

Children, Youth and Women Sensitive Planning and Budgeting in Kenya: Garissa County Brief, 2014/15-2017/18



County Government of Garissa

KEY HIGHLIGHTS OF THE BRIEF

This brief provides an analysis on how the County Government of **Garissa** budgets for the needs of children, youth and women. The analysis focused on social sector budgets and actual expenditures for the period 2014/15-2017/18. The brief specifically focuses on health, education, social and child protection services, nutrition, water and sanitation. The analysis was based on budget data and information collected through interviews with relevant county stakeholders. The key highlights from the analysis are summarized below.

- a) **An estimated 48 per cent of the Gross County Product (GCP)¹ of Garissa County is derived from the services sector and accounts for 0.25 per cent of the National GDP while agriculture contributed 43 per cent of the GCP and 0.22 per cent of the national GDP in 2017.** Although the agriculture sub-sector, particularly livestock keeping, is the main source of livelihood, its productivity is vulnerable to weather shocks, resulting in unpredictable economic growth trends. Moving forward, the county needs to promote adoption of climate-smart farming techniques and agro-pastoralism, and promote diversification of the agriculture sector to include drought-tolerant and adaptive crops. The county needs to invest in irrigation systems and enhance access to agriculture markets to enhance the productivity of the agriculture sector.
- b) **The county's own source revenue averaged 1 per cent of the county's total revenue, while equitable share transfer accounted for 89 per cent of the county's total revenue between 2014 and 2018.** In nominal terms, own source revenue increased from Ksh 35.90 million in 2013/14 to Ksh 130.72 million in 2014/15, steadily declining to Ksh 86.70 million in 2017/18 but increasing to Ksh 86.7 million in 2017/18. Equitable share transfer increased from Ksh 4.22 billion to Ksh 6.70 billion over the period under review. There is need for the county to identify opportunities for optimizing own source revenue potential, strengthening the institutional and legal frameworks for own source revenue, and improving counties capacities for revenue collection and administration.
- c) **The county health expenditure increased from Ksh 1.4 billion in 2014/15 to Ksh 2.3 billion in 2017/18.** The 11 per cent increase in health budget as a share of total budget from 18 per cent in 2014/15 to 29 per cent in 2016/17 contributed to improvement of the health outcomes. The proportion of women accessing a skilled birth attendant during skilled increased from 38.3 per cent in 2014 to 55.3 per cent in 2018, and the share of fully immunized children in the county increased from 63.2 per cent in 2014 to 78.5 per cent in 2018. Irrespectively, the county needs to reorient the public health interventions and tailor them to address the barriers constraining uptake of maternal services given the high under 5 mortality rate of 129 deaths per 1,000 live births and maternal mortality rates of 646 per 100,000 live births.
- d) **The budget for Early Childhood Development Education (ECDE) increased from Ksh 0.3 billion in 2014/15 to Ksh 0.6 billion in 2017/18.** The gross ECDE enrolment rate in the county decreased from 24.9 per cent in 2014 to 12.3 per cent in 2018 and net enrolment decreased from 9.6 per cent to 4.4 per cent over the same period. The challenge for the county is incorporation of pastoralism lifestyle and education. The county needs to ensure equitable distribution and effective utilization of available resources. Additionally, the county needs to increase ECDE budget allocation to address the shortage of staff and inadequacy of ECDE facilities.
- e) **The budget for WASH declined from Ksh 1.34 billion in 2014/15 to Ksh 0.72 billion in 2017/18.** The county recorded fluctuating budget execution rates, with the highest of 89 per cent in 2016/17 and a lowest of 49 per cent in 2017/18, constraining the provision of WASH services. An estimated 40 per cent and 55 per cent of the county lacks access to improved water and sanitation, respectively. Increasing WASH financing, national and county government

adherence to disbursement schedules and strengthening procurement systems is pivotal in meeting the county's target of increasing access to improved water and sanitation, hence reducing communicable diseases burden.

- f) **The county's allocation to child protection, youth and women decreased from Ksh 90 million in 2014/15 to Ksh 70 million in 2015/16, but increased to Ksh 90 million in 2017/18.** On child protection, the county recorded a high number of reported cases of child neglect and abandonment, increasing from 6 cases in 2014 to 2,159 cases in 2018, yet there is no specific budget line for this. Two cases of female genital mutilation were reported in 2018. Looking forward, the county needs to increase allocation to child protection given the high levels of child neglect, abandonment and child labour, and expand relevant social services to reach vulnerable girls as a protective measure against early pregnancies, female genital mutilation (FGM), early and/or forced marriages.
- g) **The county spending on nutrition (direct nutrition interventions) in nominal terms increased from Ksh 120 million in 2014/15 to Ksh 210 million in 2016/17 but declined to Ksh 101 million in 2017/18.** The proportion of stunted, wasted and underweight children was estimated at 16 per cent, 11 per cent and 13 per cent, respectively. The county should ensure that direct nutrition interventions across several sectors such agriculture, education and health are budgeted for, with visible budget lines. Moreover, nutrition should be well articulated in the County Integrated Development Plans.
- h) **The budget execution rate for most social sector budgets, especially health, water and sanitation, was low. For instance, budget execution rates for child protection, youth and women declined from 62 per cent in 2015/16 to 34 per cent in 2017/18.** The low budget execution rate was partly because approved budgets were not released on time by the National Treasury. Procurement and cash flow planning by the county was also weak. To improve budget utilization rates, there is need for the National Treasury to adhere to disbursement schedules by releasing resources on time. On its part, the county should strengthen procurement systems and improve cash flow forecasting.
- i) **The county has not significantly prioritized investments in disaggregated data.** Limited collection and utilization of disaggregated data means women's domestic care work is not measured in the economy. The county will need to prioritize investment in disaggregated data collection and management, and apply the utilization of data in evidence-based planning, budgeting, monitoring and service delivery. There is need to apply disaggregated data to measure women's domestic/unpaid care work, understand the socio-economic implications of limited participation in the economy, and further develop social and economic policies and implement programmes that empower women.

1. COUNTY OVERVIEW

Garissa is 4th largest county in Kenya but with a relatively low population compared to other counties. The county occupies a land area of approximately 44,174 km² and is divided into 6 sub-counties and 30 wards. According to the 2019 census, the county's population is estimated 841,353, equivalent to 1.8 per cent of the national population.

