

The Nigerian Urban Reproductive Health Initiative (NURHI) Endline Findings for Zaria

BACKGROUND

The Nigerian Urban Reproductive Health Initiative (NURHI), led by Johns Hopkins Center for Communication Programs in partnership with the Association for Reproductive and Family Health and the Center for Communication Programs Nigeria, was initiated in 2009 with the aim of increasing modern contraceptive use, especially among the urban poor, initially in Abuja, Ibadan, Ilorin and Kaduna and later in Benin City and Zaria. The Measurement, Learning & Evaluation (MLE) Project, led by the Carolina Population Center at the University of North Carolina in Chapel Hill in partnership with National Population Commission of Nigeria and Data Research and Mapping Consult, undertook an impact evaluation of the NURHI project. This fact sheet presents key findings from longitudinal surveys of women, households and facilities in Zaria, Nigeria (baseline 2010/2011 and endline 2014). For more information on the MLE Project please visit <https://www.urbanreproductivehealth.org/>.

FAMILY PLANNING USE INDICATORS

Contraceptive Method Use Among All Women and Women in Union Aged 15-49, Zaria

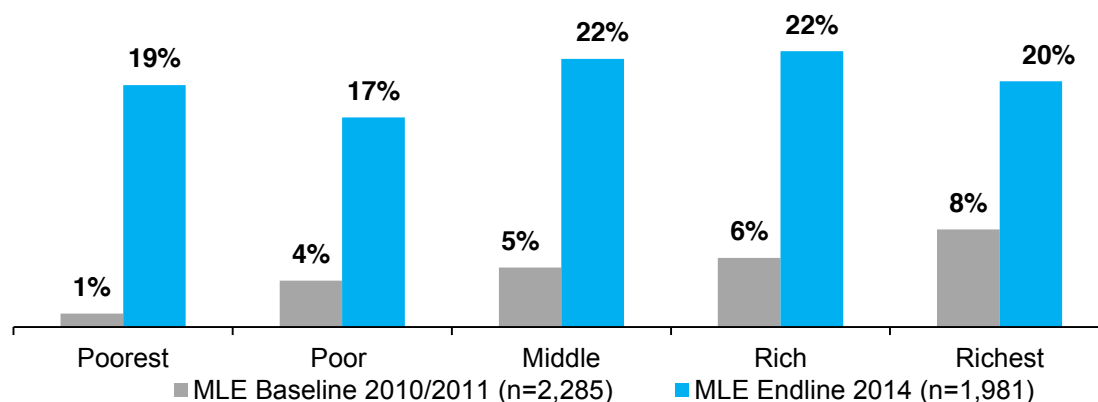
	MLE Baseline 2010/2011		MLE Endline 2014	
	All (%)	In Union (%)	All (%)	In Union (%)
Any method use	6.7	8.5	26.7	32.2
Any modern ^a method use	4.8	5.9	20.0	24.0
Any LAMP ^b use	0.4	0.6	1.0	1.3
Intends to use FP in next 12 months*	9.2	11.5	16.3	19.2
Number of women	3,279	2,285	2,494	1,981

^aModern methods include male and female sterilization, daily pill, IUD, implants, injectables, male and female condoms, EC, LAM

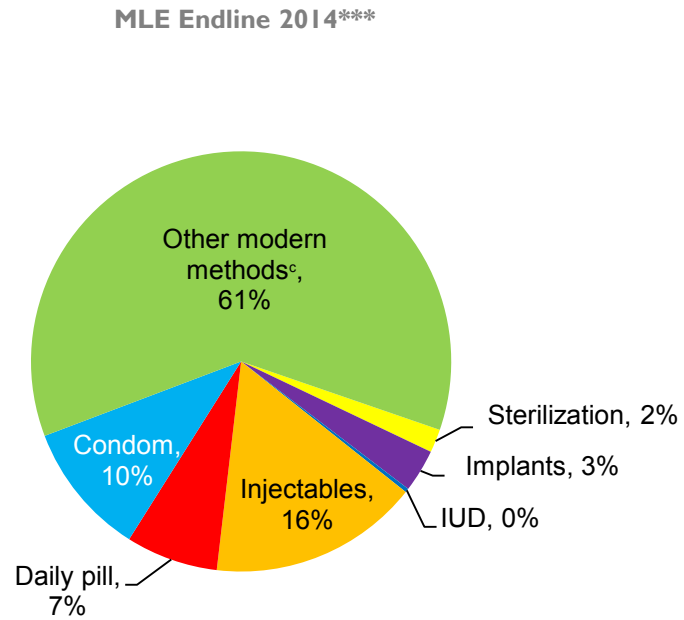
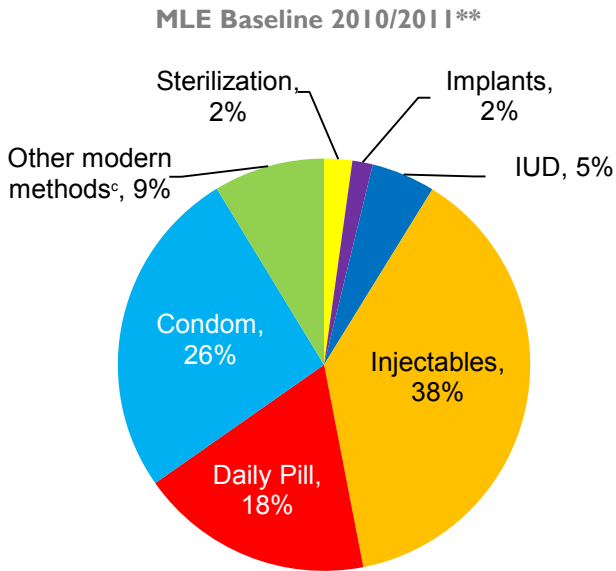
^bLAMP includes implants, IUD, and male and female sterilization

