



# KENYA (NAIROBI)

Results from Phase 2 panel survey

November–December 2020

## OVERALL KEY FINDINGS

Among women interviewed in both Phase 1 and 2, contraceptive use increased by 5 percentage points.

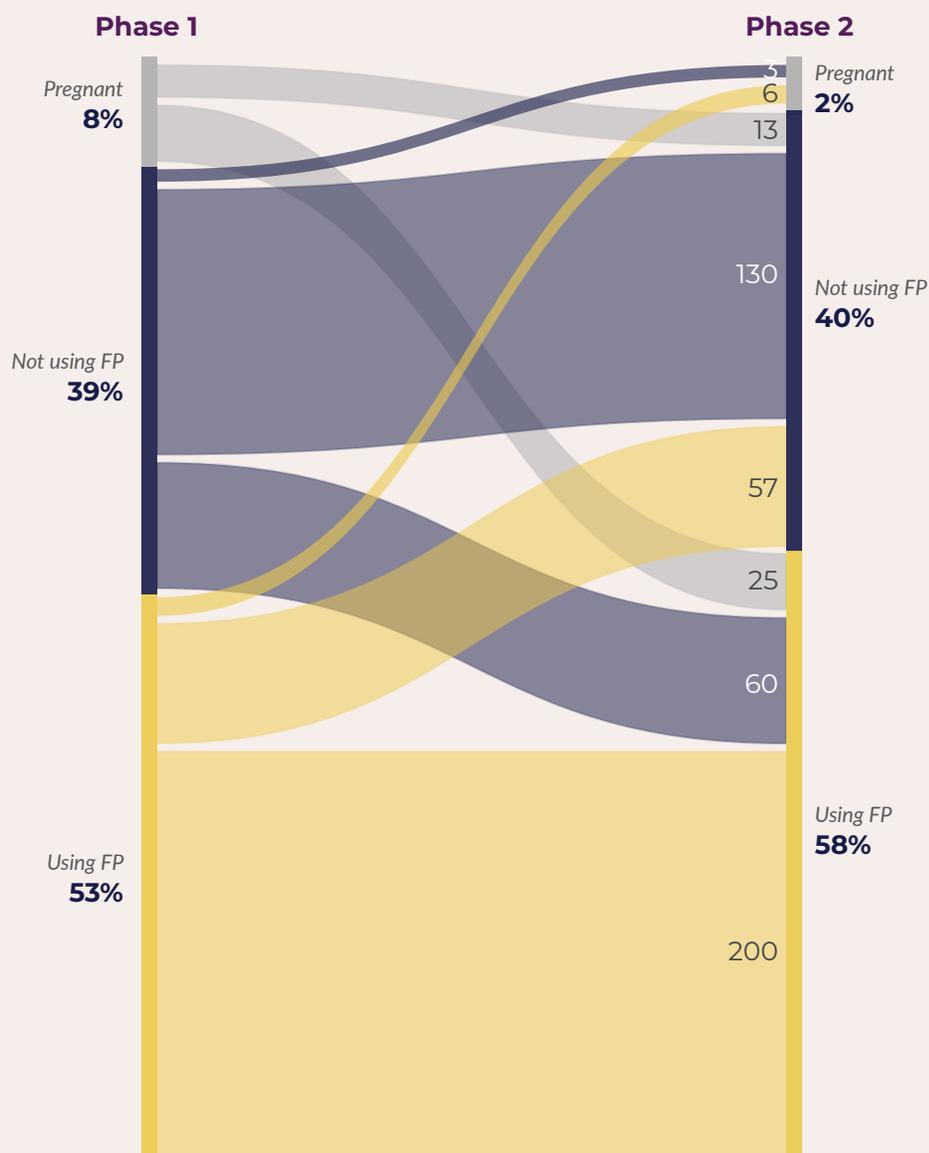
Among women with unmet need at Phase 2, 44% stopped using a method and 4% became pregnant between Phases 1 and 2.

