

Barriers to Family Planning Among the Urban Poor

Reducing Inequities: Ensuring
Universal Access to Family Planning

Alex Ezeh, PhD

African Population and Health Research Center, Nairobi

www.aphrc.org

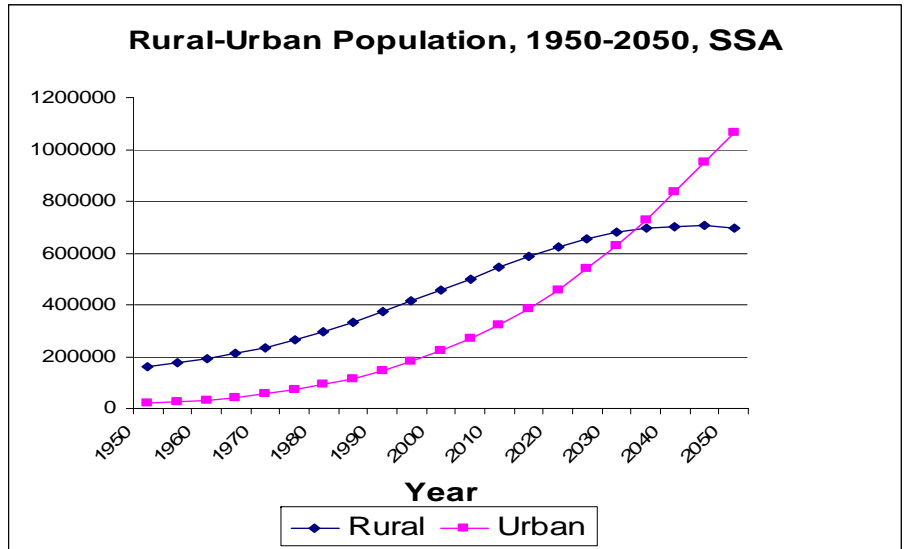
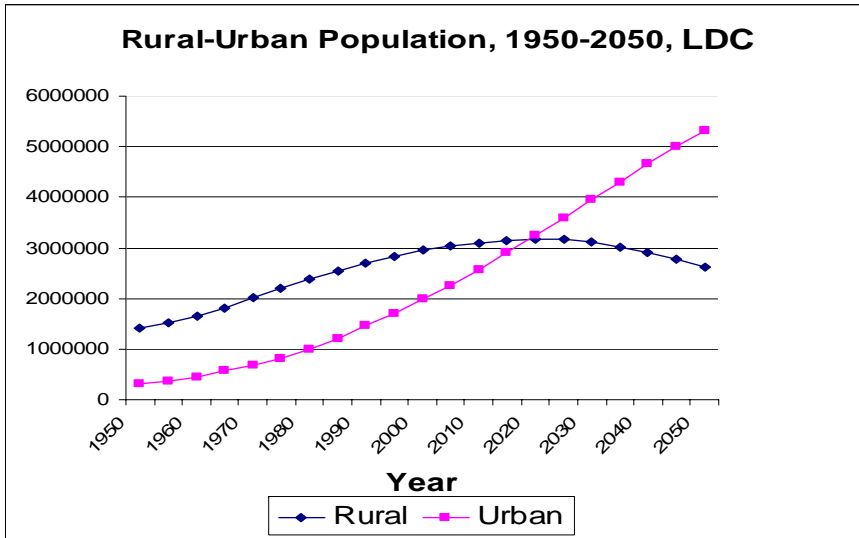
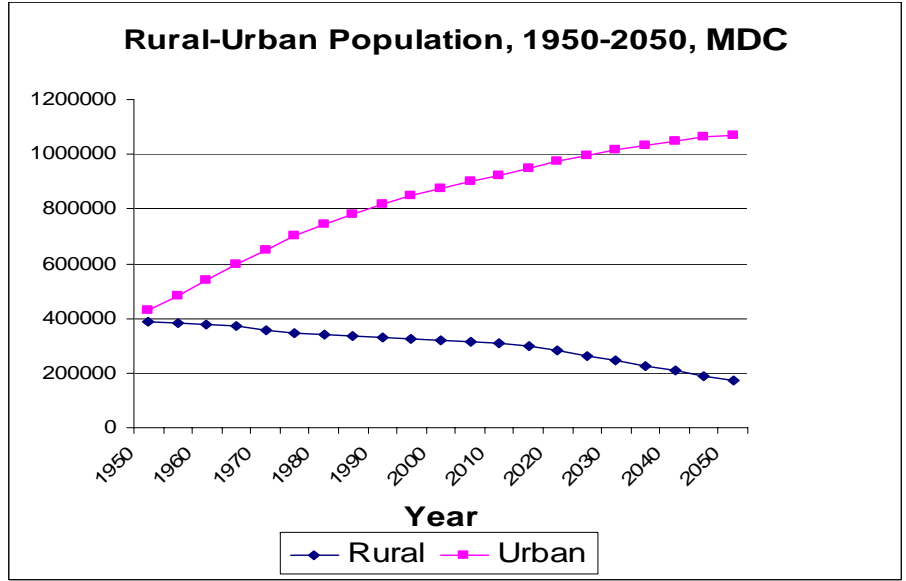
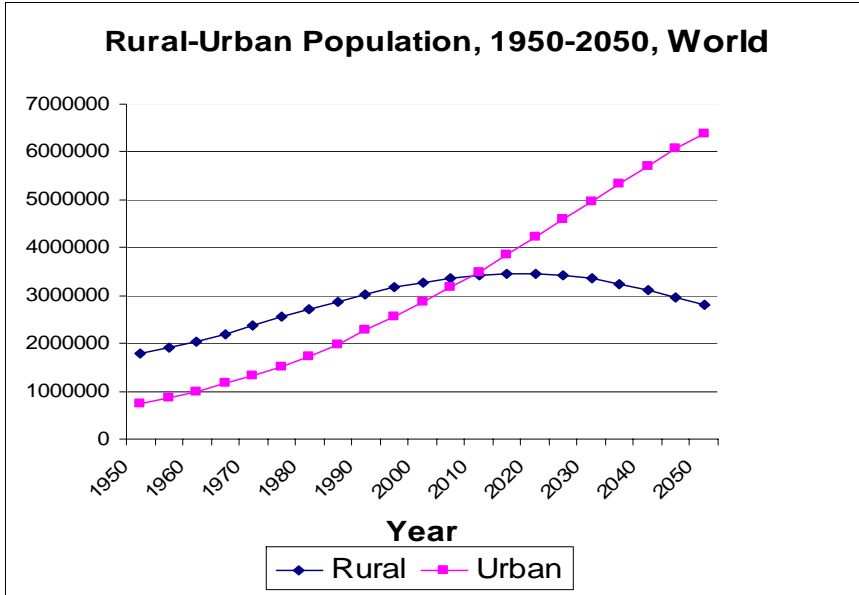


