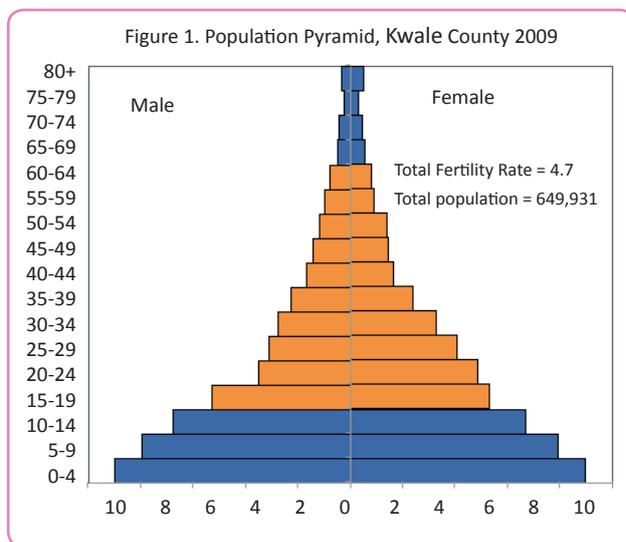




# ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH IN KWALE COUNTY

## Introduction

Kwale County has a youthful population with people below age 15 making up nearly half (47%) of the total population (Figure 1). This is mainly because many more children are added to the population than 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. About 1 in 4 (24%) people in Kwale County are adolescents aged 10-19.

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

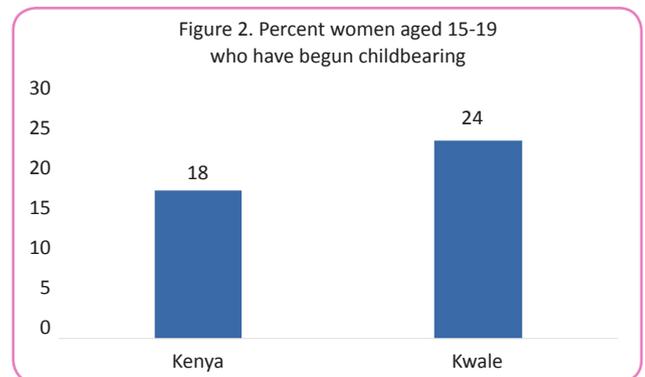
## Adolescent SRH Indicators

### Age of sexual debut and first marriage

- Half of Kwale County women (20-49 years old) and men (20-54 years old) first had sex by age 17 and 19, respectively. Therefore, women in Kwale County first had sex one year earlier than the national trend. Whereas the men first had sex two years later than at the national level.
- Half of Kwale County women (25-49 years old) first married by age 19 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

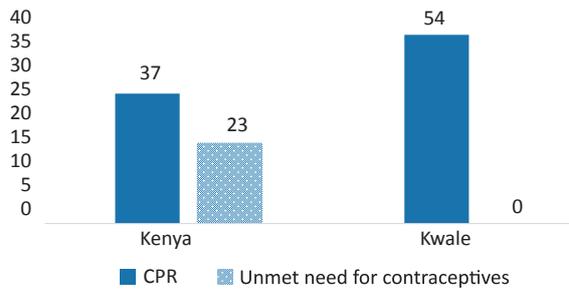
- 24% of girls aged 15-19 years in Kwale County have begun childbearing; higher than the national level (Figure 2). Specifically, 5% are pregnant with their first child and 19% have ever given birth compared to 3.4% and 14.7%, respectively, at the national level.
- Kwale County's age specific fertility rate for girls aged 15-19 (adolescent birth rate) is 126 births per 1000 girls; considerably higher 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 Kwale County, 54% currently married girls aged 15-19 use modern contraceptives which is high compared to 37% at national level (Figure 3).
- Current estimates of unmet need for contraceptives among currently married girls aged 15-19 in Kwale County shows no unmet need. However, this may be due to demand-side barriers to contraceptives such as myths and misconception about use of modern contraceptives which when addressed could lead to a rise in unmet need.

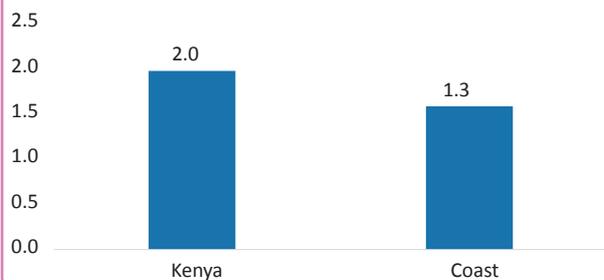
Figure 3. Current use of modern contraceptives and unmet need for contraceptives among married women aged 15-19 (%)



### HIV prevalence and prevention among adolescents

- County level HIV data are not yet available. At regional level, 1.3% of youth aged 15-24 in the former Coast province, where Kwale 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).

Figure 4. HIV prevalence among youth aged 15-24 (%)



- One of the most effective ways of preventing Sexually Transmitted Infections and HIV is through correct and consistent use of condoms during sex.
- In former Coast province, where Kwale 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, only 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.

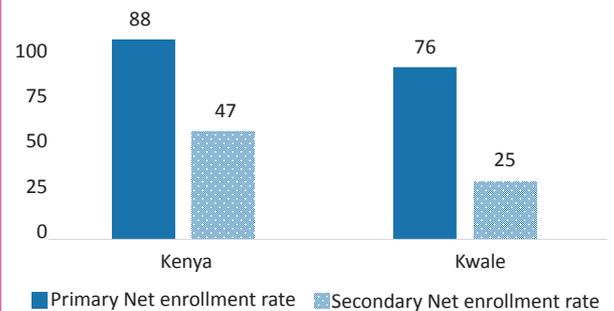
- This means that between 30 and 50% of never married young people in the region did not use a condom during their last sexual encounter.

## 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.
- About three-quarters (76%) of children in the official primary school-age are enrolled in primary school in Kwale County (Net enrollment rate).
- However, only a quarter (25%) 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).

Figure 5. Net Enrollment Rate (%)



### 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.
- Kwale County is one of the counties in Kenya where female circumcision is **not** practiced.

## References

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