



KENYA (NANDI)

Results from Phase 2 panel survey

November–December 2020

OVERALL KEY FINDINGS



There is a notable increase in the proportion of women using FP from 53% to 63% between Phase 1 & 2.



Among women not using a FP method at Phase 1 who said they intended to adopt a method in the future, only 56% reported to have adopted in Phase 2.

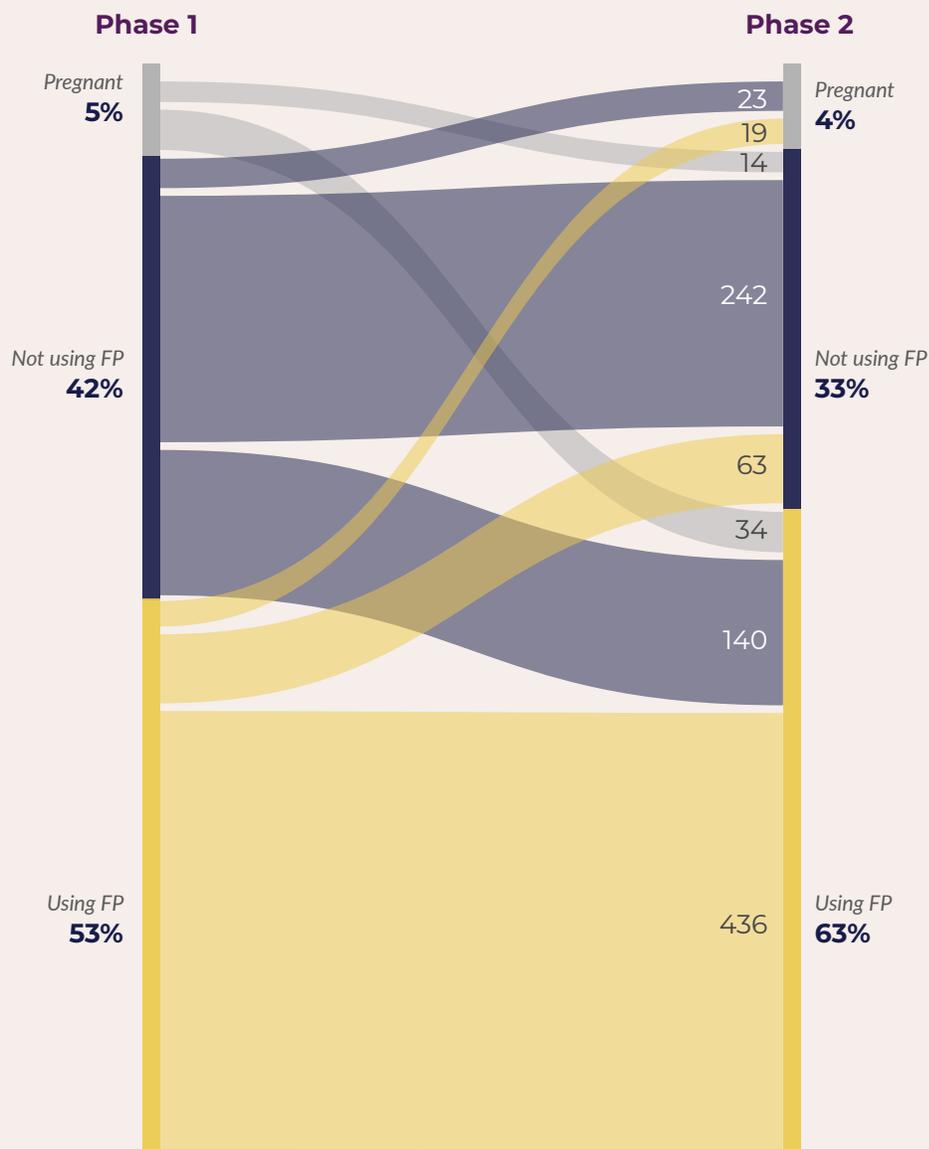


Discontinuation is observed among women using a short-acting and long-acting method between the 2 surveys.

