



MINISTRY OF HEALTH

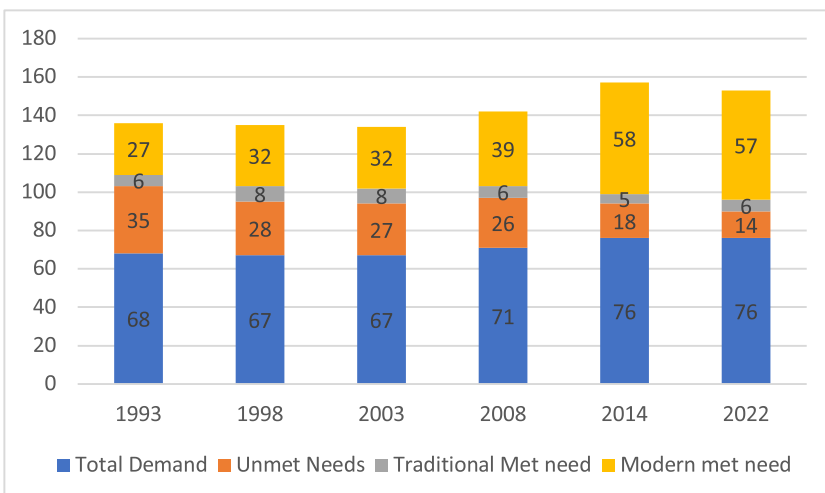
WORLD CONTRACEPTION DAY 2024, KENYA FACTSHEET

- **World Contraception Day (WCD)** is a worldwide health day focusing on contraception, family planning, and overall reproductive health for all people, men and women. On WCD, Kenya also highlights its international commitments, such as the International Conference on Population and Development program 1994, where Kenya, among other countries, committed to upholding reproductive health rights as a critical development component.
- At WCD, we aim to create awareness of contraception, fostering open discussions on reproductive health and rights. WCD emphasizes the reproductive health rights of couples and individuals to freely and responsibly decide on the number and spacing of their children through FP.

Target 3.7 of the Sustainable Development Goals (SDGs) calls on countries “by 2030, to ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes”. The Government of Kenya (GoK) has made great strides towards increasing modern contraceptive use, from 32% to 57% of married women using modern contraceptives (mCPR) (KNBS, 2003, 2022). The country’s goal is to reach 66% by the year 2030.

However, there is still much awareness creation needed in family planning including overall contraception health services and selfcare to close existing inequities in access and use.

- This year’s **WCD objectives** are to enhance awareness of Contraceptives and their availability, accessibility, and utilization across Kenya, to emphasize the importance of domestic financing for contraceptives in Kenya, and to highlight the innovations in the delivery of an all-inclusive FP program in Kenyan
- WCD 2024 Theme is: **“CONTRACEPTION CHOICES; THE POWER IS IN MY HANDS.”** This theme emphasizes that contraception is a choice of the individuals and families in need of contraceptive use. Ministry of Health has availed a significant range of contraceptive method choices at health facilities and now at the community level. There have also been new innovations that significantly increase the contraception choice for the individual, including an addition to self-administered products such as DMPA-SC.

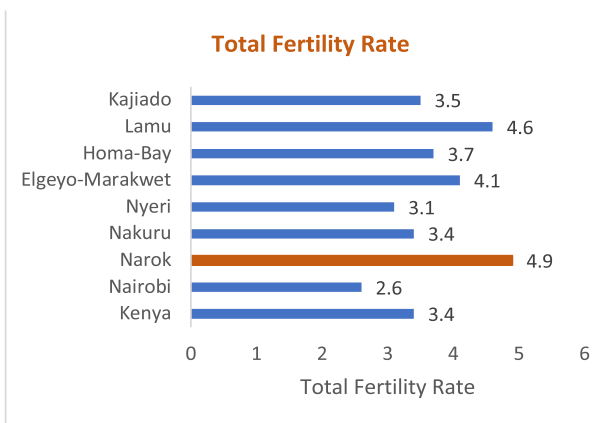
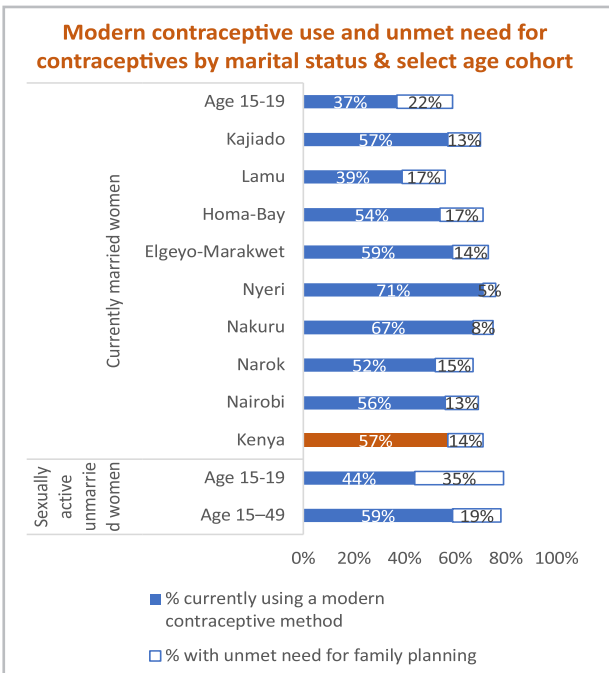


Trends in use of and demand for family planning in Kenya from 1993 to 2022

This graph demonstrates that as the demand for FP services has grown, from 68 - 76%, the unmet need has significantly reduced as well from 35 – 14%. Traditional method users are as well seen in the graph to have a noteworthy representation in FP use in the country.

