ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH IN KIRINYAGA COUNTY

Introduction
Kirinyaga County has one of the lowest fertility rates in the country. Women in the reproductive ages (15-49 years) in the county expect to have 2.3 children compared to the national average of 3.9 children per woman. As a result, Kirinyaga County has a youthful population age (Figure 1) structure which is at an advanced stage of transitioning from being dominated by a large population of children below 15 years to one dominated by more people in the working ages (15-64 years). Kirinyaga has 33% of its population below age 15 and 53% of the population in the working ages 15-64.

Despite being at an advanced stage of its demographic transition, Kirinyaga’s population has implications on the County’s health and development agenda as it still exerts increasing demands on provision of services including health and education. One of the main areas of concern in Kenya is the sexual and reproductive health (SRH) of adolescents and the extent to which their SRH needs are met. About 1 in 5 (19%) people in Kirinyaga County are adolescents aged 10-19.

This fact sheet highlights the status of adolescent SRH in Kirinyaga County in relation to the national trends. The data are drawn from the 2014 Kenya Demographic and Health Survey, 2012 Kenya AIDS indicator Survey and the 2014 Basic Education Statistical Booklet.

Policy and legal context
Kenya has favorable policy and legal frameworks that promote adolescent SRH and SRH rights. These frameworks include but are not limited to the Constitution (2010), National Adolescent Sexual and Reproductive Health Policy (2015), National Guidelines for Provision of Adolescent Youth Friendly Services (YFS) in Kenya (2005), the Children Act (2001) and the National Youth Policy (2007).

Adolescent SRH Indicators
Age of sexual debut and first marriage
- Half of Kirinyaga County women (20-49 years old) and men (20-54 years old) first had sex by age 19 and 17, respectively. At national level, women and men in the same age groups first had sex at age 18 and 17, respectively.
- Half of Kirinyaga County women (25-49 years old) first married by age 21 and half of the men (30-54 years old) by age 25. At the national level, women and men in the same age groups first married by age 20 and 25, respectively.

Teen pregnancy
- About one in ten (11%) girls aged 15-19 years in Kirinyaga County have begun childbearing, which is notably low compared to the national rate (Figure 2). Specifically, 2.1% are pregnant with their first child and 9.2% have ever given birth compared to 3.4% and 14.7%, respectively, at the national level.
- Kirinyaga County’s age specific fertility rate for girls aged 15-19 (adolescent birth rate) is 52 births per 1000 girls, which is considerably lower than at the national rate (96).

Contraceptive use among adolescents
- Teenage pregnancies often result from low use of contraceptives and/or unmet need for contraceptives. In Kirinyaga County, about half (48%) of currently married girls aged 15-19 use modern contraceptives which is higher than the national level of 37% (Figure 3).
- Unmet need for contraceptives refers to women who would like to avoid pregnancy but are not using a modern contraceptive method. Current estimates of unmet need for contraceptives among currently married girls aged 15-19 in Kirinyaga County shows no unmet need. Whereas at national level, the unmet need for contraceptives is 23%.
• However, as more girls in Kirinyaga County learn about the benefits of using contraceptives when they are sexually active to prevent unintended pregnancies, demand for contraceptives and unmet need for contraceptives may increase.

• This means that between 20 and 25% of never married young people in the region did not use a condom during their last sexual encounter.

Other important indicators

Education outcomes
• Education is an important determinant for sexual and reproductive health particularly among girls. Girls who complete secondary and higher education have better sexual and reproductive health outcomes – they are less likely to have unwanted pregnancies and more likely to have higher socio-economic status.
• Kirinyaga County is performing notably well on primary and secondary school enrollment. Nearly all (99%) children in the official primary school-age are enrolled in primary school.
• Similarly, nearly all (90%) children in the official secondary school-age are enrolled in secondary school.
• At national level, 88% of children in the official primary school-age are enrolled in primary school and less than half (47%) of children in the official secondary school-age are enrolled in secondary school (Figure 5).

Female circumcision among adolescents
• Female circumcision, commonly referred to as Female Genital Mutilation or Cutting is linked to obstetric complications and gynecological problems, and long-term negative effects on women’s health and wellbeing. It is also often linked to girl child marriage which also has long-term negative effects on women’s health and wellbeing.
• Kirinyaga County is one of the counties in Kenya where female circumcision is not practiced.