SECTION 1: OVERALL CONTRACEPTIVE DYNAMICS

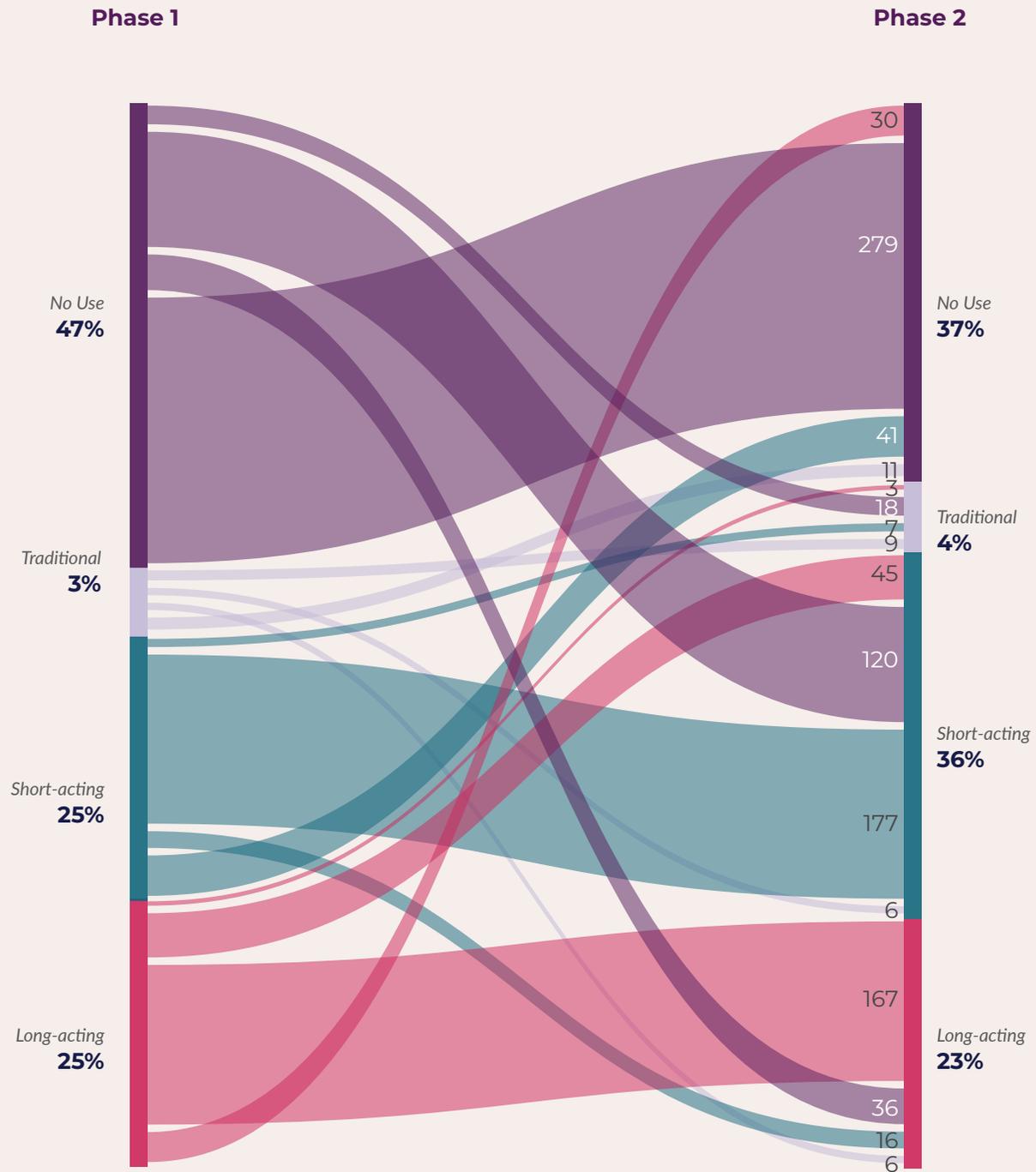
CHANGE IN CONTRACEPTIVE USE OR NON-USE

Percent of women age 15-49 who changed contraceptive use status between PMA Phase 1 (December 2019) and PMA Phase 2 (December 2020) (n=971)



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=971)



