

- Lobby for the availability of youth-responsive services where young people can receive quality information on contraceptive methods clearly, including how to use them, how effective they are, and what side effects they may have if any, and ensuring the availability of a wide range of methods.
- Continue working with relevant stakeholders to ensure adolescents and young people receive accurate information around contraceptives and other reproductive health services.
- Support the generation and utilization of accurate data in support of policy and decision making on contraceptive programming.
- Link young people in the community and on social media with health facilities and health workers where they can access quality SRH services.

|D| Participation and accountability:

Community support for contraceptive services is a central pillar in improving accessibility. To generate community back up for youth access to reproductive health commodities, CSA Youth Advocates will;

- Continue involving young people meaningfully in advocacy activities towards access to quality contraceptive services and commodities.
- Work closely with religious and community leaders, parents and teachers through dialogue and lobbying for their support in Adolescent and youth SRHR.
- Continue supporting SRHR policies reform and implementation on access to contraceptive services and commodities to favor all Kenyan citizens including minority groups such as LGBTQI, PLWD, PLWHIV, Sex Workers etc.
- Commit to holding the government accountable for the implementation of international SRHR commitments including ESA, Abuja declaration and other National laws and policies to facilitate access to quality healthcare including reproductive health as provided under article 43 of the Kenyan constitution.



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Brief on Use of Contraceptives among Young People

CONTRACEPTION.

CONTRACEPTION is defined as the intentional prevention of pregnancy through the use of various devices, traditional methods, chemicals, drugs or surgical procedures. Thus a contraceptive is any device or act whose purpose is to prevent a person from becoming pregnant.

About twenty different forms of contraception exist and work at different points from ovulation through fertilization to implantation, including long- and short-term methods that are hormonal and non-hormonal.

01 LAWS AND POLICIES ON CONTRACEPTION

There are several laws, policies and global instruments that guarantee and protect women's Sexual and Reproductive Health through allocations on the use of different contraceptive methods globally. At the Global, regional and National levels these instruments include

- A. MAPUTO protocol on the Rights of Women in Africa,
- B. Abuja Declaration on improving the health sector of the world's poorest countries,
- C. East and Southern Commitment (ESA) that guarantees access to quality Reproductive Health for all without any discrimination.
- D. The Kenyan constitution that states: Every person has the right to the highest attainable standard of health, including reproductive health care
- E. The National Adolescent Sexual and reproductive health policy
- F. National guidelines for the provision of adolescent and youth friendly services that guarantee access and provision of Reproductive health services and commodities for all without any stigma or discrimination.

are mostly unintended and associated with additional negative health outcomes such as sexually transmitted infections/HIV/AIDS, unsafe abortions, miscarriages, and complications during birth that can leave young mothers with lifelong health challenges. Adolescent girls aged below 19 constitute 20% of the patients who undergo post-abortion services in Kenyan health facilities and 50% of those admitted with severe pregnancy related complications. Unintended pregnancies among Adolescent and young people root from various factors, common among this being relying on less effective methods of contraception such as safe days (Menstrual cycle), limited access to short and long term methods of contraceptives, cultural and religious barriers, myth and misconceptions on FP use etc.

CSA YOUTH ADVOCATES CONTRIBUTE TO ACCESS OF CONTRACEPTIVES TO ADOLESCENTS AND YOUNG PEOPLE

Access to quality Contraception is guided by human rights principles. Thus, CSA Youth Advocates support access to contraceptive services that respect, protect, and fulfill the human rights of all including adolescent and young people. CSA's youth network continues to contribute to the following principles as guiding pillars on access to family planning methods and other reproductive health services:

A Accessible information and services:

Young people are most likely to receive low-quality reproductive health service and commodity because they often lack information, have fewer points-of-access welcoming them and only easily access information from unreliable sources such as internet and peers who may not have correct information on SRHR etc. To ensure quality in Reproductive health services and commodities, CSA Youth Advocates will;

- Continue sharing opinion articles and blogs on importance of access to contraceptives to young people through local dailies and online platforms.
- Commit to advocate for uninterrupted funding to make sure that contraceptive supplies stay in stock in health facilities.
- Online platforms present great opportunity to reach young people with accurate contraceptive information therefore CSA Youth Advocates will continue providing FP information through online campaigns.

B Non-discrimination:

Young people struggle against societal taboo, stigma and discrimination and are more likely to fall prey to unethical marketing practices as they try to avoid societal barriers in accessing contraceptive services. To eliminate stigma and discrimination when accessing contraceptives, CSA Youth Advocates Will;

- Conduct more sensitization among healthcare workers within various communities on the importance of treating all contraceptive clients equally. Respecting every client (including adolescent and youth) needs and wishes by setting aside personal judgments and any negative opinions while providing contraceptive services.
- Advocate for training of health care service providers on Youth friendly service delivery to young people as stipulated and guaranteed in the National Youth Friendly Guidelines.

C Informed decision-making:

Young people often have specific needs but generally do not use the contraceptive method that is most suited for their situation. To improve young people's ability to select the best contraceptive based on their need and biology CSA Youth Advocates will;

02 SITUATION ANALYSIS FOR KENYA ON CONTRACEPTIVE USE BY YOUNG PEOPLE

The contraceptives prevalence rate in Kenya among married women of reproductive age (15-45) rose from 51% in 2014 to more than 61% surpassing the 2020 target of 58% (FP, 2020). Young people however, are reported to contribute lesser to the achievement as compared to married adults. Only three in every 10 young women are using a modern contraception method, contributing to high rates of unintended pregnancies especially among teenagers, consequently resulting to abortion that is often unsafe. Unsafe abortion accounts for 15 per cent of all maternal deaths in Kenya.

Teenage pregnancies in Kenya, account for 18% of the school dropouts and maternal related deaths among adolescents aged between 16-18 years old. These pregnancies