



KENYA (NYAMIRA)

Results from Phase 2 panel survey

November–December 2020

OVERALL KEY FINDINGS

The proportion of women using contraceptives increased by about 7 percentage points between Phases 1 & 2.

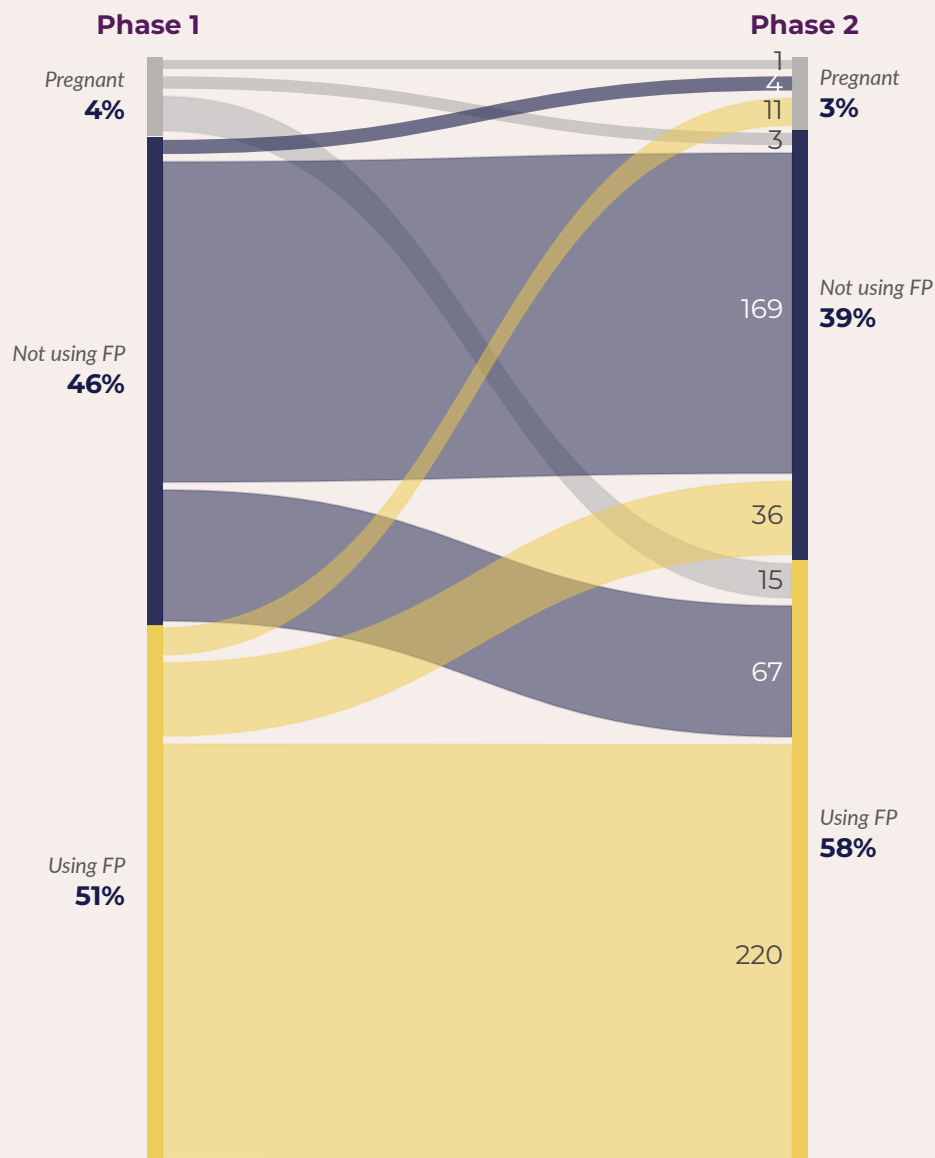
Among women 15-49 years who were not using an FP method at Phase 1 and did not intend to use in the future, 25% adopted a method between Phase 1 and 2.

Continued non-use was relatively more common among adolescents, those not in a union or with no children, but was less likely among women who intended to use in the future.

