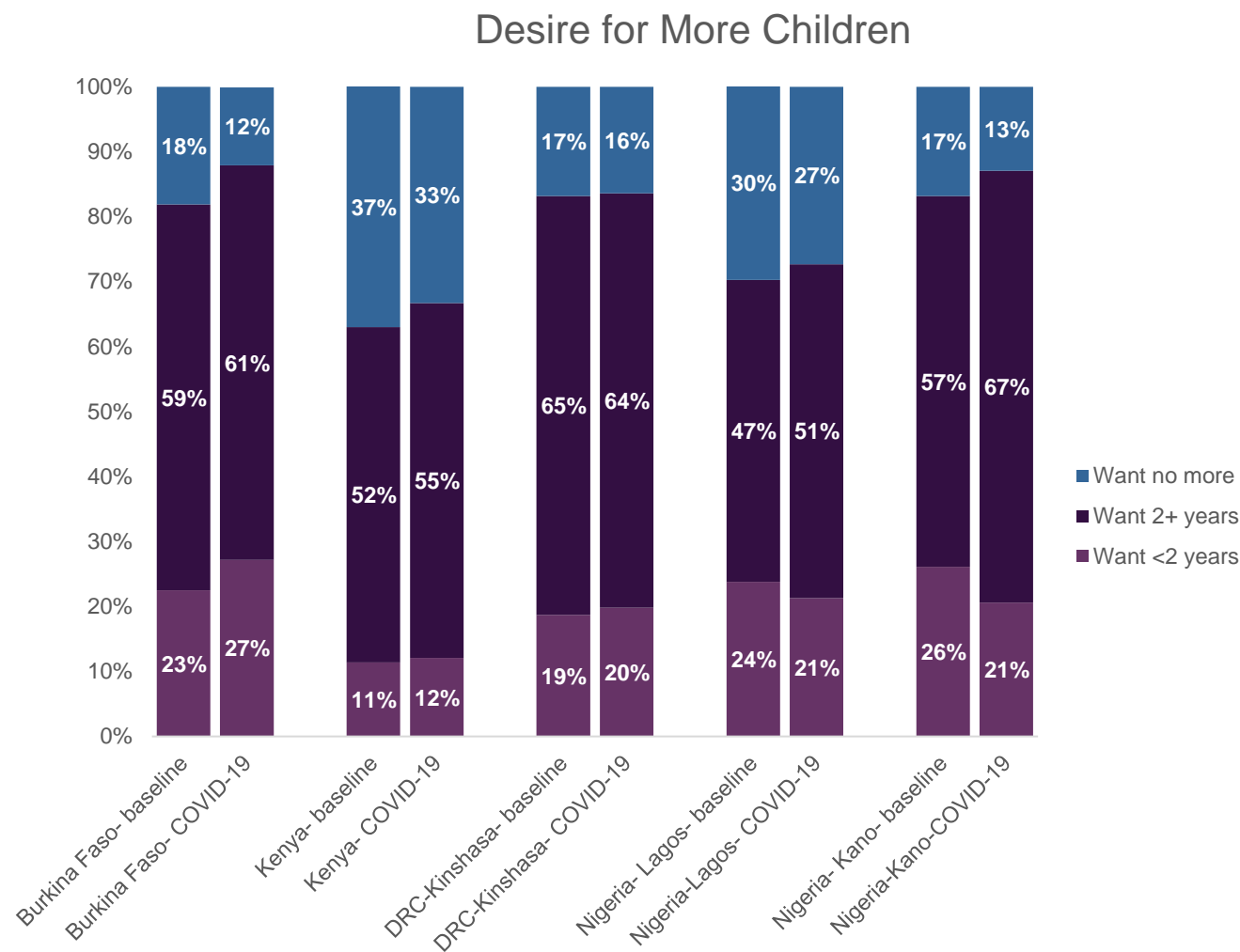


Fertility Intentions: Population-Level Trends

- Goal: compare population-level estimates of fertility desires from pre-COVID surveys from late 2019/early 2020 (baseline) with phone-based surveys of the same sample of respondents conducted in June and July of 2020 (during COVID-19).
- Identify changes in fertility desires as a result of the COVID-19 pandemic.
 - Changes in the women reporting that she would like to have a/another child or no more children, and if she would like to have a/another child, how long she would prefer to wait before the birth
 - Categorized women as (1) wanting a child within 24 months, (2) after 24 months, or (3) not desiring any more children

Fertility Intentions: Population-Level Trends

- Significant differences between the two surveys in Burkina Faso, Kenya, and Lagos: **declines in the proportion of women who stated that they wanted no more children** and **modest increases in the percentage of women who reported that they wanted a child but not for another 2+ years.**
- In Burkina Faso, there was also a five percentage-point increase in women desiring a child within two years.
- No significant differences between the two surveys in Kinshasa or Kano.

