



PMA KENYA (KERICHO)

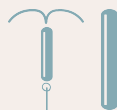
Results from Phase 2 cross-sectional survey

November–December 2020

OVERALL KEY FINDINGS



Use of modern contraceptive methods has increased among all women of reproductive age from 38% in 2014 to 46% in 2020.



We observe notable improvement in commodity stock availability in public facilities in 2020, but stock-outs for long acting method remains high at 24% for implant and 13% for IUD.

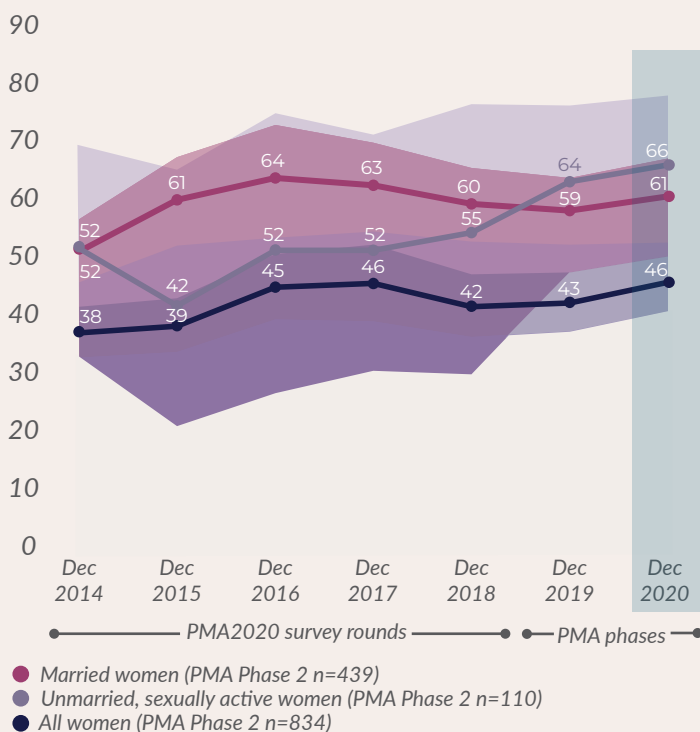


42% of the most recent birth/current pregnancy were unintended, with 28% mistimed and 14% not wanted.

SECTION 1: CONTRACEPTIVE USE, DYNAMICS, AND DEMAND

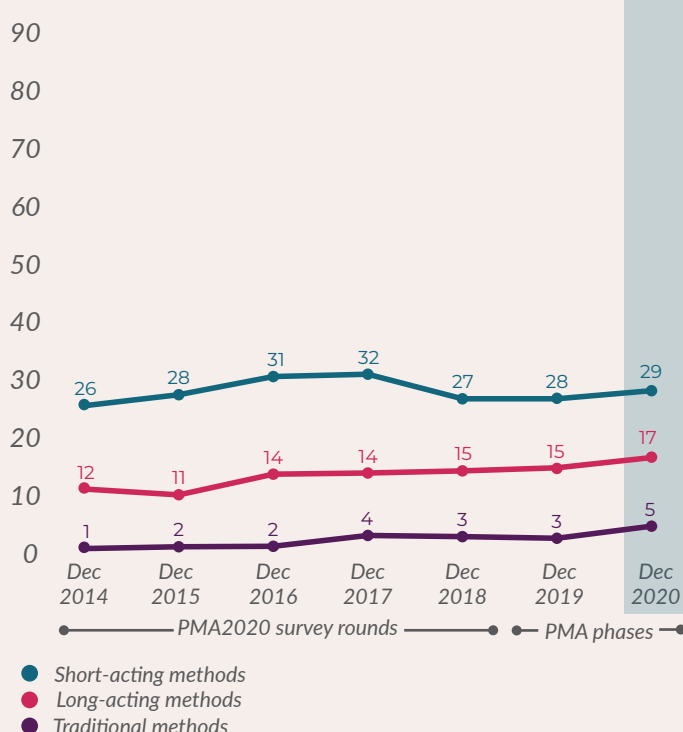
MODERN CONTRACEPTIVE PREVALENCE

Percent of women age 15-49 currently using modern contraception (mCPR) by marital status



