Utilization of reproductive health services with a focus on; The minors, adolescents and people with special needs – likuyani sub county

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People with disabilities constitute 5% of a given population, while the mature adolescent constitutes at least 24%. These groups are not only sexually active but also in dire need of the essential reproductive health services. Kenya has put considerable effort into policy development and strategic planning in ensuring a smooth operational process in RH service delivery to its population. Several policy guidelines have been formulated in this regard; ie; Policy Guidelines for service providers in family planning, National RH Implementation Plan (1999-2019), Adolescent RH development policy (2003), Sexual offences Act No.3 (Rev 2007), National RH policy etc. Despite all these RH policies, access to RH services has remained relatively low even in low economic rural settings. None of the policies provide a workable solution and or monitoring uptake of RH services for persons with disabilities, who are equally vulnerable to the effects of the ever changing social-demographic processes.

Method: A retrospective quantitative data analysis from health facilities offering reproductive health services in the sub county during the 2013-2014 financial year.

The following clients received services:

- Family Planning – 7796
- Antenatal Clinic 1st visits – 2993
- Maternity deliveries – 1312
- Post abortion – 141
- Voluntary counseling and Testing – 4287

Results:

- Minors 0.23% attended family planning services, 14-24 years 37% over 24 years; 65% and PWDs 0.008%
- Antenatal Services; Minors 0.14%, 14-24yrs 51%, > 24yrs- 47%, PWDs -0.069%
- Hospital Deliveries; Minors 0.15%, 15-24s 57%, >24s- 43% PWDs- 0
- Post abortion care; Minors 0, 15-24s 49.6%, > 24s -50.35% PWDs- 0
- Voluntary counseling and Testing services; Male – 41%, Female- 59%, Minors- 3.2%, 15-24s- 34%, > 24s-62%, PWDs- 0.041%

Conclusion: While both the adolescents and the elderly attend PAC services and maternity deliveries in almost equal measures, there is a significant drop in accessing family planning services and VCT among the adolescents. People with special needs are either not accessing this essential service or are not adequately covered and identified. It is imperative therefore that urgent and sustainable intervention measures be initiated to address the situation.

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