

# FAITH AND FAMILIES FOR A HEALTHIER KENYA

PRESENTATION GUIDE



AN **ENGAGE** PRESENTATION

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## ACKNOWLEDGEMENTS

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# Presentation Guide

FAITH AND FAMILIES  
FOR A  
HEALTHIER KENYA



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## Supplemental Materials

These supplemental materials are designed to help users make the most of Faith and Families for a Healthier Kenya in conjunction with the user guide for all PRB ENGAGE presentations. After reviewing these supplemental materials, you will know how to:

- Identify opportunities to use this ENGAGE presentation with various audiences.
- Foster dialogue with audiences about key messages in the presentation.
- Respond to frequently asked questions about the presentation.

## Presentation Goals

The goal of Faith and Families for a Healthier Kenya is to align reproductive health and family planning issues with religious frameworks and beliefs. To achieve this goal, the presentation uses music, videos, and animation to deliver positive, compelling, evidence-based messages.

The Faith and Families for a Healthier Kenya presentation will be used as a tool by Kenya's family planning champions and experts to promote advocacy and dialogue about family planning among religious communities at the national, county, and community levels. Examples of target policy audiences include government officials and policymakers, religious leaders, donors, health and education sector leaders, civic and community leaders, and journalists.

Specific objectives of the presentation are to:

- Explain how reproductive health and family planning lays the groundwork to strengthen families, improve the health of mothers and children, and achieve national development goals, including Kenya's Vision 2030.
- Learn from success stories in other countries related to the involvement of religious leaders in promoting reproductive health and family planning.
- Show that religious leaders have a role and responsibility to disseminate accurate information about reproductive health and family planning that reinforces healthy behavior and complements religious values and beliefs.
- Foster discussion among audience members about the need for increased involvement of religious leaders and faith communities in family planning and reproductive health.

## Opportunities to Give the Presentation

This ENGAGE presentation and supporting materials are tools for professionals at all levels—in academic, policy, and community settings. The target audiences for this presentation are:

- **Primary:** Members of Parliament and government officials at all levels who are in a position to allocate resources for investments in family planning that engage religious leaders.
- **Secondary:** All of those who influence high-level policymakers, health and education sector leaders, religious and civic leaders, civil society organizations, opinion leaders, champions, and journalists.

## **Using The Presentation With Different Audiences**

The ENGAGE presentation is designed to be used in a variety of settings. The presentation can be delivered at religious gatherings, events, advocacy conferences, or meetings; used to enhance trainings and course curriculums; and delivered at press briefings for the media.

Some ideas to reach different audiences with the presentation are listed below.

### **Government Officials and Policymakers**

The ENGAGE presentation can be delivered at advocacy conferences, events, and committee meetings at the national and county levels to:

- Educate government officials and policymakers about the way that reproductive health and family planning issues are aligned with religious frameworks and beliefs.
- Inform government officials and policymakers about the value of involving religious leaders in promoting reproductive health and family planning in order to achieve shared goals of improved health and well-being.
- Encourage government officials and policymakers to increase support and leadership for family planning, including allocating family planning resources for religious communities.

### **Religious Leaders**

The ENGAGE presentation can be delivered at forums and trainings for religious leaders, as a tool to:

- Sensitize religious leaders about evidence-based benefits of reproductive health and family planning.
- Validate the role of religious leaders and their involvement in reproductive health and family planning sensitization and programs.
- Open dialogue on reproductive health and family planning among religious communities.

### **Health and Education Sector Leaders**

The ENGAGE presentation can be used to enhance trainings or course curriculums with messages that:

- Educate health sector leaders about the importance of providing family planning services that are sensitive to diverse religious beliefs.
- Ensure that education sector leaders, including teachers, are providing family planning information in schools that is age and faith appropriate.

### **Leaders at All Levels: Civic Leaders, Elders, Parents, and Young People**

Community events or forums can be enhanced by the ENGAGE presentation because it will:

- Educate leaders about how the benefits of family planning are aligned with religious values, and the importance of relaying accurate information about family planning to faith communities.