SECTION 1: OVERALL CONTRACEPTIVE DYNAMICS

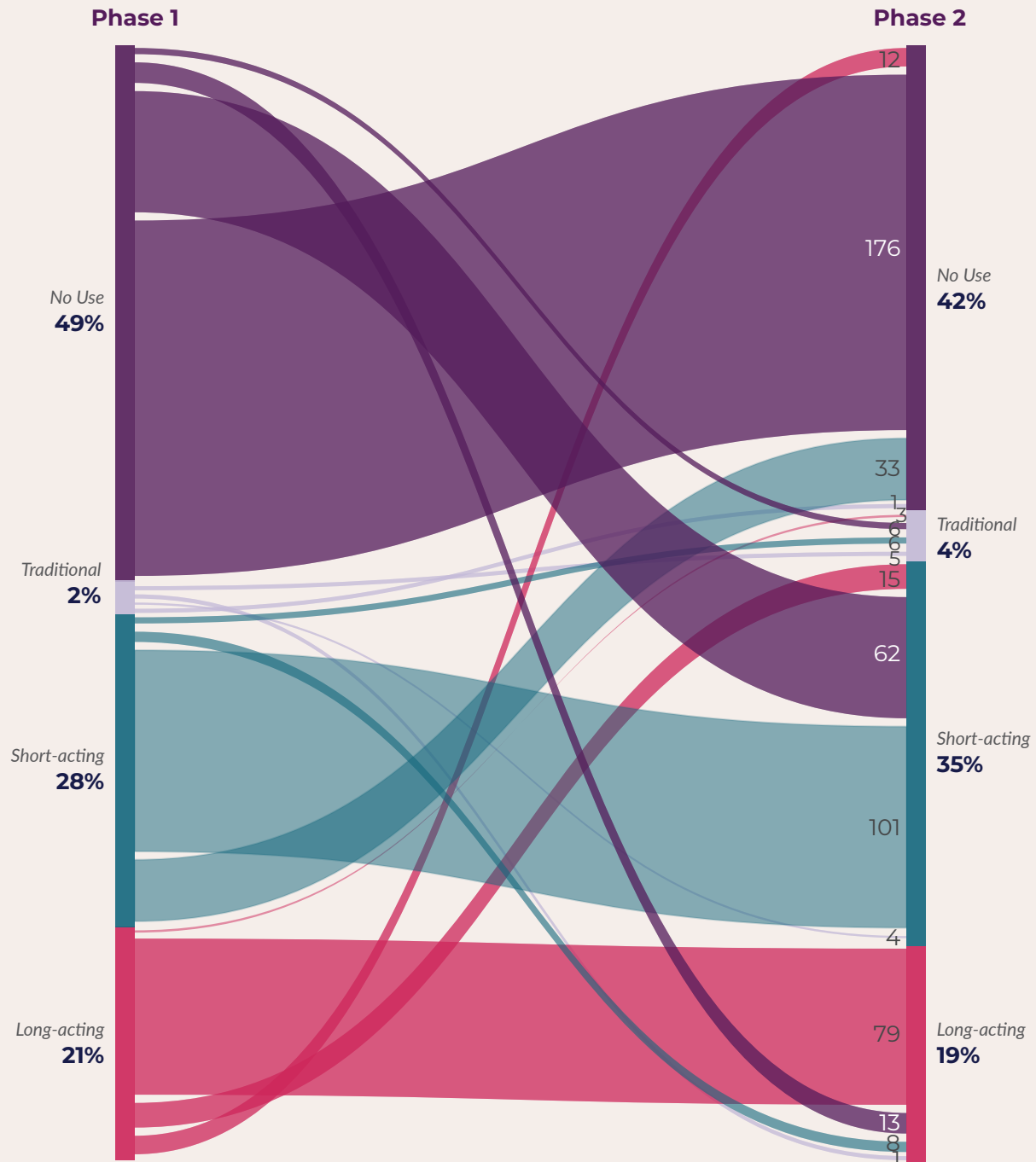
CHANGE IN CONTRACEPTIVE USE OR NON-USE

Percent of women age 15-49 who changed contraceptive use status between PMA Phase 1 (December 2019) and PMA Phase 2 (December 2020) (n=525)



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=525)