Key Points

- The world is now majority urban and nearly all future population growth will occur in urban areas of the developing world
- Globally, a third of the urban population live in slums, 78% in the least developed countries
- The primary driver of urban growth is natural increase, often due to unwanted fertility
- Understanding the barriers the urban poor face in accessing family planning services is essential to addressing global population growth
- Opportunities for sustained significant impact are great

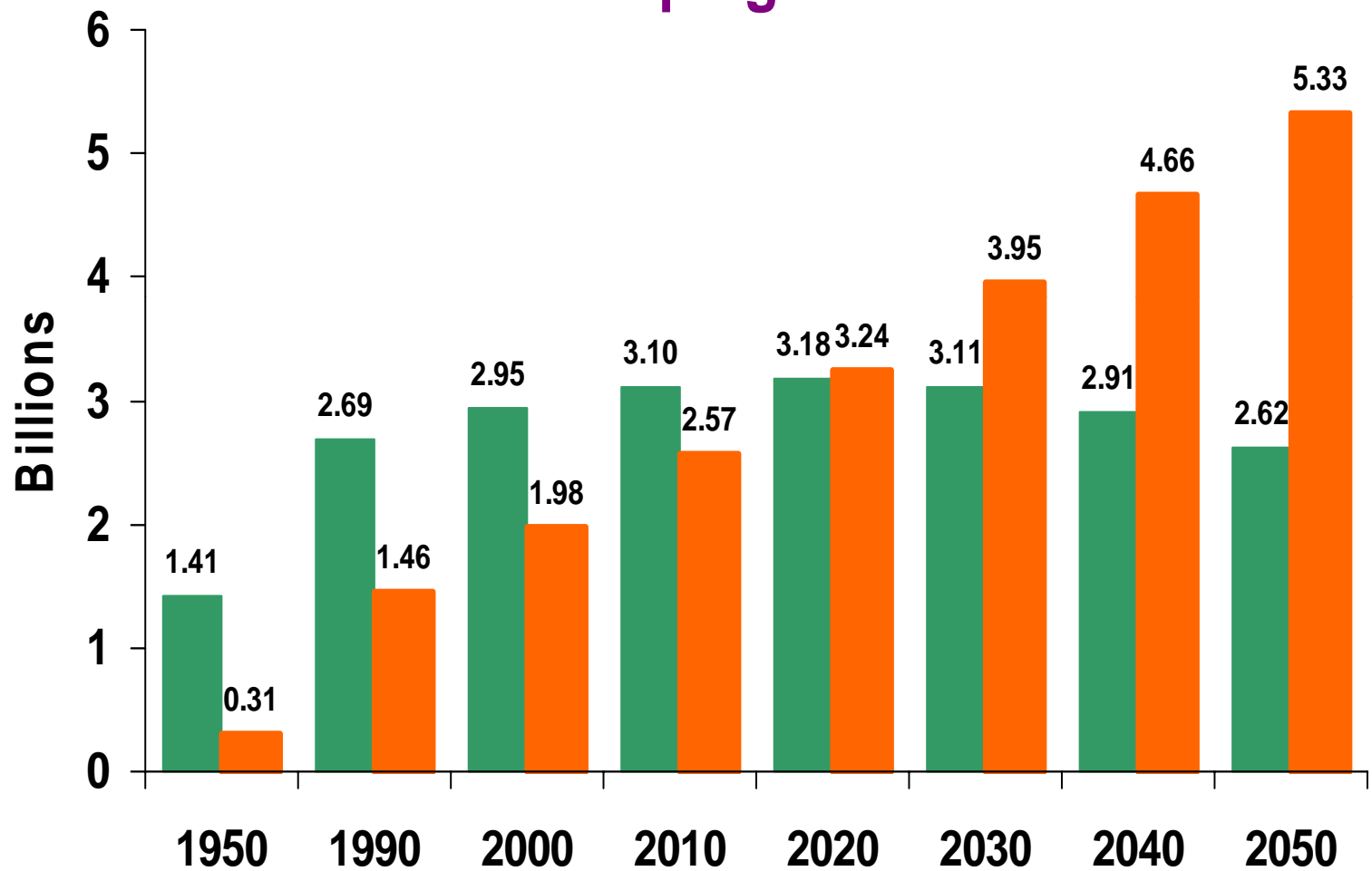


Rural-Urban Populations by Region, 1950-2050



Source: UN Population Division, World Population Prospects 2008 Revision

Urban and Rural Population Size of the Developing World

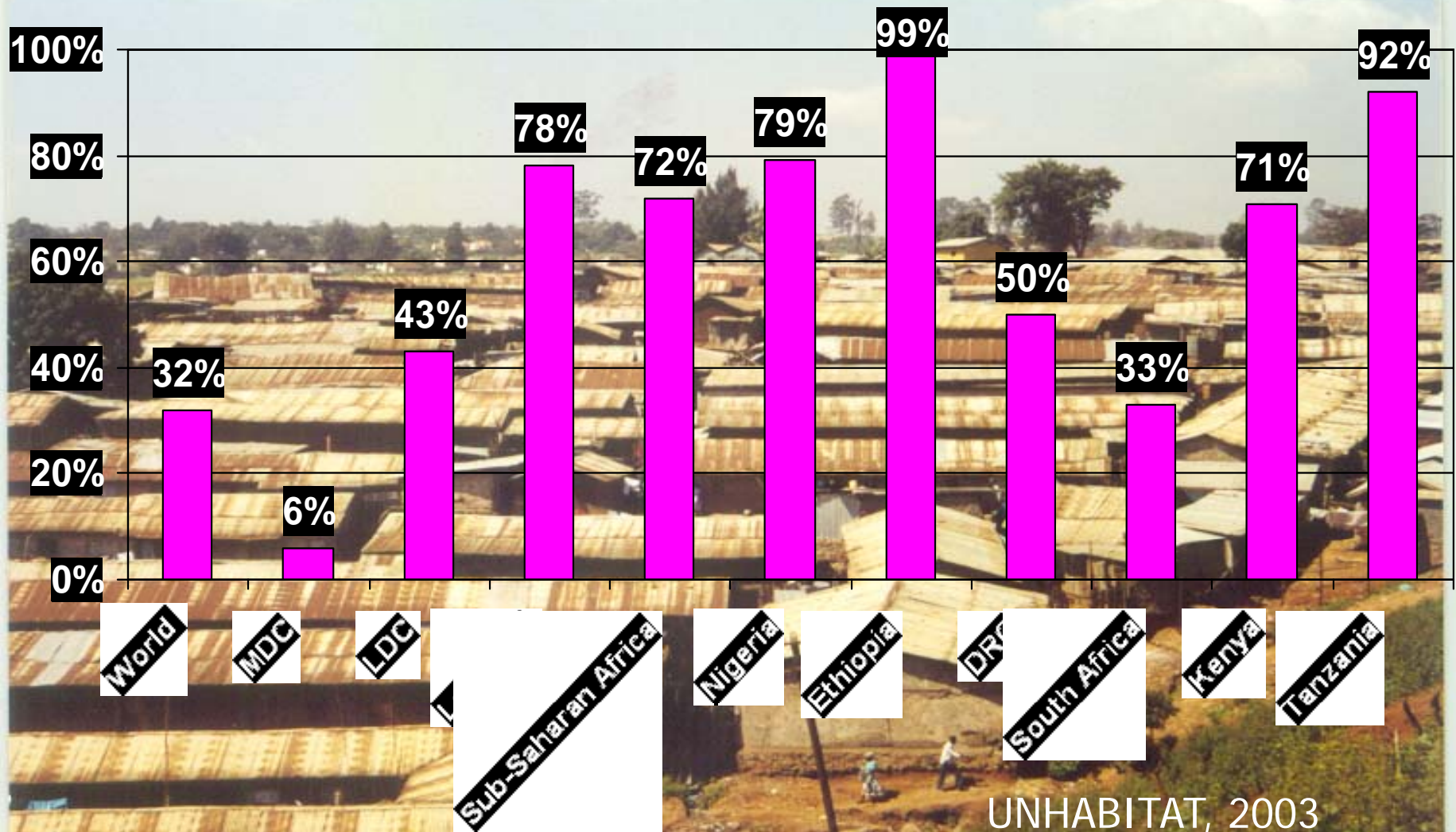


Source: United Nations 2008 Revision

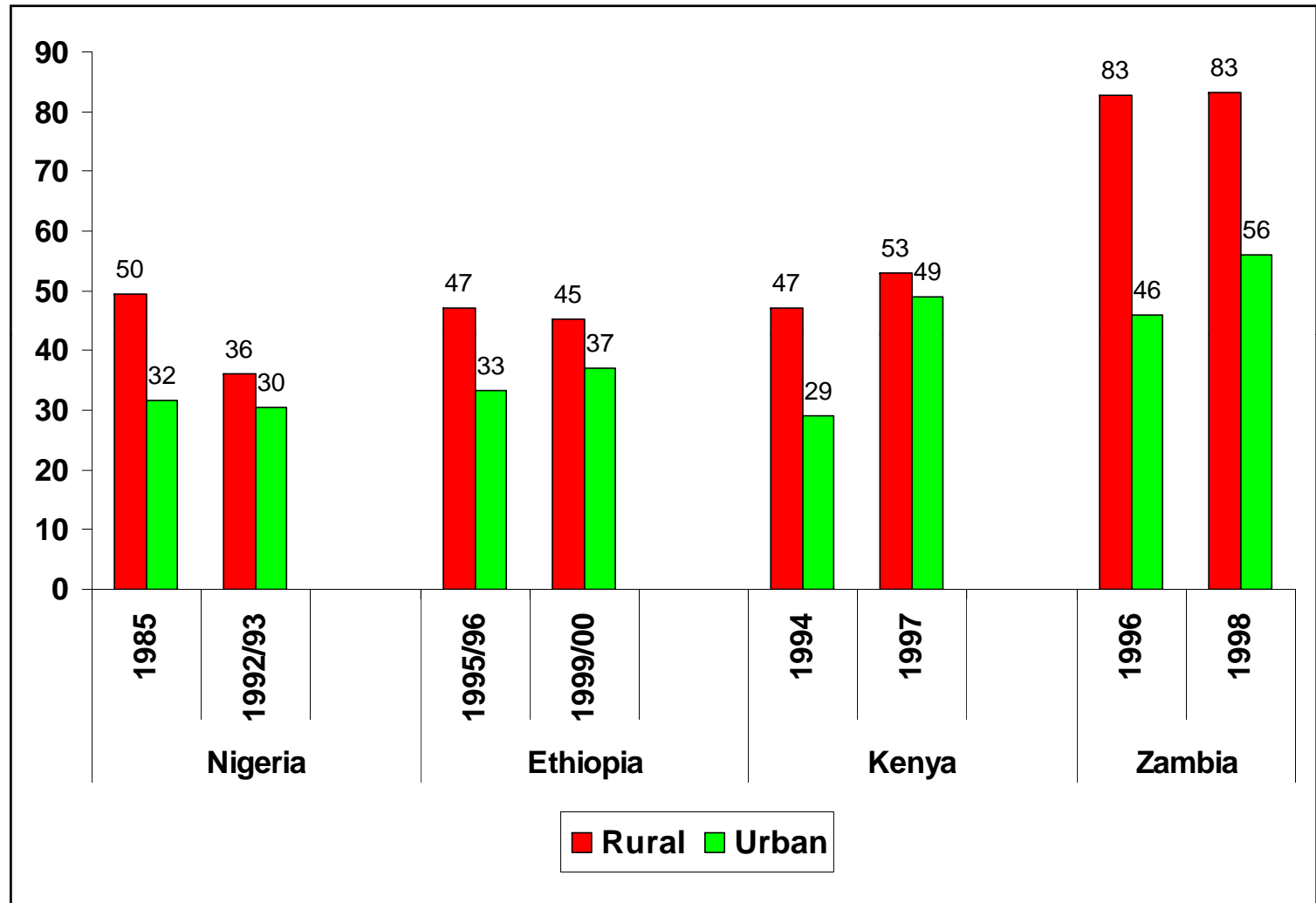
RURAL **URBAN**



The majority of urban residents in the Least Developed Countries live in slums, with poor social services and livelihood opportunities...

