

Contraceptive Uptake among Women in Low Socio-Economic Areas in Kenya: Quantitative Analysis of Secondary Data

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Abstract : Contraceptive use is one of the key global strategies to alleviate maternal mortality. Global efforts through advocating for contraceptive uptake and service provision has led improved contraceptive prevalence. In Kenya maternal mortality rate has remained a challenge despite efforts by government and non-governmental organizations. Objective: To describe the uptake of contraceptives among women in Tunza Clinics, Kenya. Design and Methods: In Kenya through health care marketing fund is implementing a family planning program among its 350 Tunza fractional franchise facilities. Through private partnership, private owned facilities in low socio-economic areas are recruited and trained on contraceptive technology update. The providers are supported through facilitative supervision through a mobile based application Health Network Quality Improvement System (HNQIS) and interpersonal communication through 150 community based volunteers. The data analyzed in this paper was collected between January to July 2017 to show the uptake of modern Contraceptives among women in the Tunza franchise, method mix, age and distribution among the age bracket. Further analysis compares two different service delivery strategies; outreach and walk ins. Supportive supervision HNQIS scores was analyzed. Results: During the time period, a total of 132121 family planning clients were attended in 350 facilities. The average age of clients was 29.6 years. The average number of clients attended in the facilities per month was 18874. 73.7% (n=132121) of the clients attended in the Tunza facilities were aged above 25 years while 22.1% 20-24 years and 4.2% 15-19 years. On contraceptive method mix, intra uterine device insertions clients contributed to 7.5%, implant insertions 15.3%, pills 11.2%, injections 62.7% while condoms and emergency pills had 2.7% and 0.6% respectively. Analysis of service delivery strategy indicated more than 79% of the clients were walk ins while 21% were attended to during outreaches. Uptake of long term contraceptive methods during outreaches was 73% of the clients while short term modern methods were 27%. Health Network Quality Improvement system assessment scores indicated 51% of the facilities scored over 90%, 25% scoring 80-89% while 21% scored below 80%. Conclusion: Preference for short term methods by women is possibly associated to cost as they are cheaper and easy to administer. When the cost of intra uterine device Implants is meant affordable during outreaches, the uptake is observed to increase. Making intra uterine device and implants affordable to women is a key strategy in increasing contraceptive prevalence hence averting maternal mortality.

Keywords : contraceptives, contraceptive uptake, low socio economic, supportive supervision

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