

COMMUNITY SCORECARD FINDINGS

MIKINDANI DISPENSARY

HOW THE STUDY WAS CONDUCTED (METHODOLOGY)

The social accountability exercise targeted two health facilities: One from each sub-county - Jomvu and Changamwe.

In each facility, 5 focus group discussions were conducted targeting different groups (youth- male, youth- female, persons living with disability, men and women, and service providers).

In addition, five key informant interviews were conducted in each sub-county targeting health facility in-charges, private sector providers, county reproductive health coordinator, civil society organisation representative and a county official from the finance and economic planning department.

Thus, in the two sub-counties, 5 focus group discussions and 5 key informant interviews were conducted. The tools applied in data collection included a focus group discussion/community scorecard guide, key informant interview questionnaires, an input planning matrix, and an action planning template.

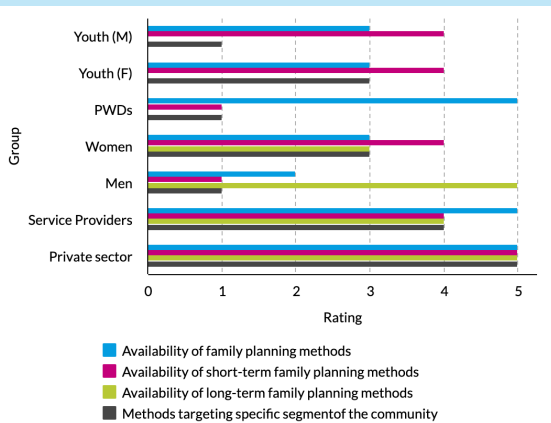
DATA ANALYSIS

A five-point rubric scale was used to analyse community scorecard data – where 1 represented “very poor/very dissatisfied”, 2 represented “poor/dissatisfied”, 3 represented “fairly satisfied”, 4 represented “good/satisfied”, and 5 represented “very good/very satisfied”.

The scale was communicated to and clarified with all focus group discussion respondents and the facilitators to ensure consistent and confident feedback from participants at focus group discussions.

FINDINGS

Availability of family planning methods



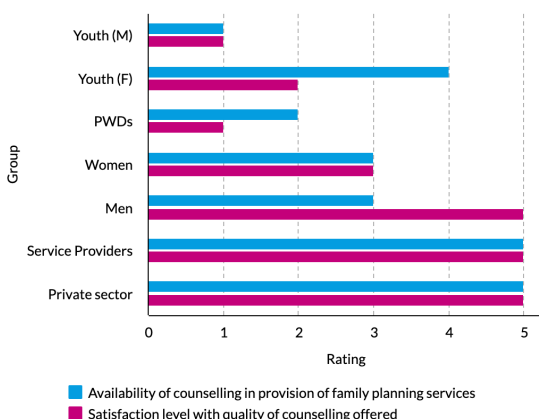
Overall availability of family planning methods in Mikindani dispensary was scored 3 (fairly satisfied) across all the respondent groups.

Youth (male), youth (female), People living with disabilities, and service providers rated the availability of long-term and short-term services as 3 (fairly satisfied). Men and women on the other hand rated the availability of short-term methods 2 (poor/dissatisfied).

All user groups noted that long-term family planning methods are not always available. The main concern among male youth was the unavailability of long-term methods while among female youth, the concern was inadequate access to family planning, leading to unplanned pregnancies.

In many instances, people living with disabilities reported being unable to access family planning services as Mikindani Dispensary has not made the requisite measures to accommodate people living with disabilities in service provision.

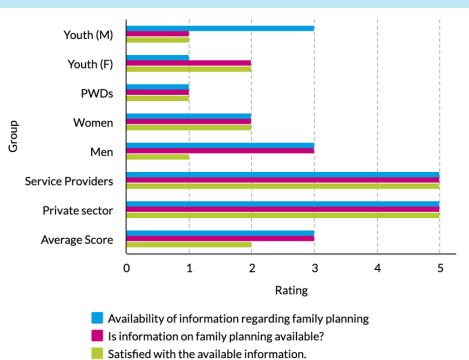
Provision of counselling when accessing family planning services



The average score for availability of counselling during the provision of family planning services was 3 (fairly satisfied).