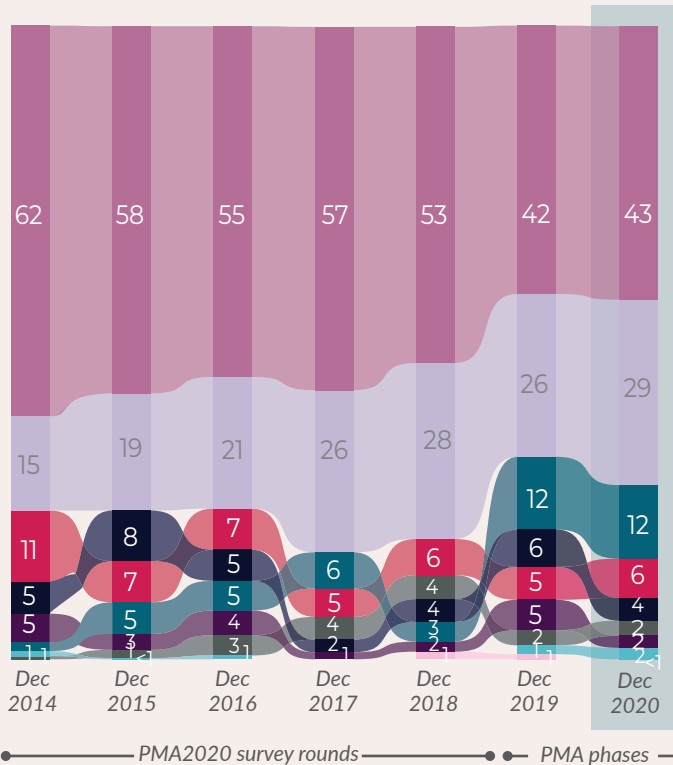
CONTRACEPTIVE PREVALENCE BY METHOD TYPE

Percent of all women age 15-49 currently using contraception by method type (PMA Phase 2 n=834)



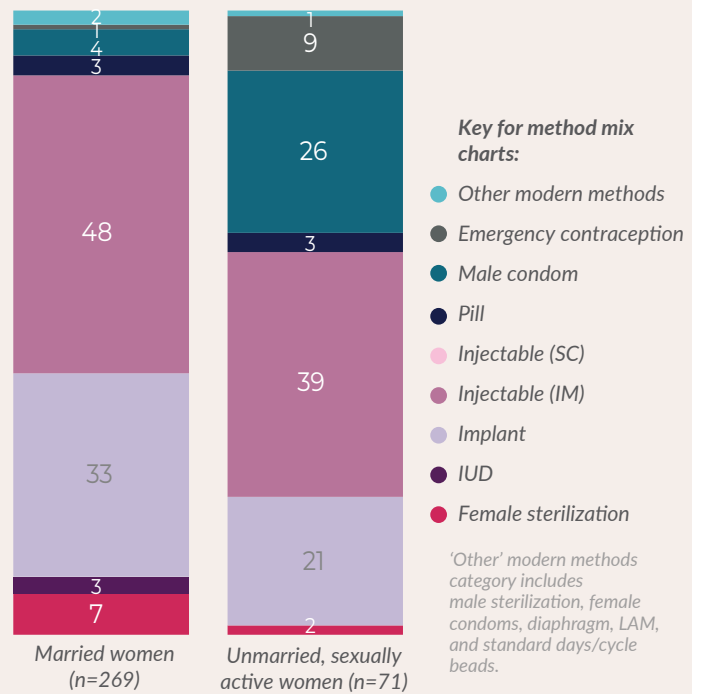
TRENDS IN MODERN CONTRACEPTIVE MIX

Percent distribution of all women age 15-49 using modern contraceptive methods by method and year (PMA Phase 2 n=387)



MODERN CONTRACEPTIVE METHOD MIX

Percent distribution of modern contraceptive users age 15-49 by method and marital status