Table 1: Garissa county administrative, poverty and demographic profile

Administrative Profile							Latest Available
Area (km ²)							44,174
Number of sub-counties							6
Number of wards							30
Overall poverty (%)							66%
Extreme poverty (%)							23.8%
Population (2019)							841,353
Group	Children	National Children	Youths	National Youths	Wo/men	National Wo/men	
Monetary Poor							
Male (%)	68.3%	42.1%	62.2%	29.1%	56.5%	30.5%	
Female (%)	66.8%	41.0%	61.9%	28.8%	65.9%	34.1%	
Total (%)	67.6%	41.6%	62.0%	28.9%	60.4%	32.4%	
Population	191,205	20,742,290	142,714	13,443,268	73,793	7,847,350	
Multidimensionally Poor							
Male (%)	65.2%	49.3%	50.6%	44.7%	66.3%	51.0%	
Female (%)	60.0%	47.1%	75.3%	49.4%	67.7%	60.8%	
Total (%)	62.7%	48.2%	64.4%	47.1%	66.3%	56.1%	
Population	191,205	20,742,290	142,714	13,443,268	73,793	7,847,350	

Source: Kenya National Bureau of Statistics (2018)

In 2015/16, the overall poverty rate of the county was 65.5 per cent, with 23.8 per cent living in extreme poverty, which is almost double the overall national rates of 36.1 per cent and 8.6 per cent, respectively. Among children, one in every seven were affected by monetary poverty or lack of financial means². Additionally, 62.2 per cent of youth and 65.9 per cent of women were also affected by monetary poverty. Moreover, 62.7 per cent of children were living in multidimensional poverty; that is, deprived in several areas including nutrition, healthcare, education, housing and drinking water.³ Levels of monetary poverty remained higher than national averages for children, youth and women. The overall high rates of poverty, especially among women means that planning and budgeting processes should consider human capital sectors so that the county can maximize on the productive and innovative potential of its future workforce and initiate a fast and sustainable growth trajectory.

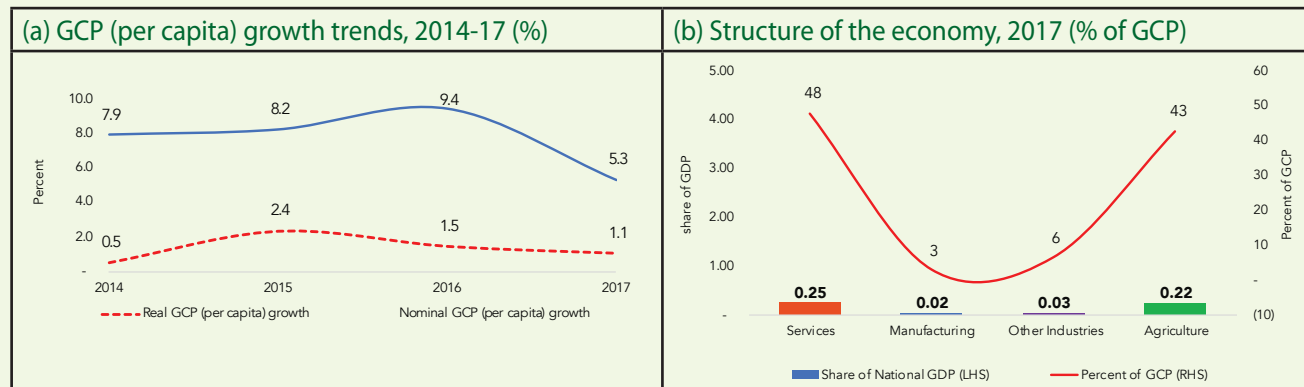
2. STATE OF COUNTY ECONOMY

2.1 Gross County Product Growth

Garissa County accounted for 0.6 per cent of the national GDP in 2017. Its Gross County Product (GCP) per capita growth rate fluctuated between a maximum of 2.4 per cent recorded in 2015 and a minimum of 0.5 per cent recorded in 2014 (Figure 1a). The downturn of the growth rate since 2016 was largely attributable to the prolonged droughts followed by floods.

The economy remains heavily reliant on service sectors and agriculture, particularly livestock keeping. The service sub-sectors account for 48 per cent of the GCP and 0.25 per cent of the National GDP, while the agriculture sector accounts for 43 per cent of the GCP and 0.22 per cent of National GDP as at 2017. Moving forward, the county needs to promote adoption of climate-smart farming techniques and agro-pastoralism, invest in irrigation systems and enhance access to agriculture markets to enhance the productivity of the agriculture sector. To increase agricultural productivity and the participation of women and youth within the sector, the county should put in place mechanisms to address land access barriers, reduce the cost of farming, enhance the marketing of agricultural produce and promote agricultural value chains. The county should also seek to attract more investments in manufacturing, and services, for a balanced economy. This can be done through collaboration with different sub-sectors, especially the private sector.

Figure 1: Garissa county gross county product and economic structure of Garissa county, 2014-17



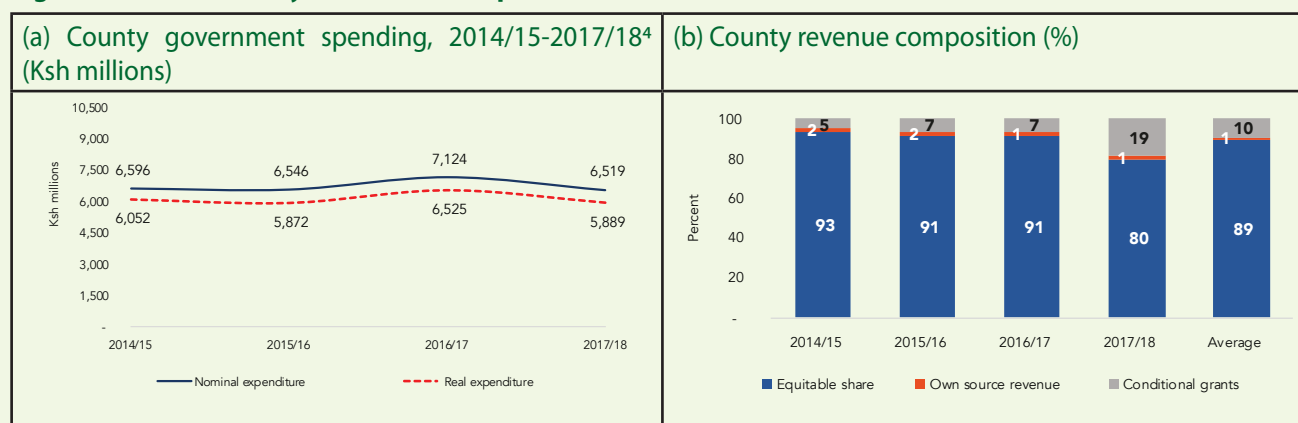
Source: KNBS (2019) Statistics

2.2 Overall Budget Performance

The county government annual budget grew from Ksh 6.05 billion to Ksh 6.53 billion between 2014/15 and 2016/17, but declined to Ksh 5.89 billion in 2017/18 (Figure 2a). The county budget is largely financed by government transfers, which account for, on average, 89 per cent over the period under review. In nominal terms, own source revenue increased from Ksh 35.90 million in 2013/14 to Ksh 130.72 million in 2014/15, steadily declined to Ksh 86.70 million in 2017/18 but increased to Ksh 86.7 million in 2017/18. Equitable share transfer increased from Ksh 4.22 billion to Ksh 6.70 billion over the period under review. The contribution of own source revenue averaged 1 per cent while conditional grants increased from 0.3 per cent in 2014/15 to 7.2 per cent in 2017/18. There is need for enhanced fiscal efforts to accelerate revenue mobilization from both local revenue and conditional grants.