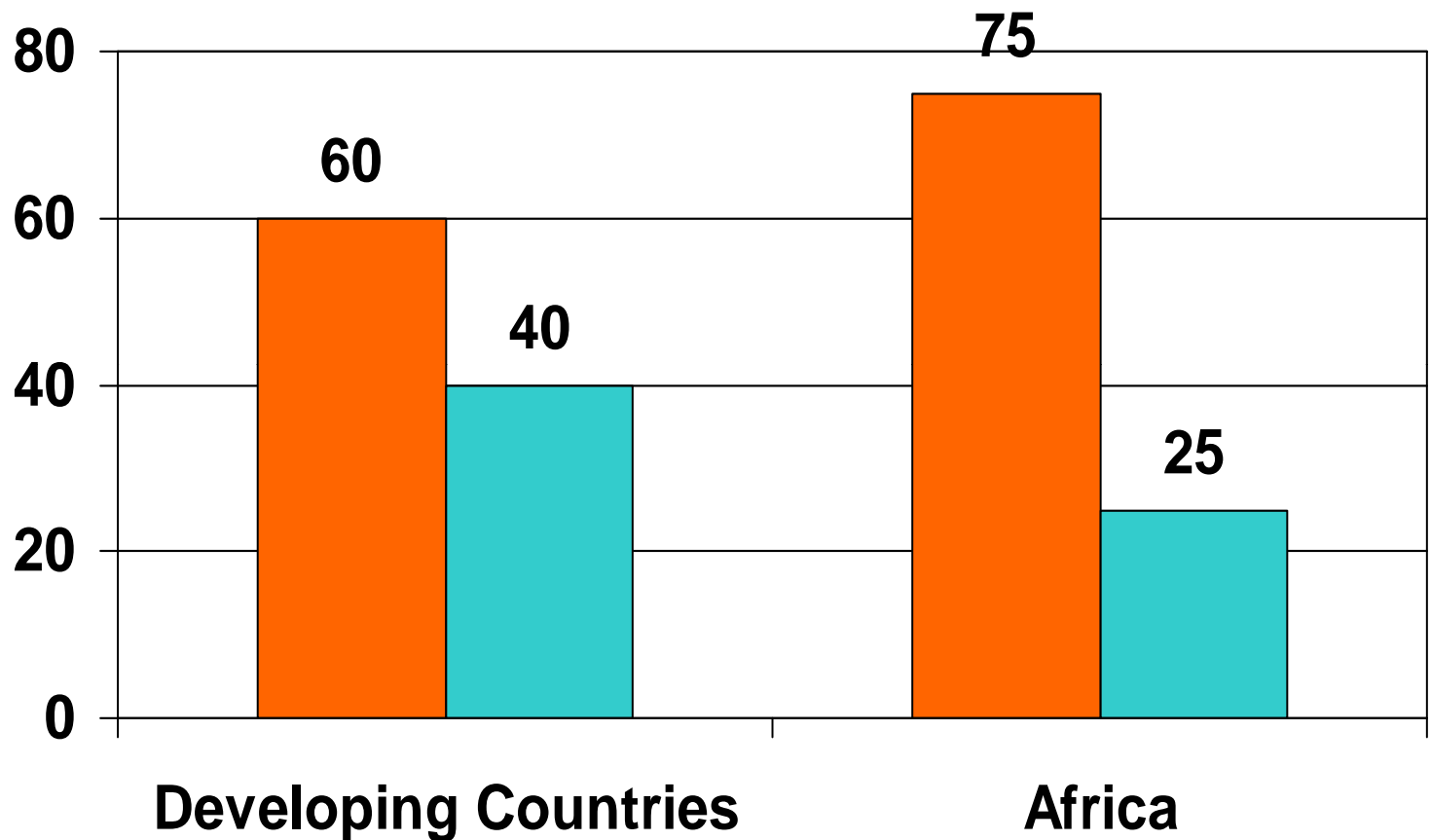


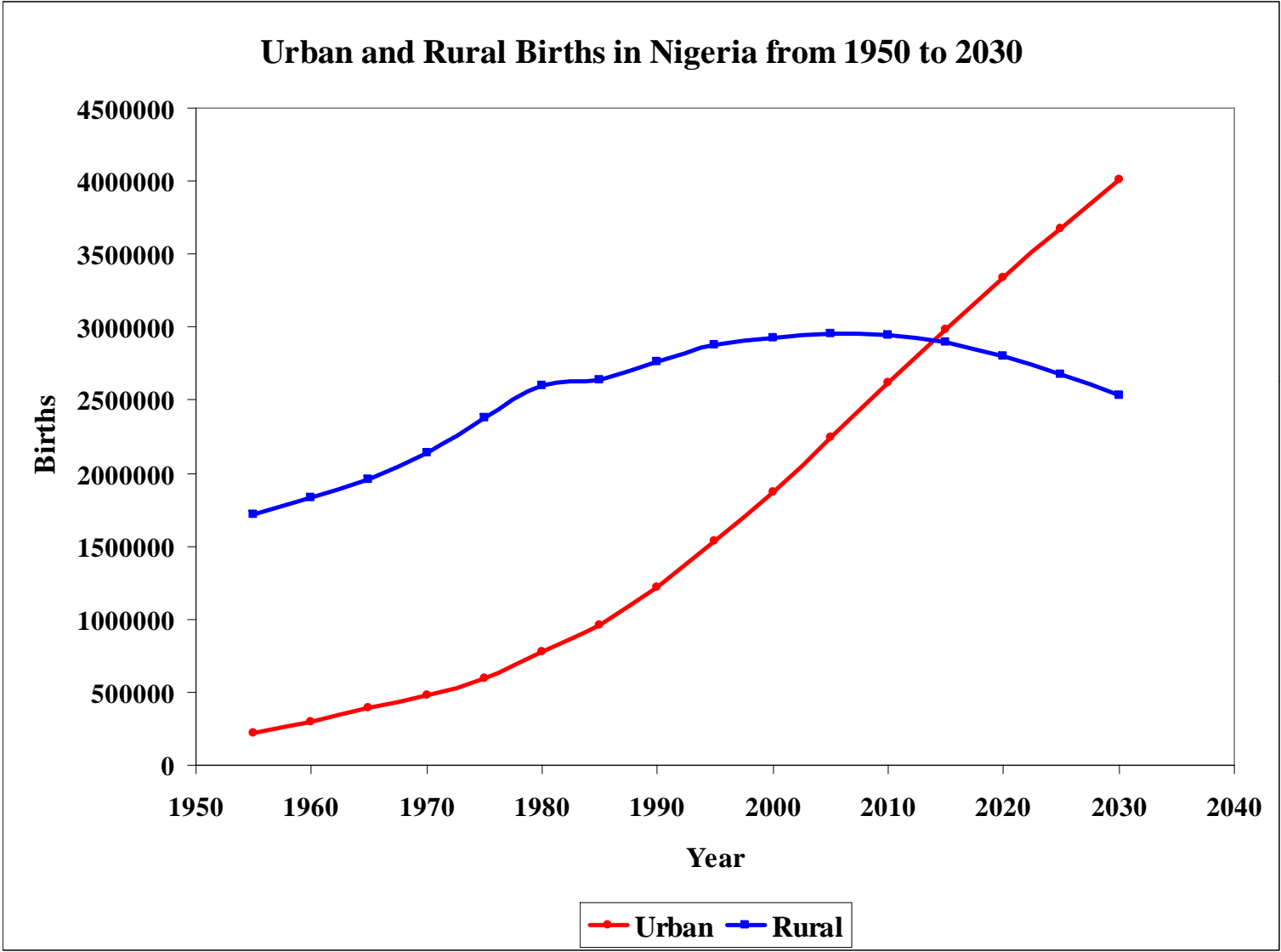
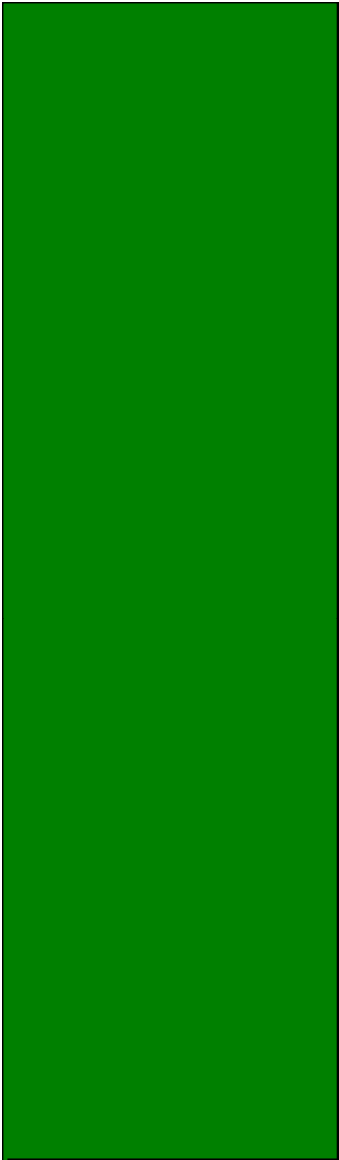