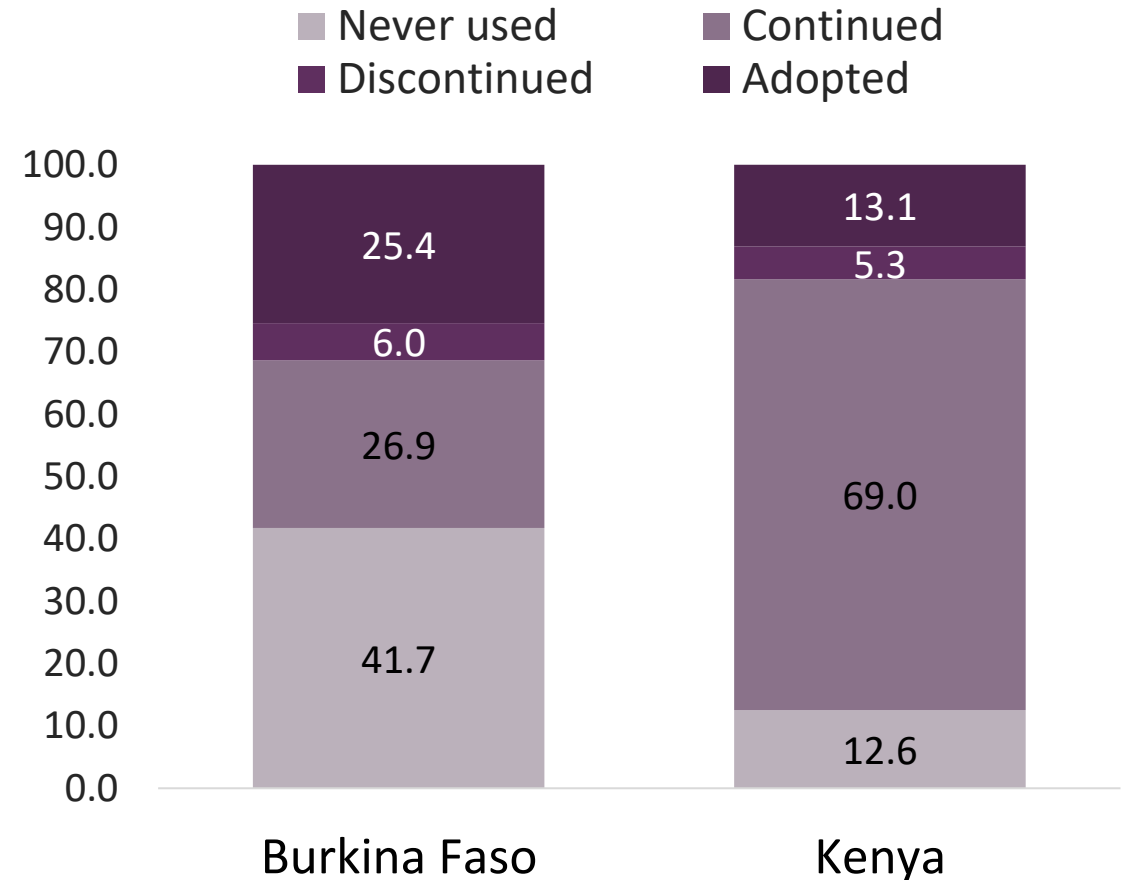


Individual-Level Contraceptive Changes During COVID-19

- **Goal:** estimate the **extent to which women's contraceptive status changed** at the individual-level (i.e., contraceptive adoption, discontinuation, and switching) between the pre-COVID-19 and COVID-19 periods
- Analysis limited to **women who were at risk of unintended pregnancy** (sexually active, not sterile, not pregnant, and not trying to have a child in the next year)
- Data from Burkina Faso and Kenya

