PERFORMANCE MONITORING FOR ACTION



KENYA (WEST POKOT)

Results from Phase 2 panel survey

November-December 2020

OVERALL KEY FINDINGS



Overall, there is an increase in the proportion of women using contraceptives between Phases 1 & 2, though the level of non-users remains high.



Among women who continued to be non-users between Phases 1 & 2, the majority were likely to be 15-19 years, have no/primary education or had more than five children.

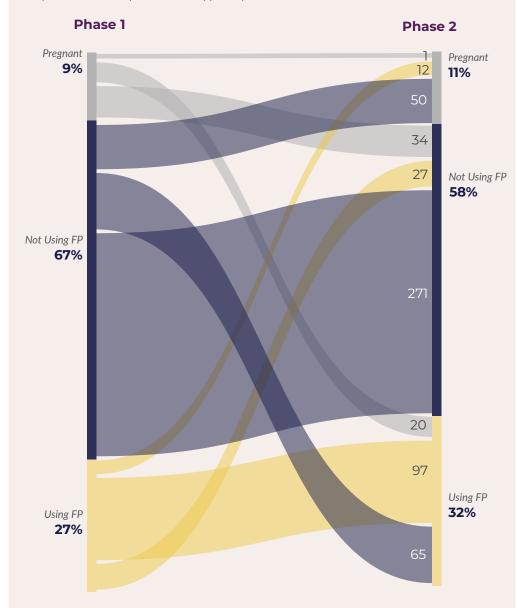


There is low uptake of contraceptive use among those intending to use in the future.

SECTION 1: OVERALL CONTRACEPTIVE DYNAMICS

CHANGE IN CONTRACEPTIVE USE OR NON-USE

Percent of women age 15-49 who changed contraceptive use status between PMA Phase 1 (December 2019) and PMA Phase 2 (December 2020) (n=577)











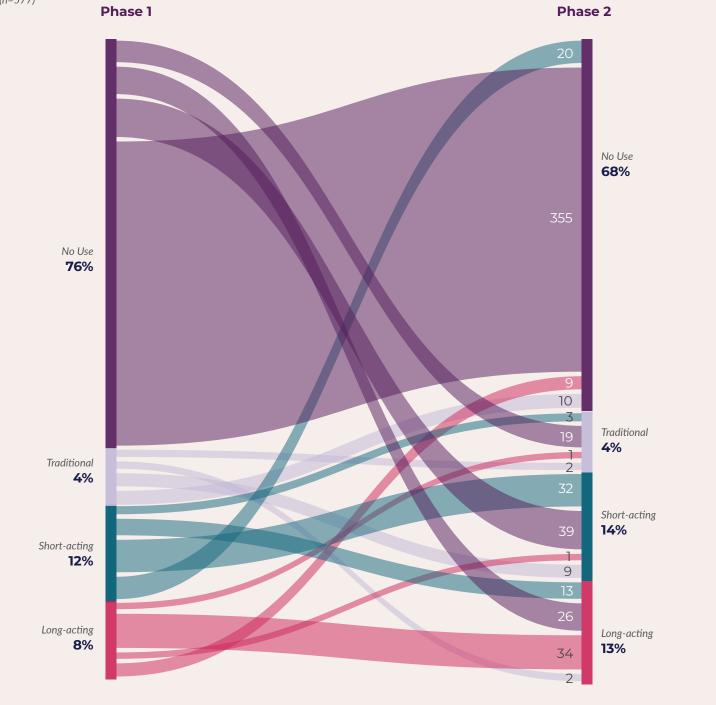






CHANGE IN CONTRACEPTIVE METHOD TYPE

Percent of women age 15-49 who changed contraceptive method or use status between PMA Phase 1 (December 2019) and PMA Phase 2 (December 2020) (n=577)

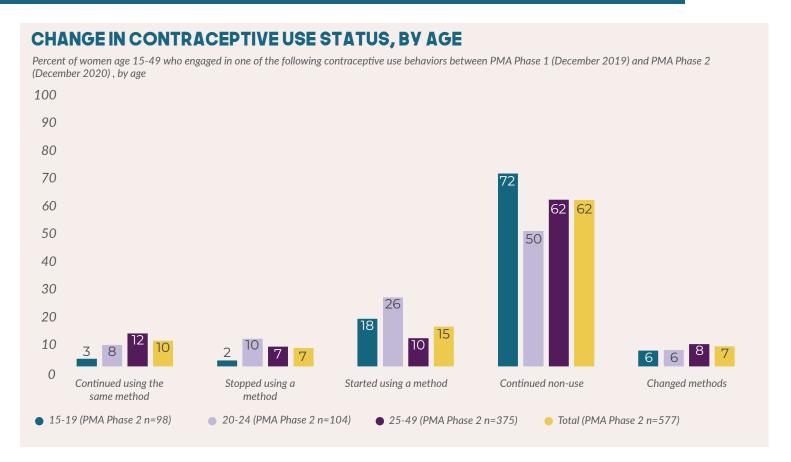


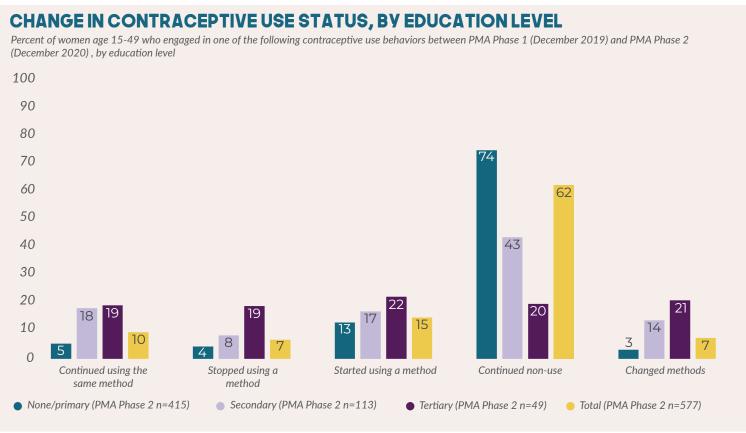
KEY FINDINGS FOR SECTION 1: OVERALL CONTRACEPTIVE DYNAMICS

- Contraceptive use has increased by 5 percentage points, with reduction in non-users by 9 percentage points.
- The proportion of women using long-acting methods has increased by 5 percentage points, due to the women who were non-users in Phase 1.