Trends in urban and rural poverty



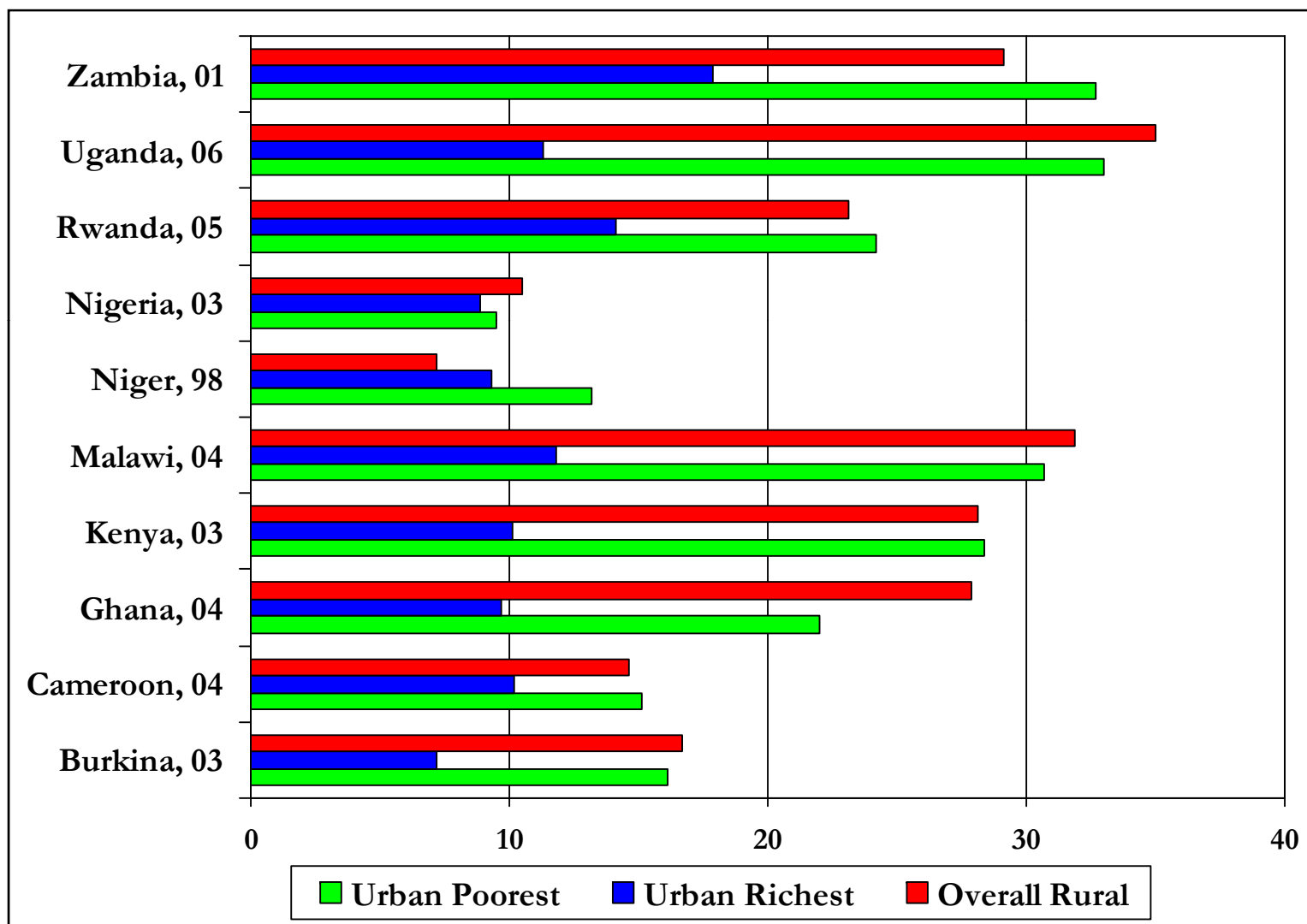
Source: The World Bank 2004: World Development Indicators

