PERFORMANCE MONITORING FOR ACTION

PMA KENYA (KAKAMEGA)
Results from Phase 1 baseline survey
November–December 2019

OVERALL KEY FINDINGS

There has been consistent decrease in modern contraception use since 2016 for all women.

49% of the women reported to have received comprehensive methods information during the FP visit.

45% of the pregnancies were unintended.

77% of the users obtained their current modern method from a public health facility.

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 women age 15-49 currently using contraception by method type (PMA Phase 1 n=723)

There has been consistent decrease in modern contraception use since 2016 for all women.

49% of the women reported to have received comprehensive methods information during the FP visit.

45% of the pregnancies were unintended.

77% of the users obtained their current modern method from a public health facility.

PMA2020 survey rounds

<table>
<thead>
<tr>
<th>Month</th>
<th>Married women (PMA Phase 1 n=457)</th>
<th>Unmarried, sexually active women (PMA Phase 1 n=44)</th>
<th>All women (PMA Phase 1 n=723)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dec 2016</td>
<td>68</td>
<td>49</td>
<td>45</td>
</tr>
<tr>
<td>Dec 2017</td>
<td>70</td>
<td>53</td>
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<td>Dec 2018</td>
<td>74</td>
<td>57</td>
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</tr>
<tr>
<td>Dec 2019</td>
<td>66</td>
<td>62</td>
<td>62</td>
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PMA2020 survey rounds

<table>
<thead>
<tr>
<th>Month</th>
<th>Short-acting methods</th>
<th>Long-acting methods</th>
<th>Traditional methods</th>
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<tbody>
<tr>
<td>Dec 2016</td>
<td>26</td>
<td>23</td>
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<tr>
<td>Dec 2017</td>
<td>29</td>
<td>24</td>
<td>1</td>
</tr>
<tr>
<td>Dec 2018</td>
<td>28</td>
<td>23</td>
<td>1</td>
</tr>
<tr>
<td>Dec 2019</td>
<td>25</td>
<td>22</td>
<td>2</td>
</tr>
</tbody>
</table>
MODERN CONTRACEPTIVE PREVALENCE BY COUNTY
Percent of women age 15-49 currently using modern contraception by Kenya county

- Bungoma: 50%
- Nyamira: 49%
- Nandi: 49%
- Kakamega: 47%
- Nairobi: 47%
- Kiambu: 47%
- Kericho: 43%
- Kitui: 41%
- Siaya: 41%
- Kilifi: 35%
- West Pokot: 19%

METHOD USE, UNMET NEED, AND DEMAND SATISFIED BY A MODERN METHOD
Percent of women age 15-49 using contraception by method type, unmet need, and demand satisfied by a modern method (PMA Phase 1 n=723)

- Married/in union women (n=280)

  - Modern method: 79%
  - Traditional method: 83%
  - Unmet need for spacing: 80%
  - Demand satisfied by modern method: 81%

TRENDS IN MODERN CONTRACEPTIVE MIX
Percent distribution of modern contraceptive users age 15-49 by method and year (PMA Phase 1 n=340)

MODERN CONTRACEPTIVE METHOD MIX
Percent distribution of modern contraceptive users age 15-49 by method

Key for method mix charts:
- Modern method
- Traditional method
- Unmet need for limiting
- Unmet need for spacing
- Demand satisfied by modern method

'Other' category includes male sterilization, female condoms, diaphragm, LAM, and standard days/cycle beads.
12-MONTH DISCONTINUATION RATE
Among women who started an episode of contraceptive use within the two years preceding the survey, the percent of episodes discontinued within 12 months (n=378 episodes)

- 48% discontinued for other reasons
- 6% discontinued to become pregnant
- 12% had other fertility related reasons
- 4% experienced method failure
- 10% were concerned over side effects or health
- 4% other/don’t know
- 15% wanted a more effective method

Discontinued but switched methods:
22% Switched

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

- Implants is the most dominant method of contraception among all, married and unmarried sexually active women.
- 54% of the time, methods were discontinued within one year of starting. 6% did so to become pregnant and 22% switched to another method.
- 45% of the pregnancies were unintended with 305 been mistimed and 15% not wanted at all

SECTION 2: QUALITY OF FP SERVICES AND COUNSELING

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

- Implants is the most dominant method of contraception among all, married and unmarried sexually active women.
- 54% of the time, methods were discontinued within one year of starting. 6% did so to become pregnant and 22% switched to another method.
- 45% of the pregnancies were unintended with 305 been mistimed and 15% not wanted at all

INTENTION OF MOST RECENT BIRTH/CURRENT PREGNANCY
Percent of women by intention of their most recent birth or current pregnancy (n=406)

- 15% wanted no more children
- 30% wanted later
- 55% Intended
- 45% of pregnancies were unintended