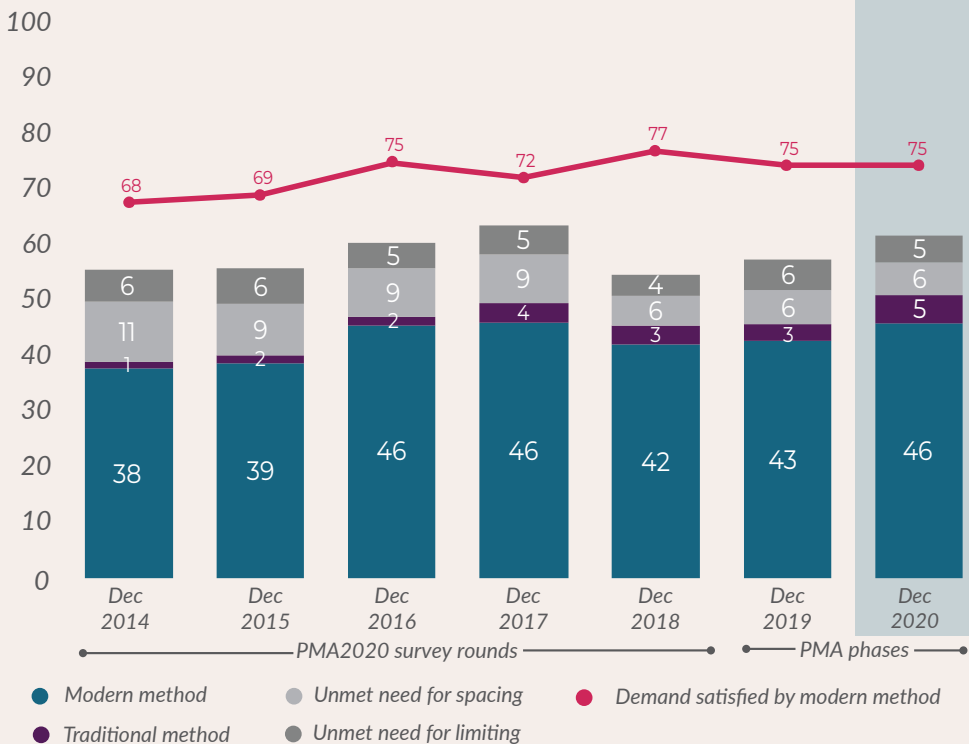
Key for method mix charts:

- Other modern methods
- Emergency contraception
- Male condom
- Pill
- Injectable (SC)
- Injectable (IM)
- Implant
- IUD
- Female sterilization

'Other' modern methods category includes male sterilization, female condoms, diaphragm, LAM, and standard days/cycle beads.

METHOD USE, UNMET NEED, AND DEMAND SATISFIED BY A MODERN METHOD

Percent of all women age 15-49 using contraception by method type, unmet need, and demand satisfied by a modern method (PMA Phase 2 n=834)



INTENTION TO USE CONTRACEPTION IN THE NEXT YEAR

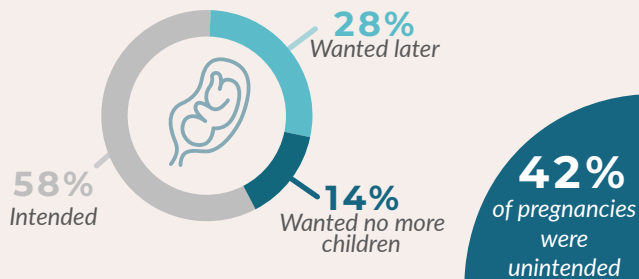
Percent of all women age 15-49 who are not currently using contraception but intend to use contraception in the next 12 months (n=364)



Demand satisfied by a modern method is use of modern contraceptive methods divided by the sum of unmet need plus total contraceptive use.

INTENTION OF MOST RECENT BIRTH/CURRENT PREGNANCY

Percent of women by intention of their most recent birth or current pregnancy (n=579)



