

The Sexual and Reproductive Health Concerns, Needs and Priorities of University Students in Nairobi County, Kenya

Joshua Ongwae, Grace Okongó, and Casper Masiga

ABSTRACT

Despite the efforts universities are putting in place to address the sexual and reproductive health (SRH) concerns and needs of their students, the rate at which students are engaging in casual unprotected sex is reportedly high. This has resulted in increased rates of unsafe abortions and unintended pregnancies among the student population. It is against this background that this thesis sought to establish the SRH concerns, needs and priorities of university students in Nairobi County in Kenya. The Social Economic Model guided the study in understanding the problem while the Andersen and Newman Framework of Health Services Utilization guided the study in identifying possible solutions to the challenges identified. The targeted population was students studying in universities with main campuses in Nairobi County. Stratified random sampling was used to select the four public and private universities (Kenyatta University, Multimedia University of Kenya, United States International University - Africa and KCA University) which were part of the study. The study was guided by cross-sectional and exploratory research designs. The target population was 192,193 students. Stratified random sampling was used to select the three hundred and seventy (370) students who completed the study questionnaires. Sixteen key informants were purposefully selected to participate in-depth interviews while four focus group discussions (FGDs) of either gender were carried out. The study established that university students are most concerned about getting infected with HIV/AIDS followed by getting pregnant or impregnating someone. The study revealed that what the students need the most is access to condoms, pills and contraceptives for pregnancy prevention and youth friendly services. The study also revealed that university students prioritize confidentiality, the cost of SRH services and being attended by friendly healthcare providers in this order.

Keywords: Sexual and Reproductive Health, SRH Concerns, SRH Needs, SRH Priorities, University Students, Young People.

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I. INTRODUCTION

The world now has the largest group of young people than ever before estimated at 16 per cent (1.2 billion) of the global population (UN, 2019). The youth population is expected to increase the most, estimated at 89% in Africa (UN, 2019). Among young people, especially in developing nations, there is a growing concern about Sexual and Reproductive Health (SRH) problems. International and regional level policy frameworks have reiterated the importance of prioritizing SRH issues. The International Conference on Population and Development was specific and encouraged prioritization of young people's SRHR needs (UNFPA, 2018). Twenty-five years after the ICPD, the Nairobi Summit on ICPD+25 pointed out that as much as progress has been made in prioritizing the sexual and reproductive health issues of young people there are gaps and inequities in access to SRH services (UNFPA, 2019). The gaps have led to unintended pregnancies and to an increase in sexually transmitted diseases especially among young people (WHO, 2020) and this must be addressed. For this reason, the need to increase funding and investments targeted at young people's sexual and reproductive health needs is of a priority (UNFPA, 2019).

Universities are home to many young people in the prime of their lives and at their peak years of sexual activity. Universities should take cue of the SRHR challenges faced by young people and increase financial allocations for SRH needs of their students. The allocation can be used for construction of youth friendly centers, provision of commodities in university-based health facilities and capacity building of human resources for health. The assumption that young people in institutions of higher learning are knowledgeable

enough and therefore, do not need sexual and reproductive health services as much as other groups of people, only leaves students in universities vulnerable to SRH challenges. Lack of informative and easy to read materials present a barrier in accessing SRH information. SRH information and programming is rapidly changing and for this reason, requires university students to be updated with recent materials with up-to-date information. The materials produced by the universities should include sites and locations for accessing and utilizing youth friendly services.

A study by Martins *et al.* (2020) found out that many students in the US did not have information on availability of SRH supplies in their locations. The study reported that a significant number (15%) of the students surveyed said they had ever experienced unexpected sex. Another study among the City University of New York (CUNY) students indicated that in 2018 an estimated 4.7% of the students became pregnant or fathered a child (CUNY, 2019). Female students were the most affected with 74% becoming pregnant compared to 26% male students who reportedly fathered children. Worryingly, the CUNY (2019) study posits that a significant percent (6%) of the students in CUNY university reported experiencing partner violence which was reported as an issue of concern by the students.

