

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



County Government of Tana River

### KEY HIGHLIGHTS OF THE BRIEF

This brief provides an analysis on how the County Government of **Tana River** County 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 55 per cent of the Gross County Product (GCP)<sup>1</sup> of Tana River County comes from agriculture, which accounts for 0.24 per cent of the national GDP.** However, agricultural productivity is vulnerable to weather shocks resulting in unpredictable economic growth trends. Moving forward, the county should put in place measures to mitigate weather shocks, while at the same time promoting manufacturing through agro-processing, and enhancing access to agriculture markets, including through collaboration with the private sector.
- b) **The county's own source revenue increased from Ksh 32 million in 2014/15 to Ksh 57 million in 2017/18. Overall, total county revenue increased from Ksh 3.2 billion in 2014/15 to Ksh 5.9 billion in 2017/18.** To improve the share of its own source revenue, which averaged 1 per cent over the period under review, the county should strengthen measures for tax collection and management.
- c) **The county health expenditure increased from Ksh 0.4 billion in 2014/15 to Ksh 1.1 billion in 2016/17 but declined to Ksh 0.9 billion in 2017/18.** The increase in health expenditure between 2014/15 and 2016/17 contributed to the improvement of the health outcomes. The proportion of women with access to a skilled birth attendant during delivery increased from 32.9 per cent in 2014 to 40.5 per cent in 2018 and the share of fully immunized children in the county increased from 56.4 per cent in 2014 to 68.2 per cent in 2018. Irrespectively, the county needs to re-orient the public health interventions and tailor them to address the barriers constraining uptake of maternal health services.
- 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.** Partly because of increased spending on ECDE, the ECDE gross enrolment rate increased from 56.3 per cent in 2014 to 98.6 per cent in 2018 while net enrolment rate (NER) increased from 45.9 per cent to 54.6 per cent during the same period. Looking forward, the challenge for the county is to ensure equitable distribution and effective utilization of available resources. The county needs to increase ECDE budget allocation to address the shortage of staff and inadequacy of ECDE facilities.
- e) **The budget for WASH increased from Ksh 40 million in 2014/15 to Ksh 225 million in 2017/18.** However, the county recorded low budget execution rates, recording a highest of 69 per cent in 2015/16 and a lowest of 55 per cent in 2017/18, thus constraining the provision of WASH services. An estimated 40 per cent of the county lacks access to improved water and sanitation with 34 per cent of the population lacking a toilet facility. Increasing WASH financing, national and county government adherence to disbursement schedules and strengthening procurement systems is pivotal in meeting the county's target of reducing the burden of communicable diseases burden.
- f) **The county's allocation to child protection, youth and women grew from Ksh 0.5 billion in 2014/15 to Ksh 0.16 billion in 2015/15 before dropping to Ksh 0.11 in 2017/18, representing 4.1 per cent of the overall county budget during the review period.** With increasing demand for protection programmes such cash transfers, there is need to

align the county government protection programmes with those of the national government to avoid duplication of the activities while ensuring that the available resources are focused to the relevant beneficiaries.

- g) The county expenditure for nutrition fluctuated significantly over the period under review. The county real nutrition spending increased from Ksh 6 million in 2015/16 to Ksh 197 million in 2016/17 but declined to Ksh 55 million in 2017/18.** This is despite the county's high level of malnutrition with 28.21 per cent of the children being stunted. The county needs to ensure that direct nutrition interventions, across several sectors such as 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 water and sanitation declined from 90 per cent in 2014/15 to 12 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) Due to limited disaggregation of data in expenditure reports, it was not possible to establish how much of the county government budget was spent on crucial social services such as child protection, youth development, disability and gender mainstreaming.** By having standalone budget lines on the above, the county is better placed to effectively deliver the above-mentioned services, especially to women and girls. On child protection, for example, the county recorded an increase in the number of reported cases of child neglect and abandonment from 9 in 2014 to 1,040 cases in 2018, yet there is no specific budget line for this. The same applies to gender-based violence, which has increased in recent years.

## 1. COUNTY OVERVIEW

**Tana River County occupies a land area of approximately 38,862 km<sup>2</sup> and is divided into 3 sub-counties and 15 wards.** The county's population is 315,943 representing 0.66 per cent of the national population. The total county population is constituted of 158,550 males, 157,391 females, and 2 intersex.

