PERFORMANCE MONITORING FOR ACTION



PMA KENYA (NATIONAL)

Results from Phase 3 cross-sectional survey

November-December 2021

OVERALL KEY FINDINGS



The country has been experiencing stagnation in contraceptive use since 2020.



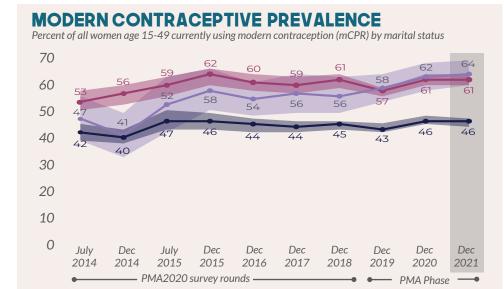


Implants and injectables have remained the dominant methods of contraception among all women, accounting for over 70% of the method mix.



Stockouts of the most popular contraceptive methods have increased in the past year, most notably for implants.

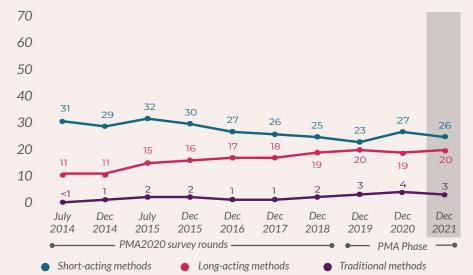
SECTION 1: CONTRACEPTIVE USE, DYNAMICS, AND DEMAND



- Married women (PMA Phase 3 n=5,248)
- Unmarried, sexually active women (PMA Phase 3 n=1,133)
- All women (PMA Phase 3 n=9,489)

CONTRACEPTIVE PREVALENCE BY METHOD TYPE

Percent of all women age 15-49 currently using contraception by method type (PMA Phase 3 n = 9,489)















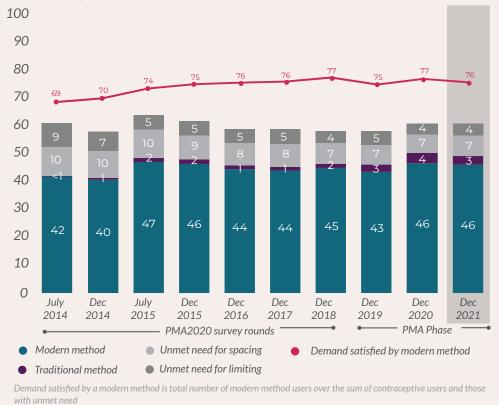


TRENDS IN MODERN CONTRACEPTIVE MIX Percent distribution of all women age 15-49 using modern contraceptive methods by method and year (PMA Phase 3 n=4,382) 35 8 10 10 12 9 8 8 6 6 8 4 6 5 July Dec July Dec Dec Dec Dec Dec Dec Dec 2015 2015 2019 2014 2014 2016 2017 2018 2020 2021 PMA2020 survey rounds PMA Phase -

MODERN CONTRACEPTIVE METHOD MIX Percent distribution of modern contraceptive users age 15-49 by method and marital status 3 8 Key for method mix 29 charts: Other modern methods Emergency contraception Male condom 10 Pill Injectable (SC) Injectable (IM) Implant IUD Female sterilization "Other modern methods" include male sterilization, standard days/cycle beads, LAM, female condoms, and diaphragm. Married women Unmarried, sexually (n=3,195)active women (n=724)

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 3 n=9,489)



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=4,377)





INTENTION OF MOST RECENT BIRTH/CURRENT PREGNANCY Percent of women by intention of their most recent birth or current pregnancy (n=3,731) 34% Wanted later 7% Intended Wanted no more 6 pregnancies

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

- The use of modern contraceptives has stagnated for all women at 46% and married women at 61% since 2020.
- Implants and injectables account for 78% of the methods used by married women, while implants, injectables, and condoms account for 83% of the methods used by unmarried sexually active women.
- 41% of the most recent births or current pregnancies were unintended, with 34% mistimed and 7% not wanted.

SECTION 2: CONTRACEPTIVE USER COUNSELING AND OUTREACH

were unintended

METHOD INFORMATION INDEX PLUS (MII+)

children

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=4,326)

When you obtained your method were you told by the provider about side effects or problems you might have?

70

Were you told what to do if you experienced side effects or problems?

93

Were you told by the provider about methods of FP other than the method you received?

25 75

Were you told that you could switch to a different method in the future?