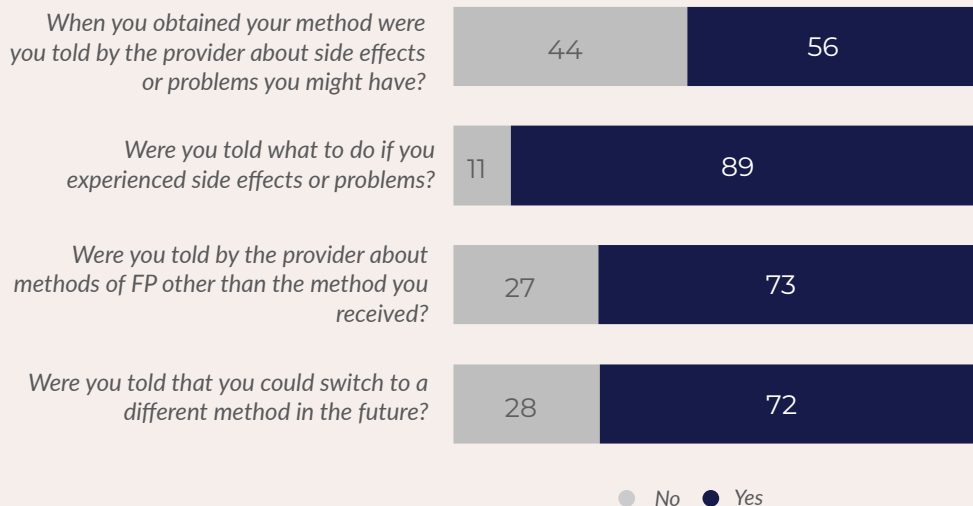
KEY FINDINGS FOR SECTION 1: CONTRACEPTIVE USE, DYNAMICS, AND DEMAND

- Overall modern contraceptive has increased, with a notable increase in implants use.
- About 20% of the contraceptive non users intend to use a contraceptive in the next 12 months.
- 42% of the pregnancies were unintended, with 28% mistimed while 14% were not wanted.
- 1 in 10 women of reproductive age have an unmet need for family planning.

SECTION 2: CONTRACEPTIVE USER COUNSELING AND OUTREACH

METHOD INFORMATION INDEX PLUS (MII+)

Percent of women who were told about side effects, what to do about side effects, of other methods, and the possibility of switching methods (n=361)

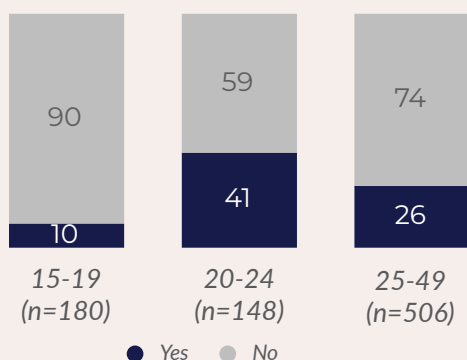


Percent of women who responded "Yes" to all four MII+ questions



DISCUSSED FP IN THE PAST YEAR WITH PROVIDER/CHW

Percent of women who received FP information from a provider or community health worker (CHW), by age



KEY FINDINGS FOR SECTION 2: COUNSELING AND OUTREACH

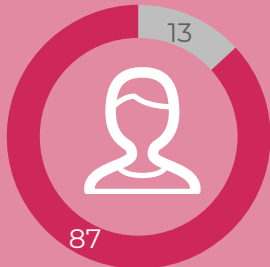
- 6 in every 10 women did not receive comprehensive counseling when they obtained their current method.
- Adolescents are less likely to have discussed FP information with a provider or community health worker.

SECTION 3: PARTNER DYNAMICS

PARTNER INVOLVEMENT IN FP DECISIONS

Percent of women who are currently using modern, female controlled methods and agree with the following statement, by age and education (n=341)

Does your partner know you are using this method?



● Yes ● No

By age



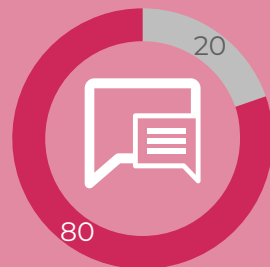
By education



Modern, female controlled methods Includes all modern methods except male sterilization and male condoms

Percent of women who are currently using modern, female controlled methods and agree with the following statement, by age and education (n=341)

Before you started using this method had you discussed the decision to delay or avoid pregnancy with your partner?



● Yes ● No

By age



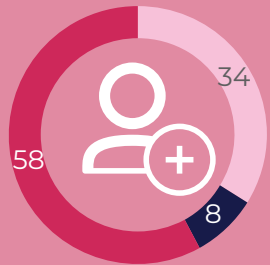
By education



Modern, female controlled methods Includes all modern methods except male sterilization and male condoms

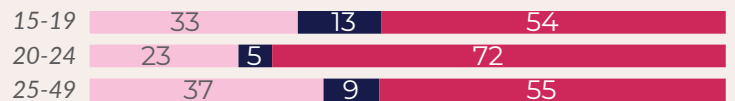
Percent of women who are currently using FP and agree with the following statement, by age and education (n=426)

Would you say that using FP is mainly your decision?

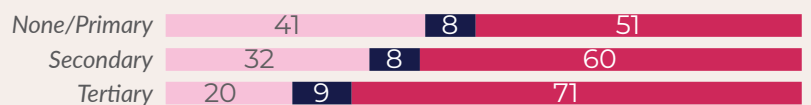


● Mainly respondent
● Mainly husband/partner
● Joint decision
● Other

By age

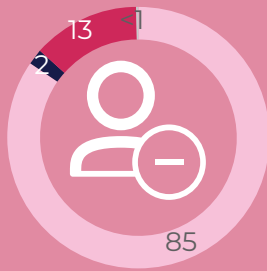


By education



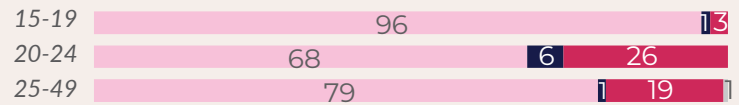
Percent of women who are not currently using FP and agree with the following statement, by age and education (n=367)

Would you say that not using FP is mainly your decision?