At a regional level, a study conducted by Yared, Sahile and Mekuria (2017) among Ambo University students in Ethiopia highlighted that the students are mostly concerned about the possibility of being HIV positive. Unwanted pregnancy and unsafe abortion have also been mentioned by Ambo University students as issues of a concern. Further, the study by Yared, Sahile and Mekuria (2017) reported that in terms of SRH problems among girls in Ambo university, 5% had ever obtained unwanted pregnancies while out of those, 2.5% aborted unwanted pregnancies. A different study among technical college students in Malawi revealed that college students are concerned about lack of access to FP education and SRH services and harmful cultural practices (UNESCO, 2016). A study undertaken among Makerere university students by RHU (2016) revealed that students are concerned about lecturers who force students to have sex with them in exchange of marks. Lack of youth friendly facilities has also been cited by students as a challenge in utilization of SRH services (RHU, 2016). This is exhibited by perceived lack of confidentiality, poor attitudes by human resources or health and health facilities that are operational only at regular hours.

In Kenya, a study by Akinyi (2009) established that young people in universities and colleges have a perception that health facilities lack confidentiality. Elsewhere, Manoti (2015) established that a majority (65.9%) of University of Nairobi undergraduate respondents undertaking Anthropology found SRH services expensive and not easily affordable hence a big barrier to their utilization. The same study by Manoti (2015) revealed that university students are increasingly getting concerned about date rapes which are rampant in the university. Other students have reportedly found challenges in accessing SRH services. Condom dispensers should be installed and stocked with condoms. This is especially the case because studies have shown that condoms are the most preferred means for HIV/AIDS protection among university students (UNESCO, 2016).

II. METHODOLOGY

This study used a cross sectional research design complemented by exploratory research design. The study was conducted in the main campuses of two public universities namely Kenyatta University and Multimedia University and two private universities, United States International University- Africa, KCA-University in Nairobi County in Kenya. The target population were students aged between 18-25 years studying in universities with main campuses in Nairobi County. The total study population was approximately 192,193 students. Stratified random sampling was used to select two universities from each stratum for the study. Four FGDs, one from each university of study were carried out. Purposive sampling was used to select five key informant interviews from each university who participated in the study. A formula published by the National Education Association for determining sample size was used to determine the sample size (Krejcie and Morgan, 1970). The obtained sample size of 384 was therefore used during the study of which 370 respondents correctly completed and returned the questionnaires which were consequently analyzed. The specific objective of the study was to establish the sexual and reproductive health concerns, needs and priorities of university students. Submit your manuscript electronically for review.

III. RESULTS AND DISCUSSION

To set context, the study posed several questions that sought an understanding of the sexual behaviour, attitudes and the SRH dynamics of university students. Thereafter, the SRH concerns, needs and priorities of university students were identified.

A. Understanding whether the Students have Steady Partners

The study investigated whether the students had steady partners in a bid to assess if there is a relationship

between partnerships and the number of sexual partners the students had.

The students with steady partners are those who identify as being in committed relationships with specific people while those who do not have steady partners are those without a serious or regular partner. The findings are presented in Fig. 1 below.

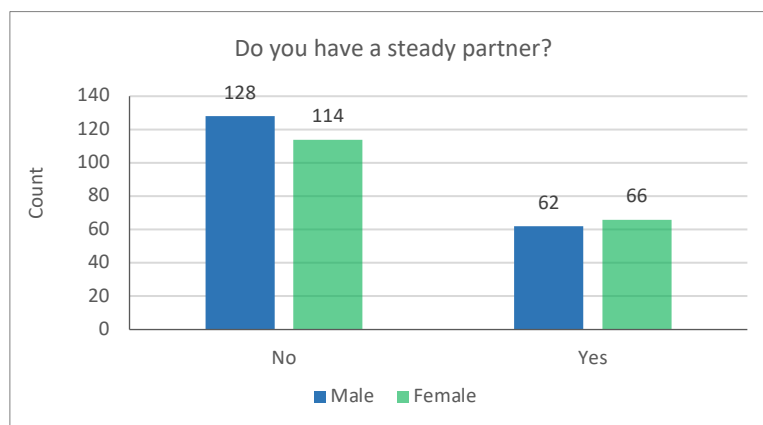


Fig. 1. Whether Students Have Steady Partners.

The findings presented in Fig. 1 above suggest that only 128 (34.5%) students split as 66 (17.8%) female and 62 (16.7%) male of the surveyed students had steady partners. Those who report as not having steady partners were 242 (65.4%), 128 (34.6%) male and 114 (30.8%) female.