**Table 1: Tana River county administrative, poverty and demographic profile**

| Administrative Profile  |          |                   |        |                 |        |                 | Latest Available |
|-------------------------|----------|-------------------|--------|-----------------|--------|-----------------|------------------|
| Area (km <sup>2</sup> ) |          |                   |        |                 |        |                 | 38,862           |
| Number of sub-counties  |          |                   |        |                 |        |                 | 3                |
| Number of wards         |          |                   |        |                 |        |                 | 15               |
| Overall poverty (%)     |          |                   |        |                 |        |                 | 62.0             |
| Extreme poverty (%)     |          |                   |        |                 |        |                 | 17.9             |
| Population (2019)       |          |                   |        |                 |        |                 | 315,943          |
| Group                   | Children | National Children | Youths | National Youths | Wo/men | National Wo/men |                  |
| Monetary Poor           |          |                   |        |                 |        |                 |                  |
| Male (%)                | 66.0     | 42.1              | 52.3   | 29.1            | 59.1   | 30.5            |                  |
| Female (%)              | 55.7     | 41.0              | 47.9   | 28.8            | 58.8   | 34.1            |                  |
| Total (%)               | 60.9     | 41.6              | 49.9   | 28.9            | 58.2   | 32.4            |                  |
| Population              | 161,285  | 20,742,290        | 73,992 | 13,443,268      | 45,569 | 7,847,350       |                  |
| Multidimensionally Poor |          |                   |        |                 |        |                 |                  |
| Male (%)                | 57.2     | 49.3              | 50.4   | 44.7            | 59.2   | 51.0            |                  |
| Female (%)              | 52.8     | 47.1              | 66.1   | 49.4            | 61.5   | 60.8            |                  |
| Total (%)               | 55.0     | 48.2              | 58.9   | 47.1            | 61.0   | 56.1            |                  |
| Population              | 161,285  | 20,742,290        | 73,992 | 13,443,268      | 45,569 | 7,847,350       |                  |

Source: Kenya National Bureau of Statistics (2018)

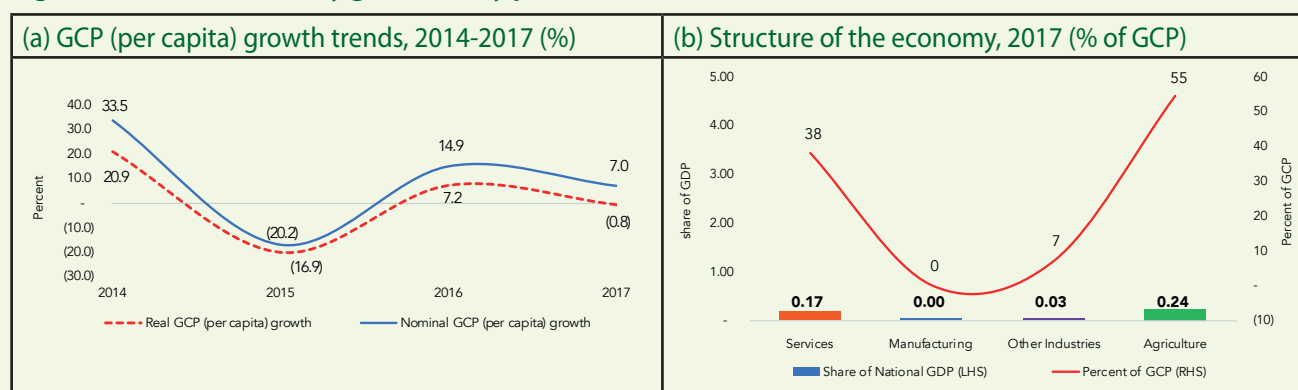
In 2015/16, the overall poverty rate of the county was 62.0 percent with 17.9 per cent living in extreme poverty, which is worse off than the overall national rates of 36.1 per cent and 8.6 , respectively. Among children, more than three in five were affected by monetary poverty or lack of financial means<sup>2</sup>. Additionally, 49.9 percent of the youth and 58.8 per cent of women were also affected by monetary poverty. Moreover, 55.0 per cent of children were living in multidimensional poverty that is, deprived in several areas including nutrition, healthcare, education, housing and drinking water.<sup>3</sup> Levels of monetary and multidimensional poverty remained higher than national averages for children, youth and women. The overall high rates of poverty, especially among younger populations, means that planning and budgeting processes should better consider human capital sectors so that the county can maximize 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

Tana River County accounted for 0.5 per cent of the national GDP in 2017. The county's real GCP per capita growth rate decreased from 20.9 per cent in 2014 to negative 20.2 per cent in 2015 before increasing to 7.2 per cent in 2016 then dropping to negative 0.8 per cent in 2017 (Figure 1a). The large drop in 2015 was due to heavy rainfall and flooding in areas such as Bura, Gubani, Masabubu and Tana Delta that led to internal displacement of about 10,000 people.

