

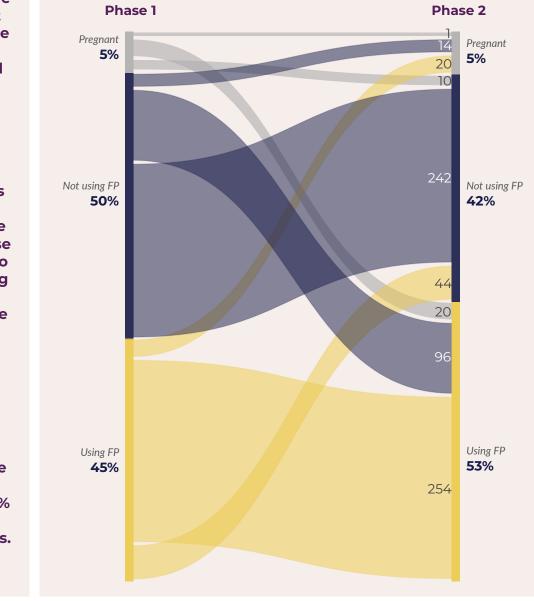
# **KENYA (KERICHO)** Results from Phase 2 panel survey

PERFORMANCE MONITORING FOR ACTION

# 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=702)



About 27% of the nonusers at Phase 1 were using contraception at Phase 2, while 14% of the users at Phase 1 discontinued a method by Phase 2.

**OVERALL KEY FINDINGS** 

Continued non-use was more common among adolescents (than those aged 20 and older), those not in a union or with no children, but less among women who intend to use contraception in the future.

72% of women with unmet need for FP in Phase 2 continued to be non-users between Phases 1 and 2, while 18% had stopped using a method between phases.







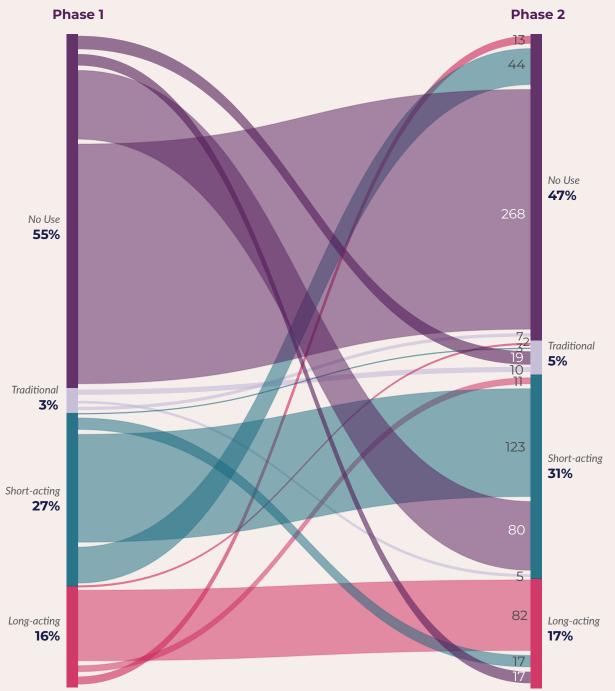


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#### CHANGE IN CONTRACEPTIVE METHOD TYPE

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=702)



#### **KEY FINDINGS FOR SECTION 1: OVERALL CONTRACEPTIVE DYNAMICS**

• Pregnancy rate remained the same despite an 8 percentage point increase in contraceptive use.

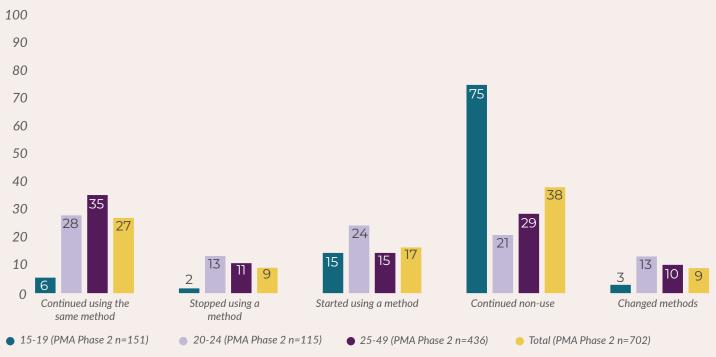
• Relative to discontinuers, we found more new adopters of contraceptive methods among panel women between Phase 1 and Phase 2.

