

FPwatch Bihar



FPwatch provides estimates for key family planning indicators using nationally-representative, cross-sectional outlet surveys.

Photo credit: PSI
Map image: Designed by Freepik

8,600+

SCREENED OUTLETS

3 STRATA Metro,
Urban & Rural

1,500+

OUTLETS
AUDITED AND
INTERVIEWED



India's FP2020 commitment is to provide contraceptive access to an additional 48 million women by 2020

Timely, relevant & high-quality evidence

STUDY DESIGN

Dates Implemented: June - September, 2016

Outlets included: 8,661 outlets enumerated
→ 1,587 outlets met screening criteria

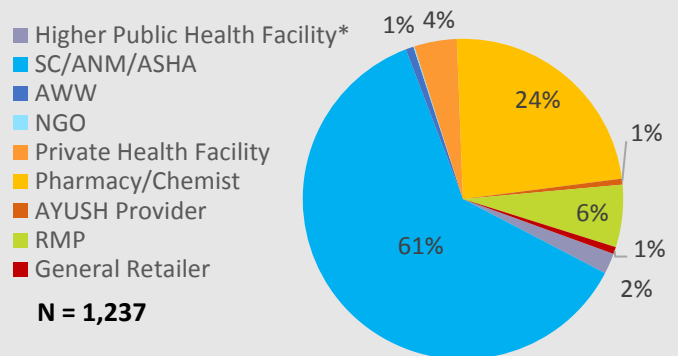
Data collected: Product audits and interviews

Key indicators: Contraceptive method availability, price, contraceptive market composition and share, service readiness

APPROACH

FPwatch is a multi-country research project designed to generate evidence on contraceptive availability through surveys administered to **all public and private facilities and outlets** in fully-censused, selected geographies with the potential to sell or distribute modern contraceptive methods. FPwatch implements standardized methodology across five countries.

Market composition by outlet type

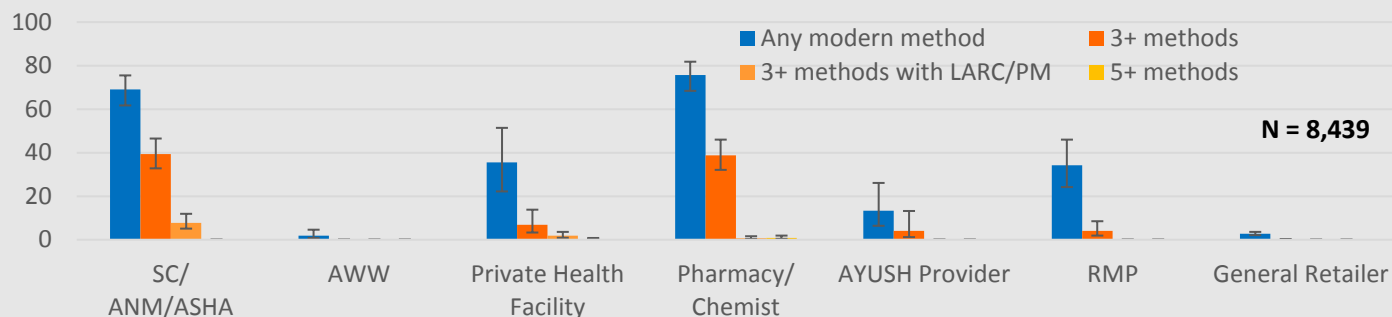


Market Composition: The public sector accounted for 65% of outlets stocking contraceptives or providing services in Bihar, with almost all those outlets accounted for by sub-centres. In the private sector, pharmacies/chemists made up almost a quarter of the overall market composition. Private for-profit health facilities and rural medical practitioners made up an additional 4% and 6% of outlets, respectively.

*Includes: government/municipal hospitals, government dispensaries, UHC/UHP/UFWCs, CHC/FRU/rural hospitals, and PHC.

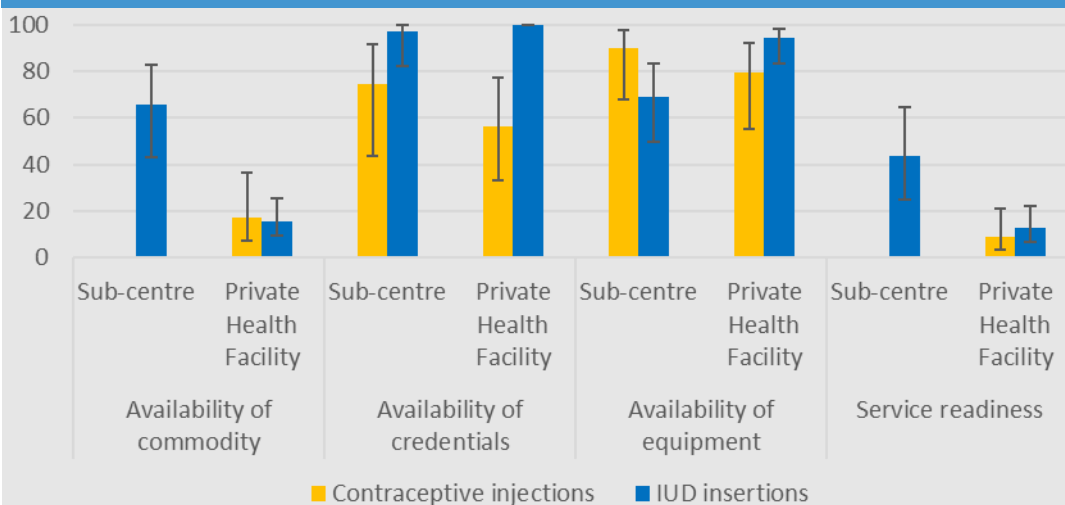
Note: SC/ANM/ASHA = sub-centre/auxiliary nurse midwife/accredited social health activist, AWW = anganwadi worker, RMP = rural medical practitioner

Percent of outlets with selected method mixes available, by outlet type



Method diversity: Over 70% of sub-centres/ANM/ASHAs had at least one modern contraceptive method available, compared with 36% of private for-profit health facilities and three-fourths of pharmacies/chemists. Less than about half of most outlet types had three or more methods available and less than 2% of most outlet types had five or more methods available.

Service readiness among outlets reporting providing service, by outlet type



Service Readiness: Service readiness entails having a commodity, trained staff and a minimum level of equipment. For contraceptive injection services in Bihar among outlets reportedly offering the service, no sub-centres and less than 15% of total private facilities reportedly offering contraceptive injection services were found to be service ready, primarily due to lack of the commodity. About 45% of sub-centres were found to be service ready for IUD insertions, while only 13% of private facilities were service ready for IUD insertion, again, with those found not to be service ready primarily due to lack of the available commodity.

Key Takeaways:

In Bihar, the public sector, and in particular sub-centres/ANM/ASHAs, accounted for the majority of outlets stocking modern contraceptive methods.

At least 65% of sub-centres/ANM/ASHAs and pharmacies/chemists had at least one modern contraceptive method available. Less than half of most outlet types had three or more modern contraceptive methods available.

Three quarters of sub-centres had staff with trained ANM and the equipment necessary to provide injection services, indicating the readiness of these outlets to initiate contraceptive injections.



Photo credit: PSI