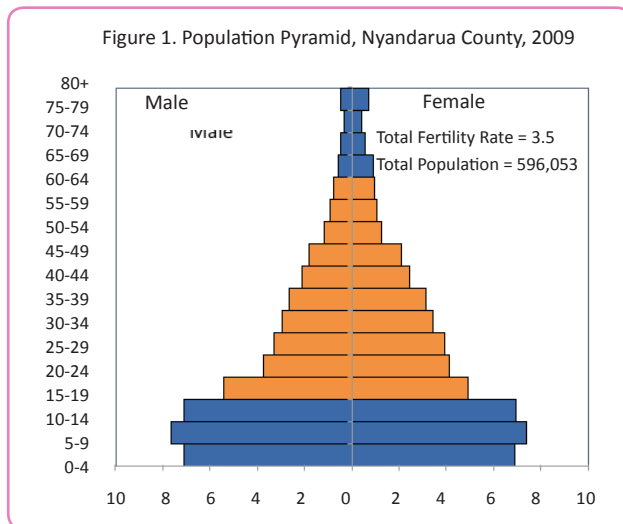




ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH IN NYANDARUA COUNTY

Introduction

Nyandarua County has a youthful population with people below age 15 making up 43% of the total population (Figure 1). This is mainly because many children are added to the population than the number of people who are dying. Out-migration is likely also contributing to a high proportion of children in the 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 4 (24%) people in Nyandarua County are adolescents aged 10-19.

This fact sheet highlights the status of adolescent SRH in Nyandarua 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 favorable policy and legal frameworks that promote adolescent SRH and SRH rights. These frameworks include 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).

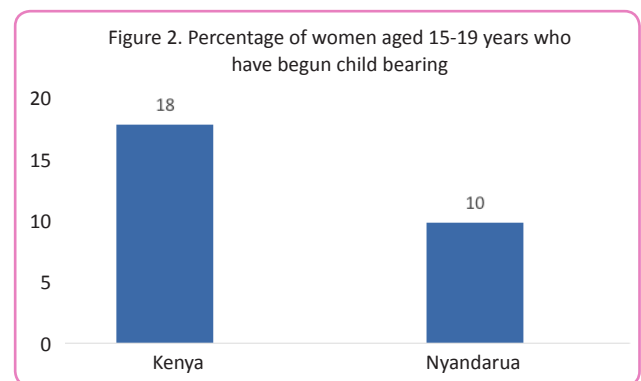
Adolescent SRH Indicators

Age of sexual debut and first marriage

- Half of Nyandarua County women (20-49 years old) and men (20-54 years old) first had sex by age 19 and 18, respectively. Therefore, women and men in Nyandarua County first had sex one year later than the national trend.
- Half of Nyandarua 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

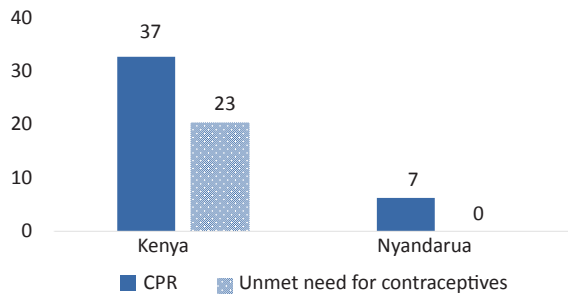
- One in ten (10%) of girls aged 15-19 years in Nyandarua County have begun childbearing; considerably lower than the national level (Figure 2). Specifically, 5.7% are pregnant with their first child and 4% have ever given birth compared to 3.4% and 14.7%, respectively, at the national level.
- Nyandarua County's age specific fertility rate for girls aged 15-19 (adolescent birth rate) is 48 births per 1000 girls; considerably 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 Nyandarua County, only 7% of currently married girls aged 15-19 use modern contraceptives which is lower than the national average of 37% (Figure 3).
- Current estimates of unmet need for contraceptives among currently married girls aged 15-19 in Nyandarua County shows no unmet need.

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



HIV prevalence and prevention among adolescents

- County level HIV data are not yet available. At regional level, 1% of youth aged 15-24 in the former Central province, where Nyandarua County is located, have HIV. This is lower than the national youth HIV prevalence rate.
- One of the most effective way of preventing Sexually Transmitted Infections and HIV is through correct and consistent use of condoms during sex.
- In the former Central province, where Nyandarua County is located, a considerable proportion of young people practice safe sex but a considerable proportion also engage in risky sex. In 2014, 75% of never married young women aged 15-24 used a condom during their last sexual encounter. Whereas, 79% of never married young men aged 15-24 used a condom during their last sexual encounter.
- This means that between 20 and 25% of never married young people in the region did not use a condom during their last sexual encounter.

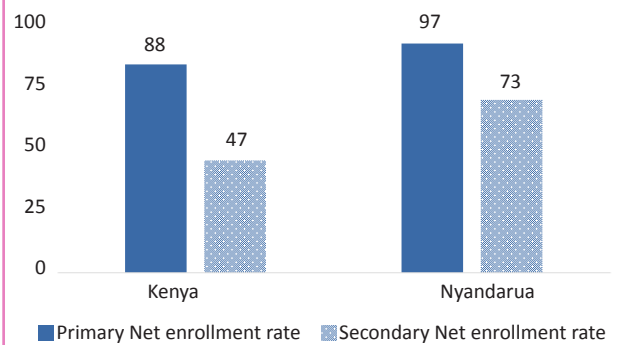
Other important indicators

Education outcomes

- Education is an important determinant for sexual and reproductive health and general wellbeing, 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.
- Nyandarua County is doing well on primary and secondary school enrollment. Nearly all (97%) children in the official primary school-age enrolled in primary school (Net enrollment rate).

- However, about three-quarter (73%) 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 4).

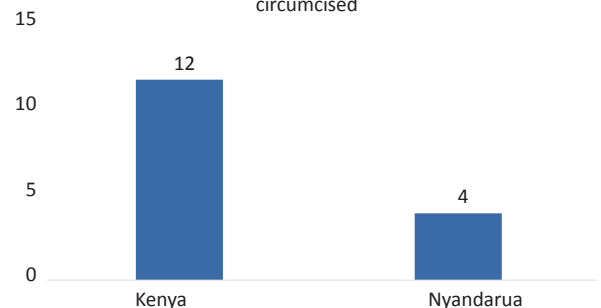
Figure 4. Net Enrollment Rate (%)



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.
- Only 4% of women aged 15-19 in Nyandarua County self-reported as being circumcised. This is notably lower than the national level (Figure 5).

Figure 5. Percentage of women aged 15-19 self reporting as circumcised



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.