### **Journalists**

Inviting journalists to events where the ENGAGE presentation will be shown, or delivering the ENGAGE presentation at press briefings will help journalists report more accurately and:

- Educate the news media about the opportunity for religious leaders to be advocates for family planning and reproductive health in order to improve community health and well-being, manage rapid population growth, and achieve development goals.

## **ADDITIONAL CONSIDERATIONS**

You can make this presentation more interesting for your audience by adding information about local experiences and practices, especially those that apply to your audience. Some areas to consider when analyzing your audience:

- **Size of the Audience.** With smaller groups, you can provide more in-depth analysis based on real-life stories or experiences because you usually know more about the individuals in the group. In larger groups, you may have to take more time during the scripted presentation to define general concepts and ensure the presentation is relevant to all viewers.
- **Knowledge Level.** It is always safest to assume that the audience does not understand any technical terms you might use in the presentation. If you are giving a live presentation, we advise following the script and providing definitions for terms that may be unfamiliar to some audience members.

# Presentation Narrative

## Title

*Faith and Families for a Healthier Kenya*

### → **Click Forward to Slide 1**

This is a religious leader who was born and raised in his village. He has lived a long time, and he has seen a lot of difficult life experiences.

He is on a mission to improve people's lives, and this is the reason.

### → **Click Forward to Slide 2**

He has known many women who died during childbirth because their pregnancy was unplanned and they didn't have prenatal care. He has seen many infants die because they were born too soon after a previous birth. And he has seen the health and financial impact of these deaths on families.

He knows that this death and hardship could be prevented with family planning.

### → **Click Forward to Slide 3**

And that family planning can be practiced in accordance with faith-based values.

### → **Click Forward to Slide 4**

This is why when they were young, he and his wife discussed the number of children they would have, and then chose to use family planning in accordance with their faith.

Family planning made it easier for them to plan and space the births of their children, to be healthy, to achieve their education and career goals, and to provide for their family.

### → **Click Forward to Slide 5**

They have ensured their children are educated about family planning so they too can be healthy, and equipped with more opportunities in life.

### → **Click Forward to Slide 6**

This is why today, he and his wife reach out to their neighbors to talk about the links between faith and family planning.

They want everyone to have access to this life-saving health care and the opportunities it can provide for families, the community, and the nation.

### → **Click Forward to Slide 7**

The people of Kenya recognize the importance of reproductive health. According to our Constitution:

### → **Click Forward to Slide 8**

"Every person has the right to the highest attainable standard of health, which includes the right to health care services, including reproductive health care."

### → **Click Forward to Slide 9**

A central component of reproductive health is family planning.

The term "family planning" refers to the planning of when to have children, and efforts to regulate healthy timing and spacing of pregnancy using a variety of medical and natural methods of contraception.

### → **Click Forward to Slide 10**

Reproductive health and family planning are important for each of us throughout our lives.

→ **Click Forward to Slide 11**

And today we have the largest number of people in history in need of reproductive health and family planning services because Kenya's population is the largest it has ever been.

→ **Click Forward to Slide 12**

Kenya's population has grown rapidly from 11 million people in 1969 to about 44 million people today!

Rapid population growth is the result of high fertility. Today the average couple continues to have between four and five children.

→ **Click Forward to Slide 13**

And our population size is continuing to grow. Even if fertility declines to just below four children per woman, the population of Kenya is still expected to grow to over 66 million people by 2030!

This will increase demands for social services and natural resources.

→ **Click Forward to Slide 14**

Today Kenya's 44 million people are extremely diverse.

But one thing that many Kenyan's have in common is faith. The vast majority of the population is religious. The most common religions are Christianity and Islam.

→ **Click Forward to Slide 15**

Approximately 83 percent of the population is Christian ...

→ **Click Forward to Slide 16**

... and 11 percent is Muslim.

