MOMENTUM
Endline Survey Report: First-time Mothers

July 2021

Tulane University

MOMENTUM

This report summarizes the Baseline Survey and Endline Survey findings for first-time mothers age 15-24 enrolled in the MOMENTUM Project. Tulane University School of Public Health and Tropical Medicine carried out the Baseline Survey from September to November 2018 and the Endline Survey from May to August 2020. Funding was provided by the Bill & Melinda Gates Foundation. The analysis and recommendations of this report do not necessarily reflect the views of the Bill & Melinda Gates Foundation.

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Cover Photo: Mr. Michel Kubaki Luzolo

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TABLE OF CONTENTS

TABLES AND FIGURES

Tables

Figures

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ACRONYMS

ANC	antenatal care
ASD	Association Santé et Développement
CF	Conduite de la Fecondité
CPR	contraceptive prevalence rate
DHS	Demographic and Health Survey
DRC	Democratic Republic of Congo
FP	family planning
FTM	first-time mother
HZ	health zone
KMC	Kangaroo mother care
LBW	Low birthweight
NMR	neonatal mortality ratio
MMR	maternal mortality ratio
MNH	maternal and newborn health
MPSMRM	Ministère du Plan et Suivi de la Mise en oeuvre de la Révolution de la Modernité
ODK	Open Data Kit
PI	principal investigator
PMTCT	Prevention of mother-to-child transmission
QR code	Quick Response Code
TV	television
WHO	World Health Organization

MAP OF THE DEMOCRATIC REPUBLIC OF CONGO

Map of the DRC. Retrieved from Family Planning in the DRC, http://www.familyplanning-drc.net/images/mapdrc.jpg

1 BACKGROUND AND SURVEY METHODOLOGY

Pierre Z. Akilimali

1.1 Background

With an adolescent birth rate of 138 per 1000 live births, the Democratic Republic of Congo (DRC) has one of the highest levels of adolescent childbearing in the world. Data from the 2013-14 Demographic and Health Survey (DHS) show that adolescent girls and young women have a high unmet need for family planning (FP) (31% and 29% among married women age 15-19 and 20-24, respectively) and fewer than 10 percent of these women were using a method of contraception (Ministère du Plan et Suivi de la Mise en oeuvre de la Révolution de la Modernité (MPSMRM) et al., 2014). In general, pregnancies tend to be closely spaced, with an estimated 43% of non-first births to women age 15-19 in the DRC occurring after an interval of less than 24 months (MPSMRM et al., 2014). The maternal mortality ratio is unacceptably high. Despite major progress in increasing women's access to antenatal care (ANC) and institutional delivery, the maternal mortality ratio is 846 per 100,000 live births. Children face a high risk of dying in their first month of life at an average rate of 29 deaths per 1,000 live births in 2013-2014, which is higher than the average global rate (MPSMRM et al., 2014). Poor maternal and newborn health has been related to a lack of knowledge of danger signs even among women attending ANC, poor quality of care, social disempowerment, and financial constraints (Kabali et al., 2011).

Gender and sociocultural norms have been recognized as influencing the uptake of FP/maternal and newborn health (MNH) services by young first-time mothers (FTMs), thereby increasing their risk of poor maternal and neonatal outcomes. Although gendered social norms vary across cultures and over time and space, their influence is thought to operate through gendered social roles, negative cultural attitudes, and power differences that are embedded in social structures (Lodenstein, et al., 2018; Pell et al., 2011; Rueben et al., 2017). In many parts of Western and Central Africa, men have traditionally controlled decision-making and had more access to economic resources, education, and power than women (MacPherson et al., 2014). This may directly or indirectly affect women's utilization of family planning and maternal and child health services. Gendered social roles may place women in a subordinate position and promote models of femininity that emphasize women's role in childbearing and child care, and models of masculinity that justify and reproduce male power over women (Greig et al., 2008; UNICEF, 2015). Power dynamics, gender roles, and the threat of violence within the union may constrain women's ability to negotiate sexual intercourse and contraceptive use and increase women's vulnerability to unwanted pregnancy and unhealthy timing and spacing of births. Coupled with lack of control over economic resources, gendered social roles can prevent women from seeking treatment for themselves and their newborn (Yasmin et al., 2015). Cultural and religious norms may also influence the availability and accessibility of key interventions such as postpartum contraception (Mochache et al., 2020).

Documentation of gender norms that constrain the uptake of FP/MNH services in the DRC is scarce, but evidence from other countries in sub-Saharan Africa indicate three tendencies: (1) girls may face social pressure to marry and/or bear children early; (2) there can be negative perceptions of men attending ANC services as being dominated by their wives; and (3) there can be a perception that men should not be found in "female places", including maternal health services (Ditekemena et al., 2012). A recent study of men and masculinities in the DRC revealed that 56% of men and 51% of women believe a woman cannot refuse to have sex with her husband. In addition, 59% of men and 81% of women believed it is a mother's responsibility to care for her children. Furthermore, 63% of men and 52% of women thought that a man should have the final say in all family matters. Violence was normalized as a way for men to demonstrate their manliness (Deepan, 2014).

1.2 Survey Objectives

This study provides endline estimates for a two-year gender-transformative integrated family planning FP/MNH and nutrition intervention implemented by Association Santé et Développement (ASD), Tulane University, Tulane International LLC and Johns Hopkins University/Center for Communication Programs in Kinshasa from 2018-2020. Focusing on FTMs age 15-24 years and their husbands/male partners, the intervention comprised home visits, community dialogue and communication, and support group education sessions to increase the use of postpartum FP methods, improve care-seeking and MNH and nutrition household practices, and increase gender-equitable attitudes and behaviors. During the program implementation stage, FTMs and their husbands/male partners were followed up for 15 to 16 months.

Our primary research question is: "To what extent does a gender-transformative integrated package of FP/MNH and nutrition-related information, referrals, and services delivered by nursing students at the community level increase uptake of postpartum contraception and improve care seeking and MNH and nutrition-related household practices among FTMs age 15-24 years in Kinshasa?" Specific questions are as follows:

- Can nursing students be trained to deliver a package of community-based FP/MNH and nutrition services to FTMs in a way that is gender transformative?
- Does the gender-transformative FP/MNH nursing student model lead to improved FP/MNH and nutrition outcomes among FTMs age 15-24 years, accounting for external influences? Do outcomes differ for different subgroups?
- Does the nursing student model lead to increased gender-equitable attitudes and behaviors related to FP/MNH and nutrition among husbands/male partners?
- Do gender-equitable attitudes and behaviors among husbands/male partners lead to increased uptake of postpartum family planning and improved care seeking and MNH household practices among FTMs age 15-24 years?

The study will assess the feasibility of:

- Recruiting nursing students through a network of nursing schools in the intervention and adjacent health zones (HZs) to deliver community-based integrated FP/MNH and nutrition services;
- Providing comprehensive training and supervision to nursing students to prepare them for their role in providing gender-transformative integrated FP/MNH and nutrition services; and
- Ensuring that nursing students sensitize FTMs age 15-24 years and husbands/male partners on gender-equitable attitudes and behaviors related to FP/MNH and nutrition.

At endline, the study assessed the acceptability of the MOMENTUM model among nursing student providing the gender-transformative integrated FP/MNH and nutrition services at the community level.

1.3 Ethical Considerations

This study was granted ethical approval by Tulane University Institutional Review Board and the University of Kinshasa School of Public Health Ethics Committee. Interviewers were trained on the importance of informed consent and confidentiality, with an emphasis on securing the consent and voluntary participation of respondents. The informed consent form was read aloud to each respondent and each participant was invited

to sign it to certify that he/she had agreed freely to answer the questions asked by the interviewers. Data were collected and analyzed anonymously. No personal identifiers were noted or indicated on the survey questionnaire. Respondents were informed that participation was voluntary and that they were free to accept or refuse the interview with no consequence.

1.4 Survey Organization

The survey started by identifying the FTMs and partners at baseline. Two recruitment strategies were used health facility and community.

1.4.1 Health facility-level recruitment

At the health facility level, the implementing organization, ASD, contacted trained prenatal healthcare providers in Jhpiego-supported health facilities in the intervention and comparison HZs, and asked for their assistance in identifying clients who met the eligibility criteria. Trained prenatal healthcare providers in Jhpiego-supported health facilities introduced the research study to potential research subjects (FTMs age 15-24 years who were six-months pregnant). If the potential research subject was interested in study participation, she was (a) given an invitation coupon and instructed to either (a) contact ASD directly or (b) permit the health care provider to share with ASD her interest in study participation so that ASD could subsequently contact her and provide more information about the intervention. The healthcare provider who introduced the study to the potential subject documented this permission.

Women who expressed interest in participating in the study met with a trained ASD enumerator stationed at the Jhpiego-supported health facility. The ASD enumerator further explained the objectives and content of the baseline and endline evaluation surveys. In intervention HZs, this explanation included the nature and objectives of the intervention, the practices and procedures to be performed during home visits, and the nature of the support group education sessions. At the end of this informational discussion, the client was asked if she was willing to be contacted at home for (a) the baseline evaluation survey by a trained interviewer (in both intervention and comparison HZs), (b) health visits by trained nursing students (in intervention HZs only), and (c) support group education sessions (in intervention HZs only). Only if the client agreed to participate did the ASD enumerator assign a recruitment number (Quick Response (QR) code) to her, and collect her name, address, phone number, and expected delivery/due date for the purpose of arranging the baseline evaluation interview and home visits by nursing students. The ASD enumerator also asked for a pre-visit to ensure that the client's address can be located, the preferred dates/days and times to administer the baseline evaluation survey and, in intervention HZs, the preferred dates/days and times to schedule home visits and support group education sessions. This information was recorded on a smartphone using an ODK form and was stored and kept in a secure location.

1.4.2 Community-level recruitment

Trained enumerators currently working with Conduite de la Fecondité (CF), a community-based organization, and who live in one of the six intervention/comparison HZs selected for the study contacted the HZ authorities and community health workers to ask for their assistance in going house-to-house to identify eligible FTMs. The trained CF enumerator introduced the research study to potential research subjects (FTMs age 15-24 years who were in the sixth month of their first pregnancy at baseline and the husbands/male partners of these women). If the potential research subject was interested in study participation, the CF enumerator further explained the objectives and content of the baseline and endline evaluation surveys. In intervention

HZs, this explanation included the nature and objectives of the intervention, the practices and procedures to be performed during home visits and the nature of the support group education sessions.

At the end of this informational discussion, the subject was asked if she was willing to be contacted at home for (a) the baseline evaluation survey by a trained interviewer (in both intervention and comparison HZs), (b) health visits by trained nursing students (in intervention HZs only), and (c) support group education sessions (in intervention HZs only). Only if the client agreed the CF enumerator assigned a QR code to her, and collected her name, address, phone number, and expected delivery/due date for the purpose of arranging the baseline evaluation interview, and home visits and support group education by nursing students. The CF enumerator also asked for a pre-visit to ensure that the client's address can be located and for the preferred dates/days and times to administer the baseline evaluation survey and, in intervention HZs, to schedule home visits and support group education sessions. This information was recorded on a smartphone using an ODK form and was stored and kept in a secure location.

Trained interviewers contacted each recruited FTM and each husband/male partner of recruited FTMs at home at the pre-arranged date/day and time. The interviewer proceeded to read the informed consent script, obtain informed consent from the FTM or her husband/male partner, and proceed with baseline interview. Subjects who were enrolled in the study by either ASD or CF were under no pressure to participate in the study if eligible.

1.5 Study Design

MOMENTUM used a quasi-experimental research design (see Figure 1.1).There intervention group consisted of three HZs: Kingasani, Lemba, and Matete. The comparison group also consisted of three health HZs: Bumbu, Ndjili, and Masina I. The HZs included in the study are depicted in Figure 1.2 and the locations where FTMs were interviewed in Figure 1.3.

Figure 1.1 MOMENTUM study design

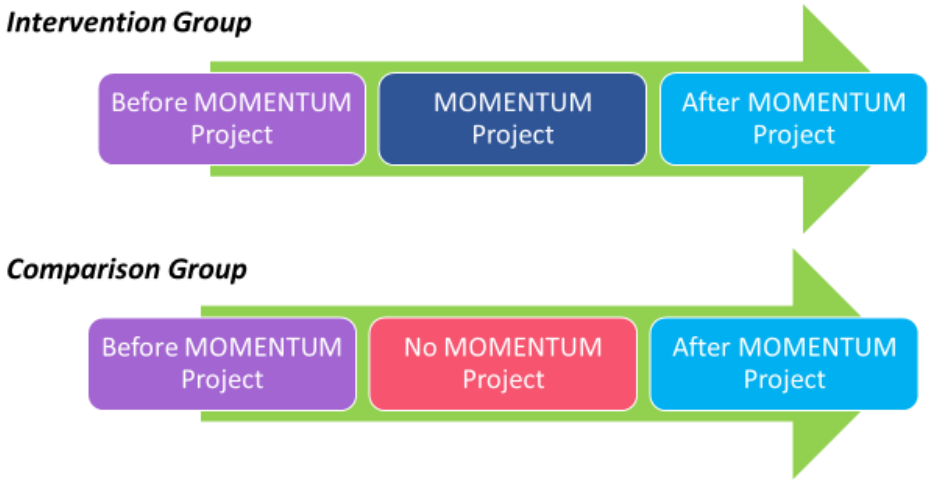


Figure 1.2 Map of MOMENTUM health zones, Kinshasa

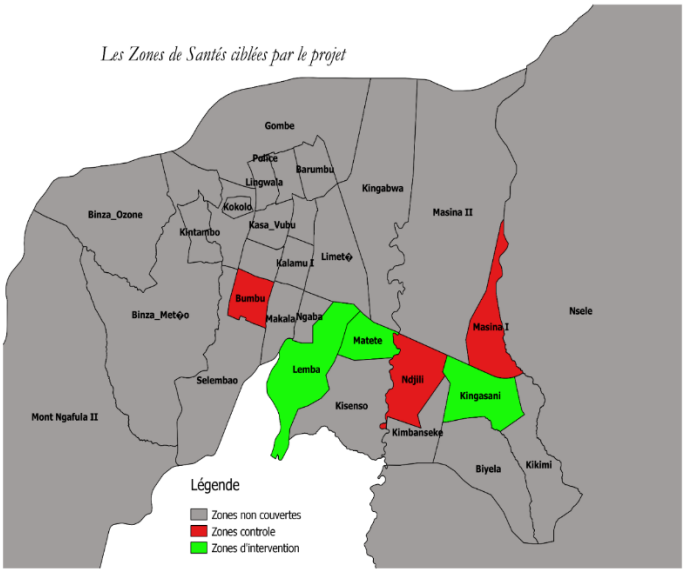
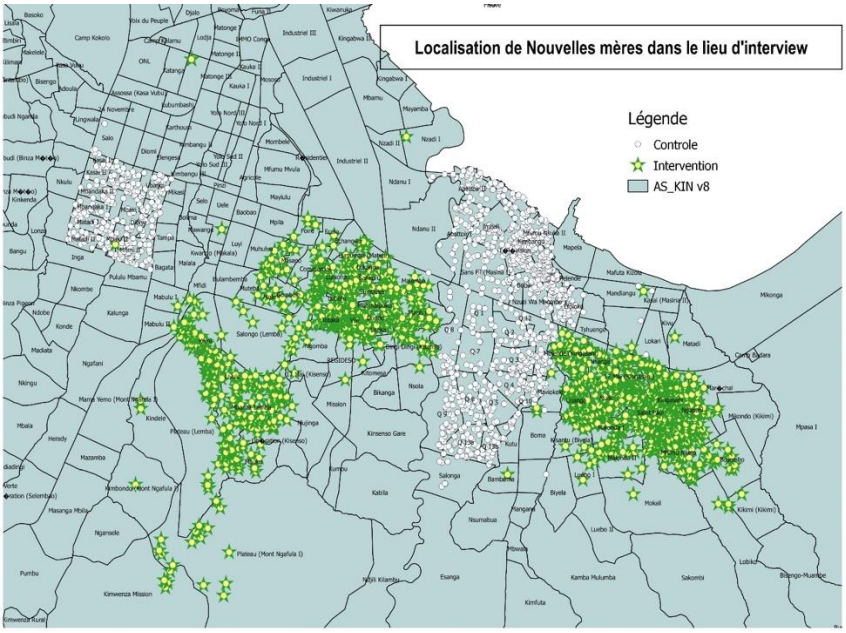


Figure 1.3 Map of locations where FTMs were interviewed



1.5.1 Subject population

The inclusion criteria for FTMs and male partners were:

1. Women age 15-24 years who are six-months pregnant with their first child (FTMs) at baseline
2. Husbands/male partners of women who are six-months pregnant with their first child at baseline
3. Willing and mentally competent to provide informed consent for the baseline evaluation survey

4. Able to speak French or Lingala
5. Reside permanently in the intervention or comparison HZs (i.e., not living in the study area on a temporary basis, for work, vacation or another short-term reason)

Exclusion criteria are:

- Individuals not competent mentally to provide informed consent will not be included; interviewers will be required to assess whether the interviewee can understand the consent form and respond to questions using their own good judgement.

For the purposes of this study, and in accordance with international best practices, 15-17 old FTMs were considered young adults.

Sample size

We calculated approximate samples size requirements using the following formula:

$$n = D\,[Z_{\alpha}\,(2P\,(1 - P))^{0.5} + Z_{\beta}\,(P_1\,(1 - P_1) + P_2\,(1 - P_2))^{0.5}]^{2} / (P_2 - P_1)^2$$

Where:

D = design effect;

$Z\alpha$ = the z-score corresponding to the probability with which it is desired to be able to conclude that an observed change of size (P2 - P1) would not have occurred by chance;

P = (P1 + P2) / 2;

$Z\beta$ = the z-score corresponding to the degree of confidence with which it is desired to be certain of detecting a change of size (P2 - P1), if one occurred;

P1 = the estimated proportion at the time of the first survey; and

P2 = the proportion at some future date such that the quantity (P2 - P1) is the size of the magnitude of change it is desired to be able to detect.

D was set to 2.0 to produce estimates with the same precision as a simple random sample. Two-tailed values of $Z\alpha$ were used. We used the recommended minimum magnitude of change of 10-15 percentage points for behavioral indicators measured in target group survey efforts. Baseline values of P1 were based on the prevalence of newborns' first prenatal check in the first two days of birth, which was estimated at 6.5% among women younger than age 20 nationwide in the 2013-2014 DRC DHS. This indicator was selected because it had the lowest prevalence compared to other indicators of interest that were collected by the survey.

To detect a 10-percentage point difference in timely initiation of postnatal care with 99% confidence and 99% power, assuming an attrition rate of 25%, the sample sizes of the various respondents are as follows:

- 1213 FTMs age 15-24 years in the intervention HZs
- 1213 FTMs age 15-24 years in the comparison HZs
- 1213 male partners of 15-24-year-old FTMs in the intervention HZs
- 1213 male partners in the comparison HZs.

Therefore, our goal was to interview a total of 4,852 respondents in the baseline evaluation survey. This cohort was followed up for 15-16 months during program implementation and were interviewed and were administered the endline survey five to eight months later. Ninety-nine percent power was chosen over the

standard 80 percent to ensure that the sample size was adequate to detect small changes occurring over the duration of the project.

1.6 Questionnaires

The questionnaire, based on the format of the DHS core questionnaires, was adapted to reflect the population and health issues relevant to MOMENTUM objectives. Input was solicited from various stakeholders representing government ministries and agencies, nongovernmental organizations, and international donors. The FTM Questionnaire was used to collect information from all eligible FTMs age 15 to 24 years old. Survey questionnaires were structured, and interviewer directed. Each questionnaire covered a range of topics: (a) household characteristics, (b) individual characteristics, (c) reproduction (primarily number of children ever born to screen out women who are not FTMs, pregnancy history for women, and childbearing history for male partners), (d) contraception and fertility desires, (e) pregnancy and postnatal care, (f) newborn health and nutrition, (g) partner's background and relative responsibilities for the child, (h) gender relations (roles, decision making, attitudes, norms, and related practices), (i) child health, and (j) exposure to the MOMENTUM intervention. The questionnaires were translated from English into French and pretested.

1.7 Training and Field work

Data were collected in the community from the target populations using Smartphones and the SurveyCTO mobile data collection application. Interviewers, supervisors, and controllers were trained on in-depth interview techniques and research ethics, as well as on how to maintain a comfortable environment when posing sensitive questions. Regardless of prior experience, all interviewers and supervisors were required to undergo in-depth training on the process of informed consent. Specific steps emphasized included: reviewing the purpose of the project, discussing the informed consent process, ensuring voluntary participation, verifying understanding of informed consent. They were trained also on the description of family planning methods, the art of interviewing, the use of smartphones to collect data, and QR code scanning. The same interviewers who conducted the baseline survey were used for the endline interviews. There were 7 new interviewers to replace those who were no longer available.

The training originally started in March 2020 (March 15 – 18) but was suspended due to government measures to combat the COVID-19 pandemic. After the restrictions were lifted, the training of the field team re-started on 14th May 2020 and ended on 17th May 2020. In total, 100 data collectors (50 male and 50 female) and 12 supervisors were trained. A one-day training was held for CF agents responsible for updating the addresses of FTMs and their male partners who had moved from the HZ of residence that was recorded at baseline. Many of the FTMs and their partners had changed addresses, thus updating these addresses was a crucial step in reducing the loss-to-follow-up rate.

Due to the COVID-19 restrictions in place in May 2020, the interviewers were asked to pre-test the questionnaires with family members (both male and female) who are between 15 and 24 years old and have at least one child. All field activities were coordinated by the principal investigators (Pis). During data collection, the unique QR code assigned at baseline to the couple (FTM and male partner) permitted us to link the participants' endline data to their baseline data as well as the FTM's data that of her male partner.

FTMs invited by a member of the research team to participate in the endline evaluation survey spent no more than 90 minutes in the interview. FTMs were interviewed by trained female interviewers. Written informed consent was obtained and a hard copy of the informed consent form was provided to each participant in the survey. For all survey participants, consent was also recorded in the smartphones used for data collection.

The interviewer read the informed consent form out loud, which appeared section by section on the screen of her programmed smartphone. After reading each section, interviewer ensured sufficient time to ask verification questions to ensure that the participant understood the voluntary nature of the study.

Once the subject understood and agreed to participate, she signed the consent screen or "check" the consent box on the interviewer's smartphone, which unlocked the appropriate survey questionnaire. Without checking the box or signing on the screen, the interviewer was not able to access the appropriate questionnaire and the smartphone sent data to the server indicating that consent was refused. Participants were under no pressure to participate in the endline evaluation survey, if eligible. The field deployment started on 22 May 2020, date of the effective start of data collection. Interviews began in the intervention HZs (Kingasani, Lemba and Matete) and the interviewers were assigned a specific number of FTMs or male partners who were interviewed in 2018 during the baseline survey and who gave their consent to be recontacted for endline survey. After completing the collection in the intervention HZs, the interviewing team went to the comparison HZs (Bumbu, Ndjili and Masina 1). We started with the intervention HZs because the addresses of these participants were more up to date than those of participants in the control HZs. Since 2018, the participants in the comparison HZs had not been visited, whereas in the intervention HZs the addresses were updated during visits by the MOMENTUM nursing student.

Interviews took place in French or in Lingala. If participants preferred using Lingala, the most used language in Kinshasa's communities, the interviewers switched to this language. Most people who have completed primary education in DRC are completely proficient in French, but some questions or concepts might not translate directly into Lingala (which does not have an official written translation). Interviewers and supervisors were completely proficient in both languages (as are most people with a primary education in DRC). The use of mobile technology for data collection allowed interviewers to automatically upload data to a secure electronic server instead of having to code and enter data manually.

Supervisors assigned the identified FTMs and their partners to the interviewers; helped them to find the physical addresses of FTMs and provided solutions to the technical problems encountered by the interviewers in mobile phone data collection, in collaboration with the controllers and the Co-PI. Supervisors checked the quality of data collected by the interviewers before allowing them to upload data to the server. After this first data quality check done in the field by the supervisors, the controller and Co-PI performed the second quality check. This second quality check served to correct some inconsistencies. Field visits made by Co-PI were an important aspect of supervision. Feedback was provided to controllers, supervisors and interviewers, and, where necessary, FTMs were revisited. Data collection took place from 22nd May 2020 to 3rd August 2020.

Steps to mitigate the transmission of COVID-19

Transportation was provided for interviewers and supervisors every day to prevent the use of the public transportation and reduce the chance of exposure of training participants to the COVID-19 virus. The measures put in place during the transport of training participants were in compliance with the COVID-19 measures enacted by the government. Six to eight busses were provided daily to pick up training participants from their homes. Four areas were designated as collection points, and to board the bus the training participants had to comply with the COVID-19 measures (wear a face mask, sanitize before boarding the bus and maintain physical distance from others). The buses that picked up the training participants took them from their homes to the training site and back to their homes. Transportation was also provided during data collection.

On arrival at the training site, the interviewers and supervisors washed their hands at designated handwashing stations and afterwards their temperatures were recorded. Subsequently, the interviewers disposed of the masks they brought from their place of residence and replaced it with masks provided at the training site. 50 female interviewers and then 50 male interviewers. We provided three training rooms per session (session

for the 50 male interviewers and session for the 50 female interviewers): and in each training room, there were less than 20 people (approximately 14-16 interviewers and 3-4 supervisors).

1.8 Data Processing

Data coming from the interviewer's smartphones were monitored closely by the study PI and the research team in the DRC, including the Co-PI. Periodic spot checks were undertaken by supervisors and controllers in the field to ensure that interviewing procedures were respected at all levels. The Co-PI served as the data safety monitor. He kept all data in an encrypted file on a project computer, where they were stored on a password-protected computer.

Data accuracy was assured in several ways. The Co-PI monitored submission of data to the server daily and ran automated routines that generated progress reports on individual field staff. He flagged and reported on interviewers who did not submit data according to plan and performed validation and quality assurance checks on data received. He provided standardized feedback specific to each interviewer and supervisor every two days during the data collection period. He generated preliminary tables as part of the data quality assurance and communicated regularly with the Tulane PI to resolve outstanding issues. The study PIs enforced protocol compliance at every level. All local collaborators were well-oriented towards the study protocol to help ensure compliance.

Only the PI, Co-PI, and select research assistants working on data analysis had direct access to the stored data. All content was coded. No consent forms with the names of participants and no identifiers were linked to survey or interview data. Data editing was accomplished using Stata. Secondary editing was initiated in August 2020 and completed in December 2020.

1.9 Response Rates

Table 1.1 shows response rates. A total of 2,316 baseline addresses of FTMs were visited by data collectors, of which 83% completed the interview, 2% refused to be interviewed and 1% died between baseline survey and endline survey. Overall, the attrition rate was at 20.7%. The attrition rate was similar in comparison and intervention HZs (20.0% and 21.4%, respectively, p=0.394).

Table 1.1 Percent distribution of included FTMs and those lost to follow-up, by study arm, Kinshasa

	Total		Comparison		Intervention	
Results	**Frequency**	**%**	**Frequency**	**%**	**Frequency**	**%**
Completed	1927	79.27	969	79.95	958	78.59
Change addresses (traveled or moved)	309	12.71	136	11.22	173	14.19
Refused	40	1.65	29	2.39	11	0.90
Not at home	135	5.55	67	5.53	68	5.58
Died	19	0.78	10	0.83	9	0.74
Postponed	1	0.04	1	0.08	0	0.00
Total	2,431	100.00	1,212	100.00	1,219	100.00

2 CHARACTERISTICS OF FIRST-TIME MOTHERS

Anastasia J. Gage

Key findings:

- Housing characteristics
    - In the endline survey, 92% of FTMs in comparison HZs lived in a household with access to piped water for drinking compared to 85% in intervention HZs. In both study arms, access to piped water declined significantly between the baseline and endline surveys.
    - Access to a flush/pour flush toilet tripled over time in comparison HZs (from 7% to 29%) but did not change significantly in intervention HZs (21% in both the baseline and endline surveys).
    - At endline, 95% of FTMs in comparison HZs and 93% of FTMs in intervention HZs lived in households that had electricity.
    - In intervention HZs, household ownership of a radio, TV, and mosquito nets for sleeping increased significantly between the baseline and endline surveys.
- Living arrangements
    - Significantly more FTMs were living in the same household as their mother at the endline survey than at the baseline survey: 39% versus 27% in comparison HZs and 39% versus 25% in intervention HZs.
    - The percentage of FTMs living with their husband/partner's mother declined from 23% to 10% in comparison HZs and from 24% to 10% in intervention HZs.
    - More FTMs were living with their sister or brother than with their mother or husband/partner's mother.
- Baseline characteristics of respondents
    - Two in five FTMs completed secondary school or had higher levels of education.
    - Three in 10 FTMs were never married.
    - Thirty-six percent of FTMs worked in the past 12 months.
    - TV was the most frequently accessed form of media. Three in five FTMs watched TV at least once a week.
    - Eighty percent of FTMs had two parents who had attended secondary or higher levels of schooling.
- Relationship closeness
    - FTMs perceived themselves to be closer to their husband/partner and mother than to their father and their husband/partner's mother. In the endline survey, the mean relationship closeness scores for intervention HZs were 5.5 for the husband/partner, 5.7 for the FTM's mother, 4.8 for the FTM's father, and 3.8 for the husband/partner's mother, on a scale of one to seven.
    - There was a significant decline in the closeness of the FTM's relationship with her husband/male partner between the baseline and endline surveys, from 6.0 to 5.4 in comparison HZs and from 5.9 to 5.5 in intervention HZs.
    - The FTM's relationship with her mother became significantly closer between the baseline and endline surveys in comparison HZs (mean scores of 5.6 and 5.9, respectively), but was significantly less close over time in intervention HZs (mean scores of 6.0 and 5.7, respectively).

- The closeness of the FTM's relationship with her husband/partner's mother increased significantly in comparison HZs but declined significantly in intervention HZs.

- Reactions to FTM's pregnancy
  - The parents of the FTM were more unhappy with her pregnancy than the husband/partner or his mother.
  - In comparison HZ's the mean happiness score for the FTM's mother declined significantly over time in comparison HZs (from 2.5 to 2.7) but increased significantly in intervention HZs (from 2.3 to 2.5). In comparison HZs, the percentage of FTMs age 15-19 who perceived their mother/mother figure to be "very unhappy" with the pregnancy increased from 36% at baseline to 50% at endline.
  - More of younger than older FTMs perceived their mother to be "very unhappy" with the pregnancy.

This chapter presents housing characteristics and baseline sociodemographic characteristics of FTMs age 15-24 years who participated in the 2018 MOMENTUM Baseline Survey in Kinshasa and were interviewed in the endline survey. Differences between comparison HZs and intervention HZs are analyzed, with the expectation that this information would help the reader interpret findings presented later in this report. The chapter begins with an overview of household characteristics, including household possessions and the presence of the FTM's family members. Next, we describe baseline sociodemographic characteristics of FTMs by age group (15-19 versus 20-24) and HZ. Then, we discuss relationship closeness with key individuals and the FTM's perception of the extent to which these individuals were happy about her pregnancy.

2.1 Housing Characteristics

Table 2.1 presents the percent distribution of FTMs by housing characteristics, according to age group, study arm, and survey round. In both the baseline and endline surveys, piped water was the most common source of drinking water and was reported by at least 85% of FTMs. In both age groups, intervention HZs showed a significant decline in the percentage of FTMs living in households with piped water. For example, among FTMs age 15-19 in intervention HZs, the percentage reporting piped water as a source of drinking water declined from 92% at baseline to 85% at endline. This decline was accompanied by a slight increase in the percentage obtaining their drinking water from a tube well or borehole. In both study arms, water treatment prior to drinking more than doubled between the baseline and endline surveys (from 10% to 22% among all FTMs in comparison HZs and from 9% to 29% among their counterparts in intervention HZs).

At the endline survey, 75% of FTMs in comparison HZs and 69% of those in intervention HZs lived in a household with an improved toilet facility (that is a flush/pour flush toilet, ventilated improved pit latrine or pit latrine with slab), the most common toilet facility being a pit latrine with slab (45% and 47%, respectively). In comparison HZs, there was a substantial increase in the percentage of FTMs living in households with a flush or pour flush toilet (from five percent at baseline to 25% at endline among those age 15-19 and from nine percent at baseline to 32% at endline among those age 20-24). Similar increases in access to a flush/pour flush toilet were not seen in intervention HZs, but it is noted that, at baseline, access to this type of toilet facility was significantly higher in intervention than in comparison HZs. At the endline survey, at least one in five FTMs lived in a household that used a non-improved toilet facility, mostly a pit latrine without slab or an open pit latrine. The use of a pit latrine without slab/open pit latrine at home was more common in intervention HZs than in comparison HZs.

Table 2.1 Percent distribution of FTMs age 15-24, by housing characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19				Age 20-24				Total			
	Comparison		Intervention		Comparison		Intervention		Comparison		Intervention	
Housing Characteristic	**T1**	**T2**	**T1**	**T2**	**T1**	**T2**	**T1**	**T2**	**T1**	**T2**	**T1**	**T2**
Source of drinking water		***		***		**		*		***		***
Piped water	93.2	92.1	92.0	84.8	95.2	91.6	90.2	85.5	94.3	91.8	91.1	85.2
Tube well or borehole	1.8	4.5	2.7	9.0	0.8	5.1	4.0	9.1	1.2	4.9	3.3	9.1
Dug well	4.5	0.9	3.5	2.3	1.9	1.3	2.8	1.9	3.1	1.1	3.1	2.1
Water from spring	0.0	0.9	1.0	2.9	0.6	0.4	0.9	1.5	0.3	0.6	0.9	2.2
Surface water	0.0	0.0	0.4	0.0	0.0	0.0	0.0	0.4	0.0	0.0	0.2	0.2
Other	0.5	1.6	0.4	1.0	1.5	1.5	2.1	1.5	1.0	1.5	1.3	1.3
Water treatment prior to drinking		***		***		***		***		***		***
Yes	5.9	15.8	7.0	25.2	12.7	27.6	10.9	33.2	9.6	22.2	8.9	29.1
No	94.1	84.2	93.0	74.8	87.3	72.4	89.1	66.8	90.4	77.8	91.1	70.9
Type of toilet facility		***		*		***		**		***		***
Flush/pour flush toilet	4.7	25.3	17.0	16.8	9.1	31.7	25.5	24.9	7.1	28.8	21.2	20.8
Ventilated improved pit latrine	3.2	0.2	0.6	0.8	1.9	0.6	0.4	2.6	2.5	0.4	0.5	1.7
Pit latrine with slab	61.4	42.0	41.2	44.7	68.6	48.1	46.0	48.9	65.3	45.3	43.5	46.8
Open pit latrine	27.1	30.0	38.7	34.0	18.6	18.6	26.4	22.3	22.5	23.8	32.7	28.3
Composting toilet	0.9	0.2	1.2	0.0	0.6	0.0	1.3	0.0	0.7	0.1	1.3	0.0
Bucket toilet	1.1	0.9	0.8	1.4	0.4	0.8	0.0	0.4	0.7	0.8	0.4	0.9
Hanging toilet/latrine	0.5	0.2	0.2	0.2	0.4	0.0	0.4	0.2	0.4	0.1	0.3	0.2
No toilet	0.9	0.9	0.2	1.8	0.2	0.0	0.0	0.4	0.5	0.4	0.1	1.1
Other	0.2	0.2	0.0	0.2	0.2	0.2	0.0	0.2	0.2	0.2	0.0	0.2
Type of cooking fuel		**		***		*		***		***		***
Electricity	9.3	6.5	8.0	12.3	10.1	14.4	10.4	16.8	9.7	10.8	9.2	14.5
LPG	0.2	0.0	0.0	0.2	0.8	0.2	0.2	0.2	0.5	0.1	0.1	0.2
Natural gas	0.7	0.0	0.0	0.0	0.6	0.2	0.2	0.2	0.6	0.1	0.1	0.1
Biogas	0.0	0.0	0.0	0.0	0.0	0.2	0.0	0.2	0.0	0.1	0.0	0.1
Kerosene	0.2	0.0	0.0	0.0	0.2	0.0	0.0	0.0	0.2	0.0	3.7	0.3
Coal/lignite	3.2	0.7	4.1	0.2	2.3	0.4	3.2	0.4	2.7	0.5	0.0	0.0
Charcoal	83.5	89.2	82.4	80.7	84.2	81.2	81.5	77.0	83.9	84.8	81.9	78.9
Wood	1.1	2.7	3.9	4.1	0.6	1.7	2.1	3.2	0.8	2.2	3.0	3.7
Straw/shrubs/grass	0.0	0.0	0.6	0.0	0.0	0.0	1.3	0.0	0.0	0.0	0.9	0.0
Crop residue/plant stalks	0.0	0.0	0.0	0.4	0.0	0.0	0.0	0.2	0.0	0.0	0.0	0.3
Animal dung	0.0	0.0	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0
Other	1.8	0.9	0.8	2.0	1.3	1.7	1.1	1.7	1.5	1.3	0.9	1.9
Flooring material		ns		ns		ns		ns		ns		ns
Earth/sand	6.3	5.4	3.5	5.3	1.3	0.8	2.1	3.0	3.6	2.9	2.8	4.2
Dung	0.0	0.0	3.5	5.3	0.0	0.2	0.0	0.0	0.0	0.1	0.1	0.0
Wooden planks	0.2	0.0	0.2	0.0	0.2	0.0	0.0	0.0	0.2	0.0	0.0	0.0
Ceramic tiles	6.1	9.3	8.0	8.2	12.0	14.4	9.4	11.7	9.3	12.1	8.7	9.9
Cement	86.9	84.7	87.9	86.5	85.2	84.4	88.1	84.9	86.0	84.5	88.0	85.7
Carpet	0.2	0.2	0.4	0.0	1.1	0.2	0.2	0.4	0.7	0.2	0.3	0.2
Other	0.2	0.5	0.0	0.0	0.2	0.0	0.2	0.0	0.2	0.2	0.1	0.0

	Age 15-19				Age 20-24				Total			
	Comparison		Intervention		Comparison		Intervention		Comparison		Intervention	
Housing Characteristic	**T1**	**T2**	**T1**	**T2**	**T1**	**T2**	**T1**	**T2**	**T1**	**T2**	**T1**	**T2**
Wall material		***		***		*		***		***		***
No walls	1.6	0.0	1.6	0.2	0.6	0.0	0.9	0.0	1.0	0.0	1.3	0.1
Cane/palm trunk	0.0	0.0	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0
Bamboo with mud	0.0	0.0	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0
Mud	0.5	0.0	0.0	0.0	0.2	0.0	0.0	0.0	0.3	0.0	0.1	0.2
Stone with mud	0.5	0.0	0.2	0.2	0.6	0.0	0.0	0.2	0.2	0.0	0.2	0.0
Plywood	0.0	0.0	0.4	0.0	0.2	0.0	0.6	0.4	0.3	0.0	0.4	0.3
Cardboard on the wall	0.9	0.5	0.2	0.2	0.4	0.0	0.2	0.4	0.5	0.2	0.1	0.2
Reclaimed wood	0.2	0.0	0.0	0.0	76.0	81.4	52.6	68.9	0.3	0.0	0.0	0.0
Cement	67.5	75.8	52.0	63.1	5.3	4.0	11.3	7.9	72.1	78.8	52.3	66.0
Stone with lime/cement	3.4	2.0	11.1	5.7	4.6	5.7	16.2	7.0	4.4	3.1	11.2	6.8
Brick	4.1	4.7	15.6	9.6	6.8	3.2	12.6	6.0	4.3	5.3	15.9	8.4
Cement blocks	11.3	5.2	8.8	7.6	0.4	0.2	0.4	0.0	8.9	4.1	10.6	6.8
Covered adobe	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2	0.1	0.2	0.0
Wood planks/shingles	0.0	0.0	0.2	0.0	0.4	0.2	0.9	0.2	0.2	0.1	0.5	0.1
Other	10.2	11.7	9.4	13.3	4.6	5.3	4.5	8.9	7.1	8.3	7.0	11.2
Household has electricity		ns		*		ns		ns		ns		**
Yes	93.2	94.8	88.5	92.6	95.4	95.4	91.1	93.6	94.4	95.1	89.8	93.1
No	6.8	5.2	11.5	7.4	4.6	4.6	8.9	6.4	5.6	4.9	10.2	6.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
N	**443**		**488**		**526**		**470**		**969**		**958**	

*** p < .001; ** p < .01; * p < .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 2.1 also shows that charcoal was the most reported fuel used by the household for cooking (at least 77%), followed by electricity (11%-15%). In the overall sample, there was an increase in the percentage of FTMs reporting electricity as the typical fuel from nine percent at baseline to 15% at endline. Cement was the most commonly reported/observed flooring material (approximately 84% to 88%), followed by ceramic tiles. There were no significant differences in flooring material between the baseline and endline surveys, regardless of age group and study arm. Cement was also the most common wall material (79% in comparison HZs and 66% in intervention HZs at the endline survey). In both study arms, the percentage of FTMs living in dwellings with cement walls increased significantly between the baseline and the endline surveys, for example, from 52% to 66% in the overall sample of FTMs residing in intervention HZs. Overall, nine in ten FTMs live in households that had access to electricity.

Data on household possession of consumer durables, an indicator of socioeconomic status, are shown in Table 2.2. TV and mobile phones were commonly reported household possessions and were reported by 75% to 94% of FTMs. Household ownership of a TV was significantly more prevalent in comparison HZs than in intervention HZs, but increased over time in the latter HZs, especially among FTMs age 20-24 (from 76% to 83%) and in both age groups combined (from 75% to 81%). Household ownership of a radio was significantly less common than ownership of a TV but increased significantly over time, especially in comparison HZs. At endline, refrigerators were owned by at least 25% of FTMs' households and gas/electric stoves by at least 40%. Ownership of a stove was significantly higher at endline than at baseline among FTMs age 15-19 residing in intervention HZs. Computer ownership was low and reported by 10% to 11% of FTMs. Household ownership of computers increased significantly over time only among FTMs age 15-19 residing in intervention HZs. Few FTMs reported that their households owned a means of transportation. Three to four percent of households owned a bicycle and about 7% owned a motorcycle or scooter. Less than six percent of FTMs lived in households that owned a car or truck. At the endline survey, at least four in five FTMs reported that their household owned a mosquito net for sleeping.

2.2 Living Arrangements

Table 2.3 presents data on the living arrangements of FTMs. In the endline survey, 39% of FTMs were living with their mother (up from 27% and 25% in comparison HZs and intervention HZs, respectively) and at least one in five was co-residing with her father (up from 14% and 13% in comparison HZs and intervention HZs, respectively). More 15-19-year-old FTMs lived with their biological parent compared to those age 20-24. Co-residence with mothers increased significantly between the baseline and endline surveys, regardless of age group or study arm. However, the increase over time in co-residence with the father was statistically significant for FTMs age 15-19 but not for older FTMs.

At least half as many FTMs were living with their mother-in-law or father-in-law at endline than at baseline. For example, among all FTMs residing in intervention HZs, the percentage who lived with their mother-in-law or male partner's mother declined from 24% at baseline to 10% at endline.

In both age groups and the overall sample, the percentage of FTMs living with a sibling increased significantly between the baseline and endline surveys. Co-residence with a sister or brother was more common among younger than older FTMs. At endline, at least half of FTMs age 15-19 lived in the same household as their sister or brother. Co-residence with grandmothers was not common and increased significantly only among FTMs age 15-19 in comparison HZs (from 13% at baseline to 20% at endline). At least a third of FTMs lived with other relatives at endline, but in intervention HZs, significantly higher baseline levels (about 10 percentage points higher) were observed.

Table 2.2 Percentage of FTMs age 15-24 years living in households possessing various household effects and means of transport, by age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.
Household effects																		
Radio	41.5	50.3	**	46.5	50.6		50.2	56.8	*	46.8	52.6		46.2	53.9	***	46.7	51.6	*
TV	79.2	79.9		74.6	78.7		83.8	86.1		76.0	82.6	*	81.7	83.3		75.3	80.6	**
Non-mobile phone	1.1	0.5		1.2	1.2		2.1	0.8		0.9	0.6		1.7	0.6		1.0	0.9	
Computer	5.9	7.7		6.8	10.7	*	11.6	11.4		12.3	11.7		9.0	9.7		9.5	11.2	
Refrigerator	24.2	26.9		17.6	21.7		28.1	31.2		25.5	30.6	*	26.3	29.2		21.5	26.1	
Stove	42.9	43.3	*	27.0	37.7	***	49.8	48.7		38.1	44.7		46.6	46.2		32.5	41.1	***
Watch	66.4	64.1		62.3	62.5		70.5	73.4		68.9	68.3		68.6	69.1		65.6	65.3	
Mobile phone	84.7	83.5		86.1	86.1		91.4	94.3		90.0	91.1		88.3	89.4		88.0	88.5	
Mosquito net for sleeping	76.3	76.5		72.1	77.0		87.3	85.9		80.0	85.1	*	82.2	81.6		76.0	81.0	***
Means of transport																		
Bicycle	3.4	4.1		2.5	4.3		3.0	2.9		3.6	3.0		3.2	3.4		3.0	3.7	
Motorcycle/scooter	4.3	6.3		4.5	7.2		4.6	7.4		6.0	7.0		4.4	6.9		5.2	7.1	
Animal drawn cart	0.0	0.5		0.0	0.6		0.0	0.0		0.2	0.4		0.0	0.2		0.1	0.5	
Car/truck	5.2	2.3		3.3	3.7		5.1	4.6		4.9	4.5		5.2	3.5		4.1	4.1	
Boat with a motor	0.2	0.2		0.0	0.0		0.4	0.2		0.4	0.0		0.3	0.2		0.2	0.0	
N	**433**			**488**			**526**			**470**			**969**			**958**		

*** p < .001; ** p < .01; * p < .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 2.3 Percentage of FTMs age 15-24 years living in the household with specific individuals, by age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Adult Living in Household	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
Mother	31.2	46.3	***	28.7	45.9	***	22.6	32.9	***	21.5	31.1	***	26.5	39.0	***	25.2	38.6	***
Stepmother	2.5	2.7		3.1	2.5		1.0	2.1		1.3	0.6		1.7	2.4		2.2	1.6	
Grandmother	13.3	20.3	**	9.4	13.7		8.6	9.1		7.7	7.4		10.7	14.2		8.6	10.6	
Father	14.7	22.3	***	15.4	26.2	***	14.1	19.2		11.1	16.8		14.3	20.6	***	13.3	21.6	***
Stepfather	2.3	3.2		2.9	2.5		0.4	0.8	*	1.3	0.6		1.2	1.9		2.1	1.6	
Grandfather	5.4	8.4		2.7	3.7		1.9	2.1		1.9	2.8		3.5	5.0		2.3	3.2	
Mother-in-law	27.8	10.6	***	30.1	10.9	***	19.2	9.9	***	17.7	8.7	***	23.1	10.2	***	24.0	9.8	***
Father-in-law	16.9	6.1	****	19.3	5.9	***	10.6	3.6	***	10.0	5.7	*	13.5	4.7		14.7	5.8	
Sister	39.5	60.0	***	35.7	53.9	***	30.8	46.0	***	34.7	44.5	**	34.8	52.4	***	35.2	49.3	***
Brother	37.0	52.6	***	33.4	50.6	***	26.6	40.1	***	27.7	34.7	*	31.4	45.8	***	30.6	42.8	***
Other - relative	47.6	42.0		47.3	38.5	***	41.4	40.1		47.0	35.7	**	44.3	41.0		47.2	37.2	***
Other non-relative	5.2	3.2		8.0	5.3		4.2	2.9		5.3	3.2		4.6	3.0		6.7	4.3	*
N	**443**			**488**			**526**			**470**			**969**			**958**		

*** p < .001; ** p < .01; * p < .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

2.3 Characteristics of Respondents

In Table 2.4, we present the percent distribution of FTMs who were interviewed in both the baseline and endline surveys, by baseline characteristics, age group, and study arm. These characteristics, measured at baseline, will be used throughout the report. At least two in five FTMs had attained secondary or higher levels of education, with the percentage being considerably higher among older than younger FTMs. For example, in intervention HZs, the percentage of FTMs with secondary or higher levels of education was 60% in the 20-24 age group versus 21% among those age 15-19. Nearly four in five FTMs had two parents with secondary or higher levels of education. About three in ten FTMs were never married. More FTMs age 15-19 than older FTMs were never married (e.g., 42% versus 22% in comparison HZs and 36% versus 24% in intervention HZs). In the 15-19 age group, there were more never-married FTMs in comparison than in intervention HZs.

Overall, one third of FTMs (30% in comparison HZs and 38% in intervention HZs) lived in the poorest households), with the percentage being much higher in the younger age group. Only about a third of FTMs worked in the past 12 months. Among younger FTMs, the employment rate was significantly higher in intervention HZs than in comparison HZs (32% versus 26%). The data also show that three in five FTMs watch TV at least once a week. Age differences in weekly TV exposure were small.

2.4 Relationship Closeness with Key Individuals

In both the baseline and endline surveys, we used the 'Inclusion of the Other in the Self' (IOS) Scale (Aron, et al., 1992) to measure the FTM's perceived closeness of her relationship with a) her husband/male partner, (b) her mother/mother-figure, (c) her father/father-figure, and (d) her husband/male partners' mother or mother-figure. FTMs were asked to assess their relationship with each specific individual (referred to as "X" in the Figure 2.1) by selecting one out of seven pairs of increasingly overlapping circles, as depicted in Figure 1 below. In each pair of circles "You" referred to the FTM and "X" to the key individual in question. The scale ranged from 1 "not close at all" (represented by non-overlapping circles) to 7 "Very close" (represented by almost completely overlapping circles).

Figure 2.2 shows the distribution of the "Inclusion of the other in self" score, hereafter referred to as the relationship closeness score, for specific key individuals, by age group and study arm. Table 2.5 presents the mean scores and standard deviations for FTMs who did not declare that a given key individual was deceased or absent. The most striking finding is the significant decline in the closeness of the FTM's relationship with her husband/male partner between the baseline and endline surveys. This decline is depicted in Figure 2 and is reflected in the mean scores presented in Table 2.5.

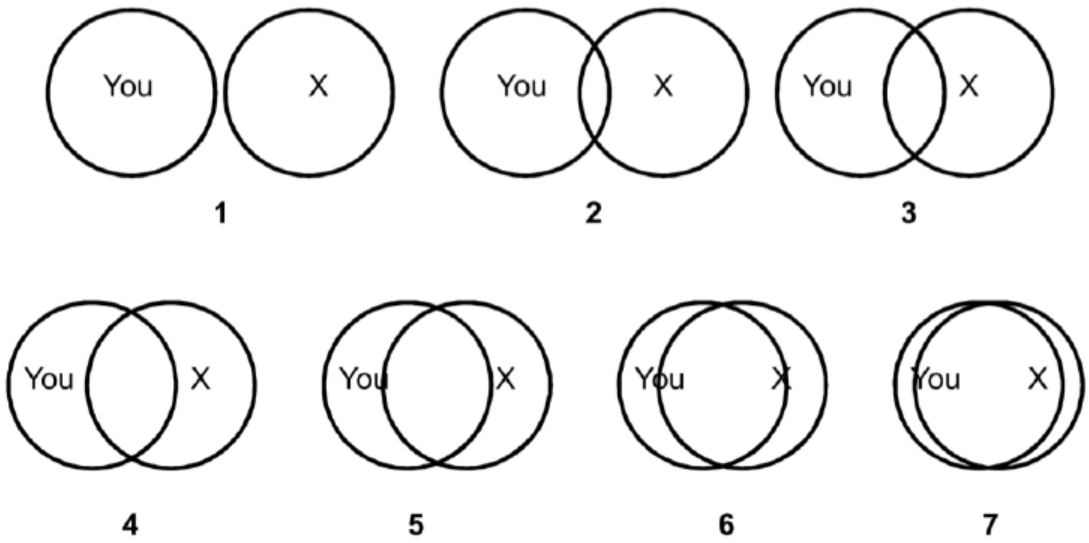
Table 2.4 Percent distribution of FTMs age 15-24 years, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19				Age 20-24				Total			
	Comparison		Intervention		Comparison		Intervention		Comparison		Intervention	
Baseline Characteristics	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**
FTM's highest level of education												
None/primary/secondary incomplete	83.5	370	79.3	387	35.2	185	40.4	190	57.3	555	60.2	577
Secondary complete/higher	16.5	73	20.7	101	64.8	341	59.6	280	42.7	414	39.8	381
Never married	*											
No	58.0	257	64.5	315	78.5	413	76.0	357	69.1	670	70.1	672
Yes	42.0	186	35.5	173	21.5	113	24.0	113	30.9	299	29.9	286
Household wealth	*				*				***			
Low	35.9	159	41.6	203	25.7	135	33.4	157	30.3	294	37.6	360
Middle	33.4	148	35.2	172	34.2	180	31.9	150	33.8	328	33.6	322
High	30.7	136	23.2	113	40.1	211	34.7	163	35.8	347	28.8	276
Worked last year	*											
No	73.8	327	67.8	331	54.9	289	59.1	278	63.6	616	63.6	609
Yes	26.2	116	32.2	157	45.1	237	40.9	192	36.4	353	36.4	349
Watched TV at least once a week												
No	38.1	169	40.8	199	35.6	187	34.9	164	36.7	356	37.9	363
Yes	61.9	274	59.2	289	64.4	339	65.1	306	63.3	613	62.1	595
Both parents have secondary/higher education												
No	22.1	98	18.0	88	19.2	101	23.0	108	20.5	199	20.5	196
Yes	77.9	345	82.0	400	80.8	425	77.0	362	79.5	770	79.5	762
Total	100.0		100.0		100.0		100.0		100.0		100.0	
N	**433**		**488**		**526**		**470**		**969**		**958**	

*** p < .001; ** p < .01; * p < .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

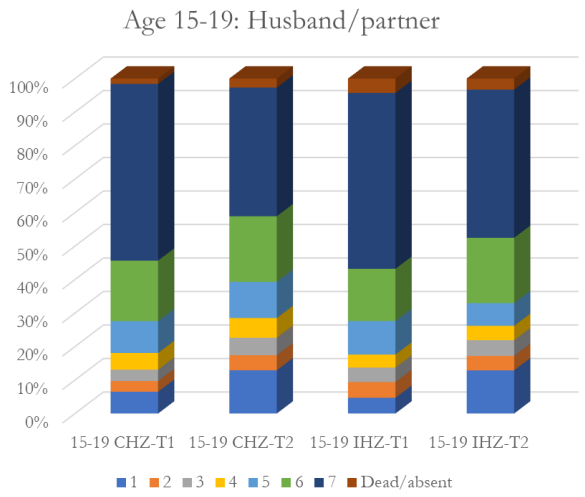
Figure 2.1 'Inclusion of the Other in Self (IOS)' Pictorial Tool

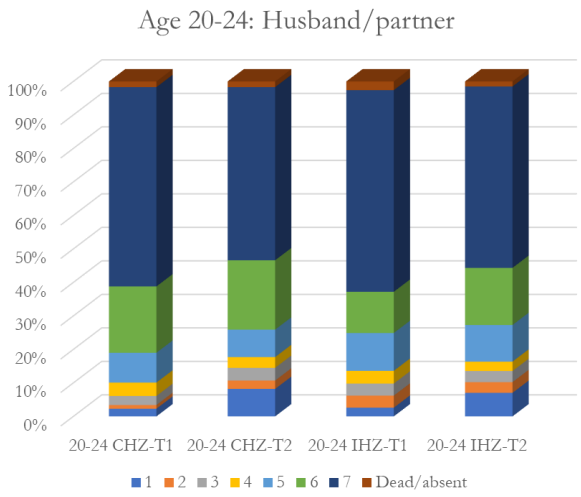


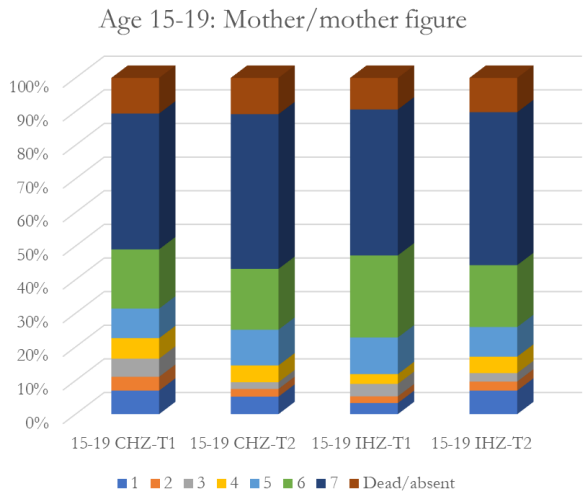
For example, in comparison HZs, 53% of FTMs age 15-19 assigned a score of 7 to their relationship with their husband/partner at baseline compared to 38% at endline, while the percentage who rated their relationship closeness as "1" (the lowest score) almost doubled over time, from 7% at baseline to 13% at endline (not shown). In comparison HZs, there was a significant improvement in the closeness of the FTM's relationship with her mother/mother figure, as was reflected in the higher scores shown in Table 2.5. However, the opposite was true in intervention HZs where the decrease in the closeness of the FTM-mother relationship attained statistical significance among those age 20-24.

As Figure 2.2 shows, more fathers/father figures than mothers/mother figures were reported as deceased or absent. FTMs generally felt closer to their mothers than their fathers. At endline, the relationship closeness scores for mothers/mother figures and fathers/father figures in the overall sample were 5.912 (SD =1.631) and 5.145 (SD = 1.878) in comparison HZs, respectively, and 5.728 (SD = 1.753) and 4.786 (SD = 2.026) in intervention HZs, respectively. However, FTM-father/father figure relationship closeness scores increased significantly between the baseline and endline surveys in comparison HZs, but not in intervention HZs (see Table 2.5). Most FTMs ranked themselves as having a closer relationship with their father/father figure than with their husband/partner's mother or mother figure. Table 2.5 shows that, in the overall sample, FTMs residing in comparison HZs developed significantly closer relationships with their husband/partner's mother or mother figure between the baseline and endline surveys (Mean (SD) = 3.883 (1.897) versus 4.120 (1.972)). However, in intervention HZs, the FTM's relationship closeness with her husband/partner's mother or mother figure deteriorated significantly over time (Mean (SD) = 4.019 (1.974) versus 3.760 (1.983)).

Figure 2.2 Percent distribution of FTMs by relationship closeness with specific individuals, by age group, survey round, and study arm, Kinshasa







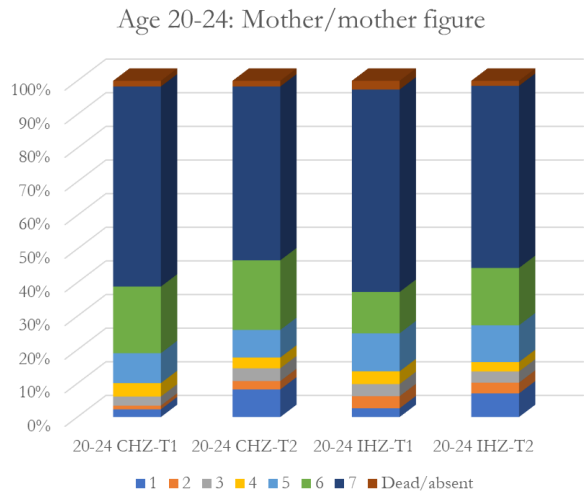
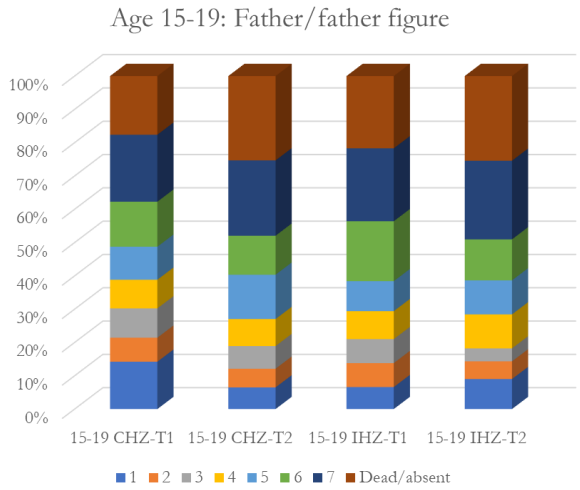
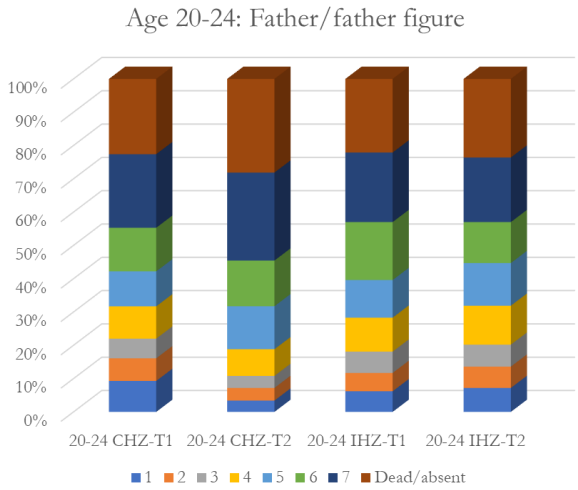
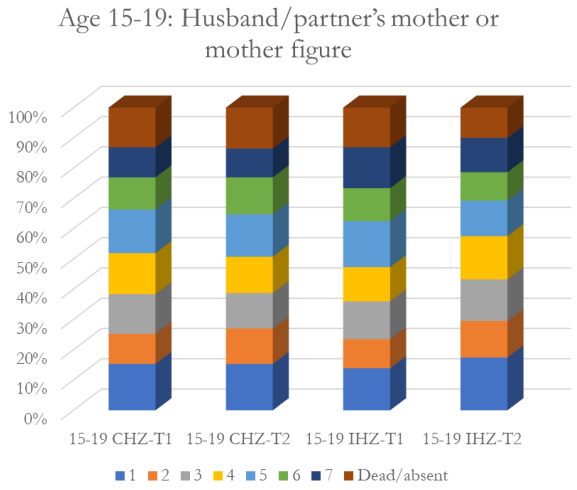


Figure 2.2 contd. Percent distribution of FTMs by relationship closeness with specific individuals, by age group, survey round, and study arm, Kinshasa







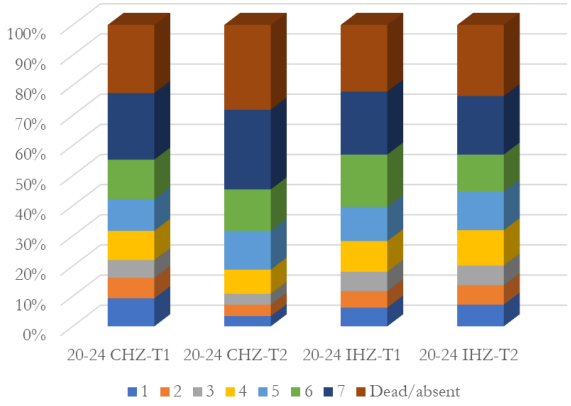


Table 2.5 Mean relationship closeness scores for key individuals as reported by FTMs age 15-24, by age group, survey round, and study arm, Kinshasa

	Partner		Mother		Father		Mother-in-law	
	Mean (SD)	**N**	**Mean (SD)**	**N**	**Mean (SD)**	**N**	**Mean (SD)**	**N**
15-19: Comparison HZs								
Baseline	5.775 (1.811)	436	5.462 (1.942)	396	4.381 (2.203)	365	3.844 (1.966)	385
Endline	5.155 (2.139)	431	5.825 (1.703)	395	4.894 (1.980)	331	3.833 (1.993)	383
Significance	***		**		**		ns	
15-19: Intervention HZs								
Baseline	5.784 (1.789)	467	5.903 (1.535)	442	4.890 (1.997)	382	4.045 (2.028)	424
Endline	5.307 (2.173)	472	5.710 (1.847)	438	4.857 (2.084)	364	3.713 (2.009)	439
Significance	***		ns		ns		*	
20-24: Comparison HZs								
Baseline	6.190 (1.355)	517	5.775 (1.612)	462	4.715 (2.096)	407	3.917 (1.834)	434
Endline	5.745 (1.874)	517	5.989 (1.563)	446	5.365 (1.757)	378	4.369 (1.923)	442
Significance	***		*		***		***	
20-24: Intervention HZs								
Baseline	6.033 (1.574)	458	6.010 (1.407)	418	4.934 (1.914)	366	3.993 (1.917)	403
Endline	5.786 (1.834)	463	5.746 (1.652)	421	4.713 (1.967)	359	3.811 (1.956)	408
Significance	*		*		ns		ns	
Total: Comparison HZs								
Baseline	6.000 (1.592)	953	5.631 (1.778)	858	4.556 (2.151)	772	3.883 (1.897)	819
Endline	5.477 (2.019)	948	5.912 (1.631)	841	5.145 (1.878)	709	4.120 (1.972)	825
Significance	***		***		***		*	
Total: Intervention HZs								
Baseline	5.907 (1.690)	925	5.955 (1.474)	860	4.912 (1.956)	748	4.019 (1.974)	827
Endline	5.544 (2.026)	935	5.728 (1.753)	859	4.786 (2.026)	723	3.760 (1.983)	847
Significance	***		**		ns		**	

*** p < .001; ** p < .01; * p < .05

Note: Excludes FTMs who reported that the specific individual was deceased or absent.