Women who continued to be a non-user between Phases 1 and 2 were relatively more likely to be aged 15-19, were not in a union, and had no children.

## SECTION 1: OVERALL CONTRACEPTIVE DYNAMICS

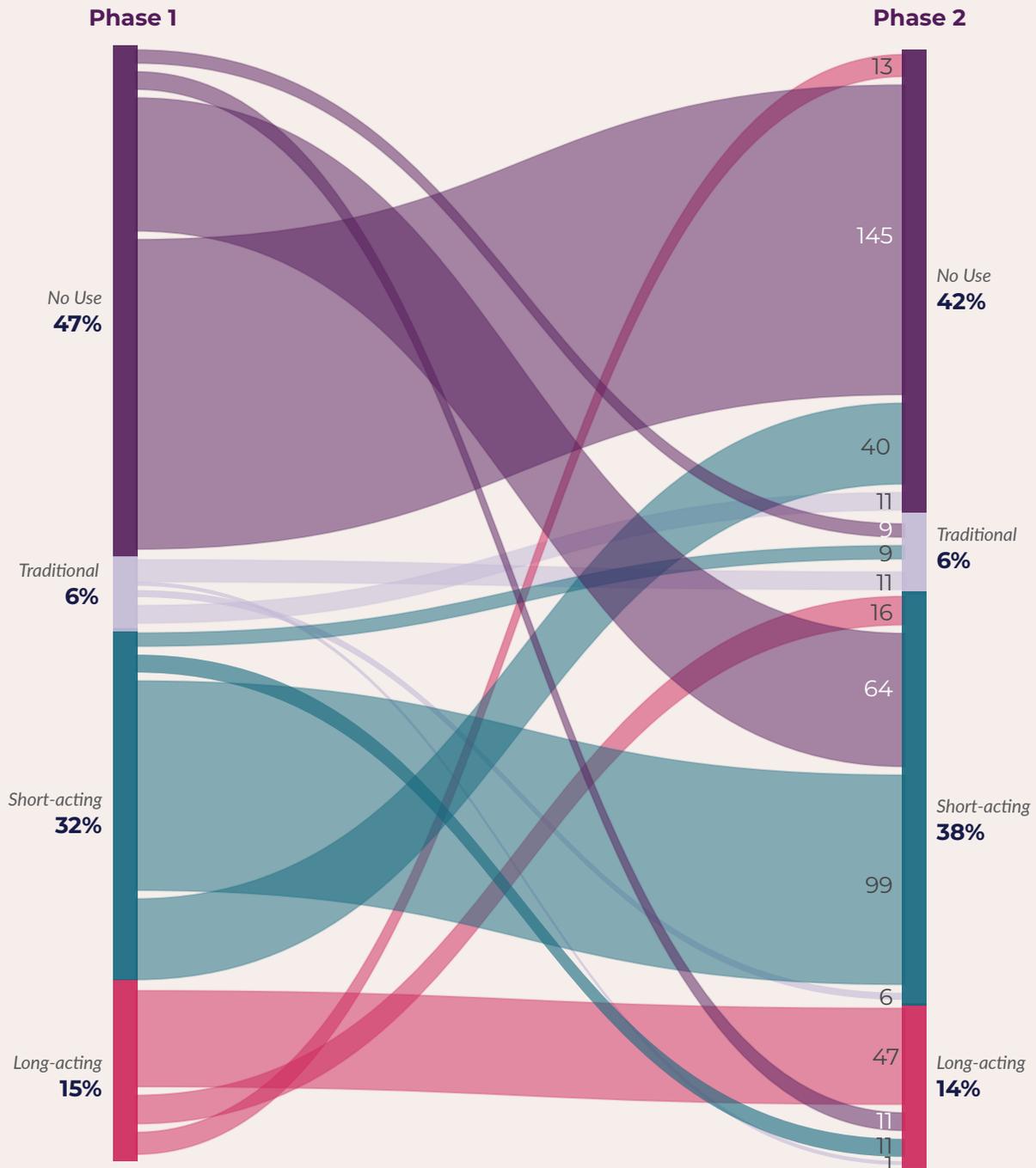
### CHANGE IN CONTRACEPTIVE USE OR NON-USE