→ **Click Forward to Slide 17**

Religious beliefs influence many parts of our lives that are important for family planning.

→ **Click Forward to Slide 18**

When we marry, gender roles and relationships, education, where we seek health care, and the timing and spacing of childbearing are often influenced by religious beliefs.

→ **Click Forward to Slide 19**

So religious leadership is essential for providing accurate information about family planning.

Deeply rooted in the communities they serve, religious leaders can disseminate messages that reinforce healthy behavior and resonate with values and beliefs.

→ **Click Forward to Slide 20**

There have been many great improvements in recent decades to increase access to family planning services in Kenya. Family planning services are more widely available, and more people are using them.

Some religious leaders, including Christian and Muslim clerics, have helped foster a supportive environment for family planning.

→ **Click Forward to Slide 21**

And among health facilities managed by a faith-based organization today, more than two out of three offer either natural or medical family planning services (KSPA 2010).

→ **Click Forward to Slide 22**

Family planning services save lives by preventing unintended pregnancies, which can increase the risk of death and disability for mothers and children, especially when the pregnancies are categorized as:

→ **Click Forward to Slide 23**

Too early, meaning the mother is under age 18;

Too late, meaning the mother is older than age 35, especially when she's had many previous pregnancies; or

Too soon, because the pregnancies are spaced too close together.

→ **Click Forward to Slide 24**

The family planning improvements in Kenya are exciting, but challenges remain.

For example, today one out of four married couples has an unmet need for family planning, meaning they wish to delay childbearing, but are not using family planning, and are at risk for having an unintended pregnancy.

→ **Click Forward to Slide 25**

Nearly one out of four children is born less than two years after a previous birth, increasing their risk of health complications or death.

→ **Click Forward to Slide 26**

In addition to the health concerns, unintended or risky pregnancies may have long-term implications because they can contribute to:

Increased medical and household expenses;

Challenges for families to achieve education or career goals;

Loss to a family and community if a mother or child dies;

More demands for social services such as schools and health care; and

More demands for natural resources like water and farm land.

→ **Click Forward to Slide 27**

Research demonstrates that family planning lays the groundwork to:

Strengthen families;

Improve the health of mothers and children; and

Achieve national development, including the goals of Kenya's Vision 2030.

→ **Click Forward to Slide 28**

These family planning outcomes are aligned with the goals of religious communities.

Religious leaders and communities can use the following evidence-based information to advocate for family planning.

→ **Click Forward to Slide 29**

Family planning has numerous benefits for families.

→ **Click Forward to Slide 30**

For fathers and mothers, family planning can make it easier to...

→ **Click Forward to Slide 31**

... achieve education and career goals through healthy timing and spacing of pregnancy.

- **Click Forward to Slide 32**  
The resulting higher household income enables parents to have ...
- **Click Forward to Slide 33**  
... more resources for each child. Family planning also helps to strengthen marriages ...
- **Click Forward to Slide 34**  
... by engaging both parents in childbearing decisions and increasing opportunities for women.
- **Click Forward to Slide 35**  
For mothers, family planning ...
- **Click Forward to Slide 36**  
... saves lives because of healthy timing and spacing of pregnancy.
- **Click Forward to Slide 37**  
It also reduces mother-to-child transmission of HIV by preventing unintended pregnancies.
- **Click Forward to Slide 38**  
And it improves health and nutrition status.
- **Click Forward to Slide 39**  
Family planning has many benefits for children. In fact, family planning saves children's lives.  
  
In this bar chart, we see an example of the relationship between birth spacing and child survival.  
  