• A relatively large number of non-users became users of short-acting methods between phases, which contributed to the increase in those using short-acting methods.



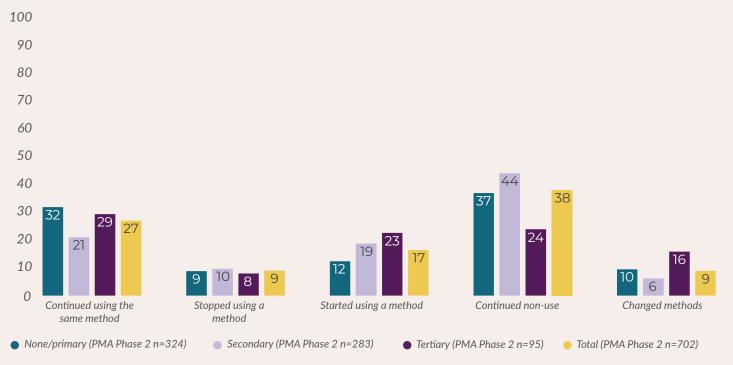
#### CHANGE IN CONTRACEPTIVE USE STATUS, BY AGE

Percent of women age 15-49 who engaged in one of the following contraceptive use behaviors between PMA Phase 1 (December 2019) and PMA Phase 2 (December 2020), by age



#### CHANGE IN CONTRACEPTIVE USE STATUS, BY EDUCATION LEVEL

Percent of women age 15-49 who engaged in one of the following contraceptive use behaviors between PMA Phase 1 (December 2019) and PMA Phase 2 (December 2020), by education level





#### CHANGE IN CONTRACEPTIVE USE STATUS, BY MARITAL STATUS

Percent of women age 15-49 who engaged in one of the following contraceptive use behaviors between PMA Phase 1 (December 2019) and PMA Phase 2 (December 2020), by marital status



#### **CHANGE IN CONTRACEPTIVE USE STATUS, BY PARITY**

Percent of women age 15-49 who engaged in one of the following contraceptive use behaviors between PMA Phase 1 (December 2019) and PMA Phase 2 (December 2020), by parity 100 90 80 70 69 60 50 40 38 36 30 20 23 20 10 9 8 0 Continued using the Stopped using a Started using a method Continued non-use Changed methods same method method Five+ None One-two • Three-four Total (PMA Phase 2 n=213) (PMA Phase 2 n=190) (PMA Phase 2 n=174) (PMA Phase 2 n=125) (PMA Phase 2 n=702)

#### KEY FINDINGS FOR SECTION 2: CONTRACEPTIVE DYNAMICS BY KEY MEASURES

• The majority of adolescents, of women not in a union and of women with no children remained non-users between Phase 1 and Phase 2.

• There is little evidence that contraceptive use changes consistently with level of education.



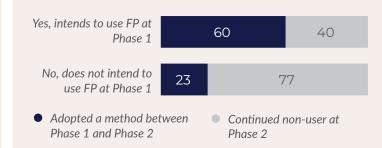
### **METHOD DISCONTINUATION**

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=70)



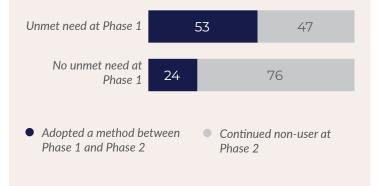
## INTENTION TO USE FAMILY PLANNING

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=375)



# **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=375)



#### KEY FINDINGS FOR SECTION 3: OTHER PANEL DVNAMICS

• The majority of women with unmet need for FP in Phase 2 continued to be non-users between Phases 1 and 2, while **18%** had stopped using a method between phases.

• Among non-users in Phase 1, women who intended to use FP in future were almost two times more likely to have used a method by Phase 2, though **1 in 4** women who did not want to use FP in the future also adopted a method.

• Slightly over half of women with unmet need at Phase 1 adopted a method between Phases 1 and 2.

PMA Kenya (Kericho) 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 Kericho 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 (94.9%). Of the 832 eligible respondents, 14.9% were not reached for follow-up. Of those reached, 711 (85.0%) completed the survey, for a response rate of 99.9% 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 (Kericho) 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. 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.