Sources of Urban Growth in Africa & the Developing World





Unwanted Fertility by Wealth and Residence in Selected African Countries



Source: Demographic & Health Survey



Some key questions

- Do the urban poor have worse contraceptive and RH outcomes?
 - Who is the appropriate comparison?
- Should we focus on the urban poor or on slum residents?
 - Are there unique slum effects?



Wealth index and amenities in large cities, Kenya, Senegal, Nigeria and Tanzania

	Zero Amenities	1-2 Amenities	All 3 Amenities	Total
Kenya: Poorest	60.1	39.9	0.0	100
Medium	0.0	50.3	49.7	100
Least poor	0.0	5.0	95.1	100
Total	17.5	30.5	52.0	100
Senegal: Poorest	9.8	83.6	6.7	100
Medium	0.0	87.5	12.5	100
Least poor	0.0	39.8	60.2	100
Total	3.3	70.8	26.0	100
Nigeria: Poorest	10.4	89.6	0.0	100
Medium	0.0	98.5	1.5	100
Least poor	0.0	71.9	28.2	100
Total	3.5	86.4	10.2	100
Tanzania: Poorest	98.8	1.3	0.0	100
Medium	18.3	81.7	0.0	100
Least poor	0.9	71.9	20.7	100
Total	43.6	50.8	5.6	100

Planning status of current pregnancy by wealth and amenities in large cities, Kenya DHS 2003

	Wanted	Later	Not at All
Amenities: None	29	57	14
1-2	53	40	7
All 3	61	27	13
Total	49	40	11
Wealth: Poorest	27	61	13
Medium	57	33	10
Least poor	70	20	10
Total	49	40	11

So what are the barriers to family planning among the urban poor, especially slum residents?