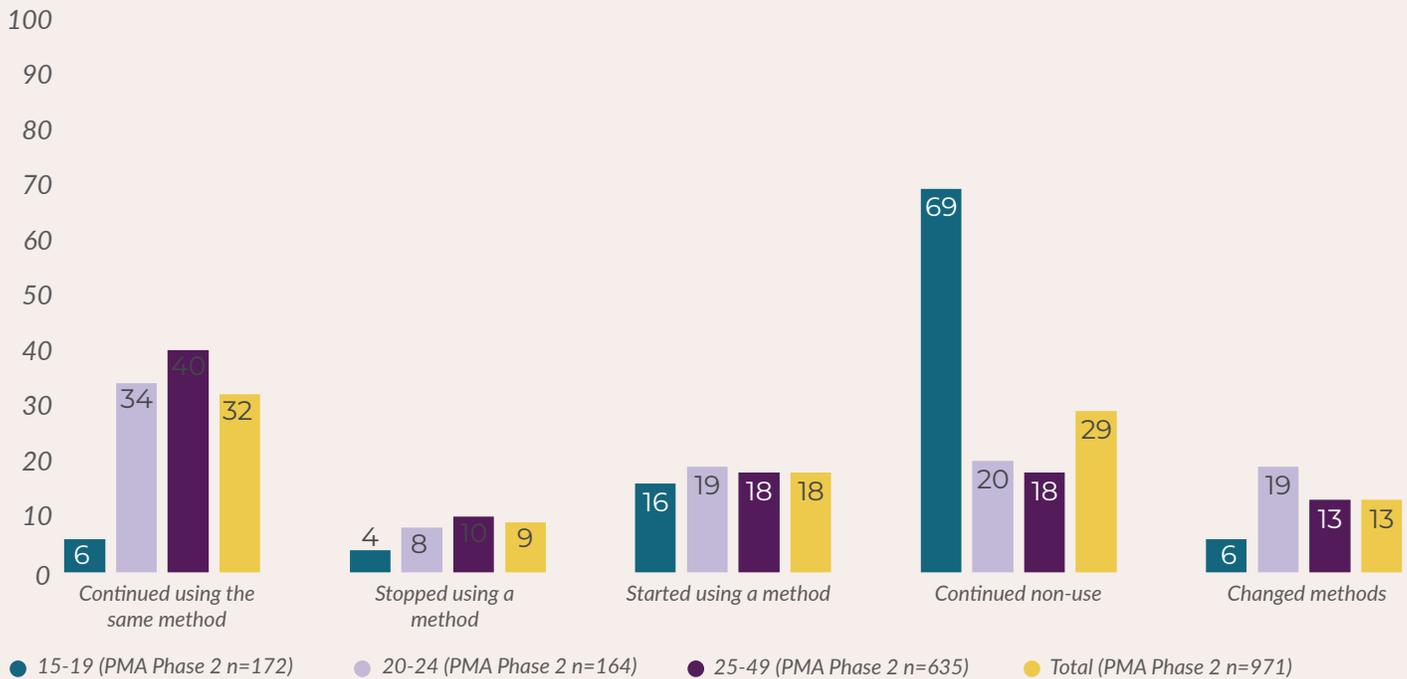
KEY FINDINGS FOR SECTION 1: OVERALL CONTRACEPTIVE DYNAMICS

- Contraceptive use has increased by 10 percentage points among women interviewed at Phase 1 and Phase 2.
- More women using a long-acting method switch to short acting than those switching from short acting to long acting between the two surveys.
- Women were notably more likely to adopt a short-acting method than a long-acting method between the two surveys.