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

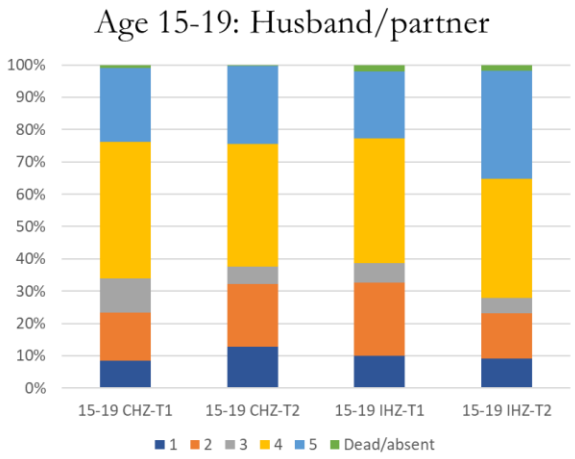
2.5 Reactions of Key Individuals to the FTM's Pregnancy

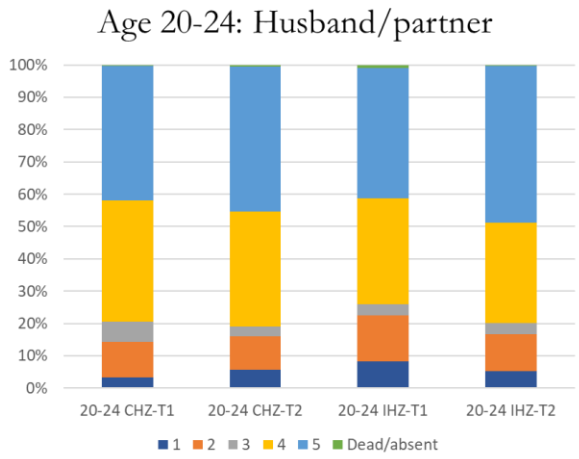
In the baseline and endline surveys, the FTM was asked how specific individuals – their husband/partner, their mother/mother figure, their father/father figure, and their husband/partner's mother or mother figure – felt about her pregnancy, and to rate the extent to which the individual was happy on a scale of 1 to 5, with 1 being "very unhappy" and 5 being "very happy." The response code "9" was assigned if the specific individual was reported to be deceased or absent. Figure 2.2 compares the baseline (T1) and endline (T2) percent distributions of FTMs by the perceived happiness of key individuals with the FTM's pregnancy. The key individuals who were most happy with the pregnancy were perceived by the FTM to be the husband/partner and his mother/mother figure. More FTMs age 20-24 perceived their husband/partner to be very happy with the pregnancy than those age 15-19. In the 15-19 age group, the percentage of husbands/partners perceived to be "very happy" with the pregnancy at endline was higher in intervention HZs than in comparison HZs. For example, in the comparison HZs, the percentage of FTMs who reported in the endline survey that their husband/partner was "very happy" with the pregnancy was 24% among those age 15-19 and 45% among those age 20-24. In intervention HZs, the corresponding estimates for the younger and older FTMs were 33% and 49%, respectively (not shown).

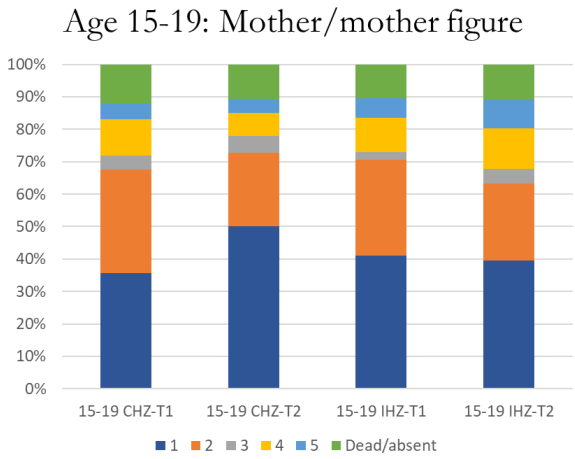
The parents of the FTM were perceived as the key individuals who were most unhappy with the pregnancy. In comparison HZs, the percentage of FTMs age 15-19 who perceived their mother/mother figure to be "very unhappy" with the pregnancy increased from 36% at baseline to 50% at endline. The percentage who perceived their father or father figure to be "very unhappy" increased slightly over time from 42% to 45% (estimates not shown in Figure 2.2). Levels of parental unhappiness were lower among older than younger FTMs as shown in Figure 2.2. At endline, the percentage of FTMs who reported their mother/mother figure or father/father figure was "very unhappy" with the pregnancy was at least four times as high as for the husband/partner (9%) or his mother/mother figure (9%) (not shown). The husband/partner's mother/mother figure was perceived as having the lowest level of unhappiness, especially among FTMs age 20-24.

Excluding FTMs who stated that a specific key individual was deceased, we calculated the mean happiness scores by age group and study arm and assessed the extent to which changes between the baseline and endline surveys were statistically significant (see Table 2.6). The mean perceived happiness score for the husband/partner did not change significantly over time in comparison HZs, but in intervention HZs, the score increased significantly regardless of age group (from 3.4 to 3.7 among 15-19-year-olds and from 3.8 to 4.0 among 20-24-year-olds). The lowest mean scores were obtained for the FTM's father/father figure's perceived happiness with the pregnancy and did not change significantly over time but were higher among FTMs age 20-24 than among younger FTMs. The only exception was the significant decline observed for comparison HZs when both age groups were combined. As was previously observed, the FTM's mother/mother figure was not as happy about the pregnancy as the FTM's husband/partner or his mother. Overall, between the baseline and endline surveys, the mean perceived happiness score for the FTM's mother/mother figure declined significantly in comparison HZs (from 2.5 to 2.3) but increased significantly in intervention HZs (from 2.3 to 2.5), although the absolute changes were small. A similar pattern is observed in each age group. In comparison HZs, there was no change over time in the mean perceived happiness score for the husband/partner's mother or mother figure but in intervention HZs, the scores increased significantly (from 3.0 to 3.3 among FTMs age 15-19, from 3.4 to 3.6 among FTMs age 20-24, and from 3.2 to 3.5 when both age groups were combined).

Figure 2.3 Percent distribution of FTMs by perceived happiness of specific key individuals with the pregnancy, by age group, survey round, and study arm, Kinshasa







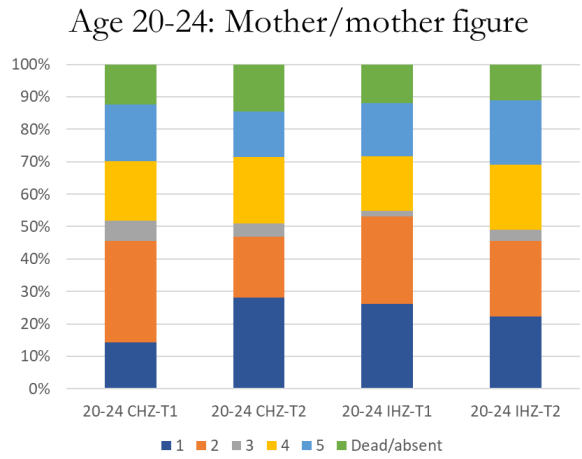
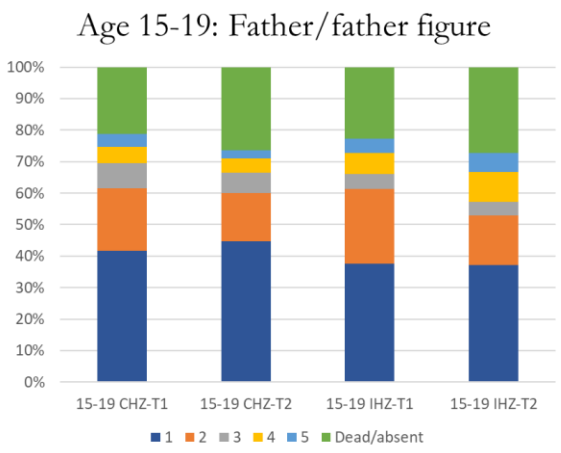
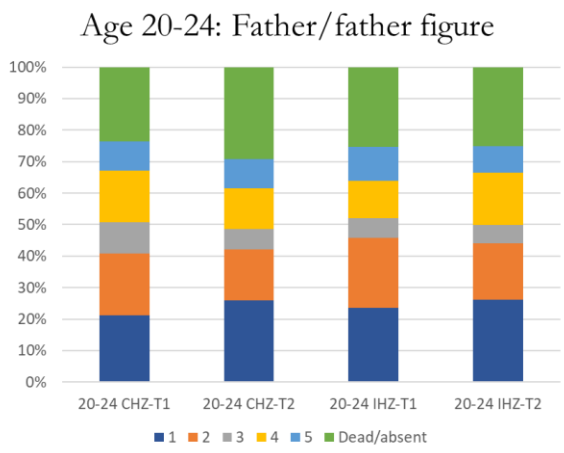
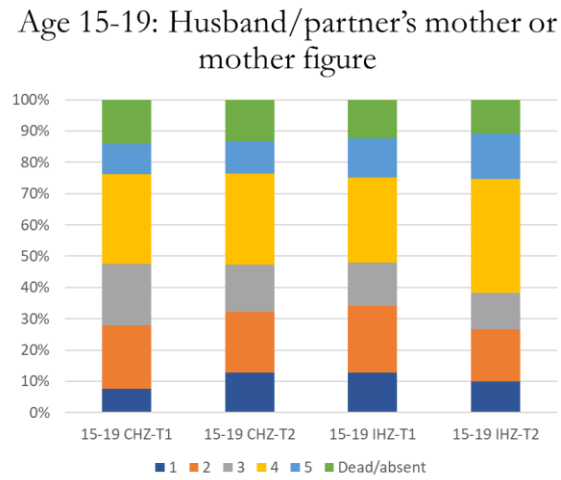
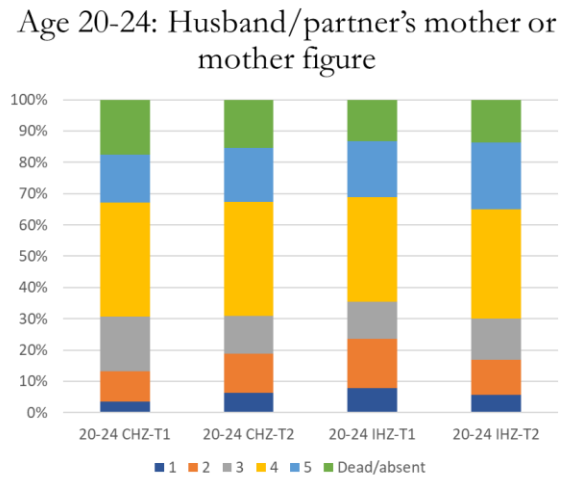


Fig 2.3 contd. Percent distribution of FTMs by perceived happiness of specific key individuals with the pregnancy, by age group, survey round, and study arm, Kinshasa









Notes:
T1 Baseline Survey
T2 Endline Survey

Table 2.6 Mean scores of specific key individuals' perceived happiness with the FTM's pregnancy, by age group, survey round, and study arm, Kinshasa

	Partner		Mother		Father		Mother-in-law	
	Mean (SD)	**N**	**Mean (SD)**	**N**	**Mean (SD)**	**N**	**Mean (SD)**	**N**
15-19: Comparison HZ								
Baseline	3.572 (1.233)	439	2.064 (1.210)	390	1.857 (1.158)	349	3.144 (1.166)	381
Endline	3.412 (1.376)	442	1.800 (1.156)	395	1.706 (1.078)	326	3.052 (1.275)	384
Significance	ns		**		ns		ns	
15-19: Intervention HZ								
Baseline	3.381 (1.318)	478	2.005 (1.254)	437	1.926 (1.192)	377	3.058 (1.308)	428
Endline	3.727 (1.315)	479	2.184 (1.383)	435	2.059 (1.355)	355	3.322 (1.264)	435
Significance	***		*		ns		**	
20-24: Comparison HZ								
Baseline	4.034 (1.110)	525	2.924 (1.419)	461	2.649 (1.394)	402	3.608 (1.054)	434
Endline	4.042 (1.188)	523	2.686 (1.529)	449	2.487 (1.464)	372	3.542 (1.184)	445
Significance	ns		*		ns		ns	
20-24: Intervention HZ								
Baseline	3.835 (1.322)	466	2.662 (1.524)	414	2.516 (1.440)	351	3.434 (1.252)	408
Endline	4.064 (1.207)	468	2.907 (1.542)	418	2.511 (1.442)	352	3.640 (1.177)	406
Significance	**		*		ns		*	
Total: Comparison HZ								
Baseline	3.824 (1.189)	964	2.530 (1.394)	851	2.281 (1.348)	751	3.391 (1.131)	815
Endline	3.753 (1.315)	965	2.271 (1.436)	844	2.122 (1.354)	698	3.315 (1.251)	829
Significance	ns		***		*		ns	
Total: Intervention HZ								
Baseline	3.605 (1.33)	944	2.324 (1.429)	851	2.210 (1.348)	728	3.242 (1.294)	836
Endline	3.893 (1.274)	947	2.538 (1.507)	853	2.284 (1.416)	707	3.476 (1.232)	841
Significance	***		**		ns		***	

*** $p < .001$; ** $p < .01$; * $p < .05$

Note: Excludes FTMs who stated that a specific key individual was deceased or absent.

Source: MOMENTUM 2018 Baseline Survey and 2020 Endline Survey

3 FAMILY PLANNING

Anastasia J. Gage

Key findings:

- **Knowledge**: The percentage of FTMs who knew the World Health Organization (WHO)-recommended minimum interval of at least 24 months after a live birth before attempting the next pregnancy increased significantly from 67% to 89% in comparison HZs and from 76% to 88% in intervention HZs. Accurate knowledge of the fertile period during the ovulatory cycle remained low at endline and was 29% in comparison HZs (up from 21%) and 24% in intervention HZs (up from 20%). There was a significant increase in knowledge that after childbirth a woman can become pregnant again before her menses returned in both comparison HZs (from 45% to 58%) and intervention HZs (from 48% to 60%). The number of modern contraceptive methods known increased by an average of 2.2 to 2.6 in comparison and intervention HZs, respectively.
- **Attitudes**: At endline, FTMs in comparison HZs endorsed an average of 3.5 of eight family planning myths and misconceptions compared to 2.9 among their counterparts in intervention HZs, down from 4.1 and 4.3, respectively. Between the baseline and endline surveys, FTMs' approval of women's use of a contraceptive method within the first six weeks following childbirth increased significantly in intervention HZs (from 73% to 82%) but not in comparison HZs (74% and 73%, respectively).
- **Injunctive norms**: The percentage of FTMs who believed that most referents (at least 4 out of five) approved of the FTM's use of a method of contraception within the first six weeks following childbirth (postpartum family planning (PPFP) injunctive norms) did not increase significantly in comparison HZs (69% at baseline versus 72% at endline). However, in intervention HZs, injunctive norms pertaining to FTMs' use of family planning (FP) in the immediate postpartum period increased significantly from 69% at baseline to 76% at endline. Few FTMs strongly agreed that most people important to them believed that women had the right to make family planning decisions but over time, the percentage increased from nine percent to 18% in comparison HZs and from 15% to 23% in intervention HZs.
- **Descriptive norms**: The percentage of FTMs who believed that most new mothers in the community discussed use of a method of contraception within the first six weeks following childbirth with their husband/partner before the baby's birth increased significantly between the baseline and endline surveys from 13% to 21% in comparison HZs and from nine percent to 21% in intervention HZs. The percentage of FTMs who believed most new mothers in the community used FP within the first six weeks following childbirth was low but increased from 15% to 18% in comparison HZs and from 10% to 22% in intervention HZs.
- **Normative expectations**: Normative expectations about partner discussion of PPFP in the prenatal period were low but increased significantly from 7% to14% in comparison HZs and from 14% to 21% in intervention HZs. Normative expectations around FP use in the immediate postpartum period were also low at endline: 11% in comparison HZs and 17% in intervention HZs, up from seven percent and 12%, respectively.
- **Personal agency**: At the endline survey, 40% of FTMs in comparison HZs and 46% of those in intervention HZs believed they had total control over the use of a contraceptive method in the first six weeks following childbirth. Corresponding estimates at baseline were 45% and 44%, respectively.

In comparison HZs, the percentage of FTMs who would still use PPFP against the wishes of all five named referents declined significantly from 46% at baseline to 37% at endline. A decline was also observed in the intervention HZ (42% to 40%), but the change was not statistically significant.

- **Discussion of FP**: There was a significant increase in partner discussion of use of a contraceptive method within the first six weeks following childbirth, from 8% to 29% in comparison HZs and from 15% to 42% in intervention HZs.
- **Use of PPFP**: Use of a modern method of contraception in the immediate postpartum period (i.e., 0-2 months after childbirth or pregnancy loss) was low, but higher in intervention HZs than in comparison HZs (11% versus seven percent). The percentage of FTMs using a modern method of contraception within 12 months following childbirth or pregnancy loss was 39% in comparison HZs and 52% in intervention HZs.
- **Current contraceptive use:** Current use of a modern method of contraception was 36% among FTMs living in comparison HZs and 43% among their counterparts living in intervention HZs. Pharmacies were the most frequently source of contraceptive supply in comparison HZs (45%) but provided contraceptives to only half as many users in intervention HZs (22%). MOMENTUM nursing students accounted for 30% of contraceptive supply in the latter setting. In intervention HZs, the method information index was highest among current modern method users who obtained their method from a MOMENTUM nursing student (61%) and lowest among those who obtained their method from the private medical sector (33%).
- **Differences between younger and older FTMs in intervention HZs:** Significant improvements occurred over time in the percentage of FTMs age 20-24 who strongly agreed that most people expected them to use PPFP in the six weeks following childbirth. Those age 15-19 did not have a statistically significant change in this indicator. Among FTMs age 20-24 who were currently using a modern contraceptive method, the percentage reporting that the provider informed them about other methods, method side effects, and what to do if experiencing side effects was significantly higher in the intervention HZs than in the comparison HZs. A significant health-zone differential in this indicator was not observed among younger FTMs.

This chapter presents contraceptive knowledge, attitudes, and behavior among FTMs age 15-24 years at baseline. We identify changes between the baseline and endline surveys in key knowledge, attitudinal, normative and control beliefs governing contraceptive use. These beliefs provide insights into FTMs' own motivations to use PPFP. We also assess differences in these outcomes between the baseline and endline surveys in both comparison and intervention HZs and among FTMs age 15-19 and those age 20-24. As FTMs were approximately six-months pregnant at baseline, data on contraceptive use are available only for the endline survey. Within each HZ and age group, we ascertain differences in outcomes by HZ and, as appropriate, changes over time for selected socio-economic groups.

The following topics are covered in this chapter:

1) FP-related knowledge: This section presents data on knowledge of the fertile period, of the possibility that a woman can become pregnant again before her menses return after childbirth, and of modern contraceptive methods.
2) Attitudes towards FP: These were measured by the FTMs' endorsement of FP myths and misconceptions and approval of women's use of FP within the first six weeks following childbirth.
3) Perceived norms: These norms capture social pressure that FTMs feel to use or not use postpartum contraception. We present data on:

a. Injunctive norms: Beliefs about significant others' approval of PPFP and the FTM's motivation to comply with what she believes they think she should do.
b. Descriptive norms: Perceptions about what other FTMs are doing when it comes to PPFP.
c. Normative influences on FP: These are the FTM's belief about PPFP expectations of her that individuals/groups close to her hold.

4) Personal agency: To capture this concept, we measured FTM's perceived behavioral control and self-efficacy regarding PPFP. PPFP self-efficacy captures the degree of confidence FTMs have in their ability to use PPFP in the face of various challenges.
5) Discussion of family planning. This section captures the lifetime prevalence of discussion of FP use in the immediate postpartum period with anyone and, specifically, with the husband or male partner since giving birth or losing the pregnancy.
6) Use of a modern method of contraception 0-2 months, within six months, and within 12 months of childbirth or pregnancy loss. We also measure current use of a modern method of contraception, source of contraceptive supply, informed choice, satisfaction with the FP provider, and decision making about the current contraceptive method.

3.1 Knowledge

Table 3.1 presents the percentage of FTMs who knew the WHO-recommended minimum interval of at least 24 months after a live birth before attempting the next pregnancy. At baseline, knowledge of the WHO-recommended birth interval was lower in comparison HZs than in intervention HZs in all subgroups. Over time, there was a significant increase in knowledge in both comparison HZs and intervention HZs, regardless of age. For example, the percentage of FTMs who knew the WHO-recommended birth interval increased from 67% to 89% in comparison HZs and from 76% to 88% in intervention HZs. Among younger and older FTMs in comparison HZs, knowledge of the WHO-recommended birth interval increased in all socioeconomic groups, regardless of age. Among FTMs age 15-19 in intervention zones, those residing in the wealthiest households were the only subgroup that did not experience a significant improvement in knowledge of the WHO-recommended birth interval over time. Among FTMs age 20-24 residing in intervention HZs, no significant improvements in knowledge occurred over time among the never-married, those living in medium- and high-wealth households, the unemployed, and those who watched TV at least once a week.

Although both intervention and comparison HZs showed a significant improvement in accurate knowledge of the fertile period during the ovulatory cycle, overall, knowledge of the fertile period remained low (see Table 3.2). The percentage of FTMs who correctly reported the most fertile time as being halfway between two menstrual periods increased from 21% to 29% in comparison HZs and from 20% to 24% in intervention HZs. In total, no significant change in knowledge occurred among FTMs age 15-19, regardless of HZ, and among FTMs age 20-24 in intervention HZs. Among FTMs age 15-19 residing in comparison HZs, the only subgroups that showed significant improvement in accurate knowledge of the fertile period were those who did not complete secondary school, were ever married, from medium wealth households, and without two parents that completed secondary school. In intervention HZs, the only subgroups with significant improvement in knowledge of the fertile period were FTMs age 15-19 who were ever married and FTMs age 20-24 who watched TV at least once a week. In comparison HZs, all subgroups of FTMs in the age group 20-24 saw significant improvements in knowledge of the fertile period, except for those living in the poorest households. In this age group, the largest absolute increases, about 20 percentage points, occurred among FTMs in comparison HZs whose mother and father did not have secondary/higher levels of education and among those who resided in the wealthiest households.

Table 3.1 Percentage of FTMs age 15-24 who know the WHO recommended minimum interval of at least 24 months after a live birth before attempting the next pregnancy, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	59.6	88.0	.***	66.6	84.5	***	70.8	90.8	***	79.9	88.4	***	63.3	88.9	***	71.0	85.7	***
Secondary complete/ higher	63.0	93.2	***	77.2	91.1	***	73.5	89.1	***	85.6	91.0	***	71.7	89.8	***	83.4	91.0	**
Never married																		
No	59.2	90.6	.***	66.9	86.9	***	71.1	89.1	***	84.6	91.3	**	66.6	89.7	***	76.3	89.3	***
Yes	61.4	86.4	***	72.3	83.8	**	77.9	92.0	**	79.3	85.6	ns	67.7	88.6	***	75.0	84.5	**
Household wealth																		
Low	56.1	89.0	.***	63.9	84.7	***	69.4	93.3	***	77.9	91.6	***	62.3	91.0	***	69.9	87.6	***
Medium	60.1	89.9	***	71.5	90.1	***	73.3	87.8	***	85.3	88.0	ns	67.4	88.7	***	78.0	89.1	***
High	64.7	87.5	***	73.5	81.4	ns	73.9	89.1	***	86.5	90.2	ns	70.3	88.5	***	81.2	86.6	ns
Worked last year																		
No	58.0	88.6	.***	70.1	85.8	***	69.6	89.3	***	86.6	90.9	ns	63.5	88.9	***	77.6	88.1	***
Yes	66.1	89.6	***	66.0	85.9	***	76.3	90.3	***	78.5	88.5	**	72.9	90.0	***	72.9	87.3	***
Watched TV at least once a week																		
No	47.6	86.3	.***	64.1	83.8	***	61.0	90.9	***	76.4	91.3	***	54.6	88.7	***	69.6	87.2	***
Yes	67.9	90.4	***	72.0	87.2	***	79.0	89.1	***	86.9	89.2	ns	74.1	89.7	***	79.7	88.2	***
Both parents have secondary/higher education																		
No	46.9	84.7	.***	67.8	82.8	*	60.0	88.0	***	81.3	90.7	*	53.5	86.4	***	75.3	87.1	**
Yes	63.9	90.0	***	69.0	86.5	***	75.5	90.1	***	83.9	89.7	*	70.4	90.1	***	76.1	88.0	***
Total	60.1	88.8	***	68.8	85.8	***	72.6	89.7	***	83.3	89.9	**	66.9	89.3	***	75.9	87.8	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 3.2 Percentage of FTMs age 15-24 who have accurate knowledge of the fertile period during the ovulatory cycle, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	15.6	21.3	*	15.5	20.5	ns	17.3	30.3	**	15.3	21.7	ns	16.2	24.3	***	15.5	20.9	*
Secondary complete/ higher	21.9	19.2	ns	25.7	25.7	ns	28.2	38.8	**	25.5	28.8	ns	27.1	35.4	*	25.6	28.0	ns
Never married																		
No	14.9	24.7	**	17.2	23.9	*	27.2	36.9	**	22.5	27.5	ns	22.5	32.2	***	20.0	25.8	ns
Yes	19.0	15.8	ns	18.5	17.3	ns	14.2	31.9	**	18.0	20.7	ns	17.2	21.9	ns	18.3	18.7	ns
Household wealth																		
Low	13.5	21.3	ns	14.4	20.3	ns	22.4	25.4	ns	16.2	23.4	ns	17.6	23.2	ns	15.2	21.6	*
Medium	12.8	21.6	*	19.8	20.9	ns	24.4	33.9	*	21.3	27.3	ns	19.2	28.4	**	20.5	23.9	ns
High	24.3	19.9	ns	20.4	24.8	ns	25.6	44.1	***	26.4	27.0	ns	25.1	34.6	**	23.9	26.1	ns
Worked last year																		
No	17.3	22.5	ns	16.9	21.8	ns	23.5	31.1	*	19.2	21.7	ns	20.2	26.6	**	18.0	21.7	ns
Yes	14.8	16.5	ns	19.2	21.2	ns	25.4	41.5	***	24.6	31.9	ns	21.9	33.3	***	22.2	27.1	ns
Watched TV at least once a week																		
No	15.5	22.6	ns	14.1	17.2	ns	22.5	32.1	*	16.8	26.1	*	19.2	27.6	**	15.3	21.2	*
Yes	17.3	19.9	ns	20.1	24.6	ns	25.4	37.9	***	23.9	25.8	ns	21.8	29.9	**	22.0	25.2	ns
Both parents have secondary/higher education																		
No	12.2	24.5	*	12.6	19.5	ns	25.0	45.0	**	25.2	25.2	ns	18.7	34.8	***	19.6	22.7	ns
Yes	17.9	19.9	ns	18.8	22.0	ns	24.2	33.6	**	20.3	26.1	ns	21.4	27.5	**	19.5	23.9	*
Total	16.6	21.0	ns	17.7	21.6	ns	24.4	35.8	***	21.4	25.9	ns	20.9	29.0	***	19.5	23.7	*
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 3.3 shows the percentage of FTMs age 15-24 who knew that after childbirth a woman could become pregnant again before her menses returned. In the total sample, knowledge increased significantly between survey rounds in both the comparison HZs (from 45% to 58%) and the intervention HZs (from 48% to 60%). Knowledge increased significantly in both age groups regardless of study arm. In the 15-19 age group, the only subgroups that did not have significant increases in knowledge were FTMs from the wealthiest households in comparison HZs and FTMs with secondary or higher levels of education, those who were never married, and those without two secondary/higher educated parents in the intervention HZs. In the age group 20-24, there were more subgroups for which knowledge (of the possibility of women becoming pregnant before their menses return after childbirth) did not increase. The exceptions in comparison HZs were women with secondary complete/higher education, those from medium-wealth households, those who were unemployed last year, and those with two parents who had secondary or higher education. Among FTMs age 20-24 residing in intervention HZs, the only subgroups that did not have a significant increase in knowledge were those who were never married, those living in the wealthiest households, those who were employed in the past 12 months and those with weekly exposure to TV. At baseline, there were age differences in knowledge within comparison HZs as well as intervention HZs. For example, in intervention HZs, knowledge levels among FTMs age 15-19 and those age 20-24 were 43% and 43% respectively. By the endline survey, age differences in knowledge were considerably smaller.

Regarding knowledge of modern contraceptive methods, Table 3.4 shows that the mean number of methods known increased significantly between survey rounds in both age groups and study arms. In the total sample, the mean number of modern methods known by FTMs residing in comparison HZs increased from 6.2 at baseline to 8.4 at endline. In intervention HZs, the corresponding estimates were 5.9 at baseline and 8.6 at endline. The largest absolute increases in knowledge (at least 3 modern methods known) between the baseline and endline surveys occurred among FTMs age 15-19 residing in intervention zones and who did not complete secondary school (5.2 versus 8.3), were never married (5.1 versus 8.2), were from the wealthiest households (5.3 versus 8.4), were not exposed weekly to TV (5.2 versus 8.4), and did not have two parents with secondary or higher education (4.6 versus 7.9). Increases in knowledge of a similar magnitude occurred among FTMs age 20-24 living in intervention HZs and who did not complete secondary school (5.9 versus 8.9) and did not have two parents with secondary or higher education (4.9 versus 9.0).

Table 3.3 Percentage of FTMs age 15-24 who know that after childbirth a woman can become pregnant again before her menses return, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	38.5	57.1	***	42.2	57.5	***	47.0	53.0	ns	46.0	59.8	**	41.4	55.7	***	43.5	58.3	***
Secondary complete/ higher	41.1	60.3	*	44.6	52.5	ns	52.6	61.8	*	57.6	64.7	***	50.6	61.5	**	54.1	61.5	*
Never married																		
No	37.3	56.9	***	40.1	56.7	***	51.5	58.3	ns	52.0	62.4	**	46.0	57.7	***	46.4	59.7	***
Yes	41.3	58.7	***	47.4	56.1	ns	47.8	60.2	ns	55.9	64.0	ns	43.8	59.3	***	50.7	59.2	*
Household wealth																		
Low	40.6	60.0	***	40.6	54.5	**	47.8	57.5	ns	53.2	64.3	*	43.9	58.8	***	46.1	58.7	***
Medium	35.1	59.5	***	45.9	58.7	*	50.0	61.1	*	46.7	61.3	*	43.3	60.4	***	46.3	59.9	***
High	41.2	52.9	ns	41.6	56.6	*	53.1	57.3	ns	58.3	62.6	ns	48.4	55.6	ns	51.4	60.1	*
Worked last year																		
No	39.8	57.7	***	43.2	55.9	**	48.8	58.1	*	55.4	61.6	ns	44.0	57.9	***	48.8	58.5	***
Yes	36.5	57.4	**	41.7	57.7	**	53.0	59.3	ns	49.2	64.4	**	47.6	58.7	**	45.8	61.4	***
Watched TV at least once a week																		
No	34.5	57.1	***	38.9	54.5	**	46.5	59.4	*	47.8	63.4	**	40.8	58.3	***	42.9	58.5	***
Yes	41.7	57.9	***	45.3	57.8	**	53.0	58.3	ns	55.6	62.4	ns	47.9	58.1	***	50.6	60.2	***
Both parents have secondary/higher education																		
No	36.7	56.1	**	47.1	57.5	ns	46.0	58.0	ns	49.5	63.6	*	41.4	57.1	**	48.5	60.8	*
Yes	39.6	58.1	***	41.7	56.3	***	51.8	58.8	*	53.9	62.5	*	46.3	58.5	***	47.5	59.2	***
Total	39.0	57.6	***	42.7	56.5	***	50.7	58.7	**	52.9	62.7	**	45.3	58.2	***	47.7	59.5	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 3.4 Mean number of modern contraceptive methods known among FTMs age 15-24, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	5.8	8.1	.***	5.2	8.3	***	6.3	8.2	***	5.8	8.9	***	5.9	8.1	***	5.4	8.5	***
Secondary complete/ higher	5.8	8.6	***	6.4	8.5	***	6.8	8.8	***	6.7	9.0	***	6.6	8.8	***	6.6	8.9	***
Never married																		
No	5.8	8.2	.***	5.7	8.4	***	6.6	8.5	***	6.4	9.0	***	6.3	8.4	***	6.0	8.7	***
Yes	5.7	8.1	***	5.1	8.2	***	6.6	8.6	***	6.4	8.7	***	6.0	8.3	***	5.6	8.4	***
Household wealth																		
Low	5.7	8.2	.***	5.4	8.1	***	6.4	8.2	***	6.2	8.9	***	6.0	8.2	***	5.8	8.5	***
Medium	5.5	8.1	***	5.6	8.6	***	6.5	8.6	***	6.3	9.0	***	6.0	8.4	***	6.0	8.8	***
High	6.1	8.2	***	5.3	8.4	***	6.9	8.7	***	6.6	9.0	***	6.6	8.5	***	6.0	8.7	***
Worked last year																		
No	5.6	8.0	.***	5.3	8.2	.***	6.5	8.5	.***	6.0	8.9	.***	6.0	8.2	.***	5.6	8.5	.***
Yes	6.1	8.7	***	5.8	8.7	***	6.8	8.6	***	6.9	9.1	***	6.6	8.7	***	6.4	8.9	***
Watched TV at least once a week																		
No	5.5	8.0	.***	5.2	8.4	.***	6.5	8.5	.***	6.3	9.0	.***	6.0	8.3	.***	5.7	8.7	.***
Yes	5.9	8.2	***	5.6	8.3	***	6.7	8.6	***	6.4	8.9	***	6.3	8.4	***	6.0	8.6	***
Both parents have secondary/higher education																		
No	5.3	7.6	.***	4.6	7.9	.***	6.0	8.3	.***	5.9	9.0	.***	5.6	7.9	.***	5.3	8.5	.***
Yes	5.9	8.3	***	5.7	8.4	***	6.8	8.6	***	6.5	9.0	***	6.4	8.5	***	6.1	8.7	***
Total	5.8	8.2	.***	5.5	8.3	.***	6.6	8.6	.***	6.4	9.0	.***	6.2	8.4	.***	5.9	8.6	.***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

3.2 Attitudes

In Table 3.5, we examined the percentage of FTMs who endorsed specific FP myths and misconceptions, by age group, survey round, and study arm. These myths and misconceptions were:

1) People who use contraceptives end up with health problems.
2) Contraceptives are dangerous to women's health.
3) Contraceptives can harm your womb.
4) Use of a contraceptive injection can make a woman permanently infertile.
5) Contraceptives reduce women's sexual urge.
6) Contraceptives can give you deformed babies.
7) Women who use FP may become promiscuous.
8) Contraceptives can cause cancer.

The data showed that in the total sample, there was a significant decline in the percentage of FTMs who endorsed each FP myth and misconception. This decline over time was seen in both comparison HZs and intervention HZs. For example, the percentage of FTMs who agreed with the statement that "contraceptives can give you deformed babies" declined from 30% to 25% in comparison HZs and from 42% to 19% in intervention HZs. The magnitude of change in the endorsement of this statement was greater in intervention HZs than in comparison HZs (23 percentage points and 5 percentage points, respectively). These declines were statistically significant. At endline, less than half of all FTMs in intervention HZs endorsed each FP myth and misconception examined. However, at endline, more than half of FTMs living in comparison HZs agreed with the statement that "people who use contraceptives end up with health problems" and the statement that "contraceptives are dangerous to women's health." At endline, almost half of FTMs living in comparison HZs also agreed with the statement that "use of a contraceptive injection can make a woman permanently infertile" and with the statement that "women who use FP may become promiscuous."

Among FTMs age 15-19, fewer of those living in intervention HZs endorsed each FP myth and misconception in the endline than in the baseline survey. The same could not be said for their counterparts residing in comparison HZs as there was no significant change over time in the percentage endorsing the following myths and misconceptions: (1) People who use contraceptives end up with health problems; (2) Contraceptives are dangerous to women's health; and (3) Women who use FP may become promiscuous. Among FTMs age 20-24 living in comparison HZs, there was no significant change between the baseline and endline surveys in the percentage endorsing the following myths and misconceptions: (1) People who use contraceptives end up with health problems; (2) Contraceptives reduce women's sexual urge; (3) Contraceptives can give you deformed babies; and (4) Women who use FP may become promiscuous. By comparison, in intervention HZs, significantly fewer FTMs age 20-24 endorsed each of the FP myths and misconceptions shown. For example, the percentage of FTMs agreeing with the statement that contraceptives can give you deformed babies was 27% at baseline and 25% at endline in the comparison HZs. In the intervention HZs, the corresponding percentages for FTMs in the same age group were 42% at baseline and 18% at endline.

Table 3.5 Percentage of FTMs who endorsed specific family planning myths and misconceptions, by age group, survey round, and study arm, Kinshasa

Family Planning Myths and Misconceptions	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.
People who use contraceptives end up with health problems.	60.6	56.0	ns	60.8	46.6	***	61.1	55.4	ns	58.5	46.5	***	60.9	55.7	*	59.6	46.5	***
Contraceptives are dangerous to women's health.	62.0	56.5	ns	64.3	43.7	***	61.5	55.0	*	60.2	44.8	***	61.7	55.7	**	62.3	44.2	***
Contraceptives can harm your womb.	57.9	46.9	**	59.8	38.2	***	58.1	46.9	***	56.7	39.4	***	58.0	46.9	***	58.3	38.8	***
Use of a contraceptive injection can make a woman permanently infertile.	62.4	50.3	***	65.1	41.7	***	61.9	48.8	***	63.2	42.8	***	62.1	49.5	***	64.2	42.2	***
Contraceptives reduce women's sexual urge.	28.9	22.6	*	34.5	19.9	***	26.1	24.2	ns	31.5	21.0	***	27.4	23.4	*	33.0	20.4	***
Contraceptives can give you Deformed babies	35.3	26.0	**	42.9	19.1	***	26.9	25.0	ns	41.8	18.0	***	30.7	25.4	**	42.3	18.6	***
Women who use family planning may become promiscuous.	56.5	51.5	ns	49.7	41.7	*	52.2	47.2	ns	49.5	41.1	*	54.1	49.2	*	49.6	41.4	***
Contraceptives can cause cancer.	50.1	38.5	***	60.8	35.3	***	50.3	43.4	*	60.0	34.5	***	50.2	41.2	***	60.4	34.9	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

In Table 3.6, we examined changes in the mean number of FP myths and misconceptions endorsed by baseline socioeconomic characteristics, age group, and study arm. Overall, the mean number of FP myths and misconceptions endorsed decreased significantly from 4.1 to 3.5 in comparison HZs and from 4.3 to 2.9 in intervention HZs. Similar declines occurred in each age group, regardless of HZ. In intervention HZs, all sociodemographic subgroups showed a significant decrease in the mean number of myths and misconceptions endorsed, regardless of age group. In comparison HZs, a few sociodemographic subgroups stood out. Among 15-19-year-old FTMs in comparison HZs, the mean number of myths and misconceptions endorsed did not decrease significantly over time among the never married, those from the wealthiest households, and those who did not have two parents with secondary or higher education. Among older FTMs in comparison HZs, the decrease over time in the mean number of myths and misconceptions endorsed was not statistically significant among FTMs who completed secondary school, were never married, were from medium-wealth or the wealthiest households, did not watch TV at least once a week, and did not have two parents who completed secondary school.

At baseline, over two-thirds of FTMs approved of a woman's use of FP in the six weeks following childbirth (74% in comparison HZs and 73% in intervention HZs; see Table 3.7). While FTM approval of women's use of FP in the immediate postpartum period did not increase over time in comparison HZs, levels of approval increased significantly in intervention HZs to 82% at endline ($p<.001$). In comparison HZs, the only subgroup that showed a significant increase in FTMs' approval of women's use of FP in the immediate postpartum period were 15-19-year-old FTMs who did not watch TV weekly (69% at baseline to 79% at endline). In comparison HZs, levels of approval actually declined significantly among 20-24-year-olds who were employed in the past 12 months (81% at baseline to 72% at endline). In intervention HZs, the increase over time in FTMs' approval of FP use in the immediate postpartum period was not statistically significant in some subgroups. These groups included FTMs age 15-19 who had secondary/higher levels of education.

Among FTMs age 15-19 residing in intervention HZs, the following sociodemographic subgroups also did not have a significant increase in approval of women's use of FP in the immediate postpartum period: the never married, those from the wealthiest households, and those who did not have two parents with secondary/higher levels of education. In this age group and HZ, the largest absolute increases in approval (about 15-16 percentage points) occurred among FTMs residing in the poorest households and among those who were employed last year. Among FTMs age 20-24 in intervention HZs, changes over time were not statistically significant among the never married, those from the poorest and the wealthiest households, the unemployed and those who did not have two parents with secondary/higher education. In this age group and HZ, the largest absolute increase (about 15 percentage points) occurred among unemployed women.

Table 3.6 Mean number of FP myths endorsed by FTMs age 15-24, by baseline characteristics, age group, survey round, study arm, and baseline characteristics, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	4.1	3.5	**	4.3	2.9	***	3.9	3.1	**	4.0	2.8	***	4.0	3.4	***	4.2	2.9	***
Secondary complete/ higher	4.5	3.6	*	4.8	2.8	***	4.0	3.6	ns	4.4	2.9	***	4.1	3.6	*	4.5	2.9	***
Never married																		
No	4.3	3.4	***	4.7	2.7	***	4.1	3.5	**	4.4	2.9	***	4.1	3.4	***	4.5	2.8	***
Yes	3.9	3.6	ns	3.9	3.1	**	3.7	3.5	ns	3.5	2.8	*	3.8	3.6	ns	3.7	2.9	***
Household wealth																		
Low	4.2	3.6	*	4.6	2.9	***	3.9	3.1	*	4.3	2.7	***	4.1	3.3	**	4.5	2.8	***
Medium	4.2	3.5	*	4.5	2.8	***	3.9	3.5	ns	4.2	3.1	***	4.0	3.5	*	4.4	2.9	***
High	4.0	3.4	ns	3.8	2.8	**	4.1	3.7	ns	4.2	2.9	***	4.0	3.6	*	4.0	2.8	***
Worked last year																		
No	4.0	3.4	**	4.1	2.7	***	4.0	3.4	*	3.7	2.7	***	4.0	3.4	***	3.9	2.7	***
Yes	4.7	3.7	***	4.9	3.2	***	4.0	3.5	*	5.0	3.2	***	4.2	3.5	**	4.9	3.2	***
Watched TV at least once a week																		
No	4.2	3.4	**	4.4	2.9	***	3.8	3.3	ns	4.6	2.8	***	4.0	3.4	**	4.5	2.8	***
Yes	4.1	3.6	*	4.3	2.8	***	4.1	3.5	**	4.0	2.9	***	4.1	3.5	***	4.2	2.9	***
Both parents have secondary/higher education																		
No	3.9	3.2	ns	4.2	2.6	***	3.6	3.1	ns	4.0	2.5	***	3.8	3.2	*	4.1	2.5	***
Yes	4.2	3.6	**	4.4	2.9	***	4.1	3.5	**	4.3	3.0	***	4.1	3.6	***	4.3	3.0	***
Total	4.1	3.5	***	4.4	2.9	***	4.0	3.5	**	4.2	2.9	***	4.1	3.5	***	4.3	2.9	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 3.7 Percentage of FTMs age 15-24 who approve of women's use of PPFP within six weeks following childbirth, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	72.1	72.4	ns	71.0	81.1	***	77.8	74.6	ns	79.9	86.2	ns	74.0	73.1	ns	73.9	82.8	***
Secondary complete/ higher	74.0	78.1	ns	73.3	82.2	ns	73.5	72.6	ns	72.3	81.3	*	73.6	73.6	ns	72.6	81.5	**
Never married																		
No	71.4	73.3	ns	72.6	83.8	***	74.0	71.8	ns	74.2	82.0	*	73.0	72.4	ns	73.4	82.8	***
Yes	73.9	73.4	ns	69.4	76.9	ns	78.8	78.8	ns	79.3	87.4	ns	75.8	75.4	ns	73.2	81.0	*
Household wealth																		
Low	74.2	74.2	ns	70.3	86.1	***	74.6	75.4	ns	79.9	85.1	ns	74.4	74.7	ns	74.4	85.7	***
Medium	73.6	75.0	ns	69.2	81.4	**	79.4	75.0	ns	66.7	80.7	**	76.8	75.0	ns	68.0	81.1	***
High	69.1	70.6	ns	77.0	72.6	ns	71.6	70.6	ns	79.1	84.0	ns	70.6	70.6	ns	78.3	79.3	ns
Worked last year																		
No	71.6	73.1	ns	75.8	83.4	*	70.2	74.4	ns	81.2	84.4	ns	71.0	73.7	ns	78.3	83.9	*
Yes	74.8	73.9	ns	62.2	76.9	**	80.9	72.0	*	67.0	81.7	***	78.9	72.6	ns	64.8	79.5	***
Watched TV at least once a week																		
No	69.0	79.2	*	73.7	86.9	***	73.3	72.2	ns	77.0	85.7	*	71.3	75.5	ns	75.2	86.4	***
Yes	74.5	69.7	ns	69.9	77.5	*	76.0	74.0	ns	74.5	82.0	*	75.4	72.1	ns	72.3	79.8	**
Both parents have secondary/higher education																		
No	75.5	73.5	ns	72.4	78.2	ns	74.0	75.0	ns	81.3	86.0	ns	74.7	74.2	ns	77.3	82.5	ns
Yes	71.6	73.3	ns	71.3	82.0	***	75.3	72.9	ns	73.6	82.5	**	73.6	73.1	ns	72.4	82.2	***
Total	72.4	73.3	ns	71.5	81.3	***	75.0	73.3	ns	75.4	83.3	**	73.9	73.3	ns	73.4	82.3	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

3.3 Perceived Norms

3.3.1 Injunctive norms

In the baseline and endline surveys, FTMs were asked to list up to five people who were most important to them, either generally, or when deciding about use of a method of contraception, and to report these referents' relationship to them. FTMs were then asked to report whether the referents mentioned would approve or disapprove of the FTM's use of a method of contraception within the first six weeks following childbirth. Table 3.8 presents the percentage of FTMs age 15-24 who believe that most (at least four of the five) referents would approve of the FTM's use of FP within six weeks following childbirth. There was little change in perceived referent approval of the FTM's use of FP in the immediate postpartum period between the baseline and endline surveys. No significant change occurred in comparison HZs regardless of age and sociodemographic subgroup: in the age groups 15-19 and 20-24 and in total sample, perceived referent approval increased from 70% to 73%, from 67% to 71%, and from 69% to 72%, respectively. When the age groups were combined, significant increases in perceived referent approval were detected in comparison HZs among FTMs who did not complete secondary school or had lower levels of education, had ever been married, and had two parents with secondary or higher levels of education.

As Table 3.8 shows, in intervention HZs, the percentage of FTMs who believed that most referents approved of the FTM's use of FP in the immediate postpartum period increased from 69% at baseline to 76% at endline ($p < .001$); from 68% to 74% among those age 15-19 ($p < .05$) and from 70% to 78% among those age 20-24 ($p < .05$). Among younger FTMs in intervention HZs, most sociodemographic subgroups did not have a significant increase in perceived referent approval. Significant increases occurred among those who were ever married (66% to 76%), those who were employed in the past year (58% to 74%), and those who had two parents with secondary or higher levels of education (67% to 75%). Among older FTMs living in intervention HZs, perceived referent approval of the FTM's use of FP in the immediate postpartum period increased significantly over time among those who were ever married, those who were employed in the past year, and those who watched TV at least once a week.

It was of interest to also examine changes in FTMs' perceptions about referent approval of women's rights to make FP decisions. Table 3.9 presents the percentage of FTMs who strongly agreed that most people important to them believed that women have the right to make FP decisions. At baseline, the percentage of FTMs who strongly agreed that most people important to them believed women had the right to make FP decisions was lower in comparison HZs than in intervention HZs. Both HZs and both age groups had a significant increase in the percentage of FTMs who strongly agreed with this statement. Overall, the percentage increased from 9% to 18% in comparison HZs and from 15% to 23% in intervention HZs. Among FTMs age 15-19 in comparison HZs, only two sociodemographic subgroups did not have a statistically significant increase in perceived referent belief in women's rights to make FP decisions: those without weekly exposure to TV and those who did not have two parents with secondary or higher education. Changes in these two subgroups were also statistically insignificant among FTMs age 15-19 residing in intervention HZs. Among the latter group of FTMs, changes over time were statistically significant among those with secondary complete/higher education, those who were ever married, those from medium-wealth and the wealthiest households, and those who were unemployed in the past 12 months. In the age group 20-24, there were five sociodemographic subgroups that had no statistically significant change in perceived referent approval: FTMs with incomplete secondary or lower levels of education, those from the poorest or richest households, those who did not watch TV at least once a week, and those who did not have two parents with secondary/higher education. In addition, in comparison HZs, no significant change was observed among FTMs age 20-24 who were never married or employed.

Table 3.8 Percentage of FTMs age 15-24 who believe that most referents (4 or 5 out of a maximum of 5) approve of the FTM's use of PPFP within six weeks following childbirth, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	70.2	70.8	ns	66.6	72.8	ns	65.9	67.6	ns	71.4	79.4	ns	68.8	69.7	ns	68.2	75.0	*
Secondary complete/ higher	69.9	83.6	ns	72.3	78.2	ns	68.2	72.9	ns	69.4	76.3	ns	68.5	74.8	*	70.2	76.8	*
Never married																		
No	61.6	67.8	ns	66.2	76.1	**	63.1	69.2	ns	69.7	76.4	*	62.5	68.7	*	68.1	76.3	***
Yes	82.1	79.9	ns	70.5	69.9	ns	83.2	77.9	ns	72.1	81.1	ns	82.5	79.1	ns	71.1	74.3	ns
Household wealth																		
Low	72.9	72.3	ns	67.3	71.3	ns	67.2	73.1	ns	70.8	77.3	ns	70.2	72.7	ns	68.8	73.9	ns
Medium	68.9	71.6	ns	65.1	74.4	ns	69.4	72.8	ns	68.0	76.7	ns	69.2	72.3	ns	66.5	75.5	*
High	68.4	75.0	ns	72.6	77.9	ns	65.9	68.2	ns	71.8	78.5	ns	66.9	70.9	ns	72.1	78.3	ns
Worked last year																		
No	72.2	72.8	ns	72.5	74.0	ns	69.6	73.0	ns	76.8	82.2	ns	71.0	72.9	ns	74.5	77.8	ns
Yes	64.3	73.0	ns	57.7	73.7	**	64.8	68.6	ns	60.7	70.7	*	64.7	70.1	ns	59.4	72.0	***
Watched TV at least once a week																		
No	68.5	73.2	ns	67.2	75.3	ns	63.1	69.5	ns	71.4	75.2	ns	65.6	71.3	ns	69.1	75.2	ns
Yes	71.2	72.7	ns	68.2	73.0	ns	69.8	71.9	ns	69.6	78.8	**	70.4	72.2	ns	68.9	76.0	**
Both parents have secondary/higher education																		
No	80.6	74.5	ns	72.4	69.0	ns	74.0	70.0	ns	73.8	84.1	ns	77.3	72.2	ns	73.2	77.3	ns
Yes	67.2	72.4	ns	66.7	75.0	*	65.9	71.3	ns	69.2	75.6	ns	66.4	71.8	*	67.9	75.3	**
Total	70.2	72.9	ns	67.8	73.9	*	67.4	71.0	ns	70.2	77.5	*	68.7	71.9	ns	69.0	75.7	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 3.9 Percentage of FTMs age 15-24 who strongly agree that most people important to them believe that women have the right to make FP decisions, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	8.5	16.9	***	15.3	21.8	*	13.0	14.6	ns	13.8	15.3	ns	10.0	16.2	**	14.8	19.7	*
Secondary complete/ higher	8.2	21.9	*	15.8	24.8	ns	8.5	20.3	***	15.1	29.9	***	8.5	20.6	***	15.3	28.5	***
Never married																		
No	7.5	17.3	***	14.3	22.9	**	8.5	18.0	***	14.6	22.8	**	8.1	17.7	***	14.5	22.8	***
Yes	9.8	18.5	*	17.3	21.4	ns	15.9	19.5	ns	14.4	27.9	*	12.1	18.9	*	16.2	23.9	*
Household wealth																		
Low	8.4	20.0	**	15.3	23.3	*	9.7	17.2	ns	15.6	20.1	ns	9.0	18.7	***	15.4	21.9	*
Medium	8.8	16.9	*	16.9	23.8	ns	7.8	18.9	***	10.0	26.7	***	8.2	18.0	***	13.7	25.2	***
High	8.1	16.2	*	13.3	18.6	ns	12.3	18.5	ns	17.8	25.2	ns	10.7	17.6	**	15.9	22.5	ns
Worked last year																		
No	9.0	16.7	**	15.1	19.9	ns	8.7	19.0	***	12.7	23.2	**	8.8	17.8	***	14.0	21.4	***
Yes	7.0	20.9	**	16.0	27.6	*	11.9	17.4	ns	17.3	25.1	***	10.3	18.5	**	16.7	26.2	**
Watched TV at least once a week																		
No	11.3	15.5	ns	15.7	21.2	ns	13.4	18.7	ns	13.0	18.0	ns	12.4	17.2	ns	14.5	19.8	ns
Yes	6.6	19.2	***	15.2	23.2	*	8.3	18.0	***	15.4	27.1	***	7.6	18.6	***	15.3	25.2	***
Both parents have secondary/higher education																		
No	13.3	22.4	ns	18.4	19.5	ns	12.0	21.0	ns	15.0	20.6	ns	12.6	21.7	*	16.5	20.1	ns
Yes	7.0	16.4	***	14.7	23.0	**	9.6	17.6	***	14.4	25.0	***	8.5	17.1	***	14.6	23.9	***
Total	8.4	17.8	***	15.4	22.4	**	10.1	18.3	***	14.6	24.0	***	9.3	18.0	***	15.0	23.2	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

3.3.2 Descriptive norms

Descriptive norms were measured by FTMs' perceptions that most (more than half or all) new mothers in the community (a) discussed PPFP with their husband/partner before the baby's birth; and (b) used FP within the six weeks following childbirth. Table 3.10 shows changes in descriptive norms around partner discussion of PPFP before the baby's birth. The percentage of FTMs who believed that most new mothers in the community discussed using a method of contraception within the first six weeks following childbirth with their husband/partner before the baby's birth increased significantly between the baseline and endline surveys, from 13% to 21% in the comparison HZs and from 9% to 21% in the intervention HZs. Significant increases were also seen in each age group, regardless of study arm. Among FTMs age 15-19 residing in comparison HZs, only two socioeconomic groups had a significant increase in descriptive norms around partner discussion of PPFP use: those living in the wealthiest households and those who were unemployed in the past 12 months. Among FTMs of the same age who resided in intervention HZs, all sociodemographic subgroups had a significant increase in these perceived norms, with the greatest absolute increase (about 17 percentage points) occurring among FTMs living in the wealthiest households.

In the age group 20-24, most sociodemographic subgroups had a significant increase in the perceived prevalence of partner discussion of PPFP use among new mothers in the community before childbirth. There were a few exceptions. In comparison HZs, exceptions included those who did not complete secondary school or had lower levels of education, the never married, those living in the poorest households and those who did not have two parents with secondary/higher education. In intervention HZs, the latter subgroup was the only one without a significant increase in the perceived prevalence of partner discussion of PPFP before childbirth. The largest absolute increase in the perceived prevalence of partner discussion of PPFP before childbirth was seen among women from the poorest households (about 14 percentage points).

Table 3.11 presents changes in the perceived prevalence of FP use in the immediate postpartum period by new mothers in the community. At endline, fewer than one in four FTMs believed that most new mothers in the community used FP within the first six weeks following childbirth. The percentage of FTMs with this perception increased from 15% at baseline to 18% at endline in comparison HZs and from 10% at baseline to 22% at endline in intervention HZs. Regarding descriptive norm change in the 15-19 age group, no significant increases occurred in comparison HZs. In intervention HZs, on the other hand, the percentage of FTMs age 15-19 who believed that most new mother in the community used FP in the immediate postpartum period increased from nine percent to 21% between the baseline and endline surveys. Among these FTMs, all sociodemographic subgroups had significant increases in the perceived prevalence of PPFP use among new mothers in the community. Between the baseline and endline surveys, the percentages doubled in most subgroups and tripled among FTMs age 15-19 residing in intervention HZs who did not have two parents with secondary/higher education (six percent at baseline versus 18% at endline).

Table 3.10 Percentage of FTMs age 15-24 who believe that most (more than half or all) new mothers in the community discuss PPFP with their husband/partner before the baby's birth, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	13.9	18.3	ns	8.8	21.8	***	14.1	21.6	ns	9.5	20.6	**	14.0	19.4	*	9.0	21.4	***
Secondary complete/ higher	17.8	26.0	ns	6.9	15.8	*	10.6	22.1	***	11.2	20.5	**	11.9	22.8	***	10.0	19.3	***
Never married																		
No	13.7	18.8	ns	8.9	20.4	***	10.0	21.6	***	10.1	19.9	***	11.4	20.5	***	9.6	20.1	***
Yes	15.8	20.7	ns	7.5	20.8	***	18.6	23.0	ns	11.7	22.5	*	16.8	21.5	ns	9.2	21.5	***
Household wealth																		
Low	16.8	21.3	ns	11.9	20.3	*	14.2	22.4	ns	9.7	23.4	**	15.6	21.8	ns	11.0	21.6	***
Medium	15.5	16.2	ns	6.4	19.8	***	7.2	20.0	***	13.3	22.0	*	11.0	18.3	**	9.6	20.8	***
High	11.0	21.3	*	5.3	22.1	***	14.2	23.2	*	8.6	16.6	*	13.0	22.5	***	7.2	18.8	***
Worked last year																		
No	14.2	20.7	*	8.5	21.5	***	11.4	23.2	***	10.9	21.0	**	12.9	21.9	***	9.6	21.3	***
Yes	15.7	16.5	ns	8.3	18.6	*	12.3	20.3	*	9.9	19.9	**	13.4	19.1	*	9.2	19.3	***
Watched TV at least once a week																		
No	13.1	20.8	ns	9.6	20.7	**	9.1	20.9	**	9.9	18.6	*	11.0	20.8	***	9.7	19.8	***
Yes	15.5	18.8	ns	7.6	20.4	***	13.3	22.5	**	10.8	21.6	***	14.3	20.9	**	9.2	21.0	***
Both parents have secondary/higher education																		
No	12.2	18.4	ns	4.6	17.2	**	15.0	19.0	ns	8.4	15.9	ns	13.6	18.7	ns	6.7	16.5	**
Yes	15.2	19.9	ns	9.2	21.2	***	11.1	22.6	***	11.1	21.9	***	12.9	21.4	***	10.1	21.6	***
Total	14.6	19.6	*	8.4	20.5	***	11.8	21.9	***	10.5	20.6	***	13.1	20.9	***	9.4	20.5	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 3.11 Percentage of FTMs age 15-24 who believe that most (more than half or all) new mothers in the community use FP within the six weeks following childbirth, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	15.6	15.6	ns	9.6	22.5	***	16.8	20.5	ns	7.9	20.6	***	16.0	17.2	ns	9.0	21.9	***
Secondary complete/ higher	11.0	17.8	ns	5.9	15.8	*	12.9	19.4	*	11.9	23.0	***	12.6	19.1	**	10.3	21.1	***
Never married																		
No	13.7	14.1	ns	8.9	21.3	***	13.3	18.9	*	9.6	21.9	***	13.5	17.1	ns	9.3	21.6	***
Yes	16.3	18.5	ns	8.7	20.8	**	17.7	23.0	ns	12.6	22.5	ns	16.8	20.2	ns	10.2	21.5	***
Household wealth																		
Low	20.6	19.4	ns	11.9	20.8	*	17.2	17.2	ns	10.4	26.0	**	19.0	18.3	ns	11.2	23.0	***
Medium	13.5	10.8	ns	5.8	20.9	***	9.4	22.8	***	12.7	22.7	*	11.3	17.4	*	9.0	21.7	***
High	9.6	17.6	ns	8.0	22.1	**	16.6	19.0	ns	8.0	17.8	**	13.8	18.4	ns	8.0	19.6	***
Worked last year																		
No	14.8	17.6	ns	9.1	22.4	***	13.8	20.4	*	10.9	21.7	***	14.4	18.9	*	9.9	22.1	***
Yes	14.8	11.3	ns	8.3	18.6	**	14.8	19.1	ns	9.4	22.5	***	14.8	16.5	ns	8.9	20.7	***
Watched TV at least once a week																		
No	13.7	16.1	ns	9.1	20.7	**	10.7	16.6	ns	10.6	20.5	*	12.1	16.3	ns	9.7	20.6	***
Yes	15.5	15.9	ns	8.7	21.5	***	16.3	21.6	ns	10.1	22.9	***	15.9	19.0	ns	9.4	22.2	***
Both parents have secondary/higher education																		
No	11.2	12.2	ns	5.7	18.4	*	17.0	20.0	ns	9.3	19.6	*	14.1	16.2	ns	7.7	19.1	***
Yes	15.8	17.0	ns	9.5	21.7	***	13.6	19.8	*	10.6	22.8	***	14.6	18.5	*	10.0	22.2	***
Total	14.8	15.9	ns	8.8	21.1	***	14.3	19.8	*	10.3	22.1	***	14.5	18.0	*	9.5	21.6	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

In the age group 20-24, there was a significant increase in the percentage of FTMs who believed that most new mothers in the community used FP in the immediate postpartum period. In comparison HZs, six sociodemographic subgroups showed significant changes in this indicator: FTMs who had secondary complete/higher education, those who had ever been married, those from medium-wealth households, those who were unemployed last year, and those with two parents with secondary/higher education. In intervention HZs, all subgroups except never married FTMs had a significant increase in the perceived prevalence of FP use in the immediate postpartum period among new mothers in the community. The largest absolute change in these perceptions (about 16 percentage points) occurred among FTMs from the poorest households.

