

FAMILY PLANNING HEALTH PROFILE CABO VERDE 2019



General statistics				Summary FP statistics				
Total population (000's)	2019		550	Demand satisfied	l (%)	20	005	73
Total fertility rate (births per women)	2018		5	mCPR (%)		20	005	57
Adolescent Birth Rate (births per 1000 adolescent females)	2010		80	Unintended pregr	nancies (00	0's) 20	019	
IMR (deaths per 1000 live births)	2018		17	Unmet need (%)		20	005	17
MMR (deaths per 1000 live births)	2017		58	Unsafe abortions	averted (0	00's) 20	019	
Key Family Planning Indicators by 5-year Age group (None)		mCPR by economic s (None)			Trend of key FP indicators (2000-2019)			
15-19		Lowest			70		73	
20-24					60		57	
25-29		Second			50 gg			
-34 No Data		Middle	1	No Data	40 40 30			
35-39					د 30 20		17	
40-44		Fourth			10			
45-49		Highest			0		2005	
Unmet need (%) mCPR (%) Demand s	satisfied (%)				Unmet need (%)	mCF		mand satisfied (%)
mCPR by place of residence (Null)		Facilities stocked (201			Facilities stocked out by method (2018)			
No Data		Long-acting Implan and			Long-a		Sterilization	ŧ
Availability of service delivery (SDP) (2018)	ailability of service delivery points (SDP) (2018)		IUD	No Data	methoo	rmanent ds	Sterilization.	no Data
Primary SDPs with at least 3 modern methods		methods	Emerger Injectabl	-	Short-te		Condoms	†
Secondary/tertiary SDPs with at least 5 modern methods	No Data		Pill		methods		Condoms.	ŧ
Definition of Indicators							Reference	s
 mCPR: % of women of reproductive age who are u time. unmet need; % of fecund women of reproductive ar contraceptive method, plus women who are currently 3. demand satisfied; percentage of women (or their pa who are currently using a modern contraceptive meth 4. Unintended pregnancies: Nb of pregnancies that or or wanted to delay the next birth. unsafe abortion: Nb of unsafe abortions that did no modern contraceptive use during the reference period 6. Facilities stocked out; % of facilities stocked out of f 	ge who want r using a traditio artners) who d od. ccurred at a tir t occur during t.	no more children or onal method of fami lesire either to have me when women (an a specified reference	to postpone h ily planning. no additional nd their partne ce period as a	aving the next child, but are children or to postpone the ers) either did not want addi result of the protection pro	e not using a next child and tional children	(DHS,PMA2 surveys). Indicator 8 MNCAH Da estimate) Indicator 9	to 3 recent national survey 2020, MICS,RHS and ta Portal (UN populati	other national on division: 2019

6.Facilities stocked out: % of facilities stocked out of each type of contraceptive offered, on the day of assessment. 7. Method availability: % of primary (resp. seconday/tertiary) service delivery points with at least 3 (resp. 5) modern methods of contraception available on day of assessment.

8. Total fertility rate: Average nb of children a hypothetical cohort of women would have at the end of their reproductive period if they were subject during their whole lives to the fertility rates of a given period and if they were not subject to mortality. 9. Adolescent birth rate (ABR): Nb of births to adolescent females, aged 15-19 occurring during a given reference period per 1,000 adolescent

females. 10. Maternal mortality ratio (MMR): Annual nb of female deaths from any cause related to or aggravated by pregnancy or its management per

100 000 live births. 11. Infant mortality rate (IMR): probability of dying between birth and age 1 per 1000 live births.

For further information:

Reproductive Maternal Health & Ageing(RMH) Programme (afrgofrhrwh@who.int), Universal Health Coverage/Life course Cluster

WHO Global Observatory (DHS,PMA2020, MICS,RHS and other national surveys).

Indicator 10 From UN Inter-agency Group for Mortality Estimation (MMEIG), 2016 Indicator 11

From UN Inter-agency Group for Child Mortality (IGME), 2016

