MANAGEMENT INFORMATION SYSTEM (MIS)

ANNUAL REPORT

2020

Directorate General of Family Planning
Medical Education and Family Welfare Division
Ministry of Health and Family Welfare

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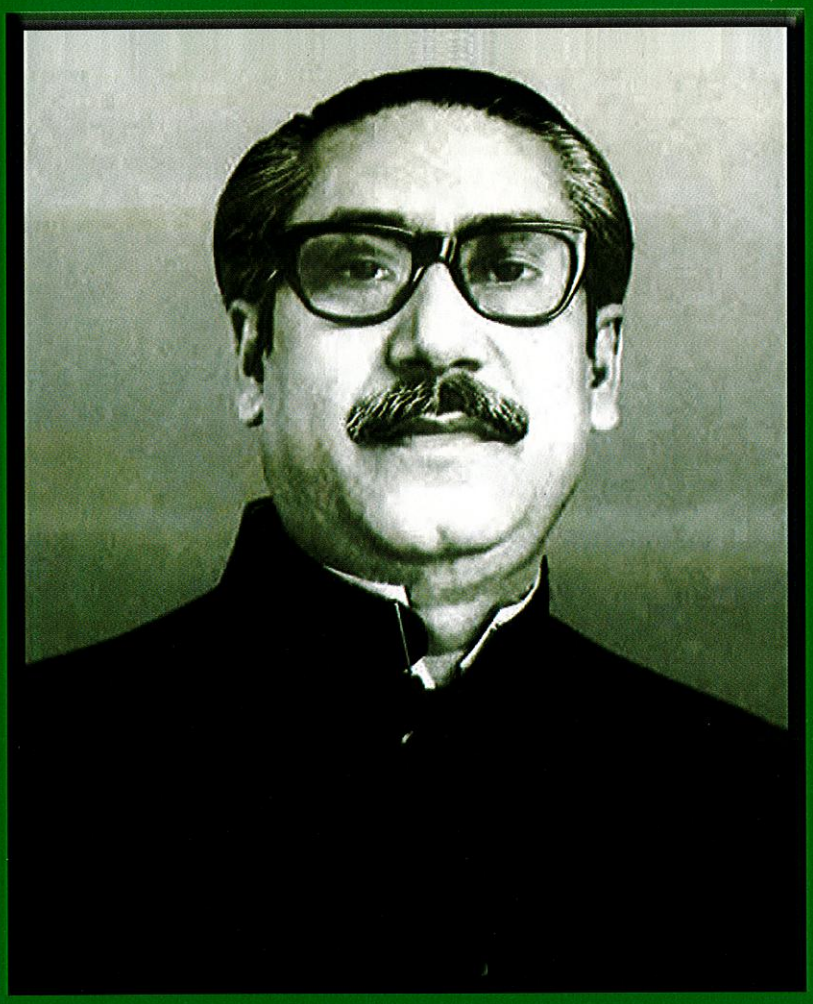
6, Kawran Bazar, Dhaka 1215



‘ চরম ত্যাগ স্বীকার ছাড়া কোনদিন কোন জাতির মুক্তি আসেনি । ’

জাতির পিতা বঙ্গবন্ধু শেখ মুজিবুর রহমান

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FOREWORD

I am very pleased to know that the Management Information System (MIS) unit of Directorate General of Family Planning (DGFP) is going to publish its regular annual report 2020. The MIS unit has been publishing annual report for the last five years.The report generally contains all the statistical information on the progress and achievements on family planning, maternal, child and adolescent reproductive health services under the umbrella of DGFP.

In line with the Fourth Health, Population and Nutrition Sector Program (HPNSP) 2017-2022, the MIS unit has modernized its approach to generate accurate and reliable information on a regular basis. In the previous years, the MIS annual report has been considered as an important document which displays all statistical information regarding family planning program in Bangladesh. The MIS unit now virtually publishes monthly report on family planning, maternal and child health, and adolescent reproductive health services regularly. The information system encompasses different layers of hierarchy in collecting and compiling data. In this report, data is presented at national, division, district and upazila levels, which enables the policymakers and program personnel to practice evidence-based decision-making. The data revealed in this report can be used to redesign in future program plans.

I appreciate the effort of MIS unit and sincerely hope this report will be helpful for the program personnel to implement and develop family planning, maternal and child health and adolescent reproductive health program in the country.

Finally, compiling and publishing DGFPs all program performances in a single book is extremely useful and commendable task; hence, I am conveying my heartfelt congratulations and appreciation to the personnel involved in publishing the report. At the same time, I am requesting all the stakeholders to use the report for program planning purpose.

Shahan Ara Banu, *ndc*

Additional Secretary, ME&FWD
and
Director & Line Director (MIS)
Directorate General of Family Planning

PREFACE

The Management Information System (MIS) of Directorate General of Family Planning (DGFP) has been regularly publishing its 'Annual Report' as a routine activity for the last couple of years. Hence, in such continuation the annual report of 2020 has been finalized and going to be published. This annual report, contains data from 2019-2020 financial year, summarizes comprehensive and relevant information on family planning, maternal and child health and adolescent reproductive health services as received from field level workers and facilities working under DGFP across the country. The report also brought forward comparative data and time series analysis for the better understanding of FP-MCH performance and its trends and expected to provide comprehensive information for decision making in the Fourth Health, Population and Nutrition Sector Program (4th HPNSP) January 2017 to June 2022.

The MIS unit has already developed web-based software to collect and compile service statistics from field level since December 2011.Online reporting system has been established at upazila and district level and the ongoing scaling-up of e-MIS activities at field level is expected to produce quality, real time data for any level of hierarchy in the near future. I also convey my special thanks to USAID Sukhi Jibon, Path Finder International for shaping and refining this report in a more sophisticated form.

For the first time, a new chapter on 'Innovations in Family Planning' has been included in the annual report, which informs about the adoption of innovative approaches to address gaps in service delivery. Moreover, DGFP initiatives centering around 'Mujibborsho' has been especially highlighted and all activities regarding this has been included in this report to make this report more informative and relevant to our time.

Finally, I express my heartiest thanks to the team members of the MIS unit who have spared no pains to prepare this annual report within a very short time. I am also indebted to all the relevant Directors and Line Directors of DGFP for their valuable comments on the report. I cordially request the users of this Annual Report for providing necessary suggestions and feedbacks for further improvement in the subsequent editions/issues.

Khan Md Rezaul Karim

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EXECUTIVE SUMMARY

The management information system (MIS) unit of directorate general of family planning(DGFP)collects performance data on family planning (FP), maternal and child health (MCH), and adolescent reproductive health (ARH) services from outreach workers and service centers from all over the country, excluding City Corporations. It compiles both government and non-government performance data and publishes the national report. This is a combined annual report, which highlights last financial years' data reflecting program performance from financial year 2019-2020

Eligible Couples

According to the DGFP MIS, the total number eligible couple (ELCO) in the country was found to be 27.4 million in Dec. 2019 and the total number of acceptor of modern FP methods was 21.3 million in that year. Between 2017 Dec. and 2019 Dec., ELCOs increased by 393,023 and method acceptors increased by 176,130. A division-wise comparison shows the largest share of ELCO population in Dhaka, containing 28 percent of ELCOs in 2017 and 2018. In 2019, Dhaka and newly split Mymensingh divisions jointly comprised 28 percent of ELCOs. Eighteen percent of ELCOs comes from Chattogram division. Rajshahi, Rangpur and Khulna divisions—the western region of the country—represent 41 percent of ELCOs together. The concentration of ELCOs is lowest in Barishal and Sylhet, comprising about six percent each. The division-wise ELCO share remains almost the same from 2017 to 2020.

Client Segmentations

The use of FP methods varies from age 15 to age 49. The use of methods is highly concentrated among those who are aged between 20 and 40. Overall, the married women aged 20 years or below are least likely to use any FP method compared with other age groups. Implant, injectable and pill users are mostly aged between 20 and 40. As expected, users in older groups (age 30-39 and 40 and older) are more likely to be sterilized than younger ones. Women under age 20 and in their 40's are less likely to use condom.

The use of FP methods varies by number of children. The use of FP methods is greatest among the couples who have two children, followed by the couples with three children. These two groups comprised three quarters of all users. Couples without children are least likely to use FP methods. Only four percent of couples without children so reported.

Performance of Short-acting Methods

Nationally, the couple year protection (CYP) achievement for three short acting methods against the projection decreased from 2017 to 2019 and showed an increase in 2020. Among short acting methods, pill performance is better than other two methods in terms of CYP achievement. However, there have

been considerable fluctuationsin the CYP achievement for all three short acting methods. At present, 2020 the CYP achievement for both pill and injectables is 48 percent .The CYP achievement rate for condoms is lowest (36% only) in the year 2020 compared with other three years.

At the divisional level, Barishal earned top position in injectable performance (75%) in the year 2020 while Mymensingh was the highest performer in pill and Dhaka division achieved 46% in condom which is highest performance compared with other divisions in 2020. At the district level, Injectable distribution was the highest in Bhola district (127%) in 2020, Oral pill performance data reveals the top performing district in pill distribution is Sherpur (242%) .It shows the best performance for the condom distribution (102%) as well in 2020as well and exceeded the projection target of 100 percent in 2020.

Performance of long acting and permanent methods

Nationally, implant performance against the projectionis much higher compared to other long acting and permanent methods. However, the performance long acting methods does not show any significant improvementovertime while permanent method performance improved significantly. The performance of permanent method against the projection increased from 41 to 50 percent in the from 2017 to 2020. For IUD, the rate declined slightly from 66 to 62 percent during the same period. Implant performance rose from 89 percent in 2017 to 106 percent in 2018, but it dropped substantially to 84 percent in 2020.

At divisional level, Rangpur division was found to be the top performer inpermanent method with the achievement rate of 70 . The IUD performance was highest in Chittagong division (81%) while Implant distribution was highest in Barishal division 86 percent against the projection.At the district level,permanent method performance was highest in Noakhali among all 64 districts- 153% against its projection. The IUD performance in Sherpur district 230% and this district again reported 180% achievement in implant method.

Contraceptive Acceptance Rate (CAR)

The national CAR performance remains almost at the same level (78-79%) in four years; but there are small differences at the divisional level. During the 2017-20 period, the CAR performance was found to be highest in Rajshahidivision(81-82%), closely followed by Khulna and Rangpur divisions. Chattogram division was found to report the lowest CAR in the country (74%%)during the same period. The CAR gap between top and bottom performing divisions lies between 5-6 percentage points. At the district level,

Joypurhat earned the top position in CAR performance (84%) in four consecutive years while Brahmonbaria was found to be the lowest performing district (70%) during in 2020.

The contraceptive method mix based on CAR remained the same for the period of 2017-20. Pill represents nearly half (49%) of all contraceptive acceptance, followed by injectable (20%). Another 13 percent share comes from permanent method. Of all method acceptance, the share of condom and implant is nine and seven percent respectively. The share of IUD is lowest (3%).

Total Fertility Rate and use of Contraception

There has been stagnation in total fertility rate (TFR) since 2011. According to the BDHS 2017, the current TFR is 2.3, the same as in the BDHS 2011. Still, fertility varies by regions. TFR is highest in Sylhet division (2.6) followed by Chattogram (2.5), both from the eastern region of the country. Since 2011, use of contraception among married women has remained at the same level of 62 percent. Use of contraception is lowest in the eastern region of the country (CPR in Sylhet: 55%, CPR in Chattogram: 54%). Such regional variations continue to dampen the overall program effectiveness.

Sources of FP methods

Overall, the government sector provides contraceptive methods to more than three quarters of users. In 2019, the highest government sector contribution was observed in implant distribution (89%), followed by IUD (85%), pill (83%), and permanent method (81%). The NGO sector provides contraceptives to less than 20 percent of all users except condom (24%) and injectable (23%).The DGFP MIS also suggests that the NGO sector contribution in long-acting and permanent methods declined over time.

Post-partum Family Planning

The percent distribution of women who adopted any modern FP method at post-partum in 2020 reveals that the majority adopted pill at post-partum, accounting for 52 percent of all PPFP use. Another 16.5 percent of PPFP acceptors adopted injectable, which emerges as the second most popular method among PPFP clients. The condom acceptance was estimated to be 14.5 percent of all PPFP acceptance. Among long acing and permanent methods, the share of implant is highest at seven percent of all PPFP use.

Maternal and Child Health Services

The practice of receiving antenatal care (ANC) is more common than postnatal care (PNC). According to the DGFP MIS, the number of women who made four or more ANC visits in 2019-2020 was 3,20,550. And the number of women who made fourth PNC visits was 2,09,460.

The deliveries performed at MCHTI, MFSTC, MCWCs, UHCs and UHFWCs increased in the last three years. In 2020, the number of deliveries performed at those facilities was 10,75,278, of which 52 percent were normal deliveries while 48 percent were C-section deliveries.

At the facilities, the number of women who gave birth by C-section is lower than those women who had a vaginal birth. An increase in both normal and C-section deliveries was reported. The total number of normal deliveries reported in 2020 was 367859. We also notice an increase of c-section delivery in 2020, that is 507419.

Among infant deaths, three quarters of deaths took place in the first 28 days of life after birth (i.e., neonatal death), whereas other one quarter took place in subsequent 11 months (post-neonatal death). Both infant and maternal deaths were highest in the eastern region of the country.

Nutritional Services

Counseling services by FP workers increased substantially in the last three years. The number of counseling services to mothers on infant and young child feeding (IYCF), IFA, vitamin-A and handwashing increased more than four times, 1906742 in 2020. A small increase in the practice of breastfeeding was observed in the last three years and the number of women who reported exclusive breastfeeding was 1,850,674 in 2019.

Challenges in FP Program

In Bangladesh, family planning remains one of the top priorities in the fourthsector program 2017-2022, as a path toward achieving the Sustainable Development Goals. Several areas require further attention to ensure effective family planning in the future:

a) **Regional variations in TFR and CPR.** TFR remains highest and CPR is lowest in the eastern region of the country.

b) **Low use of long acting and permanent methods of contraception.** Only nine percent of all eligible couples use a long acting or a permanent method to limit fertility.

c) **Low use of contraception among young married females.** Use of contraception among young married females age 15-19 is 49 percent which is lower than the national average of 62 percent.

d) **Low male participation in contraception.** Male contribution in total method use is only eight percent (male sterilization 1%, condom 7%).

e) **High unmet need.**Unmet need for family planning in Bangladesh is 12 percent, which remained at the same level since 2014.

f) **High discontinuation of contraceptives.**About one-third users of contraceptive methods stop using the method within 12 months of starting. Discontinuation rates are much higher for temporary methods like condoms (40%), pills (34%), and injectables (25%) than for long-term methods like the implants (7%).

g) **Early marriage and early childbearing:** Bangladesh still have some of the highest rates of child marriage and teenage pregnancy. Twenty eight percent of married girls age 15-19 have begun childbearing.

h) **High maternal mortality.** By 2030, Bangladesh is committed to bring down the maternal mortality ratio from 170 to 70 per 100,000 live births. By 2030,the country needs to increase the rate of skilled delivery to 100 percent from 53 percent.

i) **High child mortality.** By 2030, Bangladesh is committed to reduce under-five deaths to 25 per 1,000 live births from 45. The reduction in neonatal mortality remains a challenge, which accounts for two-thirds of all under-five deaths.

j) **Data driven challenges:** A routine data quality auditing and sample survey can be adopted to improve the validity and reliability of field data. It is also important to consider demographic trends in projection setting exercise.

k) Challenges due to COVID 19:

The disruption of family planning services is the major issue, during lockdown, in proper implementation of FP program. The policy of lock-down indirectly affects women's accessibility to reproductive health services and they could face unwanted pregnancies and its related complications. Moreover, safeties of field level workers (mainly FWAs & FWVs) as a front level worker pose them much more vulnerable to be get infected by COVID.

Currently, eMIS program is operational in 36 out of 64 districts in Bangladesh. However, thanks to Covid and its subsequent national shut down slows down e-MIS expansion for the time being. Needless to say, hands on practice is more effective and sustainable for field staffs instead of virtual training.

INTRODUCTION

Bangladesh is now Asia's fifth and the world's eighth most populous country with an estimated population of 164.6 million in 2018, according to SVRS 2018.Bangladesh has experienced a dramatic decline in fertility during last four decades, which can be attributed to its success in family planning program. The country has experienced a demographic transition, where the age structure has gone through profound changes. The annual population growth rate has declined from 2.32 percent in 1981 to 1.37 in 2017, which leads to a small increase in population in the coming decades. According to the World Population Prospects (The 2017 revision), the population of Bangladesh is expected to grow by another 40 million and will be stabilized at 202.9 million in 2057.

Bangladesh is one of the exceptional experiences in the world which demonstrated that fertility decline is possible, even in moderate economic development and social change. The comprehensive family planning program with massive and sustained efforts over time largely contributed to this achievement. The family planning program in Bangladesh was first introduced in the early 1950s through voluntary effort and the government program was introduced in 1965.

The Family Planning Program in Bangladesh has evolved through a series of developmental phases and undergone changes in strategy, structure, content and goals. The government deployed Family Welfare Assistants (FWAs) at the community level, initiated Social Marketing Program to promote contraceptives and involved a number of NGOs to provide client-centered reproductive and child health and family planning services.

The Bangladesh Population Policy 2012 has the vision to develop healthy, happy and prosperous Bangladesh through planned development and control of population. The population policy aims to attain replacement level fertility by 2015 and emphasizes to ensure family planning (FP), adolescent reproductive health (ARH), safe motherhood and child health services. In line with the policies and the Fourth Health, Population and Nutrition Sector Program (HPNSP) 2017-2022, the Directorate General of Family Planning (DGFP) is promoting family planning, maternal and child health (MCH), and ARH services in order to reach Sustainable Development Goals (SDGs) as well as to increase the Contraceptive Prevalence Rate (CPR) to 75 percent, reduce the Total Fertility Rate (TFR) to 2.0, and reduce unmet need for family planning to 6 percent by 2022.

The Management Information System (MIS) is one of the major program management components of DGFP, which supports monitoring the progress of program implementation at

various levels. The present system inherited the performance statistics review process of mid-seventies. The performance statistics were usually collected from the field functionaries and reported to the central office routinely. The system of data collection was considered as a normal routine work by the government offices. The information collected from the field was hardly used as the basis of planning and management of program operation in the field. A structured MIS replaced the conventional system and has become the strongest management tool of the program managers. Program data collected at different levels are processed into usable information through manual or electronic methods. The processed information are then analyzed and interpreted into actionable measures and sent down the line to the field managers and through them to the field functionaries and outreach service centers. This 'feedback' mechanism serves as a strong management tool for the local level managers as the different units and individuals are ranked and evaluated according to their status of performance. The feedback messages are communicated to the performers for taking corrective measures for better performance.

Rationale of the Report

The MIS unit of DGFP is responsible for the collection, compilation, processing and analysis of monthly FP, MCH and ARH related data as well as documenting yearly population and number of eligible couples all over the country excluding City Corporations. The MIS unit generally publishes an annual report through using its web-based software, which is used as a platform to collect and compile data from field level. In this regard, publishing any single year annual report with old data limitsthe significance for the program. Hence, it has been decided to publish last three years' data in a single report, reflecting program performance from 2017 to 2019. The three-year combined report will bring forward comparative data analysis and time series analysis for the policymakers and is expected to provide more comprehensive and broad information for decision making in the 4th sector program (HPNSP 2017-2022).

II. IMPLEMENTATION STRATEGY OF POPULATION AND FAMILY PLANNING

The HPNSP 2017-22 identifies several service delivery priority, which focuses on the extension of family planning services, increased usage of family planning before and after the first birth, and the promotion and usage of long acting and permanent methodsof contraception. Implementation of this strategic priority is under the responsibility of two Operational Plans (OPs) within the DGFP: i) Clinical Contraception Service Delivery (CCSD); and ii) Family Planning Field Service Delivery (FPFSD). The other OPs within the DGFP that provide support to those services are: Planning, Monitoring and Evaluation (PME), Management Information Systems (MIS), Information Education and Communication (IEC), Procurement, Storage and Supply Management (PSSM). In addition, DGFP receives support from NIPORT through its OP, Training Research and Development (TRD).

Population and Family Planning:

Lead OPs are CCSD, FPFSD and maternal, child and adolescent reproductive health (MCRAH) with strong supportive functions from OPs, namely, PME-FP, MIS, IEC, PSSM-FP and NIPORT-TRD.

Priority Interventions

(a) Population and (b) Family Planning Service

- Promoting delay in marriage and childbearing, delaying pregnancy among newly weds, use of post-partum FP, post MR/PAC FP and FP for appropriate segments of the population.

- Strengthening FP awareness building efforts through mass communication and IEC activities and considering local specificities.
- Using different service delivery approaches for different geographical regions and segments of the population.
- Maintaining focus on commodity security and ensuring uninterrupted availability of quality FP services closer to the people (at the CC level).
- Registering eligible couples with emphasis on urban areas to establish effective communication and counseling.
- Compensating for lost wages (reimbursement for opportunity costs) for long acting and permanent method performance.
- Strengthening FP services especially post-partum and post MR/PAC FP and demand generation through effective coordination of services with DGHS utilizing appropriate opportunities, as well as urban FP services.

HPNSP priority indicators with benchmarks and targets

Indicator	BDHS 2014	BMMS 2010	BDHS 2017	WHO 2015	HPNSP June 2022
Under-5 Mortality Rate (per 1,000 live births)	46		45		34
Neonatal Mortality Rate (per 1,000 live births)	28		30		18
Maternal Mortality Ratio (per 100,000 live births)		194		169	121
Total Fertility Rate	2.3		2.3		2.0
Trends in maternal health a) ANC at least 4 visits	a) 31.2%		a) 47%		50%
Trends in maternal health b) Delivery attended by a medically trained provider	b) 42.1%		b)52.7%		65%
Contraceptive Prevalence Rate	62.4%		61.9%		75%

III. FAMILY PLANNING SERVICE APPROACHES

The FP service centers are present across the country in order to ensure quality FP services to the people. A wide range of service outlets have been established at several levels of hierarchy throughout the country.

A. National level institutions and service outlets

- Maternal and Child Health Training Institute (MCHTI), Azimpur, Dhaka
- Mohammadpur Fertility Service and Training Center (MFSTC), Mohammadpur, Dhaka
- Eight FP Model Clinics attached to
    i) Dhaka Medical College Hospital
    ii) Sir Salimullah Medical College Hospital
    iii) Mymensingh Medical College Hospital
    iv) Chattogram Medical College Hospital
    v) Rajshahi Medical College Hospital
    vi) Rangpur Medical College Hospital
    vii) Sylhet Medical College Hospital
    viii) Barishal Medical College Hospital
- Maternal and Child Health Training Institute (MCHTI) Lalkuthi, Mirpur, Dhaka
- Family Welfare Visitors Training Institute (FWVTI), Dhaka
- MohanagarSatalite Clinic, Bashabo, Dhaka
- NGO clinics affiliated with DGFP at national, district and upazila levels: 205

B. Field level service centers and personnel

District
- **Administrative structure:** Deputy Director, Family Planning (DD-FP), Assistant Director, Family Planning (AD-FP), Assistant Director, Clinical Contraception (AD-CC), Medical Officer, Clinical Contraception (MO-CC)
- **Service centres:** MCH-FP clinic, MCWC

Upazila
- **Administrative structure:** Upazila Family Planning Officer, Medical Officer, MCH-FP, Assistant Upazila Family Planning Officer, Assistant Family Welfare Officer, MCH-FP, Upazila Family Planning Assitant, Office Assistant, MLSS
- **Service centres:** UHC

Union
- **Administrative structure:** Medical Officer, FW, Sub-assistant Community Medical Officer (SACMO), Pharmacist, Family Welfare Visitor (FWV), Family Planning Inspector (FPI), Aya, Security guard
- **Service centres:** UHFWC

Peripheral
- **Administrative structure:** Family Welfare Assistant (FWA)
- **Service centres:** Community Clinic (CC)

IV. INNOVATIONS IN FAMILY PLANNING

Recently, the government has taken several steps and created platforms for the promotion of 'Innovation' and 'Service Process Simplification' among government officials. In this regard, the Medical Education and Family Welfare Division under the Ministry of Health and Family Welfare (MOHFW) in collaboration with Cabinet Division and A2I Program jointly organized a workshop named as 'Innovation for Citizen Service' for evaluating, showcasing and sharing of innovative approaches in 2017. In the workshop, a number of DGFP personnel from field-level family planning offices presented innovative approaches in service delivery. After the event, the DGFP started to arrange 'Innovation Showcasing Program' every year.

Innovation showcasing and evaluation

Phase I

In the first phase of evaluating, showcasing of pilot projects, two innovative approaches were selected for replication at field level. The two approaches are:

1) Increasing institutional delivery and reducing drop-outs of oral pills at Kustia Sadar Upazila
2) Creating depo-corner and voice SMS through mobile for reducing drop-outs of FP methods and increasing ANC and PNC services

Phase II

Under the MOHFW, the Medical Education and Family Welfare Division in collaboration with Cabinet Division and A2I Program jointly organized an 'Innovation Showcasing' workshop on 15 May 2019. In the event, 15 DGFP personnel participated and presented their innovative approaches and from them, six innovative approaches were selected for replication at regional level and one for scaling-up to the entire country. Other remaining approacheswere marked/shelved for further piloting.

a) Scaling-up of an innovative approach at national level

Serial No.	Innovative Activity	Implementation Agency/Officer
1.	e-MIS activities for providing family planning, maternal and child health service	MIS unit of DGFP in collaboration with development partner (USAID)

b) Approaches undertaken for replication at regional level: Six innovations

Serial No.	Innovative Activity	Implementation Agency/Officer
1	Monitoring software for ensuring safe motherhood and reducing maternal and child mortality	District Family Planning Office, Chandpur
2	Smart MCH service management software	Mohammed Abdur Rahim Upazila Family Planning Officer Kapasia, Gazipur
3	Family welfare mother's club	Iftekhar Ahmed Chowdhury, Upazila Family Planning Officer Sadar, Feni
4	Mother gathering	Bidhan Kanti Rudra Upazila Family Planning Officer Kutubdia, Cox'sBazar
5	Dissemination of knowledge on adolescent health at high schools (Grades 6 to 10)	Sabiha Kabir Upazila Family Planning Officer Sadar, Panchagarh
6	Providing gift box (equipped with FP methods and information) to newly married couple to delay pregnancy	Field Service Delivery Unit Directorate General of Family Planning

V. MANAGEMENT INFORMATION SYSTEM IN FAMILY PLANNING

The MIS unit of DGFP began functioning in mid-seventies. In 1979, the MIS unit was created from the Research, Evaluation, Statistics and Planning (RESP) activities under DGFP. Since then, there have been improvements in the functions in the unit to establish a regular system of data collection and reporting on national program performance of family planning. It is a system of collecting, recording, processing, analyzing and disseminating program-related information which helps to take informed decisions. In reality MIS is a performance monitoring system to maximize service delivery. The key objective of MIS is to improve and strengthen national capacity to plan, formulate, monitor and evaluate the progress of family planning, MCH and ARH services in a more systematic way through effective recording, reporting, data management and analysis.

Information regarding program performance on FP, MCH and ARH can be gathered from MIS. The MIS functions as the central data repository on national FP program performance in the entire country. It plays vital role in management and decision making. It also shares information at

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Information regarding program performance on FP, MCH and ARH can be gathered from MIS. The MIS functions as the central data repository on national FP program performance in the entire country. It plays vital role in management and decision making. It also shares information at different levels of program management. The MIS unit introduced innovative approaches in the field to strengthen and institutionalize data collection, storage and transmission to the MIS headquarters for publication of analytical reports for dissemination to different national and international stakeholders. Notable among the steps to strengthen reliable data gathering are: (i) delegation of national FP-MCH projection to different upazilas, (ii) introduction of a longitudinal data collection mechanism through FWA register, (iii) a variety of modernized clinic registers and reporting formats, (iv) periodic couple registration, and (v) comprehensive monitoring by MIS personnel and performance checking in high and low performing areas.

The MIS unit collects performance data on FP, MCH and ARH from outreach workers and service centers from all over the country. It compiles both government and non-government performance data and publishes the national report. Service statistics are prepared on the distributionof FP methods, acceptance of FP methods, as well as information are collected on MCH and ARH services. The unit prepares the aggregate monthly report in terms of national, divisional, district and upazila performance.