The findings can be interpreted to mean that most students in universities are unattached with no steady partners while a smaller number of students are attached with a partner, they consider serious. In terms of gender, the findings imply that more female students compared to male students have steady partners. This could be the case because most African cultures are lenient on men with no steady partners and harsher and judgmental to women who do not have steady partners especially as they grow older.

B. Age of Sexual Debut

In line with the first study objective, sexual debut is an important indication on the SRH concerns and priorities of university students. Findings are presented in Table I below.

TABLE I: AGE AND SEXUAL DEBUT

		How old were you when you had sexual intercourse for the very first time					Total
		Never had sex	Below 10 years	Between 11-14 years	Between 15-19 years	Between 20-24 years	
Gender	Male	64 (17.3%)	16 (4.3%)	15 (4.7%)	74 (20%)	21 (5.9%)	190(51.4%)
	Female	80 (21.6%)	4 (1.1%)	3 (0.8%)	68 (18.4%)	25 (6.8%)	180(48.6%)
Total		144 (38.9%)	20 (5.4%)	18 (5.5%)	142 (38.4%)	46 (12.5%)	370 (100%)

The findings presented in Table I reveal that 142 (38.4%) of the respondents had sex for the first time at the age of 15-19-years, 46 (12.6%) at the age of 20-24 years, 20 (5.4%) below 10 years. Overall, 226 (61.1%) students reported to have ever had sexual intercourse. A significant number of respondents, 144 (38.9%) reported to have never had sex. The findings can be interpreted to mean that a majority of sexually active students begin engaging in sexual intercourse when they are either in high school or in first year in university, aged between 15 and 19 years. Therefore, this is the time interventions to address their sexual and reproductive health should be put in place.

TABLE II: NUMBER OF SEXUAL PARTNERS IN THE LAST 12 MONTHS

		How many people have you had sexual intercourse with in the last 12 months						Total
		One	Two	Three	Four	Five	Other	
Gender	Male	31 (20.13%)	17 (11.04%)	13 (8.44%)	11 (7.14%)	9 (5.84%)	4 (2.60%)	85
	Female	36 (23.38%)	11 (7.14%)	12 (7.79%)	7 (4.55%)	2 (1.30%)	1 (0.65%)	69
Total		67 (43.51%)	28 (18.18%)	25 (16.23%)	18 (11.69%)	11 (7.14%)	5 (3.25%)	154

From the surveyed students, about 56.5% of the sexually active students had sexual intercourse with more than one sexual partner compared to 43.5% who had sexual intercourse with one sexual partner over the last one year preceding the study. The findings indicate that cumulatively among the sexually active students, more men, 54 (70%) than female, 33 (43%) had sex with more than two sexual partners over the last year. The findings can be interpreted to mean that most of the sexually active students are engaging in casual sex with multiple partners. The findings imply that more sexually active female students than male have had sex with only one sexual partner over the past one year preceding the study. In addition, in all FGDs, the participants reaffirmed that most sexually active students have multiple sexual partners.

For example, Peter*, one of the FGD participants said:

“Most students who are sexually active are double-double. She is yours when you are with her but when you leave, she becomes someone else’s. Infact, I know a guy I am sharing my girlfriend with. We know the tricks, but we only care about the time we are with the girlfriends,” (11th March 2021)

An analysis between sexual activity and use of contraceptives was done to establish the correlation between use of contraceptives and engaging in sexual intercourse. The results are presented in Table III below.

TABLE III: CORRELATIONS BETWEEN USE OF CONTRACEPTION AND ENGAGING IN SEXUAL INTERCOURSE

		In the las 12 months, have you had sexual intercourse	Do you use contraceptive when you had sex with your partner
In the las 12 months, have you had sexual intercourse	Pearson Correlation	1	0.370**
	Sig. (2-tailed)	-	0.000
	N	370	370
Do you use contraceptive when you had sex with your partner	Pearson Correlation	0.370**	1
	Sig. (2-tailed)	0.000	-
	N	370	370