3.3.3 Normative expectations

Questions about PPFP normative expectations pertained to (a) partner discussion of FP use in the six weeks following childbirth; and (b) use of PPFP in the first six weeks following childbirth. At endline, only 21% of FTMs in intervention HZs and 14% of those in comparison HZs strongly agreed that most people who were important to them expected them to discuss use PPFP use with their husband/partner before the baby was born (see Table 3.12). These normative expectations represented a significant improvement from the baseline survey during which only seven percent of FTMs in comparison HZs and 14% of those in intervention HZs agreed with the statement. Significant improvements in normative expectations around prenatal discussion of PPFP use occurred within each age group, regardless of study arm. For example, in the age group 15-19, normative expectations around partner discussion of PPFP use increased from eight percent at baseline to 14% at endline in comparison HZs and from 15% at baseline to 22% at endline in intervention HZs.

Regarding sociodemographic differences in normative change, among FTMs age 15-19, no significant changes occurred between the baseline and endline surveys among those with secondary complete/higher education, the ever married, those from medium-wealth or the wealthiest households, those who were employed, and those who did not have two parents with secondary/higher education, regardless of study arm. In addition, no significant improvements in normative expectations occurred among FTMs who did not have weekly exposure to TV, who resided in comparison HZs, who lived in the poorest households, and those in intervention HZs with weekly exposure to TV. In the 15-19 age group, the largest absolute increase in normative expectations regarding prenatal discussion of FP use in the immediate postpartum period occurred among ever married FTMs (13% at baseline versus 23% at endline).

In the age group 20-24, baseline levels of normative expectations regarding partner discussion of PPFP use were lower in comparison HZs than in intervention HZs (seven percent and 13%, respectively), as was observed among younger FTMs. As Table 3.12 shows, both comparison HZs and intervention HZs saw significant increases in normative expectations around PPFP discussion between the baseline and endline surveys. In comparison HZs, normative change occurred in nine of the thirteen sociodemographic subgroups examined, with the largest absolute and relative increases occurring among FTMs residing in medium-wealth households (six percent at baseline versus 21% at endline). In intervention HZs, significant normative change was observed in only half of the sociodemographic subgroups examined: FTMs with secondary complete/higher education, those who were ever married, those from medium-wealth households, the unemployed, those with weekly TV exposure, and those with two parents who had secondary/higher education. Absolute normative change ranged from six to 15 percentage points.

Table 3.12 Percentage of FTMs age 15-24 who strongly agree that most people expect them to discuss use of PPFP in the six weeks following childbirth with their husband/partner before baby is born, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	7.9	13.7	*	15.0	21.8	*	7.6	13.0	*	11.1	17.5	ns	7.8	13.4	**	13.7	20.3	**
Secondary complete/ higher	8.2	13.7	ns	13.9	21.8	ns	6.5	15.3	***	14.0	23.0	**	6.8	15.0	***	14.0	22.7	**
Never married																		
No	6.7	13.3	*	12.7	23.2	***	6.3	15.3	***	13.2	19.4	*	6.4	14.5	***	13.0	21.2	***
Yes	9.8	14.1	ns	18.5	19.1	ns	8.8	11.5	ns	11.7	25.2	**	9.4	13.1	ns	15.8	21.5	ns
Household wealth																		
Low	7.7	16.1	*	16.8	21.8	ns	6.7	10.4	ns	14.3	16.9	ns	7.3	13.5	*	15.7	19.7	ns
Medium	8.1	13.5	ns	15.1	23.3	ns	6.1	21.1	***	8.0	23.3	***	7.0	17.7	***	11.8	23.3	***
High	8.1	11.0	ns	10.6	19.5	ns	7.6	11.4	ns	16.0	22.1	ns	7.8	11.2	ns	13.8	21.0	*
Worked last year																		
No	7.4	13.6	*	14.5	20.8	*	5.2	12.8	**	12.7	22.1	**	6.4	13.2	***	13.7	21.4	***
Yes	9.6	13.9	ns	15.4	23.7	ns	8.9	16.5	*	13.1	18.8	ns	9.1	15.7	**	14.1	21.0	*
Watched TV at least once a week																		
No	10.1	13.1	ns	12.6	21.2	*	8.0	16.0	*	11.8	17.4	ns	9.0	14.6	*	12.3	19.5	**
Yes	6.6	14.0	**	16.3	22.1	ns	6.2	13.6	**	13.4	22.5	**	6.4	13.8	***	14.8	22.4	***
Both parents have secondary/higher education																		
No	10.2	19.4	ns	16.1	21.8	ns	11.0	16.0	ns	15.0	19.6	ns	10.6	17.7	*	15.5	20.6	ns
Yes	7.3	12.0	*	14.5	21.7	**	5.9	14.1	***	12.2	21.1	**	6.5	13.2	***	13.4	21.4	***
Total	8.0	13.7	**	14.8	21.8	**	6.9	14.5	***	12.8	20.8	**	7.4	14.1	***	13.8	21.3	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 3.13 presents data on changes in normative expectations around use of FP in the immediate postpartum period by FTMs. Normative expectations were low. At endline, less than 20% of FTMs age 15-24 strongly agreed that most people expected them to use PPFP in the six weeks following childbirth. This represented an increase from 7% to 11% in comparison HZs and from 12% to 17% in intervention HZs. Among FTMs age 15-19, significant increases occurred in five socioeconomic groups living in comparison HZs and in only one socioeconomic group – ever married FTMs – living in intervention HZs.

In the 20-24 age group, no significant changes in normative expectations were detected among the following group of FTMs, regardless of whether they lived in comparison or intervention HZs: those who did not complete secondary school or had lower levels of education, their counterparts who had secondary or higher levels of education, those who were never married, those from the poorest or the richest households, those who were employed, those who did not watch TV at least once a week and those who did not have two parents with secondary or higher education. The largest change in normative expectations in this age group occurred among FTMs from medium wealth households in both comparison HZs and intervention HZs. In intervention HZs, for example, the percentage of FTMs age 20-24 who strongly agreed that most people expected them to use PPFP in the six weeks following childbirth increased from 7% at baseline to 21% at endline.

3.4 Personal Agency

In the baseline and endline surveys, personal agency was measured by perceived behavioral control and self-efficacy. To measure perceived behavioral control directly, FTMs were asked: "How much control do you believe you have over [the] use of a method of contraception within the first 6 weeks following childbirth: none at all, very little control, some control, or complete control?" Table 3.14 presents the percentage of FTMs who believed they had total control over the decision to use a FP method in the immediate postpartum period. In intervention HZs, there was no change in perceived control over PPFP decisions, regardless of age group. In comparison HZs, there was a decline in perceived control over use of PPFP from 50% to 43% among FTMs age 20-24 and from 45% to 40% when both age groups were combined. No change was detected among FTMs age 15-19 except among those living in the poorest households in comparison HZs. Among this group of FTMs, perceived control declined from 45% at baseline to 33% at endline.

Among FTMs age 20-24 residing in comparison HZs, the four socioeconomic groups that experienced significant changes over time all had a decline in perceived behavioral control over use of a FP method in the immediate postpartum period. For example, among women who were employed in the past 12 months, perceived behavioral control declined from 49% at baseline to 38% at endline. In intervention HZs, never married FTMs age 20-24 were the only socioeconomic group to show a significant change in perceived behavioral control. Among this group of FTMs, the percentage who believed they had total control over use of a method of contraception within the first six weeks following childbirth increased from 41% at baseline to 56% at endline.

To measure self-efficacy belief indirectly, FTMs were asked about their perceived ability to overcome factors that could constrain use of FP in the immediate postpartum period. Questions pertained to the degree of confidence the FTM had that she could use a method of contraception within the first six weeks following childbirth if she was afraid that her husband/partner would (a) get angry at her; (b) reject her; (c) think she was having sex with someone else; and (d) stop giving her money for food and other necessities. Additional question asked the FTM how confident she was that she could go to a health facility, pharmacy, or store to ask for or buy a method of contraception within the first 6 weeks following childbirth, without feeling embarrassed, and how confident she was that she could stop sexual intercourse from happening in the first six weeks following

Table 3.13 Percentage of FTMs age 15-24 who strongly agree that most people expect them to use PPFP in the six weeks following childbirth, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	6.3	12.0	**	13.7	15.5	ns	9.7	12.4	ns	10.1	16.9	ns	7.4	12.2	**	12.5	16.0	ns
Secondary complete/ higher	11.0	13.7	ns	10.9	16.8	ns	5.9	9.7	ns	11.9	17.3	ns	6.8	10.4	ns	11.6	17.2	*
Never married																		
No	7.1	12.2	ns	11.5	17.2	*	6.1	11.7	**	11.2	16.6	*	6.4	11.8	***	11.3	16.9	**
Yes	7.1	12.5	ns	16.2	13.3	ns	11.5	7.1	ns	10.8	18.9	ns	8.8	10.4	ns	14.1	15.5	ns
Household wealth																		
Low	7.1	14.2	*	13.9	15.3	ns	9.0	9.0	ns	13.0	14.3	ns	8.0	11.8	ns	13.5	14.9	ns
Medium	5.4	10.8	ns	14.0	15.7	ns	4.4	15.0	***	6.7	20.7	***	4.9	13.1	***	10.6	18.0	**
High	8.8	11.8	ns	10.6	16.8	ns	8.5	8.1	ns	13.5	16.6	ns	8.6	9.5	ns	12.3	16.7	ns
Worked last year																		
No	5.9	13.6	***	13.0	15.4	ns	4.2	10.7	**	9.1	18.1	**	5.1	12.2	***	11.2	16.6	**
Yes	10.4	8.7	ns	13.5	16.7	ns	11.0	10.6	ns	14.1	15.7	ns	10.8	10.0	ns	13.8	16.1	ns
Watched TV at least once a week																		
No	8.3	11.9	ns	11.6	14.6	ns	9.1	13.4	ns	8.7	14.9	ns	8.7	12.7	ns	10.3	14.8	ns
Yes	6.3	12.5	*	14.2	16.6	ns	6.2	9.2	ns	12.4	18.3	*	6.2	10.7	**	13.3	17.5	*
Both parents have secondary/higher education																		
No	6.1	17.3	*	18.4	12.6	ns	11.0	13.0	ns	12.1	20.6	ns	8.6	15.2	*	14.9	17.0	ns
Yes	7.3	10.9	ns	12.0	16.5	ns	6.4	10.1	*	10.8	16.1	*	6.8	10.4	*	11.4	16.3	**
Total	7.1	12.3	**	13.1	15.8	ns	7.2	10.7	ns	11.1	17.1	**	7.2	11.4	**	12.2	16.5	**
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

childbirth if she could not bring up the subject of using protection. Response categories were not at all confident (coded 1), not confident (coded 2), confident (coded 3), or extremely confident (coded 4). We created an index of PPFP self-efficacy by summing up the responses to these questions. The index consisted of 7 items and had a Cronbach's alpha of 0.909.

Table 3:15 presents the Mean PPFP self-efficacy score among FTMs age 15-24, by age group, survey round, and HZ. The data showed that PPFP self-efficacy did not improve significantly between the baseline survey and the endline survey, regardless of HZ and sociodemographic subgroup.

In Table 3.16, we examined PPFP autonomy, defined as the perceived ability to use PPFP against the wishes of all five named referents. In both the baseline and endline surveys, FTMs were asked: "Earlier, you mentioned five people who are most important to you, either generally, or when deciding about use of a method of contraception. If the following people you mentioned did not want you to use a method of contraception within the first 6 weeks following childbirth, would you still do it?" In the overall sample and in both age groups, there was no significant change in PPFP autonomy in the intervention HZs.

However, the data showed that PPFP autonomy declined significantly in comparison HZs, from 44% to 36% among FTMs age 15-19, from 48% to 37% among those age 20-24, and from 46% to 37% for both age groups combined. Among FTMs age 15-19 residing in intervention HZs, we could detect significant declines in PPFP autonomy in two subgroups: those who were employed (from 49% at baseline to 38% at endline) and those who did not watch TV at least once a week (from 50% at baseline to 38% at endline). PPFP did not increase significantly in any socioeconomic group examined.

3.5 Discussion of Family Planning

Table 3.17 presents data from the baseline and endline surveys on the percentage of FTMs who have ever discussed use of a PPFP method within the first six weeks following childbirth with anyone. There was a significant increase in the percentage of FTMs who had ever discussed PPFP use in each socioeconomic group and study arm, regardless of age. Overall, the percentage of FTMs who had ever discussed use of a PPFP method increased from 18% to 43% in comparison HZs and from 24% to 57% in intervention HZs. Among FTMs age 15-19 who resided in comparison HZs, the absolute change in the prevalence of PPFP discussion ranged from 23-29 percentage points. Among FTMs of the same age group who resided in intervention HZs, absolute change in the prevalence of PPFP discussion exceeded 30 percentage points among less educated FTMs, the ever married, those from the poorest and medium-wealth households, the unemployed, those without weekly exposure to TV, and those without two parents with secondary/higher education.

In the age group 20-24, absolute increases in the prevalence of PPFP discussion were greater in intervention HZs than in comparison HZs for each socioeconomic group, except FTMs without two parents that had secondary or higher education. The highest percent prevalence of PPFP discussion (exceeding 60%) occurred intervention HZs among FTMs age 20-24 who had the following characteristics: secondary/higher education; resided in medium wealth households; were employed in the past 12 months; and had two parents with secondary or higher education.

Changes over time in partner discussion of PPFP are presented in Table 3.18. Regardless of study arm, each socioeconomic and age group showed a significant increase in the percentage of FTMs who had ever discussed use of a FP method in the immediate postpartum period with their husband/partner. Overall, the lifetime prevalence of partner discussion of use of FP in the immediate postpartum period increased from 8% at baseline to 29% at endline in comparison HZs and from 15% at baseline to 42% at endline in intervention health zones. Among FTMs age 15-19, the percentage who had ever discussed use of a FP within the first six week following childbirth with their husband/partner increased by 25 percentage points and 31 percentage

Table 3.14 Percentage of FTMs age 15-24 who believe that they have total control over the decision to use a PPFP method, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	38.8	35.5	ns	39.1	39.4	ns	53.0	41.6	*	43.4	42.9	ns	43.6	37.6	ns	40.5	40.5	ns
Secondary complete/ higher	43.8	39.7	ns	50.5	48.5	ns	48.8	44.4	ns	50.4	56.1	ns	47.9	43.6	ns	50.4	54.1	ns
Never married																		
No	43.1	34.9	ns	44.6	44.9	ns	49.8	43.2	ns	49.4	49.2	ns	47.2	40.0	**	47.2	47.2	ns
Yes	34.8	38.0	ns	35.8	34.7	ns	52.2	44.2	ns	41.4	55.9	*	41.4	40.4	ns	38.0	43.0	ns
Household wealth																		
Low	44.5	32.9	*	43.6	42.1	ns	47.8	44.0	ns	46.8	47.4	ns	46.0	38.1	ns	44.9	44.4	ns
Medium	37.8	37.2	ns	41.3	41.3	ns	51.7	43.9	ns	42.0	52.7	ns	45.4	40.9	ns	41.6	46.6	ns
High	36.0	39.0	ns	38.1	39.8	ns	50.7	42.7	ns	53.4	52.1	ns	45.0	41.2	ns	47.1	47.1	ns
Worked last year																		
No	38.0	36.4	ns	45.0	42.3	ns	51.6	48.1	ns	49.3	53.3	ns	44.4	41.9	ns	47.0	47.3	ns
Yes	44.3	35.7	ns	34.0	39.1	ns	48.7	37.7	*	45.0	47.1	ns	47.3	37.0	**	40.1	43.5	ns
Watched TV at least once a week																		
No	39.9	35.7	ns	41.4	39.4	ns	49.2	46.0	ns	49.1	52.2	ns	44.8	41.1	ns	44.8	45.1	ns
Yes	39.5	36.5	ns	41.5	42.6	ns	50.9	42.0	*	46.7	50.0	ns	45.8	39.6	*	44.2	46.4	ns
Both parents have secondary/higher education																		
No	34.7	41.8	ns	36.8	35.6	ns	51.0	47.0	ns	46.7	41.1	ns	42.9	44.4	ns	42.3	38.7	ns
Yes	41.1	34.6	ns	42.5	42.5	ns	50.1	42.6	*	47.8	53.6	ns	46.1	39.0	**	45.0	47.8	ns
Total	39.6	36.2	ns	41.5	41.3	ns	50.3	43.4	*	47.5	50.7	ns	45.4	40.1	*	44.4	45.9	ns
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 3.15 Mean postpartum family planning self-efficacy score among FTMs age 15-24, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	18.4	18.3	ns	18.9	19.2	ns	19.1	18.8	ns	19.6	19.4	ns	18.6	18.5	ns	19.1	19.3	ns
Secondary complete/ higher	18.3	20.0	ns	20.0	19.4	ns	18.9	19.0	ns	19.2	19.9	ns	18.8	19.2	ns	19.4	19.8	ns
Never married																		
No	18.0	18.5	ns	19.3	19.6	ns	18.7	19.1	ns	19.4	19.8	ns	18.5	18.8	ns	19.4	19.7	ns
Yes	18.8	18.7	ns	18.7	18.6	ns	19.7	18.5	ns	19.4	19.4	ns	19.2	18.6	ns	19.0	18.9	ns
Household wealth																		
Low	18.7	18.6	ns	19.0	19.3	ns	19.2	18.9	ns	19.8	19.8	ns	18.9	18.7	ns	19.3	19.5	ns
Medium	18.3	18.4	ns	19.1	19.3	ns	19.2	19.2	ns	18.6	19.4	ns	18.8	18.8	ns	18.9	19.3	ns
High	18.2	18.8	ns	19.4	19.2	ns	18.6	18.7	ns	19.7	19.9	ns	18.4	18.7	ns	19.6	19.6	ns
Worked last year																		
No	18.2	18.3	ns	19.4	19.5	ns	18.6	19.0	ns	19.7	19.8	ns	18.4	18.7	ns	19.5	19.6	ns
Yes	18.9	19.3	ns	18.5	18.8	ns	19.4	18.8	ns	18.8	19.6	ns	19.2	19.0	ns	18.7	19.2	ns
Watched TV at least once a week																		
No	18.1	19.3	ns	19.2	19.3	ns	19.4	18.9	ns	19.7	20.1	ns	18.8	19.1	ns	19.4	19.7	ns
Yes	18.6	18.2	ns	19.0	19.2	ns	18.7	19.0	ns	19.2	19.5	ns	18.6	18.6	ns	19.1	19.3	ns
Both parents have secondary/higher education																		
No	18.4	19.3	ns	18.7	18.2	ns	18.6	18.9	ns	20.3	20.0	ns	18.5	19.1	ns	19.6	19.2	ns
Yes	18.4	18.4	ns	19.2	19.5	ns	19.0	19.0	ns	19.1	19.6	ns	18.7	18.7	ns	19.1	19.5	ns
Total	18.4	18.6	ns	19.1	19.3	ns	18.9	18.9	ns	19.4	19.7	ns	18.7	18.8	ns	19.2	19.5	ns
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 3.16 Percentage of FTMs age 15-24 who would use PPFP even if all five named referents did not want them to, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	43.4	35.8	*	44.6	38.3	ns	50.3	38.4	*	43.9	42.9	ns	45.7	36.7	**	44.3	39.8	ns
Secondary complete/ higher	46.6	39.7	ns	45.5	40.6	ns	46.5	36.5	**	36.3	38.8	ns	46.5	37.0	**	38.8	39.3	ns
Never married																		
No	43.9	34.1	*	44.6	39.8	ns	45.9	36.7	**	36.5	41.6	ns	45.1	35.7	**	40.3	40.7	ns
Yes	44.0	39.7	ns	45.1	37.0	ns	54.9	38.9	*	48.6	36.9	ns	48.1	39.4	*	46.5	37.0	*
Household wealth																		
Low	46.5	31.6	**	43.1	40.1	ns	52.2	35.1	**	40.9	46.1	ns	49.1	33.2	***	42.1	42.7	ns
Medium	37.2	34.5	ns	46.5	37.2	ns	46.1	36.1	ns	40.0	44.7	ns	42.1	35.4	ns	43.5	40.7	ns
High	48.5	44.1	ns	45.1	38.9	ns	46.4	39.3	ns	37.4	31.3	ns	47.3	41.2	ns	40.6	34.4	ns
Worked last year																		
No	43.8	37.3	ns	49.2	37.8	**	53.3	40.1	**	42.4	40.9	ns	48.3	38.7	***	46.1	39.2	*
Yes	44.3	33.9	ns	35.3	41.0	ns	41.1	33.5	ns	35.1	39.8	ns	42.2	33.6	*	35.2	40.3	ns
Watched TV at least once a week																		
No	44.0	32.1	*	49.5	37.9	*	54.5	32.6	***	44.7	42.9	ns	49.6	32.4	***	47.4	40.1	ns
Yes	43.9	39.1	ns	41.5	39.4	ns	44.1	39.6	ns	36.6	39.2	ns	44.0	39.4	ns	39.0	39.3	ns
Both parents have secondary/higher education																		
No	50.0	41.8	ns	43.7	29.9	ns	52.0	31.0	**	43.9	39.3	ns	51.0	36.4	**	43.8	35.1	ns
Yes	42.2	34.9	*	45.0	40.7	ns	46.8	38.6	*	38.1	40.8	ns	44.8	36.9	**	41.7	40.8	ns
Total	44.0	36.4	*	44.8	38.8	ns	47.8	37.1	***	39.4	40.5	ns	46.1	36.8	***	42.1	39.6	ns
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 3.17 Percentage of FTMs who have ever discussed use of a PPFP method within the first six weeks following childbirth with anyone, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	16.7	41.0	***	22.0	54.7	***	19.5	40.5	***	20.1	57.1	***	17.6	40.8	***	21.4	55.5	***
Secondary complete/ higher	13.7	42.5	***	31.7	55.4	***	18.8	46.2	***	25.2	61.2	***	17.9	45.5	***	26.9	59.6	***
Never married																		
No	16.1	39.6	***	26.8	59.6	***	19.4	44.9	***	22.8	59.8	***	18.1	42.9	***	24.6	59.7	***
Yes	16.3	43.5	***	19.1	46.2	***	17.7	41.6	***	24.3	58.6	***	16.8	42.8	***	21.1	51.1	***
Household wealth																		
Low	16.8	39.4	***	21.8	54.5	***	18.7	47.8	***	19.5	58.4	***	17.6	43.3	***	20.8	56.2	***
Medium	13.5	41.9	***	25.0	58.1	***	18.9	37.8	***	20.7	60.7	***	16.5	39.6	***	23.0	59.3	***
High	18.4	42.6	***	26.5	50.4	***	19.4	47.4	***	28.8	59.5	***	19.0	45.5	***	27.9	55.8	***
Worked last year																		
No	15.7	41.0	***	22.7	54.7	***	17.6	46.7	***	20.7	57.6	***	16.6	43.7	***	21.7	56.0	***
Yes	17.4	41.7	***	26.9	55.1	***	20.8	41.1	***	26.7	62.3	***	19.7	41.3	***	26.8	59.1	***
Watched TV at least once a week																		
No	20.2	45.2	***	25.8	59.6	***	19.3	40.6	***	22.4	57.8	***	19.7	42.8	***	24.2	58.8	***
Yes	13.7	38.7	***	22.8	51.6	***	18.9	46.2	***	23.5	60.5	***	16.6	42.9	***	23.2	56.1	***
Both parents have secondary/higher education																		
No	14.3	40.8	***	19.5	49.4	***	17.0	43.0	***	25.2	51.4	***	15.7	41.9	***	22.7	50.5	***
Yes	16.7	41.3	***	25.0	56.0	***	19.5	44.5	***	22.5	61.9	***	18.3	43.1	***	23.8	58.8	***
Total	16.2	41.2	***	24.0	54.8	***	19.0	44.2	***	23.1	59.5	***	17.7	42.8	***	23.6	57.1	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 3.18 Percentage of FTMs who have ever discussed use of a PPFP method within the first six weeks following childbirth with their husband/partner, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	6.0	22.4	***	12.2	35.0	***	10.3	27.6	***	14.8	42.9	***	7.4	24.1	***	13.0	37.6	***
Secondary complete/ higher	5.5	31.5	***	16.8	44.6	***	8.8	36.2	***	19.1	48.6	***	8.2	35.4	***	18.5	47.5	***
Never married																		
No	7.5	24.7	***	15.6	40.1	***	10.4	34.0	***	17.4	49.2	***	9.3	30.4	***	16.6	44.9	***
Yes	3.8	22.8	***	8.7	31.2	***	5.3	30.1	***	17.1	36.9	***	4.4	25.6	***	12.0	33.5	***
Household wealth																		
Low	6.5	25.2	***	10.9	35.1	***	10.4	37.3	***	12.3	44.8	***	8.3	30.8	***	11.5	39.3	***
Medium	4.1	19.6	***	12.8	39.0	***	10.0	31.7	***	15.3	44.7	***	7.3	26.2	***	14.0	41.6	***
High	7.4	27.2	***	17.7	37.2	***	8.1	31.8	***	23.9	49.1	***	7.8	30.0	***	21.4	44.2	***
Worked last year																		
No	4.9	22.5	***	12.7	36.9	***	9.0	33.6	***	15.2	45.7	***	6.9	27.7	***	13.8	40.9	***
Yes	8.7	27.8	***	14.1	37.2	***	9.7	32.6	***	20.4	47.1	***	9.4	31.1	***	17.6	42.7	***
Watched TV at least once a week																		
No	8.9	28.0	***	13.1	37.9	***	9.6	31.0	***	14.3	42.9	***	9.3	29.6	***	13.6	40.1	***
Yes	4.1	21.4	***	13.1	36.3	***	9.2	34.3	***	19.0	48.0	***	6.9	28.6	***	16.1	42.4	***
Both parents have secondary/higher education																		
No	3.1	21.4	***	12.6	29.9	***	7.0	26.0	***	15.0	40.2	***	5.1	23.7	***	13.9	35.6	***
Yes	6.7	24.6	***	13.3	38.5	***	9.9	34.8	***	18.1	48.1	***	8.5	30.3	***	15.5	43.0	***
Total	5.9	23.9	***	13.1	37.0	***	9.3	33.1	***	17.3	46.3	***	7.8	28.9	***	15.2	41.5	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns Not significant
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

points in comparison HZs and intervention HZs, respectively. In the 20-24 age group, the largest absolute increases in the lifetime prevalence of partner discussion of PPFP use (39-40 percentage points) occurred in intervention HZs among FTMs from the poorest or medium-wealth households and among those who had two parents with secondary or higher education.

We also examined differences in the prevalence of partner discussion of FP **after** childbirth or pregnancy loss. As Table 3.19 shows, in both age groups and the overall sample, the prevalence of postpartum discussion of FP was higher in intervention HZs than in comparison HZs. After childbirth/pregnancy loss, 69% of FTMs in intervention HZs discussed use of FP with their husbands/partners compared to 62% of their counterparts in comparison HZs. The prevalence of postpartum FP discussion was higher among older than younger FTMs. In intervention HZs, the prevalence rate was 75% for FTMs age 20-24, compared to 63% for FTMs age 15-19. In the latter age group, less educated FTMs, those who were ever married, those from medium-wealth households, the unemployed, those with weekly TV exposure, and those who did not have two parents with secondary/higher education had significantly higher levels of partner postpartum discussion of FP if they resided in intervention HZs than in comparison HZs. The largest absolute difference – about 15 percentage points – was found among ever married FTMs. In the age group 20-24, the following groups had significantly higher levels of postpartum partner discussion of FP in intervention HZs than in comparison HZs: more educated FTMs, those who were ever married, those living in the poorest households, the unemployed, those who did not watch TV weekly, and those who did not have two parents with secondary/higher education. Among both younger and older FTMs, ever-married and unemployed women were the only two sociodemographic subgroups that had significantly higher levels of postpartum discussion of FP in intervention HZs than in comparison HZs.

3.6 Contraceptive Use

3.6.1 Postpartum family planning

Use of a modern method of contraception in the immediate postpartum period (0-2 months after childbirth or pregnancy loss) was low, but significantly higher in intervention HZs than in comparison HZs among younger as well as older FTMs, and in the overall sample (see Table 3.20). Overall, 11% of FTMs residing in intervention HZs used a modern contraceptive method in the immediate postpartum period compared to 7% of their counterparts residing in comparison HZs. Among FTMs age 15-19, contraceptive prevalence rates in the immediate postpartum period were significantly higher in intervention HZs than in comparison HZs among those who were less educated, never married, and watched TV at least once a week. Similar patterns were observed among FTMs age 20-24 in these socioeconomic groups. Among older FTMs, statistically significant health-zone differences are also found among those living in the wealthiest households, the unemployed, and those with two parents with secondary/higher levels of education.

As Table 3.21 shows, HZ differences in modern postpartum contraceptive use within six months of childbirth/pregnancy loss were statistically significant in both age groups, and in the overall sample. Twenty-seven percent of FTMs in intervention HZs and 20% of those in comparison HZs used PPFP within 6 months of childbirth or pregnancy loss. In the 15-19 age group HZ differences in contraceptive prevalence were statistically significant among more educated FTMs, the never married, those from medium wealth or the wealthiest households, both employed and unemployed FTMs, those with weekly exposure to TV and those with two parents with secondary or higher education. Twice as many FTMs age 15-19 with complete secondary/higher education used PPFP within six months of childbirth/pregnancy loss in intervention HZs than in comparison HZs (31% versus 14%).

Table 3.19 Percentage of FTMs age 15-24 who have discussed use of a method of contraception with their husband/partner since childbirth or pregnancy loss, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	54.1	61.4	*	63.2	72.0	ns	57.2	64.9	**
Secondary complete/ higher	60.3	70.3	ns	69.7	77.7	*	68.0	75.7	*
Never married									
No	56.1	71.0	***	68.2	78.9	***	63.6	75.2	***
Yes	53.8	49.1	ns	64.6	64.0	ns	57.9	54.9	ns
Household wealth									
Low	57.4	60.4	ns	64.9	77.3	*	60.9	67.7	ns
Medium	55.4	69.2	*	67.8	72.7	ns	62.2	70.8	*
High	52.2	59.3	ns	68.7	76.1	ns	62.2	69.2	ns
Worked last year									
No	53.4	61.9	*	62.3	73.6	**	57.6	67.2	***
Yes	60.0	66.0	ns	73.7	78.0	ns	69.2	72.6	ns
Watched TV at least once a week									
No	53.0	60.6	ns	63.1	75.2	*	58.3	67.1	*
Yes	56.5	65.1	*	69.8	75.5	ns	63.9	70.4	*
Both parents have secondary/higher education									
No	41.8	60.9	**	61.0	69.2	ns	51.5	65.5	**
Yes	58.9	63.7	ns	68.9	77.2	**	64.5	70.1	*
Total	55.1	63.2	*	67.4	75.4	**	61.8	69.2	***
N	**443**	**488**		**526**	**470**		**969**	**958**	

*** p <.001; ** p < .01; * p < .05; ns Not significant
Source: MOMENTUM 2020 Endline Survey

Table 3.20 Percentage of FTMs age 15-24 who used a modern contraceptive method 0-2 months after childbirth/pregnancy loss, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	5.7	10.4	*	7.0	13.8	*	6.2	11.5	**
Secondary complete/ higher	8.2	8.9	ns	7.6	10.4	ns	7.7	10.0	ns
Never married									
No	7.5	9.9	ns	8.3	10.7	ns	7.9	10.3	ns
Yes	4.3	10.4	*	4.4	15.3	**	4.4	12.3	***
Household wealth									
Low	4.5	7.4	ns	7.5	10.4	ns	5.9	8.7	ns
Medium	7.4	11.6	ns	8.9	11.3	ns	8.2	11.5	ns
High	6.6	12.4	ns	6.2	13.5	*	6.3	13.0	**
Worked last year									
No	6.8	10.0	ns	6.9	12.0	*	6.9	10.9	*
Yes	4.3	10.3	ns	8.1	11.5	ns	6.8	11.0	ns
Watched TV at least once a week									
No	8.9	11.1	ns	9.1	11.2	ns	9.0	11.1	ns
Yes	4.4	9.3	*	6.5	12.1	*	5.6	10.8	**
Both parents have secondary/higher education									
No	4.1	11.5	ns	11.0	12.1	ns	7.6	11.9	ns
Yes	6.7	9.8	ns	6.6	11.7	*	6.7	10.7	**
Total	6.2	10.1	*	7.4	11.8	*	6.8	10.9	**
N	**443**	**488**		**526**	**470**		**969**	**958**	

*** p <.001; ** p < .01; * p < .05; ns Not significant
Source: MOMENTUM 2020 Endline Survey

Table 3.21 Percentage of FTMs age 15-24 who used a modern contraceptive method 0-5 months after childbirth/pregnancy loss, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	20.3	26.1	ns	20.0	24.7	ns	20.2	25.6	*
Secondary complete/ higher	13.7	30.7	**	19.9	29.6	**	18.8	29.9	***
Never married									
No	22.6	27.9	ns	21.1	28.6	*	21.6	28.3	**
Yes	14.5	25.4	**	15.9	24.8	ns	15.1	25.2	**
Household wealth									
Low	22.0	26.1	ns	20.0	27.4	ns	21.1	26.7	ns
Medium	19.6	30.8	*	21.1	25.3	ns	20.4	28.3	*
High	15.4	23.0	ns	19.0	30.1	*	17.6	27.2	**
Worked last year									
No	19.9	26.9	*	17.0	30.6	***	18.5	28.6	***
Yes	17.2	27.4	*	23.6	23.4	ns	21.5	25.2	ns
Watched TV at least once a week									
No	23.7	31.2	ns	20.9	31.1	*	22.2	31.1	**
Yes	16.4	24.2	*	19.5	25.8	ns	18.1	25.0	**
Both parents have secondary/higher education									
No	19.4	29.5	ns	23.8	31.5	ns	21.6	30.6	*
Yes	19.1	26.5	*	19.1	26.5	*	19.1	26.5	***
Total	19.2	27.0	**	20.0	27.7	**	19.6	27.3	***
N	**443**	**488**		**526**	**470**		**969**	**958**	

*** p <.001; ** p < .01; * p < .05; ns Not significant
Source: MOMENTUM 2020 Endline Survey

In the 20-24 age group, the percentage of FTMs who used a modern method of PPFP within six months of childbirth/pregnancy loss was significantly higher in intervention HZs than in comparison HZs (28% versus 20%) (see Table 3.21). Significantly higher postpartum contraceptive prevalence rates were found among those who were more educated, ever married, living in the wealthiest households, unemployed, not exposed to TV once a week, and who had two parents with secondary/higher education. In these sociodemographic subgroups, the relative increase in postpartum contraceptive prevalence in the six months following childbirth/pregnancy loss ranged from 40% to 60%.

In Table 3.22, we examined the percentage of FTMs who used a modern method of PPFP within the first 12 months following childbirth/pregnancy loss. As can be discerned from the previous two tables, the rate of modern contraceptive use within the first 12 months more than doubled as one moved from the immediate postpartum period to the six months following childbirth/pregnancy loss (from 7% to 28% in comparison HZs and from 11% to 27% in intervention HZs). By the 12th month following childbirth or pregnancy loss the percentage of FTMs using a modern method of contraception was 39% in comparison HZs and 52% in intervention HZs, a statistically significant difference. HZ differences of a similar magnitude were found among both younger and older FTMs and in many of the socioeconomic groups examined.

Among FTMs age 15-19, the only sociodemographic subgroups for which HZ differences in PPFP use within 12 months of childbirth/pregnancy loss were not statistically significant were more educated women, those from the poorest households, and those with less educated parents. In the 20-24 age group, HZ differences were not statistically significant among the never married, the poorest FTMs, the employed, and those with less educated parents. The largest absolute differences in use of a modern method of PPFP within 12 months following childbirth or pregnancy loss were found among FTMs age 15-19 from medium-wealth households (22 percentage points) and those age 20-24 who were unemployed in the past 12 months (20 percentage points).

3.6.2 Current use of a modern method

As Table 3.23 shows, there was a significant difference between comparison HZs and intervention HZs in current use of a modern method. In comparison HZs, modern contraceptive prevalence was 36% compared to 43% in intervention HZs. Comparison HZs also had significantly lower levels of current use of a modern method than intervention HZs in both the 15-19 (35% versus 42%) and 20-24 (36% versus 45%) age groups. Among FTMs age 15-19, rates of modern contraceptive use were significantly higher in intervention HZs than in comparison HZs for only three socioeconomic groups: less educated FTMs, those from medium wealth households, and those who were unemployed. For example, the percentage of unemployed FTMs age 15-19 who were currently using a method of contraception at the endline survey was 35% and 44% in comparison HZs and intervention HZs, respectively. Among FTMs age 20-24, current use of a modern method was significantly higher in intervention HZs than in comparison HZs among the following socioeconomic groups: more educated women, those who were ever married, those from the wealthiest households, the unemployed, those with weekly TV exposure, and those with more educated parents. In the 20-24 age group, there were no significant socioeconomic variations in modern contraceptive use.

Table 3.22 Percentage of FTMs age 15-24 who used a modern contraceptive method 0-11 months after childbirth/pregnancy loss, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	38.9	53.0	***	36.8	48.9	*	38.2	51.6	***
Secondary complete/ higher	38.4	50.5	ns	39.9	51.8	**	39.6	51.4	***
Never married									
No	44.7	54.6	*	39.5	52.4	***	41.5	53.4	***
Yes	30.6	48.6	***	36.3	45.1	ns	32.8	47.2	***
Household wealth									
Low	43.2	48.5	ns	44.8	51.3	ns	43.9	49.7	ns
Medium	36.5	58.7	***	36.7	48.0	*	36.6	53.7	***
High	36.0	50.4	*	36.5	52.8	**	36.3	51.8	***
Worked last year									
No	40.1	52.9	***	31.5	51.1	***	36.0	52.1	***
Yes	35.3	51.6	**	47.7	50.0	ns	43.6	50.7	ns
Watched TV at least once a week									
No	42.6	53.3	*	41.2	54.9	*	41.9	54.0	**
Yes	36.5	51.9	***	37.5	48.4	**	37.0	50.1	***
Both parents have secondary/higher education									
No	37.8	51.1	ns	44.6	53.7	ns	41.2	52.6	*
Yes	39.1	52.7	***	37.4	49.7	***	38.2	51.3	***
Total	38.8	52.5	***	38.8	50.6	***	38.8	51.6	***
N	**443**	**488**		**526**	**470**		**969**	**958**	

*** p <.001; ** p < .01; * p < .05; ns Not significant
Source: MOMENTUM 2020 Endline Survey

Table 3.23 Percentage of FTMs age 15-24 who were currently using a modern contraceptive method, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	34.1	42.1	*	36.8	42.6	ns	35.0	42.3	*
Secondary complete/ higher	41.1	42.6	ns	35.8	45.7	*	36.7	44.9	*
Never married									
No	37.7	44.4	ns	36.6	43.7	*	37.0	44.0	**
Yes	31.7	38.2	ns	34.5	46.9	ns	32.8	41.6	*
Household wealth									
Low	35.8	35.5	ns	41.5	42.7	ns	38.4	38.6	ns
Medium	29.1	47.7	***	36.7	46.0	ns	33.2	46.9	***
High	41.2	46.0	ns	32.2	44.8	*	35.7	45.3	*
Worked last year									
No	34.9	44.4	*	32.2	46.4	***	33.6	45.3	***
Yes	36.2	37.6	ns	40.9	41.7	ns	39.4	39.8	ns
Watched TV at least once a week									
No	30.2	39.7	ns	37.4	43.3	ns	34.0	41.3	*
Yes	38.3	43.9	ns	35.4	45.1	*	36.7	44.5	**
Both parents have secondary/higher education									
No	33.7	40.9	ns	36.6	45.4	ns	35.2	43.4	ns
Yes	35.7	42.5	ns	36.0	44.2	*	35.8	43.3	**
Total	35.2	42.2	*	36.1	44.5	**	35.7	43.3	***
N	**443**	**488**		**526**	**470**		**969**	**958**	

*** p <.001; ** p < .01; * p < .05; ns Not significant

Pertains to women who were not currently pregnant at the time of the survey.

Source: MOMENTUM 2020 Endline Survey

3.6.3 Source of contraception

In the endline survey, information was collected from current users of modern FP methods on where they obtained the current method from the first time they started using it. Table 3.24 shows the percent distribution of current users by source of contraception, age group, and HZ. Users of rhythm and lactational amenorrhea method were asked where they learned to use the method. Overall, in comparison HZs, the private sector was the most frequently reported source of contraceptive supply providing contraception to at least two and a half times as many women as the public sector (68% versus 24%). A pharmacy was the most frequently reported private sector source (46%) while a government health center was the most frequently reported public sector source (12%). A similar pattern was observed in intervention HZs, regardless of age group.

The major differences between comparison HZs and intervention HZs were the reduced role of pharmacies in the latter HZs and the greater role played by MOMENTUM nursing students in increasing access to FP methods. In the overall population, pharmacies provided contraception to 22% of FTMs in intervention HZs compared to 46% of those in comparison HZs, while MOMENTUM nursing students were a source of supply for 30% of users in intervention HZs and the most important source of contraceptive supply. MOMENTUM nursing students provided contraception to 25% of users age 15-19 and 34% of those age 20-24 in intervention HZs. Among FTMs age 15-19, a pharmacy was the most frequently reported private sector source of supply in comparison HZs (44%), while in intervention HZs, provision of contraceptives to this age group was equally shared by pharmacies (19%) and private hospitals/clinics (20%). Pharmacies were the most frequently used private sector source among older FTMs in intervention HZs, providing contraception to twice as many users as private hospitals and clinics (25% versus 11%).

3.6.4 Informed choice

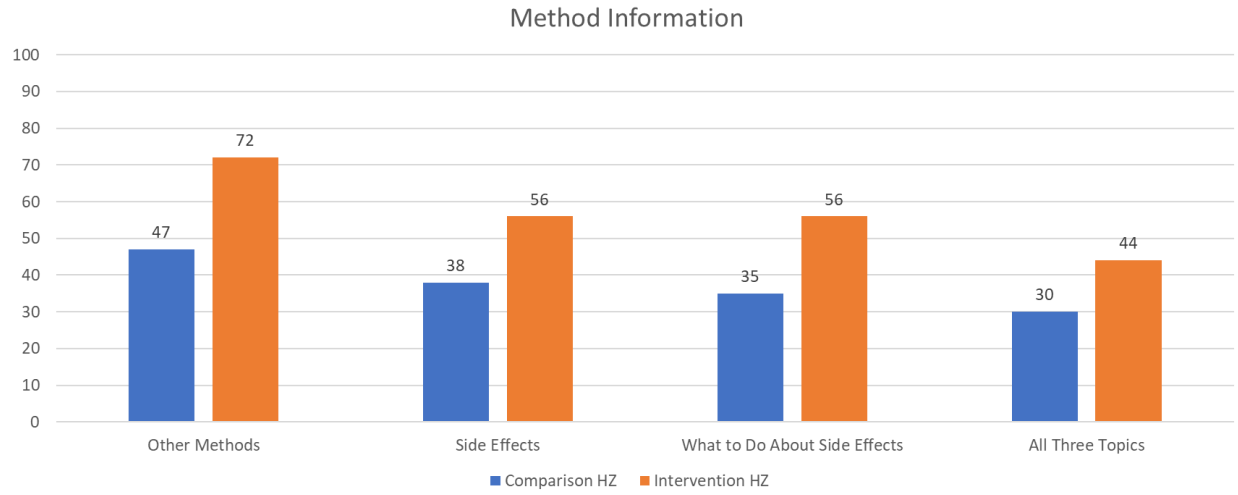
This section presents data on the percentage of contraceptive users who were counseled on all of the following issues: (a) methods other than the one they received, (b) method-specific side effects, and (c) what to do if they experienced side effects. The data permit an assessment of the extent to which service providers supply adequate information to women receiving FP services to help them make informed choices. Figure 3.1 shows that less than half of FTMs who were currently using a modern contraceptive method were given information about all three components of informed choice: 30% in comparison HZs and 44% in intervention HZs.

Table 3.24 Percent distribution of FTMs age 15-24 who are currently using a modern method by source of contraceptive supply, by age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Source of Supply	**Comparison**	**Intervention**		**Comparison**	**Intervention**		**Comparison**	**Intervention**	
Public Sector			***			***			***
Government hospital	7.9	4.5		5.9	6.5		6.8	5.5	
Government health center	10.8	17.0		13.0	9.5		12.0	13.1	
Family planning clinic	0.0	0.6		1.2	1.1		0.6	0.8	
Field worker	3.6	2.8		2.4	2.1		2.9	2.5	
Other public sector outlet	2.9	0.6		0.0	0.5		1.3	0.6	
Private medical Sector			***			***			***
Private hospital/clinic	13.7	20.3		17.2	10.6		15.6	15.3	
Pharmacy	43.9	19.2		47.3	24.9		45.8	22.1	
Private doctor	0.0	0.0		0.0	1.1		0.0	0.5	
Field worker	0.0	1.1		3.5	1.5		2.0	1.4	
Other private medical sector	4.3	2.3		4.1	1.5		4.2	1.9	
Other source			***			***			***
Religious institution	0.7	0.0		0.6	0.0		0.6	0.0	
Friend/relative	2.1	2.8		1.8	1.5		2.0	2.2	
MOMENTUM nursing student	0.0	24.9		0.0	33.9		0.0	29.5	
Other	10.1	3.9		3.0	5.3		6.2	4.6	
Total	100.0	100.0		100.0	100.0		100.0	100.0	
N	**139**	**177**		**169**	**189**		**308**	**366**	

*** p <.001
Data pertain to women who were not currently pregnant and were using a modern contraceptive method at the time of the survey.
Source: MOMENTUM 2020 Endline Survey

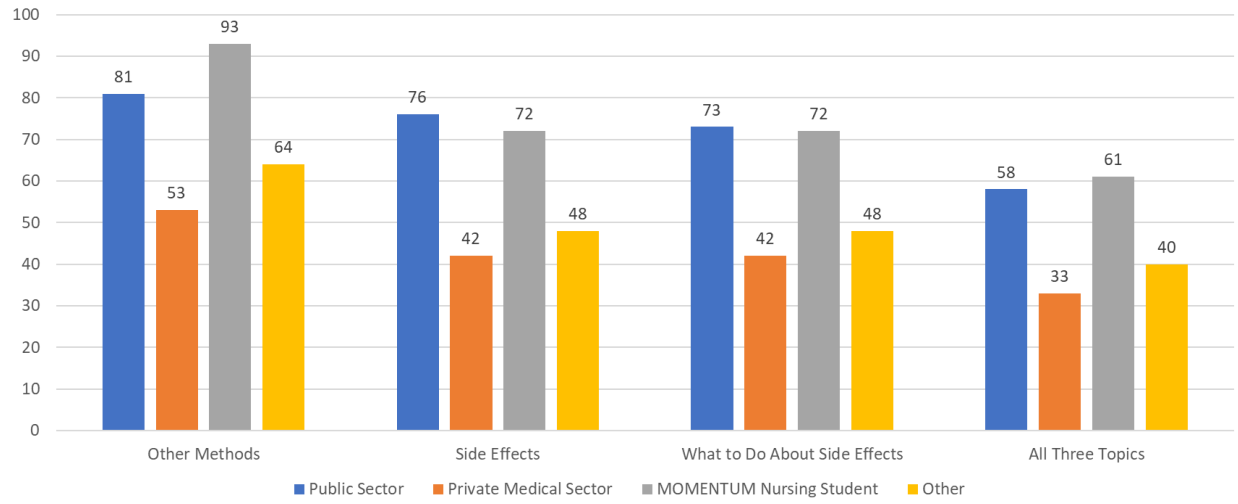
Figure 3.1 Among FTMs age 15-24 who were currently using a modern contraceptive method, the percentage reporting that the provider informed them about other methods, method side effects, and what to do if experiencing side effects, by age group, and study arm, Kinshasa



There were significant HZ differentials for each of the three issues considered essential for informed choice. Modern method users in intervention HZs were significantly more likely than those in comparison HZs to be informed about other FP method options, about potential side effects of their method and what to do if they experienced any of the side effects. For example, 72% of users in intervention HZs were informed about other contraceptive method options compared to 47% of their counterparts in comparison HZs. In comparison HZs, 38% of users were informed about method side effects or problems, and 35% about what to do if they experienced any of the side effects.

Figure 3.2 examines informed choice among FTMs residing in intervention HZs who were currently using modern contraceptives, by source of the method. The percentage of FTMs who were informed about other available methods that they could use was highest among those who obtained their method from a MOMENTUM nursing student (93%) and lowest among those who obtained their method from the private medical sector. The percentage who were informed about possible side effects or problems with their method ranged from 76% among those who obtained their method from the public sector to 42% among those who obtained their method from the private medical sector. Seventy-two percent of current users who obtained their method from a MOMENTUM nursing students were informed about the possible side effects or problems associated with the method they used. A similar pattern was observed for receipt of information about what to do if FTMs experienced side effects or problems with the method used. The method information index ranged from 61% for MOMENTUM nursing students, 58% for the public sector, 40% for other sources of supply, and 33% for the private medical sector. The data suggest that more FTMs who obtained their current method from MOMENTUM nursing students and the public sector were able to select their method based on an understanding of all their options compared to FTMs who obtained their method from the private medical sector or other sources. Other sources included shops, churches, and friends/relatives.

Figure 3.2 Among FTMs age 15-24 in intervention health zones who were currently using a modern contraceptive method, the percentage reporting that the provider informed them about other methods, method side effects, and what to do if experiencing side effects, by source of the method, Kinshasa



Data exclude users of the Lactational Amenorrhea Method.

Table 3.25 shows the percentage of modern method users who reported that the provider informed them about other contraceptive options by age group, socioeconomic characteristics, and HZ. In each socioeconomic group, regardless of age, significantly more FTMs from intervention HZs reported being informed about other contraceptive options than their counterparts in comparison HZs. For example, in the age group 15-19, twice as many FTMs from the poorest households were informed about other contraceptive method options as their counterparts in comparison HZs (68% versus 33%). There were three exceptions to this general pattern: less educated FTMs and those from the wealthiest households in the 15-19 age group and never married FTMs age 20-24 among whom HZ differentials were not statistically significant. In comparison HZs, the lowest information rates were found among FTMs age 15-19 residing in the poorest households (33%) and FTMs age 15-19 with less educated parents (35%).

In the age group 20-24, the percentage of FTMs informed about other contraceptive options ranged from 47% to 53% in comparison HZs and from 71% to 84% in intervention HZs. The largest absolute differences between comparison and intervention HZs, exceeding 30 percentage points, were seen among less educated FTMs, those from the poorest households, and those who did not have two parents with secondary/higher education. In general, significantly fewer FTMs age 15-19 were informed about other FP methods that they could use than their counterparts age 20-24. In comparison HZs, the largest absolute age differences in information rates were found among the poorest FTMs (17 percentage points) and those with less educated parents (16 percentage points). In intervention HZs, the largest absolute age difference in information rates were found among less educated FTMs, the poorest FTMs and those with less educated parents (15 percentage points each). It was also observed that among FTMs age 20-24 from intervention HZs, more of those from lower educational backgrounds and less wealthy households were informed about other FP method options than their counterparts from higher education backgrounds or more wealthy households.

Table 3.26 shows the percentage of modern method users who reported that the provider informed them about potential side effects of their current method. The data show that only one in two current users in intervention HZs and one in three current users in comparison HZs were informed about possible side effects or problems of the method they were using. Among FTMs age 15-19 residing in comparison HZs, those from the poorest households and those with less educated parents were least informed about possible side-effects

(30% and 33%, respectively). Among their counterparts residing in intervention HZs, those residing in the wealthiest households (42%) and never married FTMs (49%) were least likely to be informed about possible method side effects. Among FTMs age 20-24, there were small differences by socioeconomic characteristics in the level of information about method side effects in comparison HZs, where the percentage ranged from 35% to 41% as compared to a range of 50% to 64% among FTMs of the same age residing in intervention HZs. Among the latter group of FTMs, the lowest percentages of women informed about possible method side effects included those who were more educated, residing in the wealthiest households, and employed in the past 12 months (505-51%),

The provision of information about method side effects tended to be significantly higher in intervention HZs than in comparison HZs for many of the socioeconomic categories examined. For example, among FTMs with less educated parents, twice as many were informed about possible method side effects in intervention HZs than in comparison HZs (64% and 30%, respectively). There were a few socioeconomic groups with small or statistically insignificant HZ differences. In both age groups, these exceptions included more educated FTMs, the never married and those living in the wealthiest households. Additional subgroups with statistically insignificant HZ differentials were FTMs age 15-19 residing in medium-wealth households and FTMs age 20-24 with less educated parents.

Table 3.27 presents the percentage of current users of modern contraception who were informed about what to do if side effects were experienced. This information helps users cope with side effects and may reduce the likelihood of discontinuation of temporary methods. The levels and patterns shown are similar to those in Table 3.26 and will not be described in detail here. Within each age group, provision of information about what to do if side effects were experienced was more limited in comparison HZs than in intervention HZs. Health zone differentials were not statistically significant among the never married and those from the wealthiest households in the age group 15-19 and among FTMs who were more educated, resided in medium-wealth households, and had less educated parents in the 20-24 age group. Within age groups and HZs, the only significant socioeconomic differentials in the receipt of information about what do if side effects were experienced were educational differentials among FTMs age 20-24 residing in intervention HZs (67% among those who did not complete secondary school or had lower levels of education versus 48% among their more educated counterparts).

Levels of informed choice – defined as provision/receipt of information on other contraceptive methods that could be used, possible side effects of the method, as well as what to do if problems are encountered in the use of the method – are shown in Table 3.28 by age group, HZ, and sociodemographic characteristics. In general, FTMs in intervention HZs had significantly higher levels of informed choice than their counterparts in comparison HZs. This is true for the overall sample (47% versus 34%) and for FTMs age 20-24 (49% versus 32%). Among younger FTMs, HZ differentials were statistically significant among those who were ever married, resided in the poorest households, and had less educated parents. In the age group 20-24, only four socioeconomic subgroups did not have significant HZ differentials in informed choice: current users of modern methods who had more education, resided in the wealthiest households, were employed and had less educated parents.

Table 3.25 Among FTMs age 15-24 who were currently using a modern contraceptive method, the percentage reporting that the provider informed them about other contraceptive methods, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	42.0	66.9	***	50.8	81.5	***	45.1	71.8	***
Secondary complete/ higher	46.2	69.0	ns	48.7	72.2	***	48.2	71.3	***
Never married									
No	43.2	69.9	***	48.6	77.6	***	46.5	73.9	***
Yes	42.0	61.9	*	52.8	71.2	ns	46.5	66.1	**
Household wealth									
Low	33.3	67.7	***	50.0	82.5	***	42.2	75.0	***
Medium	52.5	71.3	*	46.7	71.9	**	49.0	71.5	***
High	44.0	60.8	ns	51.6	73.5	**	48.2	68.1	**
Worked last year									
No	40.0	65.5	***	51.7	74.4	***	45.5	69.7	***
Yes	50.0	71.9	*	47.2	78.6	***	48.0	75.6	***
Watched TV at least once a week									
No	44.2	70.7	**	48.4	81.4	***	46.7	75.9	***
Yes	42.1	65.3	***	50.0	72.8	***	46.4	69.1	***
Both parents have secondary/higher education									
No	35.5	69.7	**	51.4	84.4	**	43.9	78.2	***
Yes	44.9	66.9	***	48.9	73.3	***	47.2	70.0	***
Total	42.8	67.3	***	49.4	75.9	***	46.5	71.6	***
N	**138**	**196**		**176**	**195**		**314**	**391**	

*** p <.001; ** p < .01; * p < .05; ns Not significant

Data pertained to women who were not currently pregnant and who were using a modern contraceptive method at the time of the survey. Fifty-six of these FTMs had missing values on the indicator examined.

Source: MOMENTUM 2020 Endline Survey

Table 3.26 Among FTMs age 15-24 who were currently using a modern contraceptive method, the percentage reporting that the provider informed them about method side effects, by baseline characteristics, age group, and study arm, Kinshasa

	Age -19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	34.9	57.7	***	35.3	64.2	***	35.1	59.8	**
Secondary complete/ higher	46.7	53.5	ns	39.3	50.0	ns	40.8	50.9	ns
Never married									
No	38.1	60.7	***	37.7	55.8	***	37.9	58.1	***
Yes	35.6	48.5	ns	38.5	54.7	ns	36.7	51.3	*
Household wealth									
Low	31.6	63.9	***	39.3	59.7	*	35.4	61.9	***
Medium	48.8	59.8	ns	39.4	56.5	*	43.1	58.3	*
High	33.9	42.3	ns	35.3	50.7	ns	34.7	47.3	*
Worked last year									
No	36.0	53.1	**	40.9	58.9	**	38.2	55.8	***
Yes	40.5	66.1	*	35.1	50.0	*	36.7	56.8	***
Watched TV at least once a week									
No	35.3	60.8	**	37.1	57.7	*	36.4	59.3	***
Yes	38.1	54.3	*	38.3	54.3	*	38.2	54.3	***
Both parents have secondary/higher education									
No	30.3	63.9	**	40.5	57.1	ns	35.7	60.0	**
Yes	39.0	55.3	**	37.3	55.0	***	38.0	55.2	***
Total	37.2	56.8	***	37.9	55.5	***	37.6	56.1	***
N	**156**	**206**		**190**	**209**		**346**	**415**	

*** p <.001; ** p < .01; * p < .05; ns Not significant

Data pertained to women who were not currently pregnant and who were using a modern contraceptive method at the time of the survey.

Source: MOMENTUM 2020 Endline Survey

3.6.5 Satisfaction with provider

Table 3.29 presents the percentage of women age 15–24 currently using a modern contraceptive method who would return to their provider and would refer a relative or friend to that provider – a measure of satisfaction with the FP provider. Levels of satisfaction were moderately high and in the overall sample, averaged 72% in comparison HZs and 80% in intervention HZs. Health zone variations in satisfaction were not statistically significant when the age groups were analyzed separately, but were in certain subgroups. Among FTMs age 15-19, significant HZ differentials were observed among those living in the poorest households, those who were unemployed, and those with less educated parents. For example, among teenage FTMs from the poorest households, the level of satisfaction with the FP provider was 60% in comparison HZs and 78% in intervention HZs. In the age group 20-24, satisfaction was significantly higher in intervention HZs than in comparison HZs among FTMs living in the poorest households (88% versus 73%).

3.6.6 Decision making about contraceptive use

Table 3.30 presents data on contraceptive decision making and shows the percentage of current modern contraceptive users age 15–24 who reported that they decided on the method themselves or jointly with a partner. The table shows how FTMs' participation (either alone or jointly) in decision making varies by HZ and socioeconomic characteristics. Seventy-nine percent of FTMs in comparison HZs and 76% of those in intervention HZs reported taking part in decision making about the current method. The highest level of FTM participation in FP decision making occurred among those age 20-24 who dd not watch TV at least once a week (86%). In many subgroups, more women in comparison HZs participated in FP decision making than their counterparts in intervention HZs. Health zone differentials in FTMs' participation in decision making about contraceptive use were not statistically significant, except among less educated women age 20-24 and women of the same age who did not have weekly exposure to TV.

Data on the extent to which FTMs currently using a modern method obtained their contraceptive method of choice are presented in Table 3.31. Ninety-one percent of FTMs in comparison HZs and 94% of those in intervention HZs obtained their method of choice. Overall, the percentage of FTMs currently using a modern contraceptive method reporting they obtained their contraceptive method of choice did not vary significantly by HZ in the overall sample and in the 20-24 age group. Among the latter group of FTMs, none of the HZ differentials in the extent to which current users obtained their contraceptive method of choice were statistically significant. Regarding FTMs age 15-19, the percentage obtaining their contraceptive method of choice was significantly higher in intervention HZs than in comparison HZs in the following subgroups: never married (96% versus 85%), unemployed (95% versus 88%), did not watch TV at least once a week (95% versus 84%), and had more educated parents (96% versus 87%).