Recent Developments in MIS Unit

Electronic Management Information System (eMIS)

The electronic Management Information System (eMIS) facilitates enterprise-wise automation. It seamlessly connects community workers and providers at first line facilities with their supervisors and managers through mobile applications in a cloud-based environment. Based on DGFP's population database, lists are generated for providing services to the clients (FP, MCH, general patients etc). Software tools are used to collect essential data and users are supported by in-app alerts and reminders. Web-based tools are available for month-end reporting and other management tasks. The e-MIS system was first piloted in two districts in 2015; then DGFP started scaling up in 2018 and currently eMIS is operational in 36 out of 64 districts in Bangladesh.

Key features of monitoring and administrative tools:

- Web-based mentoring tools are available for supervisors and managers at the district and upazila level as well as decision-makers at central level. It also attends to the need of system management functions.
- The tools produce real time data which the supervisors and managers can use to monitor the performance of the field-level workers.
- There are tools for monitoring population registration, registration of eligible couples, pregnant women with status of scheduled visits, ANC and PNC services, and attainment of tasks mentioned in the work plan.

different levels of program management. The MIS unit introduced innovative approaches in the field to strengthen and institutionalize data collection, storage and transmission to the MIS headquarters for publication of analytical reports for dissemination to different national and international stakeholders. Notable among the steps to strengthen reliable data gathering are: (i) delegation of national FP-MCH projection to different upazilas, (ii) introduction of a longitudinal data collection mechanism through FWA register, (iii) a variety of modernized clinic registers and reporting formats, (iv) periodic couple registration, and (v) comprehensive monitoring by MIS personnel and performance checking in high and low performing areas.

The MIS unit collects performance data on FP, MCH and ARH from outreach workers and service centers from all over the country. It compiles both government and non-government performance data and publishes the national report. Service statistics are prepared on the distributionof FP methods, acceptance of FP methods, as well as information are collected on MCH and ARH services. The unit prepares the aggregate monthly report in terms of national, divisional, district and upazila performance.

The FP program personnel at various levels are the key functionaries of MIS. Training for MIS implementation and data quality check are two major components of MIS for generating high quality data. Recently, Family Welfare Assistants (FWAs), Family Planning Inspectors (FPIs) and Family Welfare Visitors (FWVs) have been provided training on FWA register and related forms to modernize and improve the collection of data for valid recording and reporting. In addition, strong supervision and systematic quality checks are applied to maintain the correctness and reliability of data.

All upazila, district and divisional family planning offices have been provided with computers and internal connectivity under single digital network for web-based data management for better program monitoring. In December 2011, the MIS unit has introduced web-based software to collect service statistics data from field level. Data entered at district FP offices are directly sent to web server, and the MIS unit processes the data to prepare monthly FP, MCH and ARH report. In January 2014, using best practices of district level data input and retrieving system, web-based data entry has started at upazila family planning offices.

DHIS2 for MIS of DGFP

DHIS2 is a software tool for collection, validation, analysis and presentation of aggregate and client-based statistical data, tailored (but not limited) to integrated health information management activities. It is a generic tool rather than a pre-figured database application, with an open meta-model and a flexible user interface that allows the user to design the content of a specific information system without the need for programming. The database allows entry of data at source and creation of dashboards, summary tables, charts and GIS locations instantly for any level of hierarchy. Several countries around the world have adopted DHIS2 as their nation-wide HIS software, including Bangladesh, Kenya, Ghana, Uganda, and Rwanda.

The purpose of DHIS2 can be summarized as follows:

- Offer customization and local adaptation through the user interface. No programming required to start using DHIS2 in a new setting (country, region, district etc)
- Provide data entry tools which can either be in the form of standard lists or tables or can be customized to replicate paper forms
- Provide a variety of customized tools for validation of data and improvement of data quality
- Provide easy to use one-click reports with charts and tables for selected indicators or summary reports

DGFP initiatives during COVID19 Pandemic

For COVID 19 infection prevention and mitigation, DGFP has adopted several strategies/steps across central and field level to ensure its continued and smooth service delivery on family planning, maternal and child health as well as adolescent health in line with raising awareness among masses to practice health safety guidelines. The following steps are taken in particular mainly:

- Honorable PM's 31-point directives to be strictly followed at levels including officers-staffs across the country.
- During Covid19 prevention, service providers and service recipients have to continually render their routine services at all health centers following necessary health guidelines.
- During this pandemic,a committee has been formed by DGFP to monitor regular field activities and giving time to time directives to all level's offices under DGFP.
- During Government announced lockdowns and closure of offices, all FP center at field remained open and all government directives followed accordingly along with necessary coordination with local administration.
- During Covid19 period, several steps/strategies have been taken up by field level workers such as raising awareness among pregnant mothers on COVID, giving them necessary support service by mobile phones, family planning related counseling and other services in line with maintaining health guidelines properly.
- DGFP has formed a quick response team to collaborate with field level workers and staffs.
- Several seminars and meetings are being conducted virtually across the country.
- National level service institutions under DGFP (MCHTI, Ajimpur; MFSTC, Mohammadpur; Lalkuthi, Mirpur) all MCWCs, Union level FWCs have been engaged fully to raise awareness among masses on practicing safe health guidelines, isolation, home quarantines etc.
- For the collection or procurement of necessary logistics concerning health safety equipment such as PPE/Gowns, Masks, Hand Gloves, Hand Sanitizers, a special fund amounting to 9 crore 11 lac taka has been allotted to field level MCWC and Union FWC.
- During pandemic, in order to maintain regular supply chain service, necessary interventions has been taken place to keep the system ongoing. Moreover, COVID related related treatment and services are being provided at national level hospitals under DGFP.

- Besides through Print and Electronic media several awareness building activities have been taken place such as:
    - Advertisement on corona virus prevention-mitigation as well as maternal and child health have been published regularly on National daily and such activities are ongoing.
    - Information rich advertisements designed by specialists (COVID 19 risk awareness-mitigation, safety during pregnancy), building social awareness and family planning counseling during COVID 19 prevalence) have been published on national daily.
    - TV scrolls on family planning during COVID 19, maternal and child health have been aired in 5 different TV channels.
    - Public awareness building related advertisements (2-minute duration) have been aired 3000 thousand times at 16 TV channels.
    - COVID 19 related 300000 leaflets, 50000 posters have been printed and distributed throughout the country.
    - Popular TV program 'Connecting Bangladesh' on ATNnews aired several programs in different districts highlighting DGFP activities.

VI. FAMILY PLANNING PROGRAM PERFORMANCE, 2019-2020

Eligible Couples

In 2019, Bangladesh had a population of 163 million (BBS,2019). The country adds approximately 1.7 million people every year. According to the DGFP MIS, the total number eligible couple (ELCOs) in the country was found to be 26.96 million in 2017, which increased to 27.36 million in 2019.[1]The increase in total number of eligible couples has not been consistent in the last three years. The increase in ELCOs was greater in 2018 and the increase slowed in 2019 (Table 1).

In 2017,the total number acceptor of seven modern methods of contraception in the country was found to be 21.16 million among 27.20 million ELCOs. The number of method acceptors increased in 2018 while it was slightly decreased in 2019. The increase in total number of method

[1] Currently, FP fieldworkers collect information on the use of seven modern FP methods from 27 million married women of reproductive age across the entire country except city corporations. Contraceptive use of married women from big cities is not reflected in CAR estimates though the patterns between urban and rural women do not differ much in terms of FP use and method mix.

acceptors during the reference period is smaller in comparison to the corresponding increase in ELCOs.

Table 1: Total population, eligible couples and method acceptors, Bangladesh, 2017-2020

Indicator	2017	2018	2019
Total population	159,685,421	161,376,713	163,046,173*
Total eligible couples	2,72,09,108	2,72,68,020	2,41,93,031
Total method of acceptors	2,11,64,934	2,15,88,306	2,13,41,064

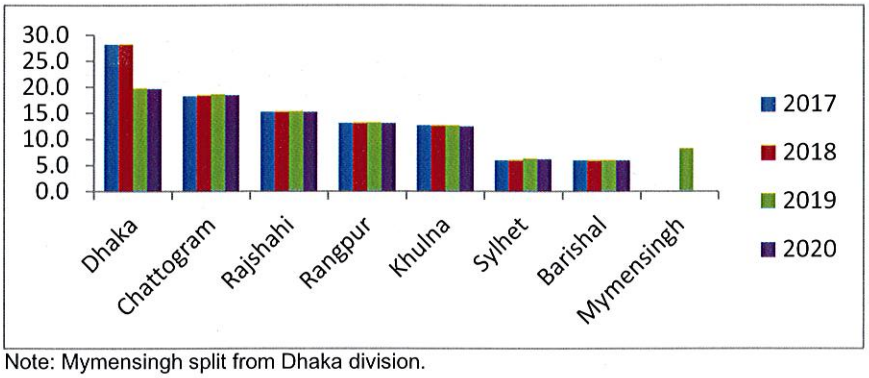
***BBS 2019**

Administratively, Bangladesh has recently been divided into eight divisions as Dhaka division was split into two divisions, namely, Dhaka and Mymensingh. Earlier, the country had seven administrative divisions. In this report, the 2017 and 2018 analysis focused on seven divisions while 2019 analysis is based on eight divisions. Rajshahi, Rangpur and Khulna divisions are located in the western region of the country while Chattogram and Sylhet constitute the eastern region of the country and the remaining divisions (Dhaka, Mymensigh and Barishal) lie in the middle region.

A division-wise comparison shows the largest share of ELCO population in Dhaka, containing 28 percent of ELCOs in 2017 and 2018. In 2019, Dhaka and newly split Mymensingh jointly comprised 28 percent of ELCOs. Eighteen percent ELCOs comes from Chattogram division, which remains almost the same over the period. Rajshahi, Rangpur and Khulna divisions—the western region of the country— represent 41 percent of ELCOs together and their share remains the same over time. The concentration of ELCOs is lowest in Barishal and Sylhet, comprising about six percent each (Figure 1).

District-wise ELCO information is attached in Annexure Table 1.

Figure 1: Percent distribution of eligible couples by divisions, Bangladesh, 2017-2020 (Descending order)



Note: Mymensingh split from Dhaka division.

As expected, the highest number method acceptors come from Dhaka division (which contains largest number of ELOCs), with 5.94 million in 2017 and 6.06 million 2018. The total number method acceptors in Chattogram was found to be 3.74 million in 2017, which increased to 3.84 million in 2019. The concentration of method acceptors is lowest in Barisal closely followed by Sylhet, with 1.34 million and 1.30 million respectively in 2020(Table 2).

Table 2: All Method acceptors by divisions, Bangladesh, 2017-2020 (Descending order)

Division	2017	Division	2018	Division	2019	Division	2020
Rajshahi	3357243	Rajshahi	3416550	Rajshahi	3389976	Dhaka	4197245
Khulna	2749193	Khulna	2787110	Khulna	2742906	Chittagong	3849407
Rangpur	2830670	Rangpur	2876830	Rangpur	2853225	Rajshahi	3389976
Barishal	1271406	Sylhet	1308861	Mymensingh	1780012	Rangpur	2853225
Sylhet	1274093	Barishal	1292510	Barishal	1286441	Khulna	2763031
Dhaka	5938204	Dhaka	6058239	Sylhet	1338548	Mymensingh	1806990
Chattogram	3744125	Chattogram	3848206	Dhaka	4134402	Barisal	1346074
				Chattogram	3815554	Sylhet	1303799
National	21,164,934	National	21,588,306	National	21,341,064	National	19781884

Client Segmentations

The DGFP operates a nation-widehouseholddata collection. It helps to estimate the projections, performances and client segmentations. FWAs collect this information during January-February every year. FWAs take history from the married women of reproductive age from every household about the family planning methodsthemarried couples used in the previous year. The data on method acceptors disaggregated by age group is presented in Tables 3-5.

The use of FP methods varies by age. The use of methods is highly concentrated among those who are aged between 20 and 40. Overall, the married women aged 20 years or below are least likely to use any FP method compared with other age groups. Implant, injectable and oral pill users are mostly aged between 20 and 40. As expected, users in older groups (age 30-39 and 40 and older) are more likely to be sterilized than younger ones.

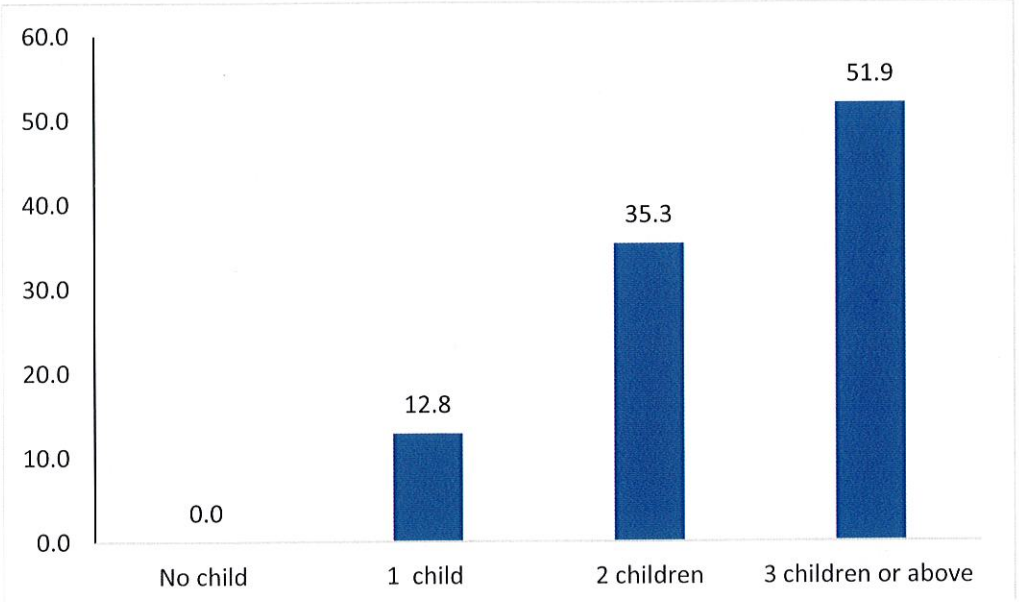
Table 3: Percent distribution of users of methods by age, Bangladesh 2020

Method	Age				
	<20	20-29	30-39	40 or older	Total
Permanent method	0.7	15.9	44.7	38.7	100.0
IUD	5.8	35.1	40.3	18.9	100.0
Implant	8.8	42.0	36.4	12.7	100.0
Injectable	8.2	39.0	37.3	15.5	100.0
Oral pill	9.5	39.9	35.3	15.2	100.0
Condom	16.6	38.9	30.8	13.7	100.0

- Implant wasthe most popular among users age 20-29 compared with other age groups. Among implant users, more than three quarters was concentrated among those who are aged between 20 and 40during the reference period. The use of implant by age is consistent across time, and it reaches a peak of 40-43 percent among women age 20-29, followed closely by women age 30-39.
- Similarly, oral pill is the most widely used method among those who are aged between 20 and 40. The use of pill reaches a peak of 40-43 percent among women age 20-29, followed closely by women age 30-39.
- Women under 20 are least likely to use condom. Interestingly, condom use was unusually higher (38%) among older age group in 2020. In contrast, condom use among young users was only 16.6% in that year.
- In 2020, injectable users were largely concentrated among 30-39-year-olds(37.3%) and less in above 40 or older group.
- Eligible couples who took permanent method were mostly between 30 and 39 years (45%) in contrast its users were lowest (0.7%) among below 20 age group.
- Among IUD users, three quarters are aged between 20 and 40during the reference period.

The use of FP methods is greatest among the eligible couples who have two children, accounting for 37-38 percent of all users. The rate is slightly lower at 35-36 percent among the eligible couples who have three children. These two groups comprised three quarters of all users. Couples without children are least likely to use FP methods. Only 4 percent of couples without children so reported. Overall, the variance in the use of FP methods bychildren is consistent over time (Figure 2).

Figure 2: Percent distribution of FP users by number of children, Bangladesh, 2020



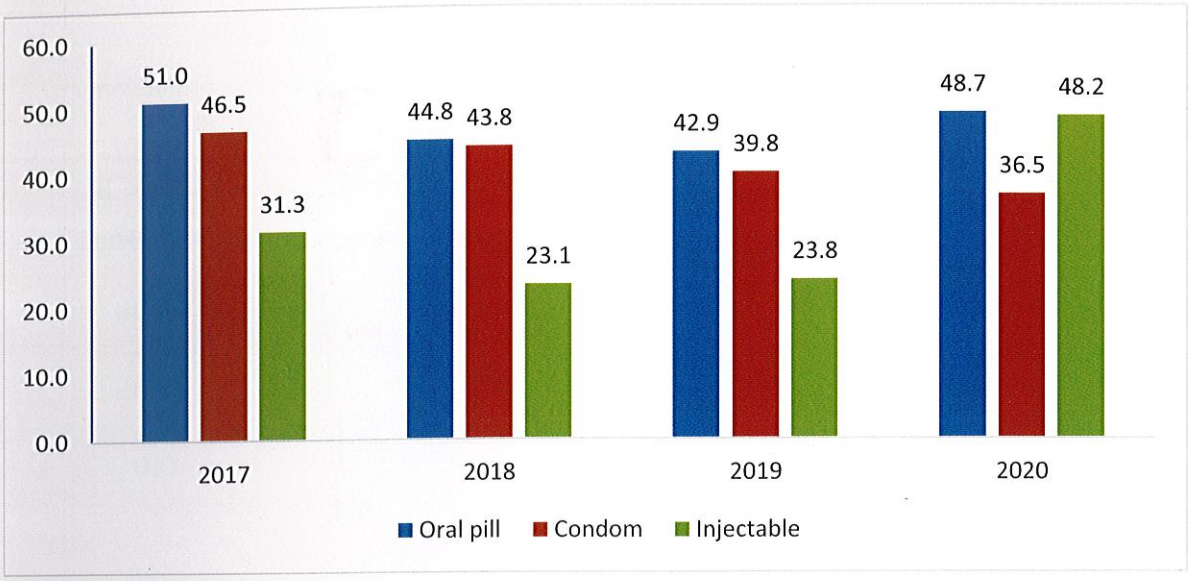
Performance of Short-acting contraceptive methods

National Performance

Nationally, the couple year protection[2] (CYP) achievement for three short acting methods did not exceed 51 percent against the projection in the last four years. Among short acting methods, pill performance is better than other two methods in terms of CYP achievement. However, there has been considerable fluctuationsin the CYP achievement for all three short acting methods.At present, 2020 the CYP achievement for both pill and injectables is 48 percent. The CYP achievement rate for condoms is lowest (36% only) in the year 2020 compared with other three years.

[2] The estimated protection provided by family planning (FP) services during a one-year period, based upon the volume of all contraceptives sold or distributed free of charge to clients during that period. The CYP is calculated by multiplying the quantity of each method distributed to clients by a conversion factor, to yield an estimate of the duration of contraceptive protection provided per unit of that method.

Figure 3: National performance against projection of short acting methods, Bangladesh, 2017-2020



Divisional Performance

There is notable difference between highest and lowest CYP achievement rate for each method.Thegap in injectable performance between top and bottom placed divisions (Barishal&Rajshahi)is 35 percentage points, while for pill (Mymensigh&Chattagram) and condom the gap is about 30 percentage points(Dhaka &Rangpur) (Table 6).

Table 4: Division-wise achievement rate of Short-acting methods, Bangladesh, 2020 (Descending order)

Rank	Injectable (in CYP)		Oral pill (in CYP)		Condom (in CYP)	
	Division	Achievement rate (%)	Division	Achievement rate (%)	Division	Achievement rate (%)
1	Barishal	74.9	Mymensingh	73.2	Dhaka	46.2
2	Rangpur	57.8	Rangpur	53.4	Rajshahi	44.3
3	Chattogram	47.9	Dhaka	52.2	Khulna	41.8
4	Khulna	47.2	Rajshahi	48.1	Sylhet	37.0
5	Dhaka	45.0	Barishal	46.7	Mymensingh	36.9
6	Sylhet	43.6	Khulna	45.1	Chattogram	28.3
7	Mymensingh	42.6	Sylhet	44.1	Barishal	25.7
8	Rajshahi	39.6	Chattogram	35.7	Rangpur	23.8
National		49.8		49.8		35.5

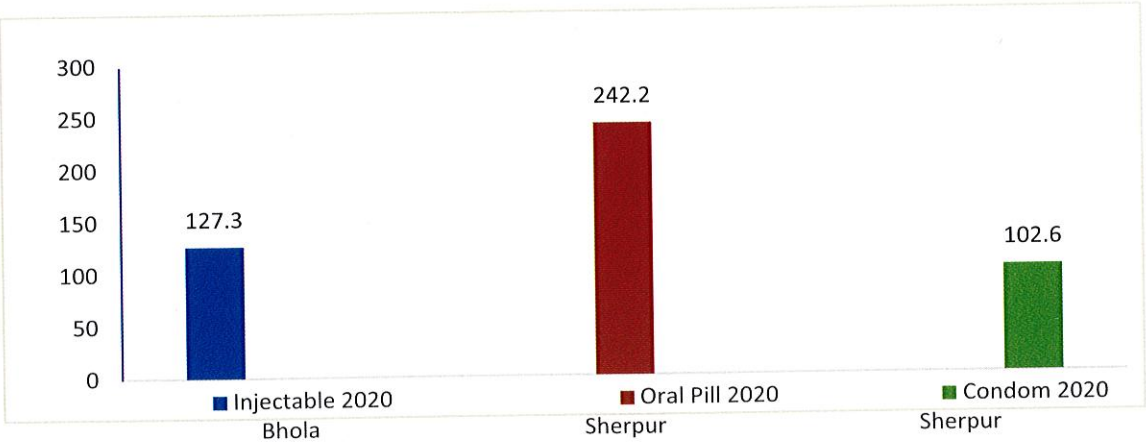
District Performance

Figure 4 shows the top performing all 64 districtsin terms of distribution of specific short acting methodagainstprojection.

Injectable distribution was the highest in Bhola district in 2020.Bhola exceeded the projection target in both occasions (147% in 2017 and 136% in 2019).

Oral pill performance data reveals the top performing district in pill distribution is Sherpur. It shows the best performance for the condom distribution was again in Sherpur in 2020 as well and exceeded the projection target of 100 percent in 2020.

Figure 4: Top performance district of short-acting methods, 2020



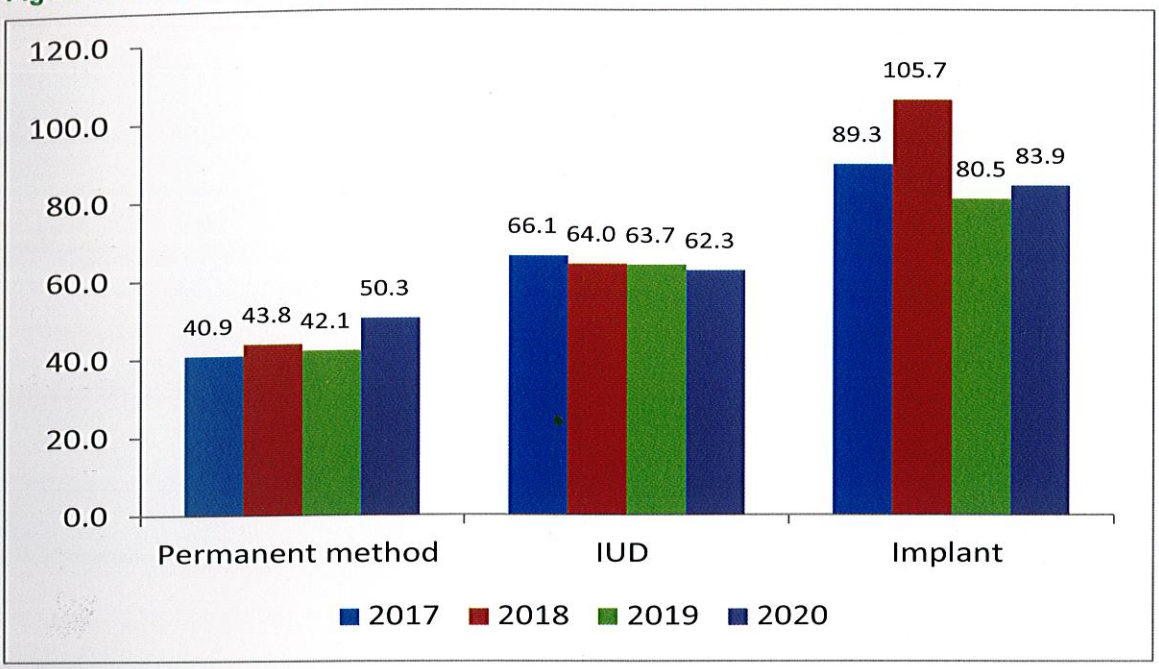
More information on projection, performance, and achievement rate of short acting methods in 2020, is in Annexure

Performance of *L*ong-acting *C*ontraceptive sand *P*ermanent methods

National Performance

Analysis of last four years' performance of long acting and permanent methods of contraception show improvement, stagnation and plateaus (Figure 5). Among long acting methods, implant performance against its projection is much higher than other two methods. The achievement rate for permanent method remained almost at the same level (41-44%) over the three-year period and increased to 50% in 2020. For IUD, the rate declined slightly from 66 percent in 2017 to 64 percent in 2018, and almost remained same in the next two years. Implant performance rose from 89 percent in 2017 to 106 percent in 2018, but it decreased substantially to 81% & 84% percent from 2019 to 2020.

Figure 5: Performance of long acting and permanent methods



Divisional Performance

Annual achievement rates of divisions against the projection of permanent method, IUD and implant for the period of 2020 are shown in Tables 9.

In the year 2020, Rangpur division was found to be the top performer in permanent method closely followed by Khulna division with the achievement rate of 70 and 61 percent respectively. The IUD performance was highest in Chittagong division (81%) closely followed by Khulna division (74%). Implant distribution was highest in Barishal division while Mymensingh division earned the second position with the achievement rate of 86 and 81 percent respectively against the projection.

The gap between top and bottom performing divisions in the performance of long acting and permanent methods is large and it varies by methods. In 2020, the top-bottom gap was largest for implant at 45 percentage points, followed by permanent method at 43 percentage points and IUD at 39 percentage points (Table 5).

Table 5 : Division-wise achievement rate of long acting and permanent methods, Bangladesh, 2020 (Descending order)

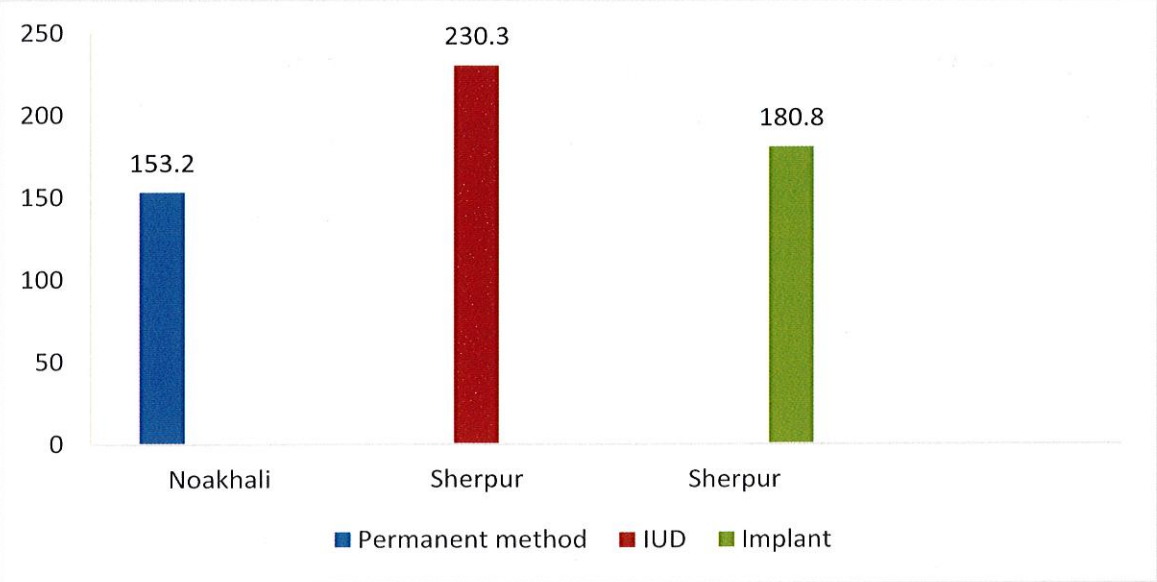
Rank	Permanent method		IUD		Implant	
	Division	Achievement rate (%)	Division	Achievement rate (%)	Division	Achievement rate (%)
1	Rangpur Div.	70.6	Chattogram Div.	81	Barishal Div.	86.4
2	Khulna Div.	61.7	Khulna Div.	74	Mymensingh Div.	81.3
3	Rajshahi Div.	58.8	Dhaka Div.	63.8	Chattogram Div.	78.5
4	Dhaka Div.	54.3	Rajshahi Div.	58.6	Rangpur Div.	75.4
5	Barishal Div.	46.6	Rangpur Div.	57.3	Sylhet Div.	73.9
6	Chattogram Div.	40	Barishal Div.	51.3	Dhaka Div.	73.8
7	Sylhet Div.	32.3	Sylhet Div.	46.6	Rajshahi Div.	54.3
8	Mymensingh Div.	27.1	Mymensingh Div.	42.6	Khulna Div.	42.3
National		50.3	National	62.3	National	83.9

District Performance:

In Figure 6 shows the top performer among 64 districts in terms of performance of long-acting methods.According to national report 2020, Noakhali achieved the highest performance in permanent methods among all 64 districts, 153% performance against its projection. IUD performance data reveals Sherpur district from Mymensingh division inthe year 2020; 230% achievement against projection. In 2017, Sherpur again reported highest performance in implant among 64 districts; 180% achievement against projection.

