Introduction

Isiolo County has a population of just over 143,000 people. Almost about half of the population is aged below 15, 16% are aged under 5 and 24% are aged 10-19. A woman in Isiolo County can expect to have 5 children in her lifetime, which is also referred to as the total fertility rate. Isiolo County’s total fertility rate (4.9) is higher than the national rate of 3.9 and also means that Isiolo County has a high birth rate. The adolescent birth rate is also high – more than 1 in every 10 babies is born to an adolescent girl aged 15-19.

Isiolo County is one of 15 Counties that account for over 60% of maternal deaths in Kenya. The latest estimate of the County’s maternal mortality ratio (MMR) is 790 deaths per 100,000 live births. Child death rates in Isiolo County mirror the national trend although the neonatal death rate is slightly higher and infant and under five death rates are slightly lower. High maternal and child death rates are linked to high birth rates and limited access to life saving maternal and child health interventions.

Policy and legal context

Kenya has favorable policy and legal frameworks that promote reproductive, maternal, child and adolescent health and rights. These frameworks include the Constitution (2010), Kenya Health Policy (2014-2030), Kenya RMNCAH Investment Framework (2016), the National Reproductive Health policy (2007), and the Adolescent Sexual and Reproductive Health policy (2015).

Maternal health

Contraceptive use and unmet need

Use of contraceptives for prevention of unintended pregnancies averts 30% of maternal deaths and improves...
child survival. About one in four (26%) of currently married women aged 15-49 in Isiolo County use a modern contraceptive method compared to the national rate of 53% (Figure 1). Unmet need for contraceptives, refers to the proportion of women who would like to avoid pregnancy but are not using a modern contraceptive method. About one in three (30%) currently married women age 15-49 in Isiolo County have an unmet need for contraceptives, which is about twice as high as the national rate of 17%.

Number of antenatal care visits
Antenatal care is helpful in identifying adverse pregnancy outcomes, when it is sought early in the pregnancy and is continued until delivery. The World Health Organization recommends that women should have at least 4 antenatal care visits during each pregnancy. County data on antenatal care is not available. In Eastern region where Isiolo County is located, only 56% of women of reproductive age receive antenatal care at least 4 times during pregnancy, which is about the same as the national rate (Figure 2).

Place of delivery
Birth-related complications are reduced when women give birth in a health facility. In Isiolo County, only about two in five (42%) births are delivered in a health facility compared to the national rate of 61%.

Assistance by a skilled provider during delivery
Obstetric care from a health professional during delivery is critical in reducing maternal and neonatal mortality. In Isiolo County, about two in five (44%) births are delivered by a skilled birth attendant compared to 62% at the national level (Figure 3).

Prevention of mother-to-child transmission (PMTCT)
PMTCT is an intervention aimed at preventing the transmission of HIV from mother to child and is an important intervention towards efforts to eliminate new HIV infections. The PMTCT initiative provides drugs, counseling and psychological support to help mothers safeguard their infants against the virus. Without any intervention, the risk of transmission of infection from the mother to the baby is 20-45%. PMTCT can reduce HIV transmission to less than 2%.

County and regional data on PMTCT coverage is not available. At national level, 74% of pregnant women living with HIV are receiving the most effective antiretroviral medicines for PMTCT. There is need to improve PMTCT coverage given that Kenya is among the top 20 high HIV burden countries in the world and contributes 5% of children aged 0-14 living with HIV and 5% of new HIV infections among children aged 0-14.
The HIV prevalence rate in Eastern South region, where Isiolo County is located, is low at 3.9% relative to the national rate of 5.6%. Although, urban parts of the region (4.8%) and women (5.3%) have disproportionately higher HIV prevalence rates relative to rural areas (3.6%) and men (2.3%).

**Abortion rates**
Unsafe abortion is one of the main causes of maternal deaths. A national study conducted in 2012, estimated that the induced abortion rate per 1000 women of reproductive age (15-49 years) and the Induced Abortion Ratio per 100 live births in Kenya is 48 and 30, respectively (Table 2). In Eastern region, where Isiolo County is located, the estimated induced abortion rate and ratio are 20 and 13, respectively, which are notably lower than the national induced abortion rate and ratio. The study also found that 86% of women who presented to the health facility for post-abortal care were suffering from complications of unsafe abortion.

<table>
<thead>
<tr>
<th>Number of women (in 000’s) of reproductive age (15-49)</th>
<th>Induced Abortion Rate per 1,000 women of reproductive age</th>
<th>Induced Abortion Ratio per 100 live births</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>9600</td>
<td>48</td>
</tr>
<tr>
<td>Eastern</td>
<td>1382</td>
<td>20</td>
</tr>
</tbody>
</table>

**Child health**

**Universal immunisation**
Universal immunisation of children against six common vaccine-preventable diseases (tuberculosis, diphtheria, whooping cough (pertussis), tetanus, polio, and measles), is crucial to reducing infant and child mortality. The vaccination coverage in Isiolo County is performing favourably relative to the national vaccination rates with coverage rates of some vaccination higher than the national coverage and nearly universal (Figure 4).

**Nutrition status for children under five years**
Adequate nutrition is critical to children’s growth and development. The period from birth to age 2 years is especially important for optimal physical, mental, and cognitive growth, health, and development. Stunting (height-for-age), wasting (weight-for-height) and underweight (weight-for-age) are indicators of nutritional status of children. In Isiolo County, about one in five (19%) children are recorded to have stunted growth, 9% as wasting and 13% as underweight (Figure 5). Isiolo County’s stunting rate is notably lower than the national rate but the county’s wasting and underweight rates are higher than the national rates.
Figure 5. Nutrition Status for children under five years (%)

Acute respiratory infection (ARI)
Acute respiratory infection (ARI) is a leading cause of childhood morbidity and mortality across the world. Early diagnosis and treatment with antibiotics can reduce the number of deaths caused by ARI. The ARI rate in Isiolo (11%) is higher than the national rate (9%).

Fever
Fever is a major symptom of malaria, a life threatening disease, and other acute infections in children. The fever prevalence rate among children under age five in Isiolo County is 13% compared to the national rate of 24%. Advice or treatment from a health facility or provider was sought for three in four (75%) children with fever, which is higher the national rate (63%).

Prevalence of diarrhoea
Dehydration caused by severe diarrhoea is a major cause of morbidity and mortality among young children. Seven percent (7%) of children under five years are reported to have diarrhoea in Isiolo County, which is about two times lower than the national rate of 15%. Prompt treatment, including oral rehydration therapy, is important in treating diarrhoea. In Eastern region, where Isiolo is located, advice or treatment from a health facility or provider was sought for only 57% of children with diarrhoea.

References
6. UNFPA 2014. Counties with the Highest Burden of Maternal Mortality