The development share of the total budget decreased from 44 per cent in 2014/15 to 16 per cent in 2017/18. The recurrent expenditure constituting of personnel emoluments and operation and maintenance costs, averaged 69 per cent while the development expenditure averaged 31 per cent of county government spending over the period under review. This indicates that the Public Finance Management (PFM) Act 2012 provision that ceils development spending at a minimum of 30 per cent of total budget was violated in 2017/18, and the Regulations 2015 which require that not more

Figure 2: Garissa county revenue and expenditure trends, 2014/15-2017/18

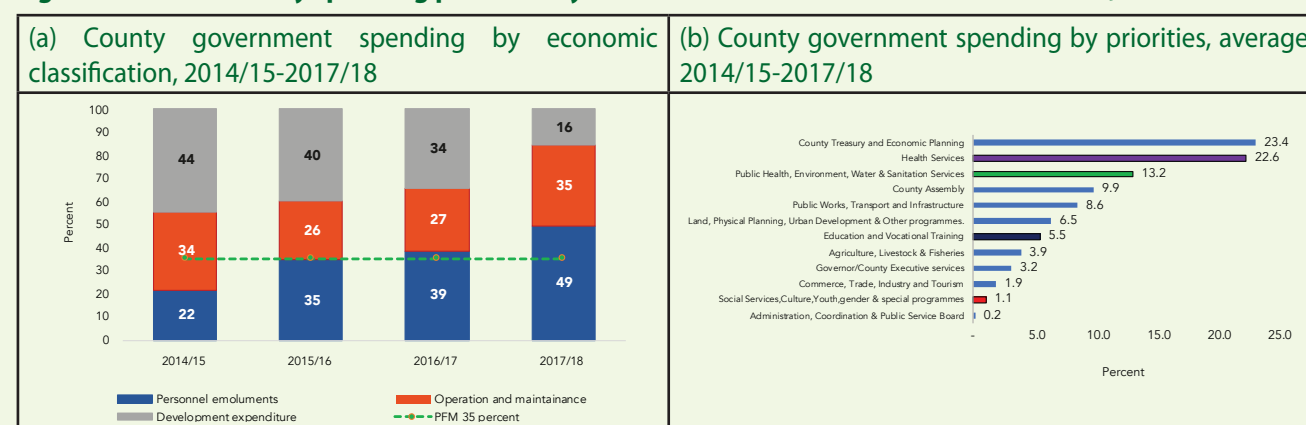


Source: Office of the Controller of Budget (Various) reports, 2014-2018

than 35 per cent of the county's total revenue should go to payment of wages and salaries was violated in actual spending since 2016/17.

The county spent over 56.9 per cent of total expenditure during the period under review on health, education, agriculture, nutrition, social protection, youth, gender, water and sanitation. These sectors are regarded as being more sensitive to the needs of children, youth and women. The effects of this expenditure on the various programmes and activities vary across sectors.

Figure 3: Garissa county spending priorities by economic and administrative classification, 2014/15-2017/18



Source: Controller of Budget reports, 2014-2018

3. ANALYSIS OF SOCIAL SECTOR SPENDING

3.1 Health

3.1.1 Health priorities

Health is a key spending priority of the county government, consuming about 22 per cent of the total budget in between the period 2014 and 2018. During this period, the sector's priorities included: elimination of communicable diseases; halting and reversing the burden of non-communicable conditions that was rising; minimizing the exposure of health risk factors and provision of health services; improving the quality of health services in existing facilities by equipping and improving the human resource base.

The number of women who had access to a skilled birth attendant during delivery increased from 38.3 per cent in 2014 to 55.3 per cent in 2018 but the rates remained below the national averages of 53.5 per cent in 2014 and 64.9 per cent in 2018. The proportion of pregnant women who attended at least one ante-natal clinic visit during pregnancy increased from 61 per cent on 2014 to 76.8 per cent in 2018. Maternal mortality rate per 100,000 live births was estimated to be 646 per 100,000 live births above the national average of 495 per 100,000 live births in 2016.

The health status of children within the county improved over the review period, although it remained below the national average in some key indicators. The share of fully immunized children in the county improved from 63.2 per cent in 2014 to

Table 2: Garissa county selected health sector performance indicators

Selected Health Indicators	2014		2015		2016		2017		2018	
	County	National	County	National	County	National	County	National	County	National
U5MR (death per 1,000 live births) 2016 Estimate	-	-	-	-	129.0	79.0	-	-	-	-
MMR (death per 100,000 live births) 2016 Estimate	-	-	-	-	646.0	495.0	-	-	-	-
Skilled birth attendant coverage (%) (source: DHIS2)	38.3	53.5	42.2	56.9	46.4	59.3	43.5	53.0	55.3	64.9
Proportion of pregnant women who attended at least one ANC visit during pregnancy (%) (Source: DHIS2)	61.0	76.4	60.4	75.4	67.9	76.9	61.1	73.7	76.8	81.9
Proportion of pregnant women who attended at least four ANC visit during pregnancy (%) (Source: DHIS2)	30.0	35.9	34.0	39.7	35.3	39.8	29.7	32.6	44.1	48.7
Proportion of children under one year who are fully immunized (%) (Source: DHIS2)	63.2	70.2	64.5	75.7	67.8	72.4	55.4	65.9	78.5	77.0
DPT/Hep+HiB3 dropout rate (%) (Source: DHIS2)	12.7	6.8	9.3	7.2	11.4	6.6	18.8	10.1	9.1	4.0
Still Birth Rate (Source : DHIS2)	26.2	29.3	28.6	22.6	23.7	21.5	19.1	22.6	23.3	20.4

