

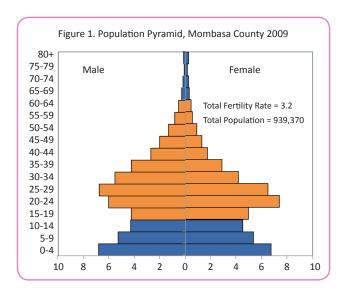






Introduction

Mombasa County is home to the second largest city in the country and the expected in-migration of young people is reflected in its population age structure with a noticeable bulge between the ages of 20 to 30 years (Figure 1). People below age 15 make up 33% of the total population whereas the working age population age 15-64 make up 56% of the total population.



This youthful population has implications on the County's health and development agenda as it puts 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 (18%) of people in Mombasa County are adolescents aged 10-19.

This fact sheet highlights the status of adolescent SRH in Mombasa 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 favourable 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).

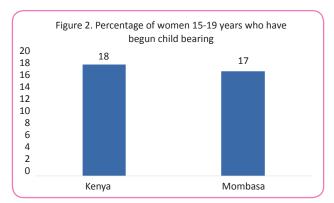
Adolescent SRH Indicators

Age of sexual debut and first marriage

- Half of Mombasa County women (20-49 years old) and men (20-54 years old) first had sex by age 18. Therefore, men in Mombasa first had sex one year later than at the national level. Whereas, for the women, it is the same as the national trend.
- Half of Mombasa County women (25-49 years old) first married by age 21 and half of the men (30-54 years old) by age 28. At the national level, women and men in the same age groups first married by age 20 and 25, respectively.

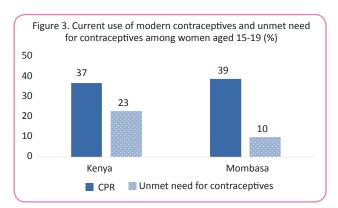
Teen pregnancy

- About 1 in 5 (17%) girls aged 15-19 years in Mombasa County have begun childbearing; about the same as the national level (Figure 2). Specifically, 5% are pregnant with their first child and 11.6% have ever given birth compared to 3.4% and 14.7%, respectively, at the national level.
- Mombasa County's age specific fertility rate for girls aged 15-19 (adolescent birth rate) is 81 births per 1000 girls; lower than at the national level (96).



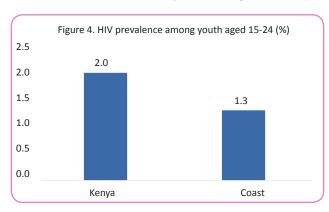
Contraceptive use among adolescents

- Teenage pregnancies often result from low use of contraceptives and/or unmet need for contraceptives. In Mombasa County, 39% currently married girls aged 15-19 use modern contraceptives; about the same as the national level (Figure 3).
- However, unmet need for contraceptives among currently married adolescents in Mombasa is lower than the national level. One in ten (10%) currently married girls in Mombasa aged 15-19 would like to avoid pregnancy but are not using a modern contraceptive method compared to 23% at national level.



HIV prevalence and prevention among adolescents

 At regional level, 1.3% of youth aged 15-24 in the former Coast province, where Mombasa County is located, have HIV. This is lower than the national youth HIV prevalence rate but higher than in some regions where the rates are 1% or lower (Central and Eastern provinces) (Figure 4).



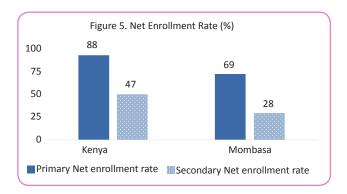
- One of the most effective ways of preventing Sexually Transmitted Infections and HIV is through correct and consistent use of condoms during sex.
- In the former Coast province, where Mombasa County is located, a considerable proportion of young people practice safe sex but a considerable proportion also engage in risky sex particularly young women. In 2014, 49% of never married young women aged 15-24 used a condom during their last sexual encounter. Whereas, 72% of never married young men aged 15-24 used a condom during their last sexual encounter.

 This means that between 30 and 50% 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.
- Only 69% of children in the official primary school-age enrolled in primary school in Mombasa County.
- In addition, only about a quarter (28%) of 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 wellbeing. It is also often linked
 to girl child marriage which also has long-term negative
 effects on women's health and wellbeing.
- Mombasa County is one of the Counties in Kenya where female circumcision is not practiced.

References

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