** . Correlation is significant at the 0.01 level (2-tailed).

The results presented in Table III above, indicate a moderate relationship between sexual activity and use of contraceptives, which is statistically significant ($r=0.370$, $p=0.000$). That is, there’s a correlation between sexual activity and use of contraceptives. The findings are corroborated by other researchers. A study among university students in Ethiopia revealed that out of the students who had sexual experience, more than half, 53.3% reported they had multiple sexual partners (Adinew, Worku and Mengesha, 2013). The findings were also corroborated by a study by the EAC (2010) that revealed that only about 52.2% of university students mentioned having had only one sexual partner within the last year preceding their study. The findings are, however, slightly different from two studies carried out by Mehra (2013) and Wanjau (2015) that found out a lesser number of sexually active students, 33.6% and about 38% respectively had multiple sexual partners. These findings provide a basis for universities to provide students with contraceptives with an emphasis on condom use as it offers dual protection against STIs including HIV/AIDS and pregnancy.

C. Use of Contraception During Sexual Intercourse

As presented in Table IV, 73 (19.7%) students use sometimes with 99 (26.8%) students using contraceptives all the time. A sizeable number of university students, 59 (16%) do not use contraceptives when they have sex with their partners. 139 (37.6%) students reported to have never used contraceptives because they had never had sex before. The findings can be interpreted to imply that a significant number of students do not use contraceptives because of myths and misconceptions on use of contraceptives. Some students believe that contraceptives, especially hormonal contraceptives have side effects and can result in women not giving birth when they are ready.

TABLE IV: USE OF CONTRACEPTIVES WHEN HAVING SEX WITH A PARTNER

		Do you use contraceptive when you had sex with your partner?				Total
		No	I had never had sex	Sometimes	Yes, All the time	
Gender	Male	34 (9.19%)	62 (16.76%)	40 (10.81%)	54 (14.59%)	190 (51.35%)
	Female	25 (6.74%)	77 (20.81%)	33 (8.92%)	45 (12.16%)	180 (48.65%)
Total		59 (15.93%)	139 (37.57%)	73 (19.73%)	99 (26.75%)	370 (100%)

A Chi test was done to establish the relationship between gender and use of contraceptives. The findings are presented in Table V below.

TABLE V: CHI-SQUARE TEST: RELATIONSHIP BETWEEN GENDER AND USE OF CONTRACEPTIVES

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	4.214 ^a	3	0.239
Likelihood Ratio	4.221	3	0.239
Linear-by-Linear Association	0.259	1	0.611
N of Valid Cases	370	-	-

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 28.70.

As presented in Table V above, there was no significant association (p -value= 0.239) between gender and use of contraceptives with partners.

The findings are corroborated by a study by Nthenya (2018) that found out a higher percent (63%) of Kisii University students use contraceptives.

The findings are also corroborated by a study among young people in Ethiopia that concluded that the reasons why students used services is because of their history of engaging in sexual intercourse and having

heard of where the SRH services are being offered (Tilahun *et al.*, 2021). Such carefree attitudes may discourage condom use and put students at risk of unplanned pregnancies and STI and HIV/AIDS infection.

D. Attitudes of University Students Towards Sexual and Reproductive Health

The study found out that a significant number of students, 82 (22.2%) said that a girl or boy who is not married should not use contraceptives. Others, 68 (18.4%) said they get ashamed while seeking contraceptives. Female students were more positive that young people who are sexually active should use contraception compared to male students at 10.5% (39) versus 7.8% (29) of male students. There are those, 58 (15.7%) who said it is immoral to use contraceptives, with more male than female saying it is immoral to use contraceptives 34 (9.2%) versus 24 (6.5%) respectively. Only 41 (11.1%) responded that contraceptive use is good and should be promoted. A significant number, 68 (14.3%) said that young people should be given information on contraceptives. In general, there were more students who exhibited negative attitudes towards contraceptive use compared to the student respondents with positive attitudes.

Negative attitudes towards contraception can be attributed to the socialization of the students and their cultural and religious believes, affiliations and upbringing which depict sex as wrong and contraceptive use or discussions as bad. Female respondents were positive that sexually active students should be given contraceptives most probably because they shoulder the biggest burden of the negative implications of premarital sex including getting pregnant which can lead to dropping out of school or postponing schooling.

