

FAMILY PLANNING HEALTH PROFILE **DEMOCRATIC REPUBLIC OF CONGO 2019**



General st	atistics		Summary FP statistics					
Total population (000's)	2019	86,791	Demand satisfied (%)	2019	21			
Total fertility rate (births per women)	Null		mCPR (%)	2019	11			
Adolescent Birth Rate (births per 1000 adolescent females)	2012	138	Unintended pregnancies (000's)	2019	718			
IMR (deaths per 1000 live births)	2018	68	Unmet need (%)	2019	41			
MMR (deaths per 1000 live births)	2017	473	Unsafe abortions averted (000's)	2019	208			

Key Family Planning Indicators by 5-year Age group (2013)			mCPR by economic status (2013)				Trend of key FP indicators (2012-2019)										
15-19	31	5	29	Lowest	9 3				40	41⊷	41	41	41	41	41	41	4 1
20-24	29	8	40	-					30								
25-29	30	7	39	Second	€	5											
30-34	29	10	46	Middle		5			Percentage 0				17	18	19	20	— 21
35-39	28	8	46	Wilduic		<u> </u>			10	15⊷	16	17		9			—11
40-44	25	8	47	Fourth			5 11		10	8	8	8	9		10	11	
45-49	12	5	53						0	2012	2013	2014	2015	2016	2017	2018	2019
Unmet ne	2013 eed (%) mCPR	2013 Den	2013 nand satisfied (%)	Highest				17 😜	Unmet r			mCPR (- ' '	Satisfied	

Unmet need (%) MCPR (%)	and satisfied (%)			0	milet need (%)	IX (70)	emanu sausneu (70)		
mCPR by place of residence	Facilities stocked out by method (2018)			Facilities stocked out by method (2018)					
Urban Rural									
15%	5%	Long-acting	Implant	29%	Long-acting	Sterilization	†		
Availability of service delivery points (SDP) (2018)		and permanent	IUD	53%	and permanent methods	Sterilization.	ń		
		Short-term	Emergency	64%					
Primary SDPs with at least 3		methods	Emergency	0.70	Chart tarm	Condoms	i 49%		
modern methods	No Data		Injectable	27%	Short-term methods	Condoms	49 70		
Secondary/tertiary SDPs with at least 5 modern methods	110 Data		Pill	31%		Condoms.	† 30%		

Definition of Indicators

- 1. mCPR: % of women of reproductive age who are using (or whose partner is using) a modern contraceptive method at a particular point in
- 2. unmet need: % of fecund women of reproductive age who want no more children or to postpone having the next child, but are not using a contraceptive method, plus women who are currently using a traditional method of family planning.

 3. demand satisfied: percentage of women (or their partners) who desire either to have no additional children or to postpone the next child and
- who are currently using a modern contraceptive method.

 4. Unintended pregnancies: Nb of pregnancies that occurred at a time when women (and their partners) either did not want additional children
- or wanted to delay the next birth.
- 5. unsafe abortion: Nb of unsafe abortions that did not occur during a specified reference period as a result of the protection provided by modern contraceptive use during the reference period.
- 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
- 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. 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.

References

Indicators 1 to 7

From FP2020 2019 Progress Report, most recent national surveys (DHS,PMA2020, MICS,RHS and other national surveys).

At: http://progress.familyplanning2020.org/re-

MNCAH Data Portal (UN population division: 2019 estimate)

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

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

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



