DRC: 2015 FPwatch Outlet Survey

www.fpwatch.info
Presentation outline

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FP2020 and DRC
The 2012 London Family Planning Summit

Goal: to enable 120 million more women and girls to use contraceptives by 2020.
The DRC aims to achieve a contraceptive prevalence rate (CPR) of 19% by 2020 and to reach an additional 2.1 million women with modern methods to achieve its national FP2020 commitments.
DRC’s Progress

**DRC: FP2020 Core Indicator Summary Sheet**

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Number of additional users of modern methods of contraception</td>
<td>0</td>
<td>64,000</td>
<td>230,000</td>
</tr>
<tr>
<td>2</td>
<td>Contraceptive prevalence rate, modern methods (mCPR)</td>
<td>8.1%</td>
<td>8.2%</td>
<td>8.8%</td>
</tr>
<tr>
<td>3</td>
<td>Percentage of women with an unmet need for a modern method of contraception</td>
<td>40.7%</td>
<td>40.7%</td>
<td>40.7%</td>
</tr>
<tr>
<td>4</td>
<td>Percentage of women whose demand is satisfied with a modern method of contraception</td>
<td>16.1%</td>
<td>16.3%</td>
<td>17.3%</td>
</tr>
<tr>
<td>5</td>
<td>Number of unintended pregnancies</td>
<td>1,288,000</td>
<td>1,310,000</td>
<td>1,333,000</td>
</tr>
<tr>
<td>6</td>
<td>Number of unintended pregnancies averted due to use of modern methods of contraception</td>
<td>331,000</td>
<td>346,000</td>
<td>382,000</td>
</tr>
<tr>
<td>7</td>
<td>Number of unsafe abortions averted due to use of modern methods of contraception</td>
<td>76,000</td>
<td>79,000</td>
<td>88,000</td>
</tr>
<tr>
<td>8</td>
<td>Number of maternal deaths averted due to use of modern methods of contraception</td>
<td>2,000</td>
<td>2,000</td>
<td>2,000</td>
</tr>
</tbody>
</table>

Table source: Familyplanning2020.org
The FPWatch Project
Overview

FPwatch produces standardized evidence on contraceptive commodity and service markets in 5 priority FP2020 countries

Goals:
- To generate relevant, timely & high-quality FP market evidence
- To disseminate evidence at national, regional & international levels

Funded by:
FPwatch in DRC

- **Data Collection Dates:** October – December, 2015
- **4 Regions:** Urban Kinshasa, Rural Kinshasa, Urban Katanga, Rural Katanga
- **Outlets Considered:** Over 2,400

What makes FPwatch unique?
What questions are answered by the outlet survey?

What types of outlets in the public and private sectors are carrying modern contraceptive methods?

What proportion of public and private sector outlets are stocking selected modern contraceptive commodities, offering contraceptive services and providing a range of methods?

What is the relative market share for each contraceptive method and for each outlet type?

What is the consumer price of modern contraceptive methods among private sector outlets?

What is the readiness of selected outlet types for performing contraceptive services?
Outlet Survey Methods
Methods and Study Population

- Authorization: Study obtained IRB, ethical, and government approval
- Study Population: Outlets with contraceptives or with provider-dependent procedures available
- What is an outlet?
  - Public Health Facility
  - Community Health Worker
  - Private Not For-Profit Facility
  - Private For-Profit Facility
  - Pharmacy
  - Drug Shop
  - General Retailer/Kiosk
Sampling

- Representative sample of clusters *(health areas with 10,000 to 15,000 inhabitants)* in Kinshasa and Katanga
  - A full census was conducted for outlets with the potential to distribute modern contraceptive methods
  - *Multistage cluster sampling* conducted and a booster sample increased the sample size for public health facilities and registered pharmacies.

- Interviewed all eligible outlets (at least one or more modern contraceptive method currently/recently in stock or with provider-dependent procedure available)

- Audit of all available family planning commodities conducted, along with provider interviews on services
Kinshasa

Health Areas
- Selected, urban
- Booster, urban (government-supported health facilities)
- Selected, rural
- Booster, rural
- Not selected
- Excluded (military)
Outlet Survey Sample

- 2,445 outlets enumerated
- 238 outlets not screened
- 2,207 outlets screened (1,451 with condoms)
- 1,148 outlets did not meet screening criteria
- 1,297 outlets met screening criteria
- 3 outlets not interviewed
- 1,294 outlets interviewed
Data collection: Product Audit

When products are in stock: Product audit

- Record information about each contraceptive commodity in stock:
  - Brand/generic names
  - Formulation & strength
  - Manufacturer
  - Country of manufacture
  - Amount distributed in the past week
  - Retail and wholesale price
Data collection: Product Audit