SECTION 2: CONTRACEPTIVE DYNAMICS BY KEY MEASURES

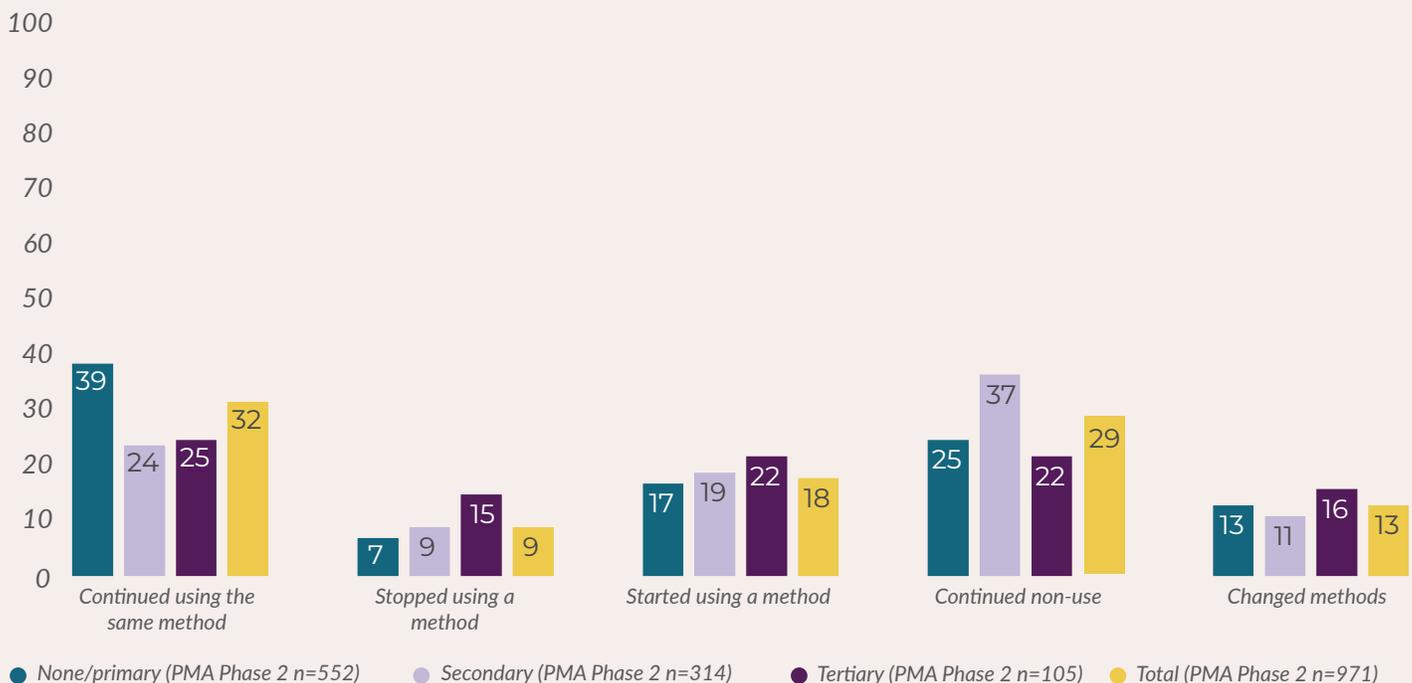
CHANGE IN CONTRACEPTIVE USE STATUS, BY AGE

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



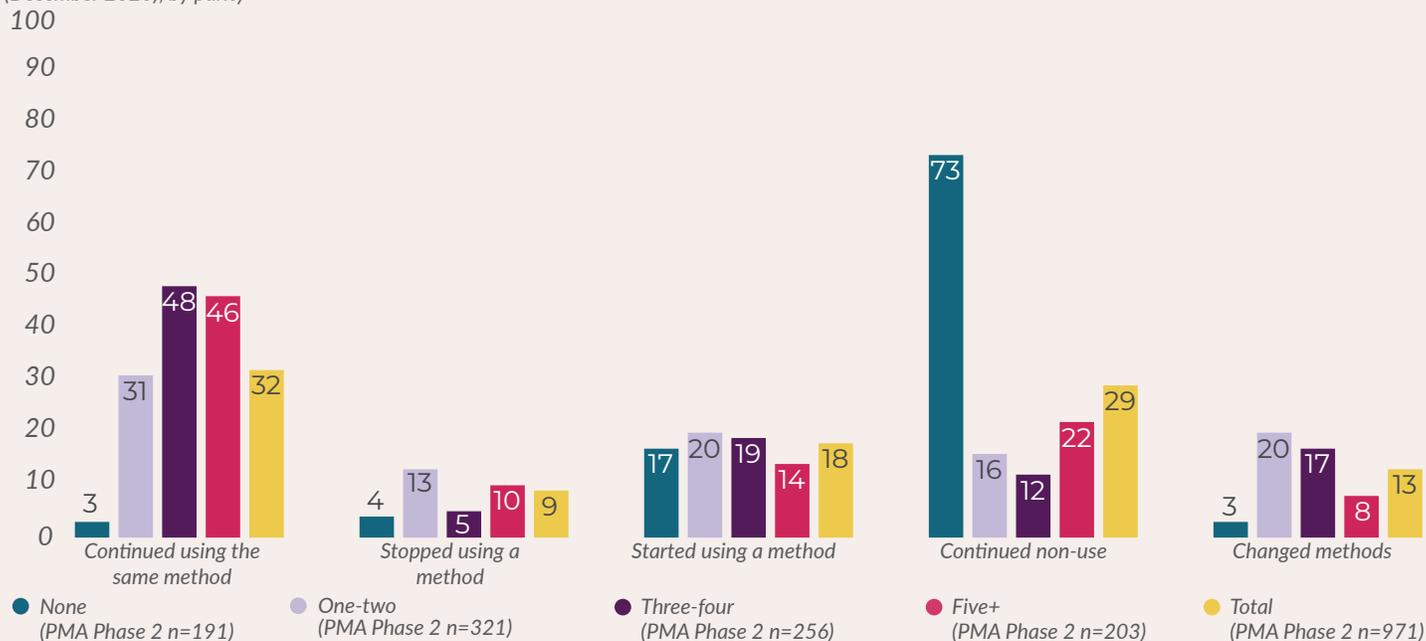
CHANGE IN CONTRACEPTIVE USE STATUS, BY MARITAL STATUS