Percent of women age 15-49 who changed contraceptive use status between PMA Phase 1 (December 2019) and PMA Phase 2 (December 2020) (n=493)



# 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=493)



## KEY FINDINGS FOR SECTION 1: OVERALL CONTRACEPTIVE DYNAMICS

- The proportion of women using contraceptives has increased by 5 percentage points with a 6 percentage points reduction in pregnancies.
- There is a marginal decrease in users of long-acting methods between Phases 1 and 2.

## SECTION 2: CONTRACEPTIVE DYNAMICS BY KEY MEASURES

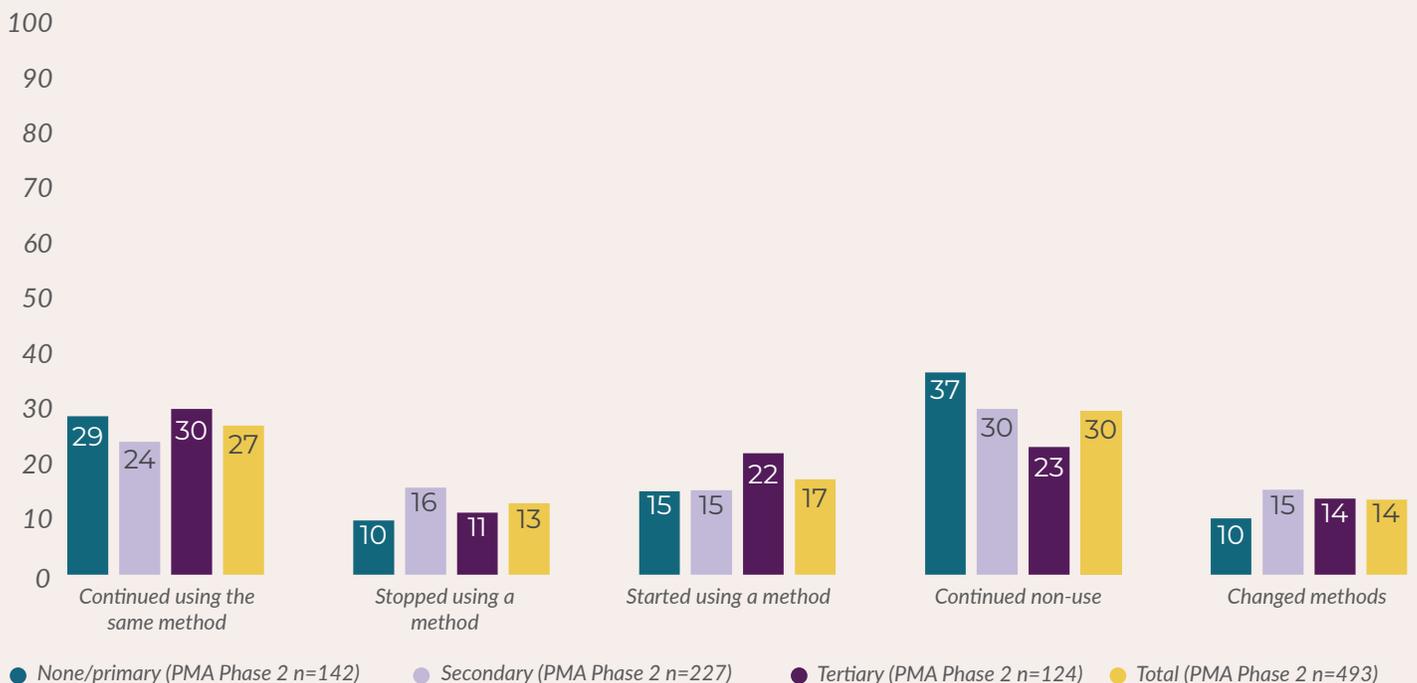
### CHANGE IN CONTRACEPTIVE USE STATUS, BY AGE