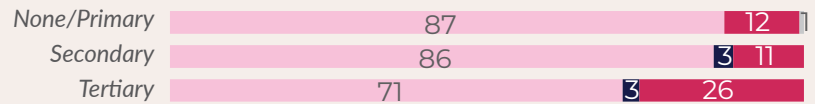


- Mainly respondent
- Mainly husband/partner
- Joint decision
- Other

By age

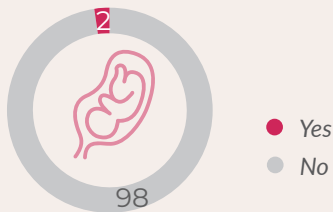


By education

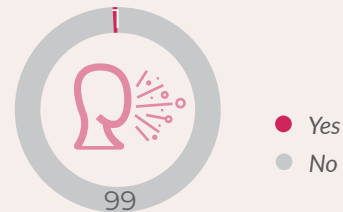


PREGNANCY COERCION

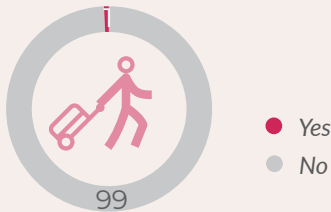
Percent of currently married women who report that their partner tried to force or pressure them to become pregnant in the past 12 months (n=439)



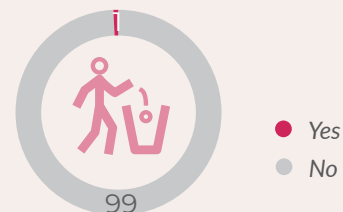
Percent of currently married women who report that their partner made them feel badly for wanting to use an FP method to delay or prevent pregnancy in the past 12 months (n=439)



Percent of currently married women who report that their partner said he would leave them if they did not get pregnant in the past 12 months (n=439)



Percent of currently married women who report that their partner took away their FP method or kept them from a clinic in the past 12 months (n=439)



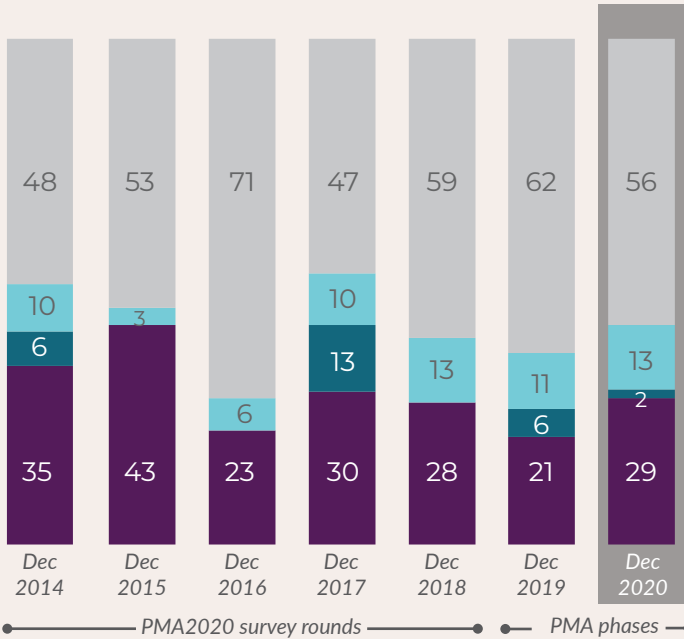
KEY FINDINGS FOR SECTION 3: PARTNER DYNAMICS

- 87% of the women using a modern method that can be concealed, reported that their partners are aware of the method they are using.
- 2 in every 10 women who are currently using a modern, female controlled method did not discuss the decision to delay or avoid pregnancy with their partner before they started using.
- The decision to use FP is a joint decision for only 58% of the women. There are difference by age and education.

