

PMA AGILE-YRDSS / KENYA

Contraceptive Access, Use, and Demand



Approximately 20% of the population of Nairobi is 15-24 years old. Urban adolescents and youth have become a target group for reproductive health study and service

delivery services given the population's growing size, limited data on their reproductive health behaviors, and reported low levels of contraceptive use. PMA Agile typically monitors contraception uptake via clinic-based surveys of providers and clients. When unmarried youth and adolescents may procure contraceptives via other means, their use is effectively "hidden" from clinic staff and clinic-based survey measures become less accurate.

PMA Agile and the International Centre for Reproductive Health Kenya (ICRHK) conducted the Youth Respondent-Driven Sampling Study (YRDSS) among unmarried youth aged 15 to 24 years living in Nairobi, Kenya using respondent-driven sampling (RDS) methodology, a chain-based, peer-to-peer recruitment method. The study aimed to collect information about awareness, use, and procurement of contraception among unmarried adolescents and youth, both female and male, and enable reach into a population and topic that may be otherwise hidden. The study was conducted in June-August 2019 and enrolled 1357 female and male participants; 3 were dropped for excessive missing data. The data presented are for 1354 participants.

KEY RESULTS

- Modern contraceptive prevalence was estimated at 53% for males and 37% for females in this study
- Most young people knew of a place to obtain contraception, and pharmacies and health centers were the primary sources for methods among both male and female contraceptive users
- The majority of young men in the study procured their own contraceptive methods; however, approximately 1/3 of young women relied on their partners to obtain their method
- Adolescent and young adult women in this study reported a range of potential power imbalances within their current partnerships, including pressure and interference in contraceptive use

ACCESS TO CONTRACEPTION

Among all respondents

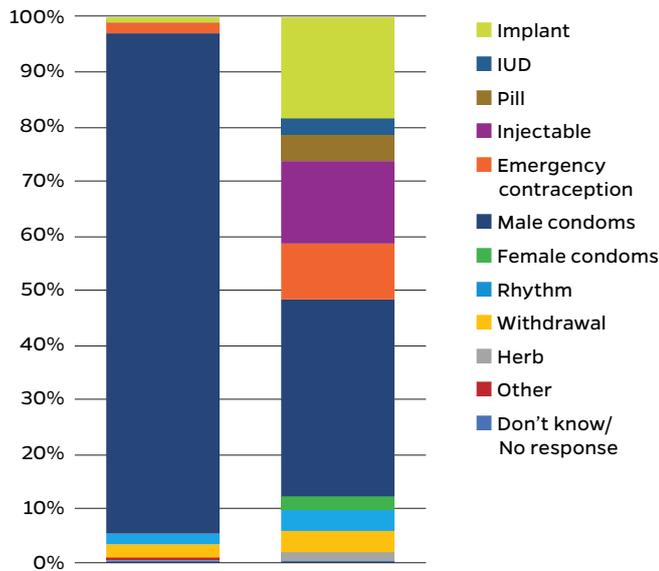
98.5% have heard of at least one method of contraception

88.7% feel they can access information and services about contraception if they need them

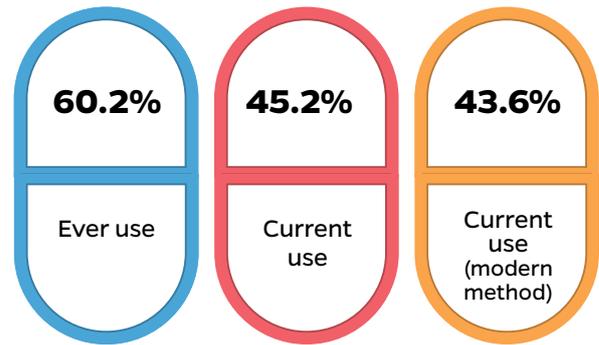
84.1% know of a place to obtain a method of contraception

CONTRACEPTIVE USE

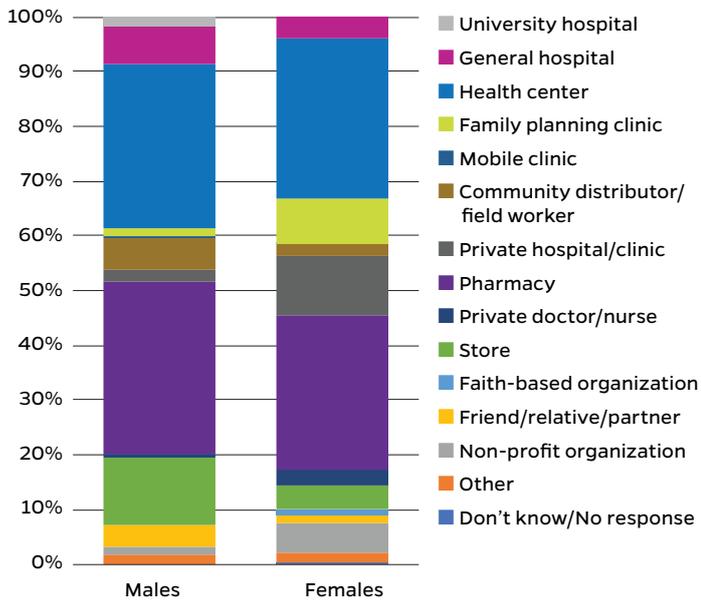
Current main method among users



Among all respondents



Source of current main method among users



DEPENDENCE ON OTHERS TO OBTAIN CONTRACEPTION

Table 1. Dependence on others to obtain contraception among current users

Person who obtains current method				
	Males		Females	
	W%	N (N=318)	W%	N (N=246)
Self	91.1%	284	62.6%	144
Partner	4.3%	20	34.2%	96
Other	4.6%	14	3.2%	6

Level of dependence on others to obtain current method				
	Males		Females	
	W%	N (N=34)*	W%	N (N=102)*
Entirely dependent	27.4%	7	51.0%	48
Somewhat dependent	25.8%	11	28.3%	29
Not dependent	46.8%	16	20.3%	24
No response	0.0%	0	0.4%	1

*Respondents who report that a partner or "other" person obtains their current method

All respondents were asked about their **preferred source of contraception information**. **Mothers** were the most preferred source for females (27.5%) and **healthcare providers**, such as doctors and nurses, were the most preferred source for males (17.4%).