- **Mini Audit**
  - Male condoms
  - Female condom

- **Full Audit**
  - Oral contraceptives
  - Emergency contraceptives
  - Injectable contraceptives
  - Contraceptive implants
  - IUDs
Data collection: Provider Interviews

When products are out of stock

- Brands/methods out of stock:
  - Currently
  - Previous 3 months

When provider-dependent procedures are available

- Price
- Volume
- Provider training/credentials
- Equipment
What types of outlets in the public and private sectors are carrying modern contraceptive methods?
Outlet type market composition - Kinshasa

Among all screened outlets - All Kinshasa, excluding condoms

- Public Health Facility: 79%
- Community Health Workers: 6%
- Private Not-For-Profit: 5%
- Private For-Profit Health Facility: 9%
- Pharmacy: 2%
- Drug Shop: 3%

Urban
- Public Health Facility: 81%
- Community Health Workers: 9%
- Private Not-For-Profit: 5%
- Private For-Profit Health Facility: 9%
- Pharmacy: 2%

Rural
- Public Health Facility: 59%
- Community Health Workers: 0%
- Private Not-For-Profit: 17%
- Private For-Profit Health Facility: 9%
- Pharmacy: 8%
Outlet type market composition - Katanga

Among all screened outlets - All Katanga, excluding condoms

- Public Health Facility: 59%
- Community Health Workers: 11%
- Private Not-For-Profit: 3%
- Private For-Profit Health Facility: 1%
- Pharmacy: 25%
- Drug Shop: 0%

Urban
- Public Health Facility: 75%
- Community Health Workers: 12%
- Private Not-For-Profit: 8%
- Private For-Profit Health Facility: 3%
- Pharmacy: 2%
- Drug Shop: 3%

Rural
- Public Health Facility: 42%
- Community Health Workers: 14%
- Private Not-For-Profit: 6%
- Private For-Profit Health Facility: 39%
- Pharmacy: 0%
- Drug Shop: 1%

N=350
N=254
N=96
What proportion of public and private sector outlets are stocking selected modern contraceptive commodities, offering contraceptive services and providing a range of methods?
Commodities
Availability of Non-Hormonal Short-Acting Contraceptives

Among screened outlets, by outlet type, All Kinshasa

[Graph showing availability of contraception by type and outlet type]
Availability of Non-Hormonal Short-Acting Contraceptives

Among screened outlets, by outlet type, Kinshasa Urban vs. Rural

[Bar chart showing availability of male condoms, female condoms, and cycle beads in urban and rural settings by outlet type (public, private, not-for-profit).]
Availability of Non-Hormonal Short-Acting Contraceptives

Among screened outlets, by outlet type, All Katanga

- Male condoms
- Female condoms
- CycleBeads
Availability of Non-Hormonal Short-Acting Contraceptives

Among screened outlets, by outlet type, Katanga Urban vs. Rural

[Bar chart showing availability of contraceptives in urban and rural areas, categorized by outlet type (public, private not-for-profit, private), and by type of contraceptive (male condoms, female condoms, cycle beads).]
Availability of Hormonal Short-Acting Contraceptives

Among screened outlets, by outlet type, **All Kinshasa**

- Oral contraceptives
- Combined oral contraceptive pills
- Progestin-only pills
- Emergency contraceptives
- Injectables
- Depo-provera injectables
- Noristerat injectables
Availability of Hormonal Short-Acting Contraceptives

Among screened outlets, by outlet type, Kinshasa Urban vs. Rural

[Bar chart showing availability of various contraceptive methods in urban and rural areas, categorized by outlet type (Public Total, Private Not-For-Profit Total, Private Total).]

- Oral contraceptives
- Combined oral contraceptive pills
- Progestin-only pills
- Emergency contraceptives
- Injectables
- Noristerat injectables
- Injectable Depo-Provera
Availability of Hormonal Short-Acting Contraceptives
Among screened outlets, by outlet type, All Katanga

<table>
<thead>
<tr>
<th>Outlet Type</th>
<th>Oral contraceptives</th>
<th>Combined oral contraceptive pills</th>
<th>Progestin-only pills</th>
<th>Injectables</th>
<th>Depo-provera injectables</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Health Facility</td>
<td>40</td>
<td>30</td>
<td>10</td>
<td>20</td>
<td>5</td>
</tr>
<tr>
<td>CHW</td>
<td>30</td>
<td>20</td>
<td>10</td>
<td>15</td>
<td>4</td>
</tr>
<tr>
<td>Private Not-For-Profit Total</td>
<td>50</td>
<td>40</td>
<td>20</td>
<td>30</td>
<td>6</td>
</tr>
<tr>
<td>Private For-Profit Health Facility</td>
<td>40</td>
<td>30</td>
<td>10</td>
<td>20</td>
<td>5</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>60</td>
<td>50</td>
<td>40</td>
<td>30</td>
<td>10</td>
</tr>
<tr>
<td>Drug Shop</td>
<td>20</td>
<td>15</td>
<td>10</td>
<td>15</td>
<td>5</td>
</tr>
</tbody>
</table>