On the left axis, we have deaths of children under age 5 per 1,000 live births. On the bottom axis we have the interval between the mother's last two births ranging from less than two years to three years.
- **Click Forward to Slide 40**  
We see that children born less than two years after a previous birth are more than twice as likely to die before age 5 as children born after birth intervals of three years.
- **Click Forward to Slide 41**  
So by enabling parents to wait three years after giving birth before becoming pregnant again, family planning...
- **Click Forward to Slide 42**  
... increases child survival. It also lays the groundwork ...
- **Click Forward to Slide 43**  
... for improved child health and nutrition,
- **Click Forward to Slide 44**  
... And for educational attainment, and well-being.
- **Click Forward to Slide 45**  
The benefits of family planning are felt throughout Kenya.
- **Click Forward to Slide 46**  
By helping families improve health, achieve higher levels of education and employment, and accumulate more savings, family planning leads to healthier and wealthier communities.
- **Click Forward to Slide 47**  
With these improvements family planning allows governments to save money and invest in social services and natural resources, and the infrastructure needed ...

- **Click Forward to Slide 48**  
... for Kenya to achieve its development goals, including Vision 2030.
- **Click Forward to Slide 49**  
Religious leaders around the world have contributed to increases in family planning use. Let's look at Egypt as an example of where religious leaders have been actively engaged in family planning initiatives.  
  
Here in Egypt, in 1988, only 36 percent of married women were using modern family planning, and the government was becoming increasingly concerned about the development challenges caused by poor reproductive health and rapid population growth.
- **Click Forward to Slide 50**  
During the 1990s, the government increased support for family planning ...
- **Click Forward to Slide 51**  
... as part of its development initiative to strengthen maternal and child health.
- **Click Forward to Slide 52**  
Political leaders spoke out in support of family planning, and the number of clinics providing family planning services increased.
- **Click Forward to Slide 53**  
In recognition of the strong influence of religion in the country, the government engaged religious leaders in family planning sensitization.
- **Click Forward to Slide 54**  
Large religious centers dispatched guidelines in favor of family planning that were also aligned with their mission to improve health and well-being.
- **Click Forward to Slide 55**  
In the years that followed, religious leaders—including Christian and Muslim leaders - were provided with tools and skills to promote healthier family planning in their communities.
- **Click Forward to Slide 56**  
At the same time, the government invested more in education, health, and job creation.
- **Click Forward to Slide 57**  
By 2008—20 years later—family planning was widely available, and 58 percent of married women were using modern family planning!
- **Click Forward to Slide 58**  
During this same time period—from 1988 to 2008—unplanned pregnancy, maternal death, and child death declined ...
- **Click Forward to Slide 59**  
... while educational attainment among women increased, and the gross national income of Egypt increased.
- **Click Forward to Slide 60**  
The experience of Egypt demonstrates how engaging faith-based leaders in family planning initiatives can make family planning more acceptable and available, especially when combined with strong political commitment, and investments in health, education, and employment.
- **Click Forward to Slide 61**  
So how can we engage Kenya's leaders to ensure people of all faiths have access to family planning?

→ **Click Forward to Slide 62**

Religious leaders should relay accurate information about the benefits of family planning with messages that are consistent with religious values and ensure health and well-being.

→ **Click Forward to Slide 63**

Government officials and political leaders should increase support and leadership for family planning. This includes partnering with religious leaders on family planning sensitization, and allocating family planning resources for religious communities.

→ **Click Forward to Slide 64**

Health care leaders should work with service providers to ensure family planning services are available, and sensitive to diverse religious beliefs.

→ **Click Forward to Slide 65**

Leaders in education, including teachers, should ensure that family planning information provided in schools is age and faith appropriate.

→ **Click Forward to Slide 66**

Leaders at all levels, including civic leaders, elders, parents, and youth leaders should talk about the role of faith and family planning for healthy families and a healthy Kenya.

→ **Click Forward to Slide 67 – Let Play Automatically Through Last Slide**

When family planning is available for everyone—and combined with investments in health, education, and employment—the impact is felt throughout the nation.

Health is improved, the family is strengthened, the economy is stronger, and national development is in place.