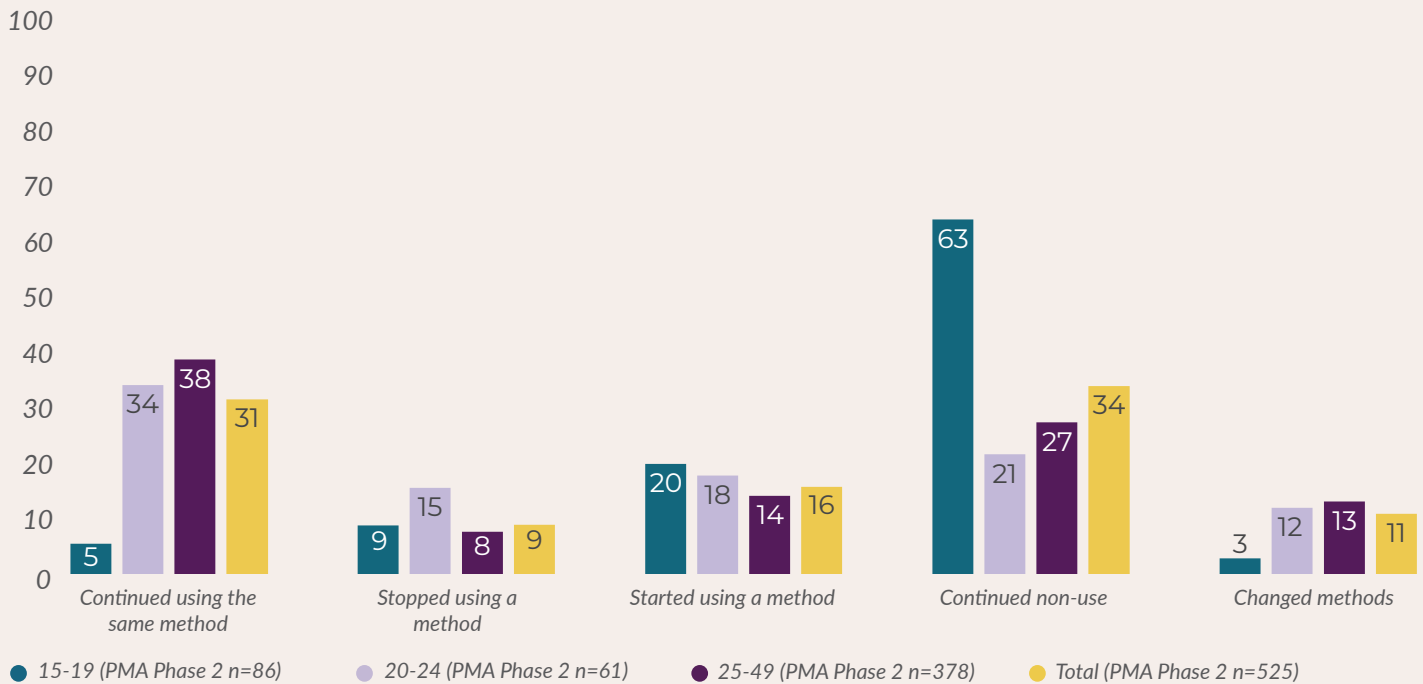
KEY FINDINGS FOR SECTION 1: OVERALL CONTRACEPTIVE DYNAMICS

- The percentage of women using short-acting methods increased from 28% in Phase 1 to 35% in Phase 2.
- There is an increase in modern contraceptive use between Phases 1 and 2, and non-use decreased by 7 percentage points.

SECTION 2: CONTRACEPTIVE DYNAMICS BY KEY MEASURES

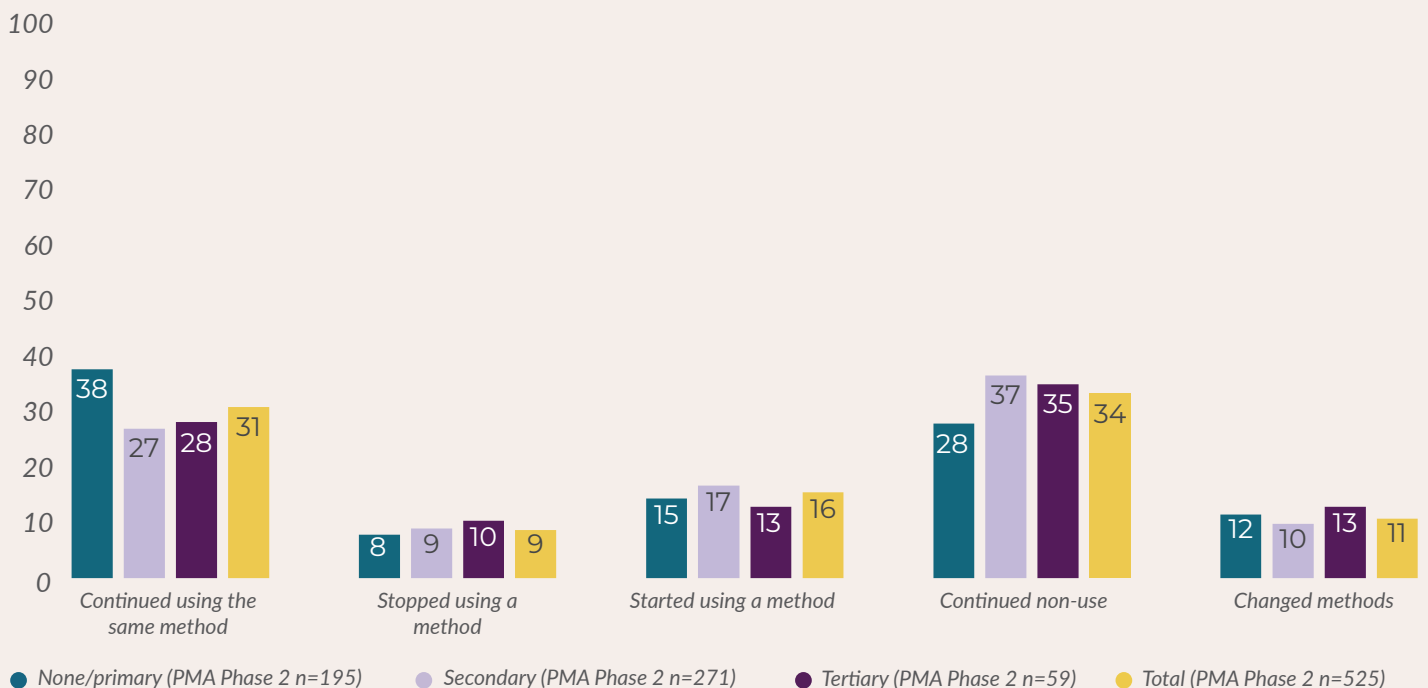
CHANGE IN CONTRACEPTIVE USE STATUS, BY AGE