- Oral contraceptives
- Combined oral contraceptive pills
- Progestin-only pills
- Injectables
- Depo-provera injectables

DRC Outlet Survey Results | Winter 2016

Public Health Facility
CHW
Private Not-For-Profit Total
Private For-Profit Health Facility
Pharmacy
Drug Shop
Availability of Hormonal Short-Acting Contraceptives

Among screened outlets, by outlet type, Katanga Urban vs. Rural

Urban

Rural

Public Total
Private Not-For-Profit Total
Private Total
Public Total
Private Not-For-Profit Total
Private Total

Oral contraceptives
Emergency contraceptives
Combined oral contraceptive pills
Injectables
Progestin-only pills
Injectables Depo-Provera

Noristerat injectables
Availability of Selected Long-Acting Contraceptives
Among screened outlets, by outlet type, **All Kinshasa**
Availability of Selected Long-Acting Contraceptives

Among screened outlets, by outlet type, Kinshasa Urban vs. Rural

Urban

Rural

Public Total

Private Not-For-Profit Total

Private Total

Public Total

Private Not-For-Profit Total

Private Total

Implants

IUDs

DRC Outlet Survey Results | Winter 2016
Availability of Selected Long-Acting Contraceptives

Among screened outlets, by outlet type, **All Katanga**

![Bar chart showing availability of long-acting contraceptives by outlet type.](chart)

- Public Health Facility
- Private Not-For-Profit Total
- Private For-Profit Health Facility
- Drug Shop

- **Implants**
- **IUDs**
Availability of Selected Long-Acting Contraceptives

Among screened outlets, by outlet type, Katanga Urban vs. Rural

Urban

- Public Total
- Private Not-For-Profit Total
- Private Total

Public Total
- Implants
- IUDs

Rural

- Public Total
- Private Not-For-Profit Total
- Private Total

Private Total
- Implants
- IUDs
### Brands of oral contraceptives available – Kinshasa and Katanga

<table>
<thead>
<tr>
<th></th>
<th>Kinshasa</th>
<th>Katanga</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Combined oral contraceptive pills</strong></td>
<td>Urban</td>
<td>Rural</td>
</tr>
<tr>
<td></td>
<td>Confiance</td>
<td>Aleze</td>
</tr>
<tr>
<td></td>
<td>Microgynon</td>
<td>30</td>
</tr>
<tr>
<td></td>
<td>Marvelon</td>
<td>Oralcon-F</td>
</tr>
<tr>
<td></td>
<td>Diane-35</td>
<td>Femodene</td>
</tr>
<tr>
<td></td>
<td>&lt;5 in stock</td>
<td></td>
</tr>
<tr>
<td><strong>Progestin-only oral contraceptive pills</strong></td>
<td>Urban</td>
<td>Rural</td>
</tr>
<tr>
<td></td>
<td>Microlut</td>
<td>Exluton</td>
</tr>
<tr>
<td></td>
<td>&lt;5 in stock</td>
<td>Cerazette</td>
</tr>
</tbody>
</table>
## Brands of emergency contraceptives and injectables available – Kinshasa and Katanga

<table>
<thead>
<tr>
<th></th>
<th>Kinshasa</th>
<th>Katanga</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Urban</td>
<td>Rural</td>
</tr>
<tr>
<td></td>
<td>&lt;5 in stock Secufem Levonorgestrel- Richter</td>
<td>&lt;5 in stock Norlevo</td>
</tr>
<tr>
<td>Injectables</td>
<td>Confiance Depo-provera Noristerat Sayana Press</td>
<td>Confiance Depo-provera Noristerat</td>
</tr>
</tbody>
</table>
Brands of implants and IUDs contraceptives available – Kinshasa and Katanga

<table>
<thead>
<tr>
<th></th>
<th>Kinshasa</th>
<th>Katanga</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Urban</td>
<td>Rural</td>
</tr>
<tr>
<td>Implants</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Jadelle</td>
<td>Jadelle</td>
</tr>
<tr>
<td></td>
<td>Implanon</td>
<td>Implanon</td>
</tr>
<tr>
<td>IUDs</td>
<td>Optima</td>
<td>Optima</td>
</tr>
<tr>
<td></td>
<td>Enova</td>
<td>SMB</td>
</tr>
<tr>
<td></td>
<td>Confiance</td>
<td>Confiance</td>
</tr>
<tr>
<td></td>
<td>Enova</td>
<td>Enova</td>
</tr>
<tr>
<td></td>
<td>&lt;5 in stock</td>
<td>&lt;5 in stock</td>
</tr>
<tr>
<td></td>
<td>Pregna</td>
<td>Pregna</td>
</tr>
<tr>
<td></td>
<td>Eves</td>
<td>Mithra-Load 375</td>
</tr>
<tr>
<td></td>
<td>Mithra T-380</td>
<td>Mithra T-380</td>
</tr>
</tbody>
</table>
Stockouts
Stock outs
Among screened outlets, by outlet type, All Kinshasa