77

No Yes

answered "No" to at least one MII+ question

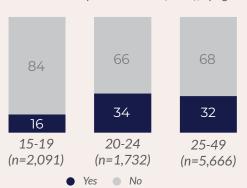
to all four MII+ auestions

Percent of women who responded "Yes"

57% answered "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

- Only 57% of the women received comprehensive contraceptive counseling.
- One in three women reported that they were not informed about contraceptives' side effects.
- •Only 16% of adolescents reported that they had discussed family planning with a health care provider or community health worker in the past year. In contrast, 34% of women aged 20-24, and 32% of women aged 25-49 reported similar FP discussions.

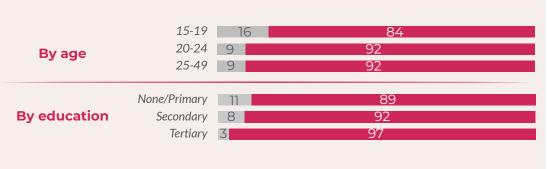


SECTION 3: PARTNER DYNAMICS

PARTNER INVOLVEMENT IN FP DECISIONS

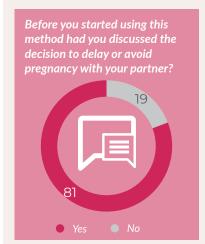
Percent of women who are currently using modern, female controlled methods and agree with the following statement, by age and education (n=3,211)

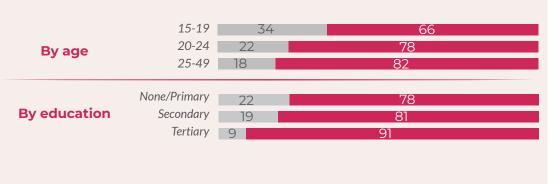




Modern, female controlled methods includes all modern methods except male sterilization and male condoms

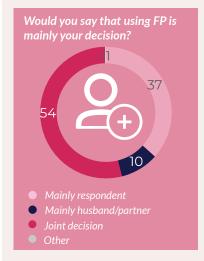
Percent of women who are currently using modern, female controlled methods and agree with the following statement, by age and education (n=3,209)

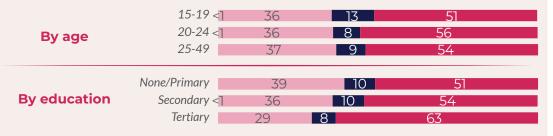




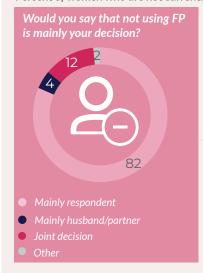
Modern, female controlled methods includes all modern methods except male sterilization and male condoms

Percent of women who are currently using FP and agree with the following statement, by age and education (n=3,654)





Percent of women who are not currently using FP and agree with the following statement, by age and education (n=4,435)



By age	15-19 20-24 25-49	1	91 82 72	l 6 4 13 8 19
By education	None/Primary	3	76	7 14
	Secondary	1	87	2 10
	Tertiary	1	81	2 16

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=5,239)



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=5,239)



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=5,239)



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=5,239)