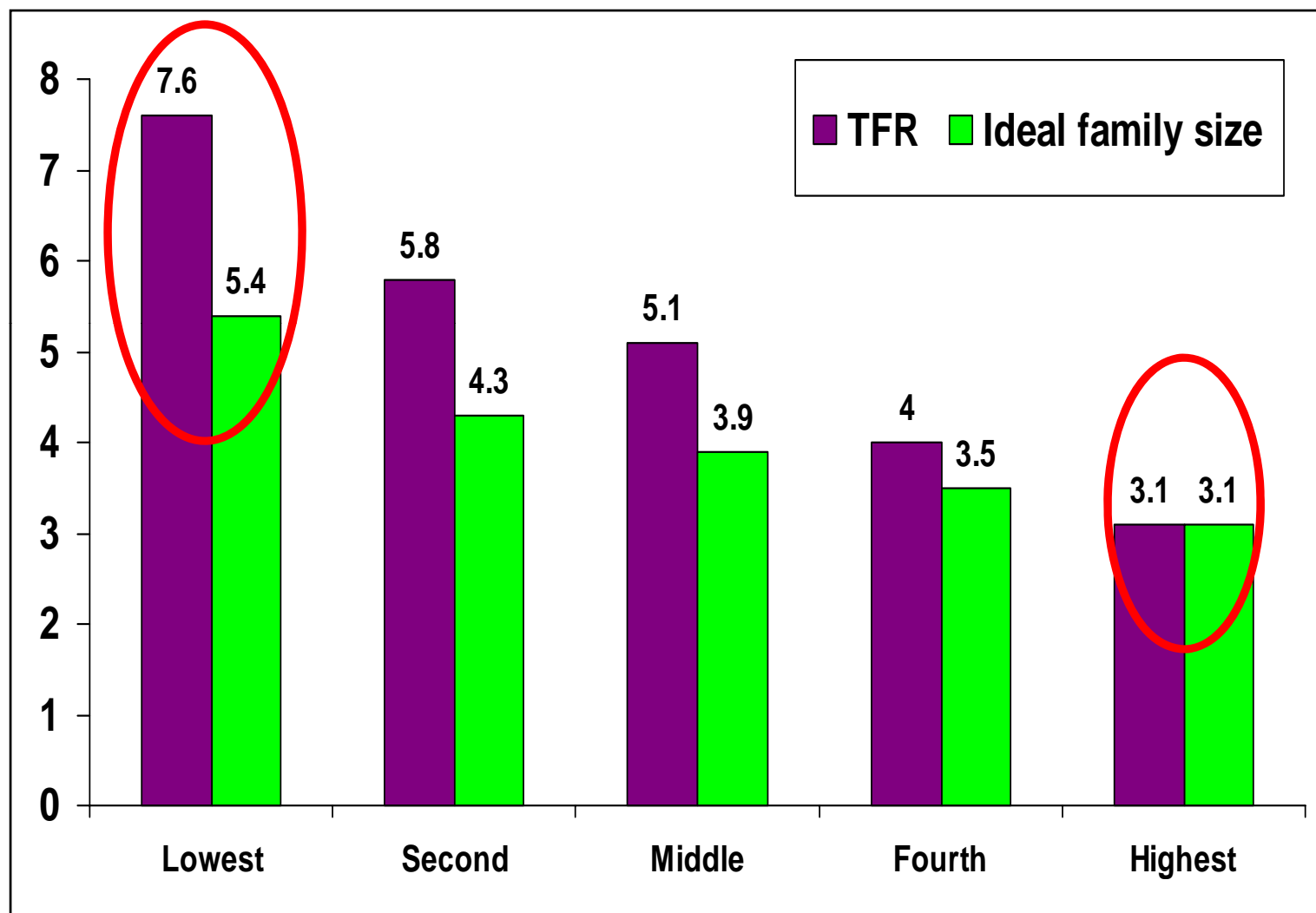


Physical/Geographic barriers

- The urban poor often live in informal settlements that are largely excluded from formal services – esp. FP
- Poor urban residents may have to travel outside their neighborhood for high quality and free or low cost family planning services
- Many urban poor people are ‘time poor’, reducing their ability to access services



Fertility & Ideal family size by wealth quintiles



Source: Kenya Demographic & Health Survey, 2003



Service barriers

- Government services in the vicinity of informal settlements are often in poorer state and lack key supplies than clinics in other parts of cities
- Private providers are poorly regulated and may not be well integrated into the public health sector.
- Private services may be of poor quality and lacking in basic facilities and supplies
- Private providers may charge high user fees for contraceptives



Access to Health Services in Slums



Financial barriers

- 97% of Africans cannot afford to pay the full cost of modern contraceptives
- The urban poor residents rely on cash for their basic needs, and given the high cost of living in urban areas, may not afford to pay the cost of contraceptives

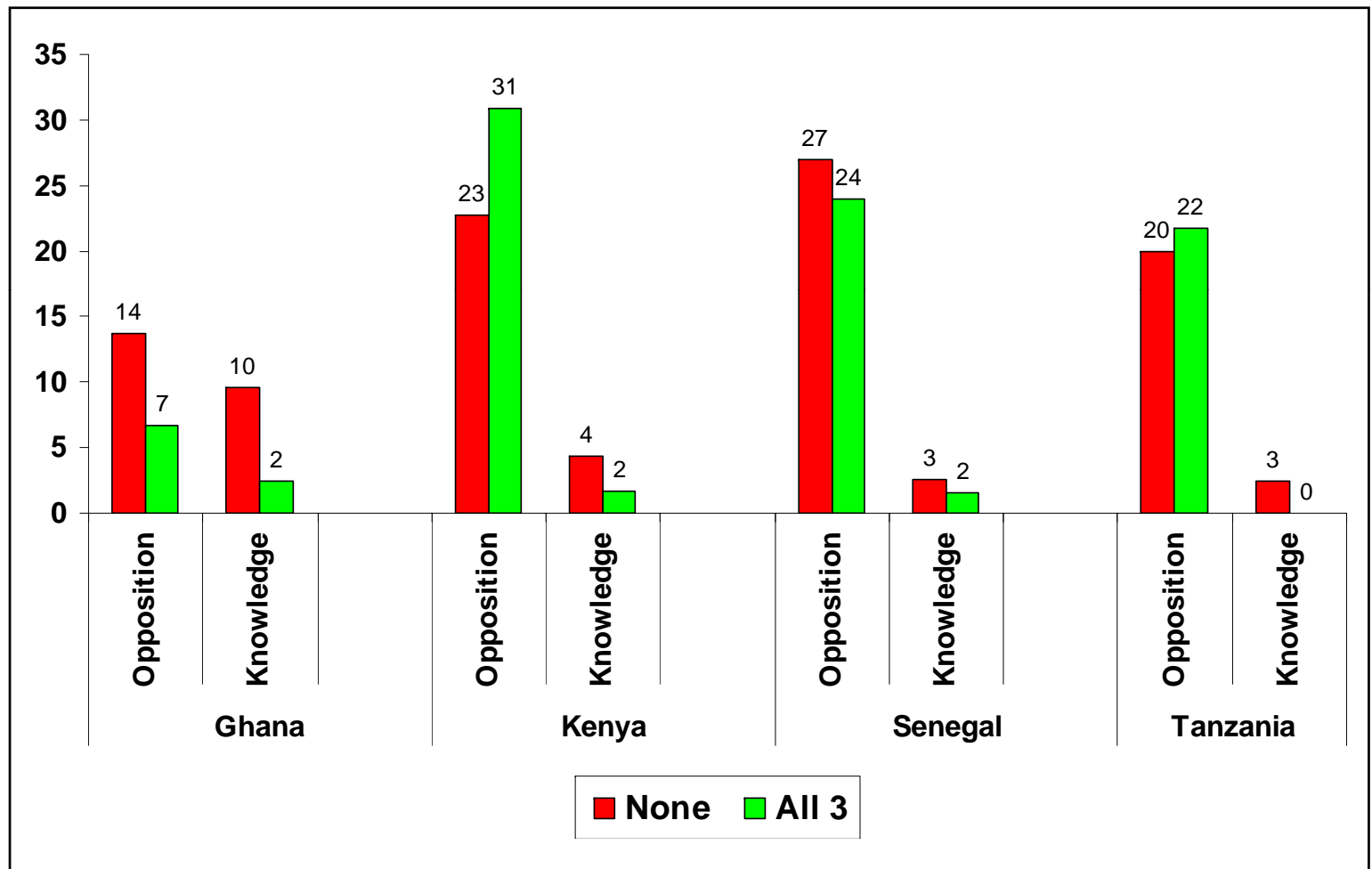


Knowledge and attitude barriers

- Misinformation and rumors can undermine use of contraceptives even in areas with high unmet need for family planning
- Reproductive health knowledge levels are as low in some poor city neighborhoods as in remote villages
- The localized networks of the urban poor may reduce their awareness about contraceptive methods and services