It is noticeable that Sherpur district bagged highest achievement in long acting performance while Noakhali topped its position in permanent method.

Figure 6: Top performing district of individual long acting method, 2020



More information on projection, performance and achievement rate of long acting and permanent methods in last three years is shown by divisions in Annexure Tables.

Contraceptive Acceptance Rate (CAR)

Contraceptive Acceptance Rate (CAR) is an ongoing up-to-date rate which is principally used to monitor field service performance of seven modern methods of contraception (pill, condom, injectable, IUD, implant, male sterilization, and female sterilization) provided under the national family planning program of Bangladesh. CAR estimate is prepared monthly on the basis of service statistics sent by field functionaries. The base information is gathered from married women of reproductive age in the Family Welfare Assistant (FWA) register during door-to-door visitation by the fieldworkers.CAR primarily compiles information from the eligible couples from rural areas. A small proportion of urban couples (from the catchment of NGO clinics) are included in CAR. The number of contraceptive acceptors is always cumulative. Every month's figure shows the total acceptors and acceptance rate up to next month. The DGFP MIS has a well-established system to generate contraceptive acceptance estimates at each level—from FP unit at the community level to the national level.

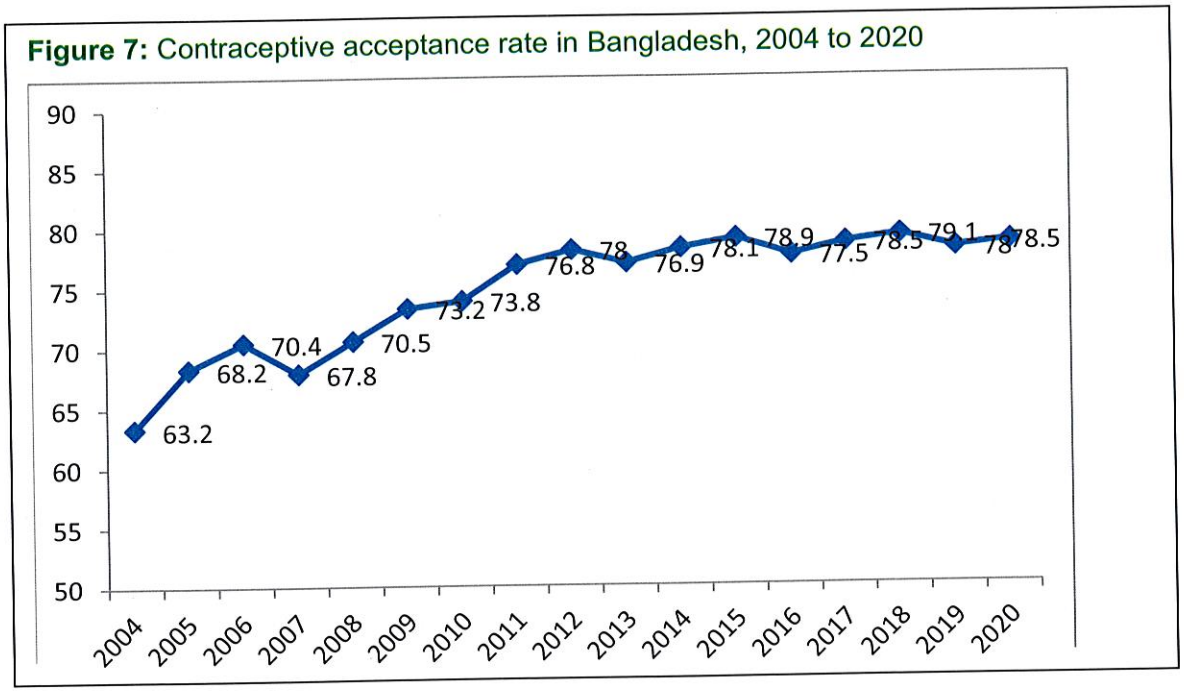
National CAR Performance

Figure 7 presents the CAR over the last 15 years to understand the acceptance rate of modern family planning methods among ELCOs in Bangladesh. It is important to note that regular data collection activity was hampered during the organizational change that took place under the Health and Population Sector Program (HPSP) 1998-2003.

The period from 2004 to 2019 witnessed a gradual increase in the acceptance rate of modern family planning methods, except the year 2007, 2013, 2016 and 2019. The CAR increased 11 percentage points in six years, from 63 percent in 2004 to 74 percent in 2010. The rate reached

its peak at 79 percent in 2015. Between 2012 and 2019, the rate remained almost at the same level, at 78-79 percent. The national CAR declined slightly from 79 percent in 2018 to78.5 percent in 2020.

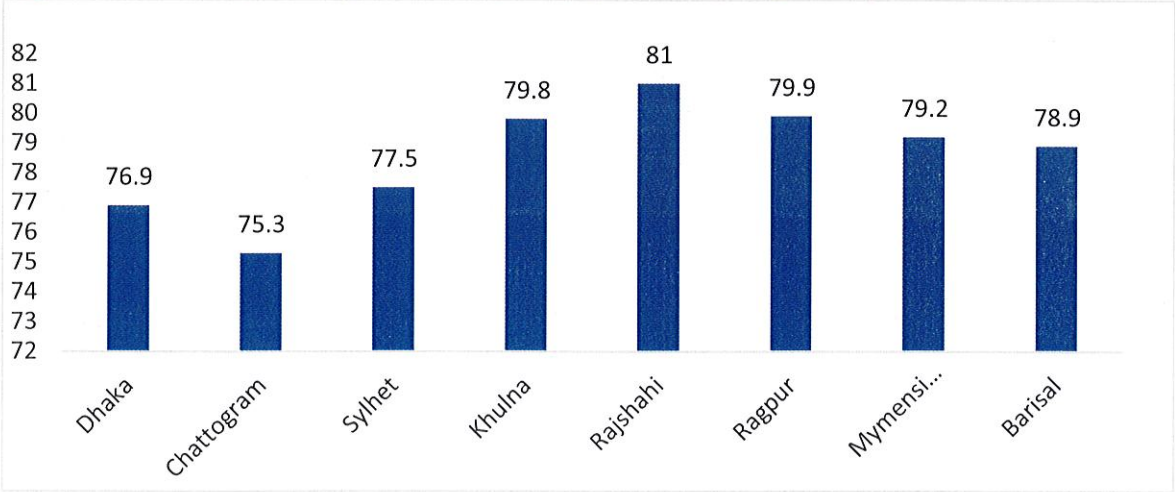
Figure 7: Contraceptive acceptance rate in Bangladesh, 2004 to 2020



Divisional CAR Performance

While the national CAR performance remains almost at the same level (78-79%) in last three years, the rate varies at the divisional level. Overall, the CAR differences across divisions are small. The CAR performance was found to be highest among the divisions from the western region of the country in 2020. The top three divisions are from the west. The highest CAR is observed in Rajshahi, followed by Khulna and Rangpur divisions. Chattogram division was found to report the lowest CAR in the country and Dhaka was in the second lowest position. The CAR gap between top and bottom performing districts lies between 5-6 percentage points.

Figure 8: Contraceptive acceptance rate (CAR) by divisions, Bangladesh, 2020



Method-wise CAR at national and division levels is shown in in AnnexureXX.

District CAR Performance

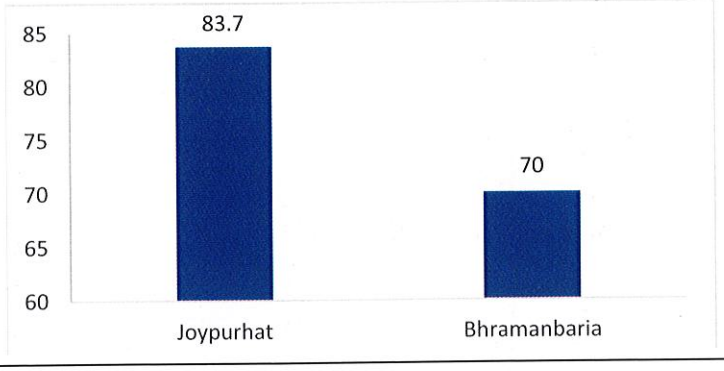
The distribution of 10 high performing districts in terms of contraceptive acceptance rate reveals the supremacy of districts from the western region of the country. Eight of the 10 high performing districts are located in the western region of the country and shows consistence in their performance. These are: Joypurhat, Bogura, Natore and Rajshahi districts from Rajshahi division, Chuadanga and Bagerhat districts from Khulna division, and Nilphamari, Panchgarh or Dinajpur(a combination of 2 districts each year) from Khulna division. Joypurhat achieved the highest performance in CAR in the country in three consecutive years. Information on CAR performance of districts is attached Annexure tables.

Table 6: High performing ten districts in terms of contraceptive acceptance rate (CAR), Bangladesh, 2020 (Descending order)

Rank	2020	
	District	CAR (%)
1	Joypurhat	83.8
2	Bogra	82.3
3	Natore	82.2
4	Chuadanga	82.1
5	Dinajpur	81.9
6	Rangamati	81.9
7	Serajganj	81.5
8	Bhol	81.4
9	Rajshahi	81.4
10	Cox's Bazar	80.4

Figure 9 shows the highest and lowest performing district in terms of contraceptive acceptance rate for the last three years. Joypurhat district has been consistent in earning the top position (83%) in CAR performance in three consecutive years while Bramhanbaria (70%) was found to be the lowest performing district during the same period. It is encouraging to note that the difference between the two extreme levels of acceptance is slowly narrowing over the years.

Figure 9: Highest and lowest performing district in terms of contraceptive acceptance rate (CAR), Bangladesh, 2020



A CAR performance of 85 percent means that only 15 percent of eligible couples do not receive any FP methods from the service providers.A CAR of more than 80 percent is possible when all the eligible couples are reached routinely and they have the need for contraception, particularly in a very low fertility scenario. CAR for all 64 districts is shown in Annexure Tables.

Total Fertility Rate

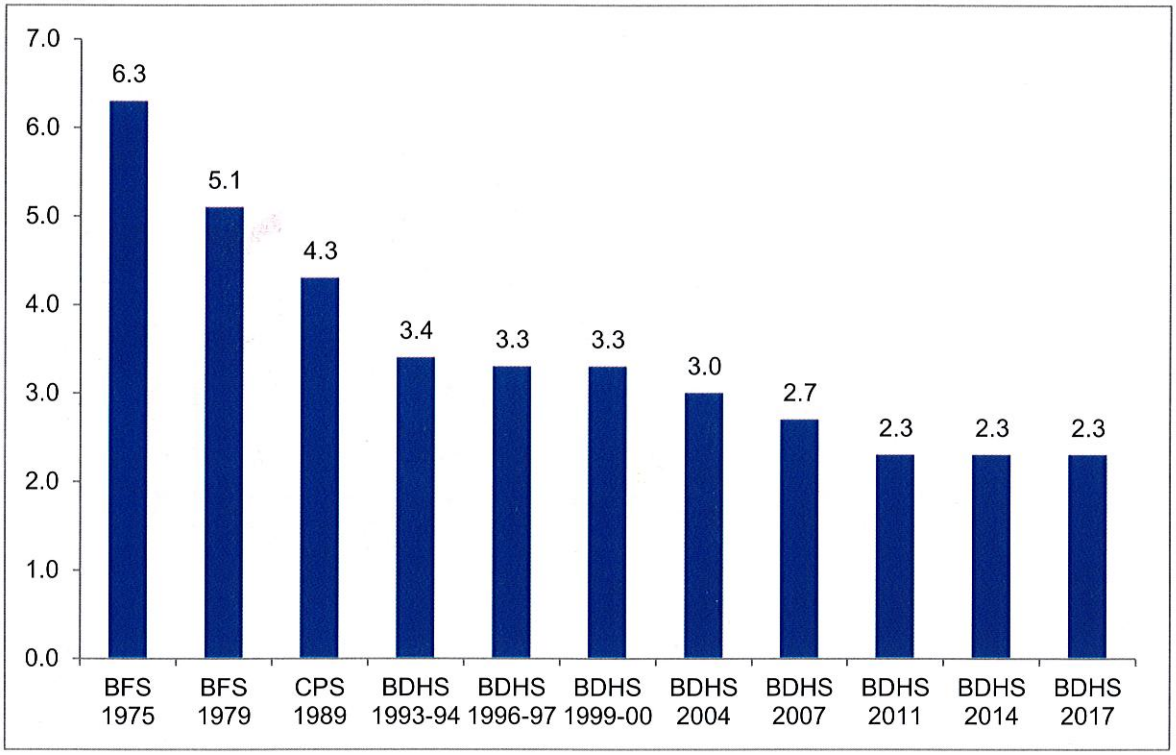
The total fertility rate (TFR) is the average number of children women will have by the end of their child-bearing years if they survive all years and subject to the fertility rates of a given period. It is expressed as children per woman.

National Fertility Rate

The TFR reported by eight Bangladesh Demographic and Health Surveys (BDHSs) since 1993-1994 and the three preceding surveys carried out since 1975 are presented in Figure 10. The data indicate that fertility in Bangladesh has been declining since the mid-1970s. The TFR declined sharply from 6.3 births per woman in 1975 to 4.3 births per woman in 1989, followed by another rapid decline in the next decade of 1.0 birth per woman to reach 3.3 births per woman in 1996-97.

Following a decade-long plateau in fertility at around 3.3 births per woman, the TFR declined further by one child to reach 2.3 births per woman in 2011. There has been no decline in the fertility rate since then. According to BDHS 2017, the current TFR is 2.3, the same as in the 2011 BDHS. The objective of the 4th HPNSP is to reach a TFR 2.0 per women by 2022.

Figure 10: Total fertility rate in Bangladesh, 1975-2017

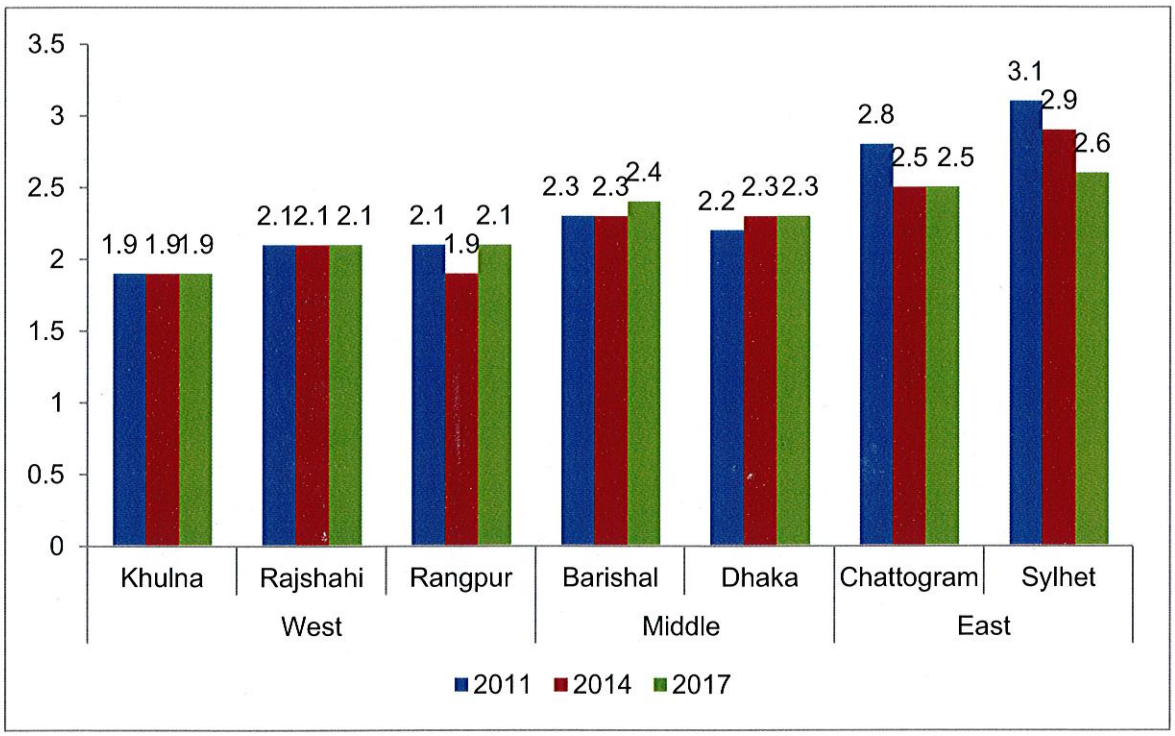


Divisional Fertility Rate

There is an east-west divide in terms of TFR. The TFR differences between divisions are more pronounced. According to the BDHS 2017, Khulna division has the lowest TFR (1.9 births per woman), and Sylhet division has the highest TFR (2.6 births per woman)followed by Chattogram(2.5 births per woman). Khulna division with 1.9 births per woman has achieved the fertility level target of 2.0births per woman, while Rajshahi and Rangpur with 2.1 births per woman each are very proximate to achieving the target. In fine, the TFR in three of eight divisions of Bangladesh -Khulna, Rajshahi and Rangpur- is at or lower than replacement level fertility (TFR 2.1 or below).

Between 2011 and 2017 BDHS, fertility remained thesame at the national level while some changes in TFR were observed at the divisional level. During this period, the fertility has slightly declined in two divisions (Chattogram and Sylhet), remained same in three divisions (Khulna,Rajshahi and Rangpur) and slightly increased in Dhaka and Barishaldivision (Figure 11). A notable decline in fertility was observed in Sylhet division, from 3.1 in 2011 to 2.6 in 2017. Since Dhaka is by far the largest division—comprising one-third of Bangladesh's population—the fertility rate of this division has a widening impact on the national fertility rate.

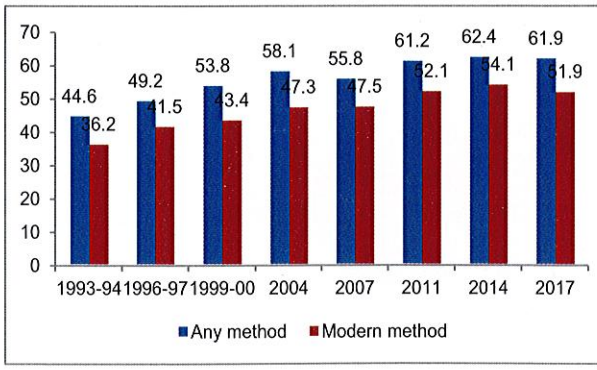
Figure 11: Total fertility rate by divisions, Bangladesh, 2011-2017



Contraceptive Prevalence Rate (CPR)

Use of contraception among married women in Bangladesh has increased gradually, from 45 percent in 1993-94 to 62 percent in 2017, according to BDHS. Between 2004 and 2017, useof contraception increased by only 4 percentage points, from 58 to 62 percent. In contrast, the use increased 13 percentage points, from 45 in 1994to 58 percent in 2004.

Figure 12: Use of family planning methods, Bangladesh, 1993-2017



While 62 percent of married women use any FP methods, some 52 percent use a modern method. Between 2007 and 2017, contraceptive use has increased by 6 percentage points from 56 percent in 2007 to 62 percent in 2017, while use of modern contraceptive methods increased by 4 percentage points from 48 percent to 52 percent during the same period. Between 2014 and 2017, there has been no increase in contraceptive use while use of modern methods decreased by 2 percentage points (Figure 12).

Contraceptive Method-mix based on CPR, 1993-2017

There has been no change in contraceptive method mix over the past two decades. But, this period has witnessed changes in method-wise performance.Overall, the users of modern FP methods increased to 52 percent from 36 percent during this period, and this increase was solely contributed by the increase in the use of short-acting methods.The short-acting method users increased by 18 percentage points, from 25 percent in 1993-94 to 43 percent in 2017. The permanent method users decreased by three percentage points, from nine percent in 1993-94 to six percent in 2017.

Table 7 : Contraceptive method mix in Bangladesh, 1993-2017

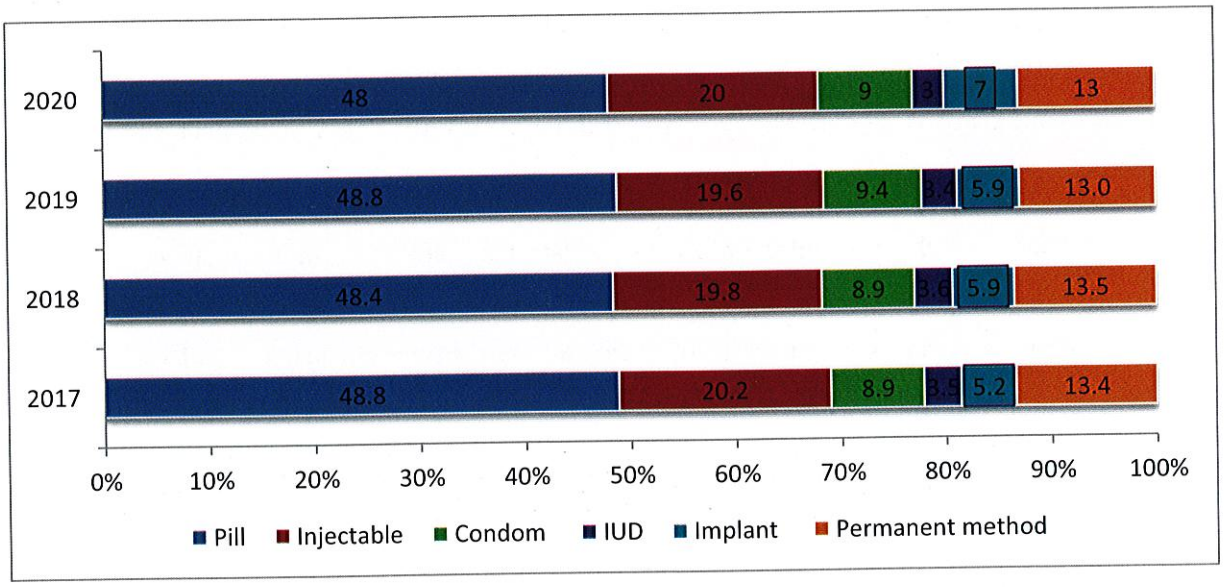
FP Method	1993-94	1996-97	1999-00	2004	2007	2011	2014	2017
Any method	**44.6**	**49.2**	**53.8**	**58.1**	**55.8**	**61.2**	**62.4**	**61.9**
Modern method	36.2	41.5	43.4	47.3	47.5	52.1	54.1	51.9
Traditional method	8.4	7.7	10.3	10.8	8.3	9.2	8.4	10.0
Shortacting method								
Oral pill	17.4	20.8	23.0	26.2	28.5	27.2	27.0	25.4
Condom	3.0	3.9	4.3	4.2	4.5	5.5	6.4	7.2
Injectable	4.5	6.2	7.2	9.7	7.0	11.2	12.4	10.7
Longacting& permanent method								
IUD	2.2	1.8	1.2	0.6	0.9	0.7	0.6	0.6
Implant	-	0.1	0.5	0.8	0.7	1.1	1.7	2.1
Female sterilization	8.1	7.6	6.7	5.2	5.0	5.0	4.6	4.8
Male sterilization	1.1	1.1	0.5	0.6	0.7	1.2	1.2	1.1

The pill is by far the most widely used method (25%), followed by injectable (11%). Condom is the least popular among three short acting methods, accounting for only seven percent share of all use. The three short acting methods jointly represent 43 percent of currently married couples who use any FP methods. Nearly nine percent of currently married couples use a long-acting method, such as an IUD, implant, or a permanent method.

Contraceptive Method-mix based on CAR, 2020

The contraceptive method mix based on CAR for the period of 2017-20 is shown in Figure 13. Pill constitutes nearly half of all contraceptive acceptance, followed by injectable accounting for 20 percent share of total acceptance. Another 13 percent acceptor comes from permanent method. The share of IUD among all method acceptors is lowest, representing only three percent of total acceptance. The rate of acceptance by methods remains the same over the last four years.

Figure 13: Contraceptive method mix based on CAR, 2017-20



The method-mix situation among all divisions is shown in AnnexureTables.

CAR-CPR Difference

The DGFP uses CAR to monitor the program performance of modern methods of contraception. The CAR estimate is primarily built upon the apparent acceptor of a method. It is not a precise rate as CPR estimate, which is based upon scientifically formulated study methodology.

CAR is a tentative rate and varies from year to year due to coverage and reporting status. It is based on the client contact and the status of contraceptive acceptance as reported by the field workers in the FWA register. This is generally higher than the CPR, as CPR is the actual use status of contraceptives, while CAR is the distribution of contraceptives. However, CAR, as a monitoring tool, is used to understand on-going program performance in the country not for program evaluation. The CPR, on the other hand, is used for program evaluation. The CPR is based on periodic surveys that are made on precise statistical procedures. The source of data required to calculate the CPR is a population-based survey, such as the Demographic and Health Survey (DHS), Multiple Indicator Cluster Survey (MICS), and other national surveys. Such survey is conducted once in 3-4 years and its samples are not adequately large to ascertain community-level CPR.

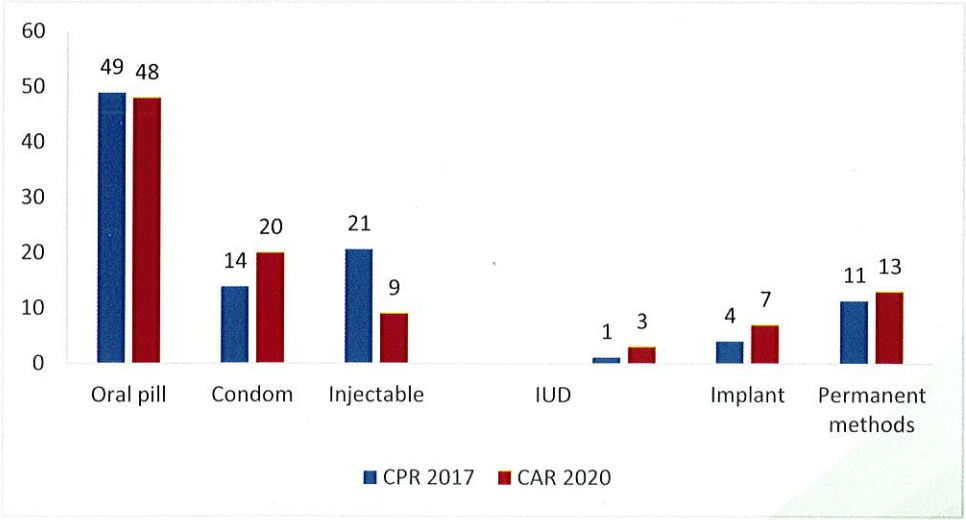
A comparison between DGFP's MIS-generated CAR and BDHS-estimated CPR reveals a higher rate for the former. For example, the BDHS 2017 shows a modern CPR of 52 percent while the MIS shows a CAR of 78 percent. A 26-percentage points gap between modern CPR and CAR is worth investigating while 10-15% gap between them are statistically valid. Field workers shortage,

lax monitoring in some cases, officer shortage, negligence of systematic data collection and absence regular cross-checking may contribute to over-reporting in national data system in some cases. A close relationship can be developed by calculating error margin between CAR and CPR estimates while addressing the root causes of data collection loopholes. Hence, some steps can be followed such as:

- There is lack of a robust system to validate the distribution of FP methods. There are several challenges to ensure the quality of the reported data/statistics. The need for a structured data quality assessment system to check the validity and authenticity of the data gathered at the facility and field cannot be denied.

- Contraceptive continuation rates provide a useful summary measure of the effectiveness of program in enabling clients to sustain contraceptive use. However, the CAR measure does not ensure whether supplies (pills, condoms) are actually used and FP use is sustained. To obtain correct continuation rates at the program level, follow-up of new acceptors at a specified period of time after adoption of the method or a sample survey is needed. Following figure explains the differences between CPR and CAR within each contraceptive methods; however, the time difference of the assessments is 4 years.