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=336)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td>When you obtained your method were you told by the provider about side effects or problems you might have?</td>
<td>34</td>
<td>66</td>
</tr>
<tr>
<td>Were you told what to do if you experienced side effects or problems?</td>
<td>92</td>
<td>9</td>
</tr>
<tr>
<td>Were you told by the provider about methods of FP other than the method you received?</td>
<td>72</td>
<td>28</td>
</tr>
<tr>
<td>Were you told that you could switch to a different method in the future?</td>
<td>75</td>
<td>25</td>
</tr>
</tbody>
</table>

- 51% answered “No” to at least one MII+ question
- 49% 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

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Yes (n)</th>
<th>No (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-19</td>
<td>15</td>
<td>143</td>
</tr>
<tr>
<td>20-24</td>
<td>29</td>
<td>123</td>
</tr>
<tr>
<td>25-49</td>
<td>40</td>
<td>397</td>
</tr>
</tbody>
</table>

CLIENT EXIT INTERVIEWS
Percent of female clients age 15-49 who said yes to the following questions (n=449)

- During today’s visit, did the provider tell you the advantages/disadvantages of the FP method? 52%
- During today’s visit, did you obtain the method of FP you wanted? 92%
- Were you satisfied with FP services you received today at this facility? 97%

Clients were interviewed immediately following their health facility visit to obtain FP counseling or services.

KEY FINDINGS FOR SECTION 2: QUALITY OF FP SERVICES AND COUNSELING

- 97% of the clients reported satisfaction with FP services they received, however 48% reported that the provider did not discuss the advantages and disadvantages of the chosen method.
- Adolescent girls are least likely to have discussed FP with their health provider or CHW in the past year.

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 statements (n=336)

- Does your partner know that you are using this method? 81%
- Before you started using this method had you discussed the decision to delay or avoid pregnancy with your partner? 72%

Percent of women who are currently using FP and agree with the following statements (n=350)

- Would you say that using FP is mainly your decision? 49%

Percent of women who are not currently using FP and agree with the following statements (n=331)

- Would you say that not using FP is mainly your decision? 15%

KEY FINDINGS FOR SECTION 3: PARTNER DYNAMICS

- Among women using a modern method that can be concealed, 20% report that their partner does not know that they are using contraception.
- 11% of women who are using contraceptive method report that it is mainly their partner’s decision.
- 15% of the decisions not to use and 49% of the decisions to use FP are jointly made.
SECTION 4: WOMEN AND GIRLS’ EMPOWERMENT

AGREEMENT WITH FAMILY PLANNING EMPOWERMENT STATEMENTS

Percent of all women who strongly agree to strongly disagree with each statement

Exercise of choice (self-efficacy, negotiation) for family planning (n=720)

I feel confident telling my provider what is important when selecting an FP method.

- Strongly disagree: 10
- Disagree: 42
- Neutral: 15
- Agree: 69

I can decide to switch from one FP method to another if I want to.

- Strongly disagree: 12
- Disagree: 42
- Neutral: 14
- Agree: 68

Existence of choice (motivational autonomy) for family planning (n=713)

If I use FP, my body may experience side effects that will disrupt relations with my partner.

- Strongly disagree: 52
- Disagree: 11
- Neutral: 4
- Agree: 14
- Strongly agree: 20

If I use FP, my children may not be born normal.

- Strongly disagree: 72
- Disagree: 9
- Neutral: 2
- Agree: 7
- Strongly agree: 9

There will be conflict in my relationship/marriage if I use FP.

- Strongly disagree: 64
- Disagree: 14
- Neutral: 3
- Agree: 7
- Strongly agree: 13

If I use FP, I may have trouble getting pregnant the next time I want to.

- Strongly disagree: 62
- Disagree: 12
- Neutral: 3
- Agree: 8
- Strongly agree: 15

If I use FP, my partner may seek another sexual partner.

- Strongly disagree: 69
- Disagree: 14
- Neutral: 2
- Agree: 6
- Strongly agree: 9

WOMEN’S AND GIRLS’ EMPOWERMENT (WGE) SUB-Scale FOR FAMILY PLANNING

The Women’s and Girls’ Empowerment (WGE) Index examines existence of choice, exercise of choice, and achievement of choice domains across pregnancy, family planning, and sex outcomes.

Presented results are only for the existence of choice and exercise of choice domains for family planning.

Scores from the above family planning empowerment statements were summed and divided by number of items (7) for average WGE family planning score across both domains.

Range for the combined WGE family planning score is 1-5, with a score of 5 indicating highest empowerment.

Mean WGE score, by education

- Overall: 4.1
- Tertiary education: 4.4
- Secondary education: 4.2
- None/ Primary education: 4.0

Mean WGE score, by age

- Overall: 4.1
- 25-49: 4.2
- 20-24: 4.0
- 15-19: 3.9
**KEY FINDINGS FOR SECTION 4: WOMEN AND GIRLS’ EMPOWERMENT**

- Women who score higher on the empowerment scale are much more likely to be using a modern contraceptive method or intend to use in the future.
- Women who are employed are more likely to be using or intend to use modern contraception.

