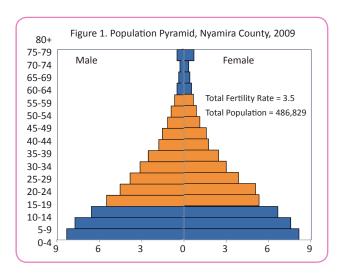




Introduction

Nyamira County has a youthful population with people below age 15 making up 44% of the total population (Figure 1). This is mainly because many more people are added to the population than the number of people dying.



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. One in four (25%) people in Nyamira County is an adolescent aged 10-19.

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

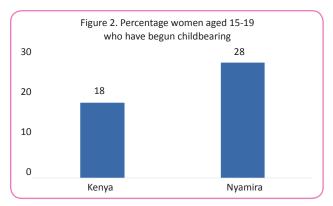
Adolescent SRH Indicators

Age of sexual debut and first marriage

- Half of Nyamira County women (20-49 years old) and men (20-54 years old) first had sex by age 17 and 18, respectively.
 At national level, women and men in the same age groups first had sex at age 18 and 17, respectively.
- Half of Nyamira County women (25-49 years old) first married by age 20 and half of the men (30-54 years old) by age 25. This trend is the same as that at the national level.

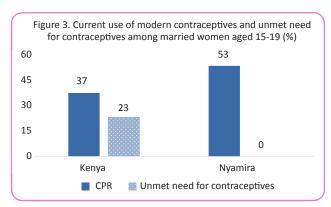
Teen pregnancy

- More than a quarter (28%) of girls aged 15-19 years in Nyamira County have begun childbearing, which is considerably higher than the national rate (Figure 2).
 Specifically, 4.3% are pregnant with their first child and 23.5% have ever given birth compared to 3.4% and 14.7%, respectively, at the national level.
- Nyamira County's age specific fertility rate for girls aged 15-19 (adolescent birth rate) is 133 births per 1000 girls, which is higher than the national rate (96).



Contraceptive use among adolescents

- Teenage pregnancies often result from low use of contraceptives and/or unmet need for contraceptives.
 About half (53%) of currently married girls aged 15-19 in Nyamira County use contraceptives which is higher than the national rate of 37% (Figure 3).
- Current estimates of unmet need for contraceptives among currently married girls aged 15-19 in Nyamira county show no unmet need. However, as more girls 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.



*Contraceptive use rates among adolescents may not reflect the true rates because adolescents' reports are likely to be influenced by societal views about the appropriateness of contraceptive use among adolescents

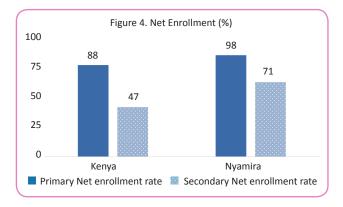
HIV prevalence and prevention among adolescents

- County level HIV data are not yet available. At regional level, 6.2% of youth aged 15-24 in the former Nyanza province, where Nyamira County is located, have HIV. This is 3 times higher than the national youth HIV prevalence rate (2%). The region hosts the highest HIV rate among youth and in the general population in the country.
- One of the most effective ways of preventing Sexually Transmitted Infections and HIV is through correct and consistent use of condoms during sex.
- In Nyanza region, where Nyamira County is located, a
 considerable proportion of young people practice safe sex
 but a considerable proportion also engage in risky sex. In
 2014, 69% of never married women used a condom during
 their last sexual encounter. Whereas, 81% of never married
 men used a condom during their last sexual encounter.
- This means that between 20 and 30% of never married young people in the region did not use a condom during their last sexual encounter. This is of particular concern given the high HIV prevalence in the region.

Other important indicators Education outcomes

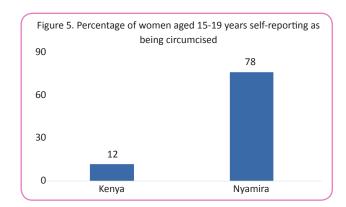
 Education is an important determinant for sexual and reproductive health particularly among girls. Girls who complete secondary and higher education have better sexual and reproductive health outcomes – they are less likely to have unwanted pregnancies and more likely to have higher socio-economic status.

- Nyamira County is performing well on primary and secondary school enrollment. Nearly all (98%) children in the official primary school-age are enrolled in primary school.
- In addition, 71% of children in the official secondary schoolage 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 4).



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.
- More than three-quarters (78%) of girls aged aged 15 -19 in Nyamira County report that they have undergone female circumcision compared to the national rate of 12% (Figure 5).



References

- 1. Berg, R. C., Underland, V., Odgaard-Jensen, J., Fretheim, A. and Vist, G.E. 2014. Effects of female genital cutting on physical health outcomes: a systematic review and meta-analysis. BMJ Open. 2014 Nov 21;4(11).
- 2. Kenya National Bureau of Statistics (KNBS), Ministry of Health (MoH), National AIDS Control Council (NACC), et al. 2015. Kenya Demographic and Health Survey 2014.
- 3. Kenya National Bureau of Statistics (KNBS). 2010. 2009 Kenya population and housing census.
- 4. National AIDS and STI Control Programme (NASCOP). 2014. Kenya. Kenya AIDS Indicator Survey 2012: Final Report.
- 5. The Ministry of Education, Science and Technology (MoEST). 2015. 2014 Basic Education Statistical Booklet.



