

Akili Dada is an international non-profit organization that is strategically investing in Africa's future. Our mission is to nurture transformative leadership in girls and young women from underserved backgrounds to meet the urgent need for more African women in leadership. We envision a world in which African women leaders are actively participating in key decision-making processes across sectors.

Akili Dada Chatbot seek to ensure uninterrupted access to comprehensive SRHR information and services by adolescent girls, young women, young people, key populations (LGBTQ+ persons ) free of stigma and discriminations.

The 2014 Kenya Demographic and Health Survey (KDHS) found that on average half of men and women start engaging in sex at age 17 and 18, respectively. In addition, 11% of girls and 20% of boys aged 15-19 start engaging in sex by age 15. One in five (23%) girls age 15-19 has an unmet need for contraceptives. Consequently, 1 in 5 girls aged 15-19 has begun childbearing and about half (47%) of these births are unwanted.

The STI prevalence among girls aged 15-19 is 3 times the rate in boys of the same age group. Knowledge of comprehensive HIV prevention, HIV testing, and condom use are also low among adolescents relative to other age groups. Sexual and gender-based violence (SGBV) SGBV is linked to high rates of unintended pregnancy, STIs including HIV, and psychosocial problems. The 2014 KDHS found that 6.5% of girls aged 15-19 and 2.7% of boys aged 15-19 have ever experienced sexual violence.

Whereas, 32% of girls aged 15-19 and 42% of boys have ever experienced physical violence since age 15 years. Every day in Kenya 7 women die from unsafe abortions which can be prevented. Unsafe abortion in Kenya is among the highest in Africa. Maternal mortality is high at about 6,000 deaths per year, 17% of them from complications of unsafe abortion

Therefore, the chatbot seeks to create a safe space where adolescent girls and young women can have uninterrupted access to comprehensive SRHR information and services in a confidential and non-judgmental including access to safe abortion services.

### **What is abortion?**

An abortion is the medical process of ending a pregnancy.

An abortion is also known as a ‘\_termination’ or ‘\_termination of pregnancy’. There are two types of abortion procedures – surgical abortions and medical abortions. What is surgical abortion? Most surgical abortions are performed between 6 and 12 weeks of pregnancy, but they can be performed later as well

A surgical abortion is usually performed as a day procedure by a method called manual vacuum aspiration.

Women having this procedure are usually under a general or local anaesthetic

### **What is Medical abortion?**

Medical abortion uses prescription medication given in doses over 2 or more days to end a pregnancy.

This method of abortion can be performed for women whose pregnancy is up to 9 weeks' gestation.

### **Is abortion legal in Kenya?**

Abortion in Kenya is legal with restrictions. The Kenyan 2010 constitution Article 26(4), provides exception under which abortion can be accessed and provided:

In the opinion of a trained health professional,

there's need for emergency treatment,

or the life or health of the [pregnant woman] is in danger or if permitted by any other written law

### **Other policies and guidelines on Abortion in Kenya**

2019 Post Abortion Care Guidelines, MOH Post Abortion Care Reference manual 2003 and the MOH National Guidelines on the Management of Sexual Violence 2014; provide the avenue for access to abortion within the law and post abortion care.

The Health Act has clarified that nurses, clinical officers, midwives alongside doctors can provide safe abortion within the law in emergency situations, when the life or health of the woman is in danger or when permitted by any other written law.

Section 7 of the Health Act affirms the right to emergency health care and consequences for denial of care. Under this provision, the right to conscientious objection cannot be invoked in emergency care and while all Post Abortion Care cases fall within the realm of emergency care, some Comprehensive Abortion Care (CAC) cases qualify as emergency care.

The 2014 ministry of Health's National Guidelines on Management of Sexual Violence in Kenya, health care professionals are permitted to provide CAC and PAC services to survivors of sexual violence such as rape and defilement. It is the right of a survivor to seek termination services where the pregnancy was because of the violence they have survived.

The 2015 MOH National Adolescents and Youth Sexual and Reproductive Health Policy and the guidelines for provision of adolescent and youth friendly services recommend provision of PAC. The 2012 MOH National Standards and Guidelines for Reducing Morbidity and Mortality from Unsafe Abortion provide a comprehensive guide to health professionals on provision of abortion and post abortion care in Kenya.