Opposition & Lack of Knowledge as Reasons for Non-use of FP



Social barriers

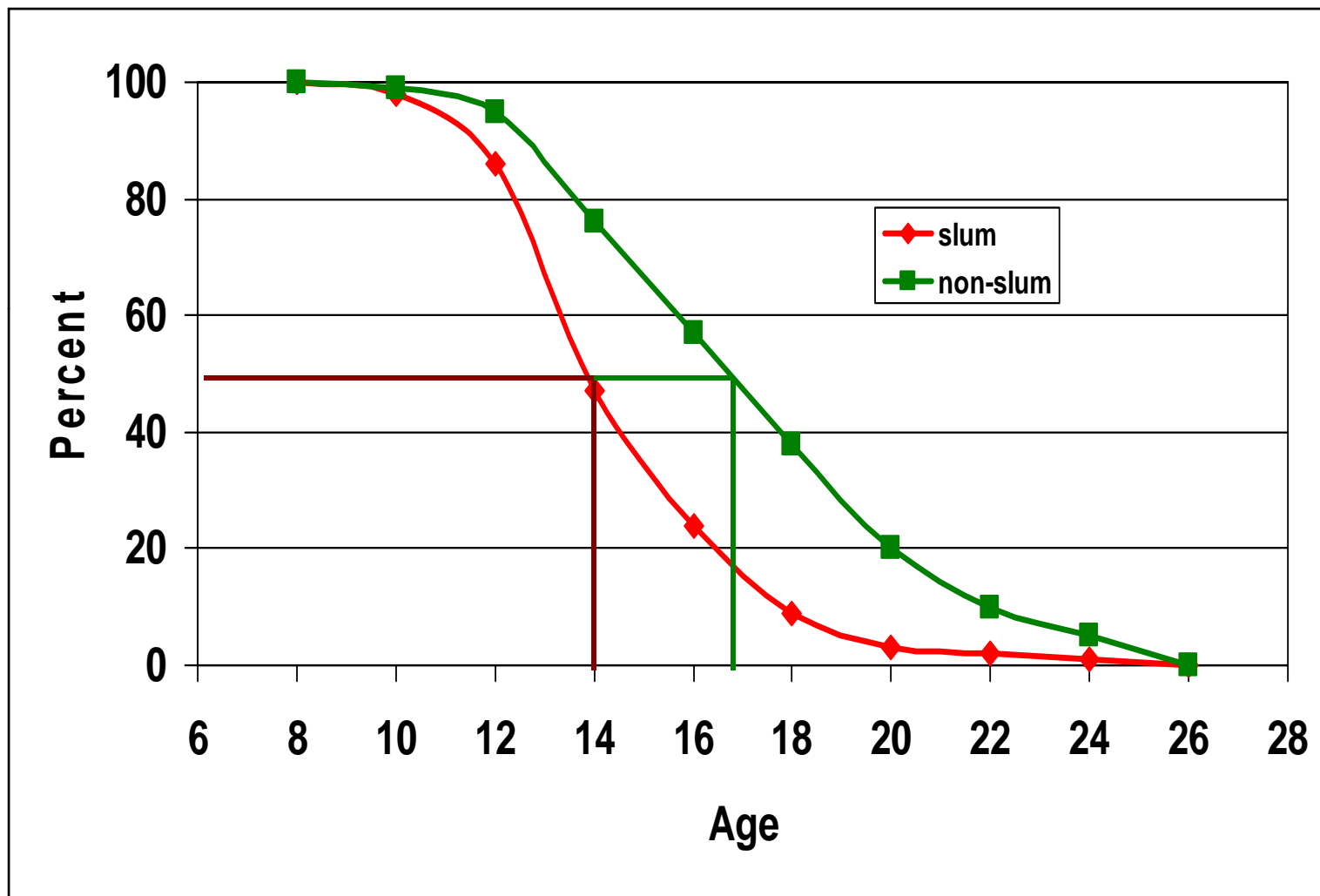
Slum environments are characterized by:

- High levels of substance use
- Early sex
- Transactional sex and age asymmetry of sexual partners
- High rates of sexual and gender-based violence

Each of these put women and adolescent girls at high risks of unplanned pregnancies



... slum dwellers start sexual activity at an earlier age than their counterparts in non-slum areas



KDHS, Nairobi City 2003 and NCSS 2000

Opportunities for overcoming the barriers

- Leverage existing private sector for PPP
 - Social franchising of services
 - Set standards and enhance regulation
- Exploit the numbers
 - Explore alternative financing options
 - Cheaper costs of delivering services
- Strengthen community-based family planning information and services
- Target urban poor men and young people as well as women
- Adopt a more comprehensive healthcare approach



Thank you

www.aphrc.org



Concluding Thoughts

- Majority of the urban population currently reside in urban informal settlements and experience high levels of unmet need for contraceptives
- Growing poverty & widening fertility gap means larger proportions of children are born in poverty
- The indicators for the urban poor will increasingly drive national indicators
- The urban poor experience several barriers to family planning but offer unique opportunities for significant impact



AT APHRC...

- We bring together ...
 - Multi-country (from 13 African countries)
 - Multi-disciplinary team
 - Demography, Biostatistics, Health Economics, Development Economics, Sociology, Anthropology, Sociolinguistics, Public Health, Epidemiology, Education Policy/Planning
 - 20 PhDs and 20 MA/MSc/MPH degree holders
 - 17 Administration and Support Staff
 - 50+ Field and Data Entry Staff
- To address these issues in pursuit of our mission of:

“Promoting the wellbeing of Africans through policy-relevant research on population and health”



Our Core Programs

RESEARCH

Generation and Synthesis of Scientific Knowledge

Urbanization
& Wellbeing

Population
& SRH

Health
Challenges
& Systems

Education



Policy Engagement

Publications
Meetings, briefings & workshops
Media engagement
Network creation & collaboration

Strengthening Res. Capacity

Fellowships
Training workshops
Support to universities