* Among all women not currently using contraception; does not include women reporting menopause/hysterectomy or "can't have children" as reason for not using FP

Modern Method Use by Wealth Quintile Among Women in Union Aged 15-49, Zaria

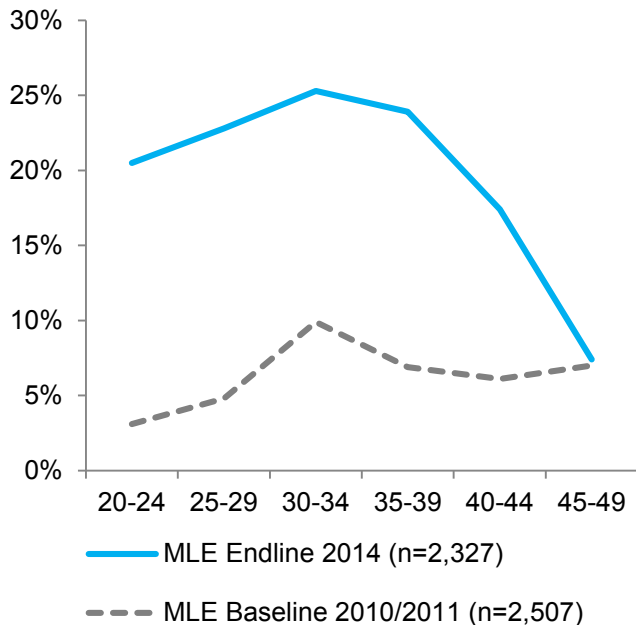


Modern Contraceptive Method Mix, Zaria*

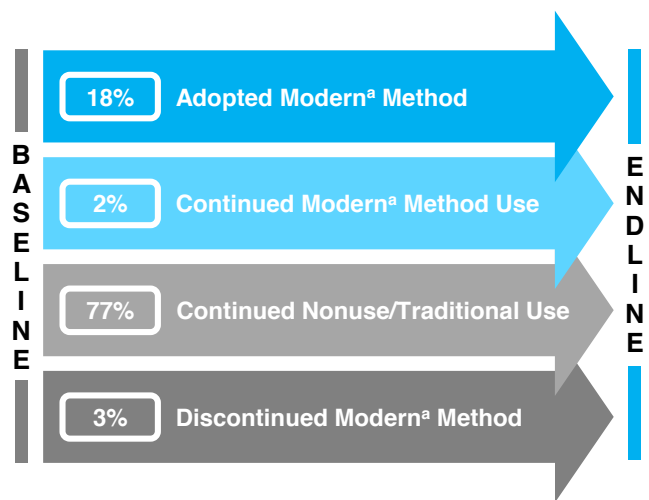


^c Other modern methods include LAM, female condom, EC
 *Among all current modern contraceptive method users
 ** n= 157
 *** n=500

Percentage of Women Using a Modern Contraceptive Method by Age, Among All Women Aged 20-49, Zaria



Contraceptive Method Change Between MLE Baseline 2010/2011 and MLE Endline 2014 Among Women Aged 15-49, Zaria



^aModern methods include male and female sterilization, daily pill, IUD, implants, injectables, male and female condoms, EC, LAM (n=2,494)

NURHI Demand Generation Indicators

Exposure to NURHI Demand Generation Activities in the Past Year at MLE Endline 2014, Zaria	
Heard/seen NURHI slogans & logos	
"Get it Together" slogan	18%
"Know. Talk. Go." slogan	12%
"Ko ku gane, tazaran haihuwa" slogan*	56%
"NURHI" program logo	39%
Heard/seen NURHI radio/TV	
NURHI radio program (Pidgin English, Yoruba, and Hausa languages)	31%
Heard FP message on TV (last 3 months)	9%
Seen NURHI print media	
"Be Successful" cards	16%
"Be Beautiful" cards	18%
Badge/button that said "Ask me about FP"	3%
Total number of women	2,602