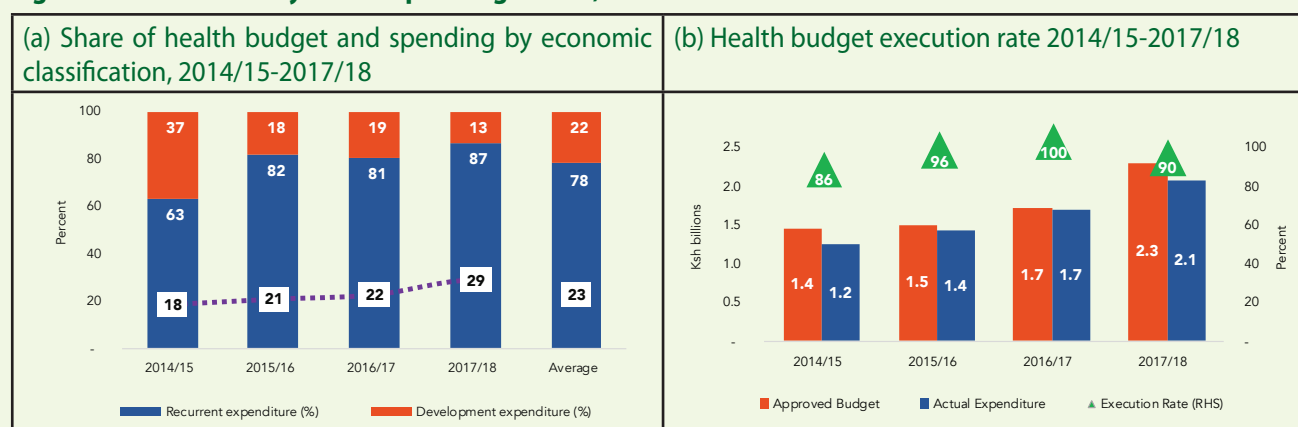
Source: Ministry of Health (2018), Demographic Health Information System (DHIS)

78.5 per cent in 2018. Under five mortality per 1,000 live births was estimated to be 129 against the national average of 79 in 2016.

3.1.2 Health budget and expenditure

The share of health budget in the total county budget allocation increased from 18 per cent to 23 per cent, composing of 78 per cent recurrent and 22 per cent development (Figure 4a). County health budget allocation increased from Ksh 1.4 billion in 2014/15 to Ksh 2.3 billion in 2017/18, while the absorption rate increased from 86 per cent in 2014/15 to 100 per cent in 2016/17 but declined to 90 per cent in 2017/18. The fluctuation in absorption rates is attributable to failure by the exchequer to release the full amount approved in the health budget.

Figure 4: Garissa county health spending trends, 2014/15-2017/18



Source: Office of the Controller of Budget (Various) reports, 2014-2018

3.1.3 Health medium term expectations

The county aims to continue investing in health, especially in child and maternal health by prioritizing quality of health infrastructure and human resources in all sub-counties. The county also aims to prioritize investing in reproductive health information, especially for the youth and undertake awareness campaigns on the importance of healthy practices. It also aims to continue investing in provision of quality health services by employment of more health service providers, construction of more health facilities and equipping the facilities.

The county will need to address various challenges during the next medium term. These include: limited access to medical and psychosocial support for survivors of gender-based violence (GBV); limited access to sexual and reproductive health services; long procurement processes; inadequate funds for purchasing antiretroviral drugs (ARVS); increased new cases of

HIV/AIDS in the county especially amongst the youth, and delays by the National Treasury in releasing funding to the sector and pending bills affecting the overall sector absorption rate.

3.2 Education and Vocational Training

3.2.1 Education sector priorities

The county governments are responsible for Early Childhood Development Education (ECDE) and youth polytechnics, which are part of Technical Vocational Education and Training (TVETs) as per Schedule IV of the Constitution of Kenya 2010. During the review period 2013-2017, the county education sector focused on supporting ECDE and youth polytechnics while the national government supported the primary, special needs, secondary and tertiary education levels.

Gross ECDE enrolment rate decreased from 24.9 per cent in 2014 to 12.3 per cent in 2018, with net enrolment rate (NER) decreasing from 9.6 per cent to 4.4 per cent during the same period. This was lower than national averages of 94.4 per cent and 63.5 per cent, indicating children are not reaching their developmental potentials in early age. Therefore, the county needs to find a strategy that incorporates the pastoralism lifestyle and education. More girls are enrolled in ECDE than boys in Garissa County. There is inequality in access to education between male and female school-going children in favour of girls in primary level and in favour of boys in secondary as shown in Table 3.

Table 3: Garissa county selected education sector performance indicators

Pre-primary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	24.9	73.6	12.3	94.4
Net enrolment ratio (%)	9.6	71.8	4.4	63.5
Male (%)	5.3	73.4	1.9	62.5
Female (%)	4.3	70.2	6.8	65.0
School size (Public) (Pupils) (Average)	158.0	75.0	76.0	85.0
Gender parity index (value)	0.8	1.0	-	-
Pupil-teacher ratio (No.) (Public)	105.0	31.0	41.0	31.0
Proportion of enrolment in private schools (%)	68.5	31.5	65.0	33.0
Primary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	27.4	104.0	59.1	107.2
Net enrolment ratio (%)	23.5	88.0	37.8	82.4
Male (%)	12.9	86.0	41.8	81.7
Female (%)	10.6	90.0	33.5	83.0
School size (Public) Average No. of pupils	494.0	338.0	266.0	375.0
Gender parity index (Value)	0.8	1.0	-	-
Pupil-teacher ratio (No.)	61.0	42.0	67.0	40.0
Proportion of enrolment in private schools (%)	58.0	16.0	58.0	16.0
Secondary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	6.6	58.7	43.9	66.2
Net enrolment ratio (%)	3.5	47.4	17.2	37.5
Male (%)	1.9	49.6	15.3	35.4
Female (%)	1.6	45.2	19.0	39.8
School size (Public)	-	-	774.3	392.0
Gender parity index (value)	0.5	0.9	-	-
Pupil-teacher ratio (No.) (TSC)	36.0	30.0	30.0	32.0
Pupil-teacher ratio (No.) (TSC and BOM)	20.4	20.2	21.0	20.0
Proportion of enrolment in private schools (%)	85.0	30.7	31.2	5.8