Figure 14: Method wise Difference between CPR (BDHS 2017) and CAR 2020



Sources of FP Methods

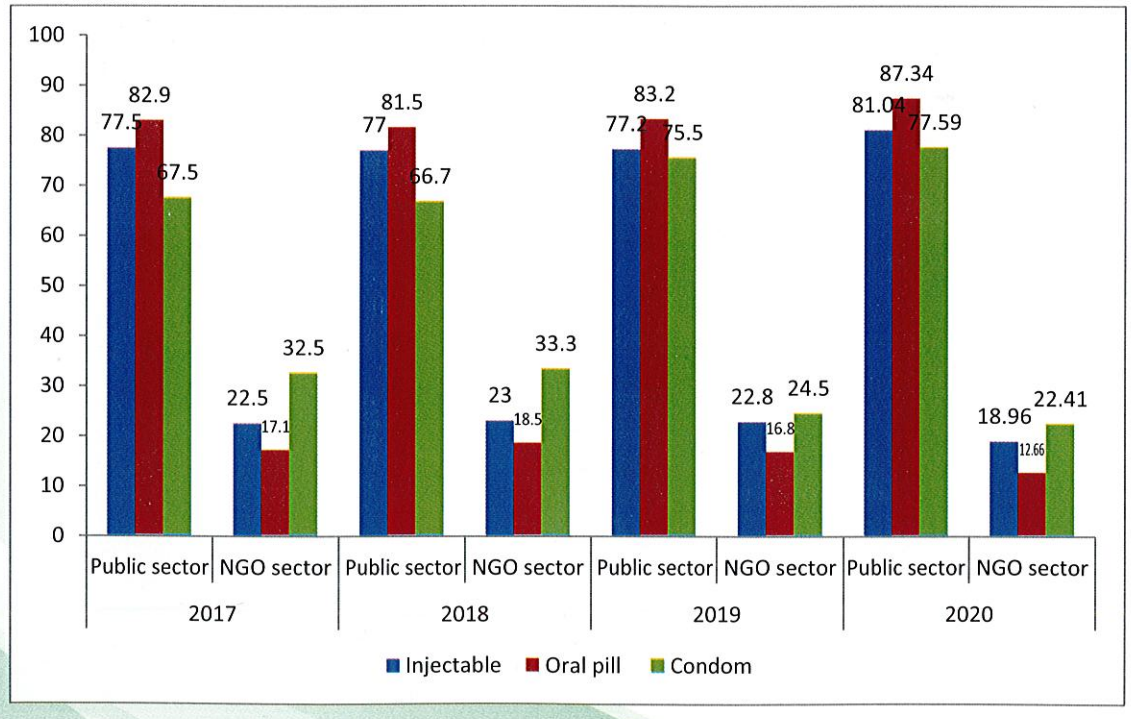
a) Short Acting Methods:

The distributions of family planning methods are classified into two major categories: public-sector sources, and NGO and multi-sector sources.The distribution of modern family planning methods by public and NGO sectors for the period of 2071-19 is presented in Figure 14 and 15.

The government sector remains the pre-dominant provider of contraceptive methods, catering to a more than three quarters of users for all modern FP methods. The NGO sector provides contraceptives to less than 20 percent of all users of modern FP methods except condom The distribution of modern contraceptive methods varies by the specific method.

As shown in Figure 15, the contribution of government sector in providing pill and injectable is 87 and 77 percent respectively in 2020, and the share hast increased from the year 2017. Between 2017and 2019, the contribution of the public sector in condom has increased 8 percentage points, from 68 to 76 percent. The NGO-sector contribution in pill and injectable was 23 and 17 percent respectively in 2017 and the share decreased for injectables & pill (18% and 12%) in the following years in 2020.

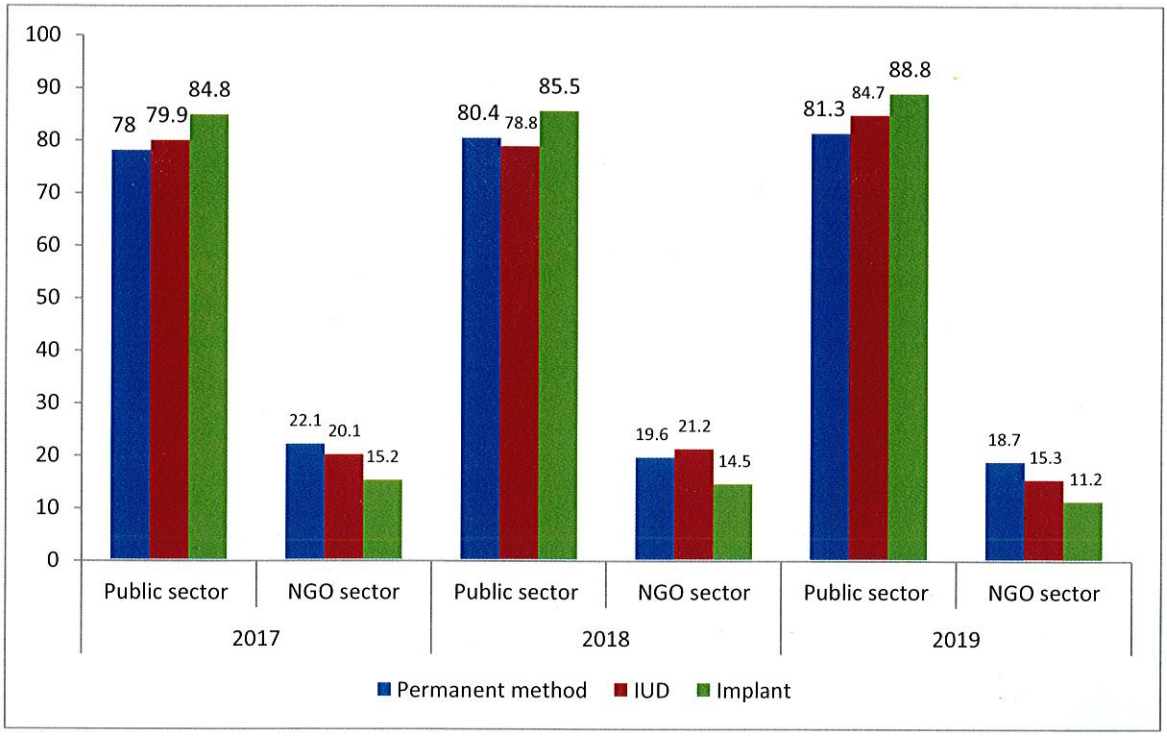
Figure 15 : Distribution of short acting methods by supply sources, Bangladesh, 2017-2020



Long Acting & Permanent Methods:

Figure 16 shows an increase in the government sector contribution in the long-acting and permanent methods over time. The government sector share in providing permanent methodincreased from 78percent in 2017 to 81 percent in 2019. The government sector contributed 89 percent implant distribution in 2019, which was 85 percent in 2017. Similarly, the government contribution in IUD has increased 5 percentage points, from 80 to 85 percent in the last three years. Conversely, the NGO-sector supply of contraceptives decreased for all the long-acting methods.

Figure 16: Distribution of long acting and permanent methods by supply sources, Bangladesh, 2017-2019

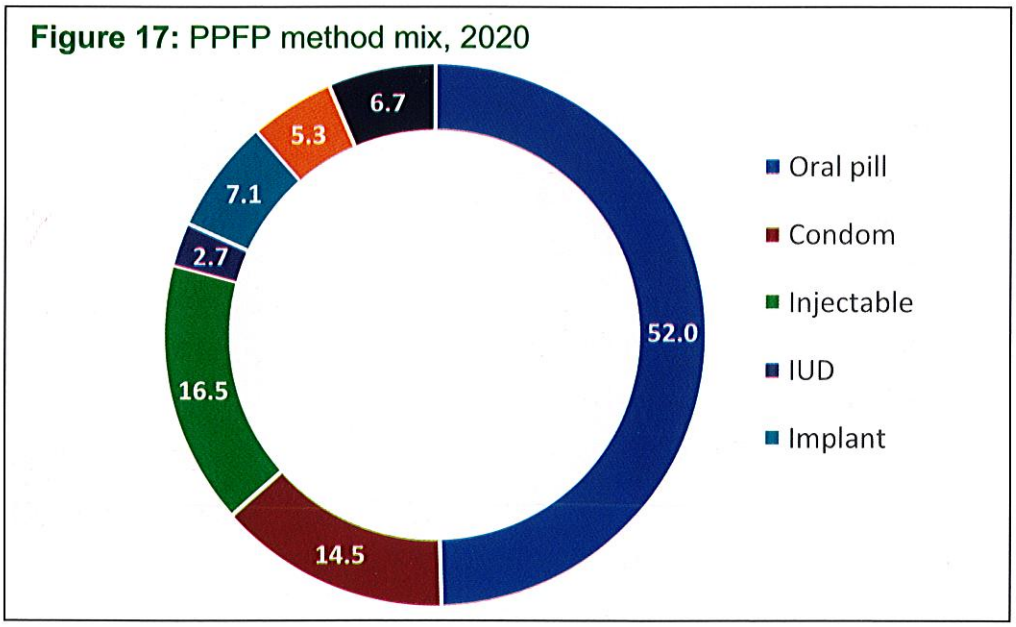


Post-Partum Family Planning (PPFP)

Figure 17 shows the percent distribution of Post-Partum Family Planning (PPFP) method acceptors for the period of January-December 2020. The collection and compilation of PPFP performance for all modern family planning methods first started formally from January 2019.

The percent distribution of women who adopted any modern FP method at post-partum in 2020 reveals that the majority adopted pill at post-partum, accounting for 52 percent of all PPFP use. Another 16.5 percent of PPFP acceptors adopted injectable, which emerges as the second most popular method among PPFP clients. The condom acceptance was estimated to be 14.5 percent of all PPFP acceptance. Among long acing and permanent methods, the share of implant is highest at seven percent of all PPFP use (Figure 16).

Figure 17: PPFP method mix, 2020



In the table 14 below The total number of PPFP method acceptors in December 2020was 28734794 against 27659104 number of ELCOs. Among method users, pill stands highest amounting to 552830 in Dec 2020.A total of177363 number of women adopted injectable at post-partum. The condom acceptance among PPFP clients was estimated to be 156735. A total of 108,936 PPFP clients adopted a long acting methods and permanent method acceptors comes to 79,823 in December 2020.

Table 8: Month wise post-partum family planning method acceptors, January-December 2020

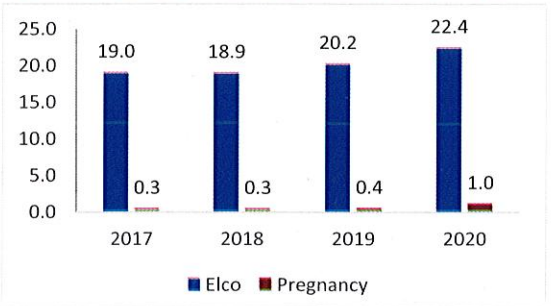
Month	Total ELCOs	Oral Pill	Condom	Injectable	IUD	Implant	Male sterilization	Female sterilization	Total PPFP acceptors
January	27487779	529473	146284	167598	27187	73663	3080	63089	28498153
February	27496025	532446	148416	169658	27796	75731	3487	66470	28520029
March	27463140	534731	148979	169677	28178	76325	3975	67689	28492694
April	27518538	534188	147287	167443	27858	75549	3161	68426	28542450
May	27546921	535400	148972	169095	28478	74244	3737	69000	28575847
June	27544300	537997	149938	168904	28297	72524	2595	67156	28571711
July	27542668	540356	150716	170095	28000	71094	4236	67346	28574511
August	27572217	543756	151954	172048	28129	71066	4385	69675	28613230
September	27597591	545574	153049	173176	28520	72356	5129	71450	28646845
October	27614360	547651	153946	174143	28576	73779	4270	74280	28671005
November	27637609	549933	155448	175564	29052	75402	3236	74990	28701234
December	27659104	552830	156735	177366	30092	78844	3315	76508	28734794

VII. MATERNAL AND CHILD HEALTH SERVICES

Eligible Couples and Pregnancy

Figure 18 shows the percentage of ELCO and pregnant women of total population for the period of 2017-2020. In 2020, ELCOs constituted 22.4 percent of the total population, which was two percentage point higher than previous two years. The pregnant women comprised two percent of the total population in the country. The pregnant women as share of the total population slightly increased in 2020 compared to the previous years.

Figure 18: Percentage of eligible couples and pregnant women of total population, 2017-2020

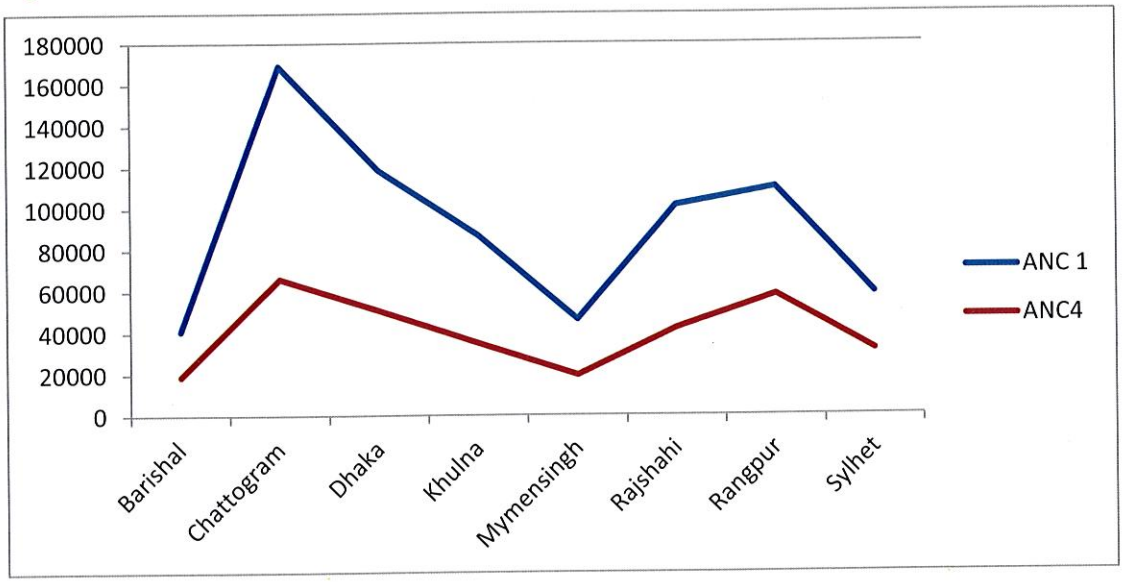


Antenatal Care Services in UH & FWC Centres

Figure 19 presents division-wise number of ANC 1 & ANC 4 services at UNFWC centres across the country in the year 2019-20. The highest number of women who made antenatal care 1 visit is Chattogram division (169040) followed by Dhaka divison (118489). Barishal division performed lowest number of ANC 1 visits (40,761) followed by Mymensigh division being the second lowest division(46,028). On the other hand, in terms of ANC 4 visits, Chattogram division again becomes highest performing divisions (66,113) followed by Rangpur division (57,985). The performance of

Barishal division lies at bottom (18,853) and Mymensigh stands at second lowest performing divison (19,213) in ANC 4 visits.

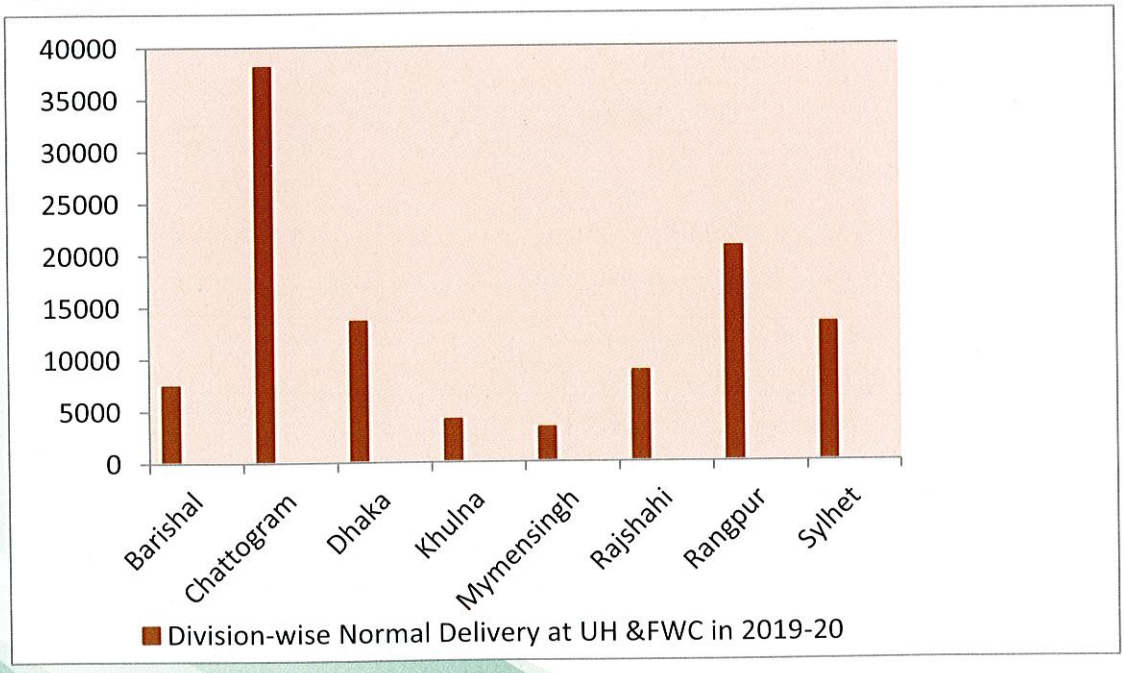
Figure19 Division-wise ANC 1 and ANC 4 service at UH&FWC in 2019-20



Antenatal care services in all divisions for all visits are shown in Annexure Table 7(a).

Institutional Delivery Services in UH & FWC :

Figure 20: Division-wise normal delivery at UH&FWC in 2019-20



In the figure 20 presents the distribution of facility-based deliveries at UH&FWC in the financial year of 2019-20. DGFP service providers reported these deliveries from UH&FWC service centers across the country.

At these mainly rural based facilities, the number of women who gave birth vaginal deliveries across the country varies significantly from region to region. Chattogram division performed highest number NVD (38,082) followed by Rangpur and Dhaka division whose numbers stood at 20,602 & 13,525 respectively. Mymensingh division performed lowest number of NVDs (3,245 followed by Khulna division (4,055).

Postnatal Care Services in UH & FWC

In Figure 21 below presents information on the number of postnatal care (PNC) visits for the most recent live birth in the year 2019-20 . Health check-ups of both post-partum mother and newborn were calculated as PNC services.

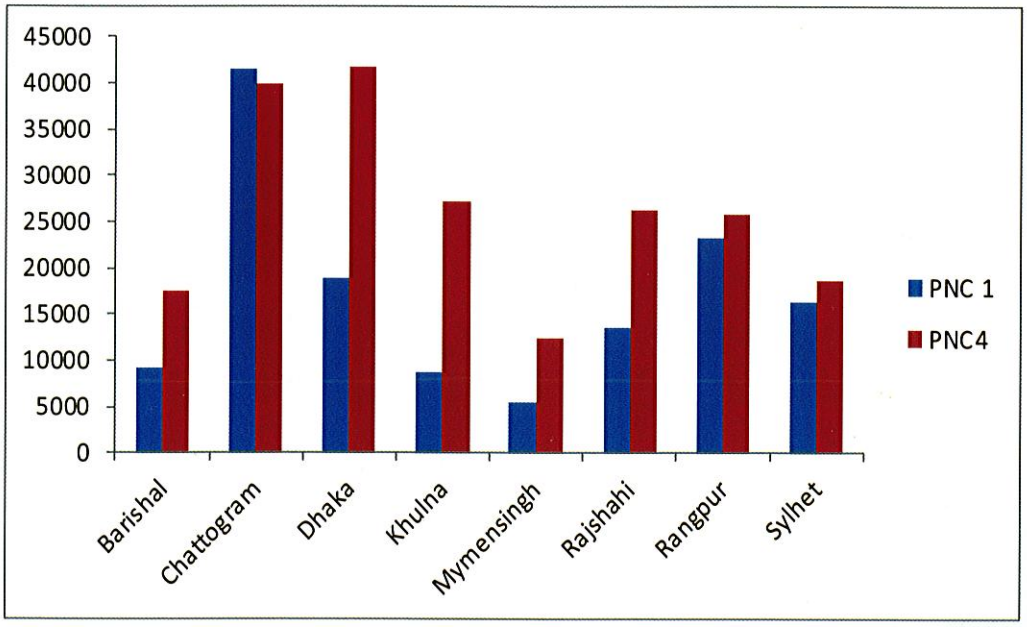


Figure 21 Division-wise PNC 1 and PNC 4 service at UH&FWC in 2019-20

In 2019-20 , the highest number of women who made PNC- 4 visits was in Dhaka division (41,835) followed by-in Chattogram division (39942). The practice of receiving four or more PNC visits was lowest in Mymensingh division (12348) followed by Sylhet division being the second lowest. The number of women-children who received highest number of PNC visits is Chattogram division followed by Dhaka division Mymensing division again become the lowest ANC 1 achievers.

Other key MCH Services delivered in UHFWC:

- Pregnant mother Received Misoprostol
- Use 7.1% chlorhexidine digluconate for umbilical cord care
- Mother counseled on Postpartum FP
- No. of Newborn received KMC Service

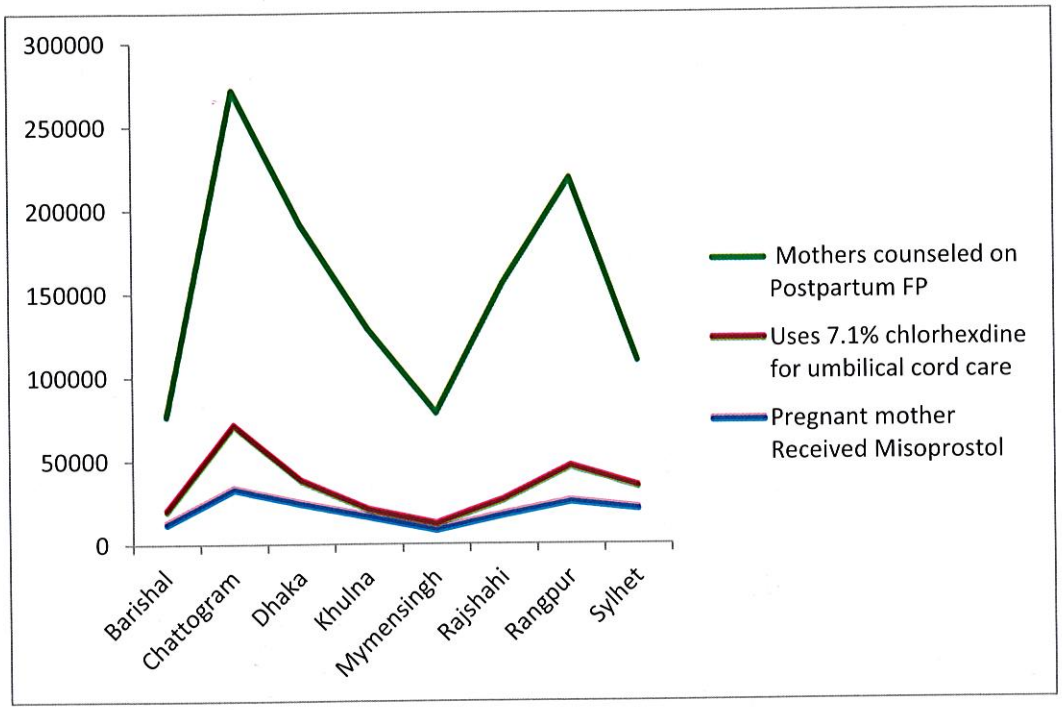


Figure 22 : No. of Pregnant mother Received Misoprostol, Counselled on postpartum FP and Uses 7.1% chlorhexidine digluconate for umbilical cord care at UHFWCs

In the above figure 22 shows several key MCH services such as Pregnant mother Received Misoprostol & Counselled on postpartum FP and Uses 7.1% chlorhexidine, delivered on UH&FWCs. Chattogram division stands highest number pregnant mother who received Misoprostol services and Mymensingh division is the lowest number of services provided in terms of misoprostol. The more or less similar trends are seen in the same regions in terms of other related services such as 7.1 chlorhexidine usage or post partum counseling. The number of KMC Service was 711 which was not reflected in the graph as it counted in thousand terms.

Reproductive Health & EOC Performances of MCWCs, MCHTI, MFSTC and MCH of FWVTI

Table 9: Reproductive Health & EOC Performances of MCWCs, MCHTI, MFSTC and MCH of FWVTI for the Period of July 2019-June 2020

MCWC	ANC 1st visit	ANC (total)	PNC (total)	Delivery			Gen. Pt	RTI/ STI	Child Care	
				NVD	C/S	Total			0-1yr	1-5yr
Barishal Division	94250	263454	115440	33471	21779	55250	1170372	46748	129854	251591
Chattogram Division	393142	1129290	455075	146977	75819	222796	1238741	150362	132656	231273
Dhaka Division	451576	1377191	462449	101418	134699	236117	1969742	188471	201196	396452
Khulna Division	242262	675619	243315	44752	87627	132379	1117153	57733	124289	216716
Mymensing Division	130050	389209	110075	33641	26644	60285	537482	48571	54233	111765
Rajshahi Division	282390	842255	229470	69178	83894	153072	1407621	77610	114483	283056
Rangpur Division	227346	676501	224573	81698	52280	133978	719383	95705	58328	129880
Sylhet Division	133432	386368	159971	52781	19267	72048	281898	31853	28163	56533
Specialized Hospital	35949	49930	19517	3943	5410	9353	33140	1161	43708	23911
Grand Total	1990397	5789817	2019885	567859	507419	1075278	8475532	698214	886910	1701177

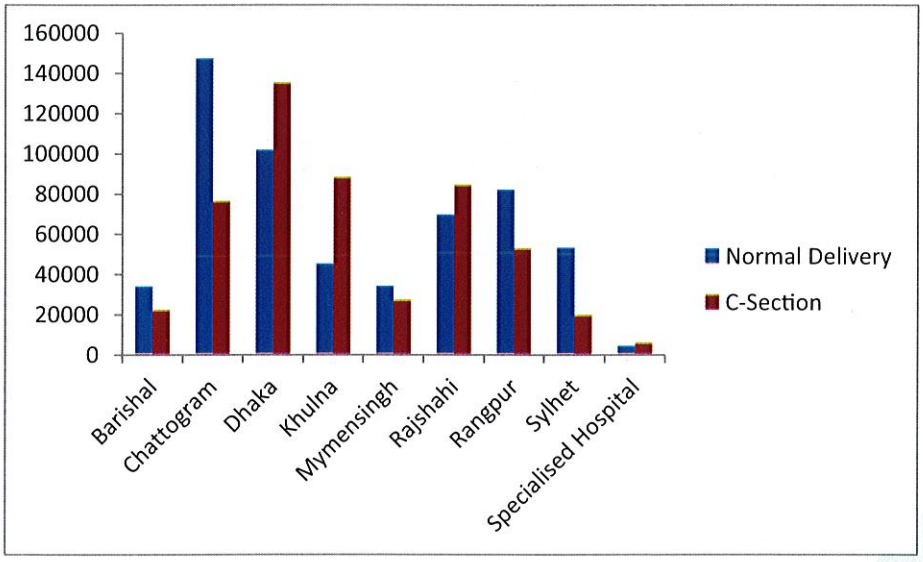


Figure 23 Division-wise Normal and C-section at MCWC & other related facilities

(Excluding Lalkuthi in Mirpur as it was not functionalized in 2019)

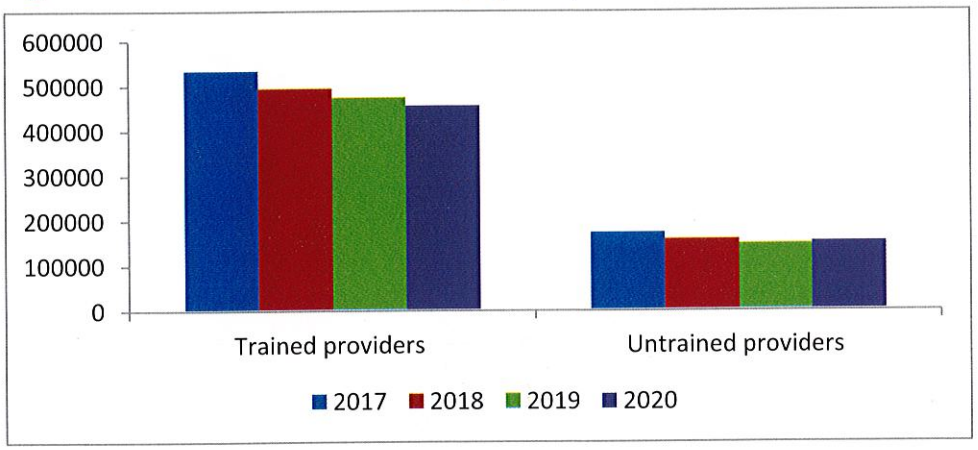
In above table and chart , it is seen that the highest number of CS are performed in Dhaka division (1,34,699). Such highest performance is also seen in the same division in delivering ANC and PNC services. The highest number of NVD is performed in Chittagong division (146977) followed by Dhaka division being the second performing NVD (1,01,418) and Rangpur division becomes third (81,698). In terms of ANC and PNC Chittagong division becomes the second

highest performer (1129290 &455075) followed by Rajshahi division (842255 & 229470) . The lowest performing NVD is Barisal division (33,471) . This is also reflects in the same division in delivering ANC & PNC services (263454 & 115440) .The lowest CS performing division is Sylhet division (19267).