Table 3.27 Among FTMs age 15-24 who were currently using a modern contraceptive method, the percentage reporting that the provider informed them about what do about method side effects, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	34.9	55.8	***	32.4	66.7	***	34.0	59.4	***
Secondary complete/ higher	36.7	60.5	*	36.9	47.7	ns	36.8	50.9	*
Never married									
No	35.1	60.0	***	36.4	54.5	**	35.9	57.0	***
Yes	35.6	50.0	ns	30.8	50.6	*	33.7	52.9	**
Household wealth									
Low	31.6	58.3	**	35.7	62.7	**	33.6	60.4	***
Medium	44.2	63.4	*	37.9	53.6	ns	40.4	58.9	**
High	32.1	44.2	ns	32.4	49.3	*	32.3	47.2	*
Worked last year									
No	35.1	55.1	**	37.6	57.4	**	36.2	56.2	***
Yes	35.7	61.0	*	33.0	51.2	*	33.8	55.4	***
Watched TV at least once a week									
No	33.3	66.7	*	31.4	53.5	**	33.9	56.7	***
Yes	35.8	54.7	**	37.5	55.8	**	36.0	55.5	***
Both parents have secondary/higher education									
No	33.3	66.7	**	37.8	51.0	ns	35.7	57.6	**
Yes	35.8	54.7	**	34.6	56.3	**	35.1	55.5	***
Total	35.3	56.8	***	35.3	55.0	***	35.3	55.9	***
N	**156**	**206**		**190**	**209**		**346**	**415**	

*** p <.001; ** p < .01; * p < .05; ns Not significant

Data pertained to women who were not currently pregnant and who were using a modern contraceptive method at the time of the survey.

Source: MOMENTUM 2020 Endline Survey

Table 3.28 Among FTMs age 15-24 who were currently using a modern contraceptive method, the percentage reporting that the provider informed them about other methods, method side effects, and what to do if experiencing side effects, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	33.9	45.4	ns	28.6	56.3	***	32.0	49.1	***
Secondary complete/ higher	38.5	45.2	ns	34.5	43.5	ns	35.2	43.9	ns
Never married									
No	33.0	48.9	*	34.3	49.0	*	33.8	48.9	***
Yes	38.0	38.1	ns	25.0	48.1	*	32.6	42.6	ns
Household wealth									
Low	27.1	49.2	*	31.5	52.4	*	29.4	50.8	***
Medium	47.5	50.0	ns	33.3	51.6	*	39.0	50.7	ns
High	32.0	33.3	ns	32.3	42.6	ns	32.1	38.7	ns
Worked last year									
No	33.0	42.4	ns	31.0	50.4	**	32.1	46.2	**
Yes	39.5	52.6	ns	33.7	45.7	ns	35.4	48.8	*
Watched TV at least once a week									
No	34.9	49.3	ns	28.1	50.0	**	30.8	49.7	**
Yes	34.7	43.0	ns	34.8	48.0	*	34.8	45.5	*
Both parents have secondary/higher education									
No	25.8	54.5	*	34.2	48.9	ns	30.3	51.3	*
Yes	37.4	43.6	ns	31.9	48.7	**	34.3	46.0	**
Total	34.8	45.4	ns	32.4	48.7	**	33.4	47.1	***
N	**138**	**196**		**176**	**195**		**314**	**391**	

*** p <.001; ** p < .01; * p < .05; ns Not significant

Data pertained to women who were not currently pregnant and were using a modern contraceptive method at the time of the survey.

Source: MOMENTUM 2020 Endline Survey

Table 3.29 Percentage of FTMs age 15–24 currently using a modern contraceptive method who would return to their provider and would refer a relative or friend to that provider, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	71.4	81.0	ns	70.6	84.0	ns	71.1	82.0	**
Secondary complete/ higher	73.3	74.4	ns	73.0	77.3	ns	73.0	76.6	ns
Never married									
No	72.2	80.0	ns	70.9	80.1	ns	71.4	80.1	*
Yes	71.2	78.8	ns	76.9	79.2	ns	73.5	79.0	ns
Household wealth									
Low	59.6	77.8	*	73.2	88.1	*	66.4	82.7	**
Medium	79.1	86.6	ns	74.2	75.4	ns	76.1	81.5	ns
High	78.6	71.2	ns	69.1	76.7	ns	73.4	74.4	ns
Worked last year									
No	68.4	79.6	*	68.8	76.7	ns	68.6	78.3	*
Yes	81.0	79.7	ns	75.3	85.0	ns	77.0	82.7	ns
Watched TV at least once a week									
No	70.6	78.5	ns	65.7	80.3	ns	67.8	79.3	*
Yes	72.4	80.3	ns	75.8	79.7	ns	74.2	80.0	ns
Both parents have secondary/higher education									
No	69.7	88.9	*	78.4	81.6	ns	74.3	84.7	ns
Yes	72.4	77.6	ns	70.6	79.4	ns	71.4	78.5	-
Total	71.8	79.6	ns	72.1	79.9	ns	72.0	79.8	*
N	**156**	**206**		**190**	**209**		**346**	**415**	

*** p <.001; ** p < .01; * p < .05; ns Not significant

Data pertained to women who were not currently pregnant and were using a modern contraceptive method at the time of the survey.

Source: MOMENTUM 2020 Endline Survey

Table 3.30 Percentage of FTMs age 15–24 currently using a modern contraceptive method, reporting they decided on method themselves or jointly with a partner, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	77.0	73.6	ns	86.8	70.4	*	80.4	72.5	ns
Secondary complete/ higher	70.0	69.8	ns	78.7	84.4	ns	77.0	80.7	ns
Never married									
No	71.1	74.3	ns	82.8	79.5	ns	78.2	77.0	ns
Yes	83.1	69.7	ns	76.9	77.4	ns	80.6	73.1	ns
Household wealth									
Low	73.7	72.2	ns	82.1	71.6	ns	77.9	71.9	ns
Medium	76.7	73.2	ns	84.8	79.7	ns	81.7	76.2	ns
High	76.8	73.1	ns	77.9	84.9	ns	77.4	80.0	ns
Worked last year									
No	75.4	68.0	ns	82.8	77.5	ns	78.7	72.5	ns
Yes	76.2	84.7	ns	80.4	81.3	ns	79.1	82.7	ns
Watched TV at least once a week									
No	68.6	73.4	ns	85.7	70.4	*	78.5	72.0	ns
Yes	79.0	72.4	ns	79.2	83.3	ns	79.1	78.1	ns
Both parents have secondary/higher education									
No	63.6	69.4	ns	83.8	67.3	ns	74.3	68.2	ns
Yes	78.9	73.5	ns	81.0	82.5	ns	80.1	77.9	ns
Total	75.6	72.8	ns	81.6	78.9	ns	78.9	75.9	ns
N	**156**	**206**		**190**	**209**		**346**	**415**	

*** p <.001; ** p < .01; * p < .05; ns Not significant

Data pertained to women who were not currently pregnant and were using a modern contraceptive method at the time of the survey.

Source: MOMENTUM 2020 Endline Survey

4 MATERNAL HEALTH AND NEWBORN CARE

Madeline Woo

Key findings:

- **Antenatal care**: At endline, the percentage of FTMs age 15-24 who received ANC from a skilled provider was 94% in comparison HZs and 92% in intervention HZs, and increased from 83% and 79% at baseline, respectively. Less than 40% of FTMs initiated ANC in the first trimester of pregnancy, but knowledge of initiating ANC in the first trimester increased from 63% at baseline to 69% at endline in comparison HZs and from 52% at baseline to 64% at endline in the intervention HZs.
- **Birth preparedness**: The percentage of FTMs age 15-24 who knew three or more obstetric danger signs increased substantially in both HZs, from 25% to 55% in the comparison HZs and from 23% to 64% in the intervention HZs. Less than half of FTMs age 15-24 (33% in the comparison HZs and 42% in the intervention HZs) knew three or more newborn danger signs. Knowledge of three or more steps to prepare for a maternal emergency was low, at seven percent in the intervention HZs and six percent in the comparison HZs at endline. Saving money was the most mentioned step, at 83% in the comparison HZs and 82% in the intervention HZs. Making sure that the family knew a blood donor was reported by two percent of FTMs age 15-24 in intervention HZs and one percent of those in comparison HZs.
- **Care of low-birth-weight babies**: The endline survey indicated that only about a third of FTMs knew three or more ways to care for a low birthweight (LBW) baby, 31% in the comparison HZs and 34% in the intervention HZs. At endline, less than half of FTMs had heard of Kangaroo Mother Care (KMC) in both study arms, and only 31% of FTMs in the intervention HZs and 28% of those in the comparison HZs could name three or more benefits of KMC. Of those who had heard of KMC, 92% approved of the practice in both HZs. The perceived prevalence of KMC among FTMs in the community was low. Fifty-two percent of FTMs in the comparison HZs and 46% of those in the intervention HZs believed that no FTMs with a LBW baby in the community practiced KMC. The perceived lack of KMC among FTMs with a LBW baby increased between the baseline and endline surveys, but the change was not statistically significant in the intervention HZs while it was in the comparison HZs.
- **Exclusive breastfeeding**: The percentage of FTMs who believed that they should exclusively breastfeed increased in the intervention HZs, from 45% at baseline to 61% at endline, but in the comparison HZs, the increase was only from 53% to 54%. The most mentioned referent for newborn care among FTMs was their mother followed by their sister, regardless of study arm. The least mentioned referent in both HZs was a teacher followed by a religious leader. At endline, the referents more FTMs felt would approve of exclusive breastfeeding were health workers followed by husband/partners in the intervention HZs and fathers in the comparison HZs. Health workers were also the referent that FTMs would comply with the most for breastfeeding decisions, followed by the FTM's mother. The percentage of FTMs who believed that at least half of FTMs in the community practice exclusive breastfeeding was similar across HZs and increased from 16% to 26%.
- **Delivery and postpartum care**: Over 96% of FTMs aged 15-24 delivered at a health facility while the percentage who received postpartum care within two days of delivery was slightly lower at 91% in the intervention HZs and 94% in the comparison HZs. The prevalence of timely postnatal care for the newborn was slightly higher than the prevalence of timely postpartum care for the FTM, at 95% in both HZs. Among FTMs who experienced a postpartum complication, 99% in the intervention HZs and 97% in the comparison HZs, sought treatment at a health facility.

This chapter presents maternal and newborn health knowledge, attitudes, and behavior among FTMs age 15-24 at baseline and endline. We examined the change from the baseline survey to the endline survey between comparison and intervention HZs for the entire study population and within the 15-19 and 20-24 age groups. These findings give important insight into FTMs' health seeking behavior for maternal and newborn health. The baseline survey was administered when respondents were about six-months pregnant, so delivery and postpartum indicators are only measured in the endline survey.

The following topics are covered in this chapter:

1. Antenatal Care (ANC): This section focuses on FTMs' knowledge, beliefs, and behaviors about ANC including its benefits, how many ANC visits are recommended, where to go for ANC, what kind of provider to see for ANC, quality of care of ANC visits, and timing of ANC visits.
2. Birth Preparedness: These indicators measure FTMs' knowledge of both obstetric and newborn danger signs, if the FTM had an emergency transportation plan, and knowledge of steps to take to prepare for a maternal emergency.
3. Newborn Care: This section focuses on FTMs' knowledge of how to care for a low-birth-weight (LBW) baby and norms around Kangaroo Mother Care (KMC) and exclusive breastfeeding. We present data on:
    a) Injunctive norms: Beliefs about what others think one should do and motivation to comply.
    b) Descriptive norms: Perceptions about what other FTMs are doing when it comes to KMC and exclusive breastfeeding.
    c) Normative influences on family planning: These are the FTM's belief about KMC and exclusive breastfeeding that individuals or groups close to her hold.
4. Delivery and Postpartum Care: In this section we examine health facility delivery, if FTMs had postpartum care and a newborn check within two days of delivery, and seeking care at a health facility when experiencing a postpartum medical emergency.

4.1 Antenatal Care

4.1.1 Perceived benefits of antenatal care

Table 4.1 shows the percentage of FTMs age 15-24 who knew three or more ANC advantages by demographic characteristic, age group, survey round, and HZ. At endline, 78% of FTMs in comparison HZs and 77% of their counterparts in intervention HZs could report three more ANC benefits. Knowledge of the perceived benefits of ANC increased significantly among all FTMs and in both age groups, regardless of HZ. Among FTMs age 15-19, the increase in knowledge was similar in both study arms: 16-17 percentage points. Among older FTMs, the absolute increase in knowledge was smaller among those living in intervention HZs (about six percentage points) than among those living in comparison HZs (about 10 percentage points). The largest overall change was among FTMs age 15-19 in the intervention group, and the smallest was among FTMs age 20-24 in intervention HZs.

Subgroup differences in knowledge change indicated that, among 15-19-year-old FTMs in both HZs, there was a statistically significant increase in the perceived benefits of ANC among those with no/primary/ partial secondary education, those who were never married, those living in the poorest and medium-wealth households, those who were unemployed, those who did not watch TV at least once a week, and those who had two parents with secondary/higher education. Among young FTMs who had secondary complete/higher

education, were employed, and had weekly exposure to TV, the increase over time in the perceived benefits of ANC was statistically significant only among those residing in intervention HZs.

Overall, among FTMs age 20-24, more sociodemographic subgroups had a statistically significant change in knowledge of ANC benefits in the comparison HZs than in the intervention HZs. Regardless of study arm, significant changes in knowledge were observed among FTMs age 20-24 who had lower levels of education, were ever married, and had two parents with secondary/higher education. We detected significant changes over time for the following subgroups in comparison HZs but not intervention HZs: more educated FTMs, those residing in the wealthiest households, the unemployed, and those without weekly TV exposure. Regardless of study arm, there were no statistically significant differences between surveys in knowledge of ANC benefits among those who were never married, had weekly exposure to TV, and less educated parents. Of the age subgroups, the largest absolute change in knowledge of ANC benefits over time, 30 percentage points, occurred in the comparison HZs among FTMs age 15-19 who did not have weekly exposure to TV.

Table 4.2 shows the percentage of FTMs age 15-24 who mentioned a specific advantage of ANC. The most commonly mentioned advantage, mentioned by about 90% of FTMs in both study arms, was "checking the growth of the baby." The least reported advantage was "being immunized for tetanus," mentioned by 18% of FTMs at endline, and which also did not increase significantly in either age group or study arm. In the overall sample, the percentage who mentioned "get medicine to prevent malaria" and "learn to prepare for a healthy birth" increased significantly in the intervention HZs (from 30% to 37% and from 35% to 45%, respectively), but not in the comparison HZs. Reporting of the following perceived benefits of ANC increased significantly in the comparison HZs, but not in the intervention HZs: "check baby is growing well" and "get tablets to prevent anemia". The second least reported advantage was "get tablets to prevent anemia," and while there were non-significant increases in knowledge in the intervention HZs, the percentage who reported this advantage declined in the comparison HZs. Among FTMs age 15-19, more FTMs mentioned "get tablets to prevent anemia" and "get medicine to prevent malaria" at endline than at baseline in the intervention HZs but not in the comparison HZs. Knowledge of "check for danger signs" and "check baby is growing well" increased significantly in the comparison HZs but not in the intervention HZs. Among FTMs age 20-24, "learn to prepare for a healthy birth" and "learn how to care for a newborn" both increased significantly in the intervention HZs but not the comparison HZs.

Table 4.1 Percentage of FTMs age 15-24 who know 3 or more ANC advantages, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	59.6	76.2	***	56.0	74.1	***	62.7	73.0	*	67.7	77.8	*	60.6	75.1	***	59.8	75.3	***
Secondary complete/ higher	69.9	79.5	ns	69.3	82.2	*	71.5	82.4	***	73.4	77.3	ns	71.2	81.8	***	72.3	78.6	*
Never married																		
No	60.4	77.3	***	56.4	78.3	***	68.2	79.1	***	68.3	80.1	***	65.2	78.4	***	62.7	79.3	***
Yes	62.5	76.1	**	63.0	71.1	ns	69.0	78.8	ns	80.2	69.4	ns	65.0	77.1	**	69.7	70.4	ns
Household wealth																		
Low	60.6	78.7	***	53.0	75.2	***	67.2	80.6	*	68.8	77.3	ns	63.7	79.6	***	59.8	76.1	***
Medium	60.8	77.7	**	59.3	74.4	**	71.7	74.4	ns	65.3	79.3	**	66.8	75.9	**	62.1	76.7	***
High	62.5	73.5	ns	68.1	78.8	ns	66.4	82.0	***	78.5	76.1	ns	64.8	78.7	***	74.3	77.2	ns
Worked last year																		
No	58.0	76.9	***	60.1	72.8	***	64.4	81.3	***	75.7	76.1	ns	61.0	79.0	***	67.2	74.3	ns
Yes	70.4	76.5	ns	55.8	82.1	***	73.3	76.3	ns	64.4	79.6	***	72.4	76.4	ns	60.5	80.7	***
Watched TV at least once a week																		
No	47.6	78.0	***	49.5	76.3	***	57.8	78.1	***	63.4	73.3	ns	53.0	78.0	***	55.7	74.9	***
Yes	69.7	76.0	ns	65.1	75.4	**	74.3	79.6	ns	75.2	79.7	ns	72.2	78.0	*	70.3	77.6	**
Both parents have secondary/higher education																		
No	45.9	71.4	**	59.8	70.1	ns	58.0	65.0	ns	73.8	76.6	ns	52.0	68.2	**	67.5	73.7	ns
Yes	65.7	78.3	**	58.5	77.0	***	70.8	82.4	***	70.3	77.8	*	68.5	80.5	***	64.1	77.4	***
Total	61.3	76.8	***	58.7	75.8	***	68.4	79.0	***	71.1	77.5	*	65.1	78.0	***	64.8	76.6	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05; ns Not Significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.2 Percentage of FTMs age 15-24 who mention specific advantages of seeing someone for antenatal care, by age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Advantages of antenatal care	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
Check for danger signs	39.9	48.1	*	45.6	51.1	ns	48.0	48.8	ns	58.9	54.8	ns	44.3	48.4	ns	52.1	52.9	ns
Check baby is growing well	83.8	89.3	*	86.4	88.9	ns	87.8	91.0	ns	91.2	91.4	ns	86.0	90.2	**	88.8	90.1	ns
Be immunized against tetanus	21.0	18.7	ns	17.9	18.3	ns	20.0	17.7	ns	16.1	18.4	ns	20.4	18.2	ns	17.0	18.3	ns
Get tablets to prevent anemia	33.7	28.9	ns	20.1	26.5	*	35.0	30.5	ns	22.7	23.1	ns	34.4	29.8	*	21.4	24.8	ns
Get medicine to prevent malaria	33.5	36.2	ns	26.3	37.6	***	35.0	38.3	ns	33.6	35.3	ns	34.3	37.3	ns	29.9	36.5	**
Learn to prepare for a healthy birth	31.9	40.8	**	34.3	45.4	***	41.5	37.3	ns	34.9	45.2	**	37.1	38.9	ns	34.6	45.3	***
Learn how to care for a newborn	18.7	23.9	ns	16.6	29.2	***	19.4	22.3	ns	20.1	31.3	***	19.1	23.0	*	18.3	30.2	***
Other	1.1	4.1	**	4.7	4.9	ns	2.1	5.5	**	3.2	5.8	ns	1.7	4.9	***	4.0	5.3	ns
Can't name any benefits/don't know	3.9	0.7	**	3.5	0.8	**	1.5	1.0	ns	0.9	0.6	ns	2.6	0.8	**	2.2	0.7	**
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

4.1.2 Knowledge of the number of antenatal care visits

Table 4.3 shows the percentage of FTMs age 15-24 who knew the WHO-recommended number of ANC visits of four or more. At endline, 92% of FTMs in comparison HZs and 89% of those in intervention HZs reported four or more as the recommended number of times a pregnant woman should go for ANC. These levels of knowledge represented a significant increase over the baseline: about 28 percentage points in the comparison HZs compared to 19 percentage points in the intervention HZs. Knowledge of the recommended number of ANC visits increased significantly over time in all sociodemographic groups, regardless of age and study arm. Note that baseline levels of knowledge were higher in intervention HZs than in comparison HZs, except among employed FTMs age 15-19. The largest absolute increase in knowledge of the recommended number of ANC visits was in FTMs age 15-19 residing in comparison HZs and who did not have two parents with secondary/higher education, about 40 percentage points.

4.1.3 Knowledge of the recommended timing of the first antenatal care visit

The WHO recommends that women begin receiving ANC in the first trimester. Table 4.4 shows the percentage of FTMs age 15-24 who knew that the first ANC visit should be in the first trimester. In the overall sample, there was a statistically significant increase over time in knowledge of the recommended timing of the first ANC visit in intervention HZs but not in comparison HZs (from 52% to 64% and from 63% to 69%, respectively). As can be observed, at baseline, a higher percentage of women in the comparison HZs than in the intervention HZs knew that ANC should be initiated in the first trimester. In the 15-19 age group, both the comparison HZs and intervention HZs had a statistically significant increase in the percentage of FTMs who knew that ANC should start in the first trimester. The baseline estimate was about 10 percentage points lower and the endline estimate about eight percentage points lower in the intervention HZs than in the comparison HZs. Among FTMs age 20-24, only the intervention group had a statistically significant change between the baseline and the endline surveys (from 51% to 66%).

An examination of knowledge change in the total sample revealed a statistically significant increase in the percentage of FTMs age 15-24 who knew the recommended timing of the first ANC visit in all sociodemographic subgroups in the intervention HZs. In the comparison HZs, the change in knowledge levels between surveys was statistically significant only among the following sociodemographic groups: FTMs who were more educated, never married, from medium-wealth households, unemployed, with weekly TV exposure, and were with or without two parents secondary/higher educated parents. In the 15-19 age group, knowledge increased significantly in different subcategories of household wealth, work history, and TV exposure in comparison and intervention HZs. For example, significant increases in knowledge occurred among unemployed FTMs age 15-19 in comparison health zones (from 59% at baseline to 70% at endline) but not among their counterparts in intervention HZs and among those who were employed in intervention HZs (from 45% at baseline to 62% at endline) but not among their counterparts in comparison HZs.

Most subgroups of FTMs age 20-24 living in intervention HZs had statistically significant increases in knowledge, the only exceptions being those who were never married, living in the poorest households, and did not watch TV weekly. FTMs age 20-24 in the intervention HZs with less educated parents had the largest absolute increase in knowledge of the recommended timing of the first ANC visit, about 25 percentage points. In comparison HZs, knowledge increased significantly in only two subgroups of 20-24-year-old FTMs: those who completed secondary school or had higher levels of education (from 66% to 73%) and those with weekly TV exposure (from 63% to 70%).

Table 4.3 Percentage of FTMs age 15-24 who know that four or more antenatal care visits are recommended, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	59.3	88.5	***	66.8	86.3	***	65.4	88.6	***	67.7	89.4	***	61.3	88.6	***	67.1	87.3	***
Secondary complete/ higher	64.4	98.6	***	69.3	91.1	***	69.1	96.5	***	73.7	90.3	***	68.3	96.9	***	72.6	90.5	***
Never married																		
No	63.1	93.3	***	65.0	88.2	***	68.9	93.7	***	71.6	90.4	***	66.7	93.6	***	68.5	89.4	***
Yes	56.0	85.9	***	71.7	85.5	**	63.7	93.8	***	70.3	88.3	***	58.9	88.9	***	71.1	86.6	***
Household wealth																		
Low	61.9	92.3	***	67.3	87.6	***	59.7	90.3	***	68.2	89.0	***	60.9	91.3	***	67.7	88.2	***
Medium	59.5	86.5	***	68.0	87.2	***	65.0	92.8	***	72.0	90.0	***	62.5	89.9	***	69.9	88.5	***
High	58.8	91.9	***	66.4	86.7	***	75.4	96.7	***	73.6	90.8	***	68.9	94.8	***	70.7	89.1	***
Worked history																		
No	58.3	89.2	***	71.6	86.1	***	66.8	95.2	***	71.0	89.9	***	62.3	92.0	***	71.3	87.8	***
Yes	65.2	93.0	***	58.3	89.7	***	69.1	91.9	***	71.7	90.1	***	67.8	92.3	***	65.7	89.9	***
Watched TV at least once a week																		
No	60.1	91.1	***	71.7	85.9	***	65.2	92.5	***	70.2	88.2	***	62.8	91.8	***	71.0	86.9	***
Yes	60.1	89.7	***	64.4	88.2	***	69.2	94.4	***	71.9	90.8	***	65.2	92.3	***	68.2	89.6	***
Both parents have secondary/higher education																		
Neither/one sec./higher	51.0	90.8	***	66.7	88.5	***	55.0	91.0	***	67.3	86.0	**	53.0	90.9	***	67.0	87.1	***
Both secondary/Higher	62.8	90.0	***	67.5	87.0	***	70.8	94.4	***	72.5	91.1	***	67.2	92.4	***	69.9	88.9	***
Total	60.1	90.2	***	67.4	87.3	***	67.8	93.7	***	71.3	89.9	***	64.3	92.1	***	69.3	88.6	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.4 Percentage of FTMs age 15-24 who know that antenatal care must be initiated in the first trimester of pregnancy, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	61.7	70.2	*	51.0	61.1	**	61.6	60.5	ns	52.4	64.6	*	61.7	67.0	ns	51.5	62.3	***
Secondary complete/ higher	60.3	71.2	ns	55.4	66.3	ns	65.6	72.9	*	50.7	66.2	***	64.6	72.6	*	52.0	66.2	***
Never married																		
No	67.8	71.0	ns	53.2	62.4	*	64.3	68.9	ns	50.0	64.9	***	65.7	69.7	ns	51.5	63.7	***
Yes	52.7	69.6	***	49.7	61.8	*	63.7	67.3	ns	55.9	67.6	ns	56.9	68.7	**	52.1	64.1	**
Household wealth																		
Low	62.6	71.0	ns	46.5	56.9	*	61.9	68.7	ns	47.4	58.4	ns	62.3	69.9	ns	46.9	57.6	**
Medium	56.1	67.6	*	56.4	63.4	ns	58.9	64.4	ns	52.7	66.7	*	57.6	65.9	*	54.7	64.9	**
High	66.2	72.8	ns	54.9	69.9	*	70.1	72.0	ns	54.0	71.2	**	68.6	72.3	ns	54.3	70.7	***
Work history																		
No	59.0	70.4	**	55.3	62.2	ns	63.0	68.9	ns	51.8	63.0	**	60.8	69.7	**	53.7	62.6	**
Yes	68.7	70.4	ns	44.9	62.2	**	65.7	68.2	ns	50.8	69.1	***	66.7	68.9	ns	48.1	66.0	***
Watched TV at least once a week																		
No	63.1	70.8	ns	53.5	62.1	ns	66.3	65.2	ns	53.4	61.5	ns	64.8	67.9	ns	53.5	61.8	*
Yes	60.5	70.1	*	50.9	62.3	**	63.0	70.4	*	50.3	67.6	***	61.9	70.3	**	50.6	65.0	***
Both parents have secondary/higher education																		
No	54.1	75.5	**	46.0	52.9	ns	58.0	60.0	ns	44.9	70.1	***	56.1	67.7	*	45.4	62.4	***
Yes	63.6	68.9	ns	53.2	64.2	**	65.6	70.6	ns	53.3	64.2	**	64.8	69.8	*	53.3	64.2	***
Total	61.5	70.4	**	52.0	62.2	**	64.2	68.6	ns	51.4	65.5	***	63.0	69.4	ns	51.7	63.8	**
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

4.1.4 Antenatal care coverage

Table 4.5 shows the percentage of FTMs age 15-24 who saw a trained health provider, defined as a doctor, nurse/midwife, or auxiliary midwife, for an ANC visit. Utilization of a skilled health provider for ANC exceeded 90% at endline. Overall, both study arms had statistically significant increases in the utilization of a skilled health provider for ANC: from 83% to 94% in the comparison HZs and from 79% to 92% in the intervention HZs. In both age groups, almost all sociodemographic subgroups had a statistically significant change between the baseline and endline surveys. Among younger FTMs, the only exceptions were those from medium-wealth households in comparison HZs and those with complete secondary/higher education in intervention HZs. Among FTMs age 20-24, the only exceptions were in comparison HZs: those residing in the wealthiest households and those with less educated parents.

4.1.5 Source of antenatal care

Table 4.6 shows the percentage of FTMs age 15-24 who had at least one ANC visit at a public or private health facility. Overall, both the comparison HZs and the intervention HZs had a statistically significant increase with over 90% of women reporting at least one ANC visit at a public/private health facility at endline. For FTMs age 15-24, all demographic subgroups had a statistically significant increase in both HZs. For FTMs age 15-19, there was a statistically significant increase in both comparison and intervention HZs. There were small HZ differences in both the baseline and endline estimates. The only demographic subgroups with statistically insignificant changes over time were FTMs age 15-19 living in medium wealth households in comparison HZs and those with less educated parents in both study arms. The biggest absolute change in the age group was among the poorest FTMs, about 18-19 percentage points.

For FTMs age 20-24, the percentage who had least one ANC visit at a public or private health facility increased significantly over time in both the comparison and intervention HZs: from 86% to 95% and from 82% to 95%, respectively. FTMs from the wealthiest households and those with less educated parents in comparison HZs were the only subgroups that did not have a statistically significant increase from baseline to endline Among FTMs age 20-24, the largest absolute increase was among those with none or primary or incomplete secondary education and who resided in intervention HZs, a difference of 16 percentage points.

4.1.6 Timely initiation of antenatal care

Table 4.7 shows the percentage of FTMs age 15-24 who initiated ANC during the first trimester of pregnancy. In the overall sample, both the intervention and comparison HZs had a statistically significant increase in timely initiation of ANC. All demographic subgroups for FTMs age 15-24 reported a statistically significant difference between baseline and endline, except for FTMs in the highest wealth category in the comparison HZ. As FTMs were enrolled in MOMENTUM when they were about six-months pregnant, the increases between baseline and endline in timely initiation of ANC are unexpected and could be due to misreporting, recall error, or social desirability bias. Among FTMs age 15-19, the percentage who initiated ANC in the first trimester increased from 22% to 34% in comparison HZs and from 20% to 38% in intervention HZs. The corresponding increases for FTMs age 20-24 were from 30% to 41% in comparison HZs and from 26% to 40% in intervention HZs. The change over time was statistically significant, with few exceptions, including never married women age 20-24.

Table 4.5 Percentage of FTMs age 15-24 who saw a doctor, nurse/midwife, or auxiliary midwife for an ANC visit, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	79.0	91.0	***	73.8	89.1	***	82.7	93.0	**	78.8	93.1	***	80.2	91.7	***	75.5	90.4	***
Secondary complete/ higher	79.5	94.5	**	86.1	94.1	ns	88.8	96.5	***	84.9	95.3	***	87.2	96.1	***	85.2	95.0	***
Never married																		
No	79.6	91.4	***	80.3	91.7	***	89.1	94.9	**	84.3	95.2	***	85.5	93.6	***	82.4	93.6	***
Yes	78.3	91.8	***	69.4	87.3	***	77.9	96.5	***	76.6	91.9	**	78.1	93.6	***	72.2	89.1	***
Household wealth																		
Low	75.5	94.2	***	70.3	89.1	***	80.6	97.8	***	83.1	96.1	***	77.9	95.8	***	75.8	92.1	***
Medium	80.4	87.8	ns	82.0	90.1	*	86.7	95.0	**	84.7	94.7	**	83.8	91.8	**	83.2	92.2	***
High	81.6	92.6	**	78.8	92.0	**	90.5	93.8	ns	79.8	92.6	***	87.0	93.4	**	79.3	92.4	***
Worked last year																		
No	80.9	91.7	***	74.6	88.8	***	84.8	95.5	***	80.4	93.8	***	82.7	93.5	***	77.3	91.1	***
Yes	73.9	91.3	***	80.1	92.9	***	89.0	94.9	*	85.3	95.3	**	84.0	93.7	***	83.0	94.2	***
Watched TV at least once a week																		
No	78.6	92.9	***	72.2	89.9	***	84.0	93.6	**	80.7	95.7	***	81.4	93.2	***	76.0	92.5	***
Yes	79.3	90.8	***	79.2	90.3	***	88.2	96.2	***	83.3	93.8	***	84.2	93.8	***	81.3	92.1	***
Both parents have secondary/higher education																		
No	77.6	88.8	*	73.6	87.4	*	85.0	93.0	ns	79.4	93.5	**	81.3	90.9	**	76.8	90.7	***
Yes	79.5	92.4	***	77.0	90.7	***	87.1	95.8	***	83.3	94.7	***	83.7	94.3	***	80.0	92.6	***
Total	79.0	91.6	***	76.4	90.1	***	86.7	95.2	***	82.4	94.4	***	83.2	93.6	***	79.4	92.2	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.6 Percentage of FTMs age 15-24 who had at least one ANC visit at a government or private health facility, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	77.3	89.6	***	74.1	88.3	***	80.5	92.4	***	76.7	93.1	***	78.4	90.6	***	75.0	89.9	***
Secondary complete/ higher	78.1	90.4	*	85.1	96.0	**	89.4	95.9	**	84.2	94.2	***	87.4	94.9	***	84.4	94.7	***
Never married																		
No	78.4	90.6	**	80.3	90.1	***	88.6	94.7	**	82.6	93.8	***	84.7	93.1	***	81.5	92.1	***
Yes	76.1	88.6	**	69.4	89.6	***	77.9	94.7	***	76.6	93.7	***	76.8	90.9	***	72.2	91.2	***
Household wealth																		
Low	74.2	92.9	***	69.8	87.6	***	79.1	97.0	***	82.5	93.5	**	76.5	94.8	***	75.3	90.2	***
Medium	80.4	85.8	ns	82.0	90.7	*	86.7	94.4	*	82.7	96.0	***	83.8	90.5	*	82.3	93.2	***
High	77.9	90.4	**	79.6	92.9	*	90.5	93.4	ns	78.5	92.0	***	85.6	92.2	**	79.0	92.4	***
Worked last year																		
No	79.6	90.7	***	75.2	88.5	***	83.7	94.5	***	79.0	93.5	***	81.6	92.5	***	76.9	90.8	***
Yes	71.3	87.0	**	78.8	92.9	***	89.4	94.9	*	84.3	94.2	**	83.5	92.3	***	81.8	93.7	***
Watched TV at least once a week																		
No	76.8	92.3	***	71.7	91.9	***	85.0	92.5	*	80.7	92.5	**	81.1	92.4	***	75.8	92.2	***
Yes	77.9	88.2	**	79.6	88.6	**	87.0	95.9	***	81.4	94.4	***	82.9	92.4	***	80.5	91.6	***
Both parents have secondary/higher education																		
No	77.6	86.7	ns	73.6	83.9	ns	85.0	93.0	ns	77.6	93.5	***	81.3	89.9	*	75.8	89.2	***
Yes	77.4	90.6	***	77.0	91.2	***	86.6	95.1	***	82.2	93.9	***	82.5	93.1	***	79.5	92.5	***
Total	77.4	89.7	***	76.4	89.9	***	86.3	94.7	***	81.2	93.8	***	82.3	92.4	***	78.7	91.8	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.5 Percentage of FTMs age 15-24 who initiated antenatal care in the first trimester of pregnancy, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Age 15-24					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	22.1	33.9	***	18.9	36.5	***	25.4	37.8	*	22.8	33.9	*	23.2	35.2	***	20.2	35.7	***
Secondary complete/ higher	23.3	37.0	ns	23.8	44.6	**	32.6	42.4	**	27.3	43.5	***	31.0	41.4	**	26.4	43.8	***
Never married																		
No	25.1	36.9	**	22.3	38.5	***	30.6	43.2	***	25.6	40.7	***	28.5	40.8	***	24.0	39.7	***
Yes	18.5	31.0	**	15.6	37.6	***	28.3	31.9	ns	25.2	36.0	ns	22.2	31.3	*	19.4	37.0	***
Household wealth																		
Low	19.4	35.5	**	16.8	33.2	***	19.4	38.1	***	19.5	37.7	***	19.4	36.7	***	18.0	35.1	***
Medium	23.0	30.4	ns	20.3	43.6	***	25.0	38.3	**	26.7	36.7	ns	24.1	34.8	**	23.3	40.4	***
High	25.0	37.5	*	24.8	38.9	*	41.2	44.5	ns	30.1	44.2	**	34.9	41.8	ns	27.9	42.0	***
Worked last year																		
No	21.6	34.0	***	19.6	38.1	***	27.3	37.7	**	22.8	35.9	***	24.3	35.7	***	21.1	37.1	***
Yes	24.3	35.7	ns	20.5	38.5	***	33.5	44.5	*	29.3	45.0	**	30.5	41.6	**	25.4	42.1	***
Watched TV at least once a week																		
No	19.6	39.9	***	18.7	37.4	***	24.6	37.4	**	22.4	36.0	**	22.3	38.6	***	20.3	36.8	***
Yes	24.0	31.0	ns	20.8	38.8	***	33.1	42.6	*	27.1	41.5	***	29.1	37.4	**	24.0	40.2	***
Both parents have secondary/higher education																		
No	18.4	36.7	**	20.7	28.7	ns	22.0	33.0	ns	21.5	37.4	*	20.2	34.8	**	21.1	33.5	**
Yes	23.5	33.7	**	19.8	40.3	***	32.0	42.6	**	26.7	40.3	***	28.2	38.6	***	23.0	40.3	***
Total	22.3	34.4	***	19.9	38.2	***	30.1	40.8	***	25.5	39.6	***	26.6	37.9	***	22.6	38.9	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

4.1.7 Antenatal care content

Table 4.8 shows the percentage of FTMs ag 15-24 who reported receiving three or more essential ANC screening components, by baseline characteristic, age group, survey round, and HZ. Essential ANC services were defined as: being weighed, having the abdomen felt, having blood pressure taken, having a urine test, having a blood test, receiving or purchasing iron tablets or syrup, and being given or taking sulphadoxine pyrimethamine (SP)/Fansidar. For FTMs age 15-24, both the comparison and intervention HZs reported a statistically significant increase in the percentage receiving three or more ANC screening components. All sociodemographic subgroups of FTMs age 15-24 had a statistically significant increase. Fewer FTMs age 15-19 received three or more essential ANC screening components at baseline than older FTMs, and the absolute increases over time were larger among in the former group than in the latter, regardless of study arm. In the 15-19 age group, only those in medium-wealth households in comparison HZs did not have a statistically significant difference in receipt of three or more essential ANC components between the baseline and endline surveys. For FTMs age 20-24, the only groups that did not have a significant increase over time in this indicator were those residing in comparison HZs who were from the wealthiest households, worked last year, and had less educated parents. Overall, in each subgroup, over 90% of FTMs reported that they received three or more essential ANC components. Women were recruited at six months gestation; so, it is possible that they received more components after the baseline survey, but the increase may also be due to social desirability bias. Women may have reported receiving more services to appear more "competent" to the interviewer.

Table 4.9 shows the percentage of FTMs age 15-24 who received a specific ANC service, by age group, survey round, and HZ. Overall, between the baseline and endline surveys, there was a statistically significant increase in the percentage who received each essential component of ANC, except for "health worker felt abdomen" in comparison HZs. Age group-specific changes in the percentage who received the latter ANC component were not statistically significant, but baseline levels exceeded 96%. Baseline estimates exceeded 80% for the remaining ANC components and endline estimates exceeded 93%. The largest absolute increase over time was observed among younger FTMs in comparison HZs for "taken SP/Fansidar," about 18 percentage points.

Table 4.10 shows the percentage of FTMs age 15-24 who reported being counseled on three or more topics during ANC by sociodemographic characteristics, age group, survey round, and HZ. Counseling topics included breastfeeding, newborn care, insecticide-treated bed net use, birth preparedness, delivering with a skilled birth attendant, birth spacing, family planning, prevention of mother-to-child transmission of HIV, obstetric dangers signs, and newborn danger signs. At endline, 91% of FTMs in comparison HZs and 93% of those in intervention HZs reported that they had been counseled on three or more topics. The percentage of FTMs counseled on three or more topics increased significantly between the baseline and endline surveys in all sociodemographic groups, regardless of study arm, and from 54% to 91% in comparison HZs and from 52% to 93% in intervention HZs. Similar patterns of change were observed within each age and sociodemographic subgroup. The largest absolute increase occurred among never married FTMs residing in the intervention HZs (about 50 percentage points among those age 15-19 and 49 percentage points among those age 20-24).

As Table 4.11 shows, between the baseline and endline surveys, there were large and statistically significant increases in the percentage of FTMs counseled on each ANC topic. With the exception of being counseled on sleeping under an insecticide treated bed net, the increase for all counseling topics was around 50 percentage points. This pattern was also observed when the results were disaggregated by age group and study arm. For example, the percentage of FTMs age 15-19 who were counseled on newborn danger signs increased from 27% to 82% in comparison HZs and from 33% to 87% in intervention HZs.

Table 4.6 Percentage of FTMs age 15-24 who received 3 or more essential ANC screening components, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	79.2	91.5	***	74.9	93.0	***	83.2	93.0	**	79.4	95.8	***	80.6	92.0	***	76.3	93.9	***
Secondary complete/higher	79.5	94.5	**	86.1	98.0	**	90.0	96.8	***	84.9	97.1	***	88.1	96.4	***	85.2	97.4	***
Never married																		
No	80.0	92.2	***	81.2	95.2	***	89.8	95.1	**	84.6	96.9	***	86.1	94.0	***	83.0	96.1	***
Yes	78.3	91.8	***	69.9	91.9	***	79.6	96.5	***	76.6	95.5	***	78.8	93.6	***	72.5	93.3	***
Household wealth																		
Low	75.5	94.8	***	70.3	93.1	***	80.6	97.8	***	83.1	97.4	***	77.9	96.2	***	75.8	94.9	***
Medium	81.1	88.5	ns	83.1	95.9	***	87.2	95.0	**	84.7	97.3	***	84.5	92.1	**	83.9	96.6	***
High	81.6	92.6	**	80.5	92.9	**	92.4	94.3	ns	80.4	95.1	***	88.2	93.7	*	80.4	94.2	***
Worked last year																		
No	80.9	92.3	***	75.8	93.1	***	84.8	95.5	***	80.4	96.4	***	82.7	93.8	***	77.9	94.6	***
Yes	74.8	91.3	***	80.1	96.2	***	91.1	95.3	ns	85.9	96.9	***	85.8	94.0	***	83.3	96.5	***
Watched TV at least once a week																		
No	78.6	94.0	***	72.2	94.4	***	86.1	93.6	*	80.7	96.9	***	82.5	93.8	***	76.0	95.5	***
Yes	79.7	90.8	***	80.6	93.8	***	88.5	96.4	***	83.7	96.4	***	84.6	93.9	***	82.2	95.1	***
Both parents have secondary/higher education																		
No	77.6	88.8	*	73.6	90.8	**	86.0	93.0	ns	79.4	95.3	***	81.8	90.9	**	76.8	93.3	***
Yes	79.8	93.0	***	78.0	94.8	***	88.0	96.0	***	83.6	96.9	***	84.3	94.6	***	80.7	95.8	***
Total	79.3	92.0	***	77.2	94.0	***	87.6	95.4	***	82.7	96.6	***	83.8	93.9	***	79.9	95.3	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.7 Among FTMs age 15-24 receiving care, the percentage that received specific antenatal care services, by age group, survey round and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Antenatal Care Screening Services	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
Weighed	97.1	99.5	**	96.5	98.9	*	99.1	99.2	ns	96.4	99.3	**	98.3	99.3	*	96.5	99.1	***
Health Worker felt abdomen	98.0	98.5	ns	96.5	98.5	ns	97.6	99.0	ns	97.4	98.4	ns	97.8	98.8	ns	97.0	98.5	*
Blood pressure measured	93.1	98.3	***	93.4	96.9	*	96.5	99.0	**	96.4	98.4	ns	95.0	98.7	***	94.9	97.7	**
Gave urine sample	82.8	94.6	***	81.1	95.2	***	90.2	96.4	***	87.8	97.3	***	87.0	95.6	***	84.5	96.3	***
Gave blood sample	85.1	95.5	***	86.4	92.6	**	92.8	96.6	**	92.2	95.6	*	89.5	96.1	***	89.4	94.1	***
Given bought iron tablets/syrup	85.6	97.0	***	81.9	97.4	***	92.0	98.0	***	86.0	98.0	***	89.2	97.6	***	84.0	97.7	***
Taken sulphadoxine pyrimethamine /Fansidar	78.7	97.3	***	81.4	96.7	***	88.9	97.6	***	85.2	97.8	***	84.5	97.5	***	83.3	97.2	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.8 Percentage of FTMs age 15-24 who received 3 or more ANC counseling components, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	46.7	86.6	***	44.8	89.9	***	58.4	89.2	***	52.9	94.2	***	50.6	87.5	***	47.5	91.3	***
Secondary complete/higher	47.9	93.2	***	61.4	97.0	***	61.5	95.6	***	58.3	95.0	***	59.1	95.2	***	59.1	95.5	***
Never married																		
No	49.8	87.8	***	53.5	93.0	***	62.1	93.0	***	59.3	94.7	***	57.4	91.0	***	56.6	93.9	***
Yes	42.9	87.5	***	38.7	88.4	***	54.0	94.7	***	45.9	94.6	***	47.1	90.2	***	41.5	90.8	***
Household wealth																		
Low	44.5	89.7	***	43.1	87.6	***	53.7	94.8	***	57.8	96.1	***	48.8	92.0	***	49.4	91.3	***
Medium	45.9	82.4	***	55.8	94.8	***	59.4	93.3	***	53.3	94.7	***	53.4	88.4	***	54.7	94.7	***
High	50.7	91.2	***	46.0	92.9	***	65.4	92.4	***	57.1	93.3	***	59.7	91.9	***	52.5	93.1	***
Worked last year																		
No	47.8	88.0	***	48.3	90.0	***	52.2	93.1	***	54.3	94.9	***	49.9	90.4	***	51.1	92.3	***
Yes	44.3	87.0	***	48.1	94.2	***	70.3	93.6	***	58.6	94.2	***	61.8	91.5	***	53.9	94.2	***
Watched TV at least once a week																		
No	43.5	86.3	***	43.9	89.9	***	57.2	90.9	***	58.4	96.3	***	50.7	88.7	***	50.4	92.8	***
Yes	49.1	88.6	***	51.2	92.4	***	62.1	94.7	***	54.9	93.8	***	56.3	92.0	***	53.1	93.1	***
Both parents have secondary/higher education																		
No	41.8	82.7	***	42.5	83.9	***	57.0	88.0	***	57.0	94.4	***	49.5	85.4	***	50.5	89.7	***
Yes	48.4	89.1	***	49.5	93.0	***	61.2	94.6	***	55.8	94.7	***	55.5	92.2	***	52.5	93.8	***
Total	46.9	87.7	***	48.3	91.4	***	60.4	93.3	***	56.1	94.6	***	54.3	90.8	***	52.1	93.0	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.9 Among FTMs age 15-24 receiving antenatal care, the percentage that were counseled on specific topics, by age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Antenatal Care Counseling Topics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
Breastfeeding	28.4	90.6	***	35.1	91.7	***	38.7	93.8	***	33.9	93.1	***	34.3	92.4	***	34.5	92.4	***
Newborn care	24.7	85.4	***	31.4	88.9	***	33.9	89.6	***	31.3	91.6	***	30.0	87.7	***	31.4	90.2	***
Sleeping under insecticide treated nets	83.0	98.3	***	88.0	98.9	***	87.8	97.6	***	84.7	98.9	***	85.8	97.9	***	86.4	98.9	***
Birth preparedness	39.9	87.1	***	47.3	91.7	***	54.1	91.6	***	49.2	91.8	***	48.0	89.6	***	48.3	91.7	***
Delivery with skilled birth attendant	58.0	80.4	***	46.5	85.4	***	62.8	84.6	***	49.2	88.7	***	60.8	82.8	***	47.9	87.0	***
Birth spacing	24.7	78.7	***	42.3	85.2	***	34.8	84.8	***	43.3	87.1	***	30.4	82.1	***	42.8	86.1	***
Family planning	19.8	65.8	***	34.8	81.4	***	30.0	75.0	***	37.6	86.9	***	25.6	70.9	***	36.2	84.2	***
PMTCT of HIV	52.0	85.1	***	60.9	84.9	***	65.2	89.6	***	69.2	92.5	***	59.5	87.6	***	65.1	88.7	***
Obstetric danger signs	46.8	84.7	***	50.5	88.0	***	55.0	88.0	***	57.0	91.4	***	51.5	86.5	***	53.8	89.7	***
Newborn danger signs	27.3	81.7	***	33.2	87.1	***	27.8	83.6	***	36.0	84.3	***	27.6	82.8	***	34.6	85.7	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05
PMTCT – prevention of mother to child transmission
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

4.2 Birth Preparedness

4.2.1 Knowledge of danger signs/symptoms

Table 4.12 shows the percentage of FTMs age 15-24 who knew three or more obstetric danger signs by demographic characteristic, age group, survey round, and HZ. FTMs' responses were classified into nine different danger signs: severe headache, fever, foul discharge, retained placenta, swollen feet, convulsions, severe bleeding, prolonged labor, and breech positioning. For both the comparison and intervention HZs, there was a statistically significant increase in knowledge of three or more obstetric danger signs among FTMs age 15-24. At baseline, knowledge levels were slightly lower in the intervention HZs than in the comparison HZs (23% versus 25%), but at endline, the intervention HZs had higher levels of knowledge about obstetric danger signs than the comparison HZs (64% versus 55%). In the overall sample, all sociodemographic subgroups had statistically significant improvements in knowledge of obstetric danger signs, which reached 70% among those living in the wealthiest households in the intervention HZs.

Among FTMs age 15-19, knowledge of obstetric danger signs more than doubled between the baseline and endline survey in both study arms (from 20% to 53% in the comparison HZs and from 22% to 53% in the intervention HZs). Knowledge increased significantly in all sociodemographic subgroups, with the largest absolute increase, about 47 percentage points, occurring among never married women age 15-19 who resided in intervention HZs. Similar patterns were observed among older FTMs. The percentage of FTMs age 20-24 who knew three or more obstetric danger signs increased from 29% at baseline to 58% at endline in the comparison HZs and from 24% to 66% in the intervention HZs. Among older FTMs, the largest absolute increase in knowledge of obstetric danger signs, about 43 percentage points occurred among women who had no/primary/incomplete secondary education who resided in the intervention HZs (from 22% at baseline to 65% at endline).

Table 4.13 shows the percentage of FTMs age 15-24 who mentioned each obstetric danger sign by age group, survey round, and health zone. At endline, there were no FTMs that could not name a single obstetric danger sign, compared to at least 50% at baseline. Overall, fever was the most mentioned obstetric danger sign in both study arms at endline (mentioned by 70%-73% of FTMs interviewed), followed by severe bleeding (mentioned by 58%-66% of FTMs interviewed). At endline, the least mentioned obstetric danger sign in the comparison HZs was "baby does not come headfirst" whereas "placenta does not follow baby" was the least mentioned obstetric danger sign in the intervention HZs. Only three danger signs (severe headache, fever, severe bleeding) were mentioned by over 50% of FTMs age 15-24 in the intervention HZs and only two danger signs (fever, severe bleeding) were mentioned by over 50% of FTMs age 15-24 in the comparison HZs. Although knowledge of every obstetric danger sign increased, knowledge of some danger signs remained below 10%.

Similar patterns were observed in each age group. For example, at baseline over 60% of FTMs age 15-19 did not know any obstetric danger signs and at endline every FTM age 15-19 knew at least one obstetric danger sign in both study arms. Knowledge of each danger sign increased significantly within each age group. In the 15-19 age group, the largest absolute increase in both study arms was observed for knowledge of fever. In the 20-24 age group, the largest absolute increase in comparison HZs was for knowledge of fever whereas in the intervention HZs, it was for knowledge of severe bleeding.

Table 4.14 shows knowledge of newborn danger signs by socio demographic characteristic, age group, survey round, and HZ. The level of knowledge of newborn danger signs was lower than that of obstetric danger signs. At endline, 42% of FTMs age 15-24 in the intervention HZs knew three or more newborn danger signs compared to 33% of their counterparts in comparison HZs. Nonetheless, knowledge of newborn danger signs increased significantly, from 24% in the intervention HZs and 27% in the comparison HZs at baseline. All of the sociodemographic groups of FTMs age 15-24 in the intervention HZs had a statistically significant increase in knowledge of danger signs, which was much more than we observed in the comparison HZs.

Table 4.10 Percentage of FTMs age 15-24 who know three or more obstetric danger signs, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	18.6	51.1	***	19.7	59.1	***	25.9	56.2	***	21.7	64.6	***	21.1	52.8	***	20.3	60.9	***
Secondary complete/higher	28.8	60.3	***	30.7	71.3	***	30.3	58.2	***	25.9	66.2	***	30.0	58.6	***	27.2	67.5	***
Never married																		
No	20.4	54.9	***	24.8	60.5	***	27.9	59.5	***	23.6	67.7	***	25.0	57.7	***	24.2	64.3	***
Yes	20.1	49.5	***	16.8	63.6	***	31.9	50.4	**	26.1	58.6	***	24.6	49.8	***	20.4	61.6	***
Household wealth																		
Low	22.6	51.0	***	18.8	60.4	***	23.9	56.0	***	19.5	60.4	***	23.2	53.3	***	19.1	60.4	***
Medium	17.6	51.4	***	25.6	57.0	***	28.3	53.9	***	22.7	66.7	***	23.5	52.7	***	24.2	61.5	***
High	20.6	55.9	***	22.1	70.8	***	32.2	61.6	***	30.1	69.3	***	27.7	59.4	***	26.8	69.9	***
Worked last year																		
No	19.4	52.5	***	23.3	63.1	***	27.7	58.8	***	23.6	65.9	***	23.3	55.5	***	23.4	64.4	***
Yes	22.6	53.0	***	19.2	58.3	***	30.1	55.9	***	25.1	64.9	***	27.6	55.0	***	22.5	62.0	***
Watched TV at least once a week																		
No	13.7	50.0	***	20.2	58.6	***	25.1	54.5	***	18.0	64.0	***	19.7	52.4	***	19.2	61.0	***
Yes	24.4	54.2	***	23.2	63.7	***	30.8	59.2	***	27.5	66.3	***	27.9	57.0	***	25.4	65.0	***
Both parents have secondary/higher education																		
No	11.2	46.9	***	19.5	60.9	***	26.0	53.0	***	27.1	64.5	***	18.7	50.0	***	23.7	62.9	***
Yes	22.9	54.3	***	22.5	61.8	***	29.4	58.6	***	23.3	65.8	***	26.5	56.7	***	22.9	63.7	***
Total	20.3	52.6	***	22.0	61.6	***	28.8	57.5	***	24.2	65.5	***	24.9	55.3	***	23.1	63.5	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2

Table 4.11 Percentage of FTMs age 15-24 who know specific obstetric danger signs, by age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Obstetric Danger Signs	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
Severe headache	21.9	47.4	***	22.8	50.7	***	29.5	47.6	***	25.5	51.8	***	26.0	47.5	***	24.1	51.3	***
Fever	26.9	69.0	***	25.7	75.8	***	32.6	73.1	***	30.4	69.2	***	30.0	71.3	***	28.0	72.5	***
Foul discharge	13.0	21.4	***	10.9	23.4	***	17.1	25.1	**	14.8	28.7	***	15.2	23.4	***	12.8	26.0	***
Placenta does not follow baby	0.0	6.2	***	2.3	5.7	**	2.1	7.2	***	1.5	6.2	***	1.1	6.7	***	1.9	6.0	***
Swollen feet	9.8	24.8	***	11.5	30.0	***	13.7	24.0	***	13.7	34.0	***	11.9	24.4	***	12.6	32.0	***
Fits/convulsions	3.9	7.5	*	5.3	9.0	*	3.6	7.0	*	5.8	9.0	ns	3.7	7.3	***	5.6	9.0	**
Severe bleeding	19.1	53.8	***	21.1	62.4	***	25.5	60.8	***	28.1	69.8	***	22.6	57.6	***	24.5	66.0	***
Prolonged labor 12+ hours	0.7	12.5	***	1.8	8.6	***	2.1	13.5	***	2.1	8.6	***	1.5	13.1	***	2.0	8.6	***
Baby does not come headfirst	0.7	5.9	***	2.5	6.4	**	1.3	4.8	**	1.3	6.6	***	1.0	5.3	***	1.9	6.5	***
Other	6.4	21.6	***	3.9	16.2	***	8.0	20.0	***	5.8	15.8	***	7.3	20.7	***	4.8	16.0	***
Doesn't know any danger signs	62.9	0.0	***	61.0	0.0	***	51.8	0.0	***	52.9	0.0	***	56.8	0.0	***	57.0	0.0	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.12 Percentage of FTMs age 15-24 who know three or more newborn danger signs, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	22.7	30.9	*	21.2	40.2	***	30.8	32.4	ns	25.9	49.2	***	25.4	31.4	*	22.8	43.1	***
Secondary complete/higher	31.5	46.6	ns	28.7	36.6	ns	29.7	33.2	ns	25.2	41.7	***	30.0	35.6	ns	26.1	40.4	***
Never married																		
No	22.7	33.3	**	24.8	36.6	**	28.9	33.0	ns	24.4	47.2	***	26.5	33.1	**	24.6	42.2	***
Yes	26.1	33.7	ns	19.1	44.5	***	34.5	32.7	ns	28.8	36.9	ns	29.3	33.3	ns	22.9	41.5	***
Household wealth																		
Low	24.5	29.7	ns	22.3	43.6	***	26.9	32.1	ns	25.3	48.1	***	25.6	30.8	ns	23.6	45.5	***
Medium	23.0	35.1	*	25.6	36.0	*	28.9	32.8	ns	22.7	40.7	***	26.2	33.8	*	24.2	38.2	***
High	25.0	36.0	*	19.5	37.2	**	33.2	33.6	ns	28.2	45.4	**	30.0	34.6	ns	24.6	42.0	***
Worked last year																		
No	23.8	34.9	**	24.5	42.9	***	27.7	29.8	ns	26.8	44.6	***	25.6	32.5	**	25.5	43.7	***
Yes	25.2	29.6	ns	19.2	32.1	**	33.1	36.9	ns	23.6	45.0	***	30.5	34.5	ns	21.6	39.2	***
Watched TV at least once a week																		
No	17.9	34.5	***	20.7	41.9	***	26.7	31.0	ns	25.5	46.0	***	22.5	32.7	**	22.8	43.7	***
Yes	28.0	32.8	ns	24.2	37.7	***	32.0	34.0	ns	25.5	44.1	***	30.2	33.5	ns	24.9	41.0	***
Both parents have secondary/higher education																		
No	12.2	34.7	***	27.6	36.8	ns	28.0	28.0	ns	31.8	53.3	**	20.2	31.3	*	29.9	45.9	**
Yes	27.6	33.1	ns	21.7	40.0	***	30.6	34.1	ns	23.6	42.2	***	29.2	33.7	ns	22.6	41.1	***
Total	24.1	33.5	**	22.8	39.4	***	30.1	33.0	ns	25.5	44.8	***	27.4	33.2	**	24.1	42.0	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Among FTMs age 15-19, knowledge of three or more newborn danger signs increased by 9 percentage points in the comparison HZs and 16 percentage points in the intervention HZs. Within the comparison HZs, the only sociodemographic subgroups with a significant increase in knowledge of newborn danger signs were: less educated FTMs, the ever married, those living in medium-wealth and the wealthiest households, the unemployed, those who did not watch television once a week, and those with less educated parents. In the intervention HZs, all socioeconomic subgroups except FTMs who completed secondary school or had higher education and those with less educated parents had statistically significant increases in knowledge of newborn danger signs. In the 20-24 age group, knowledge of newborn danger signs did not increase in comparison HZs, regardless of sociodemographic group. In contrast, among older FTMs in intervention HZs, knowledge of danger signs increased significantly among all sociodemographic groups except those who had never been married. The largest increase in the age group, about 25 percentage points, occurred among FTMs with less educated parents.

Table 4.15 shows the percentage of FTMs age 15-24 who knew specific newborn danger signs. High fever was the most known newborn danger sign and was reported by 95% of FTMs age 15-24 in the comparison HZs and by 94% of the counterparts in the intervention HZs. Knowledge of fever as a newborn danger sign exceeded 80% at baseline. All the other newborn danger signs had baseline values below 30% and endline values below 40%. Knowledge of both "fits/convulsions" and "swelling/pus/smell around the cord or belly button" increased statistically significantly only in the intervention HZs and in both age groups. Knowledge of "Yellow eyes, palms, or soles" increased significantly only among 15-19-year-old FTMs and all FTMs interviewed in comparison HZs. Among FTMs age 15-19, both the intervention and comparison HZs had statistically significant increases in knowledge of fever and difficulty feeding/sucking. Among FTMs age 20-24, knowledge of specific danger signs did not increased significantly in comparison HZs, except for "high fever." In intervention HZs, significant increases occurred in the percentage of FTMs age 20-24 who knew the following danger signs: high fever, fits/convulsions, difficult/fast breathing, and difficulty feeding/sucking. For example, the percentage of FTMs age 20-24 in intervention HZs who reported difficult/fast breathing as a newborn danger sign increased from 31% at baseline to 43% at endline.

4.2.2 Knowledge of how to prepare for a maternal emergency

Table 4.16 shows the percentage of FTMs age 15-24 who know three or more maternal emergency preparedness steps by demographic characteristic, age group, survey round, and health zone. Maternal emergency preparedness steps were defined as: learning danger signs, saving money to travel to care or pay for a skilled provider, obtaining permission from their husband or partner to go to a health facility, identifying emergency transportation options, identifying a possible blood donor, and other steps. Knowledge of three or more steps of maternal emergency preparedness was low, below ten percent, even at endline. Overall, only FTMs age 15-24 residing in the intervention HZs had a statistically significant increase in knowledge between survey rounds. While knowledge of how to prepare for a maternal emergency increased from three percent to seven percent among all FTMs interviewed in the intervention HZs, in the comparison HZs, the level of knowledge remained largely unchanged. Although no sociodemographic subgroup had more than nine percent of FTMs knowing three or more maternal emergency preparedness steps in the endline survey, the following subgroups had a significant decline in knowledge in the comparison HZs: FTMs age 15-24 who watched TV at least once a week and those who were employed.

Among FTMs age 15-19 in comparison HZs, knowledge of maternal emergency preparedness did not improve significantly overall and in any sociodemographic subgroup between the baseline and endline surveys. In the intervention HZ, six sociodemographic subgroups had statistically significant increases, the largest being among those who were never married, an increase of about seven percentage points.