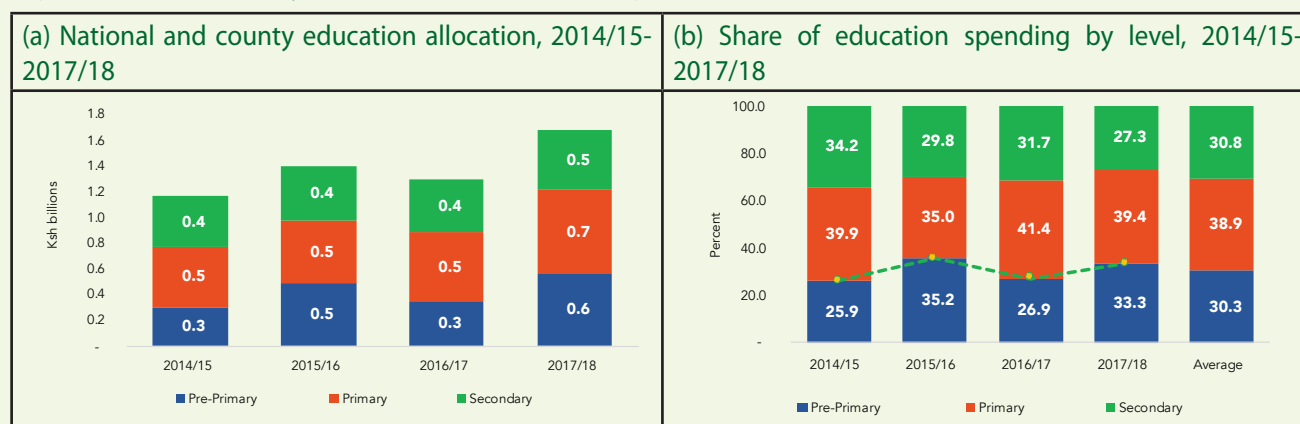
Source: Ministry of Education (Various), Education statistical booklets, 2013-2018

3.2.2 Education and vocational training budget and expenditure

Total spending on ECDE increased from Ksh 0.3 billion in 2014/15 to Ksh 0.46 billion in 2017/18. Spending comprised of, on average, 60 per cent development expenditure and 40 per cent recurrent expenditure during the period (Figure 6a). Spending in primary and secondary school level stagnated at Ksh 0.5 billion and 0.4 billion for three financial years (2014/15-2016/17). In 2017/18, spending increased in the overall education sector spending (Figure 5a), ECDE spending fluctuated at an average 30.3 per cent of the total education spending in the county (Figure 5b).

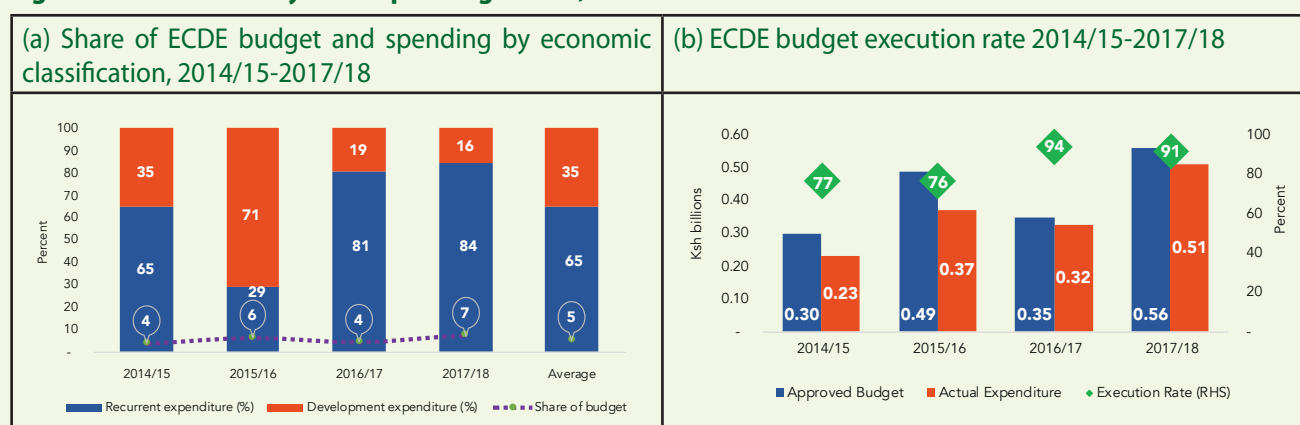
The share of ECDE budget in the total county budget allocation increased from 4 per cent in 2014/15 to 7 per cent in 2017/18. The spending comprised of 35 per cent development and 65 per cent recurrent (Figure 6a). The absorption rates fluctuated over the period under review, recording a highest of 94 per cent in 2016/17 to lowest of 76 per cent in 2015/16.

Figure 5: Garissa county overall education spending trends, 2014/15-2017/18



Source: National Treasury (Various), IFMIS

Figure 6: Garissa county ECDE spending trends, 2014/15-2017/18



Source: Office of the Controller of Budget (Various) reports, 2014-2018

The absorption rate increased from an average 77 per cent in 2014/15 to 96 per cent in 2016/17, before dropping to 91 per cent in 2017/18.

3.2.3 Education medium term expectations

The county aims to continue improving quality and access of ECDE through: procurement of learning materials and outdoor/indoor play equipment; strengthening of ECDE teachers' and officers' capacities on curriculum delivery; and strengthening of ECDE management and administration. For Vocational Training Centres (VTCs), the county targets continued improvement of quality through administering of curriculum delivery and management assessments. In addition, the county intends to conduct in service training for instructors and Boards of Management (BOM) capacity building to improve quality of products and hence good performance of trainees. It also aims to promote co-curricular activities and further encourage exhibition of talents for identification and reward. For the youth, the county targets to provide the best trainees for various trades with start-up capital.

Some of the challenges the county is currently encountering with regard to ECDE are as follows: Inadequate ECD infrastructure and essential teaching and learning materials; malnutrition, stunting and other health challenges among the marginalized communities; pastoralism and nomadism which result in low enrolment in schools and occasional dropouts; understaffing in ECDE centres. For vocational training, the major challenge is due to the minimal human and infrastructure capacity of centres in the county, majority of youths cannot acquire technical skills within the county. Generally, the sector also experienced funding challenges across sub-sectors.

3.3 Water and Sanitation

The County Integrated Development Plan 2013-2017 outlined investment in the expansion of water and sanitation infrastructure as the main sector priority. For the water sub-sector, the county targeted: undertaking countywide feasibility surveys; training for water users' committees; construction of water dams, pans and boreholes; surface run-off harvesting; establishment of roof catchments; implementing water treatment; mobilizing private sector participation for the sector; and recruitment of new water service providers. The county targeted improving sanitation in health centres

through purchasing laundry equipment for health centres, improving latrine coverage and water facilities and raising awareness on basic public health principles.

Access to improved water was estimated at 60 per cent of the population against the national average of 72.6 per cent. The population within the service area of water utility (company) decreased from 21 per cent to 18 per cent between 2014 and 2018. The proportion of population covered or served by the utility declined from 86 per cent in 2014 to 69 per cent in 2018. The sector experiences the problem of non-revenue water⁵ at about 45 per cent as at 2018; an improvement from 50 per cent in 2014. High non-revenue water denies the water utility revenue to enhance water service delivery and in meeting operations and maintenance costs.