However, people living with disabilities noted lack of counselling services within the facility whereas men and women noted that the counselling services are only provided during the initial visit but is missing in subsequent visits which was a result of workload among service provider making them prioritise new clients.

Availability of family planning information

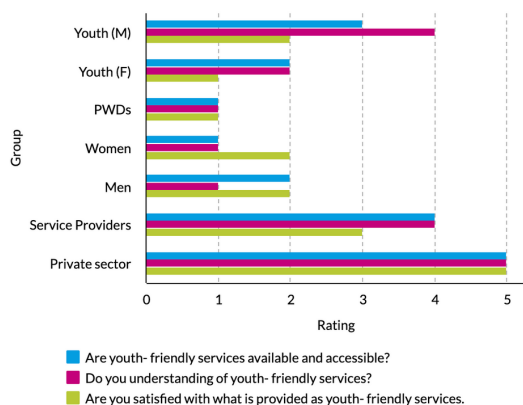


Family planning users rated information on family planning 1 (very poor/very dissatisfied) due to limited and/or unavailability of information regarding family planning and lack of privacy.

Persons living with disabilities rated the availability of information 1 (very poor/very dissatisfied) because of insufficient information given to users or lack of information materials on family planning at the facility. Inadequate PWD-focused information was also noted.

Service providers observed that information was available in form of posters, leaflets and booklets, though outdated and mostly for general knowledge.

Youth involvement in family planning

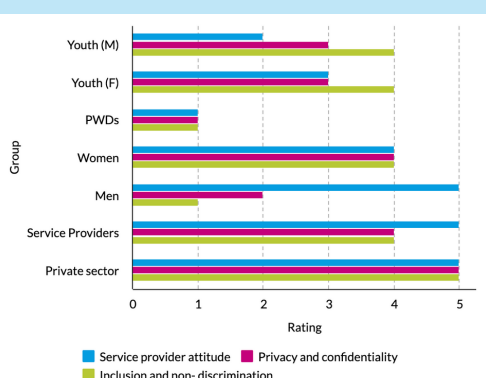


The average score of involvement of youth in family planning was 2 (poor/dissatisfied)

All groups apart from the youth reported a very low or complete lack of understanding of the scope of youth-friendly service provision.

According to feedback from all respondent groups, the facility hardly ever involves the youth in decision making or planning for family planning services, including youth-friendly services, or in any other healthcare matters.

Quality of family planning services



Service provider attitudes at Mikindani dispensary was rated 4 (good/satisfied) as they are open-minded.

However, according to female youth, the service providers have a negative attitude towards youth accessing family planning services.

People living with disabilities indicated that service provider attitudes are poor and dependent on demand by other hospital users and availability of the service providers although service provider attitudes are positive in the morning hours and very poor in the afternoon.

Privacy and confidentiality were rated 4 (good/satisfied). This is because the facility has private spaces for young people.

However, inclusion and non-discrimination were rated 1 (very poor/very dissatisfied) due to perceived limited consultations in decision-making at the facility and lack of equipment that ease access to people living with disabilities.

RECOMMENDATIONS

- Mombasa County Government needs to prioritise funding for the youth-friendly centre at Mikindani dispensary in the 2022/2023 annual development plan** to keep it running at optimum level throughout. This will accelerate the implementation of the commitment to improve youth-friendly sexual and reproductive health and family planning services as contained in the Mombasa County Government's Family Planning Costed Implementation Plan 2018 - 2022.
- Mombasa County Government needs to improve service delivery at Mikindani dispensary to people living with disabilities.** Accelerating implementation of commitments in the Mombasa County Family Planning Costed Implementation Plan 2018 - 2022 will improve access to the dispensary; reduce the stigma which results in poor access to family planning services; and to improve access to PWD friendly family planning information.
- Mombasa County Government needs to work towards eliminating legal, policy, and programmatic barriers that impede youth participation in decision making,** planning and implementation of development activities at all levels by 2030 in line with Kenya's commitment at the ICPD25 Nairobi summit.

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