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



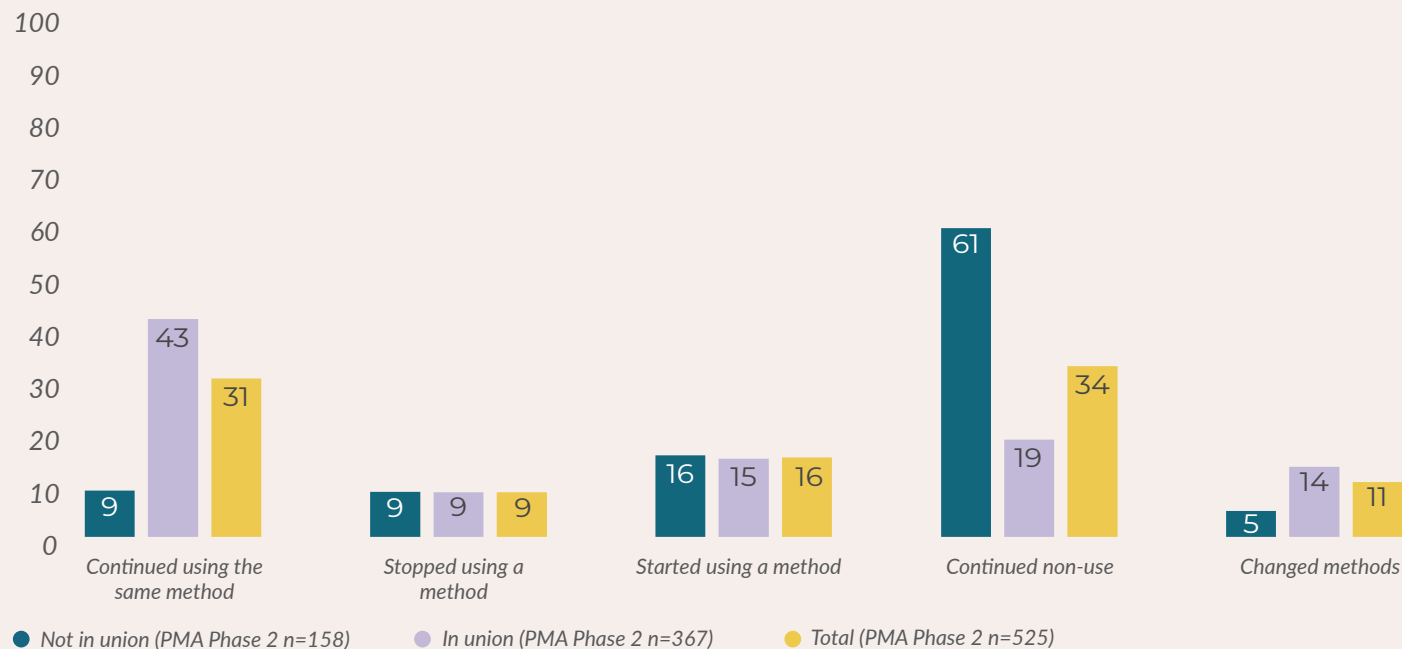
CHANGE IN CONTRACEPTIVE USE STATUS, BY EDUCATION LEVEL

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



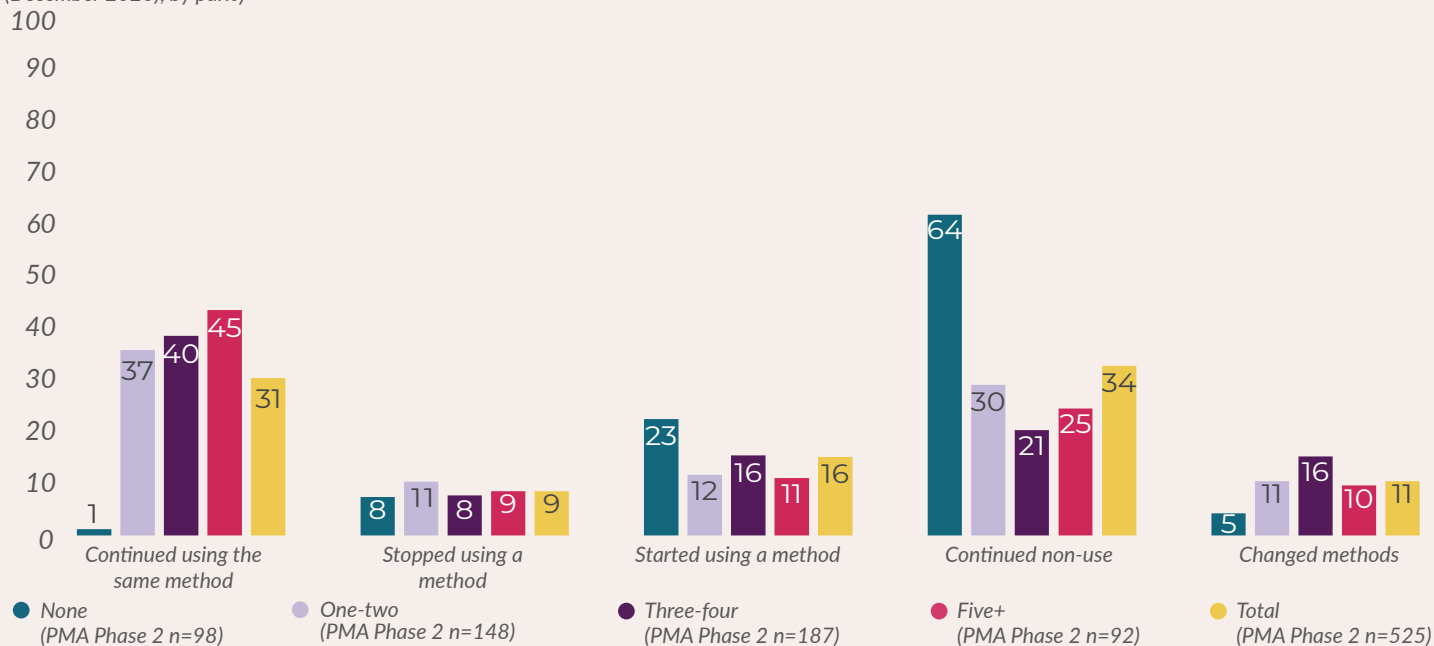
CHANGE IN CONTRACEPTIVE USE STATUS, BY MARITAL STATUS

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

- 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.
- Among women interviewed at Phases 1 and 2, 31%, 11% and 16% were same method continuers, switchers and new adopters, respectively.

SECTION 3: OTHER PANEL DYNAMICS

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=243)



- Adopted a method between Phase 1 and Phase 2
- Continued non-user at Phase 2

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=243)



- Adopted a method between Phase 1 and Phase 2
- Continued non-user at Phase 2

KEY FINDINGS FOR SECTION 3: OTHER PANEL DYNAMICS

- Women who were not using in Phase 1 and had intention to use FP in the future were more than **two times** likely to adopt a method by Phase 2.
- About a half of women with unmet need in Phase 2 adopted a method by Phase 2, with nearly a **third** of those without unmet need taking up a method.

PMA Kenya (Nyamira) 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 Nyamira 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 662 eligible respondents, 18.7% were not reached for follow-up. Of those reached, 565 (79.9%) completed the survey, for a response rate of 98.3% 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 (Nyamira) 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.