Table 4: Garissa county selected WASH sector performance indicators

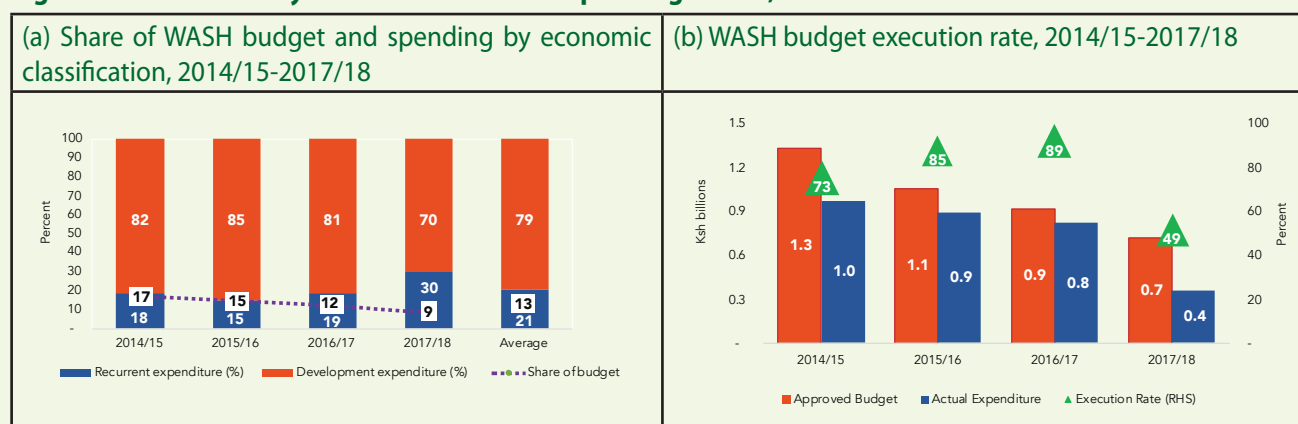
Indicators	2014-County	2014-National	2018-County	2018-National
County population within service areas of WSPs (%)	21	*	18	*
Water coverage by utilities (%)	86	53	69	*
Non-revenue water (NRW) (%)	50	42	45	*
Sanitation coverage within utility area (%)	81	69	-	*
Sewerage coverage (%)	1	*	6	*
Access to improved water (%)	60	*	60	*
Access to improved sanitation (%)	45	*	45	59
No toilet facility – Potential open defecation county-wide (%)	43	*	43	8

Source: Kenya National Bureau of Statistics (2014), KDHS 2014; County Integrated Development Plan (CIDP) 2018

3.3.1 Water and sanitation budget and expenditure

The total budget allocation to the sector as a share of total county budget allocation persistently declined from 17 per cent in 2014/15 to 9 per cent in 2017/18. Total spending on water and sanitation decreased from Ksh 1.34 billion in 2014/15 to Ksh 0.72 billion in 2017/18. The spending comprised of 79 per cent development and 21 per cent recurrent spending (Figure 7a). The county recorded fluctuating budget execution rates with the highest of 89 per cent in 2016/17 and a lowest of 49 per cent in 2017/18, constraining the provision of WASH services. This is attributed to failure by the exchequer to release the entire approved budget amount and also capacity constraints.

Figure 7: Garissa county water and sanitation spending trends, 2014-18



Source: Office of the Controller of Budget (Various) reports, 2014-2018

3.3.2 WASH medium term expectations

Inadequate funding to the sector; nomadic/pastoralist lifestyle of the community; inadequate human resource for management of water and sanitation systems; and limited diversification of water catchment areas remains a major challenge in the county. In addition, the county does not report non-water revenue, which can be a hindrance to planning for reduction of losses and revenue collection in the sector. The county aims to undertake promotion and restoration of water towers. In addition, it aims to establish new and strengthen existing water catchment committees to establish new water sources. The county also targets construction of medium and mega dams, rock catchment areas, and underground tanks in strategic identified areas. The county targets to promote water harvesting through roof catchments. It also intends

to provide water tanks to poor households. The county also targets to expand pipelines from water sources to towns and household and institutionalize of water supply utility for the county.

3.4 Child Protection, Youth and Women

3.4.1 County priorities

The County Integrated Development Plan (CIDP) 2013-2017 highlighted key priorities for the development of children, young people, people with disabilities and women. The integrated development plan for the county highlighted coordination and development of communities through social welfare; empowerment of youth through training; management of sports activities; promotion and regulation of responsible gaming; promotion of cultural development activities and coordination of gender mainstreaming as key areas of focus for the social services, youth, gender and culture department.

Specifically, on child protection, the county recorded a high number of reported cases of child neglect and abandonment rising from 6 cases in 2014 to 2,159 cases in 2018. Similarly, child sexual abuse and child physical abuse increased from 3 and 4 in 2014 to 5 and 94 in 2018, respectively. Child trafficking, abduction, and kidnapping reported 5 cases in 2018. Child labour increased from 2 to 53 between 2014 and 2018.

The county reported only 2 cases of FGM. The low/non-reporting of the female genital mutilation (FGM) to government institutions can be attributed to cultural normalization of FGM, or fear by the population to report such cases. Additionally, the county lacks a formal mechanisms of capturing data on cases of gender-based violence within the county or multi-sectoral coordination in the prevention of and response to GBV.

Table 5: Garissa county selected social protection performance indicators (No. of reported cases)

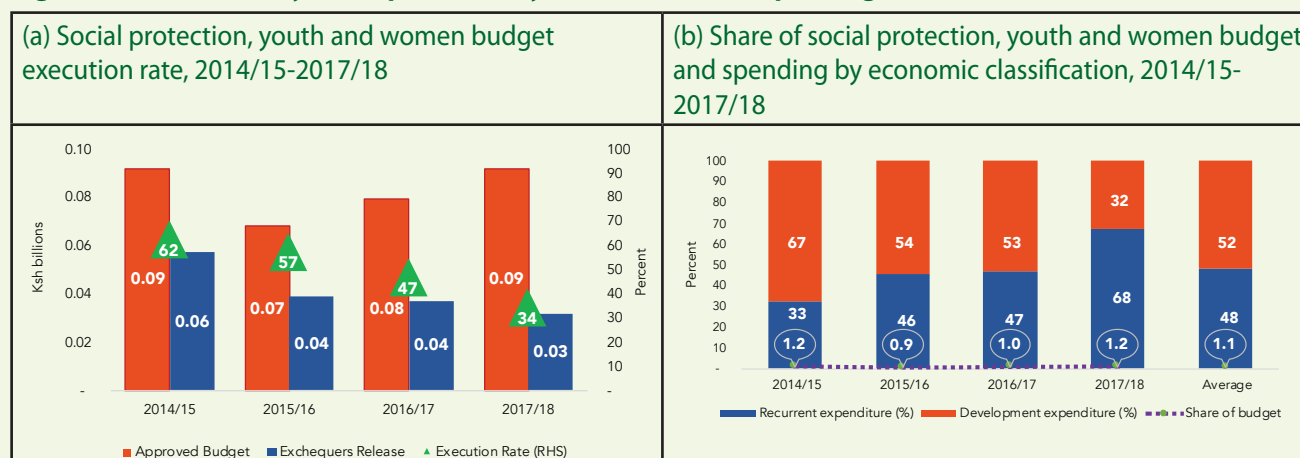
Indicators	2014-County	2014-National	2018-County	2018-National
Child Neglect and Abandonment	6	767	2,159	73245
Child Sexual Abuse	3	636	5	172
Child Trafficking, Abduction and Kidnapping	-	32	5	1022
Child Labour	2	168	53	378
Child Emotional Abuse	-	58	13	853
Child Physical Abuse	4	583	94	2031
Female Genital Mutilation	-	9	2	40