SECTION 4: SERVICE DELIVERY POINTS

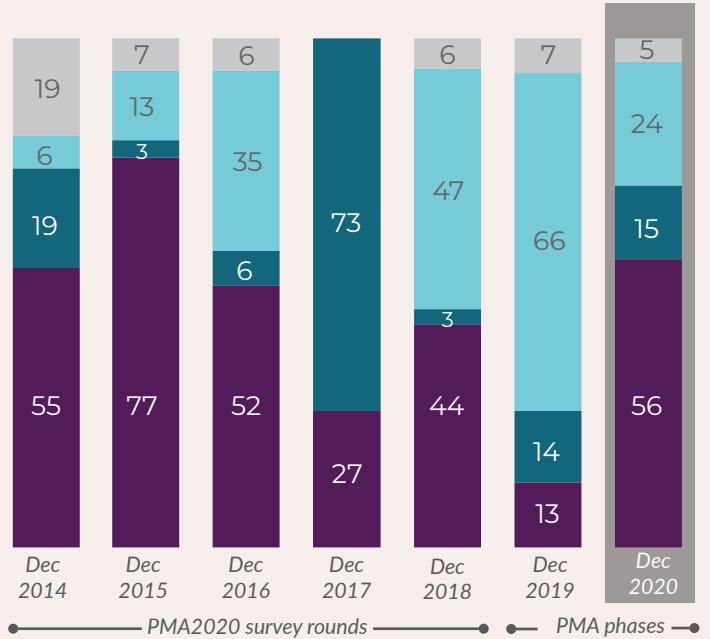
TRENDS IN METHOD AVAILABILITY: IUD

Public facilities (PMA Phase 2 n=62)



TRENDS IN METHOD AVAILABILITY: IMPLANT

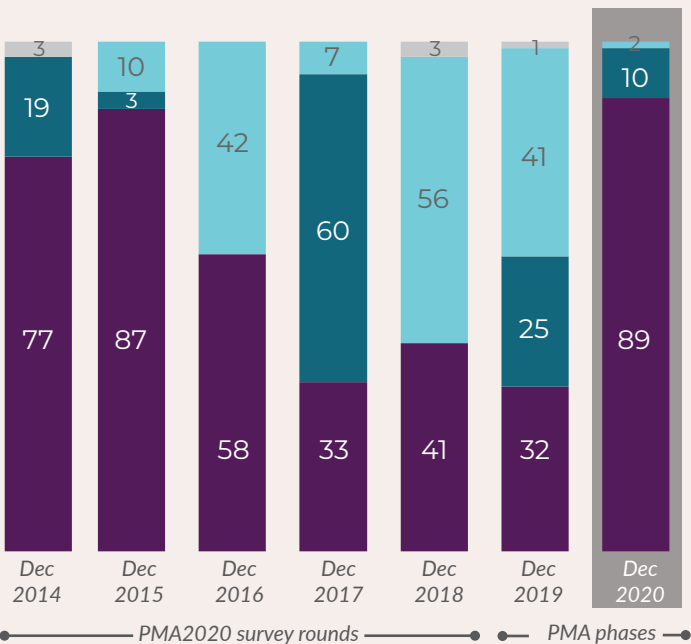
Public facilities (PMA Phase 2 n=62)



● Currently in stock and no stockout in last 3 months ● Currently in stock but stockout in last 3 months ● Currently out of stock ● Not offered

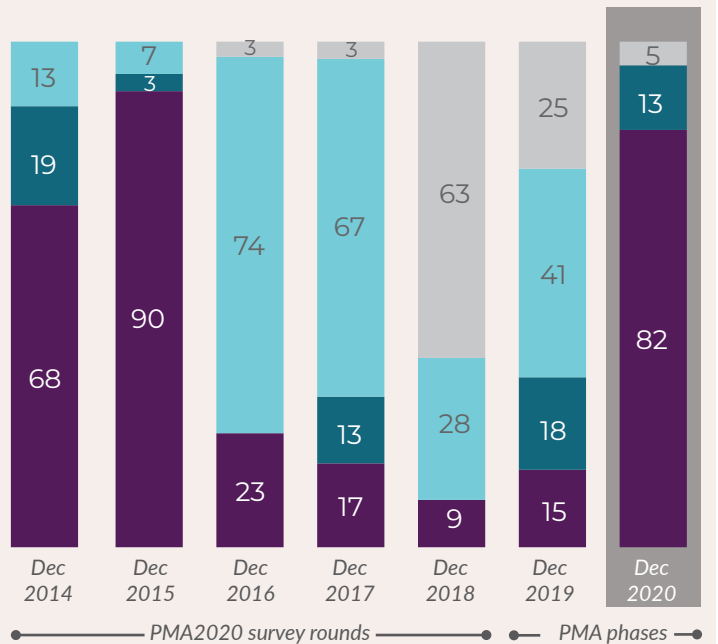
TRENDS IN METHOD AVAILABILITY: INJECTABLES