Births Reported by FP Workers

In the figure 24, in the period of 2017-20, we witnessed a gradual decrease in the number of births at home for both trained and untrained service providers. Both live births and still births were calculated as total births at home. The total number of births delivered at home by trained providers is greater than those by untrained providers in the last four years. In 2020, the total number of births delivered at home by trained providers reported was 4,54,439 which is about three times of births delivered at home by untrained providers 151,733 (See Annexure Table 8)

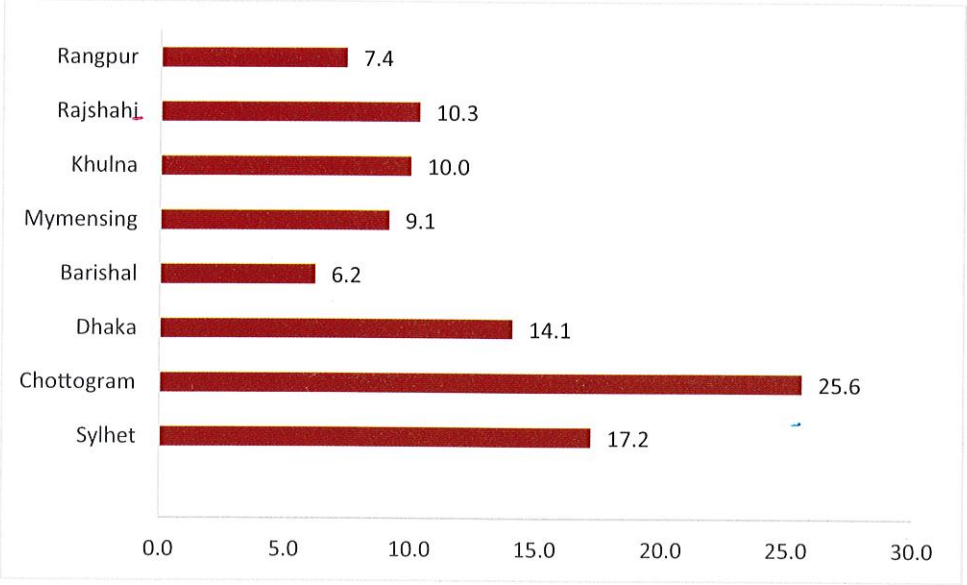
Figure 24: Number of births at home by type of providers, 2017-2020



Still Births Reported by FP Workers

As shown in Figure 25, the rate of still births varies by divisions in the year 2019-20. Overall, Chattogram division reported the highest likelihood of still births among all births (25.6%) followed by Sylhet division (17.2%) while Barishal division (6.2%) has the lowest rate in the same period. (See Annexure Table 8)

Figure 25: Percentage of still births of total still births in all divisions reported by FP providers

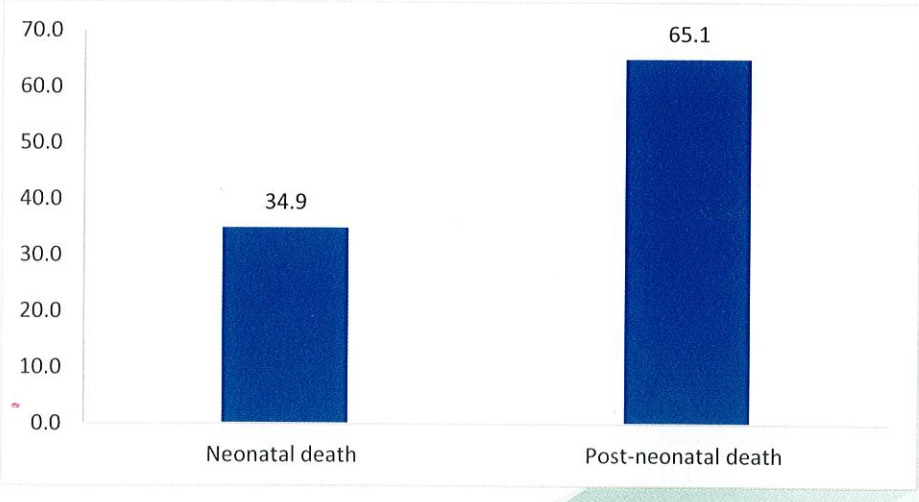


Division-wise information on live and still births is attached in Annexure Tables.

Infant Deaths Reported by FP Workers

Figure 26 shows the proportion of deaths among infants by the time of death. Three quarters of deaths took place in the first 28 days of life after birth (i.e., neonatal death), whereas other one quarter took place in subsequent 11 months(post-neonatal death).The share of neonatal death among all infant deaths decreased two percentage points in the last three years.

Figure 26: Percent distribution of infant deaths, by time of death, 2020 (July 2019-June 2020)



The table 10 shows the division-wise death related information for the year 2019-20 . The total number of infant death is 2544 and of them 888 took place within 28 days of life. Chittagong division had the highest number of infant deaths (462) followed by Dhaka division (451). The total death among child age 1-5 years is 179 and Chattogram division has higher share than the other divisions. The total number of maternal deaths is 935. Chattogram division was found to have highest number of maternal deaths (206) among all divisions, followed by Dhaka division with 161 maternal deaths.

Table 10: Division-wise number of deaths reported by FP Workers, 2020 (July 2019-June 2020)

Division	Death						
	Number of Death						
	No. of Child <1 year						
	0-28 days	29days -<1 year	Total	No. of Child 1-<5 years	Number of Maternal death	Other Death	Total Death
Barisal	54	114	168	17	80	20784	21149
Chittagong	133	329	462	60	206	58673	59401
Dhaka	184	267	451	20	161	55390	56022
Khulna	110	250	360	12	89	37345	37806
Rajshahi	145	210	355	16	117	44194	44682
Rangpur	128	201	329	44	128	30503	31004
Sylhet	134	285	419	10	154	18099	18682
Total	888	1656	2544	179	935	264988	268746

VIII. ADOLESCENT SERVICES

Counseling services on adolescent reproductive health by family planning workers increased more than two folds in the last three years. The number of adolescents who received counseling on RTI/STI from FP workers was 2,208,010 in 2019 compared to 865,710 in 2017.

Figure 27: Number of adolescents who received counseling on RTI/STI, IFA tablet and referred to the higher facilities by FP service providers, 2019-2020

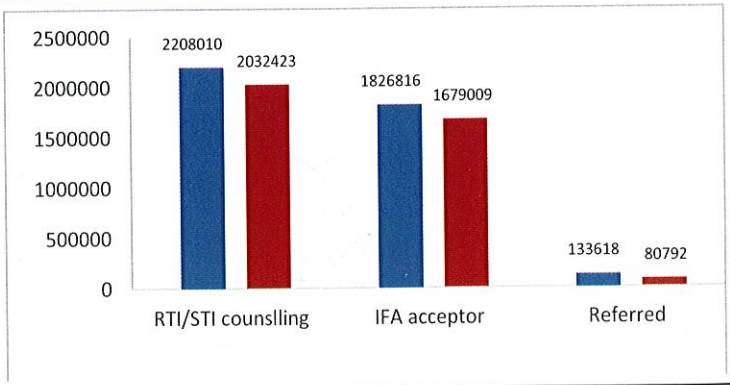


Figure 27 shows a gradual increase in the distribution of iron and folic acid (IFA) tablet and sanitary pad among adolescent girls over the three years. In 2019, the number of adolescents who received IFA tablet was 1,826,816. In 2018, the number of adolescents who received sanitary pads from FP workers was 472,774.

IX. NUTRITIONAL SERVICES

The DGFP provides maternal and young child nutrition services. The DGFP MIS collects information on nutritional status of the children, distribution of Vit A, IFA, MNP sachet, Breast feeding practices, counselling servicesetc. All detail table are in Annexure. Among all divisions malnourished children under 5 years are least in Khulna. In Mymensingh the percentage of stunted and underweight children are the highest. However, in Sylhet there are highest number of stunted children (Figure 25).

Figure 28: Percentage of children (6-59 months) malnourished by divisions

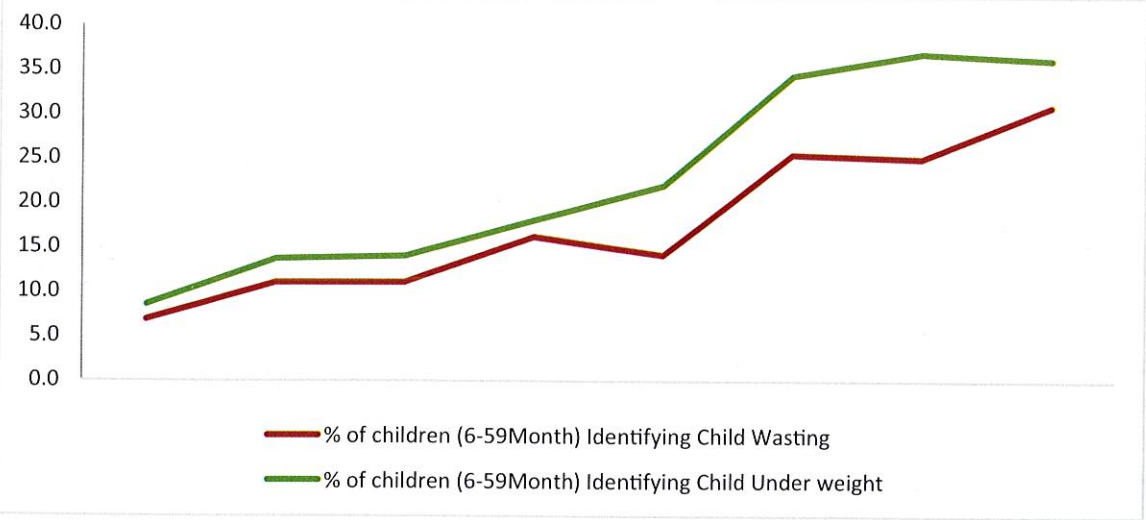
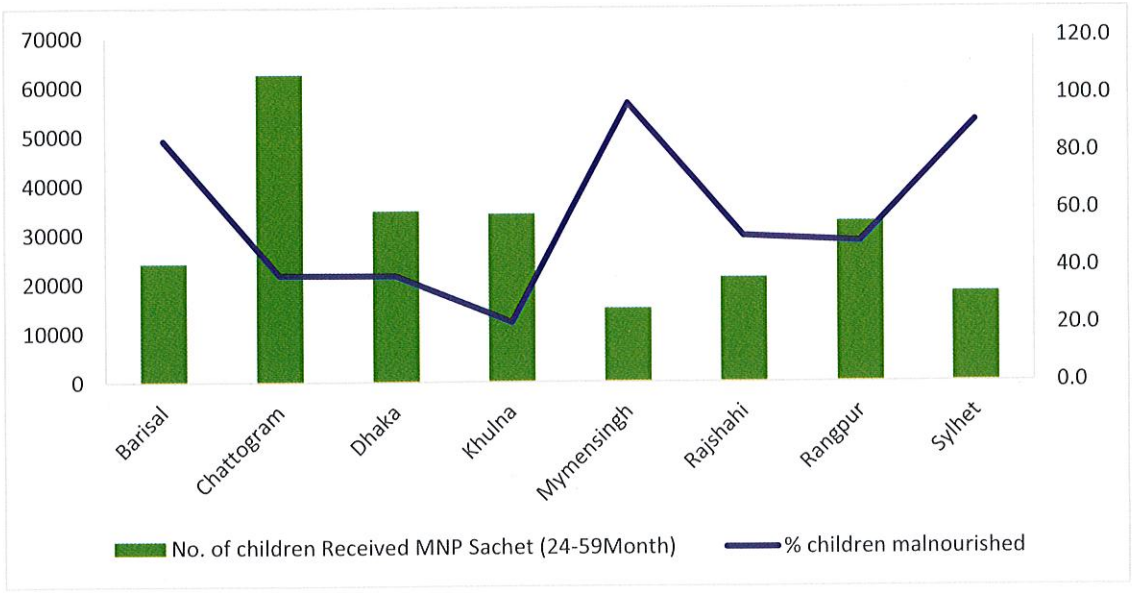


Figure 29 below shows the total distribution of MNP sachet in different divisions along with the percentage children hose are between 6-59 months old malnourished. It shows in Mymensingh there are highest number of children are malnourished but distributed the least number of MNP sachet. The situation is similar in Sylhet like Mymensingh.

Figure 29: Percentage of children (6-59 months) malnourished, and total children received MNP Sachet (by division) in 2020



X. CHALLENGES OF FAMILY PLANNING PROGRAM

In Bangladesh, family planning remains one of the top priorities in the Fourth Health Sector Program 2017-2022, as a path toward achieving the SDGs. Several areas require further attention to ensure effective family planning in the future:

a) **Low use of long acting and permanent methods of contraception:** Only nine percent of currently married women use a long acting or a permanent method to limit fertility. It is a cause for concern in the context of greater demand for limiting fertility as two-thirds of currently married women of reproductive age do not want an additional child. To increase the use of longacting and permanent methods, it is of high importance tointensify program efforts to reach the women who have two children or more and are using short acting methods.

b) **Low use of contraception among young married females:**
Use of contraception among young married females age 15-19 is 49 percent which is lower than the national average of 62 percent. Moreover, women age 15-19 have the highest unmet need at 17 percent compared with overall 12 percent unmet need for family planning.

c) **Low participation of male in contraception:**
Male participation in contraception is significantly low compared to female participation in contraception. According to BDHS 2017 report, male share in total method use is only eight percent, which is contributed by male sterilization and condom with 1.1 percent and 7.2 percent respectively.

d) **High unmet need :** Unmet need for family planning in Bangladesh is 12 percent, which has remained at the samelevel in the last couple of years. .

e) **High discontinuation of contraceptives:**
About one-third users of contraceptive methods stop using the method within 12 months of starting. Discontinuation rates are much higher for temporary methods like condoms (40%), pills (34%), and injectables (25%) than for long-term methods like the implants (7%).

f) **Early marriage and early child bearing:**
Bangladesh still has some of the highest rates of child marriage and teenage pregnancy. Twenty eight percent of married girls age 15-19 have begun childbearing. Twenty-two

percent of the teenagers had given birth and another 6 percent are pregnant with their first child.

g) High maternal mortality:

By 2030, Bangladesh is committed to bring down the maternal mortality ratio to 70 per 100,000 live births from the current level of 170 per 100,000 live births. The country needs to increase the rate of skilled delivery to 100 percent by 2030. According to BDHS 2017, medically trained personnel attended 53 percent of deliveries. By 2022, the 4th sector plan objective is for 65 percent of deliveries to be attended by medically trained personnel.

h) High child mortality:

Bangladesh is committed to reduce under-five deaths to 25 per 1,000 child births by 2030. Despite great strides in achieving the target of Millennium Development Goal in reducing under-five mortality, the reduction in neonatal mortality remains a challenge. Currently, the neonatal mortality rate is 30 deaths per 1,000 live births, accounting for 67 percent of all under-five deaths.

i) Regional variations in TFR and CPR:

In Bangladesh, regional variation in fertility is marked by an east-west divide. TFR is highest in the eastern region of the country. Sylhet division has the highest TFR (2.6 births per woman) followed by Chattogram (2.5 births per woman)while Khulna has the lowest TFR(1.9 births per woman) closely followed by Rajshahi and Rangpur divisions. Use of contraception is lowest in the eastern region of the country. Sylhet and Chattogram division were found to be the lowest performer in terms of CPR. Such regional variations continue to dampen the overall program effectiveness. Moreover, Dhaka is by far the largest division, comprising one-third of country's population, and the fertility rate of this division has large impact on the national fertility rate.

j) Asymmetric fieldworker and couple ratio:

In the early 1980s, the DGFP assigned each FWA to visit a family planning unit of approximately 600 households every two months. With the increase in women of reproductive age in the last four decades, the number of households requiring support from each FWA more than doubled. Currently, FWA and couple ratio stands to 1: 1200-1500 which poses serious challenge to cover all the eligible couples under family planning service. Moreover, accuracy and validity in couple registration are seriously compromised due to the shortage of FWAs.

k) **Data driven challenges:** The validity and reliability of field data remain a critical challenge for MIS unit. A routine data quality auditing system to detect reporting errors and to instantly identifyweaknesses in the data management system is found useful for estimating CAR more accurately. In addition, sample survey can be adopted to compare the validity of CAR and other relevant data. Besides, the projection setting procedure should consider demographic facts and trends.

l) **Emerging challenges during COVID 19:**

The disruption of family planning services is the major issue, during lockdown, in proper implementation of FP program. The policy of lock-down indirectly affects women's accessibility to reproductive health services and they could face unwanted pregnancies and its related complications. Moreover, safeties of field level workers (mainly FWAs & FWVs) as a front level worker poses them much more vulnerable to be get infected by COVID. Currently, eMIS program is operational in 36 out of 64 districts in Bangladesh. However, thanks to Covid and its subsequent national shut down slows down e-MIS expansion for the time being. Needless to say, hands on practice is more effective and sustainable for field staffs instead of virtual training.

ANNEXURE

Table 1 (a) : District wise Population and other related information in Dec. 2019

(Collected by FWAs)

Name of District	Number of Unit	Number of Village	Eligible Couple	Population		
				Male	Female	Total
Barguna	218	600	196770	497759	485207	982966
Barishal	521	1155	420215	1294920	1223067	2517987
Bhola	318	371	364898	969894	923434	1893328
Jhalakati	172	439	114930	334080	323862	657942
Patuakhali	343	1028	336441	914479	880349	1794828
Pirojpur	272	631	202000	623368	599236	1222604
Barishal Division	1844	4224	1635254	4634500	4435155	9069655
Bandarban	103	1605	72434	211647	204672	416319
Brahmanbaria	500	1428	538809	1685566	1614688	3300254
Chandpur	513	1329	468854	1386859	1298453	2685312
Chattogram	1042	2060	1038992	3159688	3036876	6196564
Cox's Bazar	342	2051	416519	1321277	1277592	2598869
Cumilla	1046	3571	1115359	3236978	3054440	6291418
Feni	248	583	276335	839496	812623	1652119
Khagrachhari	121	1590	112767	313795	304954	618749
Lakshmipur	290	592	332086	996822	946068	1942890
Noakhali	519	1082	581206	1828105	1739076	3567181
Rangamati	153	1530	100744	277729	267264	544993
Chattogram Division	4877	17421	5054105	15257962	14556706	29814668
Dhaka	570	2055	723962	1963083	1870497	3833580
Faridpur	451	1884	392575	1076515	1029557	2106072
Gazipur	338	1158	417606	1128086	1099030	2227116
Gopalganj	299	922	218363	652615	617903	1270518
Kishoreganj	581	1904	556852	1652673	1616266	3268939
Madaripur	295	982	232683	681637	643848	1325485

Continued.

Name of District	Number of Unit	Number of Village	Eligible Couple	Population		
				Male	Female	Total
Manikganj	330	1563	302539	794451	763587	1558038
Munshiganj	327	1009	299097	825714	787847	1613561
Narayanganj	347	1510	529216	1398508	1347246	2745754
Narshingdi	383	1131	416183	1204225	1167053	2371278
Rajbari	215	971	231046	619148	588538	1207686
Shariatpur	261	1081	213225	629618	605380	1234998
Tangail	631	2457	844375	2056119	1970730	4026849
Dhaka Division Total	5028	18627	5377722	14682392	14107482	28789874
Bagerhat	395	1146	305593	791255	759201	1550456
Chuadanga	212	633	254830	610410	588239	1198649
Jashore	496	1433	609340	1517424	1458295	2975719
Jhenaidaha	341	1279	389247	950099	919555	1869654
Khulna	413	1366	494841	1295392	1255560	2550952
Kustia	352	965	454741	1078276	1044091	2122367
Magura	181	709	191837	526287	505916	1032203
Meherpur	116	250	161342	372692	358551	731243
Narail	192	688	152393	402328	388400	790728
Satkhira	414	1433	433593	1138050	1095239	2233289
Khulna Division Total	3112	9902	3447757	8682213	8373047	17055260
Jamalpur	467	1534	483445	1253869	1229469	2483338
Mymensingh	881	2781	1041188	2824407	2745291	5569698
Netrokona	453	2362	415293	1215411	1173320	2388731
Sherpur	281	937	317494	836937	808431	1645368
Mymensing Division Total	2082	7614	2257420	6130624	5956511	12087135
Bogura	614	2575	765748	1888959	1826496	3715455
Joipurhat	186	879	210100	498647	483264	981911
Naogaon	503	2545	583564	1432699	1392090	2824789
Natore	332	1433	408232	959570	937468	1897038

Continued.

Name of District	Number of Unit	Number of Village	Eligible Couple	Population		
				Male	Female	Total
Nawabganj	268	1341	372251	905389	873100	1778489
Pabna	438	1693	583307	1428977	1362255	2791232
Rajshahi	453	2029	608228	1446116	1407145	2853261
Serajganj	506	1894	645250	1681373	1602697	3284070
Rajshahi Division Total	3300	14389	4176680	10241730	9884515	20126245
Dinajpur	531	2473	656750	1638625	1570217	3208842
Gaibandha	538	1277	544917	1320628	1290691	2611319
Kurigram	428	1634	534203	1323376	1272537	2595913
Lalmonirhat	228	516	277996	758013	728029	1486042
Nilphamari	323	535	409892	1068947	1034995	2103942
Panchgarh	199	1518	231304	565907	550334	1116241
Rangpur	492	1509	639674	1566033	1515863	3081896
Thakurgaon	278	736	300514	761713	716218	1477931
Rangpur Division Total	3017	10198	3595250	9003242	8678884	17682126
Habiganj	399	2255	393111	1177858	1160797	2338655
Moulavi Bazar	343	2144	334146	1081039	1039082	2120121
Sunamganj	420	2782	399475	1304551	1275590	2580141
Sylhet	498	3783	597100	1887534	1886417	3773951
Sylhet Division Total	1660	10964	1723832	5450982	5361886	10812868
National Total	24920	93339	27268020	74083645	71354186	145437831

(Excluding City Corporation & Major Urban Areas)

Table 1(b) : District wise Population and other related information in 2018 (Collected by FWAs)

Name of District	Number of Union	Number of Unit	Number of Village	Number of House Hold	Eligible Couple	Population		
						Male	Female	Total
Barguna	38	218	603	197727	196337	496666	485349	982015
Barishal	85	521	1153	446192	419741	1275648	1213070	2488718
Bhola	62	318	371	355144	362500	964767	918652	1883419
Jhalakati	34	174	437	131013	113964	333734	321319	655053
Patuakhali	75	343	1024	339039	339499	903685	873746	1777431
Pirojpur	52	272	625	251750	199761	616405	593113	1209518
Barishal Division	**346**	**1846**	**4213**	**1720865**	**1631802**	**4590905**	**4405249**	**8996154**
Bandarban	30	103	1537	77873	69610	210559	202846	413405
Brahmanbaria	101	500	1428	483321	526258	1682321	1584889	3267210
Chandpur	91	511	1331	481230	468908	1378601	1292069	2670670
Chattogram	213	1037	1908	971659	1042234	3127252	3012654	6139906
Cox's Bazar	74	333	2061	412637	406730	1285881	1251416	2537297
Cumilla	186	1034	3602	1025529	1110464	3233578	3053106	6286684
Feni	46	248	577	255543	273616	833850	802208	1636058
Khagrachhari	35	121	1550	119349	110818	312894	303328	616222
Lakshmipur	56	292	598	325386	333597	995385	947823	1943208
Noakhali	92	519	1080	539955	576557	1789614	1718166	3507780
Rangamati	49	153	1530	105095	100015	277901	266210	544111
Chattogram Division Total	**973**	**4851**	**17202**	**4797577**	**5018807**	**15127836**	**14434715**	**29562551**
Dhaka	87	570	1995	718751	775153	2081585	1994289	4075874
Faridpur	81	437	1842	379712	391684	1062204	1020821	2083025
Gazipur	46	322	1163	422236	437770	1162117	1122732	2284849
Gopalganj	70	298	940	239127	229575	652968	620579	1273547
Kishoreganj	113	585	1904	615015	542986	1636381	1583183	3219564
Madaripur	60	295	982	234111	230982	674799	635383	1310182
Manikganj	66	330	1569	302487	307971	784370	755181	1539551
Munshiganj	67	327	1008	299177	296051	830183	788504	1618687

Continued.

Name of District	Number of Union	Number of Unit	Number of Village	Number of House Hold	Eligible Couple	Population		
						Male	Female	Total
Narayanganj	59	347	1490	504413	522576	1384306	1329807	2714113
Narshingdi	71	381	1139	408838	424668	1185688	1144587	2330275
Rajbari	44	222	964	204799	231055	593641	562790	1156431
Shariatpur	68	262	1128	222681	217315	637734	612214	1249948
Tangail	105	630	2452	816879	838569	2040023	1950605	3990628
Dhaka Division Total	**937**	**5006**	**18576**	**5368226**	**5446355**	**14725999**	**14120675**	**28846674**
Bagerhat	78	395	1145	353813	306053	788491	760946	1549437
Chuadanga	35	211	640	275524	256967	608623	584555	1193178
Jashore	91	496	1415	585237	610424	1509687	1452842	2962529
Jhenaidaha	73	341	1282	379109	387912	949807	920153	1869960
Khulna	82	413	1366	529348	494078	1290295	1247103	2537398
Kustia	65	359	1025	442897	461001	1079119	1046640	2125759
Magura	37	181	735	198872	190945	519978	499827	1019805
Meherpur	19	116	281	154231	161631	368657	357090	725747
Narail	40	189	674	157946	154492	396238	383225	779463
Satkhira	79	393	1429	432281	433724	1126767	1088383	2215150
Khulna Division Total	**599**	**3094**	**9992**	**3509258**	**3457227**	**8637662**	**8340764**	**16978426**
Jamalpur	65	424	1504	523346	480681	1223195	1229275	2452470
Mymensingh	148	882	2770	1077418	1035163	2813018	2720155	5533173
Netrokona	88	450	2341	462796	417889	1224094	1179970	2404064
Sherpur	52	266	928	349674	313535	825582	801259	1626841
Mymensing Division Total	**353**	**2022**	**7543**	**2413234**	**2247268**	**6085889**	**5930659**	**12016548**
Bogura	111	602	2558	805631	766677	1874714	1812148	3686862
Joipurhat	32	186	877	220834	209902	495913	481204	977117
Naogaon	100	503	2541	594666	588480	1429428	1388391	2817819
Natore	54	332	1433	426135	408177	961327	934798	1896125
Nawabganj	51	268	1339	305963	368747	898584	871711	1770295
Pabna	76	402	1655	541736	583340	1475042	1422749	2897791

Continued.