### **Who can perform abortion services in Kenya?**

Abortion can be performed by a trained health professional who can be a: Doctor, Nurse, Midwife Clinical officer trained in provision of abortion service, treatment and care.

### **What is contraceptive?**

It is a method or device or drug serving to prevent pregnancy

## **2 .Types of contraceptives**

Hormonal IUD

Non Hormonal IUD

Injectable

Birth Control Pills

Patch

Vaginal Ring

Female Condom

Male Condom

Fertility Awareness (Period Calendar)

Tubal Ligation

Vasectomy

Abstinence

Intra Uterine Device (IUD)

### **What Is Copper-Bearing Intrauterine Device?**

The copper-bearing intrauterine device (IUD) is a small, flexible plastic frame with copper sleeves or wire around it.

A specifically trained health care provider inserts it into a woman's uterus through her vagina and cervix.

Almost all types of IUDs have one or two strings, or threads, tied to them.

The strings hang through the cervix into the vagina.

**Works by causing a chemical change that damages sperm and egg before they can meet.**

### **How effective is IUD**

IUD is one of the most effective and long-lasting methods of contraceptives.

Less than 1 pregnancy occurs per 100 women using an IUD.

Risks of pregnancy

May help protect against cancer of the lining of the uterus (endometrial cancer),

### **What are the Side Effects of IUD**

Changes in bleeding patterns† (especially in the first 3 to 6 months), including:

Prolonged and heavy monthly bleeding

Irregular bleeding

More cramps and pain during monthly bleeding

### **What are the Advantages of Using IUD**

Prevents pregnancy very effectively

Is long-lasting

Is private—usually, no one else can tell a woman is using contraception (sometimes a partner may feel the strings during sex but does not interfere)

Has no further costs for supplies after the IUD is inserted

Does not require the user to do anything once the IUD is inserted

**Burst Myth and Misunderstanding about IUDs** Can be used by women of any age. Can be used by women who have had children and those who have not. Rarely lead to pelvic inflammatory disease (PID). Do not increase the risk of contracting STIs, including HIV. Do not increase the risk of miscarriage when a woman becomes pregnant after the IUD is removed. Do not make

women infertile. Do not cause birth defects. Do not cause cancer. Do not move to the heart or brain. Do not cause discomfort or pain for the woman or the man during sex.

**What are Implants?** Implants are small flexible rods that are placed just under the skin of the upper arm. Small plastic rods, each about the size of a matchstick, that release a progestin like the natural hormone progesterone in a woman's body. A specifically trained provider performs a minor surgical procedure to place one or 2 rods under the skin on the inside of a woman's upper arm. Two rods contains levonorgestrel, highly effective for 5 years One rod contains etonogestrel, labeled for up to 3 years of use (a recent study shows it may be highly effective for 5 years).

### **How to Implants Work?**

Preventing the release of eggs from the ovaries (ovulation) Thickening cervical mucus (this blocks sperm from reaching an egg) How effective are Implants? Less than 1 pregnancy occurs per 100 women using implants. For heavier women, the effectiveness may decrease near the end of the duration of use What are the advantages of implants? Are both long-lasting and reversible Do not interfere with sex Health

### **Benefits of Implants?**

Help protect against: Risks of pregnancy, including ectopic pregnancy, Symptomatic pelvic inflammatory disease May help protect against Iron-deficiency anemia Reduces: Risk of ectopic pregnancy

### **What are the side effects of Implants?**

Changes in bleeding patterns, including the following for the first several months to a year: Lighter bleeding and fewer days of bleeding Prolonged bleeding Irregular bleeding Infrequent bleeding No monthly bleeding Some users may also experience: Weight change, Breast tenderness, and Mood changes.

### **Burst Myth and Misunderstanding about Implants**

Do not cause any harm if they stop monthly bleeding. This is similar to not having monthly bleeding during pregnancy. Blood is not building up inside the woman. Do not make women infertile. Do not increase the risk of ectopic pregnancy.

## **Barrier Method**

Barrier methods include male and female condoms.