- Not in stock currently or in last 3 months
- In stock in last 3 months, but currently stocked out
- Currently in stock
Stock outs
Among screened outlets, by outlet type, Kinshasa- Urban vs. Rural

Currently in stock
In stock in last 3 months, but currently stocked out
Not in stock currently or in last 3 months

Urban

Rural

Not in stock currently or in last 3 months
In stock in last 3 months, but currently stocked out
Currently in stock
Stock outs

Among screened outlets, by outlet type, All Katanga

- Not in stock currently or in last 3 months
- In stock in last 3 months, but currently stocked out
- Currently in stock
Stock outs
Among screened outlets, by outlet type, Katanga Urban vs. Rural

Urban

Rural

- Currently in stock
- In stock in last 3 months, but currently stocked out
- Not in stock currently or in last 3 months
Range of methods
Diversity of Available Modern Contraceptive Methods

Among screened outlets, by outlet type, All Kinshasa

The chart illustrates the availability of modern contraceptive methods among screened outlets in Kinshasa. It categorizes outlets into Public Health Facility, CHW, Private Not-For-Profit Total, Private For-Profit Health Facility, Pharmacy, and Drug Shop. The chart shows the percentage of outlets offering different types of contraceptive methods, including any modern method, 3+ methods, 3+ methods with LA/PM, and 5+ methods. The data is presented with error bars to indicate variability.

The chart highlights the following:

- Public Health Facility: Offers a range of methods, with a focus on any modern method and 3+ methods.
- CHW: High availability of any modern method and 3+ methods, with a notable proportion offering 3+ methods with LA/PM.
- Private Not-For-Profit Total: Moderate availability of any modern method and 3+ methods, with limited options for 3+ methods with LA/PM.
- Private For-Profit Health Facility: Lower availability of any modern method and 3+ methods, with a minimal offering of 3+ methods with LA/PM.
- Pharmacy: Over 90% availability of any modern method, with a high proportion offering 3+ methods and 3+ methods with LA/PM.
- Drug Shop: Limited availability, with a focus on any modern method and 3+ methods.
Diversity of Available Modern Contraceptive Methods

Among screened outlets, by sector, Kinshasa Urban vs. Rural

Urban

Public Total

Private Not-For-Profit Total

Private Total

Rural

Public Total

Private Not-For-Profit Total

Private Total

Legend:
- Any modern method
- 3+ methods
- 3+ methods with LA/PM
- 5+ methods
Diversity of Available Modern Contraceptive Methods

Among screened outlets, by outlet type, All Katanga

Public Health Facility | CHW | Private Not-For-Profit Total | Private For-Profit Health Facility | Pharmacy | Drug Shop

- Any modern method
- 3+ methods
- 3+ methods with LA/PM
- 5+ methods
Diversity of Available Modern Contraceptive Methods
Among screened outlets, by sector, Katanga Urban vs. Rural

### Urban

- **Public Total**: 80
- **Private Not-For-Profit Total**: 60
- **Private Total**: 40

### Rural

- **Public Total**: 60
- **Private Not-For-Profit Total**: 40
- **Private Total**: 20

Legend:
- **Any modern method**
- **3+ methods**
- **3+ methods with LA/PM**
- **5+ methods**
What is the relative market share for each contraceptive method and for each outlet type?
Contraceptive market share is determined based on Couple-Years of Protection (CYP): The CYP is calculated by multiplying the quantity of each method sold or distributed to clients by a conversion factor, to yield an estimate of the duration of contraceptive protection per unit of the method. The CYP for each method/outlet type are then summed over all methods to obtain a total CYP figure.