Name of District	Number of Union	Number of Unit	Number of Village	Number of House Hold	Eligible Couple	Population		
						Male	Female	Total
Rajshahi	72	438	2023	609449	609076	1437845	1398768	2836613
Serajganj	84	487	1906	624616	636650	1667578	1574520	3242098
Rajshahi Division Total	**580**	**3218**	**14332**	**4129030**	**4171049**	**10240431**	**9884289**	**20124720**
Dinajpur	106	529	2453	665991	656348	1627762	1555784	3183546
Gaibandha	83	490	1276	553637	545039	1301780	1269718	2571498
Kurigram	76	387	1598	499989	527172	1286732	1238836	2525568
Lalmonirhat	45	228	463	273835	279155	734841	706773	1441614
Nilphamari	63	323	532	386693	412172	1057101	1030116	2087217
Panchgarh	45	199	1482	235029	228948	560754	543098	1103852
Rangpur	84	541	1510	655062	640639	1556194	1506711	3062905
Thakurgaon	53	278	736	304621	303653	757849	711940	1469789
Rangpur Division Total	**555**	**2975**	**10050**	**3574857**	**3593126**	**8883013**	**8562976**	**17445989**
Habiganj	78	399	2572	385929	390934	1181808	1161191	2342999
Moulavi Bazar	69	343	2123	342723	333590	1070132	1028496	2098628
Sunamganj	88	417	2812	394397	396116	1305299	1275560	2580859
Sylhet	99	502	3541	512312	522834	1707536	1693892	3401428
Sylhet Division Total	**334**	**1661**	**11048**	**1635361**	**1643474**	**5264775**	**5159139**	**10423914**
National Total	**4343**	**23012**	**81908**	**25513047**	**25565634**	**68291735**	**65679327**	**133971062**

Table 1(c): District wise Population and other related information in 2017

(Collected by FWAs)

Name of District	Number of Union	Number of Unit	Number of Village	Number of House Hold	Eligible Couple	Population		
						Male	Female	Total
Dinajpur	106	529	2453	659163	649675	1609745	1538438	3148183
Thakurgaon	52	278	736	281846	291615	749652	706271	1455923
Panchgarh	45	199	1421	227163	222270	546342	528263	1074605
Nilphamari	63	323	543	388256	407302	1045796	1022125	2067921
Rangpur	84	542	1521	646562	634146	1531706	1477987	3009693
Kurigram	76	386	1612	486621	521564	1269161	1224489	2493650
Gaibandha	83	490	1236	542158	538996	1320523	1272039	2592562
Lalmonirhat	45	228	515	268075	275735	722581	694702	1417283
Rangpur Division	554	2975	10037	3499844	3541303	8795506	8464314	17259820
Bogra	111	605	2558	795177	761483	1854406	1797110	3651516
Joipurhat	32	186	877	220236	207922	491729	476545	968274
Naogaon	100	503	2544	591564	582062	1417893	1375337	2793230
Nawabganj	50	268	1292	304225	364860	886917	859553	1746470
Rajshahi	72	438	2013	600464	602130	1416188	1377436	2793624
Natore	54	332	1433	420419	404242	938618	910706	1849324
Pabna	76	402	1667	532368	578138	1462674	1395412	2858086
Serajganj	84	489	1950	613761	629834	1628242	1553879	3182121
Rajshahi Division	579	3223	14334	4078214	4130671	10096667	9745978	19842645
Kustia	65	361	1025	443173	459120	1068722	1035268	2103990
Meherpur	19	116	281	153293	160703	363660	354554	718214
Chuadanga	35	211	640	273525	255049	601987	578191	1180178
Jhenaidaha	73	341	1282	374696	384466	939712	909609	1849321
Magura	37	181	733	197609	188679	516828	493875	1010703
Narail	40	189	682	150424	151369	392859	378236	771095
Jessore	91	496	1415	579897	605525	1491098	1439221	2930319
Khulna	82	413	1366	520791	490515	1272691	1234585	2507276
Bagerhat	78	395	1150	350132	303379	777887	751365	1529252
Satkhira	79	393	1429	426419	429924	1112182	1072916	2185098
Khulna Division	599	3096	10003	3469959	3428729	8537626	8247820	16785446
Barguna	39	218	603	195121	195328	494215	483284	977499
Patuakhali	75	342	1024	334624	336043	892990	862066	1755056
Barisal	85	520	1153	442875	416267	1260098	1191071	2451169
Jhalakati	33	176	437	133600	113337	337646	324622	662268
Bhola	61	318	371	351886	359646	950292	903827	1854119
Pirojpur	52	272	625	249643	197430	606809	583742	1190551
Barisal Division	345	1846	4213	1707749	1618051	4542050	4348612	8890662

Continued.

Name of District	Number of Union	Number of Unit	Number of Village	Number of House Hold	Eligible Couple	Population		
						Male	Female	Total
Gopalganj	70	298	940	243695	227287	650912	612678	1263590
Madaripur	60	295	982	232569	229228	666898	625797	1292695
Shariatpur	68	262	1128	220140	214940	629167	600716	1229883
Faridpur	81	435	1834	374672	386869	1047594	1001984	2049578
Rajbari	44	222	950	200018	228438	582750	553568	1136318
Dhaka	87	570	1995	706675	761210	2050839	1964817	4015656
Gazipur	46	322	1160	426603	432531	1138663	1101757	2240420
Munshiganj	67	327	1008	286659	292510	817029	773135	1590164
Narayanganj	59	347	1489	500027	515405	1360649	1306698	2667347
Narshingdi	71	417	1197	405765	419371	1170137	1125370	2295507
Manikganj	66	330	1524	300470	305442	775340	748517	1523857
Tangail	105	630	2452	803799	832469	2016581	1930057	3946638
Jamalpur	67	420	1529	517972	476728	1229530	1197935	2427465
Sherpur	52	266	927	345460	311188	813591	791043	1604634
Mymensingh	148	882	2770	1056202	1023897	2771747	2681820	5453567
Kishoreganj	113	585	1911	606015	537805	1615896	1558472	3174368
Netrokona	88	452	2340	457344	413809	1211964	1167068	2379032
Dhaka Division	1292	7060	26136	7684085	7609127	20549287	19741432	40290719
Brahmanbaria	101	500	1430	476227	519406	1653726	1546145	3199871
Comilla	185	1024	3591	992076	1073719	3122229	2956894	6079123
Chandpur	91	511	1331	478341	464709	1361590	1277722	2639312
Feni	46	248	577	257274	270145	826366	788592	1614958
Noakhali	93	519	1080	532235	566467	1763738	1680522	3444260
Lakshmipur	56	292	598	320801	329275	977478	935737	1913215
Chittagong	213	1037	1899	946192	1030885	3076707	2966403	6043110
Cox's Bazar	74	323	2044	401572	398979	1255587	1218965	2474552
Rangamati	49	156	1527	104002	99028	274503	264170	538673
Khagrachhari	35	104	1549	116517	109108	304421	297335	601756
Bandarban	30	103	1521	77346	68511	207143	198052	405195
Chittagong Division	973	4817	17147	4702583	4930232	14823488	14130537	28954025
Sylhet	99	502	3538	507984	515229	1691084	1669246	3360330
Habiganj	78	399	2270	379770	385390	1173782	1139517	2313299
Moulavi Bazar	69	343	2121	338708	330112	1053252	1013444	2066696
Sunamganj	88	419	2876	387902	390638	1276082	1251132	2527214
Sylhet Division	334	1663	10805	1614364	1621369	5194200	5073339	10267539
National Total	4676	24680	92675	26756798	26879482	72538824	69752032	142290856

Table2 (a) : Division wise Projection, Performance and Achievement Rate of Short Acting Methods for the year 2019-2020 (Descending order)

Sl No.	Division	Injectable (in CYP)			Division	Oral Pill (in CYP)			Division	Condom (in CYP)		
		Projec.	Perform.	Achi Rate (%)		Projec.	Perform	Achi. Rate (%)		Projec.	Perform	Achi Rate (%)
1	Barishal	311535	233217	74.9	Mymensingh	881217	644830	73.2	Dhaka	378922	175240	46.2
2	Rangpur	683296	394654	57.8	Rangpur	1402554	748370	53.4	Rajshahi	293103	129848	44.3
3	Chattogram	966073	462624	47.9	Dhaka	2111135	1102169	52.2	Khulna	241746	100953	41.8
4	Khulna	656168	309461	47.2	Rajshahi	1633004	785519	48.1	Sylhet	120616	44660	37.0
5	Dhaka	1028502	462336	45.0	Barishal	639467	298892	46.7	Mymensingh	158167	58362	36.9
6	Sylhet	327386	142836	43.6	Khulna	1346871	607667	45.1	Chattogram	355922	100631	28.3
7	Mymensingh	429311	182787	42.6	Sylhet	672002	296583	44.1	Barishal	114776	29470	25.7
8	Rajshahi	795566	315369	39.6	Chattogram	1982991	707302	35.7	Rangpur	251741	59928	23.8
National		5197837	2503284	49.8	National	10669241	5191332	49.8	National	1914993	699092	35.5

Table 2 (b): District wise Projection, Performance and Achievement Rate of Short Acting Methods for the year 2019-2020

District	Injectable (in CYP)			District	Oral Pill (in CYP)			District	Condom (in CYP)		
	Projec.	Perform.	Achi. Rate (%)		Projec.	Perform.	Achi. Rate (%)		Projec.	Perform.	Achi. Rate (%)
Bhola	69787	88805	127.3	Pirojpur	78967	52976	67.1	Pirojpur	14174	6130	43.2
Patuakhali	63946	42299	66.1	Barguna	76770	38972	50.8	Barishal	29515	8485	28.7
Barishal	80113	48873	61.0	Patuakhali	131258	64035	48.8	Jhalakati	8038	1972	24.5
Barguna	37401	22662	60.6	Barishal	164442	75005	45.6	Bhola	25711	5331	20.7
Pirojpur	38471	20412	53.1	Jhalakati	44783	18984	42.4	Barguna	13779	2789	20.2
Jhalakati	21818	10166	46.6	Bhola	143247	48920	34.2	Patuakhali	23559	4763	20.2
Barishal Div.	311535	233217	74.9	Barishal Div.	639467	298892	46.7	Barishal Div.	114776	29470	25.7
B. Baria	102750	38178	37.2	B. Baria	210908	71214	33.8	Bandarban	5097	2839	55.7
Cumilla	212139	97452	45.9	Cumilla	435444	147278	33.8	Rangamati	7149	3476	48.6
Chandpur	89117	47190	53.0	Chandpur	182925	59808	32.7	Feni	19457	7693	39.5
Feni	52811	26773	50.7	Feni	108402	36907	34.0	Khagrachhari	7937	2768	34.9
Noakhali	110735	44782	40.4	Noakhali	227298	64004	28.2	Chattogram	73944	23344	31.6
Laxmipur	63330	43012	67.9	Laxmipur	129993	29171	22.4	B. Baria	37855	11929	31.5
Chattogram	200705	75826	37.8	Chattogram	411974	152387	37.0	Cox's Bazar	29364	9032	30.8
Cox's Bazar	79703	61489	77.1	Cox's Bazar	163600	69985	42.8	Cumilla	78157	21089	27.0
Rangamati	19405	9166	47.2	Rangamati	39831	28355	71.2	Noakhali	40797	9242	22.7
Khagrachhari	21543	11109	51.6	Khagrachhari	44219	31395	71.0	Chandpur	32833	6538	19.9

Continued.

District	Injectable (in CYP)			District	Oral Pill (in CYP)			District	Condom (in CYP)		
	Projec.	Perform.	Achi. Rate (%)		Projec.	Perform.	Achi. Rate (%)		Projec.	Perform.	Achi. Rate (%)
Bandarban	13835	7647	55.3	Bandarban	28397	16798	59.2	Laxmipur	23332	2681	11.5
Chattogram Div.	966073	462624	47.9	Chattogram Div.	1982991	707302	35.7	Chattogram Div.	355922	100631	28.3
Narshingdi	82875	55723	67.2	Gopalganj	85242	54362	63.8	Dhaka	50951	38657	75.9
Dhaka	138295	88373	63.9	Tangail	329523	199022	60.4	Rajbari	16181	10141	62.7
Madaripur	44255	25451	57.5	Dhaka	283869	168585	59.4	Manikganj	21250	10209	48.0
Narayanganj	100973	53200	52.7	Narayanganj	207260	110001	53.1	Gopalganj	15300	7277	47.6
Rajbari	43921	20138	45.9	Madaripur	90840	47548	52.3	Faridpur	27483	12790	46.5
Tangail	160537	65801	41.0	Narshingdi	170113	86510	50.9	Gazipur	29424	12828	43.6
Kishoreganj	106430	42692	40.1	Gazipur	163932	80253	49.0	Narshingdi	30533	12628	41.4
Shariatpur	40587	14895	36.7	Munshiganj	116917	57033	48.8	Narayanganj	37201	15252	41.0
Gopalganj	41528	14417	34.7	Kishoreganj	218462	103893	47.6	Tangail	59145	23112	39.1
Faridpur	74597	24826	33.3	Rajbari	90154	40301	44.7	Munshiganj	20985	7929	37.8
Manikganj	57679	18961	32.9	Manikganj	118393	52716	44.5	Kishoreganj	39211	14267	36.4
Munshiganj	56960	16575	29.1	Faridpur	153121	68092	44.5	Madaripur	16305	5367	32.9
Gazipur	79864	21284	26.7	Shariatpur	83311	33853	40.6	Shariatpur	14953	4783	32.0
Dhaka Div.	1028502	462336	45.0	Dhaka Div.	2111135	1102169	52.2	Dhaka Div.	378922	175240	46.2
Meherpur	30652	22477	73.3	Kushtia	177697	71744	40.4	Khulna	34637	20209	58.3
Chuadanga	48462	30581	63.1	Meherpur	62917	16401	26.1	Narail	10871	4963	45.7
Jashore	115970	65477	56.5	Chuadanga	99475	35346	35.5	Bagerhat	21457	9401	43.8
Khulna	94014	45111	48.0	Jhenaidaha	151224	55789	36.9	Jashore	42726	18499	43.3
Kushtia	86570	39438	45.6	Magura	75203	36260	48.2	Satkhira	30372	12623	41.6
Magura	36637	14971	40.9	Narail	60569	28193	46.5	Kushtia	31894	13094	41.1
Bagerhat	58241	22818	39.2	Jashore	238045	98107	41.2	Meherpur	11293	4200	37.2
Satkhira	82439	31734	38.5	Khulna	192977	107527	55.7	Magura	13498	4302	31.9
Narail	29508	11268	38.2	Bagerhat	119547	70369	58.9	Chuadanga	17855	5647	31.6
Jhenaidaha	73673	25586	34.7	Satkhira	169217	87931	52.0	Jhenaidaha	27143	8015	29.5
Khulna Div.	656168	309461	47.2	Khulna Div.	1346871	607667	45.1	Khulna Div.	241746	100953	41.8
Serajganj	123356	72468	58.7	Serajganj	253204.4	149107	58.9	Rajshahi	42701	23822	55.8
Pabna	110935	58852	53.1	Noagaon	227828.6	122967	54.0	Serajganj	45447	23514	51.7
Rajshahi	115903	46989	40.5	Pabna	227708.9	118708	52.1	Bogura	53679	24923	46.4
Bogura	145699	50261	34.5	Natore	159480.8	75801	47.5	Natore	28625	13252	46.3
Natore	77696	24913	32.1	Bogura	299066	134610	45.0	Nawabganj	26138	11458	43.8
Nawabganj	70947	22573	31.8	Rajshahi	237906.6	101875	42.8	Pabna	40871	15960	39.0
Noagaon	110993	31430	28.3	Joipurhat	82180.8	30682	37.3	Noagaon	40892	12704	31.1
Joipurhat	40037	7883	19.7	Nawabganj	145628.3	51769	35.5	Joipurhat	14750	4215	28.6
Rajshahi Div.	795566	315369	39.6	Rajshahi Div.	1633004	785519	48.1	Rajshahi Div.	293103	129848	44.3
Gaibandha	104086.6	76831	73.8	Panchgarh	90508	58708	64.9	Gaibandha	38348	13133	34.2
Kurigram	101175	68459	67.7	Gaibandha	213651	133909	62.7	Kurigram	37275	11298	30.3

Continued.

District	Injectable (in CYP)			District	Oral Pill (in CYP)			District	Condom (in CYP)		
	Projec.	Perform.	Achi. Rate (%)		Projec.	Perform.	Achi. Rate (%)		Projec.	Perform.	Achi. Rate (%)
Panchgarh	44093.68	28888	65.5	Nilphamari	159943	92387	57.8	Rangpur	44682	11017	24.7
Lalmonirhat	52773.64	34167	64.7	Kurigram	207675	108631	52.3	Panchgarh	16245	3286	20.2
Rangpur	121278.9	72732	60.0	Rangpur	248941	126910	51.0	Dinajpur	46002	9222	20.0
Thakurgaon	57105.07	32219	56.4	Lalmonirhat	108325	55020	50.8	Lalmonirhat	19443	3892	20.0
Nilphamari	77921.09	43013	55.2	Dinajpur	256295	119352	46.6	Nilphamari	28708	4904	17.1
Dinajpur	124861.7	38345	30.7	Thakurgaon	117216	53453	45.6	Thakurgaon	21039	3176	15.1
Rangpur Div.	683295.7	394654	57.8	Rangpur Div.	1402554	748370	53.4	Rangpur Div.	251741	59928	23.8
Sherpur	60391	68915	114.1	Sherpur	123961	300224	242.2	Sherpur	22249	22823	102.6
Netrokona	79013	39522	50.0	Netrokona	162184	125112	77.1	Netrokona	29110	10793	37.1
Jamalpur	92055	32812	35.6	Jamalpur	188955	74278	39.3	Mymensingh	72893	17168	23.6
Mymensingh	197852	41538	21.0	Mymensingh	406117	145216	35.8	Jamalpur	33915	7578	22.3
Mymensingh Div.	429311	182787	42.6	Mymensingh Div.	881217	644830	73.2	Mymensingh Div.	158167	58362	36.9
Sylhet	113519	76307	67.2	Sunamganj	155470	84820	54.6	Sylhet	41823	22249	53.2
Sunamganj	75742	28310	37.4	Habiganj	152554	70393	46.1	Sunamganj	27905	11520	41.3
Moulavibazar	63803	21349	33.5	Sylhet	233014	91423	39.2	Moulavibazar	23506	5559	23.6
Habiganj	74321	16870	22.7	Moulavibazar	130965	49947	38.1	Habiganj	27382	5332	19.5
Sylhet Div.	327386	142836	43.6	Sylhet Div.	672002	296583	44.1	Sylhet Div.	120616	44660	37.0
National	5197836	2503284	48.2	National	10669243	5191332	48.7	National	1914992	699092	36.5

Table 3(a) : District wise Projection, Performance and Achievement Rate of Long Acting Methods for the year 2019-2020

District	Permanent Method (Cases)			District	IUD (Cases)			District	Implant (Cases)		
	Projec.	Perform.	Achi. Rate(%)		Projec.	Perform.	Achi. Rate(%)		Projec.	Perform.	Achi. Rate(%)
Barguna	1672	1381	82.6	Barishal	3355	2316	69.0	Patuakhali	7056	7595	107.6
Barishal	2307	1621	70.3	Pirojpur	2939	1800	61.2	Pirojpur	3187	3365	105.6
Patuakhali	2441	1223	50.1	Patuakhali	4037	2448	60.6	Barishal	5968	5243	87.9
Bhola	2818	1071	38.0	Barguna	2340	1011	43.2	Barguna	5717	5022	87.8
Pirojpur	2172	630	29.0	Jhalakati	1175	477	40.6	Jhalakati	2329	1725	74.1
Jhalakati	2022	329	16.3	Bhola	5215	1719	33.0	Bhola	7518	4510	60.0
Barishal Div.	13432	6255	46.6	Barishal Div.	19061	9771	51.3	Barishal Div.	31775	27460	86.4
Noakhali	2568	3934	153.2	Khagrachhari	1140	1518	133.2	Chattogram	15487	14775	95.4
Khagrachhari	2396	3010	125.6	Chattogram	9482	10885	114.8	Chandpur	7374	6563	89.0

Continued.

District	Permanent Method (Cases)			District	IUD (Cases)			District	Implant (Cases)		
	Projec.	Perform.	Achi. Rate(%)		Projec.	Perform.	Achi. Rate(%)		Projec.	Perform.	Achi. Rate(%)
Bandarban	886	943	106.4	Noakhali	3260	3346	102.6	B. Baria	8529	6905	81.0
Chandpur	3228	1774	55.0	Cumilla	9394	8670	92.3	Cox's Bazar	10746	8643	80.4
B. Baria	3018	1637	54.2	Chandpur	4268	3873	90.7	Cumilla	11247	9001	80.0
Feni	2520	594	23.6	Feni	2987	2595	86.9	Noakhali	9864	7724	78.3
Laxmipur	4427	917	20.7	Cox's Bazar	4311	3333	77.3	Khagrachhari	3315	2534	76.4
Cumilla	5969	930	15.6	Rangamati	1114	831	74.6	Feni	4679	3329	71.1
Rangamati	1454	182	12.5	Bandarban	1818	1191	65.5	Rangamati	2989	2060	68.9
Cox's Bazar	4192	229	5.5	B. Baria	4889	2327	47.6	Bandarban	2581	1681	65.1
Chattogram	4983	101	2.0	Laxmipur	7039	1679	23.9	Laxmipur	8621	3830	44.4
Chattogram Div.	35641	14251	40.0	Chattogram Div.	49702	40248	81.0	Chattogram Div.	85432	67045	78.5
Narayanganj	3193	2617	82.0	Rajbari	1010	1977	195.7	Rajbari	3520	4755	135.1
Rajbari	1020	811	79.5	Faridpur	2212	3541	160.1	Faridpur	6103	7339	120.3
Dhaka	12800	10120	79.1	Madaripur	1618	1809	111.8	Tangail	10073	8752	86.9
Narshingdi	4516	3188	70.6	Dhaka	10729	11267	105.0	Dhaka	12795	10960	85.7
Manikganj	5162	3620	70.1	Gopalganj	1163	980	84.3	Manikganj	5027	4058	80.7
Gopalganj	2099	1343	64.0	Narshingdi	3681	2805	76.2	Gopalganj	4190	3163	75.5
Faridpur	3237	2061	63.7	Shariatpur	2660	1759	66.1	Shariatpur	3621	2708	74.8
Madaripur	1218	685	56.2	Tangail	6979	4266	61.1	Madaripur	5057	3535	69.9
Tangail	6903	2504	36.3	Kishoreganj	4815	2255	46.8	Kishoreganj	9456	6005	63.5
Munshiganj	3604	888	24.6	Munshiganj	3163	1224	38.7	Narshingdi	6081	3528	58.0
Gazipur	4980	1190	23.9	Manikganj	3373	981	29.1	Munshiganj	4829	2460	50.9
Kishoreganj	5326	1157	21.7	Gazipur	6135	1704	27.8	Gazipur	7522	3667	48.8
Shariatpur	2470	510	20.6	Narayanganj	10574	2497	23.6	Narayanganj	10243	4430	43.2
Dhaka Div.	56528	30694	54.3	Dhaka Div.	58112	37065	63.8	Dhaka Div.	88517	65360	73.8
Kushtia	1989	1622	81.5	Khulna	3097	4017	129.7	Jashore	3620	3360	92.8
Meherpur	907	700	77.2	Jhenaidaha	1701	1489	87.5	Khulna	8067	3863	47.9
Chuadanga	1657	1264	76.3	Chuadanga	1205	960	79.7	Jhenaidaha	4717	2146	45.5
Jhenaidaha	1977	1488	75.3	Magura	1461	1160	79.4	Chuadanga	3757	1700	45.2
Magura	1604	844	52.6	Bagerhat	2199	1386	63.0	Bagerhat	4399	1986	45.1
Narail	1000	443	44.3	Satkhira	1980	1242	62.7	Satkhira	4427	1810	40.9
Jashore	2496	1364	54.6	Jashore	3461	2117	61.2	Magura	3672	1303	35.5
Khulna	2704	1976	73.1	Meherpur	542	301	55.5	Narail	2700	751	27.8
Bagerhat	1859	570	30.7	Narail	1075	597	55.5	Meherpur	1706	355	20.8
Satkhira	2208	1089	49.3	Kushtia	2207	729	33.0	Kushtia	7075	1379	19.5
Khulna Div.	18401	11360	61.7	Khulna Div.	18928	13998	74.0	Khulna Div.	44140	18653	42.3

Continued.

District	Permanent Method (Cases)			District	IUD (Cases)			District	Implant (Cases)		
	Projec.	Perform.	Achi. Rate(%)		Projec.	Perform.	Achi. Rate(%)		Projec.	Perform.	Achi. Rate(%)
Joipurhat	1021	1541	150.9	Naogaon	2031	2010	99.0	Joipurhat	4803	5339	111.2
Naogaon	2078	1472	70.8	Pabna	4706	3263	69.3	Pabna	5618	5009	89.2
Natore	3137	2065	65.8	Joipurhat	1317	877	66.6	Bogura	15083	12445	82.5
Chapai Nawabganj	2856	1742	61.0	Bogura	5145	3393	65.9	Natore	7313	5812	79.5
Bogura	3973	2335	58.8	Serajganj	8071	5049	62.6	Rajshahi	9978	6851	68.7
Rajshahi	4543	2488	54.8	Natore	2856	1451	50.8	Serajganj	8940	5732	64.1
Serajganj	3100	1185	38.2	Chapai Nawabganj	2689	1282	47.7	Chapai Nawabganj	3520	2099	59.6
Pabna	1844	422	22.9	Rajshahi	6050	1938	32.0	Naogaon	9455	5281	55.9
Rajshahi Div.	22552	13250	58.8	Rajshahi Div.	32865	19263	58.6	Rajshahi Div.	8940	48568	543.3
Gaibandha	3600	3604	100.1	Nilphamari	2813	2818	100.2	Dinajpur	15257	15252	100.0
Dinajpur	3851	3555	92.3	Dinajpur	3257	2957	90.8	Nilphamari	5950	5336	89.7
Rangpur	3621	3201	88.4	Rangpur	5609	3394	60.5	Panchgarh	4361	3778	86.6
Nilphamari	2197	1372	62.4	Thakurgaon	1843	957	51.9	Rangpur	10276	8799	85.6
Thakurgaon	1910	1187	62.1	Gaibandha	6040	3132	51.9	Gaibandha	10230	7817	76.4
Panchgarh	1127	665	59.0	Panchgarh	1593	764	48.0	Thakurgaon	5612	2852	50.8
Lalmonirhat	3208	1154	36.0	Kurigram	7436	3316	44.6	Lalmonirhat	8512	4250	49.9
Kurigram	2322	680	29.3	Lalmonirhat	5890	2412	41.0	Kurigram	10058	4886	48.6
Rangpur Div.	21836	15418	70.6	Rangpur Div.	34481	19750	57.3	Rangpur Div.	70256	52970	75.4
Sherpur	2058	3067	149.0	Sherpur	1957	4506	230.3	Sherpur	5832	10542	180.8
Jamalpur	2402	2303	95.9	Netrokona	2481	905	36.5	Netrokona	9006	6766	75.1
Netrokona	1855	899	48.5	Mymensingh	15271	4172	27.3	Mymensingh	15025	9561	63.6
Mymensingh	7475	1116	14.9	Jamalpur	4438	712	16.0	Jamalpur	8259	4121	49.9
Mymensingh Div.	13790	3738	27.1	Mymensingh Div.	24147	10295	42.6	Mymensingh Div.	38122	30990	81.3
Sylhet	3750	3010	80.3		2200	2316	105.3	Sunamganj	8453	8255	97.7
Sunamganj	5182	1351	26.1	Moulavibazar	3326	1975	59.4	Sylhet	9000	6830	75.9
Moulavibazar	3099	637	20.6	Habiganj	3811	1454	38.2	Habiganj	6977	4168	59.7
Habiganj	6384	943	14.8	Sunamganj	6781	1763	26.0	Moulavibazar	6066	3281	54.1
Sylhet Div.	18415	5941	32.3	Sylhet Div.	16118	7508	46.6	Sylhet Div.	30496	22534	73.9
National	200595	100907	50.3	National	253414	157898	62.3	National	397678	333580	83.9

Table 4 (a): CAR as on June 2020

Name of District	Total E. Couple	Total Acceptors	CAR (%)
Dinajpur	661911	542020	81.8
Gaibandha	551927	447428	81.0
Kurigram	536981	413277	76.9
Lalmonirhat	280534	225577	80.4
Nilphamari	412784	336179	81.4
Panchgarh	234949	190464	81.0
Rangpur	642813	502157	78.1
Thakurgaon	303525	239849	79.0
Rangpur Division	3625424	**2853225**	**79.9**
Bogra	771665	635013	82.2
Joipurhat	212653	178122	83.7
Naogaon	589453	470465	79.8
ChapaiNawabganj	376931	301325	79.9
Rajshahi	616065	501332	81.3
Natore	412314	339106	82.2
Pabna	588341	464830	79.1
Serajganj	656558	535111	81.5
Rajshahi Division	4223980	**3389976**	**81.0**
Kustia	458609	360115	78.5
Meherpur	162068	127595	78.7
Chuadanga	257448	211374	82.1
Jhenaidaha	393917	308017	78.1
Magura	184049	144464	78.4
Narail	154300	121681	78.8
Jessore	614423	493603	80.3
Khulna Division	497694	401296	80.6
Bagerhat	303133	245068	80.8
Satkhira	436801	349818	80.0
Khulna Division	**3462442**	**2763031**	**79.8**
Barguna	197859	155997	78.2
Patuakhali	339551	270232	79.0
Barisal	424429	326262	76.5
Jhalakati	114644	89860	79.3
Bhola	370653	299099	80.0
Pirojpur	204524	162349	78.6

Continued.

