Family Planning Funds Are Not Sufficient in:

KAMULI

Family Planning (FP) Budget Increased but Remains Small Share of Health Budget

68% of women wish to prevent pregnancy in Kamuli. 6.5 million 8.3 million KES in 2015/16 KES in 2016/17 KES in 2015/18

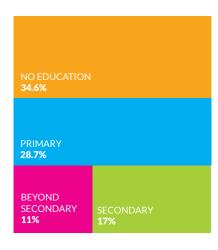
FP Commodity Stockouts Are a Challenge in Kamuli

PERCEINT OF HEALTH FACILITIES WITH STOCKOUT IN LAST 0 MONTHS				
IN	STOCK	OUT OF S	тоск	
COMBINED ORAL CONTRACEPTIVE PILLS		71		
IMPLANTS 14				
IUDS	43			
FEMALE CONDOMS		71		
MALE CONDOMS 14				
PROGESTIN-ONLY INJECTABLES	43			
COMBINED INJECTABLES	43			
PROGESTIN-ONLY CONTRACEPTIN	VE PILLS		1	00

Women face cultural and service delivery barriers

- Fear of side effects
- Opposition from their partners
- Cultural and religious disapproval
- Misconceptions and myths
- Inadequate health provider skills
- Long distance
- High service costs

Teenage pregnancy rates in Uganda, by education level



Median age at:

First Sex: 17
First Marriage: 19.5
First Birth: 20
First Contraceptive Use: 23

Providing adolescents with contraception can:

Help young women stay in school.

Support young women's economic development.

Promote healthier planned pregnancies and births.

District officials in Kamuli should

Allocate more funds for FP service provision and ensure a steady supply.

Ensure FP outreach services cover all community members.

Accelerate implementation of youth-friendly FP policies.

Family Planning Funds Are Not Sufficient in:



References

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FIGURES

FAMILY PLANNING BUDGET INCREASED BUT REMAIN SMALL SHARE OF HEALTH BUDGET DSW, 2017.

PERCENTAGE OF HEALTH FACILITIES WITH A STOCK-OUT IN THE LAST 6 MONTHS DSW, 2017.

TEENAGE PREGNANCY RATES IN UGANDA, BY EDUCATION LEVEL Uganda DHS, 2016.