Public facilities (PMA Phase 2 n=62)



TRENDS IN METHOD AVAILABILITY: PILLS

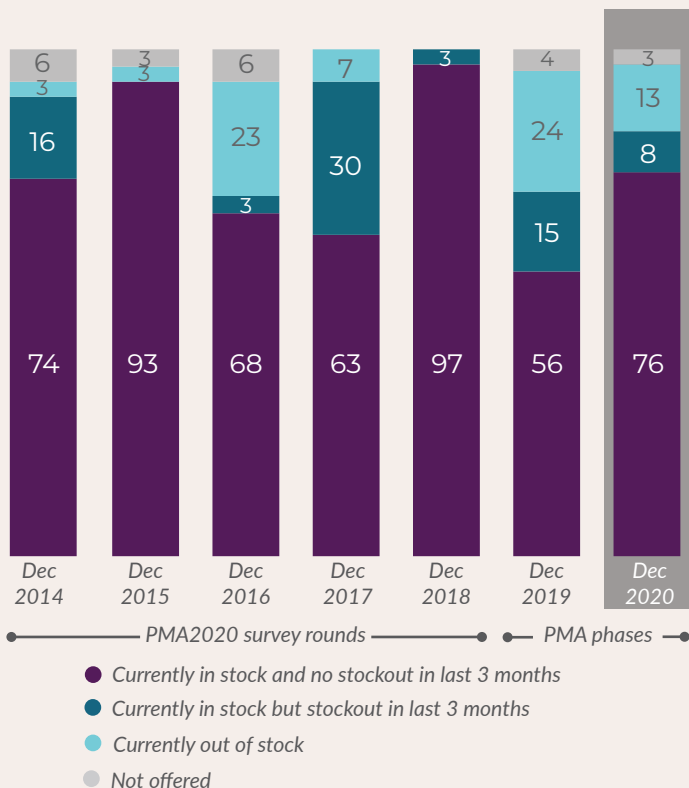
Public facilities (PMA Phase 2 n=62)



● Currently in stock and no stockout in last 3 months ● Currently in stock but stockout in last 3 months ● Currently out of stock ● Not offered

TRENDS IN METHOD AVAILABILITY: MALE CONDOMS

Public facilities (PMA Phase 2 n=62)

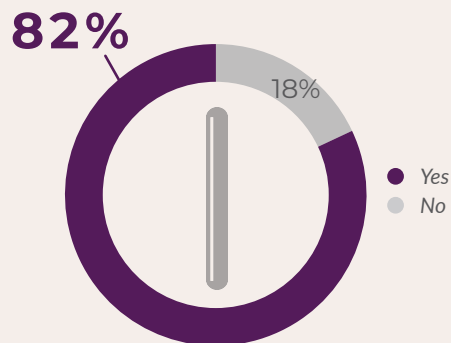


65%

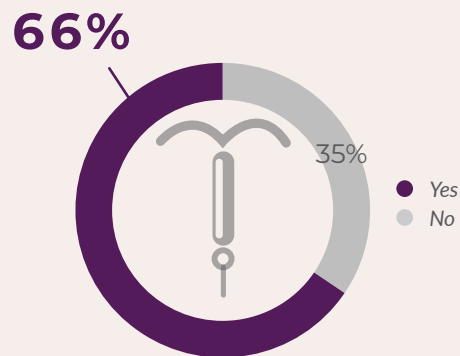
of women obtained their current modern method from a public health facility (n=382)

FACILITY READINESS

Percent of facilities that provide implants and have a trained provider and instruments/supplies needed for implant insertion/removal (n=61)



Percent of facilities that provide IUDs and have a trained provider and instruments/supplies needed for IUD insertion/removal (n=29)



MAIN REASON FOR STOCKOUT OF ANY METHOD BY TYPE OF FACILITY

Public facilities (n=47)

57%
Ordered but did not receive shipment

17%
Ordered but did not receive right quantities

17%
Unexpected increase in consumption

Possible answers were "Did not place order for shipment", "Ordered but did not receive shipment", "Did not order the right quantities", "Ordered but did not receive the right quantities", "Unexpected increase in consumption", "Stock out due to COVID-19 disruption", and "Other."