Source: Kenya National Bureau of Statistics (2014), KDHS 2014; County Integrated Development Plan (CIDP) 2018

3.4.2 Child protection, youth and women budget and expenditure

The county's allocation to social protection, youth and women declined from Ksh 90 million in 2014 /15 to Ksh 70 million in 2015/16 before increasing to Ksh 90 million in 2017/18. The share of development spending gradually declined from 72 per cent to 40 per cent between 2014/15 and 2017/18, averaging 60 per cent during the review period (Figure 8b). Absorption rate declined from 62 per cent in 2014/15 to 34 per cent in 2017/18, attributable to prolonged election period and failure by the county exchequer to release the entire approved budget amount (Figure 8a).

Figure 8: Garissa county social protection, youth and women spending trends, 2014-18



Source: Office of the Controller of Budget (Various) reports, 2014-2018

3.4.3 Child protection, youth and women medium term expectations

The large number of unemployed youth affected by contemporary issues such as drugs and substance abuse, and violence and extremism remained a major challenge for the sector. There is need to increase resources towards protection of children, youth and women given their significance in socio-economic development (CIDP, 2018-2022). In addition, the county needs to put in place multi-sectoral action plans to address the local drivers of extremism and drug use and substance abuse within the county. For women, the county intends to institutionalize gender-responsive planning, budgeting and evidence-based programming and strengthening capacity of county officers on gender equality and women's empowerment. The county is also implementing initiatives to increase awareness, engagement and advocacy and access to public procurement opportunities for women, youth and PWDs. For children, the county intends to continue supporting orphans and vulnerable children. It also intends to develop and enact a Children's Protection Bill during the period.

3.5 Nutrition

Promotion of nutrition education and improvement of nutritional status of households to eliminate malnutrition cases was the focus for the county, according to the County Integrated Development Plan for the period 2013-2017.

County nutrition indicators for children performed poorer than most national averages, according to 2014 data. Stunting stood at 15.6 per cent of the population, with wasting and underweight children standing at 11.4 per cent and 13.1 per cent, respectively. The levels were higher than the national average, except for stunted children (Table 6). The proportion of children receiving vitamin A supplement was 75.5 per cent.

The proportion of overweight or obese women in the county stood at 17.7 per cent, which performed better than the national average of 28.9 per cent. The average Body Mass Index (BMI) ⁶ of women in the county was 21.

Table 6: Selected nutrition performance indicators

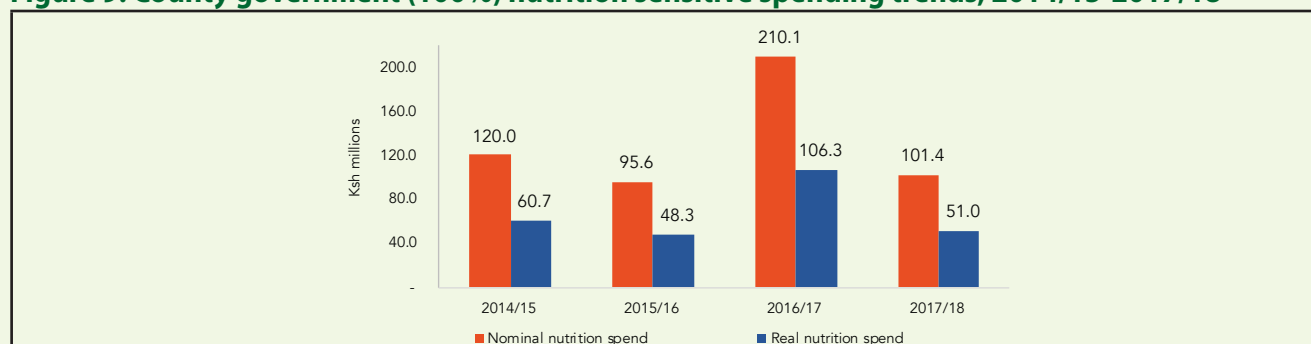
Indicators	2014-County	2014-National
Stunted children (%)	15.6	26.0
Wasted children (%)	11.4	4.0
Underweight children (%)	13.1	11.0
Vitamin A supplements coverage	31.8	24.0
Proportion of children aged 6 to 59 months- Received Vitamin A supplement	75.5	71.4
Proportion of children consuming adequately iodized salt.	96.6	99.1
Proportion of households consuming adequately iodized salt.	96.9	99.2
" Household salt iodization (50 – 80 mg/Kg KIO ₃) (% samples) "	53.0	57.0
Number of Women (BMI)	21.1	23.2
Overweight or obesity among women aged 15 to 49 years.	17.7	28.9

Source: Kenya National Bureau of Statistics (2014), KDHS 2014

3.5.1 Nutrition budget and expenditure

The county spending on nutrition (direct nutrition interventions) in nominal terms increased from Ksh 120 million in 2014/15 to Ksh 210 million in 2016/17 but decreased to Ksh 101 million in 2017/18. The fluctuation in spending in the sector could be attributed to lack of a proper nutrition plans in the county. The absorption rate has been at an average of 50 per cent over the review period.

Figure 9: County government (100%) nutrition sensitive spending trends, 2014/15-2017/18



Source: National Treasury (Various), IFMIS 2014-2018

3.5.2 Medium term expectations

Some of the challenges facing the sector include lack of inclusion of nutrition plans in programme-based budgets, and periodic stock out of food products. In the period 2018-2022, the county plans to promote nutrition education and strengthen community units to offer broad-based services to eliminate malnutrition cases. The county also targets training health workers and equipping them with skills to deliver nutritional services. Nutritional guidelines, policies, and target charts for all facilities will be distributed to aid in effective delivery of nutritional services. The county shall also undertake annual and periodic nutrition surveys and assessments for monitoring of impact of initiatives.