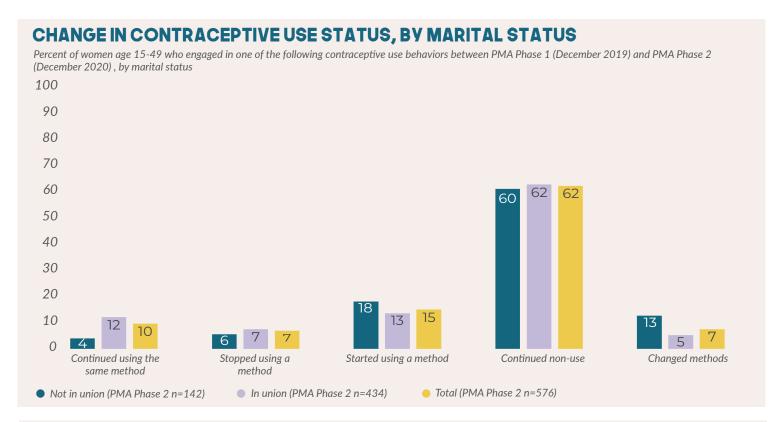


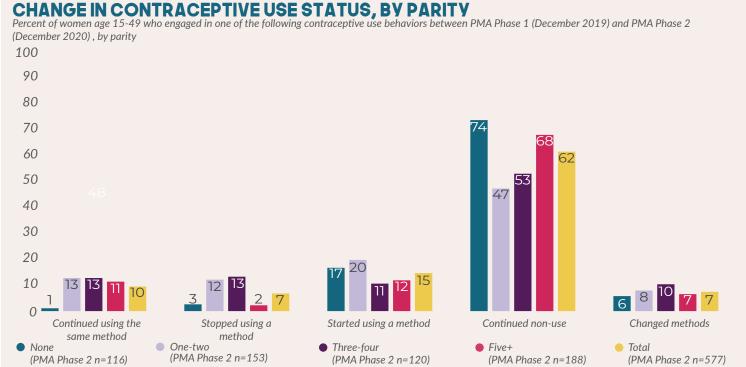
SECTION 2: CONTRACEPTIVE DYNAMICS BY KEY MEASURES











KEY FINDINGS FOR SECTION 2: CONTRACEPTIVE DYNAMICS BY KEY MEASURES

- Among women who had five or more children, 68% continued to be non-users between Phases 1 and 2.
- Relatively higher percentages of adolescents, women not in union, and women with no children remained non-users between Phase 1 and Phase 2.
- Over 60% of all women, irrespective of their marital status, remained non-users between Phase 1 and Phase 2.



SECTION 3: OTHER PANEL DYNAMICS

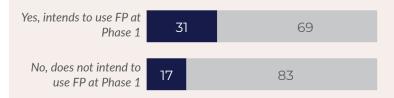
METHOD DISCONTINUATION

Among women 15-49 with unmet need at Phase 2, the percentage that stopped using a contraceptive method or became pregnant between the two surveys (n=118)



INTENTION TO USE FAMILY PLANNING

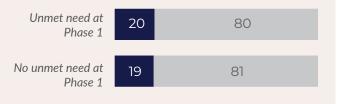
Percent of women age 15-49 who were not using an FP method at Phase 1 and who adopted an FP method, by their intention to use FP at Phase 1 (n=443)



Continued non-user at Phase 2 Adopted a method between Phase 1 and Phase 2

UNMET NEED FOR FAMILY PLANNING

Percent of women age 15-49 who were not using an FP method at Phase 1 and who adopted an FP method, by their unmet need status at Phase 1 (n=443)



Continued non-user at Phase 2 Adopted a method between Phase 1 and Phase 2

KEY FINDINGS FOR SECTION 3: OTHER PANEL DYNAMICS

- The majority of women with unmet need for FP at Phase 2 continued to be non-users, while 9% had stopped using a method.
- Among women not using contraception in Phase 1 and had expressed a wish to use FP in the future, only about a third had adopted a method in Phase 2.
- About 1 in 5 women not using a method at Phase 1 had adopted a method between Phase 1 and 2.

PMA Kenya (West Pokot) collects nationally (and county/region-level) representative data 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 PMA panel survey was conducted in Bungoma region among eligible females aged 15-49 at the time of the Phase 2 survey (collected between November - December 2020), who were interviewed at the Phase 1 survey between November-December 2019 and consented to follow-up (89.0%). Of the 736 eligible respondents, 79.3% were not reached for follow-up. Of those reached, 589 (79.2%) completed the survey, for a response rate of 99.8% among contacted women. For sampling information and full data sets, visit https://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 (West Pokot) 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 Institute for Population and Reproductive Health at the Johns Hopkins University and Jhpiego. Funding is provided by the Bill & Melinda Gates Foundation.

