KENYA - Reversing the Stall in Fertility Decline in Western Kenya

Visit our data catalog at: http://aphrc.org/catalog/microdata/index.php
Overview

Identification

**ID NUMBER**
APHRC-PWK-2013-1.1

Version

**NOTES**
Version 1.1, November 2014. Anonymized with DOI and Recommended Citation added.

Overview

**ABSTRACT**
Strong evidence base is required to effectively develop and deliver targeted reproductive health programs to underserved populations. The Packard Western Kenya (PWK) Project was a rural community-based contraceptive distribution intervention funded by the David and Lucile Packard Foundation to reverse the fertility stall in Western parts of Kenya, increase access and utilization of voluntary family planning services, and reduce unsafe abortions, infant and maternal mortality. The PWK project was a two-year demonstration imitative implemented in four rural districts of Western Kenya, namely Siaya, Bondo, Teso and Busia by a consortium led by APHRC. Other partners in the consortium are Family Health Options of Kenya (FHOK), Great Lakes University of Kisumu (GLUK), Marie Stopes, Kenya (MSK), and the Ministry of Public Health and Sanitation.

The objectives of PWK project were:

1. To improve supply of family planning services through community based contraceptives distribution systems
2. To improve supply of long-acting and permanent methods of family planning services through training and supportive supervision of health care workers
3. To improve delivery of family planning services through integrated outreach and in-reach health programs
4. To improve on informed demand for family planning services at the community level through interactive communications, and distribution of information, education and communication materials
5. To provide evidence on the effectiveness of the intervention

**UNITS OF ANALYSIS**
Households and Individuals

Scope

**NOTES**
- **HOUSEHOLD**: Household characteristics, household listing, orphaned and vulnerable children, education, child labour, water and sanitation, household use of insecticide treated mosquito nets, household assets and durability of housing.

- **WOMEN**: Women's characteristics, reproduction, Birth history, Contraception, maternal and child health, child mortality, sexual activity and marriage, fertility preferences, spousal and interpersonal communication, gender iniquity measures, and Migration history.

**KEYWORDS**
Fertility, Western Kenya

Coverage

**GEOGRAPHIC COVERAGE**
The study covered Bondo, Siaya, Busia and Teso Districts in Western Kenya
KENYA - Reversing the Stall in Fertility Decline in Western Kenya

UNIVERSE
Women aged 15-49 in the four districts.

Producers and Sponsors

<table>
<thead>
<tr>
<th>PRIMARY INVESTIGATOR(S)</th>
<th>Affiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td></td>
</tr>
<tr>
<td>African Population and health Research Centre</td>
<td>APHRC</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OTHER PRODUCER(S)</th>
<th>Affiliation</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dr. Eliya Zulu</td>
<td>APHRC</td>
<td>Co Investigator</td>
</tr>
<tr>
<td>Dr. Gwendolyn Morgan</td>
<td>APHRC</td>
<td>Co Investigator</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FUNDING</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Abbreviation</td>
<td>Role</td>
</tr>
<tr>
<td>PACKARD Foundation</td>
<td></td>
<td>Funder</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OTHER ACKNOWLEDGEMENTS</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Affiliation</td>
<td>Role</td>
</tr>
<tr>
<td>Mr. Cyprian A.O. Awiti</td>
<td>Marie Stopes International Kenya (MSK)</td>
<td>Service provision</td>
</tr>
<tr>
<td>Dr. Jared Moguche</td>
<td>Marie Stopes International Kenya (MSK)</td>
<td>Service provision</td>
</tr>
<tr>
<td>Dr. Caroline Tatua MBChB, MPH</td>
<td>Family Health Options of Kenya (FHOK)</td>
<td>Service provision</td>
</tr>
<tr>
<td>Prof. Richard Muga</td>
<td>The Great Lakes University of Kisumu (GLUK)</td>
<td>Service provision</td>
</tr>
<tr>
<td>Ms. Joyce Mbegua, BA, MCHD</td>
<td>The Great Lakes University of Kisumu (GLUK)</td>
<td>Service provision</td>
</tr>
<tr>
<td>To the Study participants</td>
<td>West Kenya</td>
<td>Participants</td>
</tr>
</tbody>
</table>