TABLE VI: CORRELATION BETWEEN SERVICE UTILIZATION AND ATTITUDES TOWARDS CONTRACEPTION

		Which services did you utilize from the facility	What is your attitudes towards contraception
Which services did you utilize from the facility	Pearson Correlation	1	0.015
	Sig. (2-tailed)	-	0.774
	N	370	370
What is your attitudes towards contraception	Pearson Correlation	0.015	1
	Sig. (2-tailed)	0.774	-
	N	370	370

A correlation between contraceptive use and attitude was done to establish the relationship. The results are presented in Table VI above. The results indicate there is no correlation between service utilization and attitudes towards contraception ($r=0.015$, $p=0.774$). This can be interpreted to mean that the attitude of the students does not influence whether they will use contraceptives or not. Therefore, despite of the attitudes, when students have a need for contraceptives they are likely to use them.

The literature review conducted produced results that agree with these findings that there are more negative compared to positive attitudes among university students in contraceptive use. Notably, Adinew, Worku and Mengesha (2013) established that 56.7% of the university students investigated agreed with the statement that unmarried couples have no right to use contraceptives because contraceptives promote immorality. The findings differ with those of a study among female university students in Uganda that revealed that only 20.1% of the students interviewed thought it was wrong to use contraceptives with a big majority (93%) saying that contraceptive use is good and beneficial (Nsubuga *et al.*, 2016). Nsubuga *et al.* The findings indicate that the students’ attitudes do not influence whether they will use contraceptives or not. The finding show that students will use contraceptives when they have a need for them.

E. Sexual and Reproductive Health Concerns of University Students

The study sought to identify the sexual and reproductive health issues or concerns that worry the students most.

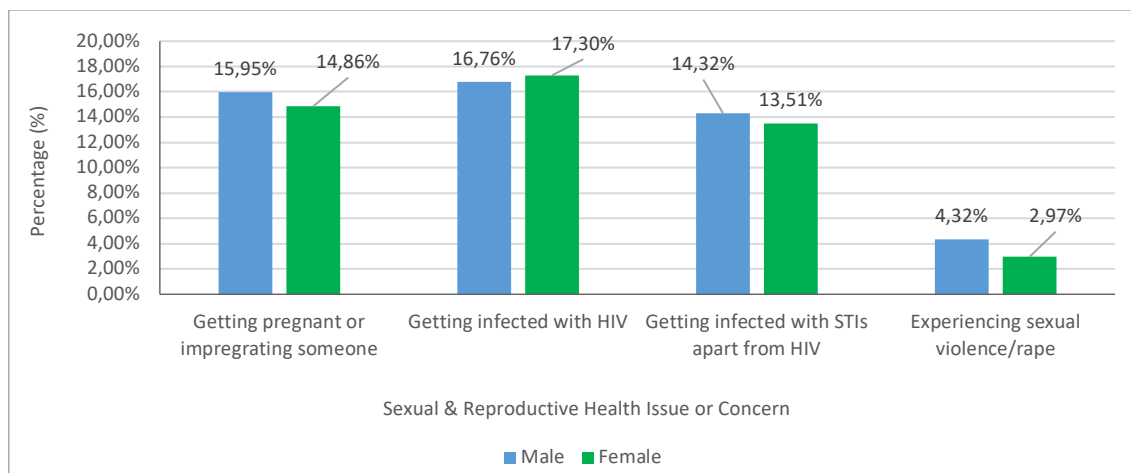


Fig. 2. Sexual and Reproductive Health Issue or Concern Worrying the Students the Most.

As presented in Fig. 2 above, most students, 126 (34%) are most concerned and worried about getting infected with HIV. This was closely followed by 114 (30.8%) who are most concerned about either impregnating or getting pregnant. Getting infected with STIs apart from HIV was ranked third as the issue of concern by 103 (27.8%). Experiencing sexual violence or rape was the least rated as an issue of concern by 27 (6.7%). The findings imply that both male and female students are most concerned about HIV/AIDS infection followed by getting pregnant or impregnating someone. This can be interpreted to mean that students fear HIV/AIDS because it has no cure and is highly stigmatized with lifelong implications. Getting pregnant is the second issue of concern because it can lead to discontinuation or postponement of studies besides being costly for a student to take care of a child. Male respondents are most concerned about the issue of sexual violence and rape because most cultures are not lenient on men who have the courage of reporting having undergone the vice and when one does so, it is accompanied by stigma. Besides, the fact that men can be raped by other men through anal rape makes the thought of rape for men dreadful.