## Discussion Guide

After giving the ENGAGE presentation, you may have the opportunity to foster discussion among the audience members. We encourage you to share data specific to reproductive health, family planning, and faith in Kenya, and make the discussion specific to addressing these issues within the local context. Sample discussion questions are listed below:

### **DISCUSSION ABOUT THE PRESENTATION**

1. What did you learn from the presentation about the connections between the benefits of family planning and religious values and beliefs?
2. What did you learn from the presentation about the benefits of family planning for the family, community, and the nation?
3. How can an increased focus on family planning lead to better development for your county or community?

### **DISCUSSION ABOUT REPRODUCTIVE HEALTH AND FAMILY PLANNING**

4. Many people have diverse views about reproductive health and family planning. Has this presentation affected the way you think about these issues?
5. How does family planning prevent maternal death and improve maternal health?
6. What are the effects of family planning on child survival, health, and well-being?
7. Why do some people think that family planning is not in conformity with religious beliefs?
8. Family planning availability and use has improved in Kenya, but many people still have an unmet need for family planning. Why do you think there is such a high unmet need for family planning services and information? (Note: People with unmet need for family planning wish to delay childbearing, but are not using family planning, and are at risk for having an unintended pregnancy.)
9. What are some strategies that can increase access to family planning in your county or community? Consider strategies that include religious leaders.

### **DISCUSSION ABOUT FAMILY PLANNING AND RELIGIOUS FRAMEWORKS**

10. Did the presentation change the way you think about reproductive health and family planning as it relates to religious values and beliefs? Was there anything you learned in the presentation that you think would be valuable for faith-based communities to know?
11. The presentation revealed that among health facilities managed by a faith-based organization, more than two out of three offer natural or medical methods of family planning. Why is it important for faith-based health facilities to offer family planning? What could be done to increase the number of faith-based health facilities that offer family planning services?
12. The presentation shows that family planning lays the groundwork to strengthen families, improve the health of mothers and children, and achieve national development, including the goals of Kenya's Vision 2030. How do you compare these family planning outcomes with the goals of religious communities? What are the similarities and what are some key differences?
13. 13. What do you think are the barriers to engaging religious leaders in family planning advocacy and initiatives? What opportunities exist to engage religious leaders in family planning initiatives?

## **DISCUSSION ABOUT RECOMMENDATIONS**

14. The presentation made several recommendations at the end. Which of these recommendations is most critical? What are additional, specific recommendations for your county or community? What can you do to help these recommendations become a reality?
15. What can be done to increase awareness about how the benefits of family planning are aligned with religious frameworks and beliefs? What can be done to increase involvement of religious leaders in family planning efforts?
16. What are some ways to increase public dialogue about faith, reproductive health, and family planning?

## Frequently Asked Questions

Audience members often have questions about the presentation. Some of these questions may be specific to the actual presentation (data, pictures, figures, sources of information), while other questions may be related to the content of the presentation. If you are unsure about any of the terms used in the presentation, you can find definitions in PRB's online Glossary: [www.prb.org/Educators/Resources/Glossary.aspx](http://www.prb.org/Educators/Resources/Glossary.aspx).

Below are some frequently asked questions and answers.

### QUESTIONS ABOUT THE PRESENTATION

#### **Q. How accurate are your data?**

- A. The data in this presentation are the most accurate data available about family planning, reproductive health, and religion in Kenya. The data come from the 2009 Kenya Population and Housing Census, 2008-2009 Kenya Demographic and Health Survey, The Kenya Service Provision Assessment Survey 2010, World Population Prospects: The 2012 Revision, and other recent research studies.

#### **Q. Have the people in the photographs and videos in your presentation given their consent?**

- A. The photographs in this presentation are being used in accordance with legal rights and for illustrative purposes only. The photos do not imply any particular health status or behaviors of the people featured in this presentation.

