

FAMILY PLANNING 2020

COUNTRY ACTION: OPPORTUNITIES, CHALLENGES, AND PRIORITIES



KENYA

This document reflects the country context, opportunities, challenges, and priorities developed by FP2020 focal points for Kenya in collaboration with the FP2020 Secretariat and other partners during the Anglophone Africa Focal Point Workshop in Kampala, Uganda in April 2016. FP2020's focal point representatives are from the government and two donor organizations, usually UNFPA and USAID, and serve as the key representatives of FP2020 in-country. They coordinate with each other, the government, partners and other stakeholders, and the FP2020 Secretariat to drive progress on the country's family planning goals. These opportunities, challenges, and priorities serve as the foundation of the shared agenda of action across the next 12- to 18-month horizon.

COUNTRY CONTEXT

The Ministry of Health (MOH) has proposed thematic working groups to steer the process of developing the key family planning (FP) priorities and ultimately leading to a review of the overall RH policy and strategy. These thematic groups include:

- Advocacy and policy
- Commodity security
- Service delivery
- Youth and BCC
- Arid and semi-arid lands (building on existing ASAL groups of women leaders, MDF, and others)
- Public-private sector partnership
- Measurement, data, and knowledge management

OPPORTUNITIES

- Recent DHS data (2014) found significant progress made in key FP indicators, including increasing CPR and declining TFR as well as unmet; demand for FP satisfied by modern methods 70%
- The Vision 2030 strategy and its focus on youth
- Devolution creating opportunities to develop county-specific approaches
- High level commitment to MNCH with First Lady's Beyond Zero initiative; presents an opportunity to advocate for inclusion of FP as key intervention for reducing MMR
- Updated FP Guidelines and Revised RH Communication Strategy
- GFF includes FP and presents an opportunity for additional funds for adolescent SRH
- Ministry of Planning and Devolution provides strong advocacy for FP
- New National Adolescent SRH Policy and preliminary report from 2015 youth survey
- Revision of sexuality education curriculum by Ministry of Education
- Supportive members in Parliamentary Health Committee and Senate
- Advanced ICT, mobile technology, apps, social media
- Ongoing education reform of current government, including keeping girls in school

CHALLENGES

- Financing gap for commodities
- Devolution
- Inefficiency and coordination challenges amongst partners make it difficult to fully map resources available; different county priorities and potential for duplication of efforts
- Sociocultural barriers, including religious opposition to FP
- Despite current progress, fell short of the MDG and KHSSP goals for FP
- Regional disparities with some areas reporting CPR as low as 2% and others as high as 76% as well as disparities based on education, wealth, and rural and urban residence
- Adolescent pregnancy rate remains high at 96 per 1000 (1 in 100); CPR has risen amongst 15-24 year olds and different delivery mechanisms needed to address needs of various youth population segments (e.g., married/unmarried, in school/out of school, urban/rural, wealth quintile, etc.)
- Pro-natalist views in upcoming election year
- MOH focus on MNCH more than FP and FP missing from Beyond Zero plan

PRIORITIES

1. Improve contraceptive commodity security
2. Increase political commitment and domestic financing for family planning, especially for youth
3. Improve use of data and multi-sectoral coordination to address the SRH needs of youth
4. Increase demand for and access to family planning among those counties in the northern arid lands (NAL) with the lowest mCPR and highest unmet need, with a strong focus on reaching adolescents/youth