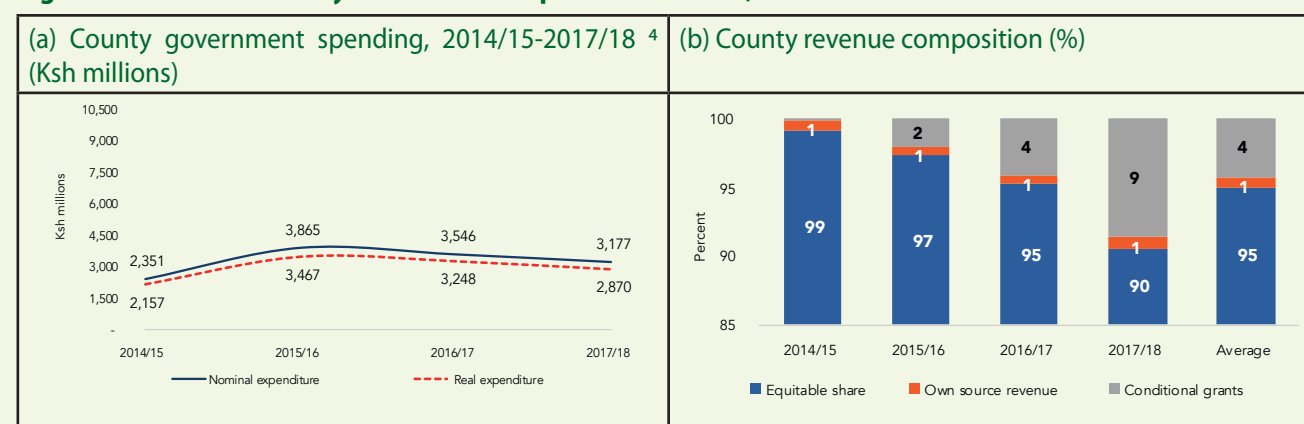
Figure 1: Tana River County gross county product and economic structure, 2014-2017



Source: KNBS (2019) Statistics

The economy remains heavily reliant on agriculture, which that accounts for 55 per cent of the GCP and 0.24 per cent of the national GDP (Figure 1b). The services sub-sectors accounts for 38 per cent while the industrial sector, including mining, construction, electricity and water supply account for 7 per cent of the GCP. There is need for the county to foster a commercialized and an agri-entrepreneurial approach to agriculture and promote adoption of climate smart agriculture. The county also needs to create a business environment that is conducive for investment by enacting laws and regulations to attract and retain investment to all firms. In addition, to increase agricultural productivity and the participation of women and youth within the sector, the county should put in place mechanisms to reduce the cost of farming, enhance the marketing of agricultural produce and promote agricultural value chains.

Figure 2: Tana River county revenue and expenditure trends, 2014-18



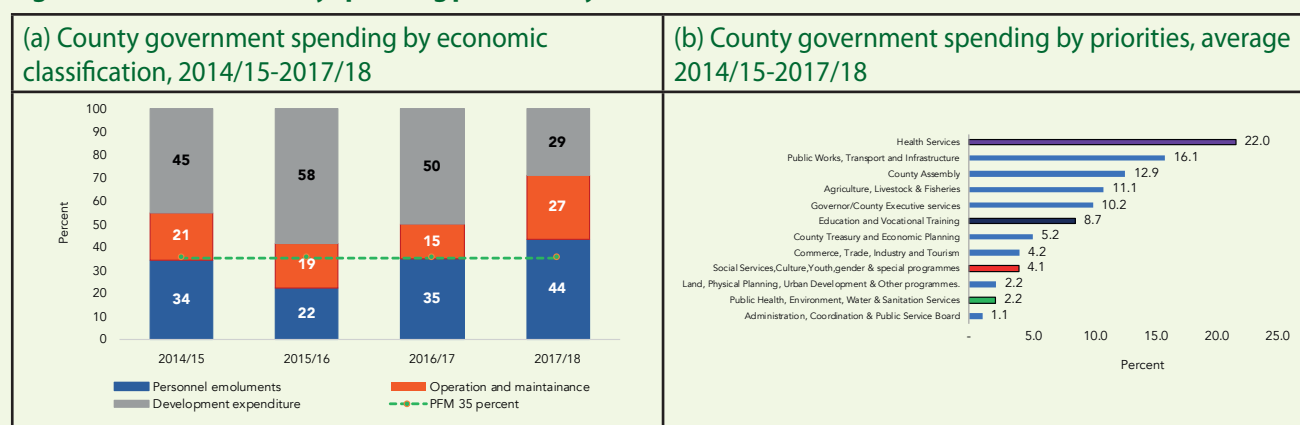
Source: Office of the Controller of Budget (Various) reports, 2014-2018

## 2.2 Overall Budget Performance

The county government annual spending grew from Ksh 2.1 billion to Ksh 3.5 billion between 2014/15 and 2015/16, before a moderate cut to Ksh 2.8 billion in 2017/18 (Figure 2a). The effect of inflation accounts for, on average, Ksh 245 million in loss of purchasing power between 2013/14 and 2017/18. The county's spending was heavily dependent on equitable and conditional grants from the national government, accounting for 99 per cent. The county own source revenue was 1 per cent throughout the period. There is need for enhanced fiscal efforts to strengthen measures for tax collection and management and accelerate revenue mobilization from both local revenue and conditional grants for channelling into social sector spending, which is mostly recurrent.