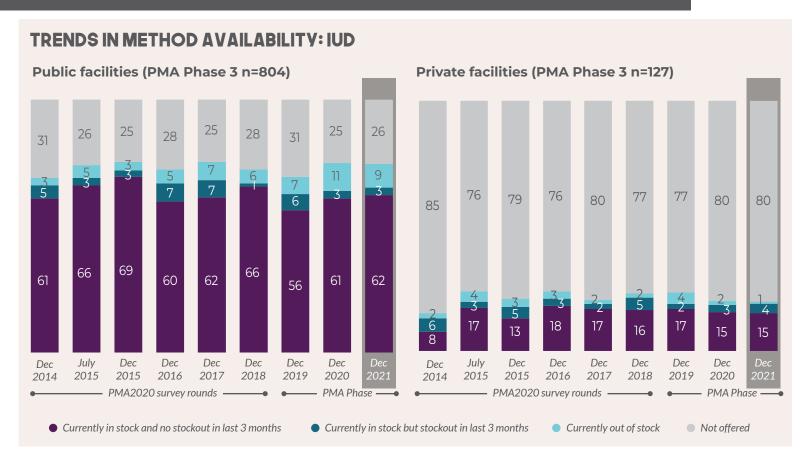


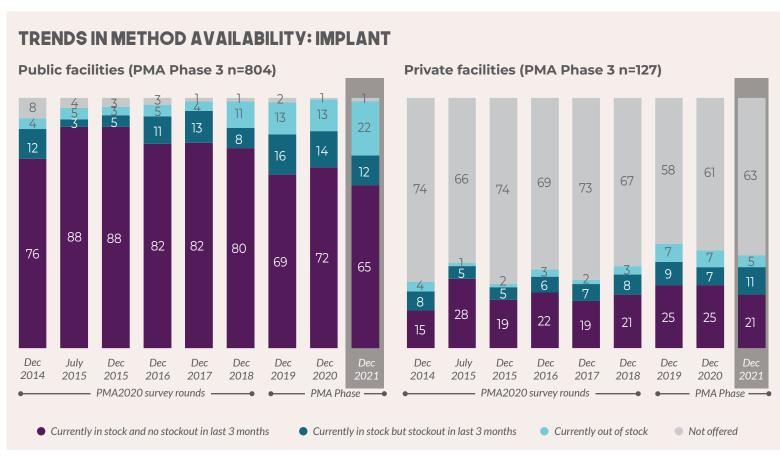
KEY FINDINGS FOR SECTION 3: PARTNER DYNAMICS

- Among women using a female controlled modern contraceptive method, over 90% reported that their partners were aware of the contraceptive method that they were using.
- About 81% of women using a female-controlled modern method reported that they discussed with their partner their decision to delay or avoid a pregnancy before starting to use their current method, with lower proportions of 66% among adolescent girls.
- 10% of the women currently using family planning reported that the decision to use contraception was made mainly by their partner.

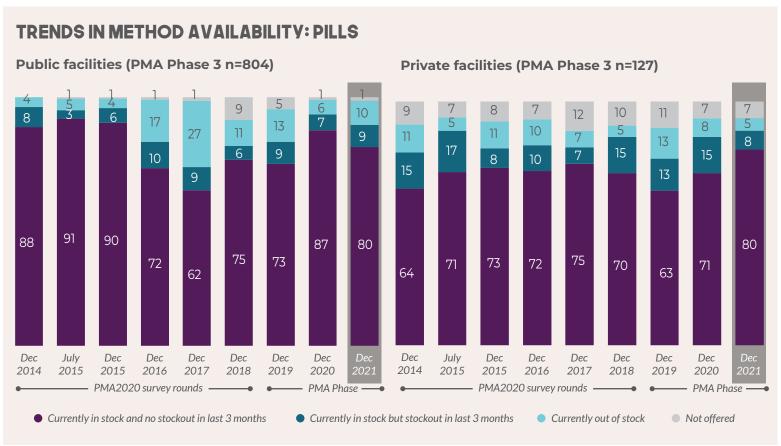


SECTION 4: SERVICE DELIVERY POINTS





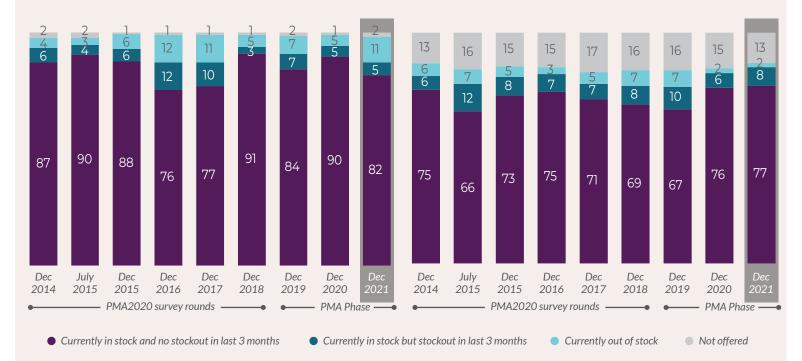




TRENDS IN METHOD AVAILABILITY: MALE CONDOMS

Public facilities (PMA Phase 3 n=804)

Private facilities (PMA Phase 3 n=127)



MAIN REASON FOR EPISODES OF STOCKOUT OF ANY METHOD BY TYPE OF FACILITY

Public facilities (n=1,186 episodes)

85% Ordered but did not

6%
Did not place order for shipment

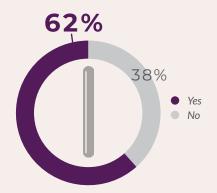
Private facilities (n=65 episodes)

63% Ordered but did no receive shipment 17%
Did not place order for shipment

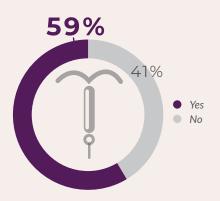
Possible answers were "Did not place order for shipment", "Ordered but did not receive shipment", "Did not order the right quantities", "Ordered but did not receive the right quantities", "Unexpected increase in consumption", "Stock out due to COVID-19 disruption", and "Other."