#### **Q. Why are you using Egypt as a country example?**

- A. Egypt is an example of a country where religious leaders have been actively engaged in family planning initiatives. In 1988, only 36 percent of married women in Egypt were using modern family planning methods. Egypt's government increased support for family planning throughout the 1990's, and recognizing the strong influence of religion in the country, chose to engage religious leaders in family planning sensitization activities. Large religious centers gave guidance in favor of family planning that was aligned with their mission to improve community health and well-being, and this guidance was used in the government's sensitization activities. Both Christian and Muslim leaders were trained to promote family planning in their communities. By 2008, family planning was widely available in Egypt and 58 percent of married women were using modern family planning.

#### **Q. Why do you focus on reproductive health and family planning when there are so many other important issues to be addressed by religious leaders, such as education, poverty, access to health care, or food security?**

- A. Yes, there are many important issues in Kenya, and many of them are connected in some way to religious frameworks and teachings. Some of these issues are just as important as family planning but that does not diminish the fact that family planning is a cost-effective strategy to improve the well-being of individuals, families, and communities, and help Kenya achieve development goals. Ideally, we could address all of these issues together, but this presentation is about raising awareness of the connections between reproductive health, family planning, and religious frameworks and beliefs.

## **QUESTIONS ABOUT RELIGIOUS FRAMEWORKS AND BELIEFS AND FAMILY PLANNING**

### **Q. I'm a religious leader. What can I do to help?**

- A.** Religious leaders around the world have become actively engaged in reproductive health and family planning initiatives. As a religious leader, people listen to you and value your opinion. One of the most important things you can do is share information with your faith community about the benefits of reproductive health and family planning, including how the benefits of family planning are aligned with religious frameworks and beliefs. Be sure that all information you share is scientifically accurate and in conformity to your religious teachings. Another way you can help is to reach out to reproductive health and family planning organizations in your area and offer to partner with them to spread the word.

### **Q. Some religious leaders do not support family planning. What can I do to change attitudes among religious leaders about family planning?**

- A.** Throughout the world, religious leaders are looked to for guidance and advice on all aspects of life. When hoping to gain the support of a religious leader for family planning, it is helpful to frame the issues within the values and beliefs of the religion you are addressing. There are leaders within all major religious groups who do support family planning. Work with them to create messages that show where health is promoted and supported in religious scriptures. It is important for programs to partner with these “champions” to design messages and community outreach strategies that support family planning within religious frameworks.

### **Q. Q: I am a religious leader who wants to improve maternal and child health in my community. Why should I promote family planning?**

- A.** A: For mothers, family planning saves lives because of healthy timing and spacing of pregnancy. Family planning also reduces mother-to-child transmission of HIV by preventing unintended pregnancies among HIV-positive couples, and improves health and nutrition status. Family planning also saves children's lives. Children born less than two years after a previous birth are more than twice as likely to die before age 5 as children born after birth intervals of three years. By enabling parents to wait three years after giving birth before becoming pregnant again, family planning increases child survival. It also lays the groundwork for improved child health and nutrition, and educational attainment, and well-being. Supporting family planning as a religious leader shows that you care about maternal and child health and well-being.

## **QUESTIONS ABOUT CONTRACEPTION**

### **Q. You discussed family planning a lot in this presentation, but you didn't provide details about methods of family planning. What are the choices for family planning or contraception?**

- A.** There is a wide range of contraceptive methods available depending on the reproductive needs of each couple. Some methods are more effective than others. Methods such as withdrawal and spermicides have the lowest level of effectiveness while longer acting or permanent methods are more effective. Some methods only work one time such as male condoms, or female condoms while others may last longer but are not permanent. Additionally, there are Fertility Awareness Methods such as the Standard Days Method, Basal Body Temperature, and the Two Day Method. These methods require partners' cooperation as couples must be committed to abstaining or using another method on fertile days. And finally, there is the Lactational Amenorrhea Method which is a method based on breastfeeding and provides pregnancy protection for the mother and nutrition for the baby during the first six months after childbirth.