<table>
<thead>
<tr>
<th>Contraceptive method</th>
<th>Dose/unit used for calculating 1 CYP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oral contraceptives</td>
<td>15 cycles per CYP</td>
</tr>
<tr>
<td>Condoms (male and female)</td>
<td>120 condoms per CYP</td>
</tr>
<tr>
<td>Monthly vaginal ring/patch</td>
<td>15 rings/patches per CYP</td>
</tr>
<tr>
<td>Vaginal foaming tablets</td>
<td>120 tablets per CYP</td>
</tr>
<tr>
<td>Depo-provera injectable</td>
<td>4 doses (ml) per CYP</td>
</tr>
<tr>
<td>Noristerat injectable</td>
<td>6 doses per CYP</td>
</tr>
<tr>
<td>Cyclofem monthly injectable</td>
<td>13 doses per CYP</td>
</tr>
<tr>
<td>Copper-T 38-A IUD</td>
<td>4.6 CYP per IUD inserted</td>
</tr>
<tr>
<td>Levonorgestrel intrauterine system (LNG-IUS)</td>
<td>3.3 CYP per LNG-IUS inserted</td>
</tr>
<tr>
<td>3-year implant (e.g., Implanon)</td>
<td>2.5 CYP per implant</td>
</tr>
<tr>
<td>4-year implant (e.g., Sino-Implant)</td>
<td>3.2 CYP per implant</td>
</tr>
<tr>
<td>5-year implant (e.g., Jadelle)</td>
<td>3.8 CYP per implant</td>
</tr>
<tr>
<td>Emergency contraceptives</td>
<td>20 doses per CYP</td>
</tr>
<tr>
<td>Standard days method (e.g., CycleBeads)</td>
<td>1.5 CYP per trained adopter</td>
</tr>
<tr>
<td>Sterilization (male and female)</td>
<td>Africa: 9.3 CYP</td>
</tr>
</tbody>
</table>

*From: [http://www.cpc.unc.edu/measure/prh/rh_indicators/specific/fp/cyp](http://www.cpc.unc.edu/measure/prh/rh_indicators/specific/fp/cyp)*.
Contraceptive Market Share
As a percentage of total volume of CYP, by contraceptive method and outlet type and sector, All Kinshasa

Public vs. Private

- Female sterilization
- Male sterilization
- IUDs
- Implants
- Injectables
- Emergency contraceptives
- Oral contraceptives
- CycleBeads
- Female condoms
- Male condoms

Public Health Facility | CHW | Private Not-For-Profit Total | Private For-Profit Health Facility | Drug Shop | Public Total | Private Total
## Contraceptive Market Share

*As a percentage of total volume of CYP, by contraceptive method and sector, Kinshasa Urban vs. Rural*

### Urban

<table>
<thead>
<tr>
<th>Method</th>
<th>Public Total</th>
<th>Private Not-For-Profit Total</th>
<th>Private Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female sterilization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male sterilization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IUDs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Implants</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Injectables</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oral contraceptives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CycleBeads</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female condoms</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male condoms</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Rural

<table>
<thead>
<tr>
<th>Method</th>
<th>Public Total</th>
<th>Private Not-For-Profit Total</th>
<th>Private Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female sterilization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male sterilization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IUDs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Implants</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Injectables</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oral contraceptives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CycleBeads</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female condoms</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male condoms</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Contraceptive Market Share
As a percentage of total volume of CYP, by contraceptive method and outlet type and sector, All Katanga

Public vs. Private

Female sterilization
Male sterilization
IUDs
Implants
Injectables
Emergency contraceptives
Oral contraceptives
CycleBeads
Female condoms
Male condoms

Public Health Facility
Private Not-For-Profit Total
Private For-Profit Health Facility
Pharmacy
Drug Shop
Public Total
Private Total
Contraceptive Market Share

As a percentage of total volume of CYP, by contraceptive method and sector, Katanga Urban vs. Rural

Urban

- Female sterilization
- Male sterilization
- IUDs
- Implants
- Injectables
- Emergency contraceptives
- Oral contraceptives
- CycleBeads
- Female condoms
- Male condoms

Rural

- Public Total
- Private Not-For-Profit Total
- Private Total

DRC Outlet Survey Results | Winter 2016
Contraceptive Market Share

As a percentage of CYP by contraceptive method type, within outlet types, All Kinshasa

Public vs. Private

- Female sterilization
- Male sterilization
- IUDs
- Implants
- Injectable
- Emergency contraceptives
- Oral contraceptives
- CycleBeads
- Female condoms
- Male condoms

Bar chart showing market share by outlet type and contraceptive method.
Contraceptive Market Share

As a percentage of CYP by contraceptive method type, within outlet types, Kinshasa Urban vs. Rural
Contraceptive Market Share

As a percentage of CYP by contraceptive method type, within outlet types, All Katanga

Female sterilization  
Male sterilization  
IUDs  
Implants  
Injectables  
Emergency contraceptives  
Oral contraceptives  
CycleBeads  
Female condoms  
Male condoms

Public vs. Private

Public Health Facility  
Private Not-For-Profit Total  
Private For-Profit Health Facility  
Pharmacy  
Drug Shop  
Public Total  
Private Total
Contraceptive Market Share

As a percentage of CYP by contraceptive method type, within outlet types, Katanga Urban vs. Rural