FACILITY READINESS

Percent of facilities that provide implants and have a trained provider and instruments/supplies needed for implant insertion/removal (n=794)



Percent of facilities that provide IUDs and have a trained provider and instruments/supplies needed for IUD insertion/removal (n=598)





of women obtained their current modern method from a public health facility (n=4,326)

KEY FINDINGS FOR SECTION 4: SERVICE DELIVERY POINTS

- Contraceptive stockouts for implants, injectables, pills, and male condoms increased in the past year in public health facilities.
- One in four public facilities were not offering IUDs, while 41% of those offering did not have a trained provider and instruments/supplies needed for IUD insertion or removal.
- The main reason reported for stockout was that an order had been placed but shipment had been delayed in public and private health facilities.



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	R1	May-July 2014	3,754	41.76	1.41	38.99	44.58	41.58	1.41	38.82	44.39	18.74	0.78	17.24	20.33
PMA 2020	R2	Nov-Dec 2014	4,329	40.99	1.23	38.57	43.45	40.29	1.23	37.87	42.75	16.61	0.97	14.77	18.62
PMA 2020	R3	June-July 2015	4,396	48.09	1.64	44.86	51.33	46.53	1.64	43.30	49.79	15.25	1.03	13.32	17.40
PMA 2020	R4	Nov-Dec 2015	4,921	47.79	1.46	44.92	50.68	45.98	1.40	43.22	48.77	13.54	0.78	12.07	15.15
PMA 2020	R5	Nov-Dec 2016	5,894	45.63	1.18	43.31	47.97	44.24	1.17	41.94	46.56	12.89	0.80	11.39	14.56
PMA 2020	R6	Nov-Dec 2017	5,876	45.03	1.08	42.91	47.18	43.75	1.05	41.68	45.84	12.50	0.70	11.18	13.95
PMA 2020	R7	Nov-Dec 2018	5,671	46.11	1.00	44.14	48.09	44.60	0.99	42.65	46.55	11.52	0.57	10.44	12.70
PMA	Phase 1	Nov-Dec 2019	9,477	45.67	0.84	44.02	47.32	43.21	0.80	41.65	44.80	12.07	0.48	11.15	13.05
PMA	Phase 2	Nov-Dec 2020	9,323	49.80	0.81	48.20	51.40	46.24	0.76	44.76	47.73	10.37	0.42	9.56	11.23
PMA	Phase 3	Nov-Dec 2021	9,489	48.78	0.78	47.24	50.32	45.64	0.77	44.12	47.15	11.50	0.54	10.48	12.61

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	R1	May-July 2014	2,498	53.70	1.81	50.09	57.26	53.44	1.80	49.86	56.98	24.81	1.06	22.78	26.96
PMA 2020	R2	Nov-Dec 2014	2,650	56.63	1.67	53.30	59.90	55.60	1.65	52.31	58.84	21.29	1.24	18.94	23.85
PMA 2020	R3	June-July 2015	2,744	61.08	1.66	57.76	64.31	58.84	1.69	55.46	62.13	17.07	1.07	15.05	19.30
PMA 2020	R4	Nov-Dec 2015	2,826	64.65	1.47	61.68	67.50	62.30	1.45	59.40	65.13	16.80	1.04	14.84	18.96
PMA 2020	R5	Nov-Dec 2016	3,501	61.62	1.45	58.72	64.44	59.87	1.46	56.96	62.72	15.24	1.11	13.18	17.56
PMA 2020	R6	Nov-Dec 2017	3,404	60.52	1.33	57.85	63.12	58.98	1.30	56.38	61.53	14.88	0.83	13.31	16.60
PMA 2020	R7	Nov-Dec 2018	3,337	62.77	1.30	60.17	65.30	60.69	1.28	58.13	63.18	13.82	0.85	12.22	15.60
PMA	Phase 1	Nov-Dec 2019	5,594	59.68	0.90	57.90	61.44	56.67	0.89	54.92	58.41	15.01	0.61	13.85	16.25
PMA	Phase 2	Nov-Dec 2020	5,361	65.09	0.96	63.19	66.95	60.79	0.93	58.95	62.59	12.57	0.56	11.50	13.72
PMA	Phase 3	Nov-Dec 2021	5,248	64.68	0.94	62.80	66.51	60.76	1.00	58.78	62.71	14.26	0.67	12.99	15.64

PMA Kenya collects information on knowledge, practice, and coverage of family planning services in 308 enumeration areas selected using a multi-stage stratified cluster design with urban-rural strata. The results are nationally and county-level representative. Data were collected in 9 counties in PMA2020 R1-4 and 11 counties in PMA2020 R5-7 and PMA Phases 1, 2, and 3. Data were collected between November and December 2021 from 9,565 households (95.98% response rate), 9,489 females age 15-49 (98.55% response rate), 953 facilities (91.2% 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.