Metadata Production

<table>
<thead>
<tr>
<th>METADATA PRODUCED BY</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Abbreviation</td>
<td>Affiliation</td>
</tr>
<tr>
<td>African Population &amp; Health Research Center</td>
<td></td>
<td>APHRC</td>
</tr>
</tbody>
</table>

DATE OF METADATA PRODUCTION
2013-11-27

DDI DOCUMENT VERSION
Version 1.1

DDI DOCUMENT ID
APHRC-PWK-2013-1.1
Sampling

Sampling Procedure

The household survey sample was drawn from the population residing in the rural areas of the four larger districts (Bondo, Busia, Teso and Siaya) of Western Kenya. A representative sample of 2125 households was drawn for the survey using the KNBS National Sample Survey and Evaluation Program (NASSEP IV). The frame was last updated in 2008 to support the 2008-2009 National Demographic and Health Survey.

Using a two-stage sampling design that first selects Enumeration Areas (EA) and then randomly selects households per EA, a total of 60 rural EAs were sampled distributed as follows: Siaya 20, Bondo 10, Busia and Teso 15 each). In each selected EA, 35 households were randomly chosen. In each sampled household, the head of the household (or his/her representative) was approached and asked for consent to participate in the survey. Information from the household head was gathered using a household questionnaire and was used to identify eligible women for the survey. In addition, the household head responded to questions about assets and environmental circumstances including information on characteristics of the household’s dwelling unit, type of toilet facilities, source of drinking water, and ownership of durable goods and livestock.

Response Rate

Of the 2125 households selected for the survey, 2299 women were found eligible, of whom 1997 women consented and participated in the interview yielding a response rate of 86 percent. The women response rates are highest in Teso (94 percent) and lowest in Bondo (81 percent). The main reason for no response among eligible women was the failure to find individuals at home or work places despite repeated callbacks made to the household by the interviewers.

Weighting

The household data was weighted as seen in variable HH_weight
The Women’s data was weighted as seen in variable Women_weight
Questionnaires

Overview

HOUSEHOLD QUESTIONNAIRE:
Household characteristics, household listing, orphaned and vulnerable children, education, child labour, water and sanitation, household use of insecticide treated mosquito nets, household assets and durability of housing.

WOMEN QUESTIONNAIRE:
Women's characteristics, reproduction, Birth history, Contraception, maternal and child health, child mortality, sexual activity and marriage, fertility preferences, spousal and interpersonal communication, gender inequity measures, and Migration history.
Data Collection

Data Collection Dates

<table>
<thead>
<tr>
<th>Start</th>
<th>End</th>
<th>Cycle</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010-06-07</td>
<td>2010-06-25</td>
<td>Phase 1</td>
</tr>
</tbody>
</table>

Time Periods

<table>
<thead>
<tr>
<th>Start</th>
<th>End</th>
<th>Cycle</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010-07-07</td>
<td>2010-07-20</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Data Collection Mode

Face-to-face [f2f]

Questionnaires

HOUSEHOLD QUESTIONNAIRE:
Household characteristics, household listing, orphaned and vulnerable children, education, child labour, water and sanitation, household use of insecticide treated mosquito nets, household assets and durability of housing.

WOMEN QUESTIONNAIRE:
Women's characteristics, reproduction, Birth history, Contraception, maternal and child health, child mortality, sexual activity and marriage, fertility preferences, spousal and interpersonal communication, gender inequity measures, and Migration history.

Supervision

There was a full time field coordinator to monitor and report progress on the project. APHRC and partner organizations also carried out random spot checks to improve quality.
Data Processing

Data Editing

Data editing took place at a number of stages throughout the processing, including:

a) Office editing and coding
b) Quality checking and completeness by the field coordinator

Other Processing

Typed based on hard copy questionnaires
Data Appraisal

No content available