Rural

<table>
<thead>
<tr>
<th>Method Type</th>
<th>Public Total</th>
<th>Private Not-For-Profit Total</th>
<th>Private Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female sterilization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male sterilization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IUDs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Implants</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Injectables</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency contraceptives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oral contraceptives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CycleBeads</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female condoms</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male condoms</td>
<td></td>
<td></td>
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</tbody>
</table>

Urban

<table>
<thead>
<tr>
<th>Method Type</th>
<th>Public Total</th>
<th>Private Not-For-Profit Total</th>
<th>Private Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female sterilization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male sterilization</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>IUDs</td>
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<td></td>
<td></td>
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<tr>
<td>Implants</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Injectables</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Emergency contraceptives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oral contraceptives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CycleBeads</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female condoms</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male condoms</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
What is the consumer price of modern contraceptive methods among private sector outlets?
Private sector median price of contraceptive methods

Among all drugs of this type available in the private sector, in 2015 US dollars — All Kinshasa

<table>
<thead>
<tr>
<th>Method</th>
<th>Male Condoms</th>
<th>Female Condoms</th>
<th>Cycle Beads</th>
<th>Oral Contraceptives</th>
<th>Emergency Contraceptives</th>
<th>Injectable</th>
<th>Implants</th>
<th>IUDs</th>
</tr>
</thead>
<tbody>
<tr>
<td>USD</td>
<td>$0.03</td>
<td>$0.11</td>
<td>$1.10</td>
<td>$0.33</td>
<td>$1.21</td>
<td>$0.55</td>
<td>$1.30</td>
<td>$1.10</td>
</tr>
<tr>
<td>USD per CYP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Private sector median price of contraceptive methods

Among all drugs of this type available in the private sector, in 2015 US dollars –

**All Katanga**

<table>
<thead>
<tr>
<th>Method</th>
<th>USD per CYP†</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male condoms</td>
<td>$0.04</td>
</tr>
<tr>
<td>Female condoms</td>
<td>$0.11</td>
</tr>
<tr>
<td>Cycle Beads</td>
<td>$1.10</td>
</tr>
<tr>
<td>Oral contraceptives</td>
<td>$0.55</td>
</tr>
<tr>
<td>Emergency contraceptives</td>
<td>$2.20</td>
</tr>
<tr>
<td>Injectables</td>
<td>$1.10</td>
</tr>
<tr>
<td>Implants</td>
<td>$2.61</td>
</tr>
<tr>
<td>IUDs</td>
<td>$2.20</td>
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</table>
What is the readiness of selected outlet types for performing contraceptive services?
Available Modern Contraceptive Procedures

Among screened outlets, by outlet type, All Kinshasa
Available Modern Contraceptive Procedures

Among screened outlets, by outlet type, Kinshasa Urban vs. Rural

<table>
<thead>
<tr>
<th>Outlet Type</th>
<th>Contraceptive injection</th>
<th>Implant insertion</th>
<th>IUD insertion</th>
<th>Male sterilization</th>
<th>Female sterilization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban Public Total</td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
</tr>
<tr>
<td>Urban Private Not-For-Profit Total</td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
</tr>
<tr>
<td>Urban Private Total</td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
</tr>
<tr>
<td>Rural Public Total</td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
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<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
</tr>
<tr>
<td>Rural Private Not-For-Profit Total</td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
</tr>
<tr>
<td>Rural Private Total</td>
<td><img src="image" alt="Bar Graph" /></td>
<td><img src="image" alt="Bar Graph" /></td>
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<td><img src="image" alt="Bar Graph" /></td>
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</tr>
</tbody>
</table>
Available Modern Contraceptive Procedures

Among screened outlets, by outlet type, **All Katanga**

<table>
<thead>
<tr>
<th>Outlet Type</th>
<th>Contraceptive injection</th>
<th>Implant insertion</th>
<th>IUD insertion</th>
<th>Male sterilization</th>
<th>Female sterilization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Health Facility</td>
<td>60</td>
<td>20</td>
<td>10</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Private Not-For-Profit Total</td>
<td>100</td>
<td>40</td>
<td>20</td>
<td>15</td>
<td>15</td>
</tr>
<tr>
<td>Private For-Profit Health Facility</td>
<td>80</td>
<td>30</td>
<td>20</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>Drug Shop</td>
<td>20</td>
<td>10</td>
<td>5</td>
<td>3</td>
<td>3</td>
</tr>
</tbody>
</table>
Available Modern Contraceptive Procedures

Among screened outlets, by outlet type, *Katanga Urban vs. Rural*

**Urban**
- Public Total
- Private Not-Profit Total
- Private Total

**Rural**
- Public Total
- Private Not-Profit Total
- Private Total

- Contraceptive injection
- Implant insertion
- IUD insertion
- Male sterilization
- Female sterilization
Service Readiness

Readiness to provide contraceptive services is a composite indicator combining:
1. Availability of contraceptive on-site (not applicable to sterilizations);
2. Trained/credentialed providers; and
3. A minimum set of equipment needed for the service.

