DEVELOPING AND INTRODUCING NEW WOMAN-INITIATED CONTRACEPTIVE METHODS TO INCREASE AVAILABILITY AND CHOICE

Gladys Someren: Ministry of Health-Kenya
Demographic Snapshot

- Population 43.2 million in 2013\(^1\) (64% below 24 years)
- Growth rate: 2.9\(^2\)
- Contraceptive Prev. Rate 46\(^2\)
- Total Fertility Rate 4.6\(^2\)
- FP unmet needs 26\(^2\)
- HIV prevalence 5.6\(^3\)
- Unmet need for FP among HIV+: 50\(^3\)
- MM Ratio: 488/100,000 live births
- Skilled birth attendance: 44\(^2\)
- Mothers report receiving postnatal check-up after birth: 47\(^2\)

\(^1\)UNFPA DP/FPA/DCP/KEN/8 (2014-2018);  \(^2\)KDHS 2008-9;  \(^3\)KAIS 2012
KENYAN SITUATION ON CONTRACEPTIVE NEEDS

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- Repositioning of family planning - in the national development agenda
- Policies to guide planning, standardization, implementation, and monitoring and evaluation of reproductive health care are in place
- A costed implementation plan for FP is in place (to improve CPR from 46 to 56% by 2015)
- MOH operates over half of all health facilities around the country
  - 56% of women obtain a form of modern contraception from a public health facility
  - 36% from private health facilities and other sources such as mobile clinics,
  - 6% from community based-distributors, local shops, and friends and family
UPTAKE OF SELECTED FP METHODS

Current use of contraceptives among sexually active women in Kenya (15-49Years) %

- Female Sterilization: 4.8%
- Pills: 8.3%
- IUD: 1.7%
- Injectables: 24%
- Implants: 2.1%
- Male condom: 3.4%
- LAM: 0.3%
Gaps

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- Level of FP use in Postpartum period is low: 25% use a method vs 46% of general population
- Level of unmet need for family planning is more than twice as high among postpartum women (68%) compared to those in the general population (26%)
- Inadequate women-controlled contraceptives
- Use of LAM is equally low with most women not meeting the recommended criteria
- Introduction of PCVR in Kenya is ongoing to expand method mix to breastfeeding mothers
NEXT STEPS
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Future uptake activities

- Share study results
  - Family Planning Technical Working Group
  - Study sites
  - Regulatory bodies for ethics and drugs
  - Other donors and providers supporting family planning services

- Ongoing in-country registration process with Pharmacy and Poisons Board with the help from Woman Care Global

- As we wait for the registration of PCVR we are discussing with the counties where we conducted the study to continue offering the ring (so as to keep the momentum)
“Breastfeeding women in Kenya have very limited Family Planning options. With the introduction of PCVR, women will now have another alternative FP method to choose instead of relying only on Microlut”

Dr. Kigen Bartilol (Head, RMHSU- MOH, Kenya)  
2nd September 2014
THANK YOU