### SECTION 5: ATTITUDES TOWARDS CONTRACEPTION

#### PERSONAL ATTITUDES

Percent of women who personally agree with statements made about contraceptive use, by age, residence, and contraceptive use status

<table>
<thead>
<tr>
<th>By age</th>
<th>By residence</th>
<th>By contraceptive use status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescents who use FP are promiscuous. (n=722)</td>
<td>By age</td>
<td>By residence</td>
</tr>
<tr>
<td>15-19</td>
<td>Disagree/Strongly disagree</td>
<td>Agree/Strongly agree</td>
</tr>
<tr>
<td>54</td>
<td>46</td>
<td>47</td>
</tr>
<tr>
<td>20-24</td>
<td>48</td>
<td>52</td>
</tr>
<tr>
<td>25-49</td>
<td>48</td>
<td>52</td>
</tr>
</tbody>
</table>

| FP is only for married women. (n=723) | By age | By residence | By contraceptive use status |
| 15-19 | Disagree/Strongly disagree | Agree/Strongly agree | Rural | Users | Non-users |
| 56 | 44 | 58 | 43 | 65 | 35 |
| 20-24 | 59 | 41 | 72 | 28 | 56 | 44 |
| 25-49 | 62 | 38 | | | |

| FP is only for women who don’t want any more children. (n=723) | By age | By residence | By contraceptive use status |
| 15-19 | Disagree/Strongly disagree | Agree/Strongly agree | Rural | Users | Non-users |
| 59 | 42 | 62 | 38 | 67 | 33 |
| 20-24 | 67 | 33 | 72 | 28 | 60 | 40 |
| 25-49 | 65 | 36 | | | |
KEY FINDINGS FOR SECTION 5: ATTITUDES TOWARDS CONTRACEPTION

- More than half of the women agreed or strongly agreed that people who use FP have a better quality of life.
- About 5 in every 10 adolescents believe that their adolescent counterparts who use FP are promiscuous.
- About 4 in every 10 contraceptive non users believe that FP is only for married women.

SECTION 6: REPRODUCTIVE TIMELINE

REPRODUCTIVE TIMELINE
Median age at reproductive events, by urban vs. rural residence (n=187)

<table>
<thead>
<tr>
<th>Event</th>
<th>Urban</th>
<th>Rural</th>
</tr>
</thead>
<tbody>
<tr>
<td>First sex</td>
<td>17.8</td>
<td>17.3</td>
</tr>
<tr>
<td>First contraception</td>
<td>21.3</td>
<td>21.6</td>
</tr>
<tr>
<td>First birth</td>
<td>20.8</td>
<td>20.6</td>
</tr>
<tr>
<td>First marriage</td>
<td>21.8</td>
<td>21.6</td>
</tr>
</tbody>
</table>

REPRODUCTIVE EVENTS BY AGE 18
Percent of women aged 18-24 who experienced reproductive events by age 18 (n=187)

<table>
<thead>
<tr>
<th>Event</th>
<th>Urban</th>
<th>Rural</th>
</tr>
</thead>
<tbody>
<tr>
<td>Had first sex by age 18</td>
<td>48</td>
<td>11</td>
</tr>
<tr>
<td>Married by age 18</td>
<td>19</td>
<td>12</td>
</tr>
<tr>
<td>Gave birth by age 18</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Used contraceptives by age 18</td>
<td>11</td>
<td>12</td>
</tr>
</tbody>
</table>

Note: median age at first sex and first contraceptive use calculated among women 15-49 years; median age at first marriage and first birth calculated among women 25-49 years.

KEY FINDINGS FOR SECTION 6: REPRODUCTIVE TIMELINE

- Rural women enter sexual activity earlier, marry earlier, give birth earlier, but initiate contraception later than urban women.
- While about half of the young women have had first sex by age 18, only 11% are married by that age and just 12% have used a contraceptive.
SECTION 7: SERVICE DELIVERY POINTS

TRENDS IN METHOD AVAILABILITY: IUD
Public facilities (PMA Phase 1 n=86)

- Dec 2016: 76
- Dec 2017: 90
- Dec 2018: 97
- Dec 2019 PMA Phase 1: 86

TRENDS IN METHOD AVAILABILITY: IMPLANT
Public facilities (PMA Phase 1 n=86)

- Dec 2016: 79
- Dec 2017: 90
- Dec 2018: 93
- Dec 2019 PMA Phase 1: 79

TRENDS IN METHOD AVAILABILITY: INJECTABLES
Public facilities (PMA Phase 1 n=86)