* Among women who report understanding Hausa

KEY RESULT HIGHLIGHTS FROM MLE SURVEYS

- A significant increase in modern CPR was seen in Zaria, particularly use of implants. The greatest change in modern method use by wealth quintile was among the poorest, the population of focus for NURHI activities.
- A higher percentage of women are using a modern method at endline, with notable increases among young women 20-24 and 25-29. Eighteen percent of women adopted a modern method while 3 percent discontinued use for an overall increase of 8 percentage points.
- Over half of women living in Zaria reported hearing the Hausa NURHI slogan and less than 10 percent saw an FP message on TV. Under a quarter of women were exposed to NURHI print media messages.
- At endline, among NURHI facilities in Zaria there were fewer stock-outs of IUDs, implants, and injectables compared to non-NURHI facilities. NURHI renovated and addressed commodity security in more than three quarters of program facilities as well as enrolled and trained providers in the FP Provider Network.

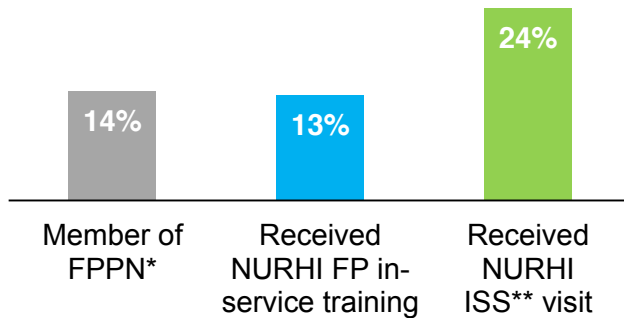


Mrs. Ladi K. Umar, Family Planning Provider, Giwa General Hospital, counseling a potential client.

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SERVICE DELIVERY INDICATORS

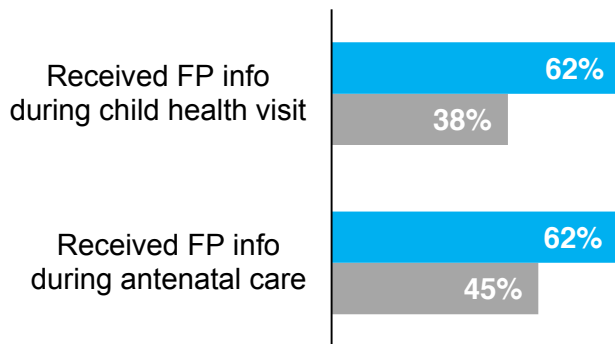
Provider Exposure to NURHI Program Activities at MLE Endline 2014, Zaria



* FPPN: Family Planning Provider Network

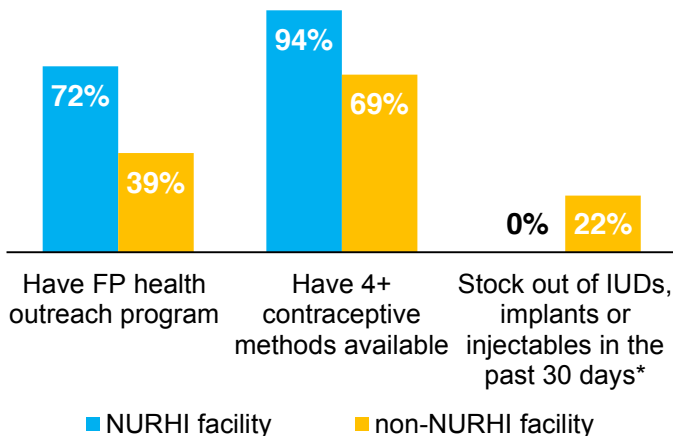
** ISS: Integrated supportive supervision (n=213)

Integration of FP Services Among Reproductive Health Clients by Service Type, Zaria



■ MLE Endline 2014 ■ MLE Baseline 2010/2011

Facility Exposure to NURHI Program Activities at MLE Endline 2014, Zaria



* Among facilities that report currently providing IUD, implants, or injectables

SAMPLE DESIGN

MLE's evaluation design includes a longitudinal household survey of women age 15-49 at baseline (2010/2011). A two-stage sampling approach was used at baseline to select a representative sample of eligible women from each city. In the first stage, a random sample of clusters was selected in each city from the 2006 Population and Housing Census frame, from which a representative sample of households was selected. Women who completed an interview and were regular household members at baseline were followed and interviewed again at mid-term (2012) and endline (2014). In Zaria, a total of 3,272 women were interviewed at baseline. At endline, a total of 2,721 women were successfully tracked and 2,602 had a completed interview (overall response rate of 80 percent). The facility survey collected longitudinal data between baseline (2011) and endline (2014) from NURHI program facilities and facilities identified by women in the household survey as sources of reproductive health services. In Zaria, a total of 55 facilities were surveyed at baseline and 57 facilities surveyed at endline. In all facilities, a facility audit and provider interviews were undertaken; client exit interviews were undertaken in the NURHI program facilities.

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