*If an outlet meets all 3 conditions, it is classified as service-ready.*

Photo credit: PSI
Service Readiness Among Outlets Reportedly Offering Injection Services

Among outlets reportedly providing service, by outlet type, All Kinshasa

![Graph showing service readiness among outlets in Kinshasa, categorized by outlet type (Public, Private Not-For-Profit, Private For-Profit), and indicators (availability of commodity, credentials, equipment, and service readiness).]
Service Readiness Among Outlets Reportedly Offering Implant or IUD Insertion Services

Among outlets reportedly providing service, by outlet type, *All Kinshasa*

![Bar chart showing service readiness among outlets by outlet type and service type.](chart.png)

- **Availability of commodity**
- **Availability of credentials**
- **Availability of equipment**
- **Service readiness**

- **Orange bars** represent Implant insertion service
- **Blue bars** represent IUD insertion service

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Service Readiness Among Outlets Reportedly Offering Sterilization Services

Among outlets reportedly providing service, by outlet type, **All Kinshasa**

![Bar chart showing service readiness among outlets reportedly offering sterilization services, by outlet type. The chart compares availability of credentials, availability of equipment, and service readiness for male and female sterilization services across different outlet types.](chart_image)

- **Public** outlets
- **Private Not-For-Profit** outlets
- **Private For-Profit Health Facility**

**Availability of credentials**

- Male sterilization service
- Female sterilization service

**Availability of equipment**

**Service readiness**
Service Readiness Among Outlets Reportedly Offering Injection Services

Among outlets reportedly providing service, by outlet type, **All Katanga**

<table>
<thead>
<tr>
<th>Availability of commodity</th>
<th>Availability of credentials</th>
<th>Availability of equipment</th>
<th>Service readiness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public</td>
<td>Public</td>
<td>Drug Shop</td>
<td>Public Health Facility</td>
</tr>
<tr>
<td>Private Not-for-Profit</td>
<td>Private Not-for-Profit</td>
<td>Drug Shop</td>
<td>Private For-Profit Health Facility</td>
</tr>
<tr>
<td>Private For-Profit Health Facility</td>
<td>Drug Shop</td>
<td>Drug Shop</td>
<td>Private For-Profit Health Facility</td>
</tr>
<tr>
<td>Drug Shop</td>
<td>Drug Shop</td>
<td>Drug Shop</td>
<td>Drug Shop</td>
</tr>
</tbody>
</table>

**Contraceptive injection service**
Service Readiness Among Outlets Reportedly Offering Implant or IUD Insertion Services

Among outlets reportedly providing service, by outlet type, All Katanga

<table>
<thead>
<tr>
<th>Outlet Type</th>
<th>Availability of Commodity</th>
<th>Availability of Credentials</th>
<th>Availability of Equipment</th>
<th>Service Readiness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public</td>
<td>Orange</td>
<td>Blue</td>
<td>Orange</td>
<td>Blue</td>
</tr>
<tr>
<td>Private For-Profit</td>
<td>Orange</td>
<td>Blue</td>
<td>Orange</td>
<td>Blue</td>
</tr>
<tr>
<td>Private Not-For-Profit Health Facility</td>
<td>Orange</td>
<td>Blue</td>
<td>Orange</td>
<td>Blue</td>
</tr>
</tbody>
</table>

- Orange: Implant insertion service
- Blue: IUD insertion service

DRC Outlet Survey Results | Winter 2016
## Service Readiness Among Outlets Reportedly Offering Sterilization Services

*Among outlets reportedly providing service, by outlet type, *All Katanga*

<table>
<thead>
<tr>
<th>Outlet Type</th>
<th>Availability of Credentials</th>
<th>Availability of Equipment</th>
<th>Service Readiness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public</td>
<td>90</td>
<td>80</td>
<td>100</td>
</tr>
<tr>
<td>Private Not-For-Profit</td>
<td>85</td>
<td>70</td>
<td>90</td>
</tr>
<tr>
<td>Private For-Profit Health Facility</td>
<td>70</td>
<td>60</td>
<td>85</td>
</tr>
</tbody>
</table>

- **Availability of credentials**
- **Availability of equipment**
- **Service readiness**

**Legend:**
- Male sterilization service
- Female sterilization service
Summary
1. **What types of outlets in the public and private sectors are carrying modern contraceptive methods?**

1. Drug shops comprised the majority of the market composition for outlets with at least one modern contraceptive method in both Kinshasa (79%) and Katanga (59%).

2. Private not-for-profit outlets made up just 3% of outlets with at least one modern contraceptive method in both Kinshasa and Katanga.