We also have a diaphragm and cervical cap (but not commonly used in Kenya)

## **Male Condom**

Are condoms effective at preventing pregnancy? Yes, male condoms are effective, but only if used correctly with every act of sex. When used consistently and correctly, only 2 of every 100 women whose partners use condoms become pregnant.

How well do condoms help protect against HIV infection? On average, condoms are 80% to 95% effective in protecting people from HIV infection when used correctly with every act of sex

Do condoms often break or slip off during sex? No. On average, about 2% of condoms break, tear, or slip off completely during sex, primarily because they are used incorrectly

What can men and women do to reduce the risk of pregnancy and STIs if a condom slips or breaks during sex? If a condom slips or breaks, Taking emergency contraceptive pills can reduce the risk that a woman will become pregnant (see Emergency Contraceptive Pills. If exposure to HIV is likely, treatment with antiretroviral medications (post-exposure prophylaxis), where available, can help reduce HIV transmission. If exposure to other STIs is likely, consider to seeking medical attention

. Can a man put 2 condoms on at once for more protection? It is generally not recommended because of concerns that friction between the condoms could increase the chance of breakage.

Will condoms make a man unable to have an erection? No, not for most men. Impotence (erectile dysfunction) has many causes. Some causes are physical, some are emotional. Condoms themselves do not cause impotence.

### **Female Condoms**

Female condom is made of thin, transparent, soft film. Have flexible rings at both ends, one ring at the closed end helps to insert the condom. The ring at the open end holds part of the condom outside the vagina. Work by forming a barrier that keeps sperm out of the vagina, preventing pregnancy. Also helps to keep infections in semen, on the penis, or in the vagina from infecting the other partner.

### **Abortions**

Frequently asked questions Is abortion a method of contraceptive used to prevent pregnancy? NO Abortions is not a method of family planning or contraceptives.

Unlike contraceptives which prevent fertilization to take place, abortion is either a medical or surgical methods used to terminate or interrupt an already established pregnancy. What is the difference between the abortion pill and the morning-after pill (emergency contraception)? Morning after is a pill taken in the duration of 72 hours to prevent pregnancy on instances that one had unprotected sex.

This is also known as E-Pills (Emergency Pills).

While Abortion pills are taken to terminate a pregnancy Is medical abortion the same thing as abortion pills? YES, Is medical abortion the same as surgical abortion? NO 1.

Medical abortion is the misoprostol or mifepristone to terminate the pregnancy. Sometimes the words like “non-surgical abortion” or “abortion with pills” are also used. 2. Surgical abortion: This is a medical procedure, done by a qualified health professional who will use manual vacuum aspirator (MVA) to empty the uterus through the cervix to terminate the pregnancy. These procedures are also known as dilatation and evacuation. **Abortion Myths and Misconceptions**

#### **MYTH**

: Contraceptives jeopardized future fertility and could lead to serious health complications such as prolonged menstrual bleeding, problems conceiving, and birth defects FACT: Different contraceptive methods have different side effects mostly on menstrual bleeding, although contraceptives do not cause conceiving problems in fact a woman can conceive immediately after removing or stopping contraceptive use. MYTH: Using contraceptive is bad as it retains dirty blood in the body and leads to stomach aches FACT: Hormonal contraceptives have effects on menstruation which can be irregular and cause cramping. MYTH: Those using contraceptives are promiscuous and astray. FACT: Contraceptive/Family planning are used by people (anyone) who are not ready to have a child or are spacing their children. MYTH: Use of contraceptives or Family planning diminishing sexual urges. FACT: One can still enjoy sex even while using contraceptives

#### **Contraceptive FAQs**

Can one use two condoms?

Using 2 condoms isn't safe and due to friction, it's likely to break. It's advisable to use 1 condom at a time and put it on correctly. (Snip- Pinch- Roll)

. Do all contraceptives prevent HIV/STIs?

The only contraceptive that prevents HIV and STIs is a male or female condom. The disadvantage of other contraceptives is that they only prevent pregnancy and not sexually transmitted infections (HIV/STI). Can I change my birth control for one method to another? YES, you can change your contraceptive method after consultation with your gynaecologist on the