Table 4.13 Percentage of FTMs age 15-24 who know newborn danger signs, by age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Newborn Danger Signs	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
High fever	86.1	94.1	***	84.8	94.0	***	84.8	94.9	***	86.5	93.1	***	85.4	94.5	***	85.6	93.6	***
Fits/convulsions	23.5	24.4	ns	19.5	30.0	***	24.2	23.6	ns	17.8	31.0	***	23.9	24.0	ns	18.7	30.5	***
Yellow eyes, palms, soles	5.9	12.1	**	8.2	8.8	ns	10.7	10.5	ns	9.4	13.5	ns	8.5	11.2	*	8.8	11.1	ns
Difficult/fast breathing	25.1	30.5	ns	27.1	36.8	**	28.6	32.8	ns	31.3	43.0	***	27.0	31.7	*	29.1	39.8	***
Difficulty feeding/sucking	26.7	35.3	**	26.7	39.6	***	31.0	36.4	ns	32.8	39.0	*	29.0	35.9	**	29.7	39.3	***
Feels colder than normal	8.4	9.3	ns	6.2	6.8	ns	9.3	7.8	ns	4.5	6.6	ns	8.9	8.5	ns	5.3	6.7	ns
Red, swelling/pus around eyes	3.2	4.6	ns	2.9	4.5	ns	3.6	4.6	ns	4.1	6.6	ns	3.4	4.6	ns	3.5	5.6	*
Swelling, pus, bad smell around cord or belly button	5.0	2.7	ns	0.8	3.3	**	5.1	5.1	ns	3.0	7.3	**	5.1	4.0	ns	1.9	5.2	***
Other	14.4	22.3	**	15.0	19.7	ns	14.9	17.3	ns	12.2	22.5	***	14.6	19.6	**	13.6	21.1	***
Does not know any newborn danger signs	2.7	1.4	ns	2.9	1.2	ns	2.5	0.8	*	1.7	1.5	ns	2.6	1.0	*	2.3	1.4	ns
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.14 Percentage of FTMs age 15-24 who know three or more maternal emergency preparedness steps, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	4.4	5.5	ns	1.6	7.0	***	8.1	4.9	ns	4.8	7.9	ns	5.6	5.3	ns	2.6	7.3	***
Secondary complete/higher	5.5	4.1	ns	5.0	4.0	ns	7.4	7.4	ns	3.6	5.8	ns	7.0	6.8	ns	4.0	5.3	ns
Never married																		
No	5.1	6.3	ns	2.5	4.8	ns	7.8	6.3	ns	4.8	6.5	ns	6.7	6.3	ns	3.7	5.7	ns
Yes	3.8	3.8	ns	1.7	9.2	**	7.1	7.1	ns	1.8	7.2	ns	5.1	5.1	ns	1.8	8.5	***
Household wealth																		
Low	4.5	7.7	ns	2.5	8.4	**	10.4	8.2	ns	5.2	5.2	ns	7.3	8.0	ns	3.7	7.0	*
Medium	5.4	2.7	ns	1.2	4.1	ns	5.0	5.6	ns	3.3	6.7	ns	5.2	4.3	ns	2.2	5.3	*
High	3.7	5.1	ns	3.5	6.2	ns	8.1	6.2	ns	3.7	8.0	ns	6.3	5.8	ns	3.6	7.2	ns
Worked last year																		
No	4.3	6.2	ns	2.1	7.6	**	5.2	6.2	*	4.0	7.2	ns	4.7	6.2	*	3.0	7.4	**
Yes	5.2	2.6	ns	2.6	3.8	ns	10.6	6.8	*	4.2	5.8	ns	8.8	5.4	*	3.5	4.9	ns
Watched TV at least once a week																		
No	1.8	4.8	ns	2.0	9.1	**	4.3	9.6	***	3.1	5.6	***	3.1	7.3	***	2.5	7.5	***
Yes	6.3	5.5	ns	2.4	4.5	ns	9.5	4.7	***	4.6	7.2	***	8.0	5.1	***	3.5	5.9	***
Both parents have secondary/higher education																		
No	1.0	4.1	ns	1.1	4.6	ns	3.0	6.0	ns	3.7	8.4	ns	2.0	5.1	ns	2.6	6.7	ns
Yes	5.6	5.6	ns	2.5	6.8	**	8.7	6.6	ns	4.2	6.1	ns	7.3	6.1	ns	3.3	6.4	***
Total	4.6	5.2	ns	2.3	6.4	**	7.6	6.5	ns	4.1	6.6	ns	6.2	5.9	ns	3.1	6.5	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

For FTMs age 20-24, neither the intervention nor the comparison HZs had a statistically significant difference in knowledge between baseline and endline. Two subgroups in the comparison HZs had a significant decline between baseline and endline: FTMs who worked last year and those who watched TV at least once per week. In the intervention HZs, FTMs who did not watch TV at least once per week and those who did were the only subgroups to have a statistically significant increase in knowledge of three or more maternal emergency preparedness steps.

Table 4.17 shows the percentage of FTMs age 15-24 who reported knowing specific steps for preparing for a maternal emergency. FTMs in the comparison HZs did not have any statistically significant increase in knowledge of any maternal emergency preparedness steps, while knowledge of "saving money", "arranging for emergency transportation", and "making sure the family knows a matching blood donor" all increased significantly in the intervention HZs. Less than two percent of FTMs interviewed at endline mentioned the importance of knowing a matching blood donor. Saving money for a maternal emergency was the most commonly known method of preparing for a maternal emergency and was mentioned by 73% and 82% of FTMs age 15-24 in intervention HZs at the baseline survey and endline survey, respectively.

4.2.3 Emergency transport plan

Table 4.18 shows that the percentage of FTMs age 15-24 who had an emergency transportation plan for the sick mother/newborn increased significantly between surveys from 64% to 68% in the comparison HZs and from 52% to 66% in the intervention HZs. As noted, baseline levels were much lower in intervention than in comparison HZs and the increase in the former HZs, 15 percentage points, was bigger than the increase in the latter HZs, four percentage points. All but one demographic subgroup had a statistically significant increase in the prevalence of emergency transport plans in the intervention HZs while only four subgroups had a statistically significant increase in the comparison HZs.

In the age group 15-19, only FTMs residing in the intervention HZs had a statistically significant increase in ownership of an emergency transport plan, which increased from 48% at baseline to 65% at endline. As observed in the overall sample, baseline levels were much lower in the intervention HZs than in the comparison HZs. In the comparison HZs, the increase over time was statistically significant in only one sociodemographic subgroup, those who do not watch TV at least once per week (65% versus 51%).

Among FTMs age 20-24, both the comparison and intervention HZs had a statistically significant increase in emergency transport planning between surveys (from 65% to 71% and from 55% to 67%, respectively). Similar to FTMs age 15-19, the baseline prevalence of emerging transport planning was over 10 percentage points lower in the intervention HZs than in the comparison HZs. In the intervention HZs, no change was observed between surveys in three sociodemographic subgroups (the never married, those residing in medium-wealth households, and those with less educated parents), while in the comparison HZs, no statistically significant change occurred in eight subgroups (less educated FTMs, those who were ever married, all household wealth groups, those who were employed last year, those with weekly TV exposure, and those with more educated parents).

4.3 Newborn Care

4.3.1 Caring for a low-birth-weight infant at home

Table 4.19 shows the percentage of FTMs age 15-24 who knew three or more ways to care for a low-birth-weight (LBW) baby by demographic characteristic, age group, survey round, and health zone. FTMs age 15-24 in both comparison and intervention HZs had a statistically significant increase from baseline.

Table 4.15 Percentage of FTMs age 15-24 who report specific steps for preparing for a maternal emergency, by age group, survey round, and study arm, Kinshasa

Steps to prepare for a maternal emergency	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
	T1	T2	Sig.	T2	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.
Learn danger signs	13.7	18.5	ns	22.0	23.0	ns	17.9	19.4	ns	24.6	25.3	ns	16.0	19.0	ns	23.3	24.1	ns
Save money for emergency	78.4	79.0	ns	68.8	80.1	***	84.8	86.3	ns	77.7	84.8	**	81.8	83.0	ns	73.2	82.4	***
Obtain standing permission	5.7	3.9	ns	7.8	6.4	ns	6.1	5.9	ns	6.6	7.7	ns	5.9	5.0	ns	7.2	7.0	ns
Arrange for emergency transport	20.5	23.9	ns	13.3	18.9	*	23.6	25.1	ns	15.4	26.8	***	22.2	24.6	ns	14.4	22.7	***
Make sure family knows blood donor	0.2	1.1	ns	0.2	1.2	ns	1.5	0.4	ns	0.4	1.9	*	0.9	0.7	ns	0.3	1.6	**
Other	12.1	9.6	ns	12.3	8.8	ns	6.7	5.9	ns	5.4	5.4	ns	9.1	7.6	ns	8.9	7.1	ns
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.16 Percentage of FTMs age 15-24 who had an emergency transportation plan for the sick mother or the sick newborn, by baseline characteristics, age group, survey round, and study arm, Kinshasa

Baseline Characteristics	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
	T1	T2	Sig.	T2	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.
FTM's highest level of education																		
None/primary/secondary incomplete	62.3	63.7	ns	45.3	64.2	***	57.3	67.6	*	47.1	64.0	***	60.6	65.0	ns	45.9	64.2	***
Secondary complete/higher	56.2	69.9	ns	59.4	69.3	ns	69.7	73.2	ns	60.1	69.4	*	67.3	72.6	ns	59.9	69.4	**
Never married																		
No	62.7	68.6	ns	53.2	67.5	***	66.5	70.4	ns	57.3	69.7	***	65.1	69.7	ns	55.4	68.7	***
Yes	59.2	59.2	ns	39.3	61.3	***	61.1	74.3	*	46.8	59.5	ns	59.9	65.0	ns	42.3	60.6	***
Household wealth																		
Low	60.6	67.1	ns	38.6	65.3	***	57.5	67.2	ns	48.7	64.3	**	59.2	67.1	*	43.0	64.9	***
Medium	57.4	62.8	ns	58.1	65.1	ns	63.3	71.7	ns	62.7	66.7	ns	60.7	67.7	ns	60.2	65.8	ns
High	66.2	64.0	ns	50.4	65.5	*	72.0	73.5	ns	53.4	70.6	**	69.7	69.7	ns	52.2	68.5	***
Worked last year																		
No	59.9	64.5	ns	44.1	65.3	***	62.3	73.0	**	51.4	65.2	**	61.0	68.5	**	47.4	65.2	***
Yes	65.2	65.2	ns	57.1	65.4	ns	69.1	69.1	ns	59.7	70.2	*	67.8	67.8	ns	58.5	68.0	**
Watched TV at least once a week																		
No	51.2	64.9	*	37.9	65.2	***	54.0	70.6	***	49.1	65.8	**	52.7	67.9	***	42.9	65.5	***
Yes	67.5	64.6	ns	55.4	65.4	*	71.6	71.6	ns	57.8	68.0	**	69.8	68.5	ns	56.6	66.7	***
Both parents have secondary/higher education																		
No	50.0	55.1	ns	35.6	62.1	***	53.0	70.0	*	49.5	58.9	ns	51.5	62.6	*	43.3	60.3	***
Yes	64.5	67.4	ns	51.0	66.0	***	68.2	71.5	ns	56.4	69.7	***	66.6	69.7	ns	53.6	67.8	***
Total	61.3	64.7	ns	48.3	65.3	***	65.3	71.2	*	54.8	67.2	***	63.5	68.3	*	51.5	66.2	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.17 Percentage of FTMs age 15-24 who know 3 or more ways to care for a low-birthweight baby, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	15.8	28.7	***	11.4	32.1	***	20.0	33.5	**	18.0	36.5	***	17.2	30.3	***	13.6	33.6	***
Secondary complete/higher	26.0	31.5	ns	26.7	32.7	ns	20.0	32.6	***	19.4	34.9	***	21.1	32.4	***	21.4	34.3	***
Never married																		
No	15.7	28.6	***	15.9	31.2	***	18.9	31.6	***	16.6	34.8	***	17.7	30.4	***	16.3	33.1	***
Yes	20.1	29.9	*	12.1	34.1	***	23.9	38.1	*	26.1	37.8	ns	21.5	33.0	**	17.6	35.6	***
Household wealth																		
Low	10.3	30.3	***	11.9	30.2	***	20.1	32.8	*	16.9	31.2	**	14.9	31.5	***	14.0	30.6	***
Medium	20.9	31.8	*	18.0	33.1	**	16.7	34.4	***	17.3	37.3	***	18.6	33.2	***	17.7	35.1	***
High	22.1	25.0	ns	14.2	34.5	***	22.7	31.8	*	22.1	38.0	**	22.5	29.1	*	18.8	36.6	***
Worked last year																		
No	15.4	28.7	***	15.7	32.9	***	16.6	29.8	**	19.6	35.9	**	16.0	29.2	***	17.5	34.3	***
Yes	23.5	30.4	ns	12.2	30.8	***	24.2	36.9	ns	17.8	35.1	**	23.9	34.8	*	15.3	33.1	***
Watched TV at least once a week																		
No	10.1	31.5	***	12.6	33.3	***	18.2	34.2	***	16.1	36.0	***	14.4	33.0	***	14.2	34.5	***
Yes	22.1	27.7	ns	15.9	31.5	***	21.0	32.2	***	20.3	35.3	***	21.5	30.2	***	18.2	33.4	***
Both parents have secondary/higher education																		
No	13.3	32.7	**	12.6	34.5	***	18.0	31.0	*	19.6	44.9	***	15.7	31.8	***	16.5	40.2	***
Yes	18.8	28.2	**	15.0	31.8	***	20.5	33.4	***	18.6	32.8	***	19.7	31.1	***	16.7	32.2	***
Total	17.5	29.2	***	14.6	32.2	***	20.0	33.0	***	18.8	35.5	***	18.9	31.2	***	16.7	33.9	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

The increase in the intervention HZs was slightly larger at 17 percentage points compared to 12 percentage points in the comparison HZs. In both the comparison and intervention HZs, every sociodemographic subgroup had a statistically significant increase in knowledge of three or more ways to care for a LBW baby.

At endline, 29% of FTMs age 15-19 in comparison HZs and 32% of those in intervention HZs knew three or more ways to care for a LBW baby. In both study arms, this represented a statistically significant increase from the baseline. In the intervention HZs, the only sociodemographic subgroup that did not have a significant increase in knowledge was FTMs who completed secondary or had higher education. In the comparison HZs, FTMs age 15-19 who had completed secondary school or had higher education, those from the wealthiest households, those who worked last year, and those who watched TV at least once per week did not have statistically significant increases in knowledge of how to care for a LBW infant at home. For FTMs age 20-24, knowledge increased significantly in both comparison HZs (from 20% to 33%) and intervention HZs (from 19% to 36%), and in all sociodemographic groups except employed FTMs in comparison HZs and never married FTMs in intervention HZs.

Table 4.20 shows the percentage of FTMs age 15-24 who knew a specific way to care for a LBW baby. Among FTMs age 15-24, the most frequently mentioned way to care for a LBW baby in both the baseline and endline surveys was to keep the baby warm (mentioned at endline by 77% of FTMs in comparison HZs and 75% of those in intervention HZs); however, the increase over time in was not statistically significant in either study arm. The percentage of FTMs who mentioned regularly taking the baby for check-ups at the health facility declined significantly in the intervention HZs in the total sample and within each age group. Both study arms had statistically significant increases in the same components of LBW baby care (skin-to-skin contact, early initiation of breastfeeding, exclusive breastfeeding, and frequent breastfeeding). In the overall sample and in both age groups, there was a statistically significant increase in the percentage of FTMs who reported that they did not know any ways to care for a LBW baby. Among FTMs age 20-24, the percentage reporting frequent breastfeeding increased significantly in comparison HZs but not in intervention HZs. In the same age group, the percentage mentioning exclusive breastfeeding increased significantly in intervention HZs but not in comparison HZs. With the exception of "keeping the baby warm," knowledge of all other ways to care for a LBW baby was below 35% in both HZs.

4.3.2 Kangaroo Mother Care

Table 4.21 shows the percentage of FTMs age 15-24 who have ever heard of Kangaroo Mother Care (KMC), by sociodemographic characteristics, age group, study arm and survey round. To assess FTM's knowledge of KMC, respondents were asked "Have you ever heard of Kangaroo Mother Care?" Overall, at endline, 41% of FTMs in comparison HZs and 49% of those in intervention HZs had ever heard of KMC. Knowledge of KMC increased significantly between the baseline and endline surveys in both study arms and both age groups. For the overall sample and both age groups, more FTMs interviewed at endline had heard of KMC in the intervention HZs than in the comparison HZs. All sociodemographic subgroups, regardless of age group and study arm had significant increases in knowledge of KMC. In the overall sample, knowledge of KMC increased by about 30 percentage points in the comparison HZs and by about 40 percentage points in the intervention HZs.

Table 4.22 shows the percentage of FTMs age 15-24 who knew three or more benefits of KMC. Overall, knowledge of three or more benefits of KM increased significantly among FTMs age 15-24 in the intervention HZs from 21% to 31% whereas it remained largely unchanged among FTMs in the comparison HZs (29% at baseline versus 28% at endline). All sociodemographic subgroups among FTMs age 15-24 in the intervention HZs had a statistically significant increase in knowledge of three or more KMC benefits, except the never married for whom we detected a statistically significant decrease in the comparison HZs.

Table 4.18 Percentage of FTMs age 15-24 who know how to care for a low-birth-weight baby, by age group, survey round, and study arm, Kinshasa

Ways to care for a low-birth weight baby	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
	T1	T2	Sig.	T2	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.
Skin-to-skin contact	6.8	19.6	***	7.6	24.6	***	5.9	20.2	***	9.0	27.8	***	6.3	19.9	***	8.3	26.2	***
Early breastfeeding initiation	8.4	15.5	**	9.4	16.2	**	8.8	17.5	***	10.9	16.5	*	8.6	16.6	***	10.2	16.4	***
Exclusive breastfeeding	18.2	26.4	**	14.0	30.6	***	21.1	22.9	ns	10.7	27.4	***	19.8	24.5	*	12.4	29.0	***
Frequent breastfeeding	21.2	31.2	***	23.2	29.2	*	20.6	34.1	***	25.5	30.8	ns	20.9	32.8	***	24.3	30.0	**
Clean cord care	1.1	1.6	ns	1.0	2.7	ns	2.7	3.8	ns	2.8	3.0	ns	2.0	2.8	ns	1.9	2.8	ns
Delayed bathing	5.2	6.4	ns	1.8	2.1	ns	5.7	4.4	ns	3.2	4.9	ns	5.5	5.3	ns	2.5	3.5	ns
Keep baby warm	72.2	73.6	ns	70.0	73.3	ns	76.6	79.0	ns	75.2	77.1	ns	74.6	76.6	ns	72.5	75.2	ns
Assess for danger signs	9.1	6.2	ns	7.8	6.4	ns	6.7	8.8	ns	9.2	9.2	ns	7.8	7.6	ns	8.5	7.8	ns
Regular baby visits to health facility	7.1	6.6	ns	12.3	7.4	**	7.8	8.4	ns	13.7	7.1	***	7.5	7.6	ns	13.0	7.2	***
Other	3.9	6.2	ns	4.1	6.8	ns	4.6	7.2	ns	4.9	6.0	ns	4.3	6.7	*	4.5	6.4	ns
Doesn't know any	0.0	6.4	***	0.0	7.0	***	0.0	4.0	***	0.0	5.8	***	0.0	5.1	***	0.0	6.4	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.19 Percentage of FTMs age 15-24 who have ever heard of Kangaroo Mother Care, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	8.5	36.9	***	7.5	43.5	***	10.8	42.2	***	11.1	48.7	***	9.3	38.7	***	8.7	45.2	***
Secondary complete/higher	13.7	39.7	***	4.0	47.5	***	7.6	44.1	***	10.4	56.1	***	8.7	43.3	***	8.7	53.8	***
Never married																		
No	9.0	37.3	***	7.6	44.3	***	9.5	43.4	***	11.2	54.8	***	9.3	41.1	***	9.6	49.9	***
Yes	9.8	37.5	***	5.2	44.5	***	6.2	43.4	***	9.0	47.7	***	8.4	39.7	***	6.7	45.8	***
Household wealth																		
Low	5.8	36.1	***	6.9	38.6	***	7.5	38.8	***	9.7	49.4	***	6.6	37.4	***	8.1	43.3	***
Medium	12.8	36.5	***	5.2	47.7	***	7.2	41.1	***	10.0	54.0	***	9.8	39.0	***	7.5	50.6	***
High	9.6	39.7	***	8.8	49.6	***	10.9	48.3	***	12.3	55.8	***	10.4	45.0	***	10.9	53.3	***
Worked last year																		
No	9.6	37.0	***	6.3	42.9	***	8.0	45.7	***	8.0	52.5	***	8.8	41.1	***	7.1	47.3	***
Yes	8.7	38.3	***	7.7	47.4	***	9.7	40.7	***	14.7	53.9	***	9.4	39.9	***	11.5	51.0	***
Watched TV at least once a week																		
No	10.7	39.3	***	6.1	42.9	***	11.8	41.2	***	12.4	53.4	***	11.3	40.3	***	8.9	47.6	***
Yes	8.5	36.2	***	7.3	45.3	***	7.1	44.7	***	9.8	52.9	***	7.7	40.9	***	8.6	49.2	***
Both parents have secondary/higher education																		
No	14.3	36.7	***	3.4	36.8	***	10.0	43.0	***	10.3	53.3	***	12.1	39.9	***	7.2	45.9	***
Yes	7.9	37.5	***	7.5	46.0	***	8.5	43.5	***	10.8	53.1	***	8.2	40.9	***	9.1	49.3	***
Total	9.3	37.4	***	6.8	44.4	***	8.8	43.4	***	10.7	53.1	***	9.0	40.7	***	8.7	48.6	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.20 Percentage of FTMs age 15-24 who know 3 or more benefits of Kangaroo Mother Care, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	25.4	27.3	ns	21.2	30.6	**	30.3	25.9	ns	17.5	33.3	***	27.0	26.9	ns	20.0	31.5	***
Secondary complete/higher	34.2	31.5	ns	23.8	29.7	ns	31.2	27.9	ns	21.2	30.9	**	31.7	28.6	ns	21.9	30.6	**
Never married																		
No	22.4	30.2	*	22.0	30.6	*	26.9	26.9	ns	16.6	32.3	***	25.2	28.2	ns	19.1	31.5	***
Yes	33.2	25.0	ns	21.4	30.1	ns	45.1	28.3	**	29.7	30.6	ns	37.7	26.3	**	24.6	30.3	ns
Household wealth																		
Low	24.5	29.0	ns	19.8	34.7	***	35.1	28.4	ns	13.0	28.6	***	29.4	28.7	ns	16.9	32.0	***
Medium	29.7	29.1	ns	24.4	25.0	**	33.3	29.4	ns	17.3	32.0	**	31.7	29.3	ns	21.1	28.3	*
High	26.5	25.7	ns	21.2	31.0	ns	26.1	24.6	ns	28.2	35.0	ns	26.2	25.1	ns	25.4	33.3	*
Worked last year																		
No	24.4	27.8	ns	25.4	31.1	ns	29.1	26.3	ns	21.4	28.3	ns	26.6	27.1	ns	23.6	29.8	*
Yes	33.9	28.7	ns	14.1	28.8	**	33.1	28.4	ns	17.3	37.2	***	33.3	28.5	ns	15.9	33.4	***
Watched TV at least once a week																		
No	22.0	28.0	ns	19.2	28.8	*	26.7	24.1	ns	15.5	30.4	**	24.5	25.9	ns	17.5	29.5	***
Yes	29.9	28.0	ns	23.5	31.5	*	33.1	29.0	ns	21.9	32.7	**	31.7	28.6	ns	22.7	32.1	***
Both parents have secondary/higher education																		
No	29.6	30.6	ns	20.7	24.1	ns	28.0	28.0	ns	15.9	38.3	***	28.8	29.3	ns	18.0	32.0	**
Yes	26.1	27.3	ns	22.0	31.8	**	31.5	27.1	ns	20.8	30.0	**	29.1	27.2	ns	21.4	30.9	***
Total	26.9	28.0	ns	21.8	30.4	**	30.9	27.2	ns	19.7	31.9	***	29.0	27.6	ns	20.8	31.1	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

For both older and younger FTMs, only the intervention HZs had a statistically significant increase in the perceived benefits of KMC. Among FTMs age 15-19, for example, the percentage who knew three or more benefits of KMC increased from 27% to 28% in comparison HZs and from 22% to 30% in intervention HZs. In the comparison HZs, only one subgroup of younger FTMs – the ever married – had a statistically significant increase in the perceived benefits of KMC, whereas in the intervention HZs, significant increases were detected in all but five sociodemographic subgroups. Similarly, among FTMs age 20-24 in intervention HZs, most sociodemographic subgroups had a statistically significant increase in the perceived benefits of KMC except for those who were never married, residing in the wealthiest households and were unemployed in the past 12 months. The only statistically significant difference among FTMs age 20-24 in the comparison HZs was a 16.8 percentage point decrease among those who had never been married.

Table 4.23 shows the change in knowledge for specific components of KMC among FTMs age 15-24. Both HZs had a statistically significant decline in the percentage of FTMs age 15-24 who did not know any benefits of KMC. At baseline, at least one and half times as many FTMs in comparison HZs did not know any benefit of KMC as their counterparts in intervention HZs. At endline, less than one percent of FTMs age 15-24 believed KMC had no benefits. The most commonly mentioned benefit of KMC for FTMs in both HZs and in each age group was that it helped the baby stay warm, mentioned by more than 80% of FTMs at endline. For FTMs age 15-19 in the comparison HZs, there was a non-significant decrease in knowledge of the role of KMC in helping the baby sleep and, among FTMs age 20-24 in the comparison HZs, there was a non-significant decrease in knowing that KMC helps with breastmilk production. In intervention HZs, knowledge of specific components of KMC did not decrease between surveys in both age groups and the overall sample. Only two benefits, "helps baby stay warm" and "helps baby survive," were mentioned by over 50% of the FTMs in either study arm; the remaining benefits were mentioned by 20% of less of FTMs.

Table 4.24 shows the percentage of FTMs age 15-24 who approved of KMC by sociodemographic characteristics, age group, survey round, and HZ. At endline, over 90% of FTMs age 15-24 approved of KMC in both study arms, regardless of age group. For FTMs age 15-24, approval rates increased significantly in all sociodemographic subgroups. In the 15-19 age group, the only subgroup that did not have a significant change over time in KMC approval were those with completed secondary/higher education in the comparison HZs. Among FTMs age 20-24, the only subgroups that did not have significant increases in approval of KMC were those who were less educated, never married, and had less educated parents. Approval at baseline was relatively high among all sociodemographic groups and ranged from about 70%-85%, with most surpassing 90% at endline.

Table 4.25 shows that at endline, 52% and 47% of FTMs age 15-24 in comparison and intervention HZs, respectively, believed that no FTMs with a LBW baby in the community practiced KMC. This perception increased significantly in the comparison HZs, regardless of age group, but not in the intervention HZs. While baseline estimates of the perceived absence of KMC were higher in intervention HZs than in comparison HZ's for all sociodemographic subgroups and age groups, the opposite was observed at endline. None of the sociodemographic subgroups in intervention HZs had a significant increase in the perceived lack of KMC practice among FTMs with a LBW baby in the community, but almost all of the sociodemographic subgroups in comparison HZs did.

Table 4.26 shows normative expectations for KMC, that is, the percentage of FTMs age 15-24 who completely agreed with the statement that most people who were important to them thought they should practice KMC if they had a LBW baby. At endline, this perception was held by less than half of FTMs age 15-24 in both study arms, but represented a statistically significant increase from baseline estimates: from 32% to 45% in comparison HZs and from 34% to 46% in intervention HZs.

Table 4.21 Percentage of FTMs age 15-24 who know specific benefits of Kangaroo Mother Care, by age group, survey round, and study arm, Kinshasa

Benefits of Kangaroo Mother Care	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
	T1	T2	Sig.	T2	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.
Helps baby stay warm	68.1	80.2	***	63.9	83.8	***	71.0	81.7	***	65.5	82.9	***	69.7	81.0	***	64.7	83.3	***
Helps baby survive	52.6	61.5	**	56.3	62.2	ns	56.4	63.6	*	60.0	64.0	ns	54.7	62.7	***	58.1	63.1	*
Reduces infant morbidity	4.3	4.6	ns	6.4	7.0	ns	6.1	5.7	ns	7.1	7.3	ns	5.3	5.2	ns	6.7	7.1	ns
Easier breastfeeding	13.2	13.9	ns	10.5	12.7	ns	12.4	12.4	ns	7.9	10.9	ns	12.8	13.1	ns	9.2	11.8	ns
Helps mom make milk	6.2	5.7	ns	4.5	5.1	ns	7.2	4.4	*	4.9	4.9	ns	6.7	5.0	ns	4.7	5.0	ns
Promotes mother-baby bonding	13.4	20.7	**	8.8	18.1	***	16.6	22.9	*	7.9	18.8	***	15.1	21.9	***	8.4	18.4	***
Promotes healthy infant weight	7.7	12.8	*	8.2	14.0	**	8.8	13.9	**	8.6	12.8	*	8.3	13.4	***	8.4	13.4	***
Improves baby's mental development	6.2	8.7	ns	8.0	10.5	ns	8.4	8.2	ns	9.9	13.7	ns	7.4	8.4	ns	8.9	12.1	*
Helps baby sleep	13.9	9.8	ns	4.9	11.9	***	11.0	11.0	ns	8.6	12.0	ns	12.3	10.5	ns	6.7	11.9	***
No benefits	1.1	0.7	ns	2.3	0.6	*	0.6	0.4	ns	2.6	0.4	**	0.8	0.5	ns	2.4	0.5	***
Other	1.4	0.0	*	0.4	0.6	ns	1.1	0.8	ns	0.0	1.1	*	1.2	0.4	*	0.2	0.8	ns
Don't know	16.2	4.1	***	9.0	4.3	**	13.0	2.7	***	8.6	5.1	*	14.4	3.3	***	8.8	4.7	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.22 Percentage of FTMs age 15-24 who approve of Kangaroo Mother Care, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	76.2	91.0	***	74.4	92.0	***	79.5	91.9	***	83.6	89.9	ns	77.3	91.3	***	77.4	91.3	***
Secondary complete/higher	80.8	86.3	ns	73.3	92.1	***	80.6	93.2	***	74.1	92.4	***	80.6	92.0	***	73.9	92.3	***
Never married																		
No	76.1	91.0	***	70.7	91.4	***	82.0	92.5	***	76.4	92.1	***	79.8	91.9	***	73.7	91.8	***
Yes	78.3	89.1	**	80.3	93.1	***	73.5	93.8	***	82.9	89.2	ns	76.4	90.9	***	81.3	91.5	***
Household wealth																		
Low	72.9	91.6	***	72.3	90.6	***	81.3	90.3	*	69.5	89.0	***	76.8	91.0	***	71.1	89.9	***
Medium	78.4	88.5	*	72.1	90.7	***	77.2	92.8	***	80.0	92.7	**	77.7	90.9	***	75.8	91.6	***
High	80.1	90.4	*	80.5	96.5	***	82.0	94.3	***	84.0	92.6	*	81.3	92.8	***	82.6	94.2	***
Worked last year																		
No	76.5	90.1	***	77.3	93.4	***	77.9	93.8	***	83.7	92.8	***	77.2	91.8	***	80.2	93.1	***
Yes	78.3	90.4	*	67.3	89.1	***	83.1	91.5	**	69.6	89.5	***	81.5	91.2	***	68.6	89.3	***
Watched TV at least once a week																		
No	77.4	90.5	**	73.2	91.9	***	81.8	89.3	*	77.6	91.3	***	79.7	89.9	***	75.2	91.6	***
Yes	76.8	90.0	***	74.7	92.0	***	79.3	94.7	***	78.1	91.5	***	78.2	92.6	***	76.5	91.8	***
Both parents have secondary/higher education																		
No	76.5	90.8	**	67.8	93.1	***	79.0	95.0	***	77.6	85.0	ns	77.8	92.9	***	73.2	88.7	***
Yes	77.1	90.0	***	75.5	91.7	***	80.5	92.2	***	78.1	93.3	***	79.0	91.3	***	76.7	92.5	***
Total	77.0	90.2	***	74.1	92.0	***	80.2	92.8	***	77.9	91.4	***	78.7	91.6	***	76.0	91.7	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.23 Percentage of FTMs age 15-24 who perceives no FTM with a low-birthweight baby in community practices Kangaroo Mother Care, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	40.2	54.1	***	46.6	49.5	ns	39.5	55.7	**	38.6	46.0	ns	39.9	54.6	***	44.0	48.3	ns
Secondary complete/higher	35.6	53.4	*	50.5	40.6	ns	37.4	45.9	*	44.2	45.0	ns	37.0	47.2	**	45.9	43.8	ns
Never married																		
No	37.3	52.5	***	43.9	49.7	ns	34.7	48.1	***	41.3	46.1	ns	35.7	49.8	***	42.5	47.8	ns
Yes	42.4	56.0	**	53.8	43.9	ns	50.4	54.0	ns	44.1	43.2	ns	45.5	55.2	*	50.0	43.7	ns
Household wealth																		
Low	40.6	53.5	*	48.5	49.0	ns	38.1	50.0	*	38.3	46.8	ns	39.4	51.9	**	44.1	48.0	ns
Medium	35.1	56.1	***	44.8	45.9	ns	41.1	50.6	ns	41.3	45.3	ns	38.4	53.0	***	43.2	45.7	ns
High	42.6	52.2	ns	49.6	47.8	ns	35.5	47.9	*	46.0	44.2	ns	38.3	49.6	**	47.5	45.7	ns
Worked last year																		
No	39.8	54.6	***	46.2	47.1	ns	38.1	44.6	ns	41.7	43.1	ns	39.0	49.9	***	44.2	45.3	ns
Yes	38.3	52.2	*	50.0	48.7	ns	38.1	55.1	***	42.4	48.7	ns	38.2	54.1	***	45.8	48.7	ns
Watched TV at least once a week																		
No	36.9	52.4	**	48.0	43.4	ns	35.3	49.7	**	41.6	46.6	ns	36.1	51.0	***	45.1	44.8	ns
Yes	41.0	55.0	**	47.1	50.5	ns	39.6	49.1	*	42.2	44.8	ns	40.2	51.7	***	44.5	47.6	ns
Both parents have secondary/higher education																		
No	31.6	52.0	**	44.8	48.3	ns	38.0	59.0	**	33.6	43.0	ns	34.8	55.6	***	38.7	45.4	ns
Yes	41.6	54.5	***	48.0	47.5	ns	38.1	47.1	**	44.4	46.1	ns	39.7	50.4	***	46.3	46.8	ns
Total	39.4	54.0	***	47.4	47.6	ns	38.1	49.3	***	42.0	45.4	ns	38.7	51.5	***	44.8	46.5	ns
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.24 Percentage of FTMs age 15-24 who completely agree with the statement that most people who are important to her think she should practice Kangaroo Mother Care if she has a low-birthweight baby, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	31.4	41.8	**	30.1	47.2	***	31.9	48.1	**	40.2	40.7	ns	31.6	43.9	***	33.4	45.0	***
Secondary complete/higher	39.7	53.4	ns	29.7	46.5	*	30.9	45.3	***	38.1	49.3	**	32.4	46.7	***	35.9	48.5	***
Never married																		
No	29.8	42.7	**	26.4	43.3	***	31.1	47.6	***	37.1	44.1	ns	30.6	45.7	***	32.1	43.7	***
Yes	37.0	45.1	ns	36.4	53.8	**	31.9	41.6	ns	45.0	51.4	ns	35.0	43.8	*	39.8	52.8	**
Household wealth																		
Low	26.5	38.7	*	28.2	44.1	***	36.6	45.5	ns	31.8	38.3	ns	31.1	41.9	**	29.8	41.6	**
Medium	36.5	42.6	ns	28.5	50.6	***	29.4	47.2	***	38.7	49.3	ns	32.6	45.1	**	33.2	50.0	***
High	36.0	50.7	*	35.4	46.9	ns	29.4	46.0	***	46.0	49.7	ns	32.0	47.8	***	41.7	48.6	ns
Worked last year																		
No	33.6	45.7	**	35.3	48.9	***	30.8	50.5	***	44.6	46.0	ns	32.3	48.0	***	39.5	47.6	**
Yes	30.4	38.3	ns	18.6	42.9	***	31.8	41.1	*	30.9	45.5	**	31.3	40.2	*	25.4	44.4	***
Watched TV at least once a week																		
No	35.7	42.3	ns	25.3	46.0	***	32.6	53.5	***	36.0	42.2	ns	34.1	48.2	***	30.1	44.3	***
Yes	31.0	44.6	**	33.2	47.8	***	30.5	42.3	**	40.5	47.7	ns	30.7	43.3	***	37.0	47.7	***
Both parents have secondary/higher education																		
No	34.7	48.0	ns	31.0	41.4	ns	35.0	54.0	**	43.9	45.8	ns	34.8	51.0	**	38.1	43.8	ns
Yes	32.3	42.5	**	29.7	48.2	***	30.4	44.5	***	37.5	45.8	*	31.2	43.6	***	33.4	47.1	***
Total	32.8	43.7	***	30.0	47.0	***	31.2	46.3	***	39.0	45.8	*	32.0	45.1	***	34.4	46.4	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Among FTMs age 15-19, normative expectations about KMC for LBW babies increased significantly in both HZs, by 17 percentage points in the intervention HZs and 11 percentage points in the comparison HZs. In this age group, fewer sociodemographic subgroups had significantly increased normative expectations about KMC in comparison HZs than in intervention HZs. Among older FTMs in intervention HZ, only three subgroups had a significant increase in the percentage that completely agreed with the statement that most people who were important to them thought they should practice KMC if they had a LBW baby: FTMs who were more educated, employed in the past 12 months, and had two parents with secondary/higher education. Comparatively, among FTMs age 20-24 in comparison HZs, all but two sociodemographic subgroups had a statistically significant increase in normative expectations about KMC. Overall, among FTMs age 20-24, there was a statistically significant increase in normative expectations about KMC in both study arms, but the increase in the intervention HZs was smaller (seven percentage points) than the increase in the comparison HZs (15 percentage points).

Table 4.27 shows the percentage of FTMs age 15-24 who stated that they would still practice KMC even if most people did not want them to, by sociodemographic characteristics, age group, survey round, and study arm. At endline, 71% of all FTMs interviewed in the comparison HZs and 72% of those interviewed in the intervention HZs stated that they would still practice KMC even if most people did not want them to. The prevalence of this measure increased significantly among FTMs age 15-24 who resided in the intervention HZs (from 58% at baseline), but not among those in comparison HZs, where there was a slight decrease (from 73% at baseline). An examination of change over time within sociodemographic subgroups of FTMs age 15-24 in comparison HZs revealed decreases in the indicator in ten subgroups, with the decrease attaining statistically significance among those who were ever married and those without weekly TV exposure. It is noted that the baseline estimate of this indicator was lower in the intervention HZs than in the comparison HZs, and that this pattern was found in most sociodemographic subgroups, even when the data were disaggregated by age. At endline, most sociodemographic subgroups in intervention HZs had attained levels that were close to the baseline levels in comparison HZs.

Similar patterns of change were seen when the results were disaggregated by age group. Between the baseline survey and the endline survey, there was a non-significant decrease in the percentage of FTMs age 15-24 who stated that they would still practice KMC even if most people did not want them to while, in the intervention HZs, there was a statistically significant increase. For example, among FTMs age 15-19, the prevalence of this indictor was 71% at baseline and 70% at endline in comparison HZs and 57% at baseline and 70% at endline in intervention HZs. The baseline estimates for FTMs age 15-19 in the comparison HZs was 14 percentage points larger than the baseline estimate in the intervention HZs. For FTMs age 20-24, the baseline estimate for comparison HZs was 17 percentage points larger than the intervention HZs' baseline value. Additionally, there was a decline in the prevalence of the indicator in many sociodemographic subgroups in comparison HZs, regardless of age group. Among FTMs age 20-24, the decrease in the prevalence of the indicator in comparison HZs was statistically significant among less educated FTMs, those residing in the poorest households, and those who did not watch TV weekly. In almost all sociodemographic subgroups, the prevalence of the indicator in intervention HZs at endline was close to the levels that were observed in comparison HZs at baseline.

4.3.3 Exclusive breastfeeding

Table 4.28 shows the percentage of FTMs age 15-24 who believed that they should exclusively breastfeed their baby by baseline characteristic, age group, survey round, and study arm. At endline, 54% of FTMs age 15-24 in comparison HZs and 61% of those in intervention HZs believed that they should practice exclusive breastfeeding, with a statistically significant increase over time in the latter but not the former HZs.

Table 4.25 Percentage of FTMs age 15-24 who would practice Kangaroo Mother Care even if most people did not want her to, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	70.5	70.5	ns	56.7	71.2	***	76.8	67.0	*	59.3	71.4	*	72.6	69.3	ns	57.6	71.3	***
Secondary complete/higher	74.0	64.4	ns	59.4	67.3	ns	74.1	74.1	ns	56.8	74.8	***	74.1	72.4	ns	57.5	72.8	***
Never married																		
No	75.7	66.3	*	57.3	72.9	***	76.0	71.6	ns	54.2	73.0	***	75.9	69.6	**	55.7	73.0	***
Yes	64.7	73.9	ns	57.2	65.9	ns	71.7	71.7	ns	69.4	74.8	ns	67.3	73.1	ns	62.0	69.4	ns
Household wealth																		
Low	68.4	69.7	ns	57.9	72.8	**	78.4	64.9	*	50.6	71.4	***	73.0	67.5	ns	54.8	72.2	***
Medium	73.6	68.9	ns	54.7	68.0	*	68.9	75.6	ns	59.3	76.0	**	71.0	72.6	ns	56.8	71.7	***
High	71.3	69.9	ns	60.2	69.9	ns	78.2	72.5	ns	63.2	73.0	ns	75.5	71.5	ns	62.0	71.7	*
Worked last year																		
No	72.5	69.4	ns	61.9	71.0	*	74.7	71.6	ns	61.6	71.0	*	73.6	70.5	ns	61.8	71.0	***
Yes	67.0	69.6	ns	47.4	69.2	***	75.4	71.6	ns	52.4	77.0	***	72.6	70.9	ns	50.1	73.5	***
Watched TV at least once a week																		
No	74.4	66.7	ns	57.1	71.2	**	79.1	64.2	**	53.4	71.4	***	76.9	65.4	***	55.4	71.3	***
Yes	69.0	71.2	ns	57.4	69.9	**	72.8	75.7	ns	60.1	74.5	***	71.1	73.7	ns	58.8	72.3	***
Both parents have secondary/higher education																		
No	77.6	72.4	ns	57.5	63.2	ns	80.0	74.0	ns	54.2	68.2	*	78.8	73.2	ns	55.7	66.0	*
Yes	69.2	68.6	ns	57.3	72.0	***	73.9	71.1	ns	58.9	75.0	***	71.8	70.0	ns	58.0	73.4	***
Total	71.1	69.5	ns	57.3	70.4	***	75.0	71.6	ns	57.8	73.4	***	73.2	70.6	ns	57.5	71.9	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.26 Percentage of FTMs age 15-24 who believe that they should breastfeed their baby exclusively, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	51.4	51.9	ns	40.9	57.0	***	54.6	56.2	ns	51.9	62.4	*	52.5	53.4	ns	44.5	58.8	***
Secondary complete/higher	46.6	52.1	ns	44.6	61.4	*	55.6	54.4	ns	45.7	63.7	***	54.0	54.0	ns	45.4	63.1	***
Never married																		
No	48.2	54.1	ns	43.6	54.8	**	55.3	56.8	ns	48.9	64.3	***	52.6	55.8	ns	46.4	59.9	***
Yes	53.8	48.9	ns	38.2	63.6	***	54.9	48.7	ns	45.9	59.5	*	54.2	48.8	ns	41.2	62.0	***
Household wealth																		
Low	52.9	51.6	ns	42.6	57.4	**	51.5	53.0	ns	50.6	66.9	**	52.2	52.2	ns	46.1	61.5	***
Medium	51.4	51.4	ns	43.0	57.6	**	55.6	52.2	ns	39.3	66.0	***	53.7	51.8	ns	41.3	61.5	***
High	47.1	52.9	ns	38.1	59.3	**	57.3	58.8	ns	54.0	57.1	ns	53.3	56.5	ns	47.5	58.0	*
Worked last year																		
No	50.3	54.0	ns	43.2	59.5	***	54.3	54.7	ns	52.2	63.0	**	52.2	54.3	ns	47.3	61.1	***
Yes	51.3	46.1	ns	38.5	54.5	**	56.4	55.5	ns	42.4	63.4	***	54.7	52.4	ns	40.6	59.4	***
Watched TV at least once a week																		
No	44.6	56.0	*	50.0	59.6	ns	49.7	57.8	ns	55.9	66.5	ns	47.3	56.9	*	52.6	62.7	**
Yes	54.2	49.4	ns	36.0	56.7	***	58.3	53.6	ns	44.1	61.4	***	56.5	51.7	ns	40.2	59.2	***
Both parents have secondary/higher education																		
No	53.1	52.0	ns	48.3	47.1	ns	48.0	52.0	ns	50.5	61.7	ns	50.5	52.0	ns	49.5	55.2	ns
Yes	49.9	51.9	ns	40.3	60.3	***	56.9	55.8	ns	47.5	63.6	***	53.8	54.0	ns	43.7	61.8	***
Total	50.6	51.9	ns	41.7	57.9	***	55.2	55.0	ns	48.2	63.2	***	53.1	53.6	ns	44.9	60.5	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Personal belief in exclusive breastfeeding increased significantly in all sociodemographic subgroups of FTMs age 15-24 in intervention HZs, except among those with less educated parents, but in only one subgroup in the comparison HZs – those who did not watch TV at least once a week.

In the 15-19 and 20-24 age groups, there was a statistically significant increase in the percentage of FTMs who believed they should exclusively breastfeed their baby in intervention HZs, but not in comparison HZs. Among FTMs age 20-24, for example, the prevalence of personal belief in exclusive breastfeeding remained unchanged in comparison HZs (55% at both baseline and endline), but increased from 48% to 63% in intervention HZs. An examination of change within each sociodemographic group revealed that in the 15-19 age group, only one subgroup (i.e., FTMs who were not exposed to TV weekly) had a significant increase in personal belief in exclusive breastfeeding characteristics compared to all but two socioeconomic groups in the intervention HZs. Similar patterns of change were observed among FTMs age 20-24.

Table 4.29 shows the percentage of FTMs age 15-24 who named a specific person among their five most important referents for newborn care decisions by age group, survey round, and health zone. Referents included: mother, father, husband/partner, sister, other family member, mother-in-law (i.e., husband/partner's mother), friend, religious leader, health worker, teacher, co-worker, and neighbor. Among FTMs age 15-24, mothers were the most commonly mentioned referent in both the baseline and endline surveys, regardless of study arm, but in the intervention HZs, there were statistically significant increases in the percentage mentioning their friend, health worker, and neighbor as a referent, and a statistically significant decrease in the percentage mentioning their father, husband/partner, and mother-in-law. In the comparison HZs, there was a statistically significant increase in the percentage of FTMs age 15-24 who named other family members and friends as referents, and a statistically significant decrease in the percentage mentioning their mother, mother-in-law, and religious leader.

Slightly different patterns emerged when the data were disaggregated by age group. Mothers were the most common referent for FTMs age 15-19, but husbands/partners were the most common referent for FTMs age 20-24. Among FTMs age 15-19, there was a statistically significant decline in mentioning husbands/partners as referents for newborn care decisions in the intervention HZs. Among FTMs age 15-19 in the comparison HZs, there were no statistically significant changes in the percentage mentioning each referent, but among those living in the intervention HZs, the percentage mentioning health workers increased significantly by 21 percentage points. The role of fathers, husband/partners, and mothers-in-law as referents for newborn care decisions declined significantly among FTMs age 15-19 in intervention HZs. For FTMs age 20-24 in the comparison HZs, the percentage naming their mother as a referent for newborn care decisions decreased significantly while the percentage naming their sister increased significantly. In the intervention HZs, there was a significant increase in the percentage of FTMs age 20-24 who named their friends (from 30% at baseline to 40% at endline) and health workers (from 37% at baseline to 49% at endline) as referents for newborn care decisions.

Table 4.30 shows injunctive norms for exclusive breastfeeding, that is, the percentage of FTMs age 15-24 who believed a specific referent would approve/approved of them exclusively breastfeeding their baby. It is recognized that while baseline estimates may have reflected perceived approval, endline estimates could partly reflect FTMs' lived experiences. At endline, perceived approval rates for exclusive breastfeeding among FTMs age 15-24 ranged from 63% to 66% for referents who were neighbors to 98 percent for referents who were health workers. In the intervention HZs, perceived approval rates for exclusive breastfeeding increased significantly from baseline to endline in all referent categories, with the largest absolute increase (24 percentage points) occurring for religious leaders. In the comparison HZs, perceived approval rates for exclusive breastfeeding did not increase significantly among the three referents (other family members, mother-in-law, and religious leader), and the absolute increases (in percentage points) for the other referent groups were not as large as in the intervention HZs.

Table 4.27 Percentage of FTMs age 15-24 who named specific persons among their five most important referents for newborn care decisions, by age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Referents	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
Mother	86.6	85.2	ns	87.7	88.5	ns	86.1	79.6	**	87.2	84.4	ns	86.3	82.2	*	87.4	86.5	ns
Father	36.2	34.6	ns	42.7	35.7	*	33.0	35.6	ns	42.4	37.3	ns	34.4	35.2	ns	42.6	36.5	**
Husband/Partner	72.9	69.5	ns	78.0	72.1	*	82.5	81.9	ns	87.4	85.9	ns	78.1	76.2	ns	82.6	78.8	*
Sister	78.8	77.7	ns	78.9	78.9	ns	77.7	74.7	ns	82.4	77.1	*	78.2	76.0	ns	80.6	78.0	ns
Other family member	59.2	65.1	ns	57.1	58.3	ns	52.6	60.8	**	54.8	50.3	ns	55.6	62.8	**	56.0	54.4	ns
Mother-in-law	40.1	35.8	ns	47.0	37.2	**	43.4	37.9	ns	42.6	37.0	ns	41.9	36.9	*	44.9	37.1	**
Friend	31.9	35.3	ns	32.0	33.7	ns	33.3	39.8	*	29.8	39.8	**	32.7	37.8	*	30.9	36.7	**
Religious leader	15.7	12.3	ns	12.1	13.8	ns	17.5	13.3	ns	10.7	14.6	ns	16.7	12.9	*	11.4	14.2	ns
Health worker	42.4	47.8	ns	29.4	50.7	***	41.1	43.8	ns	37.3	48.8	***	41.7	45.6	ns	33.2	49.8	***
Teacher	0.5	0.7	ns	0.0	0.0	na	1.1	1.1	ns	0.2	0.0	ns	0.8	0.9	ns	0.1	0.0	ns
Co-worker	2.1	1.6	ns	1.0	0.8	ns	2.1	1.7	ns	0.9	0.9	ns	2.1	1.7	ns	0.9	0.8	ns
Neighbor	22.6	23.0	ns	17.7	19.3	ns	21.9	18.7	ns	8.6	14.6	**	22.2	20.6	ns	13.2	17.0	*
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.28 Percentage of FTMs age 15-24 who believe specific named referents approve of them exclusively breastfeeding their baby, by age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Referent	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
Mother	73.7	79.4	ns	64.4	78.9	***	74.3	79.2	ns	65.8	78.9	***	74.0	79.3	*	65.1	78.9	***
Father	74.2	87.5	**	70.7	78.7	ns	72.3	83.4	*	67.7	81.6	**	73.2	85.3	***	69.2	80.2	**
Husband/Partner	75.6	83.6	*	65.5	80.3	***	78.8	81.9	ns	68.1	85.5	***	77.4	82.6	*	66.9	83.1	***
Sister	68.5	78.9	**	62.2	76.6	***	71.3	78.3	*	66.5	77.2	**	70.0	78.6	***	64.4	76.9	***
Other family member	65.8	72.0	ns	58.3	77.1	***	69.9	70.5	ns	57.0	73.2	***	67.9	71.2	ns	57.7	75.3	***
Mother-in-law	68.8	71.3	ns	61.1	72.4	*	71.1	75.9	ns	61.8	71.7	*	70.0	73.9	ns	61.4	72.0	**
Friend	62.1	71.0	ns	53.2	73.2	***	58.9	66.0	ns	50.4	72.0	***	60.3	68.1	*	51.9	72.6	***
Religious leader	71.0	66.7	ns	59.3	80.6	**	78.3	80.0	ns	50.0	77.9	**	75.2	74.2	ns	55.0	79.3	***
Health worker	90.3	97.1	**	86.0	98.0	***	91.2	97.8	**	87.4	98.7	***	90.8	97.5	***	86.8	98.3	***
Neighbor	57.6	69.3	ns	45.3	58.5	ns	62.6	62.2	ns	37.5	69.1	**	60.3	65.8	ns	42.9	63.0	**
N	**439**			**497**			**525**			**467**			**964**			**954**		

Note: As FTMs were requested to name five referents, cell sizes for the calculation of perceived approval rates vary by referent, age group, survey round, and study arm.
*** p < .001; ** p< .01; * p< .05
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Age group-disaggregated patterns reveal that health workers were consistently reported as having the highest approval rate for exclusive breastfeeding and neighbors, the lowest. Mothers were consistently rated as having lower approval rates than fathers and husband/male partners in the endline survey, except among FTMs age 15-19 in intervention HZs, who reported their mothers and fathers as having similar approval rates for exclusive breastfeeding. In intervention HZs, perceived approval rates for exclusive breastfeeding increased for all referents, regardless of the age group of the FTM, the exceptions being father and neighbor among younger FTMs.

Table 4.31 shows the percentage of FTMs age 15-24 who reported that they were motivated to comply with specific referents for breastfeeding decisions by age group, survey round, and health zone. At endline, FTMs age 15-24 in both HZs were most likely to name health workers as the referent they would comply with on breastfeeding decisions, followed by their mothers, husband/partner, and sister. Health workers, mothers, male partners, and sisters were only differentiated by a few percentage points and all were over 80%, even when data were disaggregated by age group. In both HZs, co-workers and the community were the referents that FTMs age 15-24 were least motivated to comply with on breastfeeding decisions, regardless of HZ. In the age group 15-19, no significant changes in motivation-to-comply rates were detected in comparison HZs for referents who were friends or religious leaders but, in intervention HZs, there were significant increases in FTMs' motivation to comply with these referents for breastfeeding decisions. In the 20-24 age group, significant increases in motivation-to-comply rates were detected for six referents in comparison HZs but not in intervention HZs: mother, father, sister, other family members, mother-in-law, and friend.

Table 4.32 shows the percentage of FTMs age 15-24 who believed at least half of FTMs in their community practiced exclusive breastfeeding. At endline, one in four FTMs age 15-24 believed that at least half of FTMs in the community practiced exclusive breastfeeding. Similar perceived prevalence levels and magnitudes of change were observed among older and younger FTMs and in most sociodemographic subgroups, regardless of study arm. Changes in the perceived prevalence of exclusive breastfeeding among FTMs in the community were not statistically significant among more educated FTMs age 15-19 regardless of HZ and among FTMs with less educated parents in both age groups and study arms.

Table 4.33 shows the perceived prevalence of exclusive breastfeeding among other women who were important to the FTMs. At endline, 36% of FTMs age 15-24 believed that that at least half of women important to them had practiced exclusive breastfeeding, which suggested a higher perceived prevalence of exclusive breastfeeding among women who were important to them than among other FTMs in the community. In the overall sample and in each age group, there was a statistically significant increase in the perceived prevalence of exclusive breastfeeding among women who were important to the FTM, regardless of study arm. For example, among FTMs age 15-19, the perceived prevalence increased from 26% to 35% in comparison HZs and from 25% to 36% in intervention HZs. Regardless of HZ, changes in perceived prevalence among FTMs age 15-19 were not statistically significant for the following sociodemographic subgroups: more educated FTMs, those who were never married, those living in the wealthiest households, those who were employed, and those with less educated parents. Among FTMs age 20-24, statistically significant increases in the perceived prevalence of exclusive breastfeeding among women important to the FTM were detected in the following subgroups in both comparison and intervention HZs: those who were less educated, ever married, and with more educated parents. For the remaining sociodemographic groups, HZ-specific changes were observed.

Table 4.29 Percentage of FTMs of age 15-24 who are motivated to comply with specific referents for breastfeeding decisions, by age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Referent	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
Mother	81.8	88.4	**	86.2	86.2	ns	74.1	83.0	***	86.7	82.4	ns	77.6	85.5	***	86.5	84.4	ns
Father	58.1	73.8	***	64.5	70.4	*	54.1	73.0	***	63.2	67.2	ns	55.9	73.3	***	63.8	68.9	*
Husband/Partner	74.3	82.9	**	77.2	81.5	ns	77.1	86.5	***	80.7	86.5	*	75.8	84.9	***	78.9	84.0	**
Sister	69.5	85.0	***	79.7	81.7	ns	63.8	84.6	***	79.4	80.3	ns	66.4	84.8	***	79.6	81.0	ns
Other family members	61.7	76.1	***	57.5	69.2	***	53.5	69.7	***	55.9	60.6	ns	57.3	72.6	***	56.7	65.0	***
Mother-in-law	61.3	71.1	**	69.6	69.6	ns	61.7	71.4	***	69.6	69.4	ns	61.5	71.3	***	69.6	69.5	ns
Friends	44.0	53.1	ns	35.5	45.4	**	40.4	50.7	***	32.5	48.6	ns	42.0	51.8	***	34.1	47.0	***
Religious leader	62.6	65.4	ns	49.1	62.6	***	58.1	63.4	ns	42.6	58.0	***	60.2	64.3	ns	45.9	60.4	***
Health worker	81.3	88.6	**	85.2	87.1	ns	73.5	87.2	***	83.3	88.2	***	77.1	87.9	***	84.3	87.6	*
Teacher	32.3	42.4	**	18.9	31.0	***	28.4	39.4	***	18.8	35.8	*	30.2	40.8	***	18.9	33.3	***
Co-worker	26.9	36.4	**	17.5	26.9	***	24.4	33.7	***	16.9	29.6	***	25.5	35.0	***	17.2	28.2	***
Neighbor	39.4	47.8	*	30.0	37.8	**	39.8	40.8	ns	24.0	36.8	***	39.6	44.0	ns	27.0	37.3	***
Community	28.7	36.2	*	19.7	27.3	**	27.4	30.3	ns	17.6	29.8	***	28.0	33.0	*	18.7	28.5	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.30 Percentage of FTMs age 15-24 who believes at least half of FTMs in the community practice exclusive breastfeeding, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	16.4	27.3	***	15.3	26.7	***	15.7	26.5	*	19.0	31.2	**	16.2	27.0	***	16.5	28.2	***
Secondary complete/higher	17.8	26.0	ns	16.8	23.8	ns	16.5	24.1	*	12.9	23.4	**	16.7	24.5	**	14.0	23.5	***
Never married at baseline																		
No	16.1	25.1	*	14.0	24.5	***	16.7	24.3	**	13.5	23.9	***	16.5	24.6	***	13.7	24.2	***
Yes	17.4	29.9	**	18.5	28.9	*	14.2	27.4	*	21.6	35.1	*	16.2	29.0	***	19.7	31.3	**
Household wealth																		
Low	16.1	26.5	*	15.3	29.7	***	14.9	30.6	**	13.6	23.4	*	15.6	28.4	***	14.6	27.0	***
Medium	14.9	25.7	*	16.3	20.3	ns	13.9	22.2	*	14.0	28.0	**	14.3	23.8	**	15.2	23.9	**
High	19.1	29.4	*	15.0	28.3	*	19.0	23.7	ns	18.4	28.2	*	19.0	25.9	*	17.0	28.3	**
Worked last year																		
No	16.7	26.9	**	17.2	28.4	***	14.9	25.3	**	17.8	27.5	**	15.8	26.1	***	17.5	28.0	***
Yes	16.5	27.8	*	12.2	21.2	*	17.8	24.6	ns	12.0	25.1	**	17.4	25.6	**	12.1	23.3	***
Watched TV at least once a week																		
No	13.7	31.5	***	16.7	30.3	**	10.2	27.8	***	18.0	28.0	*	11.8	29.6	***	17.3	29.2	***
Yes	18.5	24.4	ns	14.9	23.2	*	19.5	23.4	ns	14.1	25.8	***	19.0	23.8	*	14.5	24.5	***
Both parents have secondary/higher education																		
No	16.3	27.6	ns	18.4	18.4	ns	14.0	25.0	ns	15.0	25.2	ns	15.2	26.3	**	16.5	22.2	ns
Yes	16.7	27.0	**	15.0	27.8	***	16.7	24.9	**	15.6	26.9	***	16.7	25.8	***	15.3	27.4	***
Total	16.6	27.1	***	15.6	26.1	***	16.2	25.0	***	15.4	26.6	***	16.4	25.9	***	15.5	26.3	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.31 Percentage of FTMs age 15-24 who believe at least half of women important to her have practiced exclusive breastfeeding, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	26.5	34.2	*	23.3	36.0	***	25.4	35.1	*	28.6	39.7	*	26.1	34.5	**	25.0	37.2	***
Secondary complete/higher	26.0	38.4	ns	29.7	33.7	ns	29.1	36.8	*	28.1	34.9	ns	28.6	37.0	**	28.5	34.6	ns
Never married																		
No	25.9	33.7	ns	21.0	34.7	***	26.0	35.7	**	27.2	34.6	*	25.9	34.9	***	24.3	34.6	***
Yes	27.2	36.4	ns	31.2	37.0	ns	34.5	38.1	ns	31.5	44.1	ns	30.0	37.0	ns	31.3	39.8	*
Household wealth																		
Low	23.9	34.2	*	21.3	33.2	**	27.6	38.1	ns	22.1	35.1	*	25.6	36.0	**	21.6	34.0	***
Medium	27.7	36.5	ns	24.4	35.5	*	27.2	30.6	ns	26.0	36.7	*	27.4	33.2	ns	25.2	36.0	**
High	27.9	33.8	ns	31.0	39.8	ns	28.4	39.8	*	36.2	38.7	ns	28.2	37.5	**	34.1	39.1	ns
Worked last year																		
No	25.6	35.2	**	26.0	38.4	***	25.6	33.9	*	29.7	35.5	ns	25.6	34.6	***	27.7	37.1	***
Yes	28.7	33.9	ns	21.8	29.5	ns	30.5	39.0	ns	26.2	38.7	**	29.9	37.3	*	24.2	34.6	**
Watched TV at least once a week																		
No	19.0	36.9	***	24.7	37.4	**	19.3	38.5	***	29.8	39.8	ns	19.2	37.7	***	27.0	38.4	**
Yes	31.0	33.6	ns	24.6	34.3	*	32.5	34.9	ns	27.5	35.3	*	31.9	34.3	ns	26.1	34.8	**
Both parents have secondary/higher education																		
No	23.5	33.7	ns	27.6	28.7	ns	23.0	39.0	*	28.0	31.8	ns	23.2	36.4	**	27.8	30.4	ns
Yes	27.3	35.2	*	24.0	37.0	***	28.9	35.5	*	28.3	38.3	**	28.2	35.4	**	26.1	37.6	***
Total	26.4	34.9	**	24.6	35.5	***	27.8	36.2	**	28.3	36.8	**	27.2	35.6	***	26.4	36.2	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Normative expectations about exclusive breastfeeding are shown in Table 4.34. At endline, 39% of FTMs age 15-24 in comparison HZs and 46% of their counterparts in intervention HZs strongly agreed that most people important to them thought that they should practice exclusive breastfeeding. We recognize that endline estimates may reflect FTMs' perceptions as well as their actual experiences. Overall, significant increases in normative expectations about exclusive breastfeeding occurred in the overall sample and among younger and older FTMs, regardless of study arm. For example, in intervention HZs, normative expectations about exclusive breastfeeding increased from 29% to 47% among FTMs age 15-19, from 37% to 45% among those age 20-24, and from 33% to 46% among those age 15-24. Among FTMs age 15-24 in intervention HZs, statistically significant increases in normative expectations about exclusive breastfeeding were detected in each sociodemographic subgroup except those with less educated parents. Among all FTMs interviewed in comparison HZs, changes in normative expectations were not statistically significant among those who were never married, those who worked last year, and those with weekly TV exposure.

