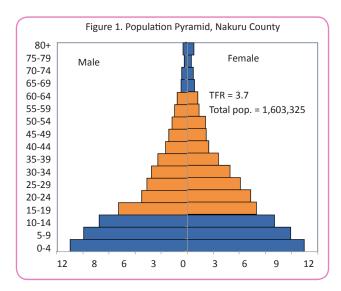


ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH IN NAKURU COUNTY

Introduction

Nakuru County has a youthful population with people below age 15 making up 42% 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 5 (22%) of people in Nakuru County are adolescents aged 10-19.

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

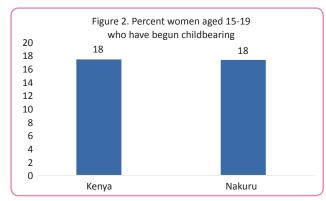
Adolescent SRH Indicators

Age of sexual debut and first marriage

- Half of Nakuru County women (20-49 years old) and men (20-54 years old) first had sex by age 19 and 17, respectively. Therefore, women in Nakuru County first had sex one year later than the national trend. Whereas the trend among the men is similar to that at the national level.
- Half of Nakuru County women (25-49 years old) first married by age 21 and half of the men (30-54 years old) by age 26.
 At the national level, women and men in the same age groups first married by age 20 and 25, respectively.

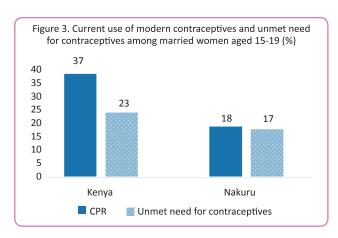
Teen pregnancy

- One in 5 (18%) girls aged 15-19 years in Nakuru County have begun childbearing; similar to the national level (Figure 2). Specifically, 5% are pregnant with their first child and 13.4% have ever given birth compared to 3.4% and 14.7%, respectively, at the national level.
- Nakuru County's age specific fertility rate for girls aged 15-19 (adolescent birth rate) is 69 births per 1000 girls; lower than at the national level (96).



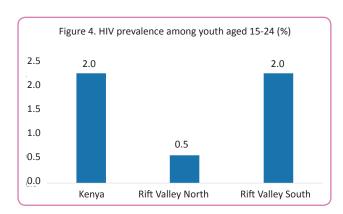
Contraceptive use among adolescents

- Teenage pregnancies and birth rates can partly result from high unmet need for contraceptives. In Nakuru County, only 18% currently married girls aged 15-19 use modern contraceptives which is low compared to 37% at national level (Figure 3).
- Unmet need for contraceptives among currently married adolescents in Nakuru is lower than the national level.
 17% of currently married girls 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

 County level HIV data are not yet available. At regional level, 2% of youth aged 15-24 in the former Rift Valley South, where Nakuru County is located, have HIV. This is similar to the national youth HIV prevalence rate, but considerable higher than the rate in other regions including Rift Valley South (0.5%) (Figure 4). The region hosts one of the lowest HIV rate among youth and in the general population in the country.



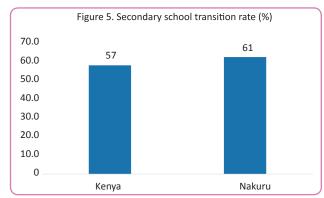
- One of the most effective ways of preventing Sexually Transmitted Infections and HIV is through correct and consistent use of condoms during sex.
- In former Rift Valley province, where Nakuru County is located, a considerable proportion of young people practice safe sex but a considerable proportion also engage in risky sex particularly young women. In 2014, 52% of never

- married young women aged 15-24 used a condom during their last sexual encounter. Whereas, 68% 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.
- Nakuru County is doing well on primary school enrollment.
 Nearly all (99%) children in the official primary school-age are enrolled in primary school (Net enrollment rate).
- However, about only 61% of students in primary school transition to secondary school (Figure 5). This is marginally higher than the national trend.



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

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