**Q. Are there any safety concerns or negative side effects when using family planning?**

- A.** Family planning is safe for both women and men. It is one of the most researched medical interventions in history, and today there are many kinds of family planning methods for people with different needs and health conditions. Like many medications, some methods may have side effects that affect one family planning user while not affecting another. Couples need to be informed of possible side effects and how to manage them when receiving family planning counseling. If the side effects are bothering the user, the provider can suggest a different method of family planning.

**QUESTIONS ABOUT CONTRACEPTIVE POLICIES AND INTERVENTIONS**

**Q. How can we make sure there is a sufficient budget to ensure all people have access to family planning information and services?**

- A.** It may be challenging to increase national or county budgets for family planning. However, the quality and availability of family planning services benefit from strong health systems and financing mechanisms. Using evidence-based research to advocate for increased resource allocation from the national and county governments and donors can help ensure funding for family planning is targeted and used efficiently. Also, integrating family planning into other key sectors like education, labor, and gender, can increase funding streams for family planning commodities and services. In addition, budgeting for family planning requires a long-term perspective since using family planning services is not a one-time event, but a need that lasts throughout our reproductive lives. Champions and policymakers who articulate support for family planning from the public and private sectors can help put the issue on the national and county agendas, and increase budget support for such services. Finally, with greater involvement of faith-based communities and organizations, countries can better provide family planning information and services to all men and women.

## Additional Resources

Christian Connections for International Health (CCIH), *Engaging Men in Family Planning* (Washington, DC: CCIH, 2013).

Christian Connections for International Health (CCIH), *Family Planning: Another Way Faith Groups Can Prevent HIV Infections* (Washington, DC: CCIH, 2011).

Christian Connections for International Health, Muhammadiyah, and DSW, *Interfaith Declaration to Improve Family Health and Well-Being* (Nairobi: Christian Connections for International Health, Muhammadiyah, and DSW, 2011).

Farzaneh Roudi-Fahimi, *Islam and Family Planning* (Washington, DC: Population Reference Bureau, 2004).

Institute for Reproductive Health, *Faith-Based Organizations As Partners in Family Planning* (Washington, DC: Institute for Reproductive Health, 2011).

Kenya Law Reports, *Laws of Kenya: The Constitution of Kenya, 2010* (Nairobi: National Council for Law Reporting, 2010).

Kenya National Bureau of Statistics, *2009 Kenya Population and Housing Census* (Nairobi: Kenya National Bureau of Statistics, 2010).

Kenya National Bureau of Statistics and ICF Macro, *2008-2009 Kenya Demographic and Health Survey* (Calverton, MD: Kenya National Bureau of Statistics and ICF Macro, 2010).

Maura Graff and Jason Bremner, *A Practical Guide to Population and Development* (Washington, DC: Population Reference Bureau, 2014).

National Coordinating Agency for Population and Development (NCAPD), *Protecting the Reproductive Health of Young People—An Investment in Kenya's Future*, Policy Brief No. 11 (Nairobi: NCAPD, 2011).

Population Action International (PAI), *The Key to Achieving the Millennium Development Goals: Universal Access to Family Planning and Reproductive Health* (Washington, DC: PAI, 2010).

Republic of Kenya, *Kenya AIDS Indicator Survey* (Nairobi: Kenya National Bureau of Statistics and NASCOP, 2012).

Republic of Kenya, *Sessional Paper No. 3 of 2012 on Population Policy for National Development* (Nairobi: National Council for Population and Development, Ministry of State for Planning, National Development, and Vision 2030, 2012).

Republic of Kenya and UNFPA, *Islam and Child Spacing—A Guide for Muslim Religious Leaders* (Nairobi: Republic of Kenya and UNFPA, 2013).

Rhonda Smith et al., *Family Planning Saves Lives*, 4th ed. (Washington, DC: Population Reference Bureau, 2009).

United Nations Population Division, *World Population Prospects: The 2012 Revision* (New York: Population Division of the Department of Economic and Social Affairs of the United Nations Secretariat, 2013).