

ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH IN TURKANA COUNTY

Introduction

Turkana County has a youthful population with people below age 15 making up 46% of the total population (Figure 1). This is mainly because many more children are added to the population than people dying. Notably, there is a decline in the population aged 0-9 years.



Turkana County's 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 one-third (31%) of people in Turkana County are adolescents aged 10-19.

This fact sheet highlights the status of adolescent SRH in Turkana 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 both Turkana County women (20-49 years old) and men (20-54 years old) first had sex by age 18.

Therefore, women in Turkana County first had sex at the same age as at the national level. Whereas men in Turkana have sex one year later than the national trend.

• Half of Turkana County women (25-49 years old) first married by age 19 and half of the men (30-54 years old) by age 24. At the national level, women and men in the same age groups first married by age 20 and 25, respectively.

Teen pregnancy

- One out of five (20%) girls aged 15-19 in Turkana County have begun childbearing; marginally higher than the national level (figure2). Specifically, 2.6% are pregnant with their first child and 17.6% have ever given birth compared to 3.4% and 14.7% respectively, at the national level.
- Turkana County's age specific fertility rate for girls aged 15-19 (adolescent birth rate) is 135 births per 1000 girls; considerably higher than at the national level (96).



Contraceptive use among adolescents

- Teenage pregnancies partly result from high unmet need for contraceptives. In Turkana County, none of the currently married girls aged 15-19 use modern contraceptives.
- There is also no unmet need for contraceptives among currently married girls aged 15-19. This is the proportion of currently married girls who would like to avoid pregnancy but are not using a modern contraceptive method compared to 23% at national level.
- This trend mirrors that in contraceptive use and unmet need for contraceptives among women of reproductive age (15-49 years) in Turkana County, which is generally low. Among young women aged 20-24 who are currently married in Turkana County, 4% use a modern contraceptive method and 19% have an unmet need for contraceptives compared to 50% and 19%, respectively, at national level (Figure 3).



HIV prevalence and prevention among adolescents

- County level HIV data are not yet available. At regional level, 0.5% of youth aged 15-24 in the former Rift Valley North, where Turkana County is located, have HIV. This is 4 times lower than the national youth HIV prevalence rate. 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 the former Rift Valley province, where Turkana County is located, considerable proportion of young people practice safe sex but a considerable proportion also engage in risky sex. 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.
- Turkana County is not doing so well on primary school enrollment. Just over half (59%) of children in the official

primary school-age are enrolled in primary school (Net enrollment rate).

- In addition, only 16% of students in primary school transition to secondary school (Figure 4). This is much lower than the national trend.
- Moreover, girls are at risk of dropping out of secondary school; 12% of primary school girls transition to secondary school compared to 18% of primary school boys.



Female circumcision among adolescents

- Female circumcision, commonly referred to as Female Genital Mutilation or Cutting is linked to obstetric complications and gynecological problems, and longterm 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.
- About one in 10 (8%) girls aged 15-19 self-reporting that they have undergone female circumcision. This is marginally lower than the national level (12%) (Figure 5).



References

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