

INSTITUTE OF CURRENT WORLD AFFAIRS

JS-9
Family Planning in Kenya

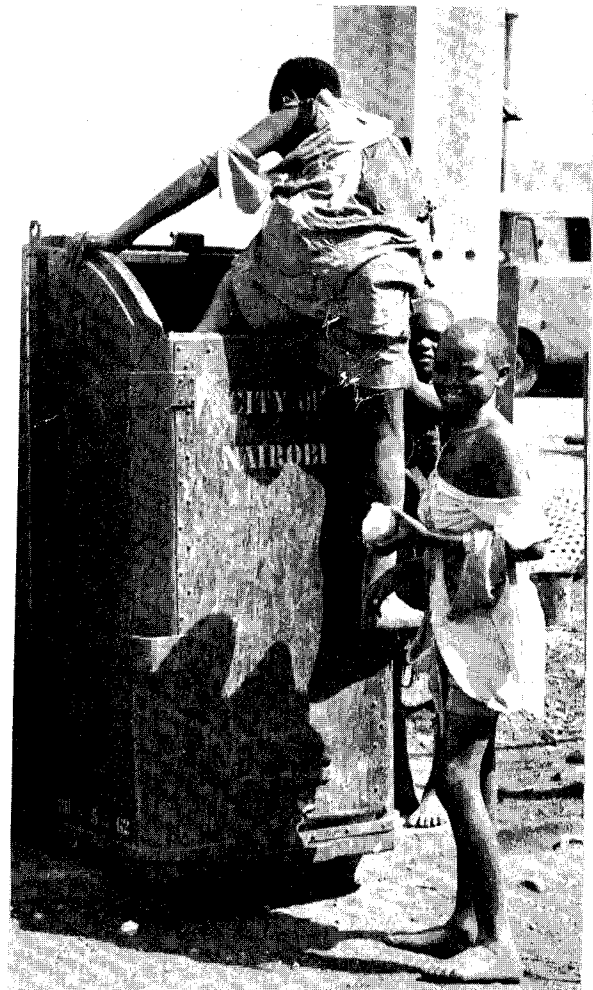
P.O. Box 5113
Nairobi, Kenya
15 Dec 63

Mr. Richard H. Nolte
Institute of Current World Affairs
366 Madison Avenue
New York 17, New York

Dear Mr. Nolte:

The great plains of Kenya and the hills that stretch away into the hazy distance give the land a deceptively empty look. In reality, Kenya is filling up with people at an alarming rate, yet her new leaders, who will have to cope with all the problems of a poor country with a high rate of population growth, are making no effort to introduce any form of family planning. They seem content, with a shrug of their shoulders, to let these difficulties pass on to the next generation.

The first accurate census of Kenya was made in 1948. Before this, the Government carefully counted the European and Asian communities, but only estimated the African population by multiplying the number of taxpayers by a factor which was supposed to represent their dependents. Then, in 1948, enumerators from the newly-formed East African Statistical Department took the first hut-to-hut census of the entire East African population. In Kenya, the next complete census was not taken until 1962 and, although the Government will not publish a detailed analysis of the results until next spring, several useful provisional figures are now available.



No school, no clothes, no food

Kenya's population is 8,847,000, one million more than was estimated just before the census. Her rate of population growth, which, at the time of the Kenya Land Commission in 1933 was es-

estimated to be 1.5%, and which the 1953-1955 East African Royal Commission thought was less than 2%, appears to be 3%, one of the highest in the world. At this pace, Kenya's population will double in 23 years. Dr. J.G.C. Blacker, the demographer interpreting the results of the census for the Kenya Government, observes that, "If this rate of growth continues, the population of Kenya will reach 11 millions by 1970, 15 millions by 1980, 20 millions by 1990, and 26.5 millions by the end of the century." Taking the population increase figures one step further, he calculates that each year 65,000 men enter the job market and that 30,000 children join the primary school age group. As 51% of the people are now under 16, these numbers are bound to rise rapidly each year.

The annual introduction of 30,000 children into the school system is more of a problem for the secondary than the primary schools. Right now, only 5% of the secondary school age group here actually attend secondary school, yet already the facilities are packed. In 1962, the World Bank Mission to Kenya estimated that in little more than two years the number of those who leave primary school will increase six-fold and said, "The Mission does not believe that post-primary education can be expanded in proportion with this tremendous output from primary schools. Beside the financial limitations, expansion of secondary education is likely to outrun the prospective supply of teachers.

The large numbers of primary school graduates who cannot continue their education must look for work, but the labor market is already crowded with the jobless and the new arrivals will have little chance of finding employment. Small industries may come to Kenya; a blanket factory here, a canning plant there, but they can offer employment to only a few. Without mineral resources, the country's economic base must be agricultural, yet as long ago as 1951, Sir Philip Mitchell, then the Governor of Kenya, remarked, "There is acute local congestion on the land and excessive pressure of people and livestock in some districts...." The 1962 census showed clearly that such pressure had increased in all the agricultural areas. If, then, those who leave school return to their homes, they are likely to find the land overcrowded. Elsewhere, European farmers are laying off workers rather than hiring them, and the Settlement Schemes, whereby landless Africans receive land once farmed by Europeans, have more applicants than land. And so the number of the landless unemployed steadily grows larger. Following, like an ugly shadow, comes an increase in crime and social unrest.

