

The challenge

Barriers to sexual and reproductive health and rights

Young people in Kenya often lack knowledge about contraception, sexual health, and their rights.

Harmful myths and misconceptions impact sexual decision-making and access.

Gender and social norms related to early marriage, male status, decision-making, bodily autonomy and pressure for men to have multiple partners further impact behaviours.

Young people perceive limited parental and community support for their sexual and reproductive health and rights and lack positive role models.

What we did

A participatory social behaviour change programme

MSI Kenya partnered with local youth champions and designed an intervention to better support adolescent and young people to overcome the barriers related to gender and social norms. The project consists of three main components:

- G-Chanue, a youth-targeted communications platform using social media and the MSI Kenya contact centre
- Parent, youth, and joint parent-youth meet-ups, community dialogues/engagement to address gender norms and relationships with parents, dealing with peer pressure, decision making, and avoiding sexually transmitted infections and unintended pregnancies.
- Healthcare team training to ensure adolescent, youth and gender responsive service delivery.



Key learnings

- Young people in Kenya face many barriers
 to sexual and reproductive health and
 rights. To address this, MSI Kenya partnered
 with youth champions in the Kisumu region
 to create a participatory social behaviour
 change programme to help change
 knowledge, attitudes, and sexual and
 reproductive health and rights behaviours
 of young people, their parents and wider
 community members.
- An evaluation of the pilot revealed that partnering and co-developing with local young people champions was an impactful strategy to engage young people. The young people reached through pilot activities were well-informed about their sexual and reproductive health and rights and more confident to access information, seek services and discuss their reproductive rights with healthcare providers.
- Despite these successes, more work is needed to engage parents and encourage inter-generational conversations to further break down the barriers impacting young people and ensure long-term change.



What we found

The pilot reached more than 500 young people and 300 parents directly, as well as local leaders, health care workers and community gate keepers. A mixed method evaluation completed in 2024 after five months of pilot activities consisted of a post-pilot survey as well as qualitative interviews and discussions with a range of participants and stakeholders.

Impact on young people's knowledge and agency

Insights from both the post-pilot survey and qualitative interviews indicated that activities were successful in addressing myths and building youth's knowledge of sexual and reproductive health and rights:

6.4 contraceptive methods

on average, were mentioned unprompted by female participants.

5.2 contraceptive methods

was the mean mentioned by male participants.

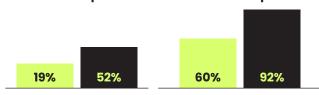
93% of young people

agreed they could ask a provider questions about sexual and reproductive health, indicating improved confidence to discuss.

from 19% at a baseline to 58%

at the endline survey, more youth participants – particularly young women – reported discussing their sexual and reproductive health with a provider.

Changes in Young People's Comfort Discussing Sexual and Reproductive Healthcare with providers



Young people who discussed their SRHR with a healthcare provider

Young people who believe they can ask their healthcare provider questions about contraception

Source: Participant surveys, baseline n=780, endline=557 ■ Baseline ■ Endline

Impact on parents and community

Pilot activities were less successful in encouraging parent-child discussions in the short term. However, insights suggest that there was some impact on parents' attitudes towards young peoples' sexual and reproductive health and rights and the potential for change. There were small shifts in youth perceptions of community support for young peoples' sexual and reproductive health and rights, from 33% of youth agreeing at baseline that leaders in their community are supportive of women who have not given birth using contraception to 45% at endline.

Parents who discussed family planning with their child

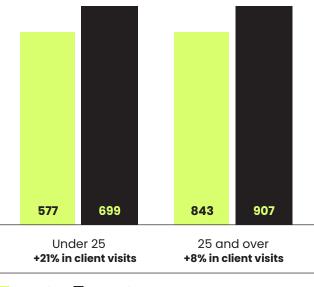


Source: Participant surveys

Impact on uptake of sexual and reproductive health information and services

The increased knowledge and confidence from the pilot appears to have had a positive impact on youth access to information and services, with referrals by the MSI Kenya contact centre to sites in the Kisumu region up by 26%, and youth client visits to the MSI Kenya supported public sector sites in the pilot locations up by 21%.

Client visits to MSI Kenya supported public sector sites



Pre-pilot ■ Post-pilot

Source: Client health records



More information

For more information on MSI Reproductive Choices and the work that we do, please contact:

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