Barisal Division	1651660	**1303799**	**78.9**
Gopalganj	220831	175968	79.6
Madaripur	233524	182436	78.1
Shariatpur	215242	163973	76.1
Faridpur	394257	314370	79.7
Rajbari	233365	183439	78.6
Dhaka	734578	552173	75.1
Gazipur	424580	322071	75.8
Munshiganj	301135	223708	74.2
Narayanganj	535278	402147	75.1
Narshingdi	439143	332798	75.7
Manikganj	306899	234841	76.5
Tangail	849186	658673	77.5
Kishoreganj	565734	450648	79.6
Dhaka Division	5453752	**4197245**	**76.9**
Jamalpur	487702	390162	80.0
Sherpur	320811	253122	78.9
Mymensingh	1052337	834127	79.2
Netrokona	418943	329579	78.6
Mymensingh Division	2279793	**1806990**	**79.2**
Brahmanbaria	530970	371653	70.0
Comilla	1122977	857208	76.3
Chandpur	473269	362755	76.6
Feni	281173	204050	72.5
Noakhali	587762	444956	75.7
Lakshmipur	335925	243267	72.4
Chattogram	1064435	791638	74.3
Cox's Bazar	425935	342513	80.4
Rangamati	101232	82878	81.8
Khagrachhari	114361	89233	78.0
Bandarban	73449	59256	80.6
Chattogram Division	5111488	**3849407**	**75.3**
Sylhet	600692	466965	77.7
Habiganj	394264	303468	76.9
Moulavi Bazar	338425	261322	77.2
Sunamganj	402380	314319	78.1
Sylhet Division	1735761	**1346074**	**77.5**
National	**27544300**	**21588801**	**78.3**

Table- 4 (b) : National Contraceptive Acceptors and Acceptance Rate (CAR) from June 2004 to June 2019.

Month / Year	Total Eligible Couple	Oral Pill	Condom	Injectable	IUD	Implant	Permanent Method			Total Acceptors	CAR (%)
							Male	Female	Total		
Jun'04	22210254	7967427	1034882	445804	2653315	193045	241536	1511123	1752659	14047132	63.2
Jun'05	23011307	8657133	1161488	553538	3146630	274140	296813	1603684	1900497	15693426	68.2
Jun'06	23333127	8891196	1195194	648643	3381122	315175	332430	1674104	2006534	16437864	70.4
Jun'07	23995493	9927113	1249190	599983	2237355	255134	370650	1630536	2001186	16269961	67.8
Jun'08	24506859	9893863	1230130	2996830	637318	356844	425555	1726335	2151890	17266875	70.5
Jun'09	24965994	9978312	1338955	725563	3526320	387701	483269	1825129	2308398	18265249	73.2
Jun'10	25264388	10177786	1492109	652104	3665705	324884	540323	1790400	2330723	18643311	73.8
Jun'11	25630674	10365100	1617914	3960688	718437	493080	625637	1912686	2538323	19693542	76.8
Jun'12	26003460	10399477	1658996	4091697	753428	613852	722855	2029525	2752380	20269830	78.0
Jun'13	26220187	10226716	1713590	4066210	722025	693658	736768	1994367	2731135	20153334	76.9
Jun'14	26598869	10334503	1776802	4233839	758288	794138	789512	2087021	2876533	20774103	78.1
Jun'15	26984930	10420823	1821188	4337036	792770	921206	826660	2169504	2996164	21289187	78.9
Jun'16	26685961	10208730	1838390	4210772	712439	954790	759354	1983847	2743201	20668322	77.5
Jun'17	26964711	10335440	1887374	4266263	746599	1097968	783090	2048234	2831324	21164968	78.5
Jun'18	27288541	10438279	1913279	4280964	780283	1263149	803606	2108756	2912362	21588316	79.1
Jun'19	27357033	10410221	2005405	4188067	723707	1250224	746122	2017318	2763440	21341064	78.0

Table -4 (c) : Division wise Contraceptive Acceptors (by methods) and Acceptance Rate (CAR) up to the end of June 2019(Descending order)

Division	Total Eligible Couple	Total Number of Acceptors							CAR (%)
		Permanent Method	IUD	Implant	Injectable	Oral Pill	Condom	Total	
Rajshahi	4187191	467585	96542	177019	603670	1660058	385102	3389976	81.0
Khulna	3453516	405184	77599	141360	560414	1254311	304038	2742906	79.4
Rangpur	3596293	430616	65297	173036	622254	1401139	160883	2853225	79.3
Mymensingh	2259532	189257	51797	111987	313903	996410	116658	1780012	78.8
Barisal	1639659	134732	49747	90973	342743	588735	79511	1286441	78.5
Sylhet	1723083	200917	53240	85138	240749	625933	132571	1338548	77.7
Dhaka	5413166	515611	152198	231014	684304	2066910	484365	4134402	76.4
Chittagong	5084593	419538	177287	239697	820030	1816725	342277	3815554	75.0
National	**27357033**	**2763440**	**723707**	**1250224**	**4188067**	**10410221**	**2005405**	**21341064**	**78.0**

Table -4 (d) : Division wise Contraceptive Acceptors (by methods) and Acceptance Rate (CAR) up to the end of June 2018 (Descending order)

Division	Total Eligible Couple	Total Number of Acceptors							CAR (%)
		Permanent Method	IUD	Implant	Injectable	Oral Pill	Condom	Total	
Rajshahi	4187386	486490	103473	177811	617071	1670833	360872	3416550	81.6
Khulna	3463795	426464	85115	147745	572790	1272302	282694	2787110	80.5
Rangpur	3602962	462461	69568	182324	626715	1389544	146218	2876830	79.9
Sylhet	1649289	208689	57673	78954	224635	611891	127019	1308861	79.4
Barisal	1633641	139994	53174	91815	346243	584196	77088	1292510	79.1
Dhaka	7715487	754416	226083	357469	1044150	3093790	582331	6058239	78.5
Chittagong	5035945	433848	185197	227021	849360	1815723	337057	3848206	76.4
National	**27288505**	**2912362**	**780283**	**1263139**	**4280964**	**10438279**	**1913279**	**21588306**	**79.1**

Table -4 (e): Division wise Contraceptive Acceptors (by methods) and Acceptance Rate (CAR) up to the end of June 2017 (Descending order)

Division	Total Eligible Couples	Total Number of Acceptors							CAR (%)
		Permanent Method	IUD	Implant	Injectable	Oral Pill	Condom	Total	
Rajshahi	4142156	476016	98579	151783	619187	1658525	353153	3357243	81.1
Khulna	3436286	417149	82202	132533	570739	1270786	275784	2749193	80.0
Rangpur	3554278	452000	65516	158271	638537	1373110	143236	2830670	79.6
Barisal	1621554	136615	51163	84664	348185	574580	76199	1271406	78.4
Sylhet	1628080	201627	57165	66643	221328	599120	128210	1274093	78.3
Dhaka	7633163	727308	215114	314633	1027559	3076450	577140	5938204	77.8
Chattogram	4948493	420609	176860	189441	840728	1782835	333652	3744125	75.7
National	**26964010**	**2831324**	**746599**	**1097968**	**4266263**	**10335406**	**1887374**	**21164934**	**78.5**

Table 4 (f) : Status of Contraceptive Method-Mix based on CAR in June'20.

Division	Total Number of Acceptors						
	Permanent Method	IUD	Implant	Injectable	Oral Pill	Condom	Total
Barisal	10.47	3.86	7.62	26.14	45.69	6.22	100.0
Chattogram	10.99	4.68	6.84	21.03	47.61	8.85	100.0
Dhaka	12.59	3.71	5.93	16.44	49.59	11.74	100.0
Khulna	14.83	2.79	5.46	20.32	45.35	11.25	100.0
Mymensing	10.61	2.88	6.6	17.74	55.66	6.51	100.0
Rajshahi	13.84	2.85	5.49	17.74	48.52	11.56	100.0
Rangpur	15.04	2.34	6.33	21.53	49.07	5.69	100.0
Sylhet	15.11	3.91	7.01	18.07	46.07	9.83	100.0
National	**13**	**3**	**7**	**20**	**48**	**9**	**100.0**

Table 5 (a) List of 10 districts achieved the highest Achievement Rate of Clinical methods against their projections for the period July 2019 to June 2020

Sl. No.	Permanent Method (Cases)				IUD (Cases)				Implant (Cases)			
	District	Projec.	Perform.	Achi. Rate (%)	District	Projec.	Perform.	Achi. Rate (%)	District	Projec.	Perform.	Achi. Rate (%)
1	Noakhali	2568	3934	153.2	Sherpur	1957	4506	230.3	Sherpur	5832	10542	180.8
2	Joipurhat	1021	1541	150.9	Rajbari	1010	1977	195.7	Rajbari	3520	4755	135.1
3	Sherpur	2058	3067	149.0	Faridpur	2212	3541	160.1	Faridpur	6103	7339	120.3
4	Khagrachhari	2396	3010	125.6	Khagrachhari	1140	15133.2	133.2	Joipurhat	4803	5339	111.2
5	Bandarban	886	943	106.4	Khulna	3097	4017	129.7	Patuakhali	7056	7595	107.6
6	Gaibandha	3600	3604	100.1	Chattogram	9482	10885	114.8	Pirojpur	3187	3365	105.6
7	Jamalpur	2402	2303	95.9	Madaripur	1618	1809	111.8	Dinajpur	15257	15252	100.0
8	Dinajpur	3851	3555	92.3	Sylhet	2200	23105.3	105.3	Sunamganj	8453	8255	97.7
9	Rangpur	3621	3201	88.4	Dhaka	10729	11267	105.0	Chattogram	15487	14775	95.4
10	Barguna	1672	1381	82.6	Noakhali	3260	3346	102.6	Jashore	3620	3360	92.8

Table 5(b) : Division wise Projection, Performance and Achievement Rate of Short Acting Methods for the year 2017-2018(Descending order)

Sl No.	Division	Injectable (in CYP)			Division	Oral Pill (in CYP)			Division	Condom (in CYP)		
		Projec.	Perform.	Achi. Rate (%)		Projec.	Perform.	Achi. Rate (%)		Projec.	Perform.	Achi. Rate (%)
1	Barisal	308019	240584	78.1	Dhaka	2974943	1978944	66.5	Dhaka	533964	244867	45.9
2	Rangpur	674930	409541	60.7	Rangpur	1385382	842344	60.8	Khulna	240456	108785	45.2
3	Khulna	652667	359865	55.1	Rajshahi	1614804	885707	54.8	Rajshahi	289837	121062	41.8
4	Chattogram	939586	511997	54.5	Sylhet	634515	347113	54.7	Sylhet	113887	44907	39.4
5	Dhaka	1449331	763246	52.7	Khulna	1339683	683149	51.0	Chattogram	346163	114742	33.1
6	Sylhet	309123	148387	48.0	Barisal	632248	322352	51.0	Barisal	113481	32414	28.6
7	Rajshahi	786700	352466	44.8	Chattogram	1928623	844035	43.8	Rangpur	248658	57515	23.1
National		**5120355**	**2786086**	**44.8**	**National**	**10510202**	**5903644**	**43.8**	**National**	**1886447**	**724292**	**23.1**

Table 5(c): Division wise Projection, Performance and Achievement Rate of Short Acting Methods for the year 2018-2019(Descending order)

Sl No.	Division	Injectable (In CYP)			Division	Oral Pill (In CYP)			Division	Condom (In CYP)		
		Projec.	Perform.	Achi. Rate (%)		Projec.	Perform.	Achi. Rate (%)		Projec.	Perform.	Achi. Rate (%)
1	Barisal	310392	242077	78.0	Mymensingh	878303	547345	62.3	Dhaka	382442	194878	61.1
2	Rangpur	684563	431971	63.1	Dhaka	2130751	1282618	60.2	Sylhet	115450	43937	45.7
3	Chattogram	956830	509655	53.3	Rangpur	1405155	733001	52.2	Rajshahi	293117	130512	44.5
4	Dhaka	1038058	551995	53.2	Rajshahi	1633081	837799	51.3	Khulna	242466	102383	42.2
5	Khulna	658121	342484	52.0	Sylhet	643223	326199	50.7	Mymensingh	157644	52615	40.1
6	Sylhet	313365	150584	48.1	Barisal	637120	310259	48.7	Chattogram	352516	104526	35.6
7	Mymensingh	427891	197816	46.2	Khulna	1350880	621252	46.0	Barisal	114355	30070	26.3
8	Rajshahi	795603	341459	42.9	Chattogram	1964019	781227	39.8	Rangpur	252207	59963	23.8
National		**5184823**	**2768041**	**42.9**	**National**	**10642531**	**5439700**	**39.8**	**National**	**1910198**	**718884**	**23.8**

Table : List of the 10 Districts achieved the highest Achievement Rate of Clinical Method against their projections for the period July 2019 to June 2020

Sl. No.	Permanent Method (Cases)				IUD (Cases)				Implant (Cases)			
	District	Projec.	Perform.	Achi. Rate (%)	District	Projec.	Perform.	Achi. Rate (%)	District	Projec.	Perform.	Achi. Rate (%)
1	Noakhali	2568	3934	153.2	Sherpur	1957	4506	230.3	Sherpur	5832	10542	180.8
2	Joipurhat	1021	1541	150.9	Rajbari	1010	1977	195.7	Rajbari	3520	4755	135.1
3	Sherpur	2058	3067	149.0	Faridpur	2212	3541	160.1	Faridpur	6103	7339	120.3
4	Khagrachhari	2396	3010	125.6	Khagrachhari	1140	1518	133.2	Joipurhat	4803	5339	111.2
5	Bandarban	886	943	106.4	Khulna	3097	4017	129.7	Patuakhali	7056	7595	107.6
6	Gaibandha	3600	3604	100.1	Chattogram	9482	10885	114.8	Pirojpur	3187	3365	105.6
7	Jamalpur	2402	2303	95.9	Madaripur	1618	1809	111.8	Dinajpur	15257	15252	100.0
8	Dinajpur	3851	3555	92.3	Sylhet	2200	2316	105.3	Sunamganj	8453	8255	97.7
9	Rangpur	3621	3201	88.4	Dhaka	10729	11267	105.0	Chattogram	15487	14775	95.4
10	Barguna	1672	1381	82.6	Noakhali	3260	3346	102.6	Jashore	3620	3360	92.8

Table-5 (d): List of the 10 Districts achieved the highest Achievement Rate of Clinical Method against their projections for the period July 2017 to June 2018

Sl. No.	Permanent Method (Cases)				IUD (Cases)				Implant (Cases)			
	District	Projec.	Perform.	Achi. Rate (%)	District	Projec.	Perform.	Achi. Rate (%)	District	Projec.	Perform.	Achi. Rate (%)
1	Joipurhat	1620	1633	100.8	Khulna	4005	5103	127.4	Bandarban	1332	2528	189.8
2	Dinajpur	4973	4850	97.5	Bandarban	1233	1328	107.7	Kishoreganj	5983	10705	178.9
3	Jhenaidaha	1873	1729	92.3	Narail	830	891	107.3	Nilphamari	5000	8370	167.4
4	Naogaon	2847	2558	89.8	Dinajpur	4450	4531	101.8	Faridpur	4507	7499	166.4
5	Chuadanga	1652	1436	86.9	Serajganj	6641	6503	97.9	Madaripur	2594	4165	160.6
6	Khulna	3765	3215	85.3	Joipurhat	1739	1698	97.6	Dhaka	10000	15956	159.6
7	Manikganj	7064	5318	75.2	Narshingdi	5137	5002	97.4	Rajbari	3357	5353	159.5
8	Dhaka	19733	14823	75.1	Faridpur	3898	3674	94.3	Gaibandha	6500	10158.8	158.8
9	Gopalganj	4646	3203	68.9	Pirojpur	3000	2805	93.5	Naogaon	7000	10147.2	147.2
10	Natore	3005	1998	66.4	Dhaka	14219	13169	92.6	Mymensingh	10000	14670	146.7

Table5 (e) -: List of the 10 Districts achieved the highest Achievement Rate of Clinical Method against their projections for the period July 2018 to June 2019

Sl. No.	Permanent Method (Cases)				IUD (Cases)				Implant (Cases)			
	District	Projec.	Perform.	Achi. Rate (%)	District	Projec.	Perform.	Achi. Rate (%)	District	Projec.	Perform.	Achi. Rate (%)
1	Rajbari	396	921	232.6	Rajbari	1000	2091	209.1	Rajbari	1000	4161	416.1
2	Joipurhat	1212	1932	159.4	Dhaka	9148	12943	141.5	Dinajpur	9905	13735	138.7
3	Dinajpur	4013	4634	115.5	Noakhali	2949	3805	129.0	Bandarban	1312	1735	132.2
4	Chuadanga	1291	1341	103.9	Sylhet	2500	3126	125.0	Madaripur	2594	3320	128.0
5	Naogaon	1720	1781	103.5	Dinajpur	3733	3712	99.4	Jhalakati	1260	1549	122.9
6	Sylhet	3800	3666	96.5	Cox's Bazar	3943	3858	97.8	Dhaka	10000	11926	119.3
7	Kushtia	1935	1735	89.7	Comilla	10254	9659	94.2	Gopalganj	2891	3444	119.1
8	Faridpur	3339	2802	83.9	Narshingdi	4000	3743	93.6	Rangpur	8130	8894	109.4
9	Noakhali	2540	2087	82.2	Shariatpur	2277	2081	91.4	Bagerhat	3612	3946	109.2
10	Chattogram	5178	4176	80.6	Faridpur	4000	3496	87.4	Bogra	12000	13040	108.7

Table 6 (a) Supply Source of Public Sector and NGO in Short acting Method

	2017		2018		2019	
	Public Sector	NGO	Public Sector	NGO	Public Sector	NGO
Permanent	78	22.1	80.4	19.6	81.3	18.7
IUD	79.9	20.1	78.8	21.2	84.7	15.3
Implant	84.8	15.2	85.5	14.5	88.8	11.2

Table 6 (b) Supply Source of Public Sector and NGO in Long acting-permanent method

	2017		2018		2019		2020	
	Public Sector	NGO	Public Sector	NGO	Public Sector	NGO	Public Sector	NGO
Injectable	77.5	22.5	77	23	77.2	22.8	81.04	18.96
Oral Pill	82.9	17.1	81.5	18.5	83.2	16.8	87.34	12.66
Condom	67.5	32.5	66.7	33.3	75.5	24.5	77.59	22.41

Table- 7(a) : Division wise Mother Care Health Services in UH &FWC for the period of 2019-20

Division	ANC		Delivery			PNC	
	1st visit	4th visit	Normal	Csection	Total	1st visit	4th visit
Barisal	40761	18853	7421	0	7421	9215	17491
Chattogram	169040	66113	38082		38083	41573	39942
Dhaka	118489	50727	13525		13526	18910	41835
Khulna	86932	34632	4055	0	4055	8804	27242
Mymensingh	46028	19213	3245		3246	5445	12347
Rajshahi	101103	41800	8668	0	8668	13490	26155
Rangpur	109890	57985	20602		20603	23295	25822
Sylhet	58773	31227	13211		13212	16249	18626
Total	**731016**	**320550**	**108809**		**108814**	**136981**	**209460**

Table 7(b) : Division wise Mother Care Health Services in UH &FWC for the period of 2019-20

Division	No. of Moher Received Misoprostol	No. of uses 7.1% chlorhexidine digluconate for umbilical cord care	No. of mother counseled on Postpartum FP	No. of Newborn received KMC Service
Barisal	12177	7422	57149	364
Chattogram	32856	37944	201181	5090
Dhaka	24077	13514	154019	5170
Khulna	16199	4051	108419	771
Mymensingh	8238	3252	66866	968
Rajshahi	17107	8682	129850	829
Rangpur	25091	20607	173120	455
Sylhet	20773	13152	75564	405
Total	156518	108624	966168	14052

Table 8 (a) : Division-wise proportion of still birth and live birth in 2019-20

Division	Birth			
	No. of Still Birth	No. of live birth		
		At Home (By trained person)	At Home (By Non-trained person)	Total
Barishal	203	37676	9355	47031
Chattagram	838	88765	48688	137453
Dhaka	461	73632	16612	90244
Khulna	327	37628	8823	46451
Mymensingh	299	55813	15677	71490
Rajshahi	338	48870	18569	67439
Rangpur	243	64783	9068	73851
Sylhet	563	47272	24941	72213
Total	3272	454439	151733	606172

Table-8 (b):Division wise proportion of still birth and live birth for the period of 2018-19

Division	Birth			
	No. of Still Birth	No. of live birth		
		At Home (By trained person)	At Home (By Non-trained person)	Total
Rangpur	192	65760	8894	74654
Rajshahi	327	51622	19215	70837
Khulna	284	39419	8659	48078
Barishal	360	37158	8178	45336
Dhaka	330	74791	15410	90201
Chattagram	819	97412	41732	139144
Sylhet	558	52632	28507	81139
Mymensingh	205	53427	15526	68953
Total	**3075**	**472221**	**146121**	**618342**

Table 8(c) -: Division wise proportion of still birth and live birth for the period 2017-18

Division	Birth			
	No. of Still Birth	No. of live birth		
		At Home (By trained person)	At Home (By Non-trained person)	Total
Rangpur	189	68148	11333	79481
Rajshahi	188	53358	22225	75583
Khulna	275	44166	8776	52942
Barisal	147	36829	8810	45639
Dhaka	399	132670	33039	165709
Chittagong	585	105126	39569	144695
Sylhet	715	53179	32851	86030
Total	**2498**	**493476**	**156603**	**650079**

Table 9: Division-wise number of deaths data obtained by FP workers for the period of 2019-2020

Division	Death						
	Number of Death						
	No. of Child <1 year			No. of Child 1-<5 years	Number of Maternal deaths	Other Death	Total Death
	0-28 days	29days -<1 year	Total				
Barisal	54	114	168	17	80	20784	21149
Chittagong	133	329	462	60	206	58673	59401
Dhaka	184	267	451	20	161	55390	56022
Khulna	110	250	360	12	89	37345	37806
Rajshahi	145	210	355	16	117	44194	44682
Rangpur	128	201	329	44	128	30503	31004
Sylhet	134	285	419	10	154	18099	18682
Total	888	1656	2544	179	935	264988	268746

Table 10 : Nutrition Services (Pregnant Woman & Mother of 0-23month age Children) in 2019-2020

Division	Counseling on IYCF, IFA, Vitamin-A & Hand washing	No. of pregnant mother Received IFA & Calcium Tablet	No. of mother (0-23Months) Received IFA & Calcium Tablet
Barisal	661626	220773	136382
Chattogram	1504307	671617	328441
Dhaka	1384550	603339	292902
Khulna	1064717	346355	201444
Mymensingh	511103	217231	106298
Rajshahi	960873	448331	177589
Rangpur	875946	461380	178749
Sylhet	565221	244210	136474
Total	**7528343**	**3213236**	**1558279**

Table 11: Nutrition Services (6-59 months age Children) in 2019-2020(continued)

Division	No. of children (6-59Month) conducted GMP	No. of children (6-59Month) Identifying Suffering from MAM	No. of children (6-59Month) Suffering from SAM & Referred	No. of children (6-59Month) Identifying Child Stunting	No. of children (6-59Month) Identifying Child Wasting	No. of children (6-59Month) Identifying Child Under weight
Barisal	12235	7858	1266	3007	3108	4187
Chattogram	69297	22879	8341	8558	7607	9624
Dhaka	91110	21807	9685	11340	9998	12345
Khulna	55232	10730	2076	3013	3754	4663
Mymensingh	12618	5639	1821	3785	3894	4551
Rajshahi	27629	8416	2069	4088	3895	6041
Rangpur	28974	9321	1961	4270	4672	5191
Sylhet	14654	9538	2641	4257	3661	5388
Total	**311749**	**96188**	**29860**	**42318**	**40589**	**51990**

Table 11: Nutrition Services (6-59 months age Children) in 2019-2020

Division	No. of children Exclusive Breast feeding up to 6 months	No. of children (6-23Month) feeding complementary foods	No. of children (24-59Month) feeding complementary foods	No. of children Received MNP Sachet (6-23Months)	No. of children Received MNP Sachet (24-59Month)	No. of children Feeding Tablet Vitamin A (6-59Months)	No. of children Received Tablet anti-helminthics (24-59Months)	No. of children Feeding Zink pill with ORS suffering from Diarrhea
Barisal	139280	156004	140209	17650	6513	83730	48388	1461
Chattogram	407259	437090	418633	38787	23733	78218	92603	21832
Dhaka	362533	348377	320934	22156	12597	50343	115078	22281
Khulna	266120	342944	347945	21939	12187	15797	73009	6385
Mymensingh	119548	147560	142444	9434	5514	2957	43669	984
Rajshahi	246413	268636	268832	12927	8275	5387	60895	3397
Rangpur	203588	210704	195965	27222	5366	8781	59850	5740
Sylhet	162001	167127	158867	12942	5230	2693	41426	1916
Total	1906742	2078442	1993829	163057	79415	247906	534918	63996

Table 12: Number of Method-specific Contraceptive acceptors and non-acceptors by age and number of children at the Year 2018 (Collected by FWAs)

Age Group	Number of Children	Method wise Acceptors							Total Acceptors	Non Acceptors	Pregnant Women
		Oral Pill	Condom	Injectable	IUD	Implant	Permanent Method				
							Male	Female			
<20	0	27887	11668	371	3	571	1	0	40501	65841	21002
	1	69945	11232	33129	2425	11034	50	15	127830	45970	8933
	2	40349	6256	23682	2549	7308	1077	1814	83035	18556	3962
	3+	13346	2417	6699	780	2131	1038	1655	28066	6723	828
Sub-Total		**151527**	**31573**	**63881**	**5757**	**21044**	**2166**	**3484**	**279432**	**137090**	**34725**
20-29	0	23137	9155	588	6	521	46	4	33457	55862	15541
	1	218169	20230	89132	7426	27565	1119	555	364196	80424	19067
	2	225385	17661	116027	11267	35367	20652	24812	451171	59883	10218
	3+	102650	8367	53660	6302	16565	20160	28185	235889	32178	3376
Sub-Total		**569341**	**55413**	**259407**	**25001**	**80018**	**41977**	**53556**	**1084713**	**228347**	**48202**
30-39	0	6828	2183	238	4	82	69	21	9425	20946	4032
	1	74068	9436	36563	3764	11357	1237	1248	137673	38703	6654
	2	204210	17366	93763	11876	25249	35284	42474	430222	46967	6451
	3+	192548	11895	89333	10371	22609	50642	68863	446261	44155	3394
Sub-Total		**477654**	**40880**	**219897**	**26015**	**59297**	**87232**	**112606**	**1023581**	**150771**	**20531**
40+	0	1615	643	62	4	3	46	21	2394	10782	765
	1	25700	3263	11179	1205	3018	955	1194	46514	17597	1066
	2	67294	7413	30140	4528	6777	21671	33066	170889	30891	1108
	3+	97207	7403	40209	6402	7403	40284	61191	260099	43011	618
Sub-Total		**191816**	**18722**	**81590**	**12139**	**17201**	**62956**	**95472**	**479896**	**102281**	**3557**
Total	0	59467	23649	1259	17	1177	162	46	85777	153431	41340

Continued.