F. The Sexual and Reproductive Health Needs of University Students

In line with the first study objective, the study investigated the sexual and reproductive health needs of university students and presented results in Fig. 3 below.

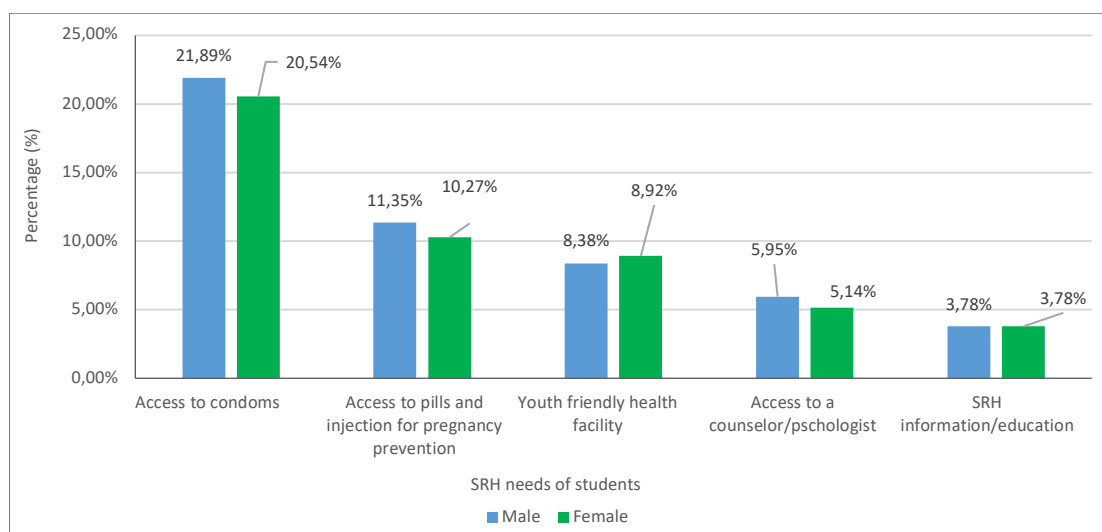


Fig. 3. Sexual and Reproductive Health Services Needed Most.

The results presented in Fig. 3 above reveal that 157 (42.4%) of the surveyed students need access to condoms, 80 (21.7%) students need access to pills and injections for pregnancy prevention, 64 (17.3%) students need youth friendly health facilities, 41 (11.1%) students need access to a counsellor/psychologist. Only 28 (7.6%) students reported to have a need for sexual and reproductive health information. There was no significant difference in the needs of male and female students. The findings indicate that condoms are the most popular contraceptives among young people in university.

The findings are corroborated by FGD participants. For example, Peris* said:

“students need to be provided with condoms but this should come with awareness raising on SRH and how to use the condoms.” (Female FGD participant KU, 3rd March, 2021).

G. The Sexual and Reproductive Health Priorities of University Students

The study sought to inquire the SRH priorities of the students. The priorities that were ranked highest to lowest in order were: confidentiality, mean = 4.49 (289), friendly healthcare providers, mean=4.31(249), the cost of services, mean= 4.06 (213), a wide array of services offered at the same place, mean=3.96(198), the ambience of health facility, mean= 3.95 (141), time taken to receive services, mean= 3.94 (192), location of the facility, mean= 3.63(141), being served by health personnel of my gender, mean= 3.59 (152), being attended by young health practitioners, mean= 3.40 (133).

The findings imply that university student prioritize confidentially, friendly healthcare providers and affordable cost of SRH services as most important. Universities should endeavor to assure students of confidentiality, train healthcare providers on provision of youth friendly services and subsidize the cost of SRH services to increase uptake of SRH services by the students.

IV. CONCLUSION

The study concluded that most students, are most concerned and worried about getting infected with HIV followed by either impregnating or getting pregnant. The third issue of concern for most students is getting infected with STIs apart from HIV. Most students need access to condoms, access to pills and injections for pregnancy prevention, and youth friendly health facilities. Most students prioritize confidentiality, friendly healthcare providers, affordable cost of SRH services and having a wide array of services offered at the same place.

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CONFLICT OF INTEREST

The Authors declare that they do not have any conflict of interest with respect to the research, authorship, or publication of this article.

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