In the 15-19 age group, there were more sociodemographic groups with significant increases in normative expectations about exclusive breastfeeding in intervention HZs than in comparison HZs; however, in the 20-24 age group, the reverse was observed. When the data were disaggregated by age group, there were only three sociodemographic subgroups in which at least half of FTMs strongly agreed that most people important to them thought that they should practice exclusive breastfeeding and they were all found in the intervention HZs. These subgroups consisted of FTMs age 15-19 who were never married, their same-age counterparts living in medium-wealth households, and FTMs age 20-24 with secondary complete/higher education.

4.4 Delivery and Postpartum Care

4.4.1 Facility delivery

Table 4.35 shows the percentage of FTMs age 15-24 who delivered in a health facility by sociodemographic characteristic, age group, and health zone. Health facility included both public and private health facilities. At endline, the institutional delivery rate was 98% in comparison HZs and 97% in intervention HZs, and remained over 93% when the data were disaggregated by age group and sociodemographic characteristics. For FTMs age 15-19, there were no statistically significant differences in institutional delivery by HZ except among ever married women (99% in comparison HZs and 96% in intervention HZs). For FTMs age 20-24, those who were ever married, those who worked last year, those who did not watch TV at least once per week, and those with less educated parents had significantly lower institutional delivery rates in intervention HZs than in comparison HZs. For example, the institutional delivery rate among employed FTMs age 20-24 was 99% in comparison HZs and 95% in intervention HZs.

Table 4.32 Percentage of FTMs age 15-24 who strongly agree most people important to them think they ought to practice exclusive breastfeeding, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	29.0	37.2	*	29.5	47.2	***	28.1	42.7	**	39.7	37.0	ns	28.7	39.0	***	32.9	43.8	***
Secondary complete/higher	31.5	45.2	ns	27.7	47.5	**	30.0	37.6	*	35.6	50.0	***	30.3	39.0	**	33.5	49.3	***
Never married																		
No	24.3	38.4	***	27.1	43.6	***	29.9	40.8	**	35.7	43.8	*	27.7	39.9	***	31.6	43.7	***
Yes	36.4	38.6	ns	32.9	53.8	***	27.4	34.5	ns	42.3	47.7	ns	33.0	37.0	ns	36.6	51.4	***
Household wealth																		
Low	24.5	35.5	*	31.2	47.0	**	28.4	38.1	ns	38.3	43.5	ns	26.3	36.7	**	34.3	45.5	**
Medium	31.8	39.2	ns	30.2	51.2	***	28.9	39.4	*	33.3	45.3	*	30.2	39.3	*	31.7	48.4	***
High	32.4	41.2	ns	23.9	41.6	**	30.3	40.3	*	39.9	45.4	ns	31.1	40.6	**	33.3	43.8	*
Worked last year																		
No	29.9	39.5	*	31.4	47.1	***	26.3	40.1	***	40.9	45.7	ns	28.2	39.8	***	35.7	46.5	***
Yes	27.8	35.7	ns	24.4	47.4	***	33.1	38.6	ns	31.9	43.5	*	31.3	37.6	ns	28.5	45.2	***
Watched TV at least once a week																		
No	22.6	39.9	***	29.8	49.0	***	27.3	44.4	***	43.5	43.5	ns	25.1	42.3	***	35.9	46.5	**
Yes	33.6	37.6	ns	28.7	46.0	***	30.5	36.7	ns	34.0	45.4	***	31.9	37.1	ns	31.4	45.7	***
Both parents have secondary/higher education																		
No	25.5	40.8	*	33.3	46.0	ns	31.0	47.0	*	43.9	41.1	ns	28.3	43.9	**	39.2	43.3	ns
Yes	30.5	37.8	*	28.2	47.5	***	28.9	37.6	**	35.3	45.8	**	29.6	37.7	***	31.6	46.7	***
Total	29.4	38.5	**	29.2	47.2	***	29.3	39.4	**	37.3	44.8	***	29.4	39.0	***	33.1	46.0	***
N	**439**			**497**			**525**			**467**			**964**			**954**		

*** p < .001; ** p< .01; * p< .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 4.33 Percentage of FTMs age 15-24 who delivered at a health facility, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	98.1	96.5	ns	98.3	94.5	ns	98.1	95.8	*
Secondary complete/higher	98.6	99.0	ns	98.8	97.0	ns	98.7	97.5	ns
Never married									
No	98.8	96.0	*	99.2	95.3	***	99.1	95.6	***
Yes	97.2	98.8	ns	96.3	98.1	ns	96.9	98.5	ns
Household wealth									
Low	98.7	95.2	ns	97.7	93.8	ns	98.2	94.6	*
Medium	97.2	97.6	ns	98.8	97.9	ns	98.1	97.8	ns
High	98.5	99.1	ns	99.0	96.1	ns	98.8	97.3	ns
Worked last year									
No	98.8	97.1	ns	98.2	96.6	ns	98.5	96.9	ns
Yes	96.4	96.7	ns	99.1	95.0	*	98.2	95.8	ns
Watched TV at least once a week									
No	98.2	97.3	ns	98.4	93.4	*	98.3	95.5	*
Yes	98.1	96.8	ns	98.8	97.3	ns	98.5	97.0	ns
Both parents have secondary/higher education									
No	97.9	95.2	ns	98.9	93.1	*	98.4	94.0	*
Yes	98.2	97.4	ns	98.5	96.8	ns	98.4	97.1	ns
Total	98.1	97.0	ns	98.6	96.0	*	98.4	96.5	**
N	**432**	**464**		**505**	**447**		**937**	**911**	

*** p < .001; ** p< .01; * p< .05
Source: MOMENTUM 2020 Endline Survey

4.4.2 Postpartum care

As Table 4.36 shows, 94% of FTMs age 15-24 in comparison HZs and 91% of their counterparts in intervention HZs received postpartum care within two days of delivery. For each demographic subgroup, the percentage of FTMs age 15-24 who had a postpartum check within 2 days of delivery was lower in the intervention HZs than in the comparison HZs. Most HZ differences within sociodemographic subgroups were not statistically significant. However, among FTMs age 15-24, there were statistically significant HZ difference among those who were ever married, worked last year, watched TV at least once a week, and had two parents who completed secondary school. Among FTMs age 15-19, receipt of postpartum care within two days of delivery was below 90% for several sociodemographic subgroups in intervention HZs, but for only one of these subgroups – those with weekly TV exposure -- was timely receipt of postpartum care significantly lower than in the comparison HZs (88% versus 95%). In general, among sociodemographic subgroups of FTMs age 20-24, timely receipt of postpartum care was lower in the intervention HZs than in the comparison HZs (except among those who were never married), but none of the HZ difference were statistically significant.

In Table 4.37, we examined timely receipt of postnatal care for newborns. In both comparison and intervention HZs, 95% of FTMs age 15-24 reported that their newborn had a check within two days of delivery, by demographic characteristic, age group, and health zone. Similar prevalence levels and HZ differences were noted among younger and older FTMs and none of the HZ differences by age group and sociodemographic characteristics were statistically significant, with one exception: FTMs age 15-19 who did not watch TV at least once a week. Among the latter group of FTMs, the prevalence of timely initiation of postnatal care for the newborn was 92% in comparison HZs and 97% in intervention HZs.

Table 4.38 shows the percentage of FTMs age 15-24s who sought treatment at a health facility when experiencing postpartum complications by demographic characteristics, age group, and health zone. In both HZs, over 97% of FTMs age 15-24 reported seeking treatment at a health facility when experiencing postpartum complications and there were no significant differences between the HZs, including within the sociodemographic subgroups. Similarly, for both older and younger FTMs, there were no differences between HZs, including within sociodemographic subgroups. In the intervention HZs, all FTMs age 20-24 with postpartum complications reported seeking treatment at a health facility.

Table 4.34 Percentage FTMs age 15-24 who received postpartum care within 2 days of delivery, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	93.3	90.6	ns	94.0	91.0	ns	93.5	90.7	ns
Secondary complete/higher	87.5	86.0	ns	95.5	94.1	ns	94.1	91.9	ns
Never married									
No	92.5	89.0	ns	95.6	92.3	ns	94.4	90.8	*
Yes	92.2	90.6	ns	92.7	94.5	ns	92.4	92.1	ns
Household wealth									
Low	92.2	86.5	ns	93.9	91.0	ns	93.0	88.4	ns
Medium	93.1	90.4	ns	95.5	93.2	ns	94.4	91.7	ns
High	91.8	93.8	ns	95.2	94.3	ns	93.9	94.1	ns
Worked last year									
No	92.8	92.2	ns	95.1	93.2	ns	93.9	92.7	ns
Yes	91.0	84.1	ns	94.9	92.3	ns	93.6	88.6	*
Watched TV at least once a week									
No	88.5	92.7	ns	94.6	91.3	ns	91.7	92.1	ns
Yes	94.7	87.5	**	95.2	93.6	ns	95.0	90.6	**
Both parents have secondary/higher education									
No	90.6	89.0	ns	94.9	91.9	ns	92.8	90.6	ns
Yes	92.8	89.7	ns	95.0	93.1	ns	94.0	91.3	*
Total	92.3	89.6	ns	95.0	92.9	ns	93.8	91.2	*
N	**431**	**472**		**518**	**448**		**949**	**920**	

*** p < .001; ** p< .01; * p< .05; ns Not Significant
Source: MOMENTUM 2020 Endline Survey

Table 4.35 Percentage FTMs age 15-24 who report that their newborn had a check within 2 days of delivery, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	94.3	94.4	ns	93.1	94.2	ns	93.9	94.3	ns
Secondary complete/higher	95.8	96.8	ns	96.0	94.5	ns	95.9	95.2	ns
Never married									
No	92.8	93.4	ns	96.4	94.2	ns	95.0	93.8	ns
Yes	97.1	97.5	ns	89.4	95.1	ns	94.3	96.6	ns
Household wealth									
Low	94.1	93.9	ns	94.5	95.6	ns	94.3	94.6	ns
Medium	94.2	94.4	ns	94.7	92.3	ns	94.5	93.4	ns
High	95.5	97.2	ns	95.5	95.3	ns	95.5	96.1	ns
Worked last year									
No	94.0	95.1	ns	94.5	94.6	ns	94.2	94.8	ns
Yes	96.3	94.5	ns	95.6	94.2	ns	95.8	94.3	ns
Watched TV at least once a week									
No	92.0	97.2	*	92.2	93.7	ns	92.1	95.7	ns
Yes	96.2	93.3	ns	96.5	94.8	ns	96.4	94.1	ns
Both parents have secondary/higher education									
No	94.6	93.7	ns	92.6	93.6	ns	93.6	93.6	ns
Yes	94.6	95.1	ns	95.5	94.6	ns	95.1	94.9	ns
Total	94.6	94.9	ns	95.0	94.4	ns	94.8	94.7	ns
N	**424**	**450**		**498**	**429**		**922**	**879**	

*** p < .001; ** p< .01; * p< .05
Source: MOMENTUM 2020 Endline Survey

Table 4.36 Percentage of FTMs age 15-24 who sought treatment at a health facility when experiencing postpartum complications, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	95.5	96.8	ns	100.0	100.0	ns	96.9	97.8	ns
Secondary complete/higher	95.0	100.0	ns	98.6	100.0	ns	97.9	100.0	ns
Never married									
No	94.2	95.6	ns	98.9	100.0	ns	97.2	98.3	ns
Yes	97.1	100.0	ns	100.0	100.0	ns	98.0	100.0	ns
Household wealth									
Low	96.7	100.0	ns	100.0	100.0	ns	98.2	100.0	ns
Medium	89.3	92.0	ns	97.7	100.0	ns	94.4	96.1	ns
High	100.0	100.0	ns	100.0	100.0	ns	100.0	100.0	ns
Worked last year									
No	96.8	98.0	ns	98.2	100.0	ns	97.5	99.0	ns
Yes	91.3	95.8	ns	100.0	100.0	ns	97.3	98.4	ns
Watched TV at least once a week									
No	100.0	96.4	ns	100.0	100.0	ns	100.0	98.3	ns
Yes	92.9	97.9	ns	98.6	100.0	ns	96.0	99.0	ns
Both parents have secondary/higher education									
No	86.7	90.0	ns	100.0	100.0	ns	94.3	96.9	ns
Yes	97.2	98.5	ns	98.8	100.0	ns	98.1	99.2	ns
Total	95.3	97.3	ns	99.1	100.0	ns	97.4	98.8	ns
N	**86**	**75**		**106**	**87**		**192**	**162**	

*** p < .001; ** p< .01; * p< .05
Source: MOMENTUM 2020 Endline Survey

5 FERTILITY PREFERENCES

Francine Wood

Key findings:

- **Desire for another child**: Over seven in ten FTMs age 15-24 wanted to wait at least two years before having their next child, regardless of age group and study arm. The change in the percentage who wanted to wait two years to have more children was significant in the comparison HZs but not in the intervention HZs, and both were not in the expected direction. There was a five percentage point decrease in the comparison HZs (from 78% at baseline to 73% at endline) compared to a three percentage point decrease in the intervention HZs (from 80% to 77%). The desire to wait for at least two years before another child is higher among older FTMs compared to younger FTMs.
- **Ideal number of children**: FTMs age 15-24 would prefer to have on average 4 children if they could, regardless of study arm. There were slight increases in ideal family size over time and these changes were significant in both study arms. Older FTMs wanted more children than their younger counterparts.
- **Discussion of family size with partner**: Over half of FTMs age 15-24 had discussed the number of children they would like to have with their husband/male partner. In the comparison HZs, about 58% of FTMs had discussions at baseline and endline while in the intervention HZs, 55% of FTMs had discussions at baseline and 56% at endline. More FTMs age 20-24 had these discussions with their husband/male partner compared to their younger counterparts.
- **Agreement on family size with partner**: Among FTMs with a husband/partner, about a third of wanted the same number of children, about one in five wanted more children and between 11% and 14% wanted fewer children than their husband/male partner in the comparison and intervention HZs, irrespective of survey round. Among FTMs age 15-24, the percentage who wanted the same number of children increased over time in both the comparison and intervention HZs, but the changes were not statistically significant. When disaggregated by age, a similar pattern was observed.

Individuals' fertility preferences can indicate their demand for children and, in turn, their demand for contraception. Thus, understanding an FTM's fertility preferences can help family planning programs assess the desire for children, the extent of mistimed and unwanted pregnancies, and the demand for contraception to space or limit birth. This ultimately provides programs with an understanding of the demand for fertility control (Feyisetan & Casterline, 2000). This chapter presents information on whether and when FTMs age 15-24 wanted more children, ideal family size, and discussions of the number of children with the male partner.

5.1 Desire for Another Child

During the baseline and endline surveys, FTMs were asked whether or not they wanted more children and if so, how long they would prefer to wait before the birth of the next child. Table 5.1 presents the percent distribution of the wait period before another pregnancy for FTMs age 15-24, by age group, survey round and study arm. Over seven in ten FTMs wanted to wait at least two years before having their next child, regardless of age group or study arm.

Table 5.1 Percent distribution of FTMs age 15-24 by the desire for another child, according to age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig,	T1	T2	Sig.
Desire for another child			**			ns			***			***			***			**
Within two years	1.1	1.9		2.5	2.8		2.7	9.0		0.9	6.5		2.0	5.8		1.7	4.6	
Wait at least two years	70.4	71.5		74.5	74.0		83.4	73.5		86.5	81.3		77.5	72.6		80.4	77.5	
After marriage	14.1	19.4		12.9	16.6		7.6	14.3		7.5	8.0		10.6	16.6		10.3	12.4	
Other	2.3	0.7		1.0	0.6		1.0	0.2		0.6	0.4		1.6	0.4		0.8	0.5	
Don't know/Undecided	12.1	6.5		9.0	6.0		5.3	2.9		4.5	3.8		8.4	4.5		6.8	4.9	
Total	100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0	
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns – not significant
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

In the comparison HZs, about 78% of FTMs age 15-24 wanted to wait at least two years and by the endline 73% of FTMs wanted to wait at least two years. In the intervention HZs, a slightly higher percentage wanted to wait at least two years but this percentage declined over time (baseline: 80%; endline: 76%). This pattern was also observed in the younger and older age groups, regardless of study arm. It is worth nothing that more of the older FTMs want to wait at least two years before having another child. For example, in the intervention HZs, 81% of FTMs age 20-24 wanted to wait at least two years at the endline survey compared to 74% of FTMs age 15-19.

Table 5.2 shows that the change over time among FTMs age 15-24 who wanted to wait two years to have more children was significant in the comparison HZs but not the intervention HZs. The changes were not in the expected direction. There was a five percentage point decrease in the comparison HZs (78% to 73%) compared to a three percentage point decrease in the intervention HZs (80% to 77%). For the sociodemographic subgroups in the intervention HZs, significant changes over time were observed for those who had been married and those with a secondary or higher education, but not for the other subgroups. In the comparison HZs, there were significant declines among FTMs who had a secondary complete/higher education, had been married, had high household wealth, and had worked last year.

Among FTMs age 15-19, the percentage who wanted to wait at least two years before the birth of the next child remained mostly unchanged between the baseline survey and the endline survey. Similarly, none of the changes in the sociodemographic subgroups in the comparison HZs were significant and, in the intervention HZ, a statistically significant change was only seen among those who had complete secondary/higher education. For FTMs age 20-24, the decline over time was statistically significant in both study arms and the absolute change was greater in the comparison HZs than the intervention HZs (10 percentage points versus five percentage points). Significant changes were seen for all sociodemographic subgroups in the comparison HZs except for FTMs with less education, low household wealth, and medium household wealth. In the intervention HZs, significant changes were seen among FTMs with secondary complete/higher education, who had been married, had low household wealth, had worked in the last year, and had two parents with secondary/higher education.

5.2 Ideal Family Size

To measure ideal family size, FTMs were asked how many children they would like to have if they could choose the number of children to have in their whole life. The findings presented in Table 5.3 indicate that, regardless of study arm, FTMs age 15-24 would prefer to have on average 4 children if they could. In both study arms, there were slight increases in ideal family size over time and these changes were significant. FTMs' ideal family size in the comparison HZs increased from 4.0 children at baseline to 4.2 children at endline and in the intervention HZs, it increased by 0.1 points from 4.0 children to 4.1 children. There were significant changes in ideal family size for three of the sociodemographic subgroups in the intervention HZs: FTMs who had been married, those who were unemployed last year, and those who had not watched TV at least once a week. Conversely, in the comparison HZs many of the inter-survey changes in ideal family size within sociodemographic subgroups were significant, except among FTMs who had secondary complete/higher education, had been married, had low household wealth, had worked last year, did not watched TV at least once a week, and did not have two parents with secondary/higher education. Interestingly, at endline, FTMs who wanted the most children were those in the comparison HZs with less educated parents (average of 4.25 children) and those in the intervention HZs who lived in the poorest households (average of 4.23 children).

Among FTMs age 15-19, there was a significant increase in ideal family size in the comparison HZs but not in the intervention HZs (by 0.3 points versus 0.1 points). The changes over time in the sociodemographic

subgroups of young FTMs were significant for those who did not watch TV at least once a week in the intervention HZs; in the comparison HZs, all but three sociodemographic subgroups had significant changes.

Table 5.2 Percentage of FTMs age 15-24 who want to wait more than 2 years before another pregnancy, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig,**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete.	67.8	71.0	ns	72.3	74.7	ns	82.7	76.3	ns	85.7	82.9	ns	72.8	72.8	ns	76.7	77.4	ns
Secondary complete/higher	83.6	74.0	ns	83.2	71.4	*	83.8	72.0	***	87.1	80.1	*	83.8	72.3	***	86.0	77.8	**
Never married																		
No	74.5	73.1	ns	78.0	75.6	ns	83.7	74.3	***	89.9	83.1	**	80.2	73.8	**	84.3	79.6	*
Yes	64.7	69.3	ns	68.2	71.1	ns	82.3	70.6	*	75.7	75.2	ns	71.4	69.8	ns	71.1	72.7	ns
Household wealth																		
Low	73.5	72.6	ns	75.2	75.6	ns	82.8	74.2	ns	89.6	78.8	*	77.9	73.4	ns	81.5	77.0	ns
Medium	70.9	73.6	ns	76.2	76.8	ns	83.3	76.4	ns	82.7	84.9	ns	77.7	75.2	ns	79.2	80.6	ns
High	66.2	68.2	ns	70.8	66.3	ns	83.9	70.5	**	87.1	80.1	ns	76.9	69.6	*	80.4	74.6	ns
Worked last year																		
No	70.4	70.6	ns	74.9	74.3	ns	81.7	73.9	*	84.4	83.0	ns	75.7	72.2	ns	79.2	78.2	ns
Yes	70.4	74.3	ns	73.7	73.3	ns	85.6	72.9	***	89.5	78.8	*	80.6	73.4	*	82.4	76.3	ns
Watched TV at least once a week																		
No	67.9	68.3	ns	76.3	80.0	ns	80.2	69.5	*	86.3	82.2	ns	74.4	68.9	ns	80.8	81.0	ns
Yes	72.0	73.6	ns	73.4	69.7	ns	85.2	75.6	**	86.6	80.7	ns	79.3	74.7	ns	80.2	75.4	ns
Both parents have secondary/higher education																		
No	64.3	61.2	ns	78.2	73.8	ns	84.0	72.2	*	84.1	80.4	ns	74.2	66.7	ns	81.4	77.4	ns
Yes	72.1	74.7	ns	73.8	74.0	ns	83.3	73.8	***	87.2	81.5	*	78.3	74.2	ns	80.1	77.6	ns
Total	70.4	71.5	ns	74.5	74.0	ns	83.4	73.5	***	86.5	81.2	*	77.5	72.6	*	80.4	77.5	ns
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns – not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 5.3 Mean ideal family size (number of children) of FTMs age 15-24, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete.	3.74	4.10	***	3.85	4.02	ns	4.07	4.23	ns	4.08	4.18	ns	3.85	4.14	**	3.92	4.07	ns
Secondary complete/higher	3.90	4.14	ns	4.10	4.06	ns	4.11	4.16	ns	4.11	4.27	ns	4.08	4.16	ns	4.11	4.21	ns
Never married																		
No	3.87	4.13	ns	3.98	4.09	ns	4.14	4.21	ns	4.08	4.27	ns	4.04	4.18	ns	4.03	4.19	*
Yes	3.62	4.08	***	3.76	3.91	ns	3.96	4.09	ns	4.16	4.13	ns	3.75	4.08	**	3.92	3.99	ns
Household wealth																		
Low	3.93	4.15	ns	3.93	4.04	ns	4.02	4.09	ns	4.18	4.48	ns	3.97	4.12	ns	4.04	4.23	ns
Medium	3.73	4.14	**	3.88	4.10	ns	4.16	4.22	ns	4.12	4.14	ns	3.97	4.18	*	3.99	4.12	ns
High	3.61	4.03	**	3.88	3.89	ns	4.10	4.21	ns	4.00	4.09	ns	3.90	4.14	*	3.95	4.01	ns
Worked last year																		
No	3.77	4.11	**	3.92	4.12	ns	4.11	4.20	ns	4.03	4.19	ns	3.93	4.15	**	3.97	4.15	*
Yes	3.75	4.11	*	3.86	3.84	ns	4.09	4.17	ns	4.21	4.30	ns	3.98	4.15	ns	4.05	4.09	ns
Watched TV at least once a week																		
No	3.82	4.18	*	3.83	4.10	*	4.11	4.19	ns	4.06	4.37	ns	3.97	4.18	ns	3.93	4.22	**
Yes	3.73	4.07	**	3.95	3.98	ns	4.09	4.18	ns	4.12	4.16	ns	3.93	4.13	**	4.04	4.07	ns
Both parents have secondary/higher education																		
No	3.98	4.37	***	3.68	3.86	ns	3.95	4.14	ns	4.01	4.29	ns	3.96	4.25	ns	3.87	4.09	ns
Yes	3.70	4.04	ns	3.95	4.06	ns	4.13	4.19	ns	4.13	4.22	ns	3.94	4.12	**	4.03	4.14	ns
Total	3.76	4.11	***	3.90	4.03	ns	4.10	4.18	ns	4.10	4.24	ns	3.95	4.15	***	4.00	4.13	*
N	**437**			**480**			**521**			**462**			**958**			**942**		

*** p <.001; ** p < .01; * p < .05; ns – not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

For older FTMs, the change over time in ideal family size was not significant in both study arms and significant changes were not observed in the sociodemographic subgroups.

Older FTMs wanted more children compared to the younger FTMs, irrespective of survey round and study arm. FTMs age 15-19 in the comparison HZs wanted more children than those in the intervention HZs at endline (comparison HZs: 4.11 children; intervention HZs: 4.03 children). In the 20-24 age group, FTMs in the intervention HZs wanted more children at endline (comparison HZs: 4.18 children; intervention HZs: 4.23 children). However, in both comparison and intervention HZs, changes over time in mean ideal family sizes not statistically significant in any sociodemographic subgroup.

5.3 Discussions of Family Size with Partner

FTMs were asked if they had discussed the number of children they would like to have with their husband/male partner in the past 12 months, and subsequently those with a romantic partner, were asked if their husband/male partner wanted the same number of children, fewer or more children than she wanted. Table 5.4 shows the percentage distribution of the FTMs who discussed the number of children with their male partner and their agreement on the number of children to have, by age group, survey round and study arm.

Over half of FTMs age 15-24 had discussed the number of children they would like to have with their husband/male partner. In the comparison HZs, about 58% of FTMs had discussions at baseline and endline while in the intervention HZs, 55% of FTMs had discussions at baseline and 56% at endline. The prevalence of partner discussion about family size was higher among older FTMs than younger FTMs, regardless of study arm and survey round. For instance, in the intervention HZs, 63% of FTMs age 20-24 had discussions with their husband/male partner compared to 50% of FTMs age 15-19. Among those with a romantic partner, about a third of FTMs wanted the same number of children, about one in five wanted more children and between 11% and 14% wanted fewer children than their husband/male partner in the comparison and intervention HZs, irrespective of survey round.

Table 5.5 shows the percentage of FTMs age 15-24 who discussed the number of children they wanted with their husband/male partner by baseline characteristics, age group, survey round, and study arm. At endline, more FTMs age 15-24 in the comparison HZs than the intervention HZs had discussed the number of children with their husband/male partner (63% versus 61%). The change observed between surveys was significant in the comparison HZs and slightly greater than the change in the intervention HZs (about five percentage points versus four percentage points). Although not significant, the change was in the expected direction. It was also anticipated that the increase would be greater among those in the intervention HZs. For the sociodemographic subgroups, the only significant changes in the comparison HZs were observed among FTMs with less education and those who watched TV at least once a week while in the intervention HZs, those who had less education, had never been married, had not worked last year, and did not have two parents with secondary education had significant changes over time.

Among FTMs 15-19, the increase over time was larger for those in the comparison HZs than those in the intervention HZs (eight percentage points versus five percentage points) and the change was significant for those in the comparison HZs. Significant differences were observed for FTMs who had less education, had medium household wealth, had not worked last year, and had watched TV at least once a week in the comparison HZs. For FTMs in the intervention HZs, significant differences between surveys were seen only for those with less education. The changes observed over time among the older FTMs were not significant in both study arms and out of all the sociodemographic subgroups, only the those with low household wealth had significant changes over time. The percentage of FTMs age 20-24 with low household wealth in the intervention HZs who discussed the number of children with their husband/male partner increased by 11 percentage points, from 57% to 68%.

Table 5.6 presents the percentage of FTMs age 15-24 with a romantic partner who wanted the same number of children as their husband/male partner by baseline characteristics, age group, survey round, and study arm. Among FTMs age 15-24, the percentage who wanted the same number of children increased over time in both the comparison and intervention HZs but the changes were not statistically significant. When disaggregated by age, a similar trend was observed for the younger and older FTMs. Among both groups, there was an increase in the percentage who wanted the same number of children, but the change over time was not statistically significant. For the 15-19 age group in comparison HZs, the only sociodemographic subgroup with a significant change was FTMs with secondary complete/higher education; there was a 18 percentage point decrease in the percentage who want the same number of children as their husband/partner.

Table 5.4 Percent distribution of FTMs age 15-24 by discussion of desired family size with their male partner and agreement on the number of children desired, according to age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Discussion with male partner	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
Number of children			***			***			***			ns			***			***
No	49.0	38.0		48.0	39.4		33.7	30.3		36.0	32.3		40.7	33.8		42.1	36.0	
Yes	48.5	51.3		48.9	49.7		65.5	64.4		61.2	63.0		57.8	58.4		54.9	56.2	
Has no romantic partner	2.5	10.7		3.1	10.9		0.8	5.3		2.8	4.7		1.6	7.8		2.9	7.9	
Agreement on the number of children [a]			*			ns			ns			ns			ns			*
Same number	30.4	31.9		32.6	36.9		37.6	38.8		37.7	38.4		34.4	35.8		35.1	37.7	
More children	17.3	22.7		18.2	21.9		19.0	20.7		24.7	20.4		18.2	21.6		21.4	21.2	
Fewer children	8.9	11.5		9.7	10.6		16.5	15.7		12.6	18.0		13.1	13.8		11.1	14.3	
Don't know	43.5	33.9		39.4	30.6		26.9	24.7		25.1	23.1		34.4	28.8		32.4	26.8	
Total	100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0	
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns – not significant

a: Pertains only to FTMs with a romantic partner at the time of the interview

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 5.5 Percentage of FTMs age 15-24 who discussed the number of children they would like to have with their male partner, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete.	46.3	56.1	*	45.6	53.1	*	54.9	64.5	ns	56.4	60.5	ns	49.3	59.0	**	49.1	55.6	*
Secondary complete/higher	66.7	63.6	ns	68.3	64.9	ns	72.0	69.8	ns	67.4	69.8	ns	71.0	68.8	ns	67.6	68.5	ns
Never married																		
No	53.8	62.1	ns	55.4	58.1	ns	71.3	71.0	ns	68.8	70.3	ns	64.7	67.7	ns	62.5	64.7	ns
Yes	44.1	50.3	ns	40.6	51.0	ns	46.4	56.7	ns	43.1	52.0	ns	44.9	52.9	ns	41.6	51.4	*
Household wealth																		
Low	51.0	55.5	ns	46.9	49.2	ns	63.4	62.2	ns	57.0	68.2	*	56.7	58.7	ns	51.3	57.8	ns
Medium	46.9	58.9	*	53.9	63.1	ns	61.7	63.2	ns	61.2	64.3	ns	55.1	61.3	ns	57.3	63.7	ns
High	51.5	57.9	ns	51.4	56.0	ns	71.4	75.9	ns	70.3	65.6	ns	63.7	68.9	ns	62.5	61.8	ns
Worked last year																		
No	44.3	54.4	*	46.7	54.2	ns	65.7	63.5	ns	58.7	62.7	ns	54.5	58.8	ns	52.2	58.2	*
Yes	64.9	66.3	ns	58.4	59.0	ns	66.4	73.5	ns	69.2	70.8	ns	65.9	71.3	ns	64.4	65.7	ns
Watched TV at least once a week																		
No	48.1	52.4	ns	48.2	51.1	ns	67.4	65.7	ns	57.2	63.4	ns	58.4	59.7	ns	52.2	56.8	ns
Yes	50.7	60.4	*	52.0	58.9	ns	65.3	69.3	ns	65.9	67.5	ns	58.8	65.4	*	59.2	63.5	ns
Both parents have secondary/higher education																		
No	43.5	50.6	ns	40.5	52.6	ns	57.7	64.9	ns	53.4	63.7	ns	50.8	58.4	ns	47.8	58.9	*
Yes	51.5	59.2	ns	52.4	56.5	ns	67.9	68.8	ns	65.8	66.8	ns	60.7	64.6	ns	58.7	61.5	ns
Total	49.8	57.4	*	50.4	55.8	ns	66.0	68.0	ns	63.0	66.1	ns	58.7	63.3	*	56.6	61.0	ns
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns – not significant
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 5.6 Percentage of FTMs age 15-24 with a romantic partner who want the same number of children as their male partner, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete.	26.7	32.2	ns	29.9	34.1	ns	29.1	33.1	ns	35.9	36.2	ns	27.5	32.5	ns	31.9	34.8	ns
Secondary complete/higher	48.6	30.3	*	42.6	46.4	ns	42.2	41.8	ns	38.8	39.9	ns	43.3	39.8	ns	39.8	41.6	ns
Never married																		
No	34.3	32.3	ns	34.3	36.8	ns	41.6	42.0	ns	39.8	39.1	ns	38.8	38.4	ns	37.2	38.0	ns
Yes	24.9	31.2	ns	29.4	37.1	ns	22.7	26.9	ns	30.4	36.3	ns	24.0	29.5	ns	29.8	36.7	ns
Household wealth																		
Low	29.1	28.5	ns	33.0	35.6	ns	32.8	34.6	ns	34.2	38.5	ns	30.9	31.4	ns	33.5	36.9	ns
Medium	28.0	35.7	ns	34.1	36.9	ns	37.8	35.1	ns	36.1	37.1	ns	33.4	35.3	ns	35.0	37.0	ns
High	34.3	31.7	ns	29.7	39.0	ns	40.5	44.7	ns	42.4	39.6	ns	38.1	39.7	ns	37.2	39.4	ns
Worked last year																		
No	28.3	31.3	ns	28.2	35.3	ns	39.2	36.5	ns	35.7	38.8	ns	33.5	33.8	ns	31.6	36.9	ns
Yes	36.0	33.7	ns	42.3	40.3	ns	35.7	41.7	ns	40.5	37.8	ns	35.8	39.3	ns	41.3	38.9	ns
Watched TV at least once a week																		
No	28.7	29.3	ns	34.0	33.0	ns	35.3	38.8	ns	34.2	35.9	ns	32.3	34.5	ns	34.1	34.3	ns
Yes	31.3	33.5	ns	31.7	39.5	ns	38.9	38.9	ns	39.4	39.7	ns	35.5	36.5	ns	35.7	39.6	ns
Both parents have secondary/higher education																		
No	31.5	34.6	ns	32.9	35.9	ns	27.8	32.0	ns	34.0	40.2	ns	29.6	33.1	ns	33.5	38.3	ns
Yes	30.1	31.2	ns	32.6	37.1	ns	39.9	40.5	ns	38.7	37.9	ns	35.5	36.4	ns	35.5	37.5	ns
Total	30.4	31.9	ns	32.6	36.9	ns	37.6	38.8	ns	37.7	38.4	ns	34.4	35.8		35.1	37.7	ns
N	**428**			**472**			**521**			**454**			**949**			**926**		

*** p <.001; ** p < .01; * p < .05; ns – not significant
Pertains only to FTMs with a romantic partner at the time of the interview
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

6 GENDER RELATIONS

Francine E. Wood

Key findings:

- **Control over cash earnings**: Although most FTMs were sole decision makers for their cash earnings, there was a decline in sole decision making across survey rounds in the control and intervention HZs, about 16 and 15 percentage points, respectively. Contrary to expectations, there was a significant decrease in the participation of FTMs in decision making (sole and joint), and similar changes were observed in both study arms (about seven to eight percentage points). The largest significant decline over time was observed among FTMs age 15-19 in the comparison HZs (21 percentage points).
- **Relative earnings**: There was decline from baseline to endline in the percentage of FTMs who reported earning less than their male partner, and it was greater in the intervention HZs compared to the comparison HZs (eight percentage points versus four percentage points). However, the changes were not statistically significant, regardless of age group and study arm. The changes observed in the sociodemographic subgroups were also not significant.
- **Participation in health decisions**: On average FTMs participated (joint or sole) in six to seven decisions. It was expected that over time, participation in decision making would increase, however it decreased slightly in both study arms. Older FTMs participated in more decisions compared to their younger counterparts, at baseline as well as at endline. Decisions as to when to start seeking ANC and the number of ANC visits were the only two of nine health-related decisions to increase over time for FTMs in the intervention HZs and, for the remaining decisions, there were declines.
- **Parental competency**: Over nine in ten FTMs strongly agreed/agreed with the statement "being a good mother is a reward in itself." FTMs in both study arms had similar parental satisfaction levels; those in the comparison HZs scored 23.2 while those in the intervention HZs scored 23.4. The variation across study arms was not significant. For parental efficacy, FTMs had lower levels compared to parental satisfaction, and the variations in the scores across study arms were not significant. In the comparison HZs, the average parental efficacy score was 22.0 in the comparison HZs and 21.8 in the intervention HZs. When disaggregated by age, older FTMs had higher levels of parental satisfaction and efficacy than younger FTMs in each study arm.
- **Gender equitable attitudes**: Overall, the average GEM score was low at baseline and remained low at endline in both the comparison and intervention HZs. Attitude towards gender roles (equity score) remained about the same over time in the intervention HZs, but increased in the comparison HZs. FTMs' level of agreement with the individual statements used to measure gender-equitable attitudes varied over time. In the total sample, the largest change was observed in the comparison HZs. As expected, FTMs' agreement with the statement "changing diapers, giving a bath, and feeding kids is the mother's responsibility" was significantly reduced, by 17 percentage points (83% to 66%). In the intervention HZs, the largest change was seen in agreement with the statement that "a woman can suggest using condoms just like a man can." The level of agreement increased as anticipated, from 68% at baseline to 76% at endline.
- **Perceived power**: Over half of the FTMs age 15-24 had high perceived power regardless of study arm or survey round. There were significant changes in the perceived power score over time for FTMs age 15-24 in the comparison HZs (3.6 to 3.8) and intervention HZs (3.9 to 4.0). The change observed was higher among the FTMs in the comparison HZs. When the data were disaggregated by age group, significant changes were only observed among FTMs age 15-19 in the comparison HZs (3.4 to 3.6).

- **Self-efficacy**: Less than half of the FTMs age 15-24 believed that any of the 10 statements in the Generalized Self-efficacy Scale were always true, regardless of survey round and age group. The mean self-efficacy score for FTMs age 15-24 in the comparison HZs increased significantly over time from 29.6 to 30.3. For same-age FTMs in the intervention HZs, the scores increased from 28.9 to 30.9. This point increase over time was higher in the intervention HZs than in the comparison HZs.
- **Negotiation of sex**: Over seven in ten FTMs age 15-24 reported that they would say no to their partner if they did not want to engage in sexual intercourse in both survey rounds and study arms. The change over time was not consistent. In the comparison HZs, there was a decrease in the percentage who would say no and the reverse was observed in the intervention HZs. Compared to those who would say no, fewer FTMs age 15-24 reported they could ask their male partner to use a condom. In the comparison HZs, 63% of FTMs could ask and, by endline, this had increased by six percentage points. The change observed in the intervention HZs was about twice that in the comparison HZs.

This chapter presents gender-related attitudes, beliefs, and behaviors among FTMs age 15-24 who participated in the 2018 MOMENTUM Baseline and the 2020 Endline Surveys in Kinshasa and analyzes the changes from baseline to endline by study arm. We provide information on (1) control over the FTM's cash earnings; (2) the relative earnings of FTMs and their male partners; (3) FTMs' participation in health-related decisions; (4) FTMs' perceived parental competency; (5) FTMs' perceived gender-equitable attitude; (6) FTMs' perceived personal power; (7) FTMs' perceived self-efficacy; and (8) the FTM's perceived ability to negotiate sexual relations with her husband/male partner.

6.1 Control over Cash Earnings and Relative Magnitude of Earnings

FTMs who were currently married or living with their partners and earned cash were asked who the main decision maker was for their cash earnings. The findings are reported in Table 6.1. In both the baseline and endline surveys, half of FTMs were the sole decision makers of their cash earnings. However, the percentage who were sole decision makers decreased from baseline to endline in both study arms, from 67% to 51% in the comparison HZs and from 66% to 52% in the intervention HZs. This trend was accompanied by an increase in the percentage of FTMs who reported that their husband/partners were the main decisions makers in both study arms. Male partner-dominated decision making about the FTM's cash earnings increased by eight percentage points (from seven percent to 15%) in the comparison HZs and, in the intervention HZs, the increase was by 11 percentage points (seven percent to 18%). The percentage of FTMs who reported joint decision making about their cash earnings increased as well, with a slightly larger increase in comparison HZs than in intervention HZs.

At endline in the intervention HZs, 61% of FTMs age 15-19 were sole decision makers over their earnings compared to 45% of those age 20-24. In the former age group, the absolute decline in the percentage who reported sole decision making was higher in the comparison HZs than in the intervention HZs (18 percentage points versus six percentage points). Conversely, FTMs age 20-24 living in the intervention HZs had a larger absolute decline in sole decision making compared to their counterparts in the comparison HZs (15 percentage points versus 20 percentage points). There was a decrease in the prevalence of joint decision making between the baseline and endline surveys among FTMs age 15-19 in both study arms and, although the absolute change was small, it was greater in the comparison HZs than in the intervention HZs.

Table 6.1 Percent distribution of FTMs age 15-24 who are in a union and who received cash earnings for employment in the past 12 months by the person who decides how the FTM's cash earnings are used and by the relation between her earnings and her male partner's, according to baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.	T1	T2	Sig.
Person who decides how the FTM's cash earnings are used			**			*			ns			**			*			***
Mainly FTM	74.4	56.5		67.1	61.3		64.0	48.6		65.3	45.4		66.5	50.5		66.0	51.5	
Mainly male partner	0.0	23.9		6.3	17.3		9.6	12.3		6.6	18.5		7.3	15.2		6.5	18.0	
FTM and male partner jointly	23.1	19.6		21.5	21.3		25.6	38.4		24.8	36.1		25.0	33.7		23.5	30.4	
Other	2.6	0.0		5.1	0.0		0.8	0.7		3.3	0.0		1.2	0.5		4.0	0.0	
FTM's earnings compared with male partner's earnings			ns			ns			ns			ns			ns			ns
More	7.7	17.4		5.1	13.3		5.6	10.9		7.4	9.2		6.1	12.5		6.5	10.8	
Less	84.6	78.3		81.0	68.0		82.4	79.0		86.8	82.4		82.9	78.8		84.5	76.8	
About the same	5.1	4.3		1.3	4.0		2.4	5.8		2.5	6.7		3.0	5.4		2.0	5.7	
Male partner has no earnings	2.6	0.0		5.1	8.0		0.8	0.0		0.8	0.0		1.2	0.0		2.5	3.1	
Don't know	0.0	0.0		7.6	6.7		8.8	4.3		2.5	1.7		6.7	3.3		4.5	3.6	
Total	100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0	
N	**46**			**79**			**138**			**121**			**184**			**200**		

*** p <.001; ** p < .01; * p < .05; ns – not significant
Pertains only to women who earned cash earnings for work and were married or living with partner at time of interview
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 6.1 also shows the distribution of the relative magnitude of earnings for currently married or cohabiting FTMs. Among FTMs age 15-24, there was a decline from baseline to endline in the percentage who reported earning less than their male partner. In the intervention HZs, the reduction was by about eight percentage points while in the comparison HZs, the reduction was by four percentage points. In the overall sample, there was a slight increase in those who reported earning more and about the same as their male partner, and the degree of change was of similar magnitude in both study arms (about eight to nine percentage points). This pattern was also found when the data were disaggregated by age group. For FTMs age 15-19, the largest absolute change was observed in the intervention HZs (11 percentage points) and for older FTMs, it was observed in the comparison HZs (nine percentage points).

Table 6.2 shows the percentage of FTMs in a union who participated in decisions about how their cash earnings were to be used. An FTM was considered to participate in the decision if she decided alone or with her husband/male partner. Overall, at endline, 85% of FTMs in comparison HZs and 81% of those in intervention HZs participated in decisions regarding how their cash earnings were used. These estimates represented a decrease of seven to eight percentage points from the baseline, which was contrary to expectations. When the data were disaggregated by age group, the decline between surveys was statistically significant among FTMs age 15-19 in the comparison HZs (21 percentage points).

Among FTMs age 15-19 in the comparison HZs, significant reductions over time were seen among those who did not complete secondary education, those who had secondary complete/higher education, those living in the poorest households, those who watched TV at least once a week, and those with more educated parents. In the intervention HZs, the only subgroups that had a significant reduction in participation in decisions about the use of their cash earnings were FTMs age 15-19 who did not watch TV at least once per week (from 96% at baseline to 72% at endline) and FTMs age 20-24 who had completed at least secondary school (from 90% to 84%). Among FTMs age 20-24 in the comparison HZs, significant differences were not observed over time for any of the sociodemographic subgroups.

Table 6.3 presents the percentage of FTMs in a union who earned less than their male partner in the 12 months preceding the survey. At endline, 79% of FTMs age 15-24 in comparison HZs and 77% of those in intervention HZs earned less than their male partner. As expected, there was a decline in the percentage who earned less, however, the changes over time were not significant, regardless of age group and study arm. Among the sociodemographic subgroups, only FTMs age 20-24 and 15-24 who did not watch TV at least once a week had significant reductions in the percentage who reported earning less than their male partner. Although the changes were not significant, FTMs who had completed at least secondary school had smaller changes compared to their counterparts who had not complete secondary school. For example, among FTMs 15-19 in the intervention HZs, the percentage of FTMs with a secondary education who earned less decreased by seven percentage points while a 15 percentage point reduction was observed among those who hadn't completed secondary school. This pattern (i.e., greater reduction among the less educated) was also observed for FTMs age 15-19 in the intervention HZs, those age 20-24 in the comparison HZs, as well as the total sample in both the intervention and comparison HZs.

Table 6.2 Percentage of currently-in-union FTMs age 15-24 who participated in decisions regarding how their cash earnings were used, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	96.4	78.4	*	92.9	82.5	ns	92.7	91.1	ns	90.2	78.3	ns	94.2	85.4	ns	91.8	80.6	*
Secondary complete/higher	100.0	66.7	*	78.3	83.3	ns	88.1	84.9	ns	90.0	83.6	**	89.5	83.3	ns	87.4	83.5	ns
Household wealth																		
Low	100.0	66.7	*	88.0	76.9	ns	89.5	75.9	ns	89.5	76.3	ns	93.8	72.7	*	88.9	76.6	ns
Medium	100.0	77.8	ns	85.3	96.3	ns	93.6	87.2	ns	92.3	83.8	ns	95.1	84.2	ns	89.0	89.1	ns
High	91.7	84.6	ns	95.0	72.7	ns	86.4	91.4	ns	88.6	84.1	ns	87.3	90.4	ns	90.6	80.3	ns
Watched TV at least once a week																		
No	92.3	78.9	ns	96.2	72.4	*	91.1	90.7	ns	93.0	89.7	ns	91.4	87.7	ns	94.2	82.4	*
Yes	100.0	74.1	**	84.9	89.1	ns	88.7	84.5	ns	88.5	77.5	ns	91.5	82.0	*	87.0	81.7	ns
Both parents have secondary /higher education																		
No	100.0	80.0	ns	76.9	85.7	ns	90.9	92.3	ns	88.9	76.7	ns	92.6	90.3	ns	85.0	79.5	ns
Yes	97.1	75.6	**	90.9	82.0	ns	89.3	85.7	ns	90.4	83.1	ns	91.2	83.0	*	90.6	82.7	*
Total	97.4	76.1	**	88.6	82.7	ns	89.6	87.0	ns	90.1	81.5	ns	91.5	84.2	*	89.5	82.0	*
N	**46**			**79**			**138**			**121**			**184**			**200**		

*** p <.001; ** p < .01; * p < .05; ns – not significant
Pertains only to women who earned cash earnings for work and were married or living with partner at time of interview
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 6.3 Percentage of FTMs (in a union) age 15-24 who earned less than their male partner for employment in the past 12 months preceding the surveys, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	89.3	81.1	ns	83.9	68.4	ns	85.4	71.1	ns	90.2	87.0	ns	87.0	75.6	ns	86.6	76.7	ns
Secondary complete/higher	72.7	66.7	ns	73.9	66.7	ns	81.0	82.8	ns	85.0	79.5	ns	80.0	81.4	ns	82.5	76.9	ns
Household wealth																		
Low	84.6	86.7	ns	76.0	65.4	ns	78.9	79.3	ns	89.5	84.2	ns	81.2	81.8	ns	84.1	76.6	ns
Medium	85.7	77.8	ns	85.3	70.4	ns	83.0	76.9	ns	89.7	83.8	ns	83.6	77.2	ns	87.7	78.1	ns
High	83.3	69.2	ns	80.0	68.2	ns	83.1	80.0	ns	81.8	79.5	ns	83.1	78.3	ns	81.2	75.8	ns
Watched TV at least once a week																		
No	92.3	78.9	ns	69.2	62.1	ns	84.4	66.7	*	88.4	87.2	ns	86.2	69.9	*	81.2	76.5	ns
Yes	80.8	77.8	ns	86.8	71.7	ns	81.2	86.9	ns	85.9	80.0	ns	81.1	84.7	ns	86.3	77.0	ns
Both parents have secondary /higher education																		
No	100.0	100.0		84.6	78.6	ns	68.2	61.5	ns	92.6	80.0	ns	74.1	67.7	ns	90.0	79.5	ns
Yes	82.4	75.6	ns	80.3	65.6	ns	85.4	83.0	ns	85.1	83.1	ns	84.7	81.0	ns	83.1	76.0	ns
Total	84.6	78.3	ns	81.0	68.0	ns	82.4	79.0	ns	86.8	82.4	ns	82.9	78.8	ns	84.5	76.8	ns
N	**46**			**79**			**138**			**121**			**184**			**200**		

*** p <.001; ** p < .01; * p < .05; ns – not significant
Pertains only to women who earned cash earnings for work and were married or living with partner at time of interview
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

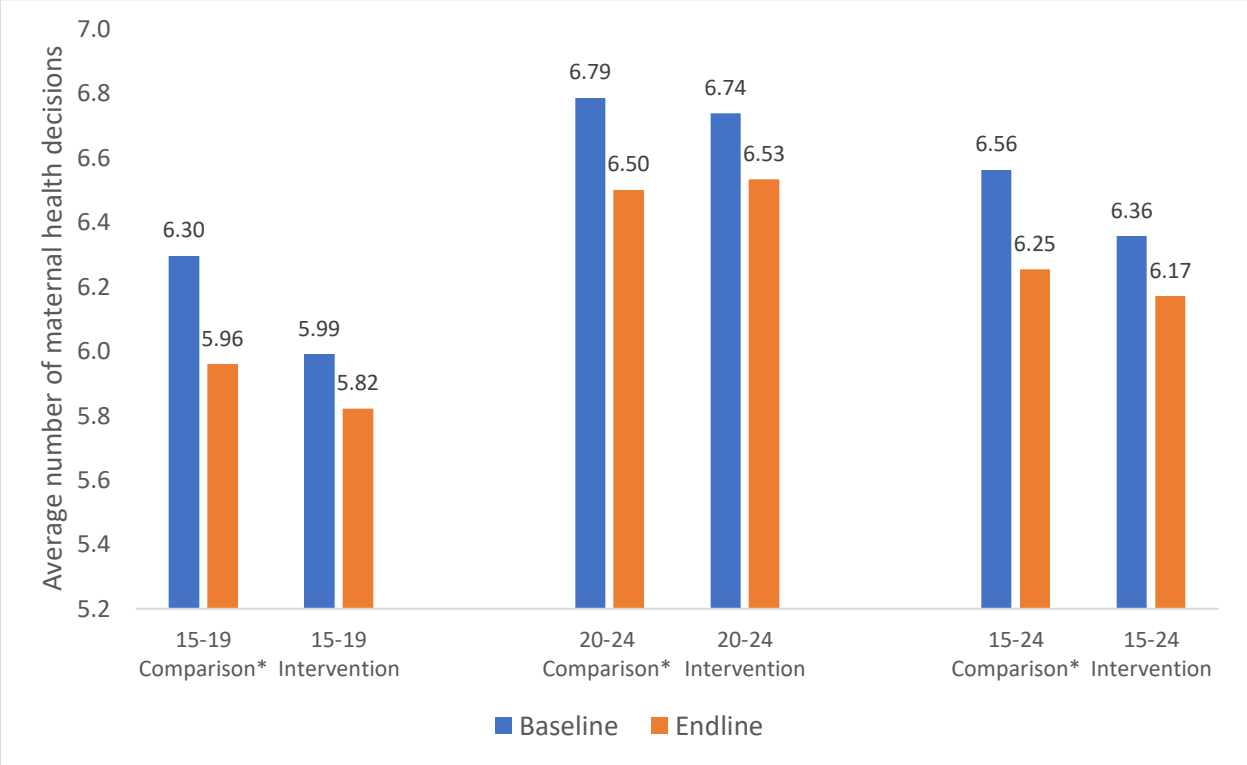
6.2 Participation in Health Decision Making

Women are often underrepresented in decision making, which usually affects their personal circumstances and can inhibit their overall development, health and well-being. Thus, decision making is an indicator of empowerment. We measured the autonomy of the FTM over her health and that of her newborn by asking about her participation in nine healthcare-related decisions (see Table 6.4 for a list of the decisions). FTMs were considered to participate in decision making if they made decisions alone or jointly with their husband/male partner.

On average, FTMs participated in six to seven decisions. It was expected that, over time, participation in decision making would increase. However, it decreased slightly in both study arms in the overall sample as well as both age groups (Figure 6.1). The reductions observed were only significant in the comparison HZs. It's important to note that the women in the comparison HZs participated in more decisions compared to their counterparts in the intervention HZs at baseline.

In each survey round, FTMs age 20-24 participated in more decisions than their younger counterparts. Among FTMs age 20-24, the reduction in the average number of decisions made was similar in both the intervention and comparison HZs (0.29 and 0.21 respectively), which also had similar averages at baseline (6.8 and 6.7, respectively). This was not observed among FTMs age 15-19. FTMs age 15-19 in the comparison HZs had a larger reduction in the number of decisions made compared to those in the intervention HZs (0.34 versus 0.17) and participated in more decisions on average at baseline (6.3 versus 6.0).

Figure 6.1 Average number of maternal health-related decisions that FTMs participate in, by age group and study arm, Kinshasa



Note: There was statistically significant variation in the average number of decisions made by FTMs in the comparison HZs (age 15-19: p=0.030, age 20-24: p=0.025; age 15-24: p=0.002), while for those in the intervention HZs, the differences observed were not significant (p>0.05).

Table 6.4 shows the percent distribution of FTMs according to the person who usually makes decisions concerning each of the nine healthcare topics. Out of the nine healthcare topics, significant changes over time were not observed for the decision on where to deliver the baby, regardless of whether the data pertained to the total sample or both age groups. Among FTMs age 15-24 in the intervention HZs, participation in decisions (jointly or alone) regarding when to start seeking ANC and the number of ANC visits increased significantly over time. These patterns were not observed among FTMs age 15-24 in the comparison HZs. For all other healthcare topics, there were reductions in decision making participation by FTMs in both study arms. For example, regarding the decision as to when to initiate breastfeeding, significant reductions of 10 percentage points were observed in the comparison and intervention HZs. Among FTMs age 15-19 and 20-24, the largest significant absolute decrease was observed in the intervention HZs for decisions about when to start seeking ANC (age 15-19: 16 percentage points; age 20-24: 11 percentage points) and the number of ANC visits (age 15-19: 13 percentage points; age 20-24: nine percentage points). These absolute changes were larger among younger FTMs. FTMs' participation in decision making about the other health-related matters declined significantly in many instances and no consistent pattern was observed.

Similar types of decisions were grouped and examined in the last few rows of Table 6.4. The first group, ANC and delivery care, comprised decisions as to when to start seeking ANC, the number of ANC visits, and where to deliver the baby. At endline, FTMs age 15-24 participated in about 1.8 (out of a maximum of three) decisions in both study arms. This was a significant increase from the baseline estimates for FTMs in the intervention HZs (from 1.6 to 1.8) and no change occurred among those in the comparison HZs (1.8 in both surveys). Among FTMs 15-19 in the intervention HZs, there was a significant increase (from 1.4 to 1.7) in the average number of ANC and delivery decisions, and no significant change was observed for those in the comparison HZs (1.7 in both surveys). In both survey rounds, older FTMs made more ANC and delivery decisions compared to younger FTMs. As with FTMs age 15-19, the average number of decisions made by older FTMs in the intervention HZs increased significantly over time (from 1.8 to 2.0) while in the comparison HZs, no significant change was observed (1.9 in both surveys).

There were two questions pertaining to breastfeeding decisions: how soon to start breastfeeding the newborn and whether to practice exclusive breastfeeding. Contrary to expectations, there was a significant decrease in FTMs' participation in breastfeeding decisions in each study arm, regardless of age group. At baseline, FTMs in the comparison HZs participated in more breastfeeding decisions and had the larger reduction in this outcome over time. The third group of decisions pertained to the postnatal/postpartum period. Four decisions were included in the latter group: (1) caring for the umbilical cord, (2) wait time before another pregnancy; (3) where and (4) when to seek and treatment for dangers signs for the mother and newborn. On average, at endline, FTMs age 15-24 participated in a similar average number of postnatal/postpartum decisions in each study arm (comparison HZs: 2.9; intervention HZs: 2.8). There was a significant decline in the mean number of postnatal/postpartum decisions among FTMs age 15-24 in the intervention HZs (from 3.1 at baseline to 2.8 at endline). The decline was statistically significant among both younger and older FTMs in the intervention HZs.

In the next three tables, we examined the percentage of FTMs who made all the decisions within each decision groups (i.e., ANC and delivery, breastfeeding, and post-delivery/postpartum). Table 6.5 presents differentials in FTMs' participation in all ANC and delivery decisions (when to start seeking ANC, the number of ANC visits and where to deliver the baby), by age group, survey round, and sociodemographic characteristics. At endline, slightly more FTMs age 15-24 participated in all ANC and delivery decisions in the intervention HZs than in the comparison HZs (39% versus 37%). Between surveys, there was an increase in the percentage of FTMs age 15-24 who made all three decisions, but the change was statistically significant only in the intervention HZs. Among FTMs age 15-24 in the intervention HZs, significant increases occurred among those who had less education, had been married, did not have weekly TV exposure, and had more educated parents.