Graph 1 - A Graph showing percentage in FP use, Total demand and Unmet need in Kenya

Graph 2- Contraceptive use and unmet need for contraceptives in Kenya



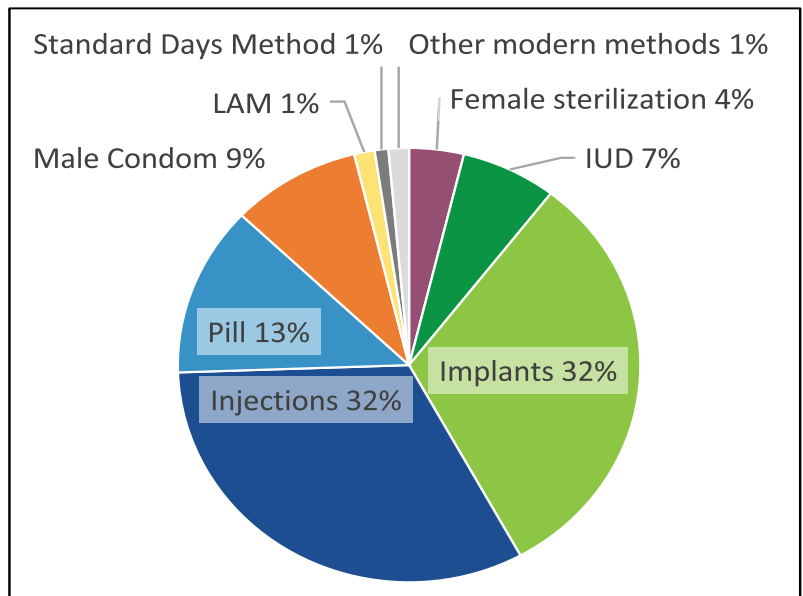
Graph 3 – A graph showing Fertility rate in some Counties in Kenya

Modern use of contraceptives varies across the country just as the fertility rate does too. These graphs also point to a need for wholistic adaptation of interventions to meet the needs of our communities.

	Kenya	Nairobi	Narok	Nakuru	Nyeri	Elgeyo-Marakwet	Homa-Bay	Lamu	Kajiado
% girls aged 15-19 who have ever been pregnant	15%	8%	28%	17%	5%	12%	23%	14%	22%
Unplanned births	0.5	2.4	4.3	2.8	2.6	3.6	2.5	4.4	3.1

Early and unplanned pregnancy contributes to high levels of fertility. Rapid population increase can exacerbate the challenge of ensuring that future development is sustainable and inclusive. It magnifies the scale of the investments and effort required to ensure that no one is left behind. *Achieving the Sustainable Development Goals, particularly those related to health, education, and gender equality, can contribute to sustainable population growth and increasing economic productivity and growth.*

Graph 4 – A Chart Showing the current Method Mix in Kenya



Challenges in FP programming

Access to healthcare services: Distance to the nearest health facility is a major barrier to healthcare access, including contraceptives, in most counties. In Kenya, 5% of women age 15-49 take more than two hours to travel to the nearest health facilities compared to 3.6% in Nairobi, 9% in Narok, 2.9% in Nakuru, 2.0% in Nyeri, 0.6% in Elgeyo-Marakwet, 2.6% in Homa Bay, 7.4% in Lamu and 11.6% in Kajiado.

The GoK has prioritised primary health care including Community Health Promoters (CHP) at the community level. Kenya has 88,403 CHPs. With the right investments, the use of CHPs to provide contraceptive services can help close the unmet need for contraception.

Financing: The National Family Planning Costed Implementation Plan 2017-2020 estimated a total funding requirement of 7.9 billion Kenya shillings in 2020 and a corresponding funding gap of 2.4 billion Kenya shillings. The financing is envisaged to transition from mixed funding between development partners and domestic sources to fully domestic financing.

Sources:

- KNBS 2022. KDHS
- National Council for Population and Development (NCPD) and Population Studies and Research Institute (PSRI), Policy Brief No. 38 October 2013
- Ministry of Health. The Kenya Family Planning Costed Implementation Plan (FP-CIP), 2017-2020
- Family Planning and the 2030 Agenda for Sustainable Development: Data Booklet
- Ministry of Health. Kenya Community Health Strategy 2020 – 2025
- Map Action. Kenya Arid and Semi-Arid Lands (ASALs), July 2023