3.6 Other Initiatives for Special Interest Groups

Box 1: Key highlights on children, youth, women and PWDs' initiatives

a) AGPO

During the period under review, the county reported compliance to the 30 per cent allocation of Access to Government Procurement Opportunities (AGPO) reserved for women, youth and Persons with Disabilities (PWDs).

b) Children

The county constructed an orphanage for centre and supports its running. Further, the county provided teaching and learning materials to 220 ECD centres; constructed an ECD college; employed 183 ECDE teachers; trained 183 ECD teachers on curriculum-based competencies; implemented the school feeding programme in 220 ECDE centres, reaching 15,000 children; construction of a child protection unit; and bought 7 school buses to girl's secondary schools.

c) Youth

The county created an interest free revolving fund worth Ksh 150 million; enrolled 150 youths from enrollment drives for VTCs; 600 youths benefitted from the vocational training programmes; provided Ksh 9 million fee capitation for VTCs trainees; created a youth innovation hub; implemented a mentorship programme; provided a Ksh 60 million fund for bursaries; conducted an annual youth conference; and facilitated talent development in sports.

d) Women

The county created a fund targeting women and carried out sexual gender-based violence campaigns. Women and their children were provided with nutritional commodities.

e) PWDs

The county has incorporated disability mainstreaming programmes into their County Integrated Development Plan. The county provided 80 wheelchairs for PWDs.

4. RECOMMENDATIONS AND IMPLICATIONS FOR POLICY

A summary of implications for policy and responsible actors is presented in Table 7.

Table 7: Recommendations and responsible actors

Sector	Finding	Recommendation	Responsibility
Gross Product County	An estimated 48 per cent of the Gross County Product (GCP) of Garissa County is derived from service sector and accounts for 0.25 per cent of the National GDP while agriculture contributed 43 per cent of the GCP and 0.22 per cent of the national GDP in 2017	County needs to promote adoption of climate-smart farming technique and agro pastoralism and promote diversification of the agriculture sector to include drought tolerant and adaptive crops. The county needs to invest in irrigation systems and enhance access to agriculture markets to enhance the productivity of the agriculture sector.	County Treasury and Planning / County Executive/Department of Agriculture and trade and industries
Revenue	The county's own source revenue averaged 1 per cent of the county's total revenue, while equitable share transfer accounted for 89 per cent of county's total revenue between 2014 and 2018.	There is need for county to identify opportunities for optimizing own source revenue potential, strengthening the institutional and legal frameworks for own source revenue and improving counties capacities for revenue collection and administration.	County Treasury and Planning / Directorate of Revenue
Health	The county health expenditure increased from from Ksh 1.4 billion in 2014/15 to Ksh 2.3 billion in 2017/18	County needs to reorient the public health interventions and tailor them to address the barriers constraining uptake of maternal services given the high under 5 mortality rate of 129 deaths per 1,000 live births and maternal mortality rates of 646 per 100,000 live births.	County Treasury and Planning / County Department of Health
Education	The budget for Early Childhood Development Education (ECDE) increased from Ksh 0.3 billion in 2014/15 to Ksh 0.6 billion in 2017/18.	The county needs to ensure equitable distribution and effective utilization of available resources. Additionally, the county needs to increase ECDE budget allocation to address the shortage of staff and inadequacy of ECDE facilities	County Treasury and Planning / County Department of Education

WASH	The budget for WASH increased from declined from Ksh 1.34 billion in 2014/15 to Ksh 0.72 billion in 2017/18.	Increasing WASH financing, national and county government adherence to disbursement schedules and strengthen procurement systems is pivotal in meeting county's target of increasing access to improved water and sanitation hence reducing communicable diseases burden	County Treasury and Planning / County Department of Water and Sanitation/water utilities/ GAWASCO
Child protection, youth and women	The county's allocation to child protection, youth and women decreased from Ksh 90 million in 2014/15 to Ksh 70 million in 2015/16 but increased to Ksh 90 million in 2017/18.	The county needs to increase allocation to child protection given the high levels of child neglect, abandonment and child labour; and expand relevant social services to reach vulnerable girls as a protective measure against early pregnancies, FGM, early and/or forced marriages.	County Treasury and Planning / County Department of culture and social services
Nutrition	The county spending on nutrition (direct nutrition interventions) in nominal terms increased from Ksh 120 million in 2014/15 to Ksh 210 million in 2016/17 but declined to Ksh 101 million in 2017/18	The county should ensure that direct nutrition interventions, across several sectors such agriculture, education and health are budgeted for, with visible budget lines. Moreover, nutrition should be well articulated in the County Integrated Development Plans	County Treasury and Planning / County Department of Health and Nutrition
Budget Execution	The budget execution rate for most social sector budgets, especially health, water and sanitation, was low. For instance, budget execution rates for child protection, youth and women declined from 62 per cent in 2015/16 to 34 per cent in 2017/18	To improve budget utilization rates, there is need for the national treasury to adhere to disbursement schedules by releasing resources on time. On its part, the county should strengthen procurement systems and improve cash flow forecasting	All sectors/County Treasury and Planning/ County Executive
Disaggregated Data	The county has not significantly prioritized investments in disaggregated data. Limited collection and utilization of disaggregated data means women's domestic care work is not measured in the economy	The county will need to prioritize Investment in disaggregated data collection and management and apply the utilization of data in evidence-based planning, budgeting, monitoring and service delivery. Apply disaggregated data to measure women's domestic/unpaid care work, understand the socio-economic implications of limited participation in the economy and further develop social and economic policies and implement programs that empower women	County Planning, Statistics and M&E Unit; and Social/Gender Departments

(Endnotes)

- Gross county product is conceptually equivalent to the county share of GDP. Gross domestic product is a measure of newly created value through production by resident economic agents (in this case individuals, households, businesses, establishments, and enterprises resident in Kenya).
- Monetary poor people are considered at risk of monetary poverty when their equivalised disposable income (after social transfers) is below the at-risk-of-poverty threshold, which is set at 60% of the national median value.
- Multidimensional poverty, unlike monetary poverty, captures different deprivations experienced by an individual. In measuring child poverty in Kenya, these dimensions included: health care, nutrition/adequate food, drinking water, sanitation and hygiene, education, knowledge of health and nutrition, housing and standard of living, and access to information. In the analysis, dimensions are measured as binary variables with "1" denoting deprived and "0" non-deprived.
- Base year 2013
- Non-revenue water (NRW) is water that has been produced and is "lost" before it reaches the customer. Losses can be real losses (through leaks, sometimes also referred to as physical losses) or apparent losses (for example through theft or metering inaccuracies)
- Body Mass Index (BMI) is a value derived from the mass (weight) and height of a person. It is expressed in units of Kg/M². Broadly, a person is categorized as underweight if BMI is below 18.5 Kg/M²; normal weight: between 18.5 Kg/M² and 25 Kg/M²; and overweight: 25 Kg/M² to 30 Kg/M² and obese: over 30 Kg/M².

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