- Dec 2016: 69
- Dec 2017: 87
- Dec 2018: 97
- Dec 2019 PMA Phase 1: 78

TRENDS IN METHOD AVAILABILITY: MALE CONDOMS
Public facilities (PMA Phase 1 n=86)

- Dec 2016: 69
- Dec 2017: 97
- Dec 2018: 97
- Dec 2019 PMA Phase 1: 87

TRENDS IN METHOD AVAILABILITY: PILLS
Public facilities (PMA Phase 1 n=86)

- Dec 2016: 76
- Dec 2017: 63
- Dec 2018: 97
- Dec 2019 PMA Phase 1: 83

Legend:
- **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**
KEY FINDINGS FOR SECTION 7: SERVICE DELIVERY POINTS

- 77% of the women obtained their current modern method from a public health facility.
- Contraceptive stock-outs are still prevalent for IUD, implant, injectables, male condoms and pills in public health facilities.

FACILITY READINESS
Percent of facilities that provide implants and have a trained provider and instruments/supplies needed for implant insertion/removal (n=86)

- 79% of facilities provide implants and have a trained provider and instruments/supplies needed for implant insertion/removal.

FACILITY READINESS
Percent of facilities that provide IUDs and have a trained provider and instruments/supplies needed for IUD insertion/removal (n=81)

- 77% of facilities provide IUDs and have a trained provider and instruments/supplies needed for IUD insertion/removal.

FEES FOR SERVICES
Percent of facilities where FP clients have to pay fees to be seen by a provider even if they do not obtain FP

Public facilities (n=86)

- 98% of facilities do not charge fees for services.
- 2% of facilities charge fees for services.
### TABLES: CONTRACEPTIVE PREVALENCE AND UNMET NEED

#### ALL WOMEN

<table>
<thead>
<tr>
<th>Data source</th>
<th>Round/Phase</th>
<th>Data collection</th>
<th>Female sample</th>
<th>CPR%</th>
<th>SE</th>
<th>95% CI</th>
<th>mCPR%</th>
<th>SE</th>
<th>95% CI</th>
<th>Unmet need (%)</th>
<th>SE</th>
<th>95% CI</th>
</tr>
</thead>
<tbody>
<tr>
<td>PMA 2020</td>
<td>R5</td>
<td>Nov-Dec 2016</td>
<td>521</td>
<td>49.44</td>
<td>2.75</td>
<td>43.44-55.46</td>
<td>48.61</td>
<td>2.95</td>
<td>42.19-55.07</td>
<td>11.85</td>
<td>2.07</td>
<td>8.02-17.15</td>
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<tr>
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<td>Nov-Dec 2017</td>
<td>490</td>
<td>53.56</td>
<td>3.50</td>
<td>45.87-61.08</td>
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<td>3.46</td>
<td>45.43-60.46</td>
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<td>2.12</td>
<td>6.85-16.22</td>
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<td>R7</td>
<td>Nov-Dec 2018</td>
<td>502</td>
<td>51.88</td>
<td>2.16</td>
<td>47.13-56.60</td>
<td>50.96</td>
<td>2.19</td>
<td>46.14-55.76</td>
<td>11.98</td>
<td>1.54</td>
<td>9.00-15.78</td>
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<td>723</td>
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<td>49.01</td>
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<td>44.89-53.13</td>
<td>46.91</td>
<td>1.94</td>
<td>42.93-50.93</td>
<td>9.05</td>
<td>0.92</td>
<td>7.32-11.14</td>
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</table>

#### WOMEN IN UNION

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<th>Data source</th>
<th>Round/Phase</th>
<th>Data collection</th>
<th>Female sample</th>
<th>CPR%</th>
<th>SE</th>
<th>95% CI</th>
<th>mCPR%</th>
<th>SE</th>
<th>95% CI</th>
<th>Unmet need (%)</th>
<th>SE</th>
<th>95% CI</th>
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</thead>
<tbody>
<tr>
<td>PMA 2020</td>
<td>R6</td>
<td>Nov-Dec 2017</td>
<td>294</td>
<td>71.24</td>
<td>3.20</td>
<td>63.77-77.71</td>
<td>70.33</td>
<td>3.09</td>
<td>66.31-74.68</td>
<td>11.24</td>
<td>2.37</td>
<td>7.02-17.50</td>
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<td>R7</td>
<td>Nov-Dec 2018</td>
<td>291</td>
<td>75.26</td>
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<td>67.70-81.53</td>
<td>73.65</td>
<td>3.04</td>
<td>66.49-79.75</td>
<td>12.62</td>
<td>2.68</td>
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<td>457</td>
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<td>64.68</td>
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<td>59.62-69.44</td>
<td>61.83</td>
<td>2.28</td>
<td>57.01-66.42</td>
<td>10.69</td>
<td>1.37</td>
<td>8.18-13.85v</td>
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