Table 6.4 Percent distribution of FTMs age 15-24 by the person who usually makes decisions about various maternal health issues and average number of decisions, by age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Decision	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
When to start seeking ANC			ns			***			*			**			**			***
Mainly FTM	20.5	24.1		19.1	24.0		21.1	28.0		23.3	26.1		20.9	26.2		21.2	25.1	
Mainly male partner	25.3	25.3		31.4	27.7		28.2	26.3		31.5	24.2		26.9	25.8		31.4	26.0	
FTM and male partner jointly	34.2	27.8		22.6	34.1		44.8	37.9		35.8	43.7		39.9	33.3		29.0	38.8	
Other	20.0	22.8		26.9	14.2		5.9	7.8		9.4	6.0		12.3	14.6		18.3	10.2	
Number of ANC visits			*			***			*			*			**			***
Mainly FTM	28.2	35.1		24.6	35.3		26.5	33.5		23.3	30.2		27.3	34.2		24.0	32.8	
Mainly male partner	12.5	10.5		14.6	13.8		11.2	11.0		12.0	9.9		11.8	10.8		13.3	11.8	
FTM and male partner jointly	28.9	22.3		22.2	24.4		33.9	27.0		30.6	32.3		31.6	24.9		26.3	28.3	
Other	30.3	32.1		38.6	26.5		28.4	28.4		34.0	27.6		29.3	30.1		36.4	27.0	
Where to deliver the baby			ns			ns			ns			ns			ns			ns
Mainly FTM	32.8	35.3		29.2	33.1		38.3	38.3		31.3	35.5		35.8	36.9		30.2	34.3	
Mainly male partner	15.3	17.5		22.8	24.2		19.2	20.4		27.8	24.6		17.4	19.1		25.3	24.4	
FTM and male partner jointly	22.3	20.7		18.5	20.7		27.8	28.8		30.8	29.8		25.3	25.1		24.5	25.2	
Other	29.6	26.4		29.6	22.0		14.7	12.6		10.1	10.1		21.5	18.9		20.0	16.1	
How soon to start BF			***			***			***			***			***			***
Mainly FTM	77.2	64.0		70.2	56.9		76.8	65.7		65.3	58.5		77.0	64.9		67.8	57.7	
Mainly male partner	2.5	2.1		6.0	4.9		2.7	2.9		4.7	3.4		2.6	2.5		5.3	4.2	
FTM and male partner jointly	13.7	15.0		16.8	16.8		16.6	19.2		24.6	24.2		15.2	17.3		20.7	20.4	
Other	6.6	18.9		7.0	21.4		4.0	12.2		5.4	13.9		5.2	15.2		6.2	17.7	
Whether to practice EBF			***			***			***			**			***			***
Mainly FTM	77.9	54.7		63.7	47.6		73.5	53.1		59.3	49.3		75.5	53.8		61.5	48.4	
Mainly male partner	3.2	3.9		6.2	7.4		4.4	6.1		5.8	5.8		3.8	5.1		6.0	6.6	
FTM and male partner jointly	11.4	19.4		15.0	19.9		15.2	25.5		23.8	27.4		13.5	22.7		19.3	23.6	
Other	7.5	22.1		15.2	25.1		6.9	15.2		11.1	17.6		7.2	18.4		13.2	21.4	
Caring of umbilical cord [a]			***			***			**			**			***			***
Mainly FTM	28.2	20.0		24.8	21.2		29.3	24.2		26.6	25.3		28.8	22.3		25.7	23.2	
Mainly male partner	6.6	1.8		5.3	2.3		5.5	1.7		4.3	3.0		6.0	1.8		4.8	2.6	
FTM and male partner jointly	17.5	21.4		23.8	17.5		21.9	22.3		29.8	22.3		19.9	21.9		26.7	19.8	
Other	47.6	56.7		46.0	59.1		43.2	51.8		39.4	49.5		45.2	54.0		42.8	54.4	

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Decision	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
When to seek care and treatment for DS [b]			ns			**			**			**			**			***
Mainly FTM	42.8	36.7		39.8	33.9		43.0	32.6		34.9	30.2		42.9	34.4		37.4	32.1	
Mainly male partner	12.8	13.7		11.1	12.9		13.5	18.1		10.1	12.8		13.2	16.1		10.6	12.9	
FTM and male partner jointly	29.4	34.4		37.4	32.9		37.1	42.5		51.0	47.3		33.6	38.8		44.0	39.9	
Other	15.0	15.3		11.7	20.3		6.3	6.9		4.1	9.6		10.3	10.7		8.0	15.1	
Where to seek care and treatment for DS [b]			ns			ns			ns			*			ns			*
Mainly FTM	64.5	63.3		58.9	53.8		49.0	48.6		49.9	43.9		56.0	55.3		54.5	49.0	
Mainly male partner	3.6	3.0		6.0	5.3		4.0	4.8		5.6	6.9		3.8	3.9		5.8	6.1	
FTM and male partner jointly	28.5	31.7		32.9	37.0		46.1	45.1		43.7	46.3		38.1	39.0		38.2	41.5	
Other	3.4	2.1		2.3	3.9		1.0	1.5		0.9	3.0		2.1	1.8		1.6	3.5	
Wait time before another Pregnancy [c]			**			ns			**			**			***			***
Mainly FTM	41.9	31.9		37.2	32.4		36.4	29.9		37.0	29.3		38.9	30.8		37.1	30.9	
Mainly male partner	11.6	15.5		9.7	11.1		11.6	16.0		6.0	10.3		11.6	15.8		7.9	10.7	
FTM and male partner jointly	29.6	38.0		42.5	40.7		41.3	47.8		52.9	51.8		36.0	43.4		47.6	46.1	
Other	16.9	14.6		10.7	15.8		10.7	6.3		4.1	8.6		13.5	10.1		7.4	12.3	
Total	100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0	
Average number of decisions																		
ANC and delivery (range 0-3)	1.67	1.654	ns	1.361	1.717	***	1.924	1.935	ns	1.752	1.976	**	1.808	1.807	ns	1.552	1.844	***
Breastfeeding (range 0 - 2)	1.80	1.531	***	1.657	1.413	***	1.821	1.636	***	1.730	1.593	***	1.812	1.588	***	1.693	1.501	***
Post-delivery/postpartum (range 0-4)	2.82	2.774	ns	2.973	2.692	***	3.042	2.930	ns	3.257	2.964	***	2.942	2.859	ns	3.112	2.825	***
All decisions (range 0 - 9)	6.30	5.959	*	5.992	5.821	ns	6.787	6.501	*	6.739	6.533	ns	6.563	6.254	*	6.357	6.170	ns
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns – not significant

a: How to take care of baby's umbilical cord; b: Seeking care and treatment for danger signs for the mother or newborn; c: Wait time after childbirth before attempting another pregnancy

ANC – antenatal care; BF- breastfeeding; EBF- exclusive breastfeeding

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 6.5 Percentage of FTMs age 15-24 who participated in all three antenatal care and delivery decisions, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	30.6	34.7	ns	24.6	34.2	**	40.0	44.3	ns	39.2	47.6	ns	33.8	37.9	ns	29.4	38.6	**
Secondary complete/higher	32.9	24.7	ns	32.7	37.6	ns	36.5	39.1	ns	42.1	41.0	ns	35.8	36.6	ns	39.6	40.1	ns
Never married																		
No	27.5	35.3	ns	30.6	35.7	ns	33.5	41.0	*	41.3	44.7	ns	31.2	38.8	**	36.3	40.4	ns
Yes	35.9	29.9	ns	18.5	33.5	**	53.1	40.7	ns	39.6	40.5	ns	42.4	34.0	*	26.8	36.3	*
Household wealth																		
Low	31.0	31.6	ns	26.7	33.2	ns	42.5	47.8	ns	43.5	47.4	ns	36.3	39.1	ns	34.0	39.3	ns
Medium	29.7	34.5	ns	25.6	34.3	ns	32.8	35.6	ns	41.3	42.7	ns	31.4	35.1	ns	32.9	38.2	ns
High	32.4	33.1	ns	26.5	38.9	*	38.9	41.2	ns	38.0	41.1	ns	36.3	38.0	ns	33.3	40.2	ns
Worked last year																		
No	31.2	31.5	ns	29.0	34.7	ns	42.2	41.9	ns	41.3	46.4	ns	36.4	36.4	ns	34.6	40.0	ns
Yes	30.4	37.4	ns	20.5	35.3	**	32.2	39.8	ns	40.3	39.8	ns	31.6	39.0	*	31.4	37.8	ns
Watched TV at least once a week																		
No	28.6	32.1	ns	24.7	35.4	*	38.0	39.0	ns	38.5	42.9	ns	33.5	35.8	ns	30.9	38.7	*
Yes	32.5	33.6	ns	27.3	34.6	ns	37.6	42.0	ns	42.2	44.1	ns	35.3	38.3	ns	35.0	39.5	ns
Both parents have secondary/higher education																		
No	36.7	30.6	ns	24.1	33.3	ns	37.0	33.0	ns	49.5	49.5	ns	36.9	31.8	ns	38.1	42.3	ns
Yes	29.3	33.7	ns	26.8	35.2	**	37.9	42.8	ns	38.3	41.9	ns	34.1	38.8	ns	32.2	38.4	*
Total	31.0	33.0	ns	26.3	34.9	**	37.7	41.0	ns	40.9	43.7	ns	34.6	37.3	ns	33.4	39.2	**
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns – not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Among FTMs age 15-24 in the comparison HZs, significant increases over time were observed among those who were unemployed and those who had never been married. Interestingly, there was a significant reduction in participation in all ANC and delivery decisions for FTMs age 15-24 who had never been married (42% to 34%).

Fewer FTMs age 15-19 participated in ANC and delivery decisions compared to their older counterparts. Among FTMs age 15-19 in the comparison HZs, there was an increase of two percentage points in participation in all decisions (from 31% to 33%); however, none of the changes, including those in the sociodemographic subgroups, was statistically significant. For same-age FTMs in the intervention HZs, the increase in participation in all ANC and delivery decisions was statistically significant (from 26% at baseline to 35% at endline), and it was larger in magnitude than the change observed for older FTMs in the same HZ. In the intervention HZs, significant differences over time in 15-19-year-old FTMs' participation in ANC and delivery decisions were observed for those who had less education, had never been married, lived in the wealthiest households, were employed, did not watch TV at least once a week, and had two parents with secondary/higher education. At endline, 41% of FTMs age 20-24 in the comparison HZs and a similar percentage of those in the intervention HZs were involved in all three decisions. Although older FTMs' participation in all ANC and delivery decisions increased over time in most sociodemographic subgroups, the differences observed were not statistically significant except among those in comparison HZs who had never been married.

Table 6.6 presents the percentage of FTMs who participated in both breastfeeding-related decisions by age group, survey round, and study arm. At endline, more than three in five FTMs in the total sample participated in both breastfeeding decisions and participation was higher among FTMs living in comparison HZs than among those living in intervention HZs. It was anticipated that FTMs' participation in decisions would increase over time, however, this was not the case. In the comparison HZs, participation decreased from 86% at baseline to 71% at endline while in the intervention HZs, it decreased from 77% to 65%. Both changes were statistically significant and probably reflected the increased role of others (including healthcare workers) in breastfeeding decisions (see Table 6.4). Significant differences were also observed across all demographic subgroups explored.

Among FTMs age 15-19, there was a significant decline in participation; however, the absolute decline was larger in the comparison HZs than in the intervention HZs (18 percentage points versus 14 percentage points). Changes within the sociodemographic subgroups were significant except among FTMs living in medium-wealth households in the comparison HZs and FTMs in the intervention HZs with secondary/higher education and less educated parents. Among FTMs age 20-24, those in the comparison HZs had a higher level of participation in both breastfeeding decisions at baseline than those in the intervention HZs (86% versus 79%), and a larger absolute decline over time (13 percentage points versus nine percentage points). This pattern was similar to what was observed among FTMs age 15-19. All sociodemographic subgroup differences between surveys were significant for FTMs age 20-24 in the comparison HZs. FTMs who did not have two parents with secondary/higher education, those with were not employed last year, and those who were married had the largest changes in breastfeeding decision making. In the intervention HZs, FTMs age 20-24 with non-significant changes over time were those who had less education, were never married, had medium household wealth, were unemployed last year, had not watch TV at least once a week, and did not have two parents with secondary education. The absolute decline in FTMs' participation in both breastfeeding decisions was greater for younger than older FTMs, irrespective of study arm. For instance, in the intervention HZs, participation in both breastfeeding decisions reduced by 14 percentage points for FTMs age 15-19 and by nine percentage points for those age 20-24. Similar patterns of change were observed in the comparison HZs.

Table 6.6 Percentage of FTMs age 15-24 who participated in all breastfeeding decisions, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	86.1	69.4	***	73.8	57.3	***	84.3	74.1	*	81.0	73.5	ns	85.5	71.0	***	76.2	62.6	***
Secondary complete/higher	84.9	61.6	**	78.2	72.3	ns	87.4	72.6	***	78.4	68.7	**	86.9	70.7	***	78.4	69.7	**
Never married																		
No	85.1	72.2	***	74.8	59.9	***	85.7	73.3	***	79.8	71.3	**	85.5	72.9	***	77.5	66.0	***
Yes	87.0	62.5	***	74.6	61.3	***	88.5	72.6	**	78.4	68.5	ns	87.5	66.3	***	76.1	64.1	**
Household wealth																		
Low	85.8	63.2	***	74.8	58.9	**	84.3	72.4	*	82.5	71.4	*	85.1	67.5	***	78.1	64.3	***
Medium	81.8	73.6	ns	73.3	60.5	*	85.6	71.7	**	77.3	73.3	ns	83.8	72.6	***	75.2	66.5	*
High	90.4	67.6	***	77.0	62.8	*	88.2	74.9	***	78.5	67.5	*	89.0	72.0	***	77.9	65.6	**
Worked last year																		
No	86.1	67.0	***	73.7	61.3	**	89.3	73.7	***	81.2	68.5	**	87.6	70.1	***	77.1	64.6	***
Yes	85.2	71.3	*	76.9	58.3	***	82.6	72.5	**	77.0	73.8	ns	83.5	72.1	***	76.9	66.9	**
Watched TV at least once a week																		
No	86.3	69.6	***	74.7	64.1	*	84.0	73.8	*	77.0	69.6	ns	85.1	71.8	***	75.8	66.6	**
Yes	85.6	67.2	***	74.7	57.8	***	87.6	72.8	***	80.7	71.2	**	86.7	70.3	***	77.8	64.7	***
Both parents have secondary/higher education																		
No	81.6	63.3	**	70.1	59.8	ns	84.0	67.0	**	83.2	72.0	ns	82.8	65.2	***	77.3	66.5	*
Yes	87.1	69.5	***	75.7	60.5	***	86.8	74.6	***	78.3	70.3	*	86.9	72.3	***	77.0	65.1	***
Total	85.9	68.1	***	74.7	60.4	***	86.3	73.1	***	79.4	70.7	**	86.1	70.9	***	77.0	65.4	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns – not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 6.7 Percentage of FTMs age 15-24 who participated in all post-delivery or postpartum decisions, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	40.4	36.3	ns	40.7	30.3	**	41.6	38.9	ns	51.3	43.4	ns	40.8	37.2	ns	44.2	34.6	**
Secondary complete/higher	30.1	28.8	ns	48.5	34.7	*	41.8	39.1	ns	51.4	38.1	**	39.7	37.3	ns	50.7	37.2	***
Never married																		
No	37.6	37.3	ns	44.6	31.8	**	42.2	41.3	ns	51.7	40.7	**	40.5	39.7	ns	48.4	36.6	***
Yes	40.2	32.1	ns	38.2	30.1	ns	39.8	31.0	ns	50.5	38.7	ns	40.1	31.6	*	43.0	33.5	*
Household wealth																		
Low	36.8	29.7	ns	41.6	31.2	*	36.6	42.5	ns	57.1	44.2	*	36.7	35.6	ns	48.3	36.8	**
Medium	40.5	39.2	ns	45.3	32.0	*	42.2	37.8	ns	53.3	42.0	ns	41.5	38.4	ns	49.1	36.6	**
High	39.0	36.8	ns	38.9	30.1	ns	44.5	37.9	ns	44.2	35.0	ns	42.4	37.5	ns	42.0	33.0	*
Worked last year																		
No	38.3	33.6	ns	41.1	30.5	**	46.4	39.8	ns	48.9	40.9	ns	42.1	36.5	*	44.6	35.3	**
Yes	40.0	39.1	ns	44.9	32.7	*	36.0	38.1	ns	55.0	39.3	**	37.3	38.5	ns	50.4	36.3	***
Watched TV at least once a week																		
No	36.9	32.7	ns	39.4	32.8	ns	40.6	32.6	ns	47.8	36.6	*	38.9	32.7	ns	43.2	34.5	*
Yes	39.9	36.5	ns	44.3	30.1	***	42.3	42.6	ns	53.3	42.2	**	41.2	39.9	ns	48.9	36.3	***
Both parents have secondary/higher education																		
No	36.7	34.7	ns	36.8	19.5	*	38.0	30.0	ns	54.2	44.9	ns	37.4	32.3	ns	46.4	33.5	*
Yes	39.3	35.2	ns	43.5	33.8	**	42.6	41.2	ns	50.6	38.9	**	41.1	38.5	ns	46.8	36.2	***
Total	38.7	35.1	ns	42.3	31.2	***	41.7	39.0	ns	51.4	40.3	***	40.4	37.2	ns	46.8	35.6	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns – not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 6.7 shows the percentage of FTMs participating in all four postpartum/postnatal decisions by age group, survey round and study arm. Overall, participation in all four decisions was low and lower than participation in all ANC and delivery decisions and both breastfeeding decisions. In the total sample, there was a decline in participation between surveys and, at endline, fewer than two in five FTMs interviewed participated in all four post-delivery/postnatal decisions (comparison HZs: 37%; intervention HZs: 36%). The decline in participation was significant and greater for FTMs age 15-24 in the intervention HZs (11 percentage points) than for those in the comparison HZs. Significant differences were also observed between surveys for all sociodemographic subgroups in the intervention HZs. In the comparison HZs, significant differences were only observed for those who had never been married and those who were unemployed last year.

Among FTM age 15-19 and 20-24 in the comparison HZs, the differences over time in participation in all four postpartum/postnatal decisions over time were not significant in the total population as well as in the sociodemographic subgroups. In the intervention HZs, the differences in participation over time were of a similar magnitude in each age group and statistically significant. For the younger FTMs, participation in all four decisions decreased by 11 percentage points from 42% at baseline to 31% at endline, and for older FTMs, participation also decreased by 11 percentage points from 51% at baseline to 40% at endline. The largest absolute difference between surveys was seen for FTMs age 15-19 who had less educated parents and those age 20-24 who were employed last year. In the intervention HZs, older FTMs had a higher level of participation in postnatal/postpartum decisions than younger FTMs, irrespective of survey round.

6.3 Parental Competency

Parental competency is a measure of a parent's self-esteem. It can be bidimensional consisting of a person's contentment and perceived efficacy as a parent (Ohan et al., 2000). Parental self-esteem can play a role in the willingness and eventually decision to be involved in parenting activities. To assess the parental competency of FTMs, the parental sense of competency scale (PSOC), a validated scale developed by Gibaud-Wallston and Wandersman was used (1978). The PSOC is a 17-item scale with two subscales, parental satisfaction, and parental efficacy. During the endline survey, FTMs were asked to rate their level of agreement from 1 (strongly disagree) to 4 (strongly agree) with the 17 items included in the scale. Prior to creating the subscales, several responses were reverse coded such that higher scores in the 4-point Likert scale indicated higher levels of self-esteem. For example, responses to the statement "my mother was better prepared to be a good mother than I am" were reverse coded so that the higher values were indicative of higher levels of self-esteem. Thereafter, items in the subscale were summed to create the satisfaction and efficacy subscales with scores ranging from 10 to 32 and 9 to 35, respectively (see Table 6.8 for list of items included in each subscale). A higher score indicates a higher parenting sense of competency.

Table 6.8 presents the percentage of FTMs who strongly agreed/agreed with the specific statements asked in the PSOC by age group and study arm. FTMs in both study arms had similar parental satisfaction levels. In the total population, FTMs in the comparison HZs scored 23.2 while those in the intervention HZs scored 23.4. The variation in the scores by study arm were not statistically significant. FTMs had lower parental efficacy levels compared to parental satisfaction levels, and the variations in the scores across study arms were not significant. In the comparison HZs, the average parental efficacy score was 22.0 in the comparison HZs and 21.8 in the intervention HZs. When disaggregated by age, older FTMs had higher levels of parental satisfaction and efficacy compared to their younger counterparts, irrespective of study arm. For instance, FTMs age 15-19 in the comparison HZs had a mean parental satisfaction score of 22.7 while those age 20-24 in the same HZs had a mean score of 23.6. Further analysis (not shown) indicated that observed age group differences were statistically significant.

The level of agreement with several of the 17 items in the PSOC varied across study arms and age groups; however, the statements most FTMs strongly agreed/agreed with were consistent. Over nine in ten FTMs strongly agreed/agreed with the statement "being a good mother is a reward in itself" and for each age group, the differences by study arm were not significant. The statement with the lowest level of agreement was also consistent across all age groups; about a third of FTMs in the comparison HZs and 40% in the intervention HZs agreed with the statement "my talents and interests are in other areas, not being a parent."

To explore sociodemographic differentials in parental satisfaction and efficacy, dichotomous variables (high and low) were created for each subscale using the median split approach. For each subscale, scores at/above the median were classified as high and those below the median as low. Table 6.9 and 6.10 show the percentage of FTMs with a high level of parental satisfaction and a high level of parental efficacy, respectively. In the total population, slightly more FTMs in the comparison HZs had high parental satisfaction compared to those in the intervention HZs (66% versus 62%), however the variation was not significant (Table 6.9). More FTMs age 15-24 who have secondary complete/higher education, have been married, were employed last year, watched TV weekly, and had two parents with secondary education had high parental satisfaction in both study arms compared to the FTMs in other categories of their respective background characteristic. In comparison HZs, high parental satisfaction increased with household wealth, but this was not observed in intervention HZs. The highest prevalence of parental satisfaction was found among FTMs in medium-wealth households.

More FTMs age 20-24 had high parental satisfaction scores compared to their younger counterparts, irrespective of study arm. About three in five FTMs age 15-19 (comparison HZs: 59%; intervention HZs: 60%) and over three in five FTMs age 20-24 (comparison HZs: 72%; intervention HZs: 65%) had high parental satisfaction. In both study arms and age groups, more FTMs with secondary complete/higher as opposed to lower education and those with weekly as opposed to less frequent TV exposure had high parental satisfaction. In the 15-19 age group, more FTMs who had never been married and worked last year had high parental satisfaction compared to their same-age counterparts who were ever married and unemployed, respectively. This pattern was found in both comparison HZs and intervention HZs. In the 20-24 age group, more FTMs from medium-wealth households had high parental satisfaction compared to those from the poorest and wealthiest households. Health zone differentials in parental satisfaction were not statistically significant in the 15-19 age group, but in the 20-24 age group, the percentage of FTMs with high parental satisfaction was lower in intervention HZs than in comparison HZs for the following sociodemographic subgroups: those who were ever married, worked last year, were not exposed to TV weekly, and had less educated parents.

Table 6.10 shows that the percentage of FTMs age 15-24 with high parental efficacy was similar in the comparison and intervention HZs; about half of FTMs had high parental efficacy (comparison HZs: 52%, intervention HZs: 51%). In both study arms, a larger percentage of FTMs with high parental efficacy had completed secondary school, were ever married, were employed last year, and had two parents who completed secondary school. High parental efficacy increased with household wealth for FTMs in the comparison HZs, whereas for those in the intervention HZs, medium-wealth households had the highest percentage of FTMs with high parental efficacy. In the overall sample, HZ differences in the percentage of FTMs with high parental efficacy were not statistically significant, except among those living in the wealthiest households (58% in comparison HZs and 48% in intervention HZs).

When disaggregated by age, the percentage of younger FTMs with high parental efficacy was slightly lower in comparison HZs than in intervention HZs (45% versus 51%), but the difference was not statistically significant. For older FTMs, the comparison HZs had a significantly higher percentage of FTMs with high parental efficacy than the intervention HZs (59% versus 50%). Further analysis of the age group differences within each study arm suggested that, in comparison HZs, high parental efficacy was more common among older than younger FTMs (59% versus 45%, $p<0.001$). The age group difference in high parental efficacy was not significant in intervention HZs (15-19: 51%, 20-24: 50%, $p=0.925$). Higher education and employment

Table 6.8 Percentage of FTMs age 15-24 who strongly agree/agree with specific statements about parental competency and the average parental competency subscale scores, by age group and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Parental Competency Statements	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
The problems of taking care of a child are easy to solve once you know how your actions will affect your child, an understanding I have acquired [a]	69.2	72.6	ns	77.6	75.4	*	73.7	74.0	**
Even though being a parent could be rewarding, I am frustrated now while my child is at his/her present age [b]	57.9	57.3	ns	48.3	61.7	***	52.7	59.5	**
I go to bed the same way I wake up in the morning, feeling I have not accomplished a whole lot [b]	58.1	57.5	ns	50.9	58.8	*	54.2	58.2	*
I do not know why it is, but sometimes when I'm supposed to be in control, I feel more like the one being manipulated [b]	52.3	46.3	*	39.2	43.4	ns	45.3	44.9	ns
My mother was better prepared to be a good mother than I am [b]	87.3	84.9	ns	81.6	83.7	ns	84.2	84.3	ns
I would make a fine model for a new mother to follow in order to learn what she would need to know in order to be a good parent [a]	86.1	87.3	ns	91.5	90.2	ns	89.0	88.7	ns
Being a parent is manageable, and any problems are easily solved [a]	51.4	55.8	**	61.6	59.7	*	56.9	57.7	***
A difficult problem in being a parent is not knowing whether you're doing a good job or a bad one [b]	72.2	69.6	ns	70.1	71.6	ns	71.1	70.6	ns
Sometimes, I feel I am not getting anything done [b]	55.3	52.2	ns	39.6	43.8	ns	46.9	48.1	ns
I meet my own personal expectations for expertise in caring for my child [a]	73.1	70.9	ns	74.9	76.1	ns	74.1	73.4	ns
If anyone can find the answer to what is troubling my child, I am the one [a]	82.6	81.7	ns	85.0	85.5	ns	83.9	83.5	ns
My talents and interests are in other areas, not being a parent [b]	34.7	42.7	***	34.3	37.4	ns	34.5	40.1	***
Considering how long I've been a mother, I feel thoroughly familiar with this role [a]	84.0	88.1	ns	90.5	89.9	ns	87.5	89.0	ns
If being a mother of a child were only more interesting, I would be motivated to do a better job as a parent [b]	68.3	69.4	ns	69.9	71.1	ns	69.2	70.3	ns
I honestly believe I have all the skills necessary to be a good mother to my child [a]	79.6	84.5	ns	87.9	86.6	ns	84.1	85.5	
Being a parent makes me tense and anxious [b]	53.2	50.2	*	40.4	51.2	**	46.3	50.7	**
Being a good mother is a reward in itself [a]	91.7	92.9	ns	94.5	93.5	ns	93.2	93.2	ns
Total	100.0	100.0		100.0	100.0		100.0	100.0	
Average score (SD)									
Parental satisfaction (range 10 - 32)	22.69 (3.025)	23.02 (3.035)	ns	23.63 (3.048)	23.74 (3.343)	ns	23.19 (3.072)	23.37 (3.209)	ns
Parental efficacy (range 9 - 35)	21.34 (3.045)	21.66 (3.583)	ns	22.47 (3.450)	21.87 (3.937)	*	21.95 (0.2623)	21.76 (3.761)	ns
N	432	464		505	447		937	911	

*** p <.001; ** p < .01; * p < .05; ns – not significant

Note: 27 FTMs in the comparison HZs (15 – 19: 7 FTMs; 20 – 24: 20 FTMs) and 43 FTMs in the intervention HZs (15 – 19: 23 FTMs; 20 – 24: 20 FTMs) had missing responses

a: Statements included in the parental efficacy subscale of the parental competency scale; b: Statements included in the parental satisfaction subscale of the parental competency scale

Source: MOMENTUM 2020 Endline Survey

Table 6.9 Percentage of FTMs age 15-24 with high level of parental satisfaction, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	56.4	59.0	ns	66.3	56.8	ns	59.7	58.3	ns
Secondary complete/higher	70.8	61.5	ns	75.5	71.2	ns	74.7	68.6	ns
Never married									
No	61.5	61.0	ns	73.3	65.2	*	68.7	63.2	*
Yes	55.0	56.7	ns	68.5	65.7	ns	60.1	60.2	ns
Household wealth									
Low	55.2	59.8	ns	68.5	58.2	ns	61.3	59.1	ns
Medium	56.6	63.3	ns	76.6	69.9	ns	67.5	66.3	ns
High	65.2	53.2	ns	71.1	67.7	ns	68.7	61.7	ns
Worked last year									
No	58.1	58.6	ns	70.0	65.8	ns	63.7	61.9	ns
Yes	60.7	61.3	ns	75.0	64.6	*	70.3	63.1	*
Watched TV at least once a week									
No	53.6	54.1	ns	71.0	59.9	*	62.8	56.7	ns
Yes	62.0	63.1	ns	73.0	68.1	ns	68.0	65.7	ns
Both parents have secondary/higher education									
No	52.6	66.3	ns	71.6	55.4	*	62.1	60.3	ns
Yes	60.5	58.0	ns	72.4	68.2	ns	67.1	62.9	ns
Total	58.8	59.5	ns	72.3	65.3	*	66.1	62.3	ns
N	**432**	**464**		**505**	**447**		**937**	**911**	

*** p <.001; ** p < .01; * p < .05; ns – not significant
Note: 27 FTMs in the Comparison HZs (15 – 19: 7 FTMs; 20 – 24: 20 FTMs) and 43 FTMs in the intervention HZs (15 – 19: 23 FTMs; 20 – 24: 20 FTMs) had missing responses
Source: MOMENTUM 2020 Endline Survey

Table 6.10 Percentage of FTMs age 15-24 with high level of parental efficacy, by baseline characteristics, age group, and study arm, Kinshasa

	Age 15-19			Age 20-24			Total		
Baseline Characteristics	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**	**Comparison**	**Intervention**	**Sig.**
FTM's highest level of education									
None/primary/secondary incomplete	44.2	48.4	ns	53.9	45.9	ns	47.4	47.5	ns
Secondary complete/higher	47.2	59.4	ns	61.2	53.4	ns	58.6	55.0	ns
Never married									
No	46.8	49.3	ns	60.2	52.3	*	55.0	50.9	ns
Yes	41.7	53.0	*	52.8	43.8	ns	45.8	49.4	ns
Household wealth									
Low	44.2	47.1	ns	53.1	54.1	ns	48.2	50.1	ns
Medium	42.7	56.6	*	55.6	48.6	ns	49.7	52.9	ns
High	47.4	47.7	ns	64.7	48.4	**	57.8	48.1	*
Worked last year									
No	44.4	47.8	ns	54.9	46.6	ns	49.2	47.2	ns
Yes	45.5	56.7	ns	63.2	55.8	ns	57.4	56.2	ns
Watched TV at least once a week									
No	46.4	50.3	ns	54.6	51.3	ns	50.7	50.7	ns
Yes	43.6	50.9	ns	60.9	49.8	**	53.1	50.3	ns
Both parents have secondary/higher education									
No	45.3	48.2	ns	53.7	50.5	ns	49.5	49.5	ns
Yes	44.5	51.2	ns	59.8	50.3	**	52.9	50.8	ns
Total	44.7	50.6	ns	58.6	50.3	*	52.2	50.5	ns
N	**432**	**464**		**505**	**447**		**937**	**911**	

*** p <.001; ** p < .01; * p < .05; ns – not significant

Note: 27 FTMs in the comparison HZs (15 – 19: 7 FTMs; 20 – 24: 20 FTMs) and 43 FTMs in the intervention HZs (15 – 19: 23 FTMs; 20 – 24: 20 FTMs) had missing responses

Source: MOMENTUM 2020 Endline Survey

were associated with the prevalence of high parental efficacy. For the following sociodemographic subgroups, significantly more 15-19-year-old FTMs had high parental efficacy in intervention HZs than in comparison HZ: the never married and those residing in medium-wealth households. For the following sociodemographic subgroups of 20-24-year-old FTMs, high parental efficacy was more common in comparison HZs than those in intervention HZs: the ever married, those residing in the wealthiest households, those with weekly TV exposure, and those with more educated parents.

6.4 Gender-equitable Attitudes

Two validated scales, the Gender-equitable Men (GEM) Scale and the equity subscale of the Gender Relations Scale (GRS), were used to measure gender-equitable attitudes. The first scale, the GEM scale, was used to measure the FTM's attitude towards gender norms in intimate relationships as well as the differing social expectations of men and women (Nanda, 2011). FTMs were asked about their agreement with statements in the different domains of the GEM scale: violence, sexual relationships, domestic chores and daily life, and reproductive health and disease prevention. Prior to summing the scale, some items were reverse coded such that the higher score reflected high support of gender equity. Secondly, factor analysis was conducted for each survey round to identify the similar items and those with factor loadings greater than 0.3 were retained in the final score. The remaining items in the scale were summed to create the GEM score and the Cronbach alpha coefficient indicated that the scale was internally consistent (baseline α: 0.682, endline α: 0.712). The GEM score ranged from 0-10 for both study arms and a higher score indicated higher support of equitable gender norms.

The second scale was a subscale of the GRS that measured equity within an intimate relationship and consisted of 16 items. As suggested by Stephenson et al. (2012), positive responses were coded as 1, and negative and unsure responses were coded as 0 and, thereafter, the items were summed to create the equity score (range: 0 – 16, baseline α: 0.636, endline α: 0.643). A higher score on the equity subscale indicated more equitable attitudes toward gender roles. Items in both scales are presented in Table 6.11. Table 6.11 also shows the percentage of FTMs age 15-24 who agreed with the individual statements in the scales as well as information on the scores by age group, survey round, and study arm.

Overall, the average GEM score was low at baseline and remained low at endline in both the comparison and intervention HZs (Table 6.11). There was a significant increase over time in the average GEM score for FTMs age 15-24 in the comparison HZs (3.3 to 3.7) while for those in the intervention HZs, a significant decrease was observed over time in the average GEM score (4.2 to 3.9). This pattern was also present when the scores were disaggregated by age. Older FTMs in the comparison and intervention HZs had higher mean GEM scores than younger FTMs. It is worth noting that at baseline, FTMs age 15-24 in the intervention HZs had higher GEM scores compared to those in the comparison HZs. It was anticipated that there would be an increase in gender-equitable attitudes over the study period and this was only observed in the comparison HZs.

Attitude towards gender roles (equity score) remained about the same over time in the intervention HZs but increased in the comparison HZs. In the comparison HZs, FTMs age 15-24 had an average score of 6.81 at baseline and their score significantly increased to 7.58 at endline. While in the intervention HZs, the average scores for FTMs age 15-24 were similar in both survey rounds (8.0 to 7.9) and the change was not statistically significant. The increase observed among FTMs in the total sample in the comparison HZs was also observed among younger and older FTMs in those HZs. Young FTMs' average score increased by 0.5 points (2.9 to 3.4) and that of the older FTMs by 0.7 points (3.2 to 3.9). Among FTMs age 15-19 in the intervention HZs, no significant change was observed (7.9 to 7.9) and, for the older FTMs in the intervention HZs, there was a significant reduction (8.3 to 7.9).

FTMs' level of agreement with the individual statements used to measure gender-equitable attitudes varied over time. In the total sample, the largest change was observed in the comparison HZs. As expected, FTMs' agreement with the statement "changing diapers, giving a bath, and feeding kids is the mother's responsibility" decreased significantly by 17 percentage points (83% to 66%). While in the intervention HZs, a smaller reduction was observed (65% to 60%) for this statement. The largest change in the intervention HZs was seen for agreement with the statement "a woman can suggest using condoms just like a man can." The level of agreement increased as anticipated from 68% at baseline to 76% at endline (eight percentage points change). In the comparison HZs, the change for this statement was minimal and not significant. Among FTMs age 15-19 and 20-24 in the comparison HZs, the greatest change was observed with the statements "changing diapers, giving a bath, and feeding kids is the mother's responsibility." FTMs' agreement with this statement decreased over time in the expected direction. There was no consistent pattern across age groups for FTMs in the intervention HZs. Among FTMs age 15-19, the statement with the largest degree of change was for the statement "a woman can suggest using condoms just like a man can". The positive increase (67% to 76%) was in the anticipated direction. For older FTMs, the largest change was observed with the statements "a man can hit his wife if she won't have sex with him" and "a woman should not initiate sex." The significant increase by 10 percentage points seen in the former statement was not expected; however, the increase by 10 percentage points was expected in the latter statement. Interestingly, agreement with the statement "men and women should share household chores" remained low over the study period regardless of age group and survey round, with only 23% to 40% of FTMs agreeing with the statement.

Tables 6.12 and 6.13 present the percentage of FTMs with high gender-equitable attitudes towards norms and gender roles measured using the GEM scale and the equity subscale, respectively. For each score, a dichotomous variable (high and low) was created using the median split approach. As shown in Table 6.12, at endline, more FTMs age 15-24 in the intervention HZs had high support of equitable gender norms (compared to their counterparts in the comparison HZs (56% versus 52%). Also, a lower percentage of FTMs in the comparison HZs had high support of equitable gender norms at baseline compared to those in the intervention HZs (39% versus 60%). Regardless of the starting points, the changes observed over time in both study arms were significant. Significant changes over time were observed for all the demographic subgroups in the comparison HZs, except for those who did not have two parents with secondary education. In the intervention HZs, the only significant change, a decrease, was observed among those who were employed.

Among FTMs age 15-19, a lower percentage of FTMs living in the comparison HZs had high support of equitable gender norms at baseline compared to those living in the intervention HZs (37% versus 58%). By the endline survey, a significant increase of 11 percentage points was observed in the comparison HZs whereas in the intervention HZs, the percentage of FTMs with high support for gender-equitable norms remained the same. In the 20-24 age group, there was also a significant increase in the percentage with high support of equitable gender norms (16 percentage points) in the comparison HZs, but a significant decrease of 8 percentage points in the intervention HZs.

More FTMs age 15-24 in the interventions HZs had high equitable attitudes toward gender roles (as measured by the equity subscale) compared to their peers in the comparison HZs, regardless of the survey round (Table 6.13). At endline, two-thirds of the FTMs (66%) in the intervention HZs had high equitable attitudes toward gender roles, but only three in five FTMs (60%) in the comparison HZs fell in the high category. Among FTMs age 15-24 in the intervention HZs, significant changes occurred over time among those living in the wealthiest household. The percentage of FTMs with high equitable attitudes toward gender roles decreased from 73% at baseline to 64% at endline. In the comparison HZs, significant increases over time were observed in all sociodemographic subgroups analyzed except those who were never married, lived in the poorest households, had not watched TV at least once a week, and did not have two parents with secondary/higher education. In the 15-19 age group, comparison HZs had a significant increase in the percentage with high equitable attitudes toward gender roles (about seven percentage points) whereas in the

Table 6.11 Percentage of FTMs age 15-24 who agree with specific statements about attitudes towards gender equity/roles and average gender equity scores, by age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Gender-role Attitude	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
Men need sex more than women do	87.9	89.7	ns	90.6	87.7	ns	81.9	86.9	*	85.9	88.2	ns	84.6	88.2	ns	88.3	87.9	ns
You don't talk about sex, you just do it [a]	54.4	55.6	ns	47.0	49.3	ns	54.1	54.5	ns	45.8	49.7	ns	54.3	55.0	ns	46.4	49.5	ns
It is a woman's responsibility to avoid getting pregnant [a]	81.3	74.5	*	66.7	64.9	ns	78.9	73.1	ns	65.1	67.9	ns	80.0	73.8	**	65.9	66.4	ns
A man should have the final word about decisions in his home [a]	82.7	86.6	ns	79.3	80.5	ns	81.0	86.7	*	77.3	80.9	*	81.7	86.6	*	78.3	80.7	**
Men are always ready to have sex [a]	83.6	89.5	*	88.5	86.9	ns	81.3	87.0	*	84.2	85.2	ns	82.4	88.2	**	86.4	86.1	ns
A woman should tolerate violence to keep her family together [a]	52.2	42.4	**	40.5	41.3	ns	48.0	42.5	**	40.5	44.1	ns	49.9	42.4	***	40.5	42.7	ns
A man needs other women even if things with his wife are fine [a]	61.5	51.3	***	42.7	43.9	ns	56.0	39.4	***	45.2	43.0	ns	58.5	44.8	***	43.9	43.5	ns
A man can hit his wife if she won't have sex with him [a]	48.7	43.5	*	29.2	33.7	*	42.3	30.9	***	26.3	36.4	***	45.2	36.6	***	27.8	35.0	**
A couple should decide together if they want to have children	86.6	90.7	ns	89.7	90.8	ns	91.2	93.7	ns	90.8	93.6	***	89.1	92.3	*	90.3	92.1	**
Changing diapers, giving a bath, and feeding kids is the mother's responsibility [a]	82.7	67.7	***	66.3	61.0	**	83.0	64.2	***	63.0	58.7	ns	82.9	65.8	***	64.7	59.9	*
A woman can suggest using condoms just like a man can	69.7	70.8	ns	66.7	76.2	**	74.1	74.7	ns	70.2	76.4	**	72.1	72.9	ns	68.4	76.3	***
A man should know what his partner likes during sex	84.5	93.6	***	93.0	93.2	ns	91.8	96.0	*	94.9	96.4	ns	88.5	94.9	***	93.9	94.8	ns
A man and a woman should decide together what type of contraceptive to use	82.7	91.6	***	88.7	93.0	*	90.9	94.3	ns	89.1	94.6	**	87.1	93.1	***	88.9	93.8	***
A real man produces a male child [a]	40.1	32.8	*	31.8	30.0	ns	28.2	26.7	ns	27.2	28.9	ns	33.6	29.5	ns	29.6	29.5	ns
Men and women should share household chores	23.2	24.8	ns	36.6	33.9	*	23.8	28.4	ns	39.2	32.5	*	23.5	26.8	ns	37.8	33.2	***
A woman should not initiate sex [a]	47.2	43.3	ns	41.1	42.9	ns	44.4	41.0	*	33.4	43.5	**	45.6	42.0	*	37.3	43.2	*
Average score (SD)																		
GEM Scale	2.94 (2.077)	3.45 (2.247)	**	4.03 (2.319)	3.93 (2.312)	ns	3.22 (2.141)	3.92 (2.428)	***	4.37 (2.374)	3.90 (2.560)	*	3.31 (2.115)	3.71 (2.358)	***	4.20 (2.351)	3.92 (2.435)	*
Equity subscale of gender relations scale	6.49 (2.001)	7.23 (2.534)	***	7.85 (2.509)	7.90 (2.557)	ns	7.07 (2.368)	7.88 (2.620)	***	8.31 (2.609)	7.91 (2.778)	*	6.81 (2.311)	7.58 (2.600)	***	8.07 (2.567)	7.90 (2.666)	ns
N	**878**			**974**			**1,050**			**934**			**1,928**			**1,908**		

*** p <.001; ** p < .01; * p < .05; ns – not significant

Note: Statements included in the GEM scale are denoted by a and the score ranges from 0 – 10 for T1 and T2; All statements were included in the equity subscale and the score ranges from 0 – 15 for T1 and 0 – 16 for T2

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 6.12 Percentage of FTMs age 15-24 with high gender-equitable attitudes (GEM scale), by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	36.1	45.9	**	57.5	57.0	ns	41.1	49.7	ns	63.5	51.9	*	37.7	47.2	**	59.5	55.3	ns
Secondary complete/higher	39.7	56.2	*	58.4	55.4	ns	40.0	59.7	***	62.6	56.5	ns	40.0	59.1	***	61.5	56.2	ns
Never married																		
No	36.9	48.6	**	59.6	57.6	ns	39.6	55.3	***	63.8	56.5	*	38.5	52.8	***	61.8	57.0	ns
Yes	36.4	46.2	ns	54.3	54.9	ns	43.4	59.3	*	60.4	48.6	ns	39.1	51.2	**	56.7	52.5	ns
Household wealth																		
Low	34.8	45.8	ns	52.5	54.0	ns	35.1	50.0	*	63.6	54.5	ns	34.9	47.8	**	57.3	54.2	ns
Medium	36.5	48.6	*	61.6	63.4	ns	41.1	58.9	**	61.3	52.0	ns	39.0	54.3	***	61.5	58.1	ns
High	39.0	48.5	ns	61.1	51.3	ns	43.1	57.8	**	63.8	57.1	ns	41.5	54.2	**	62.7	54.7	ns
Worked last year																		
No	35.2	46.9	**	51.1	55.0	ns	39.4	54.7	**	60.5	50.4	*	37.2	50.6	***	55.4	52.9	ns
Yes	40.9	49.6	ns	71.8	60.3	*	41.5	58.1	**	66.5	60.7	ns	41.3	55.3	***	68.9	60.5	*
Watched TV at least once a week																		
No	38.1	48.8	*	59.6	55.1	ns	43.3	52.4	ns	64.6	55.3	ns	40.8	50.7	**	61.8	55.2	ns
Yes	35.8	46.9	**	56.4	57.8	ns	38.8	58.3	***	62.1	54.2	ns	37.4	53.2	***	59.3	56.0	ns
Both parents have secondary/higher education																		
No	36.7	43.9	ns	57.5	59.8	ns	42.0	54.0	ns	61.7	49.5	ns	39.4	49.0	ns	59.8	54.1	ns
Yes	36.7	48.7	**	57.8	56.0	ns	40.0	56.7	***	63.3	56.1	*	38.5	53.1	***	60.4	56.1	ns
Total	36.7	47.6	**	57.7	56.7	ns	40.4	56.2	***	63.0	54.6	*	38.7	52.3	***	60.3	55.7	*
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns – not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 6.13 Percentage of FTMs age 15-24 with high equitable attitudes towards gender roles (equity subscale), by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	47.0	52.2	ns	65.3	66.6	ns	50.3	60.0	ns	73.0	60.8	*	48.1	54.8	*	67.8	64.7	ns
Secondary complete/higher	50.7	65.8	ns	75.2	72.3	ns	58.5	67.4	*	72.3	67.3	ns	57.1	67.1	**	73.1	68.6	ns
Never married																		
No	47.1	55.3	ns	67.8	68.8	ns	54.4	65.0	**	73.0	66.6	ns	51.6	61.3	***	70.6	67.6	ns
Yes	48.4	53.3	ns	66.5	65.9	ns	60.2	63.7	ns	71.2	58.6	ns	52.9	57.2	ns	68.3	63.0	ns
Household wealth																		
Low	47.1	52.9	ns	60.4	66.8	ns	52.2	58.2	ns	74.7	64.9	ns	49.5	55.4	ns	66.6	66.0	ns
Medium	46.6	56.1	ns	73.3	72.1	ns	56.1	66.7	*	69.3	64.7	ns	51.8	61.9	**	71.4	68.6	ns
High	49.3	54.4	ns	70.8	62.8	ns	57.3	67.3	*	73.6	64.4	ns	54.2	62.2	*	72.5	63.8	*
Worked last year																		
No	48.1	54.0	ns	61.3	65.6	ns	54.0	61.9	ns	71.4	60.1	**	50.9	57.7	*	65.9	63.1	ns
Yes	46.1	55.7	ns	80.1	72.4	ns	57.6	68.2	*	74.3	71.2	ns	53.8	64.1	**	76.9	71.8	ns
Watched TV at least once a week																		
No	49.4	54.8	ns	69.2	65.7	ns	58.8	63.1	ns	76.4	66.5	ns	54.4	59.2	ns	72.4	66.0	ns
Yes	46.5	54.2	ns	66.1	69.2	ns	53.8	65.7	**	70.6	63.7	ns	50.6	60.6	***	68.4	66.4	ns
Both parents have secondary/higher education																		
No	42.9	53.1	ns	60.9	66.7	ns	56.0	65.0	ns	75.7	59.8	*	49.5	59.1	ns	69.1	62.9	ns
Yes	49.0	54.8	ns	68.8	68.0	ns	55.5	64.7	**	71.7	66.1	ns	52.6	60.3	**	70.1	67.1	ns
Total	47.6	54.4	*	67.4	67.8	ns	55.6	64.8	**	72.6	64.7	**	52.0	60.1	***	69.9	66.2	ns
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns – not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

intervention HZs, levels remained the same. Despite the significant increase in the comparison HZs, more FTMs age 15-19 in the intervention HZs had high equitable attitudes toward gender roles at endline compared to those in the comparison HZs (68% versus 54%). Interestingly, there was no significant differences between survey rounds for any of the sociodemographic subgroups, regardless of study arm.

Among FTMs age 20-24, there was a significant increase over time in the comparison HZs (from 56% to 65%) while in the intervention HZs, there was a significant decrease over time (from 73% to 65%) in the percentage with high equitable attitudes toward gender roles, such that both study arms had the same level of support for equitable gender roles at endline. In the comparison HZs, the largest change over time was observed among those who watched TV at least once a week (54% to 66%) and in the intervention HZs, among those without two parents with secondary/higher education (76% to 60%).

6.5 Perceived Power in Relationship

Perceived power was measured using the power subscale of the GRS (Nanda, 2011) and constructed using the approach that was used for the equity subscale. The power subscale was made of seven items and a higher score on the scale indicated more perceived power in a relationship (range 0-7, baseline α: 0.562, endline α: 0.547). Table 6.14 presents information on the score as well as the percentage who agreed with the individual statements in the scale. There were significant changes in the perceived power score over time for FTMs age 15-24 in the comparison HZs (3.6 to 3.8) and intervention HZs (3.9 to 4.0). When disaggregated by age group, significant changes over time were only observed among FTMs age 15-19 in the comparison HZs (3.4 to 3.6). Further analysis suggested that, in each study arm and survey round, there were significant age differences in FTMs' perceived power. Older FTMs had higher perceived power than younger FTMs. For example, at endline, in the comparison HZs, FTMs age 15-19 scored 3.7 while older FTMs scored 3.9 ($p=0.005$); in the intervention HZs, FTMs age 15-19 scored 3.9 and those age 20-24 scored 4.1 ($p=0.009$).

Using the median split approach, a dichotomous variable was created for the perceived power score. Scores at/above the median were categorized as high perceived power and those below the median were categorized as low perceived power. Table 6.15 shows the percentage with high perceived power according to the baseline characteristics by age group, survey round and study arm. Over half of the FTMs age 15-24 had high perceived power in each study arm and survey round. In the comparison HZs, the percentage of those with high perceived power increased from 52% at baseline to 56% at endline while in the intervention HZs, it increased from 56% to 59%. Neither increase was statistically significant. In the overall sample, the only sociodemographic subgroups that had a statistically significant increase in perceived power over time were FTMs without weekly TV exposure in the comparison HZs and FTMs living in medium-wealth households in the intervention HZs.

In both the baseline and endline surveys, a lower percentage of FTMs in the comparison HZs had high perceived power compared to their counterparts in the intervention HZs (45% versus 53%). However, both the comparison HZs and the intervention HZs had similar absolute increases in the percentage of FTMs with high perceived power (comparison HZs: eight percentage points; intervention HZs: seven percentage points), which were statistically significant. Among FTMs age 15-19 in the comparison HZs, three sociodemographic subgroups had significant increases in high perceived power: unemployed FTMs (eight percentage points), those without weekly TV exposure (13 percentage points), and those with more educated parents (nine percentage points). In the intervention HZs, the following sociodemographic subgroups of 15-19-year-olds saw significant increases in the percentage with high perceived power: FTMs with less education (eight percentage points), those in medium-wealth households (14 percentage points), those with weekly TV exposure (nine percentage points), and those with more educated parents (eight percentage points).

Table 6.14 Percentage of FTMs age 15-24 who agree with specific statements about perceived power in a relationship and average power scores, by age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Perceived Personal Agency	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**
My partner has more say than I do about important decisions that affect us	69.5	71.8	ns	64.7	72.1	*	65.1	74.3	**	63.0	69.2	ns	67.1	73.1	*	63.8	70.7	**
I am more committed to this relationship than my partner is	44.6	36.9	*	26.1	29.6	ns	40.6	34.7	ns	26.8	32.3	*	42.4	35.7	**	26.4	30.9	*
A woman should be able to talk openly about sex with her husband	77.7	89.5	***	85.4	89.7	ns	84.2	91.4	**	87.8	92.3	**	81.2	90.6	***	86.6	91.0	**
My partner dictates who I spend time with	70.8	66.7	ns	69.2	66.7	ns	70.5	65.3	*	66.6	61.2	ns	70.6	66.0	*	67.9	64.0	ns
When my partner and I disagree, he gets his way most of the time	60.1	68.1	**	52.2	62.8	**	59.4	63.2	ns	55.9	57.6	ns	59.8	65.5	**	54.0	60.3	*
I feel comfortable discussing family planning with my partner	69.5	76.1	ns	74.5	84.4	***	82.3	84.8	ns	82.4	88.9	**	76.5	80.8	*	78.4	86.6	***
I feel comfortable discussing HIV with my partner	74.0	76.3	ns	74.1	80.7	*	85.0	84.6	ns	81.4	87.2	*	80.0	80.8	ns	77.7	83.9	**
Total	100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0	
Average score (SD)																		
Power subscale of gender relations scale	3.38 (1.401)	3.58 (1.382)	**	3.83 (1.553)	3.89 (1.374)	ns	3.77 (1.296)	3.93 (1.354)	ns	4.06 (1.524)	4.13 (1.418)	ns	3.59 (1.358)	3.81 (1.371)	**	3.94 (1.543)	4.01 (1.400)	ns
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns – not significant
Note: Power subscale ranges from 0 – 7 for T1 and T2
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 6.15 Percentage of FTMs age 15-24 with high perceived power, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**
FTM's highest level of education																		
None/primary/secondary incomplete	44.8	51.9	ns	51.8	59.3	*	55.7	52.4	ns	54.0	55.6	ns	48.5	52.1	ns	52.5	58.1	ns
Secondary complete/higher	47.9	58.9	ns	57.4	62.4	ns	58.2	62.4	ns	62.9	61.2	ns	56.4	61.7	ns	61.5	61.5	ns
Never married																		
No	46.7	53.3	ns	52.2	59.6	ns	55.8	58.0	ns	58.7	59.0	ns	52.3	56.2	ns	55.7	59.3	ns
Yes	43.5	52.7	ns	54.3	60.7	ns	62.8	61.9	ns	61.3	58.6	ns	50.8	56.2	ns	57.0	59.9	ns
Household wealth																		
Low	43.9	51.6	ns	52.0	59.4	ns	52.2	57.5	ns	56.5	54.5	ns	47.8	54.3	ns	53.9	57.3	ns
Medium	43.9	48.6	ns	46.5	61.0	**	56.1	60.0	ns	54.7	58.7	ns	50.6	54.9	ns	50.3	59.9	*
High	48.5	59.6	ns	64.6	59.3	ns	61.6	58.8	ns	66.3	63.2	ns	56.5	59.1	ns	65.6	61.6	ns
Worked last year																		
No	42.9	50.9	*	54.4	60.7	ns	56.7	58.1	ns	59.8	56.5	ns	49.4	54.3	ns	56.8	58.8	ns
Yes	52.2	59.1	ns	50.0	58.3	ns	58.1	59.7	ns	58.6	62.3	ns	56.1	59.5	ns	54.8	60.5	ns
Watched TV at least once a week																		
No	40.5	53.6	*	55.1	58.6	ns	51.9	59.4	ns	59.6	55.9	ns	46.5	56.6	**	57.1	57.4	ns
Yes	48.3	52.8	ns	51.6	60.9	*	60.4	58.6	ns	59.2	60.5	ns	55.0	56.0	ns	55.5	60.7	ns
Both parents have secondary/higher education																		
No	43.9	46.9	ns	49.4	54.0	ns	54.0	66.0	ns	61.7	58.9	ns	49.0	56.6	ns	56.2	56.7	ns
Yes	45.7	54.8	*	53.7	61.3	*	58.1	57.2	ns	58.6	58.9	ns	52.6	56.1	ns	56.1	60.1	ns
Total	45.3	53.1	*	53.0	60.0	*	57.3	58.9	ns	59.3	58.9	ns	51.9	56.2	ns	56.1	59.4	ns
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns – not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Among FTMs age 20-24, none of the changes observed over time, including those observed within the sociodemographic subgroups, were statistically significant. The percentage with high perceived power increased slightly over time in the comparison HZs (57% to 59%) but remained about the same in the intervention HZs (59% to 59%).

6.6 Perceived Self-efficacy

The generalized self-efficacy scale was adopted to measure the FTM's perceived self-efficacy. The 10-item validated scale was developed to evaluate coping with daily living at a point in time, and it is believed that perceived self-efficacy facilitates goal setting, persistence when faced with barriers, and recovery from setbacks (Schwarzer & Jerusalem, 1995). The items were summed, and the score created ranges from 10 to 40. A higher score on a scale indicates greater self-efficacy or confidence to successfully face barriers, recover from setbacks, manage an illness or follow through with behavior change. In addition to the score, a dichotomous variable (high versus low) was created using the median split approach. FTM with scores above the medium were assigned to the high category and those with scores below the median were assigned to the low category

Table 6.16 presents mean perceived self-efficacy scores of FTMs age 15-24 as well as the percentage who agreed that the statements in the scale were always true. The mean score of FTMs age 15-24 in the comparison HZs increased significantly over time from 29.6 to 30.3 and for those in the intervention HZs, their scores increased from 28.9 to 30.9. This increase over time was greater in the intervention HZs than in the comparison HZs, and the intervention HZs had a slightly lower score than the comparison HZs at baseline (28.9 versus 29.6). This baseline difference in scores between the comparison HZs and intervention HZs was statistically significant ($p=0.011$); however, the endline difference was not (comparison HZs: 30.6; intervention HZs: 30.9; $p=0.3152$). It was anticipated that the self-efficacy of FTMs in the intervention HZs would increase. However, the increase was significant in both the intervention and comparison HZs for the overall sample as well as for both age groups. The only exception were FTMs age 15-19 in the comparison HZs. The degree of change was higher in the intervention HZs than in the comparison HZs, regardless of age group. Among FTMs age 15-19, the mean score of those in the intervention HZs increased by 2.3 points (from 28.2 at baseline to 30.4 at endline); the comparison HZs saw a 0.6-point increase (from 28.8 to 29.4). Among FTMs age 20-24, the mean score of those in the intervention HZs increased by 1.76 points (from 29.7 to 31.4) while the comparison HZs was a 1.36-point increase in mean perceived self-efficacy (from 30.3 to 31.7). The results also indicate that older FTMs had higher scores than younger FTMs, regardless of study arm and survey round.

In each study arm and age group, less than half of the FTMs age 15-24 believed that any of the 10 statements in the generalized self-efficacy scale were always true. For all but two statements, there was an increase in the percentage who felt the statement was always true. At endline, the statements with the highest level of endorsement by FTMs age 15-24 in the intervention HZs was "If I am in trouble, I can usually think of a solution" (43%) and, in the comparison HZs, they were: "I can always manage to solve difficult problems if I try hard enough" (42%), "I can solve most problems if I invest the necessary effort" (41%), and "If I am in trouble, I can usually think of a solution" (41%). In both study arms, the statement that was least endorsed by FTMs age 15-24 at endline was "Thanks to my resourcefulness, I know how to handle unforeseen situations" (24% in comparison and intervention HZs).

Endorsement of some of the self-efficacy statements increased significantly between the baseline and endline surveys, but decreased significantly for other statements. The directions of change were not always the same in the comparison and intervention HZs. In the total sample, endorsement of the following statements increased significantly in both study arms:

- "I can always manage to solve difficult problems if I try hard enough."
- "Thanks to my resourcefulness, I know how to handle unforeseen situations."

Table 6.16 Percentage of FTMs age 15-24 who reported specific statements about self-efficacy as always true and average self-efficacy scores, by age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Self-efficacy statements	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**
I can always manage to solve difficult problems if I try hard enough	31.9	36.2	**	35.7	37.0	***	38.1	46.5	**	42.6	43.9	**	35.3	41.8	***	39.1	40.4	***
If someone opposes me, I can find the means and ways to get what I want	35.8	27.6	***	29.0	35.1	***	39.2	37.5	ns	35.8	38.8	ns	37.7	33.0	***	32.3	36.9	**
It is easy for me to stick to my aims and accomplish my goals	37.1	27.6	***	36.8	35.9	ns	39.8	39.8	ns	41.5	40.0	ns	38.6	34.2	***	39.1	37.9	ns
I am confident that I could deal efficiently with unexpected events	29.6	26.7	**	29.4	31.2	***	35.0	36.6	***	30.0	37.9	**	32.6	32.1	***	29.7	34.5	***
Thanks to my resourcefulness, I know how to handle unforeseen situations	19.6	20.7	***	12.5	23.0	***	22.1	26.3	***	17.1	24.6	***	21.0	23.8	***	14.8	23.8	***
I can solve most problems if I invest the necessary effort	33.0	35.3	***	34.9	38.2	***	32.8	45.3	***	37.0	45.8	**	32.9	40.8	***	36.0	41.9	***
I can remain calm when facing difficulties because I can rely on my coping abilities	46.0	34.4	***	32.0	40.7	***	50.3	43.0	***	36.4	43.9	***	48.3	39.1	***	34.2	42.2	***
When I am confronted with a problem, I can usually find several solutions	29.6	26.0	ns	34.1	34.9	**	36.0	37.1	ns	36.2	39.0	***	33.1	32.1	*	35.1	36.9	***
If I am in trouble, I can usually think of a solution	39.0	33.0	***	43.9	39.2	*	43.4	48.0	**	49.3	47.5	ns	41.4	41.2	***	46.5	43.3	**
I can usually handle whatever comes my way	30.1	29.8	ns	25.7	34.7	***	38.7	40.0	ns	31.7	39.6	***	34.8	35.4	ns	28.6	37.1	***
Total	100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0		100.0	100.0	
Average score (SD)																		
Self-efficacy scale	28.82 (6.436)	29.40 (6.419)	ns	28.15 (6.746)	30.41 (6.072)	***	30.30 (5.896)	31.66 (6.055)	***	29.67 (6.099)	31.43 (5.738)	***	29.63 (6.189)	30.63 (6.322)	**	28.90 (6.479)	30.91 (5.930)	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns – not significant

Note: Selef-efficacy scale ranges from

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

- "I can solve most problems if I invest the necessary effort."

However, endorsement of the following statements decreased significantly in the comparison HZs but increased significantly or remained unchanged in the intervention HZs.

- "If someone opposes me, I can find the means and ways to get what I want."
- "It is easy for me to stick to my aims and accomplish my goals."
- "I am confident that I could deal efficiently with unexpected events."
- "I can remain calm when facing difficulties because I can rely on my coping abilities."
- "When I am confronted with a problem, I can usually find several solutions."

In the total sample, the only statement for which endorsement declined significantly in both study arms was "If I am in trouble, I can usually think of a solution."

Among FTMs age 15-19 in the comparison HZs, the largest absolute change was observed for the statement "I can remain calm when facing difficulties because I can rely on my coping abilities," but it was not in the expected direction (a decrease of 12 percentage points). Among the same-age FTMs in the intervention HZs, the largest change was observed with the statement "Thanks to my resourcefulness, I know how to handle unforeseen situations" and it was in the expected direction (increase by 11%). For FTMs age 20-24, the largest change in both the comparison and intervention HZs was with the statement "I can solve most problems if I invest the necessary effort" (increase by 13% and 9%, respectively). In both age groups, the lowest proportion of FTMs felt the statement "Thanks to my resourcefulness, I know how to handle unforeseen situations" was always true regardless of the study arm.

Table 6.17 shows that the percentage of FTMs age 15-24 with high self-efficacy significantly increased over time in both study arms, but the absolute change was greater in the intervention HZs. For FTMs in the intervention HZs, the percentage increased from 48% to 60% and for those in the intervention HZs, it increased from 52% to 59%. Significant increases were observed for all the sociodemographic subgroups of FTMs age 15-24 in the intervention HZs, and the largest absolute increase was seen among FTMs who did not watch TV at least once a week. In the comparison HZs, there were significant increases for FTMs with less education, those who had been married, lived in the wealthiest households, were unemployed last year, did not watch TV at least once a week, and had more educated parents. Among FTMs age 15-19, there was a significant increase in the percentage with high self-efficacy in the intervention HZs (13 percentage points), but not in the comparison HZs (three percentage points). Among FTMs age 20-24, a significant increase in the percentage with high self-efficacy was observed in both study arms. Additionally, at endline, more FTMs age 20-24 in the comparison HZs had high self-efficacy compared to those in the intervention HZs (66% versus 62%).

6.7 Ability to Negotiate Sexual Relations

A woman's ability to negotiate sexual relations, such when to have sex and whether to use a condom, has important implications for demographic and health outcomes such as transmission of sexually transmitted infections and HIV, and is also an indicator of a woman's autonomy. In both survey rounds, FTMs in a union (currently married, living with partner or unmarried with a romantic partner) were asked if they could say no to their male partner if they did not want to have sex and if they could ask their male partner to use a condom if they wanted to. These data are presented in Table 6.18 and 6.19.