DEMAND FOR CONTRACEPTION AND QUALITY OF SERVICES

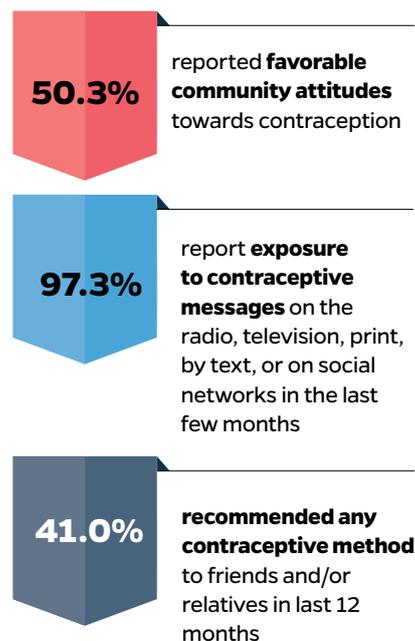
Table 2. Quality of contraceptive services reported by current users

	Males (N=284)*		Females (N=144)*	
	W%	N	W%	N
Current users reporting they obtained their method of choice at visit	99.0%	280	99.1%	144
Current users reporting that the provider told them about contraceptive methods other than their main method at visit	46.7%	124	70.4%	104
Current users reporting they were informed about side effects	34.4%	90	67.0%	99
	(N=90)**		(N=99)**	
Current users who were informed of what to do if they experienced side effects	72.5%	63	84.8%	82

*Current users who reported that they obtain their contraceptive method themselves

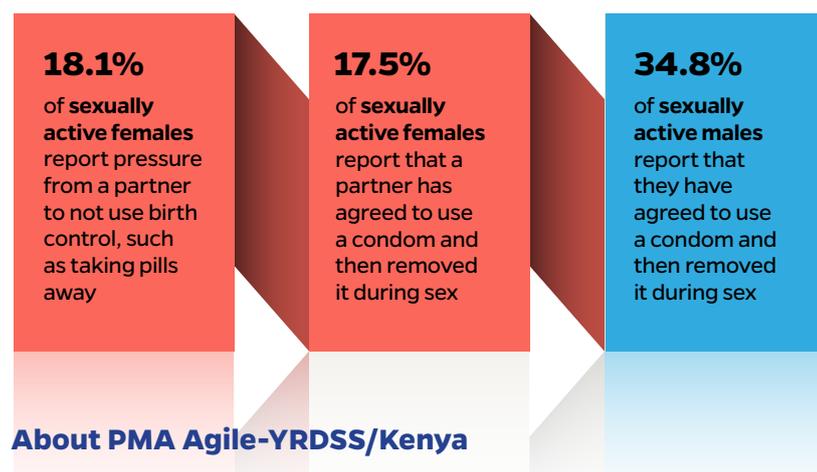
**Current users who were told about side effects

Among all respondents



REPRODUCTIVE COERCION AND CONDOM COERCION

Partner-related Barriers to Contraceptive Use



Among sexually active young women, about one in five reported that a sexual partner had ever pressured them not to use birth control, such as taking their contraceptive pills away or keeping them from going to the clinic to get birth control. A similar percentage of sexually active young women (17.5%) reported that a sexual partner had ever agreed to use a condom and then removed it, at any point in their sexual history. For young men, about one-third reported ever removing a condom during intercourse after agreeing to use it with a sexual partner.

About PMA Agile-YRDSS/Kenya

PMA Agile is a project within Performance Monitoring and Accountability 2020 (PMA2020) suite implemented by the Gates Institute at Johns Hopkins University's Bloomberg School of Public Health, in collaboration with local research institutes and universities in PMA Agile geographies. PMA Agile seeks to establish an adaptable, replicable M&E platform for application at critical levels of program implementation, including the collection and use of routine and survey data sources that can provide rapid feedback and is cost-effective. The Youth Respondent-Driven Sampling Survey (YRDSS) was implemented in collaboration with the International Centre for Reproductive Health Kenya (ICRH) in Nairobi with unmarried youth aged 15-24 years. YRDSS used respondent-driven sampling (RDS) methodology, a chain-based recruitment method in which study participants recruit their peers through numbered coupon distribution. Overall direction and support were provided by the Bill & Melinda Gates Institute for Population and Reproductive Health at the Johns Hopkins Bloomberg School of Public Health. YRDSS was supported through funds provided by the Bill & Melinda Gates Foundation. The final sample included 1357 youth. Data collection was conducted between June and August 2019. All results are weighted for RDS design, with a post-estimation weight for comparability with the underlying population of youth ages 15-24 in the study area.

Suggested citation: PMA Agile & ICRHK. YRDSS/Kenya: Contraception Results. 2019. Baltimore, Maryland, USA: Bill & Melinda Gates Institute for Population and Reproductive Health, Johns Hopkins University Bloomberg School of Public Health.