Concern about these problems led to the formation of the multi-racial Nairobi and Mombasa Family Planning Associations in 1955. From the beginning, the two organizations have stressed that the goals of family planning are: to help parents space their families so that the mother's health is maintained and so that each child receives proper care and education, to help childless couples who want children, and to help prevent the birth of unwanted children. Initial progress was slow as both groups were hampered by lack of funds and both realized that too vigorous a start might stir up opposition to their program.

Three factors have enabled the Nairobi Association to quicken the pace of family planning promotion. First, the Pathfinder Fund of Milton, Massachusetts has given it money and professional advice. Last August Pathfinder funds supported a three day conference attended

by medical personnel from all over Kenya. It was so successful that another is planned for next March. Second, the Association has received the full cooperation of the Nairobi City Council whose senior medical officer is one of its founding members. City Council doctors now provide family planning counseling and distribute contraceptives in 11 City clinics: six in the Asian areas of Nairobi, four in the African locations, and one in City Hall. Third, in 1961, the Family Planning Association of Kenya (FPAK) was formed which soon affiliated with the International Planned Parenthood Federation. Since then, FPAK branches have opened in Kericho, Kisumu, and Nakuru.

Although the FPAK has done pioneer work in Kenya, its impact has been limited. It is a small organization with only 150 members and, for all the Pathfinder Fund's generosity, the FPAK has never had enough money to mount the large-scale educational campaign that is needed to break down the widespread African resistance to its ideas. In his Appendix to the East African Royal Commission Report, J.E. Goldthorpe stated that, "It is a fair guess that nearly all Africans at present want as many children as possible." These words were written in 1953, but they still apply to the majority of rural Africans, who oppose family planning for many reasons. Perhaps the most common objection is based on the fact that children have traditionally provided a form of social security by taking care of their parents when the parents grow old. Infant mortality was alarmingly high in the past and parents wanted to have many children to be certain of keeping a few. Today, with the spread of modern medicine, far fewer infants die, but the desire for a large family remains. Another reason for African opposition is that many country women fear that if they do not bear lots of children, their husbands will leave them. Others believe that if they prevent conception, they will anger God so that he will take away what children they already have. An objection heard more frequently in colonial times than now, is that family planning is really a disguised imperialist plot to reduce the number of Africans so that Europeans can take their land. On the heels of this story came the rumor that contraceptives would cause sterility if they worked and malformed babies if they did not. Finally, there is the implacable opposition of the Roman Catholic Church and most of its one million adherents, whose clergy do not sympathize with the re-appraisal of birth control taking place in other parts of the Catholic world.

Most of the educated Africans and practically all the younger Asians (Hindus, Moslems, Sikhs, and even some of the Catholic Goans) are practicing family planning. Widespread use of contraceptives among the 176,000 Asians and the fact that Asian women now marry at a later age than their mothers did have led to a drop in the community's birth rate. But for Kenya as a whole, the crucial question is, will the dearth of school facilities, the unemployment, and the social and welfare problems brought on by overpopulation be beyond control by the time family planning is accepted throughout Kenya?

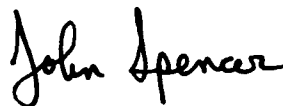
It is one of the unhappy paradoxes of this country that, while more and more Africans and Asians see the need for and practice family planning, their Government, to whom the problem of population growth should be of paramount concern, does little more than note its existence. Three months ago, when opening a nurses' home, the Prime Minister said, "The 1962 population census revealed that the popula-

tion of Kenya is increasing at the rate of about 3% per annum and this fact makes it difficult for the Government to keep pace with the growing demand for health services, let alone to improve upon the standards that have already been achieved." Mr. Kenyatta says this, but the Ministry of Health forbids any teaching of family planning methods in its health-training courses. Government employees are allowed to answer questions about contraception, but are told not to give unsolicited advice. A national family planning program was actually prepared by a senior official of the Ministry a few months ago, but it was quashed by his superiors. The opposition apparently comes from the very highest Government levels, from just those who should be most aware of the country's population difficulty. At the FPAK's three day course last August, the Minister of Health gave a speech endorsing the work of the Association, but I have heard that he was severely criticized for this support at the next Cabinet meeting. Whether or not this is so, his endorsement is no longer public and he tells the inquiring visitor that his Ministry gives top priority to the reduction of infant mortality. After that, perhaps, family planning. He adds, "You must understand that we will not hinder the FPAK, but for us the subject is extremely sensitive."

It is sensitive, it seems to me, because the Government does not feel strong enough to risk the political consequences of supporting family planning. It dares not antagonize the opinion-shaping tribal elders who, with their conservative rural followers, would oppose any birth control measure, nor does it want to anger the Catholic Church. As one Ministry of Health official put it, "At this stage of her evolution, Kenya can't afford to have Rome against her."

Obviously, the problems created by Kenya's ballooning population cannot be solved by family planning alone; her economy has to be expanded to meet the educational, social, and welfare needs of her people. But Kenya's economy will not be transformed overnight and so family planning on a country-wide scale must begin now. Since the Government will not act and the FPAK has insufficient funds, help must come from outside Kenya. At the moment, Sweden is the only country which makes family planning part of a foreign aid program, but she is fully committed in Ceylon and Pakistan and it is doubtful whether she would extend such aid to Kenya in the face of Government opposition. It remains, then, for private overseas agencies to provide the money, the staff, and the equipment to bring family planning assistance to every village in Kenya.

Sincerely,



John Spencer