Over seven in ten FTMs age 15-24 shared that they could say no to their partner if they did not want to engage in sexual intercourse, regardless of survey round and study arm (Table 6.18). Differences between the baseline and endline estimates were not statistically significant overall, and among younger and older FTMs, regardless of study arm. Changes over time in the comparison and intervention HZs were not statistically significant for any of the sociodemographic subgroups except FTMs living in medium-wealth households (an increase from 70% to 79%) and employed FTMs (an increase from 73% to 82%) in the intervention HZs. Among FTMs age 15-19, the percentage of FTMs who could say no stayed the same in the comparison HZs (77%) but increased in the intervention HZs (74% to 77%). In the latter HZs, FTMs age

Table 6.17 Percentage of FTMs age 15-24 with high self-efficacy, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**
FTM's highest level of education																		
None/primary/secondary incomplete	45.6	49.2	ns	42.2	53.4	**	47.6	59.5	*	38.6	52.4	*	46.3	52.6	*	41.0	53.0	***
Secondary complete/higher	56.2	56.2	ns	53.5	74.3	**	61.5	68.8	*	61.9	68.7	ns	60.5	66.6	ns	59.6	70.2	**
Never married																		
No	45.1	54.1	*	47.5	57.0	*	59.5	69.4	*	53.1	64.3	**	54.0	63.6	***	50.4	60.9	***
Yes	50.5	45.1	ns	39.3	59.0	***	46.0	51.3	ns	50.5	55.0	ns	48.8	47.5	ns	43.7	57.4	**
Household wealth																		
Low	47.7	46.5	ns	40.1	55.0	**	50.7	53.0	ns	49.4	57.1	ns	49.1	49.5	ns	44.1	55.9	**
Medium	43.9	43.2	ns	47.1	55.2	ns	58.3	65.6	ns	54.0	66.0	*	51.8	55.5	ns	50.3	60.2	*
High	50.7	62.5	ns	48.7	66.4	**	58.8	73.5	**	54.0	63.2	ns	55.6	69.2	***	51.8	64.5	**
Worked last year																		
No	47.8	49.7	ns	45.9	57.7	**	52.6	68.2	***	52.5	63.8	**	50.1	58.4	**	48.9	60.5	***
Yes	46.1	52.2	ns	41.7	57.7	**	61.4	62.3	ns	52.4	59.7	ns	56.4	59.0	ns	47.6	58.8	**
Watched TV at least once a week																		
No	43.5	49.4	ns	37.9	56.6	***	53.5	63.1	ns	46.0	55.9	ns	48.7	56.6	*	41.5	56.3	***
Yes	49.8	50.9	ns	49.1	58.5	*	58.3	66.9	*	55.9	65.4	*	54.5	59.8	ns	52.6	62.0	**
Both parents have secondary/higher education																		
No	44.9	48.0	ns	39.1	54.0	ns	52.0	57.0	ns	43.0	55.1	ns	48.5	52.5	ns	41.2	54.6	**
Yes	48.1	51.0	ns	45.8	58.5	***	57.6	67.5	**	55.3	64.2	*	53.4	60.2	**	50.3	61.2	***
Total	47.4	50.3	ns	44.6	57.7	***	56.6	65.5	**	52.5	62.1	**	52.4	58.6	**	48.4	59.9	***
N	**439**			**487**			**525**			**467**			**964**			**954**		

*** p <.001; ** p < .01; * p < .05; ns – not significant

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 6.18 Percentage of FTMs age 15-24 in a union who will say no to their partner if they do not want to engage in sexual intercourse, by baseline characteristics, age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**	**T1**	**T2**	**Sig**
FTM's highest level of education																		
None/primary/secondary incomplete	77.1	77.5	ns	73.6	77.5	ns	78.9	76.8	ns	71.4	77.6	ns	77.7	77.2	ns	72.9	77.5	ns
Secondary complete/higher	77.1	73.3	ns	77.2	76.1	ns	79.9	78.1	ns	76.6	78.3	ns	79.4	77.3	ns	76.8	77.7	ns
Never married																		
No	76.0	75.1	ns	73.4	76.4	ns	78.5	75.9	ns	75.2	78.0	ns	77.6	75.6	ns	74.4	77.2	ns
Yes	78.7	79.4	ns	76.6	78.9	ns	83.5	84.5	ns	72.0	78.3	ns	80.6	81.5	ns	74.8	78.6	ns
Household wealth																		
Low	77.6	78.0	ns	72.9	71.5	ns	79.2	75.4	ns	80.7	78.9	ns	78.3	76.7	ns	76.4	74.9	ns
Medium	77.9	77.4	ns	71.9	82.5	*	76.7	79.9	ns	68.5	75.9	ns	77.2	78.8	ns	70.3	79.3	*
High	75.8	74.8	ns	81.0	78.7	ns	82.1	77.2	ns	74.3	79.3	ns	79.7	76.3	ns	77.0	79.0	ns
Worked last year																		
No	76.3	77.0	ns	75.5	73.9	ns	78.3	78.6	ns	75.3	76.5	ns	77.3	77.8	ns	75.4	75.1	ns
Yes	79.3	76.1	ns	72.1	84.1	*	81.0	76.5	ns	73.5	80.1	ns	80.5	76.4	ns	72.9	81.8	**
Watched TV at least once a week																		
No	74.4	75.6	ns	74.4	76.9	ns	79.1	77.1	ns	78.0	79.9	ns	76.9	76.4	ns	76.1	78.3	ns
Yes	78.8	77.4	ns	74.4	77.4	ns	79.8	78.0	ns	72.8	77.0	ns	79.4	77.7	ns	73.6	77.2	ns
Both parents have secondary/higher education																		
No	74.4	67.7	ns	75.3	80.6	ns	79.4	76.1	ns	70.4	75.0	ns	77.0	72.6	ns	72.5	77.4	ns
Yes	77.9	78.8	ns	74.3	76.5	ns	79.6	78.0	ns	75.7	78.9	ns	78.8	78.4	ns	75.0	77.7	ns
Total	77.1	76.8	ns	74.4	77.2	ns	79.5	77.6	ns	74.5	78.0	ns	78.5	77.3	ns	74.5	77.6	ns
N	**411**			**446**			**513**			**440**			**924**			**886**		

*** p <.001; ** p < .01; * p < .05; ns – not significant

Pertains only to women in a union (currently married, living with partner or have a romantic partner) at time of interview

Note: 97 FTMs in the comparison HZs (15 – 19: 58 FTMs; 20 – 24: 39 FTMs) and 91 FTMs in the intervention HZs (15 – 19: 56 FTMs; 20 – 24: 35 FTMs) had missing responses at endline

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

15-19 living in medium-wealth households and those who were employed last year were the only sociodemographic subgroups with significant increases in the ability to say no to unwanted sexual activity.

Among FTMs age 20-24, none of the changes in the percentage of FTMs who could say no were statistically significant, irrespective of study arm and sociodemographic characteristics. Compared to those who stated they could say no to unwanted sexual activity, fewer FTMs age 15-24 reported they could ask their male partner to use a condom if they wanted to (Table 6.19). In the comparison HZs, 63% of FTMs could ask and by endline, this had increased by 6 percentage points. The absolute change in the intervention HZs was about twice as large as in the comparison HZs: at baseline, about 61% of FTM in the intervention HZs could ask their partner to use a condom and by the endline 74% stated that they could. The observed change was statistically significant in both study arms. All sociodemographic subgroups in the intervention HZs had statistically significant changes in FTMs' perceived ability to request condom use, with the highest absolute change occurring among those living in medium-wealth households. Those women saw an 18 percentage points increase between the baseline and endline surveys. In the comparison HZs, significant changes were seen in fewer sociodemographic subgroups. These subgroups included FTMs age 15-24 with less education, high household wealth, who had been married, were employed, watched TV at least once a week, and had two parents with secondary education.

At endline, more FTMs age 15-19 in the intervention HZs than in the comparison HZs reported that they could ask their partner to use a condom if they wanted to. The percentage of FTMs in the comparison HZs who could ask increased from 59% at baseline to 67% at the endline, while in the intervention HZs, the percentage increased from 59% to 73%. The change over time was significant in both study arms. In the comparison HZs, significant increases were detected among FTMs age 15-19 with less education, who had been married, had low household wealth, were employed last year, did not watch TV weekly, and had two parents with secondary/higher education. The perceived ability to request condom use was more common among older than younger FTMs. In the 20-24 age group, the increase in perceived ability to request condom use was much larger among FTMs in the intervention HZs than among those in the comparison HZs (13 percentage points versus four percentage points. This increase was statistically significant in the intervention HZs but not in the comparison HZs. In the latter HZs, none of the sociodemographic subgroups had significant changes in FTMs' perceived ability to request condom use. over time. In the intervention HZs, significant changes were seen in the sociodemographic subgroups of FTMs age 20-24, except among those who were never married, lived in the poorest households, and had less educated parents.

Table 6.19 Percentage of FTMs age 15-24 in a union who could ask their male partner to use a condom if they wanted him to, by age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Baseline Characteristics	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
FTM's highest level of education																		
None/primary/secondary incomplete	58.9	67.6	*	56.2	73.5	***	61.7	67.7	ns	60.0	71.4	*	59.9	67.6	*	57.5	72.8	***
Secondary complete/higher	58.6	63.3	ns	70.3	72.7	ns	68.5	71.9	ns	63.4	77.5	**	66.7	70.5	ns	65.3	76.2	**
Never married																		
No	54.5	68.2	**	60.7	72.3	**	67.1	70.3	ns	61.7	75.2	***	62.4	69.5	**	61.2	73.9	***
Yes	65.1	64.7	ns	56.7	75.6	**	62.4	71.1	ns	63.4	74.7	ns	64.0	67.4	ns	59.4	75.2	***
Household wealth																		
Low	57.1	69.1	*	55.2	69.0	**	66.2	64.8	ns	64.8	74.4	ns	61.4	66.9	ns	59.5	71.5	**
Medium	59.6	60.9	ns	58.1	75.5	**	68.8	73.6	ns	58.0	75.9	**	64.7	68.2	ns	58.1	75.7	***
High	60.2	70.4	ns	68.6	77.5	ns	63.8	71.5	ns	63.2	74.8	*	62.4	71.1	*	65.4	75.9	*
Worked last year																		
No	57.7	66.7	*	58.2	73.1	***	64.1	67.7	ns	64.5	73.5	*	60.8	67.2	*	61.1	73.3	***
Yes	62.2	67.4	ns	62.1	73.8	*	68.5	73.7	ns	58.6	77.2	***	66.5	71.8	ns	60.1	75.8	***
Watched TV at least once a week																		
No	51.9	63.8	*	57.2	71.3	**	57.7	66.5	ns	61.3	80.6	***	55.0	65.3	**	59.1	75.7	***
Yes	63.1	68.6	ns	60.9	74.8	**	70.7	72.7	ns	62.4	72.0	*	67.4	70.9	ns	61.7	73.3	***
Both parents have secondary/higher education																		
No	54.4	61.5	ns	50.7	73.1	**	63.9	66.3	ns	68.4	79.3	ns	59.4	64.3	ns	60.8	76.7	**
Yes	60.1	68.1	*	61.1	73.4	**	66.6	71.5	ns	60.2	73.8	***	63.8	70.0	*	60.7	73.6	***
Total	58.9	66.9	*	59.4	73.3	***	66.1	70.5	ns	62.0	75.1	***	62.9	68.9	**	60.7	74.2	***
N	**764**			**836**			**987**			**845**			**1,751**			**1,681**		

*** p <.001; ** p < .01; * p < .05; ns – not significant
Pertains only to women in a union (currently married, living with partner or have a romantic partner) at time of interview
Note: 97 FTMs in the comparison HZs (15 – 19: 58 FTMs; 20 – 24: 39 FTMs) and 91 FTMs in the intervention HZs (15 – 19: 56 FTMs; 20 – 24: 35 FTMs) had missing responses at endline
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

7 IMPACT OF MOMENTUM ON PERCEIVED NORMS

Anastasia J. Gage

Key findings:

- MOMENTUM had greater impact on perceived norms among FTMs age 20-24 than among those age 15-19.
- In the 15-19 age group, MOMENTUM had greater impact on perceived norms among never married than ever married FTMs.
- MOMENTUM had no impact on the FTM's perception that her husband/male partner's mother would approve/approved of her use of PPFP or her practice of exclusive breastfeeding.
- MOMENTUM had significant impact on descriptive norms about kangaroo mother care (i.e., the perceived prevalence) but no impact on descriptive norms for partner discussion of PPFP before childbirth and for exclusive breastfeeding.
- The largest average treatment effects for injunctive norms were seen for referents who were religious leaders, even though they were not the most frequently listed referents:
    - Among never married FTMs age 20-24, MOMENTUM had significant impact on the perception that religious leaders would approve of the FTM's use of FP in the immediate postpartum period.
    - Among never married FTMs age 15-19, MOMENTUM had significant impact on the perception that religious leaders would approve of exclusive breastfeeding practices.

The objective of this chapter is to determine whether the average treatment effects for perceived social norms varies between FTMs who were never married and those who were ever married/formally engaged at baseline. We analyzed injunctive and descriptive norms as well as normative expectations for FP use within the first six weeks following childbirth, KMC for low-birthweight or preterm babies, and exclusive breastfeeding. For injunctive norms pertaining to PPFP and exclusive breastfeeding, we examined referent-specific changes in perceived approval of these behaviors. Unfortunately, data were not collected in both surveys on specific referents for KMC.

All outcomes were binary and measured in both the baseline and endline surveys. For each age and marital status subgroup, we used random-effects probit models and margins commands in Stata 16 to estimate the impact of MOMENTUM on perceived norms, with controls for baseline estimates of age, years of schooling, household wealth, ethnicity, parental attainment of secondary/higher education, and weekly TV exposure. The contrast between the marginal effect of the baseline and endline probabilities in the intervention and comparison HZs was the average treatment effect (ATE) in the probability metric, that is, the difference-in-differences of the outcome probabilities.

7.1 Postpartum Family Planning

In both the baseline and endline surveys, FTMs were asked to name to name five individuals or groups to whom they might listen when making general or FP-related decisions (normative referents). FTMs were then asked to rate whether each normative referent would approve or disapprove of their use of a contraceptive method within the first six weeks following childbirth (i.e., PPFP). As pointed out in Chapter 3, the FTM's mother and husband/male partner were the two most frequently mentioned referents for FP decisions. Table

7.1 presents changes in injunctive norms around the FTM's use of FP in the immediate postpartum period. The percentages were calculated based on the number of FTMs who listed the specific referent in the baseline or endline survey. It is most noteworthy that in the comparison HZs, there was not a significant change over time in the FTM's perceptions that specific referents would approve of her use of PPFP in the first six weeks following childbirth. In intervention HZs, increases in perceived referent approval of PPFP among FTMs age 15-19 were only significant for two referents: the husband/partner and other family members. In the age group 20-24, injunctive norm change was not statistically significant in comparison HZs, regardless of the type of referent. However, in intervention HZs, more FTMs age 20-24 perceived that the following referents approved of FP use in the immediate postpartum period in the endline survey than in the baseline survey: the FTM's mother, husband/male partner, sister, other family members, and religious leaders. For example, the percentage of FTM's who perceived that a religious leader would approve of the FTM's use of PPFP increased from 61% at baseline to 91% at endline. In comparison HZs, the only referent for which there was a significant increase in perceived approval of PPFP when both age groups were combined was the husband/partner's mother: from 77% at baseline to 88% at endline. In intervention HZs, significant changes in PPFP injunctive norms mirrored those observed for resident FTMs age 20-24.

In Table 7.2, we compared the ATEs measuring the impact of MOMENTUM on the FTM's perception that specific referents would approve of her use of FP in the first six weeks following childbirth. Regarding perceived approval of the FTM's mother, MOMENTUM had no impact on FTMs age 15-19. The ATEs showed that in the age group 20-24, MOMENTUM had a significant positive effect on never married FTMs' perception that their mother would approve on their use of PPFP. This impact was not detected among those who were ever married. Regarding FTMs' perception that their husband/male partner approved of PPFP use, in the age group 15-19, MOMENTUM had a significant impact among ever married FTMs but not among those who were never married. In the age group 20-24, the ATE was significant among FTMs who were never married. Their probability of perceiving that their husband/male partner approved of PPFP use was 19 percentage points higher than if none of these FTMs were exposed to MOMENTUM. When both age groups were combined, the ATEs associated with the FTM's perception that her husband/male partner would approve of PPFP was statistically significant among both ever married and never married FTMs but was considerably larger in the latter group (15 percentage points) than in the former (seven percentage points).

Regarding PPFP injunctive norm change for the FTM's other family members and the husband/male partner's mother, MOMENTUM had a significant effect on ever married FTMs' perception that other family members approved of their use of FP in the immediate postpartum period. However, this effect occurred only among those age 20-24. No impact was detected among FTMs age 15-19, regardless of marital status. MOMENTUM had no impact on the FTM's perception that her husband's or partner's mother approved of FP use in the immediate postpartum period regardless of age group and marital status. Among ever married FTMs, the ATE was negative, signifying a smaller change in perceived mother-in-law approval among FTMs exposed to MOMENTUM than among their counterparts who were not exposed to MOMENTUM.

Many of the named referents were not directly targeted by the MOMENTUM interventions. Therefore, it was not surprising that the ATEs for the FTM's friends were not significant regardless of the FTM's age and marital status. A surprising result was the significant ATE for religious leaders' perceived approval of the FTM's use of FP in the first six weeks following childbirth among never married FTMs age 20-24. Among never married 20–24-year-olds, the probability of perceiving that a religious leader approved of PPFP use was 64 percentage points higher than if none of these FTMs were exposed to MOMENTUM. When both age groups were combined, the ATEs associated with the FTM's perception that religious leaders approved of her use of PPFP were statistically significant among never married FTMs and equivalent to an increase of 33 percentage points in the probability. We also examined the FTM's perception that most referents (that is four or five of the referents she named) would approve of her use of FP in the first six weeks following childbirth.

Table 7.1 Percentage of FTMs age 15-24 who believe specific referents would approve of the FTM's use of PPFP in the first six weeks following childbirth, by age group and study arm, Kinshasa

	Age 15-19					Age 20-24					Total				
	Comparison		Intervention			Comparison		Intervention			Comparison			Intervention	
Named Family Planning Referents	**T1**	**T2**	**T1**	**T2**		**T1**	**T2**	**T1**	**T2**		**T1**	**T2**		**T1**	**T2**	
Mother	81.1	86.3	78.7	80.3		78.2	76.2	76.8	88.4	**	79.5	80.9		77.8	84.2	*
Father	80.6	85.1	85.2	84.1		89.8	78.8	78.2	88.3		85.5	81.6		81.8	86.0	
Husband/partner	78.6	73.1	77.2	85.4	*	78.8	75.8	78.6	86.8	**	78.7	74.7		77.9	86.2	***
Sister	87.4	88.5	81.7	85.2	**	84.2	84.4	81.8	92.6	***	85.6	86.3		81.7	88.8	**
Other family member	81.7	90.6	73.3	85.3		86.0	79.9	75.8	88.1	**	83.9	85.2		74.6	86.6	***
Husband/partner's mother	76.2	90.7	87.2	90.3		77.6	85.8	80.5	91.6		77.0	87.9	*	84.1	91.0	
Friend	93.3	94.0	85.2	91.0		92.7	90.7	86.2	88.6		93.0	92.2		85.7	89.8	
Religious leader	79.8	70.5	65.0	72.7		73.5	77.9	61.1	91.3	**	76.2	75.2		63.2	83.4	**
N	**443**		**488**			**526**		**470**			**969**			**958**		

Note: As FTMs were requested to name five referents, cell sizes for the calculation of perceived approval rates vary by referent, age group, survey round, and study arm. The lowest cell size was 61 for FTMs age 15-19 residing in comparison HZs who named a religious leader as a referent for FP decisions during the endline survey. The largest cell size for the calculation of approval rates was 463 for FTMs age 20-24 residing in comparison HZs who named their husband/partner as a referent for FP decisions during the endline survey.

*** p < .001; ** p < .01; * p < .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 7.2 Average treatment effects and associated p-values for injunctive norms pertaining to the FTM's use of postpartum family planning in the first six weeks following childbirth, by the relationship of the named referent to the FTM, marital status of the FTM, and age group, Kinshasa

	Age 15-19				Age 20-24				Total			
Referent	**ATE**	**95% CI**	**P-value**	**N**	**ATE**	**95% CI**	**P-value**	**N**	**ATE**	**95% CI**	**P-value**	**N**
Mother												
Ever married	-.055	-.159, .047	0.288	957	.071	-.019, .160	0.121	1,245	.018	-.050, .085	0.606	2,202
Never married	-.009	-.119, .101	0.871	597	.146	.007, .285	0.039	378	.054	-.033, .140	0.222	975
Total	-.035	-.110, .041	0.370	1,554	.088	.012, .164	0.023	1,623	.028	-.026, .082	0.309	3,177
Father												
Ever married	-.100	-.268, .067	0.241	430	.028	-.110, .166	0.690	564	-.016	-.122, .088	0.761	994
Never married	.104	-.090, .298	0.293	297	305	-.011, .621	0.059	179	.182	.026, .337	0.022	476
Total	-.005	.131, .121	0.940	727	.104	-.020, .228	0.099	743	.054	-.033, .142	0.223	1,470
Husband/partner												
Ever married	.126	.013, .239	0.029	897	.043	-.043, .129	0.322	1,345	.074	.006, .142	0.033	2,242
Never married	.132	-.008, .272	0.065	469	.186	.038, .333	0.014	357	.152	.050, .255	0.004	826
Total	.136	.047, .224	0.003	1,366	.070	-.005, .145	0.068	1,702	.098	.040, .155	0.001	3,068
Sister												
Ever married	.005	-.100, .110	0.922	843	.033	-.050, .116	0.438	1,151	.021	-.044, .086	0.523	1,994
Never married	-.049	-.153, .054	0.350	576	.090	-.044, .224	0.187	362	.010	-.073, .091	0.820	938
Total	-.010	-.084, .065	0.802	1,419	.046	-.026, .117	0.208	1,513	.018	-.033, .070	0.490	2,932
Other family member												
Ever married	.078	-.046, .201	0.218	686	.124	.013, .234	0.028	841	.105	.022, .187	0.013	1,527
Never married	.034	-.097, .164	0.613	461	.114	-.059, .286	0.198	257	.056	-.048, .161	0.291	718
Total	.060	-.030, .150	0.194	1,147	.125	.032, .218	0.009	1,098	.091	.026, .156	0.006	2,245
Husband/partner's mother												
Ever married	-.080	-.239, .080	0.328	399	-.064	-.203, .075	0.367	518	-.076	-.180, .028	0.153	917
Never married	-.039	-.293, .214	0.763	138	.206	-.032, .443	0.090	85	.028	-.171, .228	0.781	223
Total	-.075	-.212, .061	0.280	537	-.039	-.165, .086	0.537	603	-.062	-.154, .029	0.185	1,140
Friend												
Ever married	.056	-.075, .188	0.400	409	.027	-.083, .138	0.627	595	.036	-.049, .122	0.399	1,004
Never married	-.050	-.168, .066	0.395	339	.069	-.089, .227	0.392	227	-.005	-.099, .090	0.922	566
Total	.009	-.080, .098	0.837	748	.032	-.059, .123	0.492	822	.021	-.043, .085	0.524	1,570
Religious leader												
Ever married	.190	-.124, .504	0.235	186	.096	-.115, .307	0.373	308	.101	-.070, .270	0.247	494
Never married	.081	-.245, .408	0.626	120	.636	.315, .957	<0.001	85	.327	083, .571	0.009	205
Total	.148	-.134, .431	0.303	306	.184	-.016, .383	0.071	393	.151	.010, .291	0.035	699
Most referents												
Ever married	.038	-.017, .155	0.463	1,140	.009	-.077, .094	0.842	1,540	.023	-.042, .088	0.485	2,680
Never married	.018	-.095, .130	0.761	716	.152	.022, .282	0.022	452	.069	-.017, .155	0.114	1168
Total	.035	-.041, .111	0.365	1,856	.041	-.032, .113	0.269	1,992	.037	-.015, .090	0.162	3,848

Note: As FTMs were requested to name five referents and the five referents could vary between the baseline and endline surveys, cell sizes for the calculation of the ATE vary by referent. N refers to the number of times the referent is mentioned in the baseline and endline surveys. For "most referents", N refers to the number of observations; there were two observations per FTM.

*** p < .001; ** p < .01; * p < .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

As Table 7.2 shows, MOMENTUM had a significant impact among never married FTMs age 20-24. No impact was detected among 15–19-year-olds regardless of marital status or among ever married FTMs age 20-24.

In Table 7.3, we examined ATEs for descriptive norms regarding the FTMs' discussion of PPFP with her husband/male partner before the baby was born, FTMs' use of FP in the first six weeks following childbirth, and FTMs' use of PPFP even if breastfeeding. One can think of descriptive norms as the perceived prevalence of a particular behavior. To measure descriptive norms around PPFP, FTMs were asked the following questions in the baseline and endline surveys:

1. "How many first-time mothers age 15-24 years in your community do you believe discuss using a method of contraception within the first 6 weeks following childbirth with their husband/partner before the baby is born: all of them, more than half of them, about half of them, less than half of them, or none of them?"
2. "How many first-time mothers age 15-24 years in your community do you believe use contraceptive methods within the first 6 weeks following childbirth: all of them, more than half of them, about half of them, less than half of them, or none of them?"
3. "How many first-time mothers age 15-24 years in your community do you believe use contraceptive methods within the first 6 weeks following childbirth, even if they are breastfeeding their baby: all of them, more than half of them, about half of them, less than half of them, or none of them?"

The responses "All of them" and "more than half of them" were combined to capture the perception that most FTMs in the community performed the behavior in question and coded as "1", with all other responses being coded as "0." MOMENTUM had no effect on the perceived prevalence of partner discussion of PPFP use before the birth of the child. The project had a significant impact on descriptive norms regarding FP use in the first six weeks following childbirth among ever married FTMs in both age groups and the overall sample. Regarding descriptive norms pertaining to use of a method of FP in the first six weeks following childbirth even if the FTM was breastfeeding, the project had a significant effect on ever married FTMs age 15-19. The probability of an ever-married FTM age 15-19 perceiving that most people expected her to use PPFP was 13 percentage points higher than if none of those FTMs were exposed to MOMENTUM.

The impact of MOMENTUM on normative expectations about PPFP is presented in Table 7.4. In both the baseline and endline surveys, FTMs were asked: Please tell me whether you strongly agree, agree, disagree, or strongly disagree with the following statements:

1. "Most people who are important to me believe that I ought to discuss use of a method of contraception within the first 6 weeks following childbirth with my husband/partner before the baby is born."
2. "Most people who are important to me believe that I ought to start using a method of contraception within the first 6 weeks following childbirth."
3. "Most people who are important to me believe that I ought to start using a method of contraception within the first 6 weeks following childbirth, even if I am breastfeeding my baby."

As shown, project impact on (a) normative expectations regarding the FTM's discussion of PPFP with her husband/partner before childbirth and (b) the FTM's use of FP in the immediate postpartum period was detected only among FTMs age 20-24 who were never married. The probability of perceiving that most people expected the FTM to discuss PPFP with her partner before the childbirth was 22 percentage points higher than if none of these FTMs were exposed to MOMENTUM. The ATE for normative expectations regarding discussion of PPFP before childbirth remained statistically significant when both age groups were combined. Regarding PPFP use in the immediate postpartum FP period, the probability of an FTM age 20-24 perceiving that most people expected her to use PPFP was 24 percentage points higher than if none of these FTMs were exposed to MOMENTUM. When both age groups were combined, the ATE for normative expectations regarding the FTM's use of PPFP was not statistically significant. MOMENTUM had no impact on normative expectations regarding the FTMs use of PPFP even if she was breastfeeding her baby.

Table 7.3 Average treatment effects and associated p-values for descriptive norms about partner discussion regarding and use of family planning in the first six weeks following childbirth, by marital status and age group, Kinshasa

	Age 15-19				Age 20-24				Total			
Descriptive Norms	**ATE**	**95% CI**	**p-value**	**N**	**ATE**	**95% CI**	**p-value**	**N**	**ATE**	**95% CI**	**p-value**	**N**
Partner discussion in the prenatal period about PPFP use												
Ever married	.053	-.027, .133	0.193	570	-.015	-.080, .050	0.656	770	.012	-.038, .062	0.632	1,340
Never married	.079	-.021, .179	0.122	358	.064	-.077, .204	0.375	226	.075	-.007, .157	0.075	584
Total	.063	.001, .126	0.047	928	.001	-.059, .060	0.980	996	.031	-.012, .074	0.159	1,924
PPFP use												
Ever married	.111	.034, .188	0.005	570	.067	.000, .133	0.050	770	.083	.033, .133	0.001	1,340
Never married	.095	-.010, .199	0.075	358	.046	-.091, .183	0.510	226	.076	-.007, .159	0.074	584
Total	.106	.043, .167	0.001	928	.061	.001, .121	0.046	996	.081	.038, .124	<.001	1,924
PPFP use even if breastfeeding												
Ever married	.131	.061, .202	<0.001	570	.023	-.039, .086	0.459	770	.068	.022, .115	0.004	1,340
Never married	.048	-.054, .150	0.353	358	-.001	-.130, .129	0.993	226	.031	-.049, .110	0.445	584
Total	.101	.043, .160	0.001	928	.017	-.039, .073	0.551	996	.057	.017, .097	0.006	1,924

Note: There were two observations per FTM. The Ns presented above refer to the number of FTMs in the given category.
*** p < .001; ** p < .01; * p < .05
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

7.2 Kangaroo Mother Care

In the baseline and endline surveys, data were also collected on perceived norms surrounding KMC. First, FTMs were provided with the following definition: "Kangaroo Mother Care is a method of care practiced on babies, usually on a low-birth-weight or preterm infant, where the infant is held skin-to-skin with his mother, father, or substitute caregiver." No questions were asked about KMC injunctive norms. To measure descriptive norms, FTMs were asked: "How many first-time mothers age 15-24 years with a low-birth-weight baby in your community do you believe practice kangaroo mother care: all of them, more than half of them, about half of them, less than half of them, or none of them?" The responses "all of them" and "more than half of them" were combined to capture descriptive norms about KMC. Normative expectations measured the percentage of FTMs who strongly agreed with the following statement: "Most people who are important to me think I ought to practice Kangaroo Mother Care if I have a low-birthweight or preterm baby."

Table 7.5 shows that MOMENTUM had an impact on KMC descriptive norms among FTMs age 15-19 who were never married, and among both never married and ever married FTMs who were age 20-24. When both age groups were combined, the ATEs for descriptive norms about KMC were statistically significant in both marital status categories. Regarding normative expectations, the probability of the FTM perceiving that most people expected her to practice KMC if she were to have a low birthweight or preterm baby was six percentage points higher among the ever married and nine percentage points higher among the never married than if no FTMs in the respective marital status group was exposed to MOMENTUM. The project did not have a significant impact on normative expectations about KMC if the FTM were to have a low birthweight or preterm baby. Among ever married FTMs age 20-24, there was a significantly smaller change in normative expectations about KMC in intervention HZs than in comparison HZs.

7.3 Exclusive Breastfeeding

In both the baseline and endline surveys, FTMs were asked to list up to five people who were most important to them, either generally, or when deciding about how to take care of their baby and to specify each named referents' relationship to the FTM. Then, the FTM was asked whether each named referent would approve or disapprove of her exclusively breastfeeding her baby. In Table 7.6 we present the percentage of FTMs age 15-24 who believed specific referents would approve of the FTM's practice of exclusive breastfeeding, by survey round and study arm. This table was cross-referenced with Table 4.26.

In both comparison and intervention HZs, more FTMs age 15-19 perceived increased approval of exclusive breastfeeding from their husband/partner, sisters, and friends. Between the baseline and endline surveys, for example, the perceived exclusive breastfeeding approval rate for the husband/partner increased from 76% to 84% in the comparison HZs. In intervention HZs, the corresponding increase among FTMs age 15-19 was from 66% at baseline to 80% at endline. Significant increases in the perceived exclusive breastfeeding approval rate were also observed for the following referents: the FTM's father in comparison HZs and the FTM's mother, other family members, husband/partner's mother, and religious leaders in intervention HZs. For these referents, it is noted that baseline injunctive norms were lower in intervention HZs than in comparison HZs. Among FTMs age 20-24 residing in intervention HZs, there was a significant increase over time in the perceived approval rate for each referent shown. However, among same age FTMs residing in comparison HZs, the perceived exclusive breastfeeding approval rate increased significantly for only three referents: the FTM's father, sister, and health workers.

Table 7.4 Average treatment effects and associated p-values for normative expectations about partner discussion regarding and about use of family planning in the first six weeks following childbirth, by marital status and age group, Kinshasa

	Age 15-19				Age 20-24				Total			
Normative Expectations	**ATE**	**95% CI**	**p-value**	**N**	**ATE**	**95% CI**	**p-value**	**N**	**ATE**	**95% CI**	**p-value**	**N**
Partner discussion in the prenatal period about PPFP use												
Ever married	.033	-.065, .130	0.514	570	.080	.003, .164	0.059	770	.063	-.000, .126	0.050	1,340
Never married	.092	-.025, .210	0.121	358	.222	.076, .368	0.003	226	.142	.051, .234	0.002	584
Total	.060	-.015, .135	0.115	928	.111	0388, .183	0.003	996	.088	.036, .140	0.001	1,924
PPFP use												
Ever married	.023	-.076, .123	0.647	570	.040	-.045, .123	0.355	770	.037	-.027, .101	0.260	1,340
Never married	-.018	-.131, .095	0.758	358	.240	.091, .389	0.002	226	.080	-.010, .172	0.082	584
Total	.010	-.065, .084	0.799	928	.084	.010, .157	0.025	996	.050	-.002, .103	0.060	1,924
PPFP use even if breastfeeding												
Ever married	-.0431	-.145, .058	0.407	570	.035	-.051, .120	0.427	770	.006	-.059, .072	0.847	1,340
Never married	-.018	-.131, .095	0.758	358	.145	-.009, .299	0.066	226	.047	-.047, .140	0.329	584
Total	-.026	-.103, .050	0.499	928	.058	-.017, .133	0.131	996	.019	-.035, .073	0.486	1,924

Note: There were two observations per FTM. N refers to the number of FTMs.
*** p < .001; ** p < .01; * p < .05
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 7.5 Average treatment effects and associated p-values for descriptive norms and normative expectations about kangaroo mother care should the FTM have a low birthweight or preterm baby, by marital status and age group, Kinshasa

	Age 15-19				Age 20-24				Total			
Perceived Norms about Kangaroo Care	**ATE**	**95% CI**	**p-value**	**N**	**ATE**	**95% CI**	**p-value**	**N**	**ATE**	**95% CI**	**p-value**	**N**
Descriptive norms												
Ever married	.041	-.015, .096	0.153	570	.074	.023, .126	0.005	770	.060	.024, .096	0.001	1,340
Never married	.088	.010, .166	0.026	358	.089	.012, .166	0.024	226	.087	.033, .140	0.001	584
Total	.057	.014, .101	0.010	928	.078	.038, .118	<0.001	996	.068	039, .097	<0.001	1,924
Normative expectations												
Ever married	.044	-.054, .142	0.379	570	-.096	-.185, -.006	0.036	770	-.032	-.099, .034	0.335	1,340
Never married	.099	-.035, .233	0.147	358	-.025	-.190, .139	0.761	226	.050	-.054, .154	0.344	584
Total	.068	-.011, .146	0.093	928	-.081	-.159, -.001	0.046	996	-.007	-.063, .049	0.812	1,924

Note: There were two observations per FTM. N refers to the number of FTMs.
*** p < .001; ** p < .01; * p < .05
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 7.26 Percentage of FTMs age 15-24 who believe specific named referents approve of them exclusively breastfeeding their baby, by age group, survey round, and study arm, Kinshasa

	Age 15-19						Age 20-24						Total					
	Comparison			Intervention			Comparison			Intervention			Comparison			Intervention		
Referent	**T1**	**T2**	**Sig.**	**T2**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**	**T1**	**T2**	**Sig.**
Mother	73.7	79.4	ns	64.4	78.9	***	74.3	79.2	ns	65.8	78.9	***	74.0	79.3	*	65.1	78.9	***
Father	74.2	87.5	**	70.7	78.7	ns	72.3	83.4	*	67.7	81.6	**	73.2	85.3	***	69.2	80.2	**
Husband/Partner	75.6	83.6	*	65.5	80.3	***	78.8	81.9	ns	68.1	85.5	***	77.4	82.6	*	66.9	83.1	***
Sister	68.5	78.9	**	62.2	76.6	***	71.3	78.3	*	66.5	77.2	**	70.0	78.6	***	64.4	76.9	***
Other family member	65.8	72.0	ns	58.3	77.1	***	69.9	70.5	ns	57.0	73.2	***	67.9	71.2	ns	57.7	75.3	***
Mother-in-law	68.8	71.3	ns	61.1	72.4	*	71.1	75.9	ns	61.8	71.7	*	70.0	73.9	ns	61.4	72.0	**
Friend	62.1	71.0	ns	53.2	73.2	***	58.9	66.0	ns	50.4	72.0	***	60.3	68.1	*	51.9	72.6	***
Religious leader	71.0	66.7	ns	59.3	80.6	**	78.3	80.0	ns	50.0	77.9	**	75.2	74.2	ns	55.0	79.3	***
Health worker	90.3	97.1	**	86.0	98.0	***	91.2	97.8	**	87.4	98.7	***	90.8	97.5	***	86.8	98.3	***
Neighbor	57.6	69.3	ns	45.3	58.5	ns	62.6	62.2	ns	37.5	69.1	**	60.3	65.8	ns	42.9	63.0	**
N	**439**			**497**			**525**			**467**			**964**			**954**		

Note: As FTMs were requested to name five referents, cell sizes for the calculation of perceived approval rates vary by referent, age group, survey round, and study arm. Table 7.6 is cross-referenced with Table 4.26.
*** p < .001; ** p< .01; * p< .05
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

We examined ATEs for exclusive breastfeeding injunction norms by type of referent. As shown in Table 7.7, among never married FTMs age 15-19, ever married FTMs age 20-24, and both marital status groups in the overall sample, MOMENTUM had a significant impact on perceived approval of exclusive breastfeeding by the FTM's mother. No impact was detected on the FTMs' perception that her husband/male partner approved of exclusive breastfeeding in the 15-19 age group. In the 20-24 age group, MOMENTUM had a significant impact among both never married and ever married FTMs but the ATE was larger among the never married (20 percentage points) than the ever married (11 percentage points). When both age groups were combined, the probability of the FTM perceiving that her husband/male partner approved of exclusive breastfeeding was eight percentage points higher among those who were ever married and 13 percentage points higher among those who were never married than if none of those FTMs were exposed to MOMENTUM.

Regarding the perceived approval of the FTM's other family members and the husband/partner's mother, MOMENTUM had a significant effect on the perception of ever married FTMs age 20-24 that other family members would approve of them practicing exclusive breastfeeding. For both referents, no impact was detected among FTMs age 15-19, regardless of marital status. MOMENTUM also had no impact on the FTM's perception that her husband/partner's mother would approve of her practicing exclusive breastfeeding, regardless of age group and marital status. Among never married FTMs age 20-24, the ATE was negative, signifying a smaller change in perceived mother-in-law approval among FTMs exposed to MOMENTUM than among their counterparts who were not exposed to MOMENTUM.

Although the FTMs' friends and religious leaders were not targeted directly by MOMENTUM interventions, the ATE for the FTM's friends was statistically significant among never married FTMs age 15-19. A surprising result was the significant ATE for religious leaders' perceived approval of the FTM's practice of exclusive breastfeeding among never married FTMs age 15-19 and ever married FTMs age 20-24. Among never married 15-19-year-olds, the probability of perceiving religious leaders approved of the FTM's practice of exclusive breastfeeding was 51 percentage points higher than if none of those FTMs were exposed to MOMENTUM.

When both age groups were combined, the ATEs associated with the FTM's perception that religious leaders approved of exclusive breastfeeding was statistically significant among never married FTMs and equivalent to an increase of 39 percentage points in the probability. Perceived religious leader approval may be associated with the involvement of Conduite de la Fécondité, a faith-based organization, in recruiting FTMs and male partners, convincing parents of young never married FTMs to allow them to enroll in the project, and tracking FTMs who were lost to follow-up during project implementation. We defined most referents as approving of exclusive breastfeeding if the FTM perceived that four or all five named referents would approve of her exclusively breastfeeding her baby. Concerning the FTM's perception that most referents approve of her exclusively breastfeeding her baby, there was a significant difference between intervention HZs and comparison HZs after matching on covariates among ever married FTMs age 20-24. No impact was detected among 15–19-year-olds regardless of marital status or among never married FTMs age 20-24.

. Table 7.8 shows ATEs by marital status for two types of descriptive norms and normative expectations. Two questions were used to measure descriptive norms about exclusive breastfeeding: (1) How many of the women who are important to you practice/have practiced exclusive breastfeeding: all of them, more than half of them, about half of them, less than half of them, or none of them? (2) How many first-time mothers age 15-24 years in your community practice exclusive breastfeeding: all of them, more than half of them, about half of them, less than half of them, or none of them? To measure descriptive norms, the response categories "all of them" and "more than half of them" were assigned the value "1", with the other responses coded "0". Regardless of the format of the question, MOMENTUM had no impact on descriptive norms.

Table 7.6 Average treatment effects and associated p-values for injunctive norms pertaining to the FTM's adoption of exclusive breastfeeding, by the relationship of the named referent to the FTM, marital status of the FTM, and age group, Kinshasa

	15-19				20-24				Total			
Referent	**ATE**	**95% CI**	**P-value**	**N**	**ATE**	**95% CI**	**P-value**	**N**	**ATE**	**95% CI**	**P-value**	**N**
Mother												
Ever married	.057	-.045, .157	0.273	990	.101	.014, .188	0.024	1,272	.084	.019, .149	0.012	2,262
Never married	.153	.040, .266	0.008	616	.051	-.097, .198	0.502	389	.117	.027, .207	0.011	1.005
Total	.098	.022, .174	0.012	1,606	.088	.013, .163	0.021	1,661	.094	.041, .147	0.001	3,267
Father												
Ever married	-.203	-.364, -.042	0.013	383	.018	-.116, .153	0.787	520	-.077	-.179, .025	0.138	903
Never married	.007	-.140, .153	0.928	280	-.026	-.276, .224	0.841	186	.008	-.128, .143	0.913	466
Total	-.092	-.201, .018	0.102	663	.007	-.445, .458	0.976	706	-.044	-.125, .037	0.292	1,369
Husband/partner												
Ever married	.019	-.091, .129	0.732	856	.114	.031, .197	0.007	1,298	.083	.017, .149	0.014	2,154
Never married	.066	-.062, .195	0.309	470	.196	.050, .341	0.009	355	.132	.036, .228	0.007	825
Total	.053	-.030, .137	0.211	1,326	.128	.055, .200	0.001	1,653	.097	.042, .151	0.001	2,979
Sister												
Ever married	.025	-.086, .136	0.658	868	.056	-.039, .150	0.247	1,160	.045	-.027, .117	0.221	2,028
Never married	.073	-.050, .195	0.243	577	.022	-.132, .176	0.778	373	.049	-.047, .145	0.316	950
Total	.046	-.036, .129	0.270	1.445	.045	-.036, .125	0.278	1,533	.046	-.012, .103	0.119	2,978
Other family member												
Ever married	.106	-.029, .240	0.123	647	.171	.053, .288	0.005	812	.147	.058, .234	0.001	1,459
Never married	.132	-.023, .288	0.096	442	.137	-.104, .377	0.265	255	.118	-.012, .247	0.075	697
Total	.119	.017, .220	0.022	1,089	.164	.058, .269	0.002	1,067	.139	.066, .212	<0.001	2,156
Husband/partner's mother												
Ever married	.068	-.082, .219	0.373	530	.085	-.044, .213	0.197	671	.075	-.022, .172	0.129	1,201
Never married	.146	-30.527, 30.820	0.993	196	-.027	-.316, .263	0.857	114	.046	-.134, .226	0.613	310
Total	.087	-.040, .214	0.178	726	.065	-.053, .183	0.282	785	.074	-.012, .160	0.091	1,511
Friend												
Ever married	-.051	-.257, .154	0.624	304	.141	-.013, .295	0.074	494	.079	-.045, .202	0.210	798
Never married	.231	.042, .421	0.017	302	.181	-.039, .400	0.107	202	.202	.060, .344	0.005	504
Total	.098	-.040, .235	0.163	606	.148	.022, .274	0.021	696	.122	.029, .215	0.010	1,302
Religious leader												
Ever married	-.013	-.297, .271	0.929	144	.351	.006, .696	0.046	210	.198	-.014, .410	0.068	354
Never married	.510	.148, .871	0.006	92	.088	-.392, .567	0.720	57	.391	.111, .670	0.006	149
Total	.193	-.052, .438	0.123	236	.325	.078, .571	0.010	267	.246	.076, .416	0.005	503
Most referents												
Ever married	.061	-.040, .162	0.236	1,140	.124	.039, .208	0.004	1,540	.104	.039, .169	0.002	2,680
Never married	.111	-.007, .229	0.066	716	.050	-.102, .202	0.518	452	.088	-.005, .181	0.064	1,168
Total	.086	.009, .162	0.029	1,856	.107	.033, .181	0.004	1,992	.099	.046, .152	<0.001	3,848

Note: As FTMs were requested to name five referents and the five referents could vary between the baseline and endline surveys, cell sizes for the calculation of the ATE vary by referent. N refers to the number of times the referent is mentioned in the baseline and endline surveys. For "most referents", N refers to the number of observations; there were two observations per FTM.

*** p < .001; ** p < .01; * p < .05

Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

Table 7.7 Average treatment effects and associated p-values for descriptive norms and normative expectations about exclusive breastfeeding, by marital status and age group, Kinshasa

	Age 15-19				Age 20-24				Total			
Perceived Norms about Kangaroo Care	**ATE**	**95% CI**	**p-value**	**N**	**ATE**	**95% CI**	**p-value**	**N**	**ATE**	**95% CI**	**p-value**	**N**
Descriptive norms (most women important to FTM)												
Ever married	.067	-.014, .146	0.104	570	-.022	-.093, .049	0.553	770	.019	-.034, .072	0.487	1,340
Never married	-.014	-.119, .092	0.799	358	.065	-.077, .207	0.369	226	.016	-.069, .101	0.708	584
Total	.035	-.029, .098	0.280	928	-.002	-.066, .062	0.953	996	.018	-.027, 063	0.437	1,924
Descriptive norms (most FTMs in community)												
Ever married	.060	-.007, .127	0.078	570	.001	-.051, .054	0.961	770	.028	-.014, .069	0.196	1,340
Never married	.022	-.064, .107	0.623	358	.093	-.020, .208	0.106	226	.048	-.021, .117	0.171	584
Total	.044	-.009, .096	0.104	928	.022	-.026, .070	0.372	996	.034	-.002, .069	0.066	1,924
Normative expectations												
Ever married	.029	-.073, .130	0.577	570	-.031	-.119, .057	0.498	770	-.000	-.067, .066	0.997	1,340
Never married	.185	.052, .318	0.006	358	-.009	-.168, .149	0.909	226	.110	.008, .213	0.035	584
Total	.093	.012, .173	0.025	928	-.026	-.103, .051	0.509	996	.034	-.022, .089	0.233	1,924

Note: There were two observations per FTM. N refers to the number of FTMs in the given category.
*** p < .001; ** p < .01; * p < .05
Source: MOMENTUM 2018 Baseline Survey (T1) and 2020 Endline Survey (T2)

To measure normative expectations about exclusive breastfeeding, FTMs were asked: "Please tell me whether you strongly agree, agree, disagree or strongly disagree with the following statement: Most people who are important to me think I ought to exclusively breastfeed my baby." The response category "strongly agree" was used to measure normative expectations. As shown in Table 7.8, project impact on normative expectations about exclusive breastfeeding was detected only among FTMs age 15-19 who were never married. The probability of a never married FTM age 15-19 perceiving that most people expected her to practice exclusive breastfeeding was 19 percentage points higher than if none of her same age never married counterparts were exposed to MOMENTUM. The ATE for normative expectations about exclusive breastfeeding remained statistically significant among never married FTMs when both age groups were combined. No impact was detected among 20–24-year-old FTMs.

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APPENDIX

Data Collection Team and Entry Team

Baseline Survey

Interviewers			
No	Name	No	Name
1	ABELY TSHOMBA	49	MAVULA MBAYALA CHRISTELLE
2	ANAMBATU DINA	50	MBAKA MUSIMBI
3	ATUMANISA GUYLAIN	51	MBUMBA ALBERT
4	BAKWALUFU MIKE	52	MIKANGAMANI EUPHRASIE
5	BAMBONGO ANICHA	53	MITSHO-UZZANA
6	BINANGA CHRISTIAN	54	MOLENGE HERVE
7	BOKOMBE RICHARD	55	MOUSSA NDUKU
8	BOLIA PAPY	56	MOUYA LAFAYETTE
9	BOLUWA BASEKA CAJOU	57	MPELEBWE NIUMBI
10	BOLUWA DIDO	58	MPEMBA KELLY
11	BONGONGO BALONG JOLIE	59	MUFUATA ERIC
12	BONGU VERONICA	60	MUGO MWANGA FALONNE
13	BOSSOKU ABIGAEL	61	MUKUNA TRESOR
14	BUSOGA CRISPAIN	62	MUKUNDA MICHAEL
15	DINANGAYI JOELLE	63	MULANGA NONO
16	EPY NGERA KAZADI	64	MUSEMA LAEL
17	FAZILI MUNDENGA ROSETTE	65	MUSIMBI BENJAMIN
18	FLAVIE-MALOBA	66	MUSUWA KASAJI IRENE
19	GRACE ODIA	67	MUZENGA MUTOMBO NADEGE
20	ILUNGA HARLETTE	68	MWAMINI ZUHULA MELANIE
21	ISONGA NICLETTE	69	MWANGILWA LUKENGE DANIELLA
22	KABASELE LINDA	70	NANISSA NEHEMIE
23	KABUKA SAKINA ASCE	71	NDENE ABRAHAM
24	KALALA TRESOR	72	NDUKU DEGO
25	KANKONDE JENNIFER	73	NGALIA APAULINE
26	KANKU TSHIBANGU	74	NGOIE NDOMBE ADELE
27	KASONGO JOSUE	75	NGYESSE CEDRIC
28	KAWAYA NDAYA PRISCA	76	NICKVERT JONATHAN
29	KETHO DIKONDO	77	NLANDU KIUKA TRESOR
30	KILOLA GRACE	78	NSONGA MARIE
31	KIMFUTA MAKUMBI JULIA	79	NSUBI KIZOMBO
32	KISUBA CHARLOTTE	80	NYEMBO MUSEMA
33	KOLO ARISTOTE	81	NZUMBA NICLETTE
34	KWIMI MASISA NADIA	82	NZUZI DELPHINE
35	LEMBA LEMBA LYSETTE	83	ODIA PANIQUE
36	LOKOKA MAMIE	84	PAOLA VALIA TSHAMBA
37	LOMINGO MARLYSE	85	PHUATI NIMI
38	LUVUNGA CIDY	86	RACHELLE BEYA
39	LYS TONA	87	SADIKI WASOKOLELA MERVEILLE
40	MAKENGA DESMOND	88	SAFI LUZINGA MARLENE

Interviewers			
No	Name	No	Name
41	MAMIE FASHINGABO	89	SAIDI SAMUEL
42	MANDJOKO GEDIDJA	90	SHEKINAH DJONDO
43	MASENGI YVES	91	SHESHE SELEMANI YANEL
44	MASHITA MADO	92	TEKETESSE ARTHUR
45	MASUAMA MAKONDA HYGINS	93	TOKO PASCAL
46	MASWA SYLVAIN	94	VITULA CLAUDE
47	MATANGILA CHRIST	95	YEMBA AUGUSTINE
48	MAVILA CEDRIC	96	YOMBO TSHITEYA OLGA

Supervisors			
No	Name	No	Name
1	BENITO KAZENZA MAYKONDO	8	MAFUTA NENE
2	FALANGA TINDA MYRIAM	9	MANTETE SEDU NARCISSE
3	ILAKA MAMIE	10	MOKE SEBASTIEN
4	ILUNGA GRACE	11	MUKOMBELWA ARLETTE
5	KALANZAYA GYPSI	12	PANSHI CHRISTINE
6	KISALU KAMBALE ROSY	13	TSHIJIYA JEAN PAUL
7	LULEBO MAMIE	14	VAVA SORY SIMON SIMON

Controllers			
No	Name	No	Name
1	STEVE MBIKAYI	4	PRESCILLIA VISI
2	GUY NGINDU	5	DYNA KAYEMBE
3	CHARLES KASONGO	6	TESKY KOBA

Endline Survey

Interviewers			
No	Name	No	Name
1	ANAMBATU DINA	51	ABELY TSHOMBA
2	BONGONGO BALONG JOLIE	52	ATUMANISA GUYLAIN
3	BOSSOKU ABIGAEL	53	BAKWALUFU MIKE
4	CHADDAI MANGOYO	54	BOKOMBE RICHARD
5	DAUPHINE MBOMBO	55	BUSOGA CRISPAIN
6	DINANGAYI JOELLE	56	KALALA TRESOR
7	EPY NGEKA KAZADI	57	KASONGO JOSUE
8	FAZILI MUNDENGA ROSETTE	58	KETHO DINGU REAGEN
9	ADELE NGOY	59	KOLO ARISTOTE
10	GRACE ODIA	60	LUVUNGA CIDY
11	ILUNGA HARLETTE	61	MAKENGA DESMOND
12	ISONGA NICLETTE	62	MANDJOKO GEDIDJA
13	KABASELE LINDA	63	TOMBONGO LEON
14	KABUKA SAKINA ASCE	64	MASUAMA MAKONDA HYGINS
15	KIGALU NORA	65	MASWA SYLVAIN
16	KIMFUTA MAKUMBI JULIA	66	MATANGILA CHRIST
17	KISALU KAMBALE ROSY	67	MAVILA CEDRIC
18	KISUBA CHARLOTTE	68	KATEMBO MUNENE MARCEL
19	KWIMI MASISA NADIA	69	MBUMBA ALBERT
20	LINA JACQUEMIN	70	MOUSSA NDUKU

Interviewers			
No	Name	No	Name
21	LOMINGO MARLYSE	71	MOUYA LAFAYETTE
22	MARTINE TINA EKEBA	72	ISMAEL TSHIBENGU
23	MASHITA MADO	73	MERVEIL WITELE
24	MASUMBU KABELO JULIE	74	MUKUNA TRESOR
25	MBONZE MYRIAM	75	MUSEMA LAEL
26	MIKANGAMANI EUPHRASIE	76	MUSIMBI BENJAMIN
27	MUENGA TSHIBEU ORNELLA	77	NDENE ABRAHAM
28	MUGO MWANGA FALONNE	78	NDUKU DEGO
29	MUJINGA GINA	79	NGYESSE CEDRIC
30	MUSUWA KASAJI IRENE	80	NICKVERT JONATHAN
31	MWAMINI ZUHULA MELANIE	81	NSUBI KIZOMBO
32	MWANGILWA LUKENGE DANIELLA	82	NYEMBO MUSEMA
33	NADINE LUZANGI	83	PHUATI NIMI
34	NDJOLI FIFI	84	SHESHE SELEMANI YANEL
35	NGALIA APAULINE	85	TEKETESSE ARTHUR
36	NLANDU KIUKA TRESOR	86	VITULA CLAUDE
37	NSONGA MARIE	87	ERIC SANGWA
38	PAOLA VALIA TSHAMBA	88	MOKE MERVEILLE
39	RACHELLE BEYA	89	JEAN KANGAMINA KABALA
40	SADIKI WASOKOLELA MERVEILLE	90	EMMANUEL MITANGA
41	SAFI GLORIA	91	BOB SENKER
42	SAFI LUZINGA MARLENE	92	CASSIEN LINGWENGE
43	SANGWA ELISABETH	93	PATRICK NTUMBA MEJI
44	SHEKINAH DJONDO	94	HONORE NDUKU
45	SOLANGE KAPEMBA	95	LUZITU MWIMBA AQUARIUS
46	TENDO KAZADI PAMELA	96	JEOVANI KANZA
47	YEMBA AUGUSTINE	97	STEPHANE NICKVERT
48	VERITE LAWU	98	MICHE MBWEBE
49	MARIELLE BILONDA	99	KANKU TSHIBANGU
50	LYS TONA	100	TOKO PASCO

Supervisors			
No	Name	No	Name
1	GYPSYNE BUNGU	7	BOMOLO MABIBI
2	ILAKA MAMIE	8	NELLY LOBOTA
3	JOHN LHUDAL	9	MUKOMBELWA ARLETTE
4	KALANZAYA GYPSI	10	PANSHI CHRISTINE
5	LULEBO MAMIE	11	TSHIJIYA JEAN PAUL
6	MAFUTA NENE	12	RICHARD MUBIKAYI

Controllers			
No	Name	No	Name
1	STEVE MBIKAYI	4	PRESCILLIA VISI
2	GUY NGINDU	5	DYNA KAYEMBE
3	CHARLES KASONGO		

Summary List of Indicators, Intervention Health Zones

	Intervention Health Zones					
	Age 15-19		Age 20-24		Total	
Indicator	Baseline	Endline	Baseline	Endline	Baseline	Endline
Percent of FTMs aged 15-24 years using a contraceptive method 0-11 months postpartum		52.5		50.6		51.6
Percent of FTMs aged 15-24 years (male partners) exposed to HTSP counseling/ education who subsequently adopted a family planning method in order to space their next pregnancy		59.9		57.0		58.4
Percent of FTMs aged 15-24 years who were referred to a health facility for clinical family planning methods in the past 12 months		36.5		41.6		39.1
Percent of FTMs aged 15-24 years who received family planning counseling during the prenatal period.	39.1	70.7	46.0	72.3	42.5	71.6
Percent of FTMs aged 15-24 years using a modern postpartum family planning method who obtained their method from a community-based health worker in the past 12 months		29.6		36.8		33.3
Percent of FTMs aged 15-24 years who know that a woman could get pregnant before her menses return during the postpartum period	42.7	56.5	52.9	62.7	47.7	59.5
Percent of FTMs aged 15-24 years who can state at least one benefit (health or non-health) of waiting at least two years after last live birth before attempting the next pregnancy	99.4	93.2	99.5	95.3	99.4	94.3
Percent of FTMs aged 15-24 years who believe that those in their social network/reference group (e.g., family, friends) expect them to use FP to space/limit subsequent births						
*Indicator reflects the percentage who strongly agree	13.1	15.8	11.1	17.1	12.2	16.5
Percent of FTMs aged 15-24 years (who think most new mothers in their community use family planning within the first six weeks following childbirth to space/limit subsequent births	8.8	21.1	10.3	22.1	9.5	21.6
Percent of FTMs aged 15-24 years who received postpartum family planning counseling from a community-based health worker who visited the household in the past 12 months						
*Based on current users of a modern family planning method		29.6		36.8		33.3
Percent of FTMs aged 15-24 years with a sick newborn who reported seeking care from a skilled provider for that sick newborn		73.8		80.2		77.1
Percent of FTMs aged 15-24 years (male partners) who have a plan for emergency transport to a health facility for the sick newborn/mother, should it be needed	48.3	65.3	54.8	67.2	51.5	66.2
Percent of infants 0-5 months of age born to FTMs aged 15-24 years who are fed exclusively with breastmilk		70.4		73.4		71.9
Percent of infants born to FTMs aged 15-24 years who were put to the breast within one hour of birth		52.3		58.2		55.2

	Intervention Health Zones					
	Age 15-19		Age 20-24		Total	
Indicator	Baseline	Endline	Baseline	Endline	Baseline	Endline
Percent of newborns to FTMs aged 15-24 years who received a postnatal care check within two days of birth		94.9		94.4		94.7
Percent of FTMs aged 15-24 years receiving postpartum care within two days of childbirth		89.6		92.9		91.2
Percent of births to FTMs aged 15-24 years delivered in a health facility		97.0		96.0		96.5
Percent of FTMs aged 15-24 years with postpartum complications who sought treatment at a health facility		87.9		92.9		90.7
Percent of FTMs aged 15-24 years with a sick newborn who were referred by nursing students to health facilities for sick newborn care		42.2		46.2		44.2
Percent of FTMs aged 15-24 years who know at least three warning/danger signs of newborn complications	22.8	39.4	25.5	44.8	24.1	42.0
Percent of FTMs aged 15-24 years (male partners) who know at least three warning/danger signs of obstetric complications during pregnancy/labor/childbirth/the postpartum period	22.0	61.6	24.2	65.5	23.1	63.5
Percent of FTMs aged 15-24 years who are knowledgeable about three recommendations for home-based care of low birth weight/premature newborns	14.6	32.2	18.8	35.5	16.7	33.9
Percent of FTMs aged 15-24 years who have positive beliefs about the benefits of Kangaroo Mother Care for low birthweight/premature newborns						
*Refers to the percentage who know three or more benefits of Kangaroo Mother Care	21.8	30.4	19.7	31.9	20.8	31.1
Percent of FTMs aged 15-24 years (male partners) who believe that those in their social network/reference group (e.g., family, friends) are supportive of Kangaroo Mother Care for low birthweight/premature newborns						
*Refers to the percentage who strongly agree that most people who are important to them are supportive of Kangaroo Mother Care for low birthweight/premature newborns	30.0	47.0	39.0	45.8	34.4	46.4
Gender relations scale – mean equity sub-scale FP/MNH and nutrition self-efficacy scale	7.9	7.9	8.3	7.9	8.1	7.9
*Proxy indicator: Generalized Self-efficacy Scale	28.4	30.4	29.7	31.4	29.1	30.9
Percent of FTMs aged 15-24 years who make decisions about postpartum family planning either alone or jointly with their partner		72.8		78.9		75.9
Percent of FTMs aged 15-24 years who discussed the number of children they would like to have with their partner in the past 12 months	50.4	55.8	63.1	66.1	56.6	61.0
Percent of FTMs aged 15-24 years who believe that women using post-partum family planning will be sanctioned by the community						
Proxy indicator: Percent of FTMs aged 15-24 years who believe the community will say "bad things" about women who use family planning in the first six weeks following childbirth	45.4	36.3	43.2	38.9	44.3	37.6

	Intervention Health Zones					
	Age 15-19		Age 20-24		Total	
Indicator	**Baseline**	**Endline**	**Baseline**	**Endline**	**Baseline**	**Endline**
Percent of FTMs aged 15-24 years who would still use postpartum family planning even if members of their social network do not approve						
Proxy indicator: Percent of FTMs aged 15-24 years who would still use postpartum family planning even if all five named referents did not want them to	44.8	38.8	39.4	40.5	42.1	39.6
Percent of FTMs aged 15-24 years (male partners) who make decisions about specific MNH household and nutrition practices either alone or jointly with their partner						
(a) Number of ANC visits	48.5	59.8	55.3	62.6	51.9	61.2
(b) Where to deliver the baby	47.7	53.9	61.0	65.1	54.2	59.4
Percent of FTMs aged 15-24 years participating in Program M group education sessions who think that others in their social network believe that women have a right to make FP/MNH decisions		89.0		88.5		88.7

Notes: Data are restricted to FTMs who were interviewed in both the baseline and endline surveys.