

## **FAMILY PLANNING HEALTH PROFILE LIBERIA 2019**



General st		Summary FP statistics				
Total population (000's)	2019	4,937	Demand satisfied (%)	2019	49	
Total fertility rate (births per women)	2016	4	mCPR (%)	2019	31	
Adolescent Birth Rate (births per 1000 adolescent females)	2011	150	Unintended pregnancies (000's)	2019	137	
IMR (deaths per 1000 live births)	2018	53	Unmet need (%)	2019	30	
MMR (deaths per 1000 live births)	2017	661	Unsafe abortions averted (000's)	2019	49	

Key Family Planning Indicators by 5-year Age group (2013)		mCPR by economic status (2013)			Trend of key FP indicators (2012-2019)									
15-19	47	13	22	Lowest	<b>•</b> 13		50			43	45	47	48	49
20-24	39	23	37				40	3	7	40				
25-29	34	23	43	Second	<b>1</b> 6			33	32 3	31 2	31	30	30	31 30
30-34	30	23	43	Middle	<b>3</b> 2°	1	Percentage			25 23	27	29	30	30
35-39	31	20	40	ivildule	<b>0</b> 2		<u> </u>	9	21					
40-44	27	15	38	Fourth	24 (	<b>9</b>	10							
45-49	11	6	40				0	CI.	м <del>г</del>	+ 10	(0	_	ω.	0
	2013	2013	2013	Highest	<b>2</b> 1	1		2012	2013	2015	2016	2017	2018	2019
Unmet need (%)						Unmet need (%)		mCPR (%)    Demand satisfied (%)			d (%)			

mCPR by place of residence (2013)		Facilities stocked out by method			Facilities stocked out by method				
Urban Rura		(2018)			(2018)				
21% 16%		Long-acting	Implant			Long-acting	Sterilization	<b>†</b>	
Availability of service delivery (SDP) (2018)	and permanent	IUD			and permanent methods	Sterilization.	n ∏ No Data		
(SDF) (2018)	Short-term	Emergency	No E	Data					
Primary SDPs with at least 3	2001	methods	Emorgonoy			Short-term	Condoms	<u> </u>	
modern methods	36%		Injectable			methods	Condonis	Ť	
Secondary/tertiary SDPs with at least 5 modern methods	16%		Pill				Condoms.	Ť	

## **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

Indicator 11
From UN Inter-agency Group for Child Mortality (IGME), 2016