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



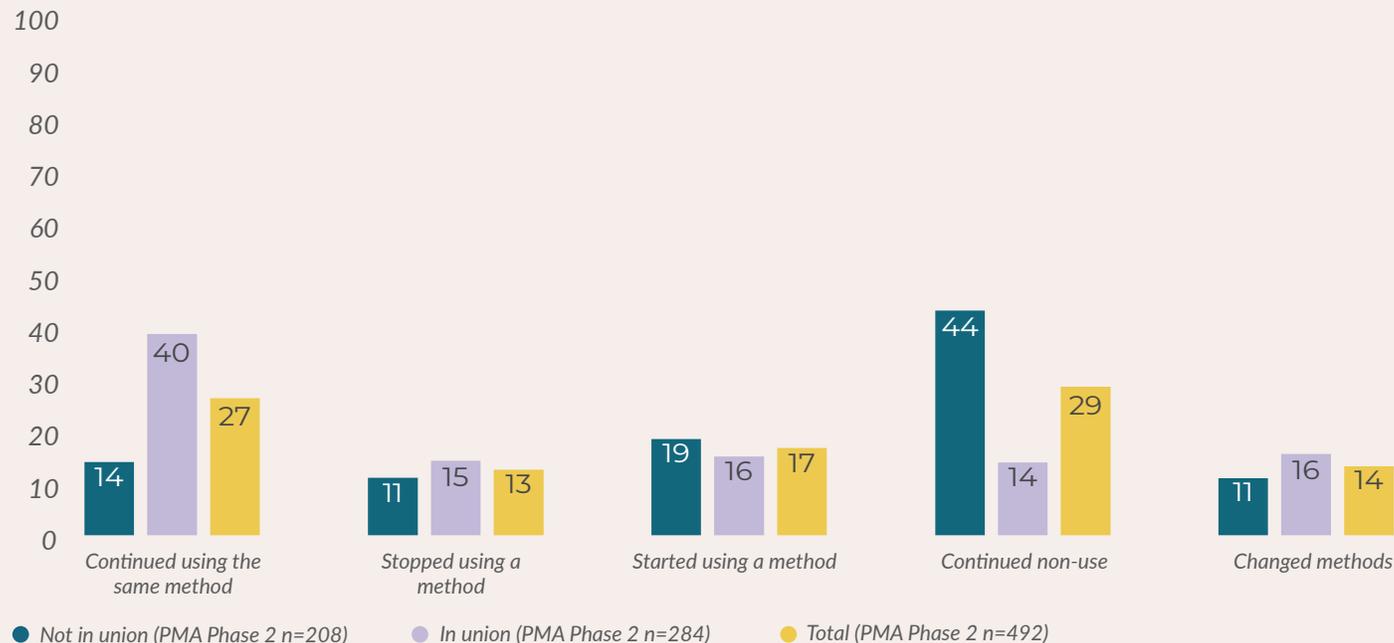
### CHANGE IN CONTRACEPTIVE USE STATUS, BY EDUCATION LEVEL

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



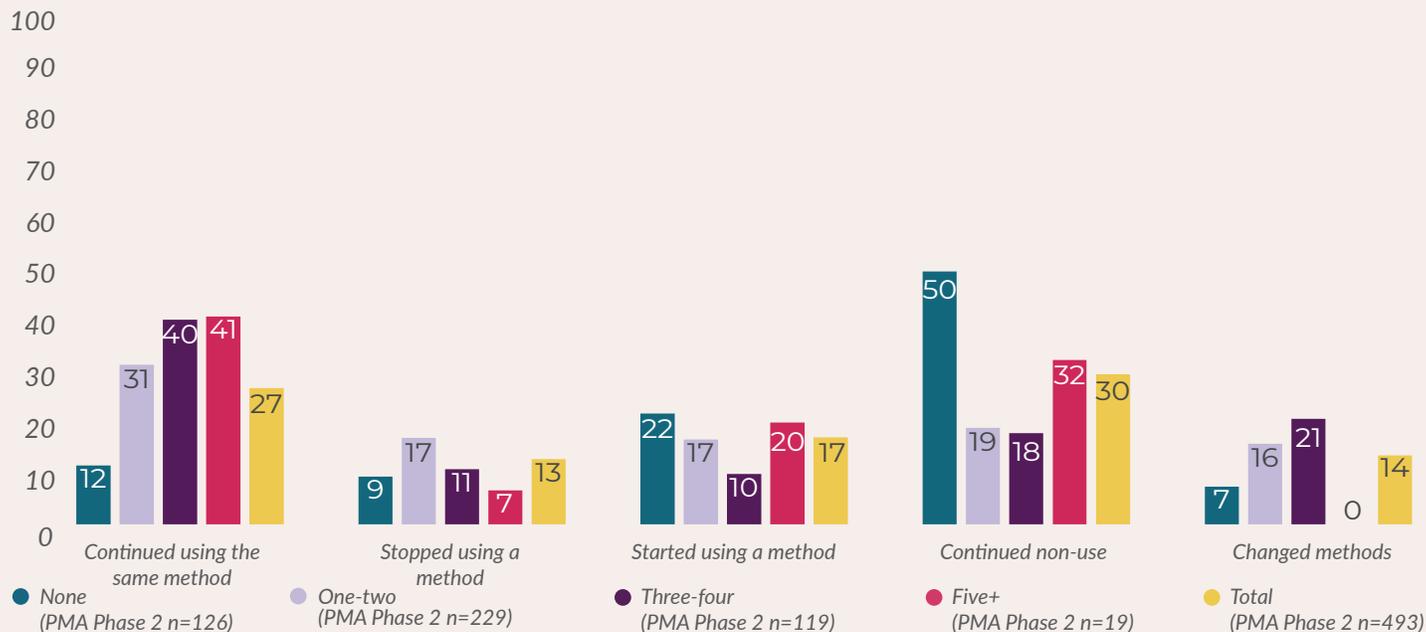
## CHANGE IN CONTRACEPTIVE USE STATUS, BY MARITAL STATUS

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



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

- Relatively higher percentages of adolescents, women not in union, and women with no children remained non-users between Phase 1 and Phase 2.
- 37% of women with none or primary education continued non-use of contraception between Phase 1 and Phase 2.

## SECTION 3: OTHER PANEL DYNAMICS

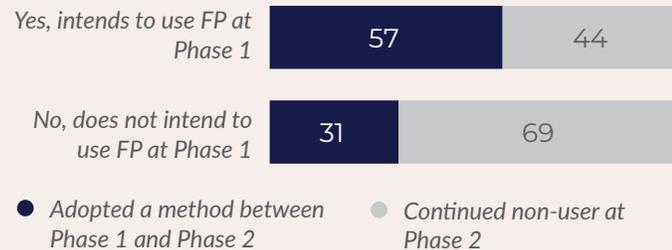
### METHOD DISCONTINUATION

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=39)



### 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=224)



### 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=224)



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

- Over half of women with unmet need for FP in Phase 2 continued to be non-users between Phases 1 and 2, while 44% had stopped using a method.
- Slightly over half of women who had said they intend to adopt a method in the future in Phase 1 did so by Phase 2.
- About half of women with unmet need at Phase 1 adopted a method by Phase 2, with 1 in 3 of those without unmet need taking up a method.

PMA Kenya (Nairobi) collects nationally (and county/region-level) representative data on knowledge, practice, and coverage of family planning services in 32 enumeration areas selected using a multi-stage stratified cluster design with urban-rural strata. The PMA panel survey was conducted in Nairobi 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 (81.4%). Of the 697 eligible respondents, 27.1% were not reached for follow-up. Of those reached, 530 (71.6%) completed the survey, for a response rate of 98.2% 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 (Nairobi) 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.