DETERMINANTS OF UNINTENDED PREGNANCY: A COMPARATIVE STUDY OF CENTRAL AND WESTERN PROVINCES OF KENYA

BY

JOSPHINE WANJIRU

Q50/70083/2011

A Project Submitted in Partial Fulfilment of the Requirements for the Award of a Master of Arts Degree at the Population Studies and Research Institute, University of Nairobi

November 2013
Kenya continues to record high rates of unintended pregnancies. The 2008-09 KDHS showed that 43 per cent of all recent pregnancies were unintended. This was a marginal decrease from the 2003 KDHS that recorded unintended pregnancies at 45%. Unintended pregnancy is one of the greatest contributors of maternal mortality currently estimated at 488 deaths per 100,000 live births. Most of these deaths result from unsafe abortion. In Kenya, the determinants of unintended pregnancies regionally are poorly understood. This study therefore sought to establish determinants of unintended pregnancy in Central and Western provinces.

The study found that 47% of the women in Central province and 60.8% of their counterparts in Western province had unintended pregnancy. Bivariate analysis results indicate that ever use of contraceptives, number of living children, preceding birth interval, maternal age, marital status and household wealth index were each statistically associated with the incidence of unintended pregnancy in Central province. However, in Western province the number of living children, maternal age, maternal education, marital status, household wealth index and type of place of residence were each statistically associated with the incidence of unintended pregnancy. Logistic analysis results indicate that the number of living children, maternal age, wealth index and marital status were each significantly associated with the incidence of unintended pregnancy among women in Central province. It further shows that ever use of contraceptive, number of living children, religion, maternal age, household wealth index and marital status had each statistically significant effects on incidence of unintended pregnancy in Western province.

Young women aged 15-24 were significantly more likely than older women to experience unintended pregnancy in both provinces. Similarly, unmarried women and those who had more
than three living children showed elevated risk of unintended pregnancy than ever married women. Women from the poor households also had increased likelihood of experiencing unintended pregnancy. Women in Western province were more likely to experience unintended pregnancy than their counterparts in Central province.

The results imply the need for effective programmes and strategies to reduce unintended pregnancy. Increasing access to contraceptive services is key to reducing unintended pregnancies. The programmes should target the young women, the unmarried ones, those with three or more living children and those from the poor households in both the provinces.