KEY FINDINGS FOR SECTION 4: SERVICE DELIVERY POINTS

- 65% of the women obtained their current modern method from public health facilities.

- There is limited access to IUD services among public facilities, only 44% were offering IUDs

- Among all facilities providing IUDs, 35% did not have trained providers and instruments/supplies needed for their insertion and removal.

- The most common reason given for stock-outs among public facilities is that they placed the order 57%, but did not receive the shipment.

TABLES: CONTRACEPTIVE PREVALENCE AND UNMET NEED

ALL WOMEN				CPR				mCPR				Unmet need for family planning			
Data source	Round/Phase	Data collection	Female sample	CPR%	SE	95% CI		mCPR%	SE	95% CI		Unmet need (%)	SE	95% CI	
PMA 2020	R2	Nov-Dec 2014	476	38.98	1.93	34.87	43.26	37.74	2.04	33.43	42.26	16.72	1.45	13.79	20.12
PMA 2020	R4	Nov-Dec 2015	615	40.29	2.07	35.88	44.87	38.76	2.14	34.21	43.51	15.71	2.27	11.39	21.27
PMA 2020	R5	Nov-Dec 2016	571	47.00	2.77	40.99	53.09	45.44	2.58	39.85	51.14	13.38	3.36	7.62	22.43
PMA 2020	R6	Nov-Dec 2017	553	49.61	3.44	42.12	57.11	46.06	3.04	39.50	52.76	14.12	2.67	9.23	21.00
PMA 2020	R7	Nov-Dec 2018	531	45.44	2.27	40.51	50.45	42.13	2.48	36.80	47.65	9.24	2.23	5.41	15.34
PMA	Phase 1	Nov-Dec 2019	874	45.80	2.86	39.99	51.73	42.53	2.49	37.47	47.74	11.68	1.66	8.67	15.56
PMA	Phase 2	Nov-Dec 2020	834	51.08	2.52	45.89	56.24	45.96	2.30	41.27	50.73	10.61	1.52	7.87	14.16

WOMEN IN UNION				CPR				mCPR				Unmet need for family planning			
Data source	Round/Phase	Data collection	Female sample	CPR%	SE	95% CI		mCPR%	SE	95% CI		Unmet need (%)	SE	95% CI	
PMA 2020	R2	Nov-Dec 2014	287	57.26	6.71	42.63	70.71	56.02	6.60	41.73	69.37	20.12	4.44	12.22	31.30
PMA 2020	R4	Nov-Dec 2015	311	72.50	6.09	57.83	83.52	70.92	6.49	55.45	82.70	12.72	3.73	6.64	23.00
PMA 2020	R5	Nov-Dec 2016	343	67.02	6.09	52.79	78.69	65.41	5.90	51.78	76.91	11.51	2.30	7.36	17.54
PMA 2020	R6	Nov-Dec 2017	342	62.68	5.58	49.98	73.85	59.97	5.40	47.86	70.98	13.85	3.02	8.48	21.80
PMA 2020	R7	Nov-Dec 2018	343	70.58	5.31	57.93	80.70	68.25	5.71	54.82	79.21	10.57	3.46	5.11	20.59
PMA	Phase 1	Nov-Dec 2019	582	61.11	3.75	53.26	68.43	57.97	3.96	49.77	65.75	14.33	1.93	10.83	18.73
PMA	Phase 2	Nov-Dec 2020	439	67.16	3.70	59.15	74.28	60.63	3.55	53.12	67.66	13.33	1.98	9.75	17.97

PMA Kenya (Kericho) collects information on knowledge, practice, and coverage of family planning services in 25 enumeration areas selected using a multi-stage stratified cluster design with urban-rural strata. The results county-level representative. Data were collected between November and December 2020 from 815 households (97.5% response rate), 834 females age 15-49 (99.6% response rate), and 71 facilities (85.5% completion rate). For sampling information and full data sets, visit www.pmadata.org/countries/kenya.

Percentages presented in this brief have been rounded and may not add up to 100%

PMA uses mobile technology and female resident data collectors to support rapid-turnaround surveys to monitor key family planning and health indicators in Africa and Asia. PMA Kenya is led by the Ministry of Health in collaboration with International Centre for Reproductive Health Kenya (ICRHK), National Council for Population and Development, and Kenya National Bureau of Statistics. Overall direction and support are provided by the Bill & Melinda Gates Institute for Population and Reproductive Health at the Johns Hopkins University and Jhpiego. Funding is provided by the Bill & Melinda Gates Foundation.