Individual-Level Contraceptive Changes During COVID-19

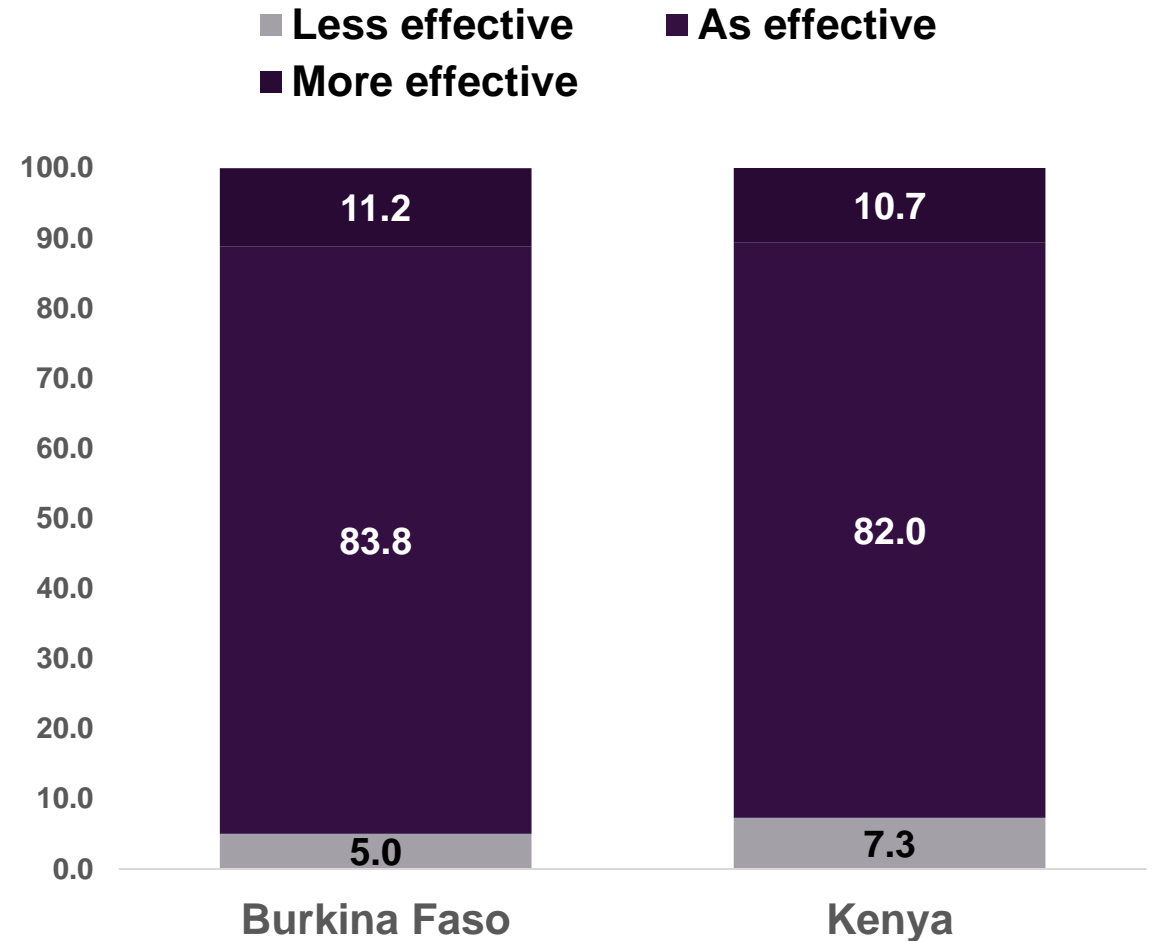
- Among women at risk of unintended pregnancy, **most did not change their contraceptive use status** during COVID-19
- Those who changed their status were **more likely to adopt a method than discontinue use**



Individual-Level Contraceptive Changes During COVID-19

Among **women at risk of unintended pregnancy** who were using contraception before and during the pandemic:


- Most were using methods during COVID-19 that were **as or more effective**, relative to their pre-pandemic method
- Only 5% of these women in Burkina Faso and 7% in Kenya **switched to less effective methods**





Thank you!

www.pmadata.org

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 [@pm4action](https://www.instagram.com/pm4action)

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Acknowledgments and Thank You

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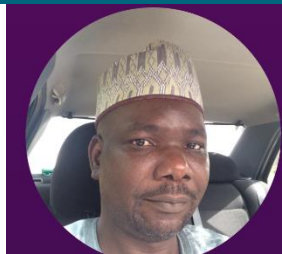
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