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



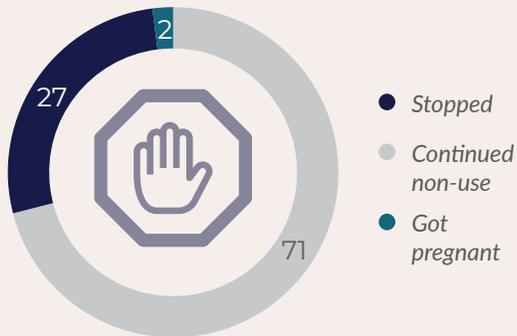
KEY FINDINGS FOR SECTION 2: CONTRACEPTIVE DYNAMICS BY KEY MEASURES

- Patterns by age indicate that younger women aged 15-19 are more likely to continue being non-users between the 2 surveys.
- About 4 out of 10 women who were using a method in Phase 1 and had no/ primary education continued using the same method.

SECTION 3: OTHER PANEL DYNAMICS

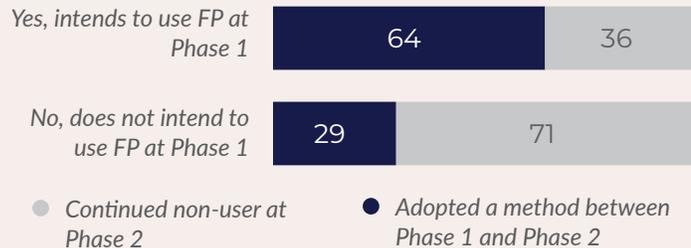
METHOD DISCONTINUATION

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=82)



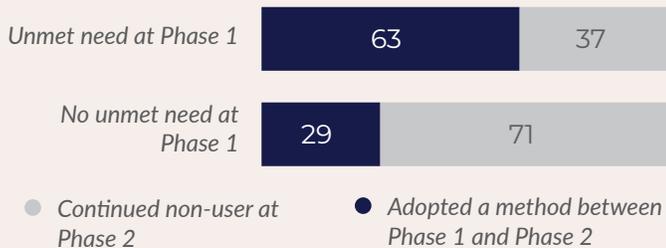
INTENTION TO USE FAMILY PLANNING

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=445)



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=445)



KEY FINDINGS FOR SECTION 3: OTHER PANEL DYNAMICS

- Among women reported having an unmet need for contraception at Phase 2, 29% had stopped using a method at Phase 2 or were currently pregnant.
- Among women classified in Phase 1 as not using and had an intention to use in the future, 64% adopted a method by Phase 2.
- Among women who did not intend to use FP in the future, only a small proportion (29%) adopted a method between Phase 1 & 2.

PMA Kenya (Nandi) 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 Nandi 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 (95.0%). Of the 1221 eligible respondents, 18.9% were not reached for follow-up. Of those reached, 1011 (80.3%) completed the survey, for a response rate of 99.1% 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 (Nandi) 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.