Age Group	Number of Children	Method wise Acceptors							Total Acceptors	Non Acceptors	Pregnant Women
		Oral Pill	Condom	Injectable	IUD	Implant	Permanent Method				
							Male	Female			
	1	387882	44161	170003	14820	52974	3361	3012	676213	182694	35720
	2	537238	48696	263612	30220	74701	78684	102166	1135317	156297	21739
	3+	405751	30082	189901	23855	48708	112124	159894	970315	126067	8216
Rangpur Division		**1390338**	**146588**	**624775**	**68912**	**177560**	**194331**	**265118**	**2867622**	**618489**	**107015**
<20	0	58501	27185	321	3	568	2	0	86580	63437	23942
	1	84228	24531	32117	2692	10406	35	41	154050	42981	8222
	2	30747	10764	18955	3018	5718	755	1756	71713	13982	2483
	3+	10636	3178	5135	1049	1136	552	1724	23410	5974	685
Sub-Total		**184112**	**65658**	**56528**	**6762**	**17828**	**1344**	**3521**	**335753**	**126374**	**35332**
20-29	0	41173	18733	456	11	469	99	12	60953	59981	16723
	1	294703	55962	95515	10108	30137	1025	1071	488521	88780	23429
	2	260985	44666	112712	16624	35189	13039	38682	521897	63387	10514
	3+	89645	16328	43204	8586	13138	9236	32744	212881	30724	3045
Sub-Total		**686506**	**135689**	**251887**	**35329**	**78933**	**23399**	**72509**	**1284252**	**242872**	**53711**
30-39	0	9943	3676	200	1	113	171	47	14151	26535	3419
	1	105836	23979	38049	5653	10462	1537	2241	187757	49642	7040
	2	266722	48973	101374	19197	28192	25746	69405	559609	57056	7577
	3+	175911	30642	80578	16027	20284	27452	86785	437679	43915	3166
Sub-Total		**558412**	**107270**	**220201**	**40878**	**59051**	**54906**	**158478**	**1199196**	**177148**	**21202**
40+	0	2367	1008	145	2	22	151	45	3740	11173	511
	1	28620	7097	9937	1278	2018	1126	2015	52091	22098	1063
	2	94914	21415	33875	7826	7493	15452	44585	225560	36220	994
	3+	111602	20961	42943	10385	7043	25505	80680	299119	42068	572
Sub-Total		**237503**	**50481**	**86900**	**19491**	**16576**	**42234**	**127325**	**580510**	**111559**	**3140**
Total	0	111984	50602	1122	17	1172	423	104	165424	161126	44595
	1	513387	111569	175618	19731	53023	3723	5368	882419	203501	39754
	2	653368	125818	266916	46665	76592	54992	154428	1378779	170645	21568
	3+	387794	71109	171860	36047	41601	62745	201933	973089	122681	7468
Rajshahi Division		**1666533**	**359098**	**615516**	**102460**	**172388**	**121883**	**361833**	**3399711**	**657953**	**113385**
<20	0	49704	24995	551	4	665	2	0	75921	55059	20962
	1	68595	20131	28340	2488	9270	19	33	128876	39315	8108
	2	27014	7374	16848	2589	5511	458	1590	61384	13290	2214
	3+	9206	3398	6099	1091	2158	695	1574	24221	6194	892
Sub-Total		**154519**	**55898**	**51838**	**6172**	**17604**	**1174**	**3197**	**290402**	**113858**	**32176**
20-29	0	35180	17854	708	53	777	45	32	54649	52912	16179
	1	229813	42831	92001	9649	23692	510	1191	399687	85037	21226
	2	201332	32986	103472	14545	27738	8598	33889	422560	59337	9078
	3+	64021	10341	37792	6692	10701	6707	29281	165535	25315	2077
Sub-Total		**530346**	**104012**	**233973**	**30939**	**62908**	**15860**	**64393**	**1042431**	**222601**	**48560**
30-39	0	7726	4414	211	5	132	65	50	12603	20348	3987
	1	75889	18895	35403	5633	8991	792	1870	147473	42275	6915
	2	206052	38596	98386	16151	22644	17221	66790	465840	51361	5342
	3+	135576	21732	69823	11343	16092	19596	87351	361513	37818	2210
Sub-Total		**425243**	**83637**	**203823**	**33132**	**47859**	**37674**	**156061**	**987429**	**151802**	**18454**
40+	0	2206	915	76	4	4	67	44	3316	9441	722
	1	19649	5550	9913	1412	1791	629	2018	40962	19393	797
	2	66387	16048	33729	6250	6876	11425	43193	183908	29821	554
	3+	74183	14927	36454	6681	6689	18170	69882	226986	33364	250
Sub-Total		**162425**	**37440**	**80172**	**14347**	**15360**	**30291**	**115137**	**455172**	**92019**	**2323**
Total	0	94816	48178	1546	66	1578	179	126	146489	137760	41850
	1	393946	87407	165657	19182	43744	1950	5112	716998	186020	37046
	2	500785	95004	252435	39535	62769	37702	145462	1133692	153809	17188

Continued.

Age Group	Number of Children	Method wise Acceptors							Total Acceptors	Non Acceptors	Pregnant Women
		Oral Pill	Condom	Injectable	IUD	Implant	Permanent Method				
							Male	Female			
	3+	282986	50398	150168	25807	35640	45168	188088	778255	102691	5429
Khulna Division		**1272533**	**280987**	**569806**	**84590**	**143731**	**84999**	**338788**	**2775434**	**580280**	**101513**
<20	0	27221	7998	228	14	510	2	0	35973	20982	9040
	1	27764	5518	12099	1275	3662	2	0	50320	15511	3761
	2	8385	2273	8266	926	2244	50	72	22216	6205	1110
	3+	3354	922	3096	443	780	47	67	8709	3272	224
Sub-Total		**66724**	**16711**	**23689**	**2658**	**7196**	**101**	**139**	**117218**	**45970**	**14135**
20-29	0	20661	5676	192	21	349	6	0	26905	23439	8350
	1	95828	11226	44002	5229	11429	155	73	167942	37553	9561
	2	87333	9260	57365	7917	16024	3271	3953	185123	28315	5239
	3+	38332	4203	34429	5004	8877	3911	5797	100553	16214	1645
Sub-Total		**242154**	**30365**	**135988**	**18171**	**36679**	**7343**	**9823**	**480523**	**105521**	**24795**
30-39	0	2656	958	239	28	112	23	43	4059	7671	1765
	1	30100	4601	17888	2602	4410	286	251	60138	20430	3287
	2	76188	9083	51051	9612	14105	8336	11302	179677	25630	3524
	3+	82452	6834	65751	9764	15494	16493	24338	221126	26737	1949
Sub-Total		**191396**	**21476**	**134929**	**22006**	**34121**	**25138**	**35934**	**465000**	**80468**	**10525**
40+	0	706	325	231	23	77	68	17	1447	6383	216
	1	6655	1205	4772	713	1250	697	583	15875	9297	423
	2	28310	3712	17614	4129	4981	6374	9770	74890	18675	604
	3+	42809	4317	30572	5371	7123	16607	26399	133198	26338	301
Sub-Total		**78480**	**9559**	**53189**	**10236**	**13431**	**23746**	**36769**	**225410**	**60693**	**1544**
Total	0	51244	14957	890	86	1048	99	60	68384	58475	19371
	1	160347	22550	78761	9819	20751	1140	907	294275	82791	17032
	2	200216	24328	134296	22584	37354	18031	25097	461906	78825	10477
	3+	166947	16276	133848	20582	32274	37058	56601	463586	72561	4119
Barisal Division		**578754**	**78111**	**347795**	**53071**	**91427**	**56328**	**82665**	**1288151**	**292652**	**50999**
<20	0	61344	35560	766	31	1071	0	0	98772	84542	27129
	1	90669	30250	29419	4433	10386	6	9	165172	61571	11305
	2	38595	12628	19839	4220	6946	197	884	83309	22615	3154
	3+	13705	4579	7931	1765	2486	240	1199	31905	9603	968
Sub-Total		**204313**	**83017**	**57955**	**10449**	**20889**	**443**	**2092**	**379158**	**178331**	**42556**
20-29	0	51493	26573	1144	25	876	14	5	80130	86302	25636
	1	319635	71202	95892	16979	32673	330	788	537499	139326	32707
	2	334532	61657	125232	28513	46406	9886	28204	634430	108823	20160
	3+	160225	28786	73386	17873	24339	11737	42297	358643	53502	7813
Sub-Total		**865885**	**188218**	**295654**	**63390**	**104294**	**21967**	**71294**	**1610702**	**387953**	**86316**
30-39	0	12458	4999	485	10	198	16	9	18175	33641	5592
	1	113509	29415	38875	9511	12438	498	1453	205699	72788	10673
	2	294975	60693	105256	28883	34394	19025	58824	602050	94959	11227
	3+	304645	45983	118535	28999	35498	32004	135924	701588	81016	7760
Sub-Total		**725587**	**141090**	**263151**	**67403**	**82528**	**51543**	**196210**	**1527512**	**282404**	**35252**
40+	0	3597	1328	302	32	91	19	40	5409	15650	950
	1	32200	9246	11723	2729	2996	347	1828	61069	33543	1682
	2	115832	26346	40511	10477	10921	12993	47036	264116	57795	2215
	3+	155237	27924	54017	14054	13691	26346	113828	405097	67102	1543
Sub-Total		**306866**	**64844**	**106553**	**27292**	**27699**	**39705**	**162732**	**735691**	**174090**	**6390**
Total	0	128892	68460	2697	98	2236	49	54	202486	220135	59307
	1	556013	140113	175909	33652	58493	1181	4078	969439	307228	56367
	2	783934	161324	290838	72093	98667	42101	134948	1583905	284192	36756
	3+	633812	107272	253869	62691	76014	70327	293248	1497233	211223	18084
Dhaka Division		**2102651**	**477169**	**723313**	**168534**	**235410**	**113658**	**432328**	**4253063**	**1022778**	**170514**

Continued.

Age Group	Number of Children	Method wise Acceptors							Total Acceptors	Non Acceptors	Pregnant Women
		Oral Pill	Condom	Injectable	IUD	Implant	Permanent Method				
							Male	Female			
<20	0	27119	8831	110	2	347	3	0	36412	38161	13324
	1	38171	7097	10778	1192	4306	10	3	61557	22126	5193
	2	14477	2856	6977	1309	3007	146	160	28932	7158	1794
	3+	4975	853	2076	602	1202	179	164	10051	3376	401
Sub-Total		**84742**	**19637**	**19941**	**3105**	**8862**	**338**	**327**	**136952**	**70821**	**20712**
20-29	0	20223	6235	286	3	273	8	3	27031	36463	10986
	1	147678	15955	37793	4667	12854	254	159	219360	51620	13940
	2	157828	14141	54888	8612	20267	5847	6703	268286	40279	8464
	3+	87328	6334	32674	5635	13427	6797	9538	161733	23613	3349
Sub-Total		**413057**	**42665**	**125641**	**18917**	**46821**	**12906**	**16403**	**676410**	**151975**	**36739**
30-39	0	3351	1435	132	0	59	12	7	4996	12683	2531
	1	43748	6250	14687	2726	5361	307	334	73413	27212	4760
	2	128329	13147	46439	9365	15836	11542	16531	241189	30771	5301
	3+	174069	10704	60166	10342	20670	23992	34476	334419	32719	3742
Sub-Total		**349497**	**31536**	**121424**	**22433**	**41926**	**35853**	**51348**	**654017**	**103385**	**16334**
40+	0	877	362	72	5	1	12	31	1360	5245	438
	1	12297	2100	4397	772	1631	362	862	22421	10786	1023
	2	46116	5408	16374	3930	5349	8370	16971	102518	19688	1219
	3+	82260	6486	27070	5810	7551	21076	35679	185932	28326	967
Sub-Total		**141550**	**14356**	**47913**	**10517**	**14532**	**29820**	**53543**	**312231**	**64045**	**3647**
Total	0	51570	16863	600	10	680	35	41	69799	92552	27279
	1	241894	31402	67655	9357	24152	933	1358	376751	111744	24916
	2	346750	35552	124678	23216	44459	25905	40365	640925	97896	16778
	3+	348632	24377	121986	22389	42850	52044	79857	692135	88034	8459
Mymensingh Division		**988846**	**108194**	**314919**	**54972**	**112141**	**78917**	**121621**	**1779610**	**390226**	**77432**
<20	0	28922	19748	373	16	551	0	0	49610	74532	32149
	1	82106	24510	33860	4555	9030	6	5	154072	63668	14914
	2	42574	13109	26503	4858	6950	117	408	94519	31406	5303
	3+	18855	4627	11163	2082	2758	254	1068	40807	14256	1388
Sub-Total		**172457**	**61994**	**71899**	**11511**	**19289**	**377**	**1481**	**339008**	**183862**	**53754**
20-29	0	24116	13428	514	15	407	4	16	38500	71557	24786
	1	220797	46334	89755	16513	22462	75	163	396099	123265	30976
	2	273829	48348	134859	30817	37422	3508	11980	540763	115345	21349
	3+	189365	29356	107335	23389	29401	8088	34649	421583	76679	10293
Sub-Total		**708107**	**137466**	**332463**	**70734**	**89692**	**11675**	**46808**	**1396945**	**386846**	**87404**
30-39	0	6036	2674	176	18	129	6	41	9080	25111	4993
	1	80041	17131	37271	7173	8669	188	521	150994	58607	10312
	2	218013	36323	99301	27219	28675	7966	28802	446299	88437	12902
	3+	315377	38727	163189	35704	40573	28144	127370	749084	96930	9988
Sub-Total		**619467**	**94855**	**299937**	**70114**	**78046**	**36304**	**156734**	**1355457**	**269085**	**38195**
40+	0	2137	703	97	2	76	4	0	3019	12624	1112
	1	27343	5032	11656	2338	2558	128	435	49490	27536	1843
	2	95314	16038	45880	11260	11391	5901	23892	209676	52838	2857
	3+	177949	23394	83678	19736	18601	29254	117957	470569	74155	2532
Sub-Total		**302743**	**45167**	**141311**	**33336**	**32626**	**35287**	**142284**	**732754**	**167153**	**8344**
Total	0	61211	36553	1160	51	1163	14	57	100209	183824	63040
	1	410287	93007	172542	30579	42719	397	1124	750655	273076	58045
	2	629730	113818	306543	74154	84438	17492	65082	1291257	288026	42411
	3+	701546	96104	365365	80911	91333	65740	281044	1682043	262020	24201
Chittagong Division		**1802774**	**339482**	**845610**	**185695**	**219653**	**83643**	**347307**	**3824164**	**1006946**	**187697**
<20	0	5945	4124	223	12	66	0	5	10375	16992	9275

Continued.

Age Group	Number of Children	Method wise Acceptors							Total Acceptors	Non Acceptors	Pregnant Women
		Oral Pill	Condom	Injectable	IUD	Implant	Permanent Method				
							Male	Female			
	1	21334	7048	6914	1266	2434	1	2	38999	13733	4927
	2	17182	4775	6407	1661	2714	300	1381	34420	9367	2672
	3+	9741	2885	4216	1058	1569	544	2059	22072	4812	2201
Sub-Total		**54202**	**18832**	**17760**	**3997**	**6783**	**845**	**3447**	**105866**	**44904**	**19075**
20-29	0	8345	3874	868	99	233	111	132	13662	21881	9452
	1	68552	18282	22753	4871	9160	213	185	124016	30312	10674
	2	86673	18363	34041	9561	14675	4185	8933	176431	27014	8914
	3+	73954	12987	29746	7376	9932	7372	18924	160291	20822	5645
Sub-Total		**237524**	**53506**	**87408**	**21907**	**34000**	**11881**	**28174**	**474400**	**100029**	**34685**
30-39	0	3234	844	597	117	154	3	142	5091	8825	2662
	1	35973	8216	11423	2840	4468	346	716	63982	19048	5452
	2	73723	14916	28254	8705	10458	7764	15905	159725	22820	6794
	3+	107707	15158	42249	10561	10992	20803	49390	256860	22080	5434
Sub-Total		**220637**	**39134**	**82523**	**22223**	**26072**	**28916**	**66153**	**485658**	**72773**	**20342**
40+	0	1469	290	443	187	190	0	0	2579	4605	787
	1	11274	2767	3933	950	1144	355	358	20781	9191	1337
	2	32846	6439	12686	3337	3328	6722	11734	77092	13843	1982
	3+	49059	7573	18825	4964	3994	15685	36064	136164	15466	1915
Sub-Total		**94648**	**17069**	**35887**	**9438**	**8656**	**22762**	**48156**	**236616**	**43105**	**6021**
Total	0	18993	9132	2131	415	643	114	279	31707	52303	22176
	1	137133	36313	45023	9927	17206	915	1261	247778	72284	22390
	2	210424	44493	81388	23264	31175	18971	37953	447668	73044	20362
	3+	240461	38603	95036	23959	26487	44404	106437	575387	63180	15195
Sylhet Division		**607011**	**128541**	**223578**	**57565**	**75511**	**64404**	**145930**	**1302540**	**260811**	**80123**
<20	0	286643	140109	2943	85	4349	10	5	434144	419546	156823
	1	482812	130317	186656	20326	60528	129	108	880876	304875	65363
	2	219323	60035	127477	21130	40398	3100	8065	479528	122579	22692
	3+	83818	22859	46415	8870	14220	3549	9510	189241	54210	7587
Total		**1072596**	**353320**	**363491**	**50411**	**119495**	**6788**	**17688**	**1983789**	**901210**	**252465**
20-29	0	224328	101528	4756	233	3905	333	204	335287	408397	127653
	1	1595175	282022	566843	75442	169972	3681	4185	2697320	636317	161580
	2	1627897	247082	738596	127856	233088	68986	157156	3200661	502383	93936
	3+	805520	116702	412226	80857	126380	74008	201415	1817108	279047	37243
Total		**4252920**	**747334**	**1722421**	**284388**	**533345**	**147008**	**362960**	**8050376**	**1826144**	**420412**
30-39	0	52232	21183	2278	183	979	365	360	77580	155760	28981
	1	559164	117923	230159	39902	66156	5191	8634	1027129	328705	55093
	2	1468212	239097	623824	131008	179553	132884	310033	3084611	418001	59118
	3+	1488285	181675	689624	133111	182212	219126	614497	3508530	385370	37643
Total		**3567893**	**559878**	**1545885**	**304204**	**428900**	**357566**	**933524**	**7697850**	**1287836**	**180835**
40+	0	14974	5574	1428	259	464	367	198	23264	75903	5501
	1	163738	36260	67510	11397	16406	4599	9293	309203	149441	9234
	2	547013	102819	230809	51737	57116	88908	230247	1308649	259771	11533
	3+	790306	112985	333768	73403	72095	192927	541680	2117164	329830	8698
Total		**1516031**	**257638**	**633515**	**136796**	**146081**	**286801**	**781418**	**3758280**	**814945**	**34966**
Grand Total	**0**	**578177**	**268394**	**11405**	**760**	**9697**	**1075**	**767**	**870275**	**1059606**	**318958**
	1	**2800889**	**566522**	**1051168**	**147067**	**313062**	**13600**	**22220**	**4914528**	**1419338**	**291270**
	2	**3862445**	**649033**	**1720706**	**331731**	**510155**	**293878**	**705501**	**8073449**	**1302734**	**187279**
	3+	**3167929**	**434221**	**1482033**	**296241**	**394907**	**489610**	**1367102**	**7632043**	**1048457**	**91171**
National		**10409440**	**1918170**	**4265312**	**775799**	**1227821**	**798163**	**2095590**	**21490295**	**4830135**	**888678**

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Picture

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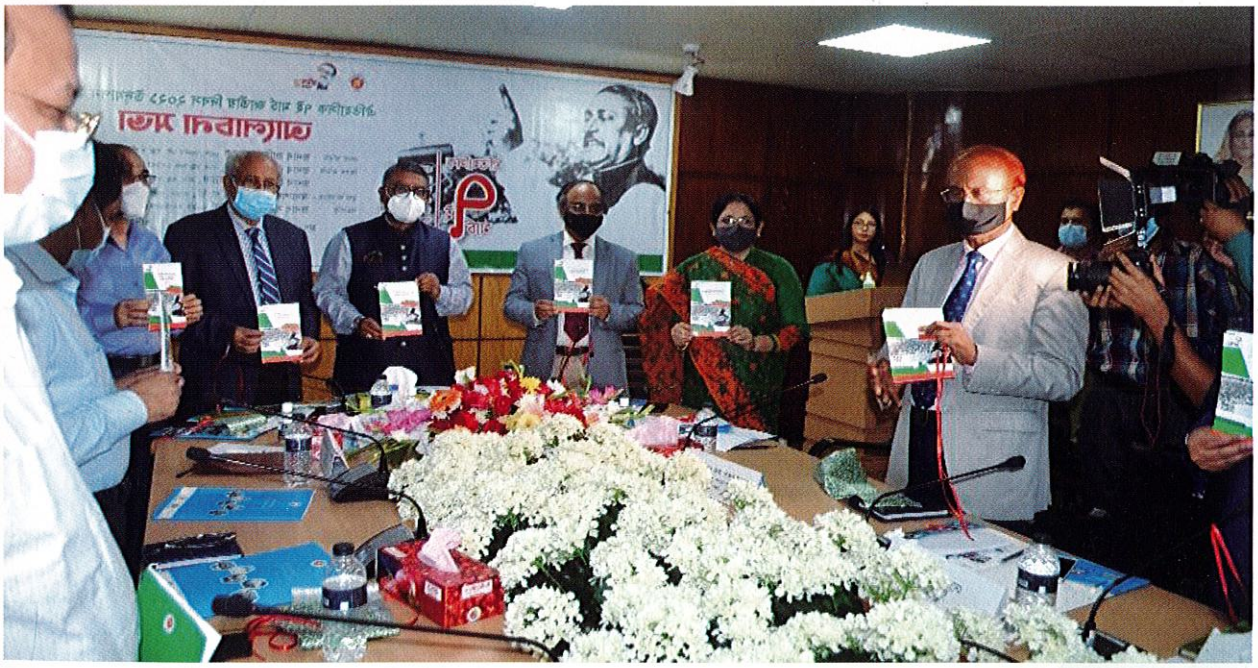
Picture

'DGFP at Mujibborsho Celebrations'

Mr. Zahid Maleque, MP Honorable Minister, Ministry of Health & Family Welfare offering prayers to the departed soul of bangabandhu Sheikh Mujibur Rahman at Directorate of Family Planning along with other officials.

Ms Shahan Ara banu, *ndc* ,Director General of DGFP, along with other officials, offering respects and placing floral wreaths to bangabandhu Sheikh Mujibur Rahman at DGFP

Speakers discussing on the significance on historic 7th March Speech delivered by Bangabandhu Sheikh Mujibur Rahman at a program arranged by DGFP.



Mr. Zahid Maleque, MP Honorable Minister, Ministry of Health & Family Welfare, along with other high officials is inaugurating a booklet on historic 7th March Speech of Bangabandhu Sheikh Mujibur Rahman at a program in DGFP

Breast-feeding corner arranged by MCH unit of DGFP.

Breast-feeding corner arranged by MCH unit of DGFP.

Seminar on Data Quality Assurance in Barishal

Seminar on Data Quality Assurance in Barishal

Inauguration Ceremony on Tab distribution among field level staffs at Cumilla

Inauguration Ceremony on Tab distribution among field level staffs at Cumilla

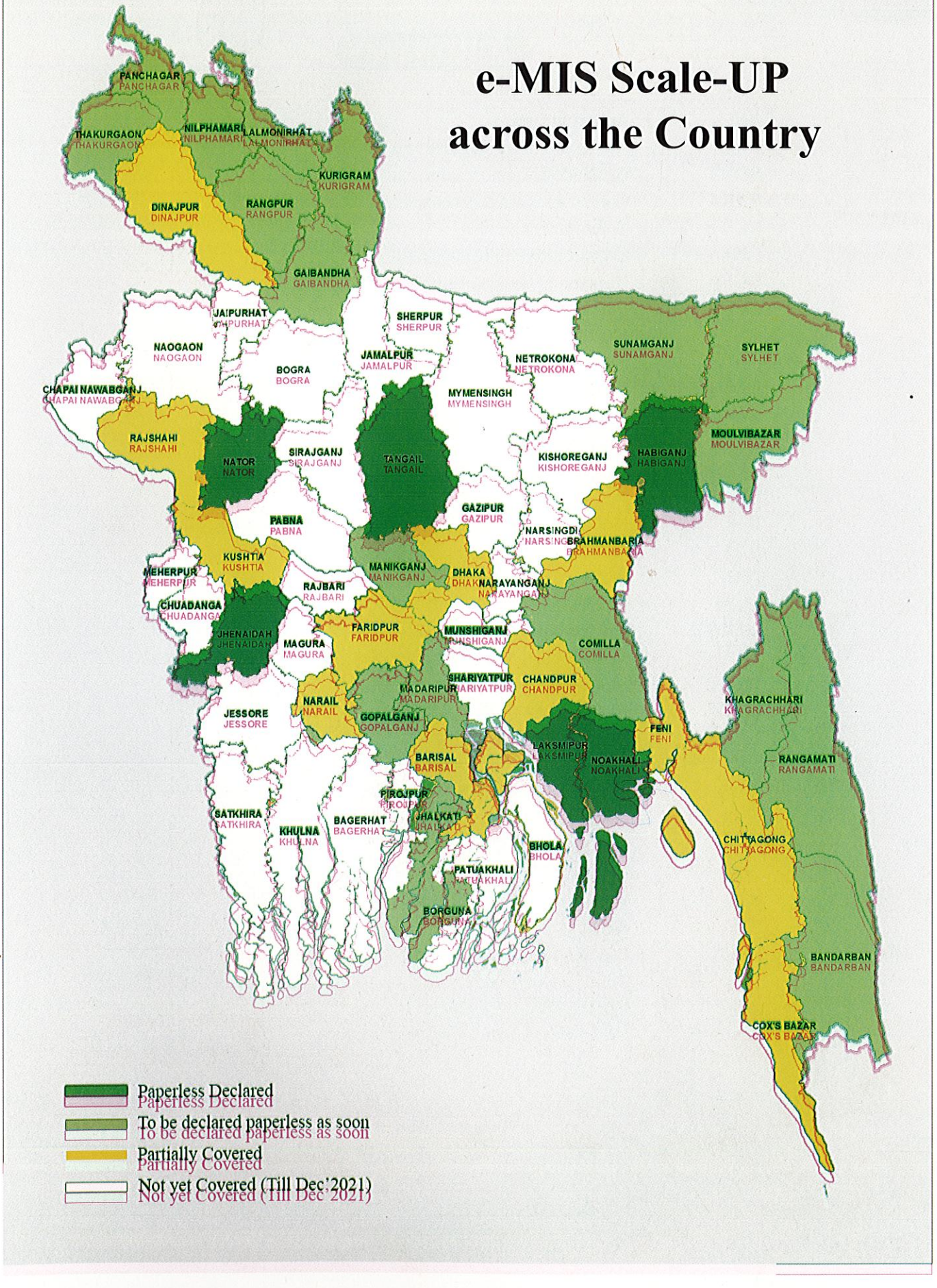
Inauguration Ceremony on Tab distribution among field level staffs at Cumilla

Paperless Tangail program ceremony in Tangail.

Adolescent Health Counselling arranged by MCH unit.

Bangabandhu Corner at DGFP.

e-MIS Scale-UP across the Country



ACRONYMS

ANC	Antenatal Care
ARH	Adolescent Reproductive Health
BDHS	Bangladesh Demographic and Health Survey
CAR	Contraceptive Acceptance Rate
CC	Community Clinic
CPR	Contraceptive Prevalence Rate
DGFP	Directorate General of Family Planning
ELCO	Eligible Couple
FPI	Family Planning Inspector
FWA	Family Welfare Assistant
FWV	Family Welfare Visitor
FWVTI	Family Welfare Visitor Training Institute
HPSP	Health and Population Sector Program
HPNSP	Health, Population and Nutrition Sector Program
IFA	Iron and Folic Acid
IMR	Infant Mortality Rate
IUD	Intra Uterine Device
IYCF	Infant and Young Child Feeding
MCH	Mother and Child Health
MCHTI	Maternal and Child Health Training Institute
MCWC	Mother and Child Welfare Center
MFSTC	Mohammadpur Fertility Services & Training Center
MIS	Management Information System
MMR	Maternal Mortality Ratio
NGO	Non Government Organization
NMR	Neonatal Mortality Rate
NRR	Net Reproduction Rate
NSV	Non Scalpel Vasectomy
PNC	Postnatal Care
RTI	Reproductive Tract Infection
STI	Sexually Transmitted Infection
SVRS	Sample Vital Registration System
TFR	Total Fertility Rate
UHC	Upazila Health Complex
UHFWC	Union Health Family Welfare Center

MIS is the store of Information of DGFP. In 1979 the MIS unit was created from the then Research Evaluation Statistics and Planning (RESP) under the Directorate General of Family Planning. Prior to the creation of the MIS unit there was no regular system of reporting on the progress of National Family Planning Program performance. Since its inception the MIS has endeavored towards establishing a regular system of data collection and reporting on National Program Performances of Family Planning, RH & MCH Services.

Management Information System (MIS)
Directorate General of Family Planning
Medical Education and Family Welfare Division
Ministry of Health and Family Welfare
6, Kawran Bazar, Dhaka 1215