3. In Kinshasa, while few CHWs were present, many had FP products available. CHWs in Katanga – where there is no community-based distribution of family planning – rarely had modern contraceptive methods available.
Summary of National Findings – 2016

2. What proportion of public and private sector outlets are stocking selected modern contraceptive commodities, offering contraceptive services and providing a range of methods?

1. One in three public health facilities in Kinshasa and Katanga had male condoms, oral contraceptives and injectables available; availability was typically much lower in Katanga’s rural areas than urban areas.

2. A quarter to a third of drug shops in Kinshasa had oral contraceptives and emergency contraceptives available; 15-25% of drug shops in Katanga had these methods available; availability was generally much lower in rural areas for both Kinshasa and Katanga.

3. In Kinshasa, more than 40% of public health facilities had implants available and a quarter had IUDs; in Katanga, about 15% had implants available and 10% had IUDs available.

4. LARC availability in the private sector was generally very low in both Kinshasa and Katanga.
2. What proportion of public and private sector outlets are stocking selected modern contraceptive commodities, offering contraceptive services and providing a range of methods?

5. Almost 10% of public sector outlets in Kinshasa had one of the following methods out of stock in the last three months: oral contraceptives, injectables, implants, and IUDs.

6. A third or more of public sector outlets in Katanga had one of the following methods out of stock in the last three months: injectables, emergency contraceptives, implants and IUDs.
Summary of National Findings – 2016

2. What proportion of public and private sector outlets are stocking selected modern contraceptive commodities, offering contraceptive services and providing a range of methods?

7. The majority of public health facilities in Kinshasa had 3+ methods available and more than a third had 5+ methods available. In Katanga, just a third of public health facilities had 3+ methods available and less than a fifth had 5+ methods available.

8. Over a third of private not-for-profit facilities and almost a third of private for-profit facilities had at least one modern contraceptive method available in Kinshasa. In Katanga, almost two-thirds of private not-for-profit facilities and a third of private for-profit facilities had at least one contraceptive method available.

9. Less than a third of drug shops in Kinshasa had 3+ modern methods available; in Katanga, just 10% of drug shops had 3+ methods available.
3. **What is the relative market share for each contraceptive method and for each outlet type?**

1. Drug shops accounted for more than 40% of volume of CYP distributed in Kinshasa and public health facilities accounted for more than a third of the total volume of CYP distributed in Kinshasa.

2. In Kinshasa, male condoms comprised almost half the total volume of CYP, followed by implants (23%), injectables (10%) and CycleBeads (9%).

3. In Katanga, public health facilities accounted for almost 60% of market share (volume of CYP) and drug shops for almost 30% of market share.
Summary of National Findings – 2016

3. What is the relative market share for each contraceptive method and for each outlet type?

4. In Katanga, male condoms contributed more than half the total volume of CYP within outlets, followed by 10% for CycleBeads and 9% for implants and oral contraceptives.

5. LARC/PMs accounted for 27% of CYPs across outlets in Kinshasa and 29% in Katanga for all outlet types.
4. What is the consumer price of modern contraceptive methods among private sector outlets?

1. In Kinshasa, the least expensive methods in USD per CYP in the private sector were injectables at $2.20/CYP, implants at $1.30/CYP, IUDs at $1.10/CYP, and CycleBeads at $0.73/CYP.

2. Prices in Katanga were generally higher for injectables and implants, at $4.40/CYP and $2.61/CYP, respectively.
5. What is the readiness of selected outlet types for providing contraceptive methods and performing contraceptive services?

1. In Kinshasa, almost two-thirds of public health facilities reportedly offered injection services, with half providing implant insertion and over 40% providing IUDs. Just a third of private not-for-profit facilities and private for-profit facilities reportedly provided injection services and less than 20% provided implant or IUD insertions.

2. In Katanga, nearly 60% of public health facilities reported offering injection services, a fourth offer implant insertion, and just 10% offer IUD insertion. A similar proportion of private not-for-profit facilities offered these services. 25% of private health facilities reported providing injection services and 10% or less reported providing implant or IUD insertion services.
5. **What is the readiness of selected outlet types for providing contraceptive methods and performing contraceptive services?**

3. In Kinshasa, while two-thirds of public health facilities offered injection services, less than two-thirds had the commodity, training, or necessary equipment available to conduct the service on the day of the survey. In Katanga, just over half of public health facilities reporting they offered injection services were service ready according to these criteria.

4. In Kinshasa, over 40% of public health facilities offered implant and IUD insertion, but just half were service ready for implant insertion and less than a quarter were service ready for IUD insertion.

5. In Katanga, less than a third of public health facilities offering implant insertion and less than a fifth of those providing IUD insertion were service ready on the day of the survey.
Acknowledgements

- DRC Federal Ministry of Health
- BMGF
- ASF & PSI
- Fieldwork Team
- FPwatch Team
Thank You!