The development share of the actual spending increased from 45 per cent in 2014/15 to 58 per cent in 2015/16 before decreasing to 29 per cent in 2017/18. The recurrent expenditure, constituting of personnel emoluments and operations and maintenance costs, accounted for 55 per cent of county government spending, on average. This leaves 45 per cent of the county income available for development, which compromises the county long-term objectives including infrastructure development (Figure 3a). 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, and Regulations 2015 which require that not more than 35 per cent of the county's total revenue should go to payment of wages and salaries, were observed in actual spending during the review period with the exemption of 2017/18 (Figure 3a).

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



Source: Controller of Budget reports, 2014-2018

The county spent approximately 48.1 per cent of the total expenditure in 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 effect of this expenditure in the various programmes and activities varies based on the key indicators.

## 3. ANALYSIS OF SOCIAL SECTOR SPENDING

### 3.1 Health

#### 3.1.1 Health sector priorities

During the period under review, the county outlined key priorities that targeted children, youth, and women. The CIDP prioritized various programmes targeting children, youth women and PWDs, including: to reduce the high Infant Mortality Rate (IMR) from 91.3 to 77 deaths per 1,000; reduce morbidity rate by 40 per cent; enhance immunization coverage and health care; improve nutrition status; provide family planning and maternal health care services; and reduce HIV prevalence and incidence rates to 2 per cent. The planned cross-cutting programmes and projects included: providing affordable and quality basic health care; providing physical infrastructure and rehabilitating the existing ones; and improving health services management.

The number of women who had access to a skilled birth attendant during delivery increased from 32.9 per cent in 2014 to 40.5 per cent in 2018 but remained relatively low, despite the introduction of free maternity services in 2013. The share of fully immunized children in the county increased from 56.4 per cent in 2014 to 68.2 per cent in 2018 but remained below the World Health Organization (WHO) standard of 85 per cent. Maternal mortality rate was estimated at 395 per 100,000 live births while under 5 mortality rate was estimated at 112 per 1,000 live births in 2016.

**Table 2: Tana River county selected health sector performance indicators**

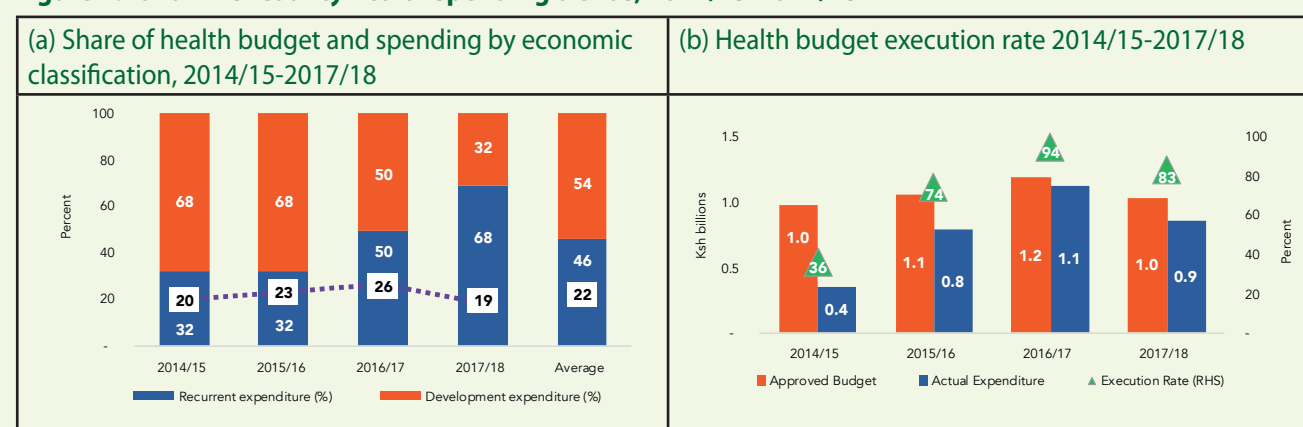
| Selected Health Indicators   | 2014   |          | 2015   |          | 2016   |          | 2017   |          | 2018   |          |
|--|--------|----------|--------|----------|--------|----------|--------|----------|--------|----------|
|  | County | National | County | National | County | National | County | National | County | National |
| USMR (death per 1,000 live births) 2016 Estimate   | -      | -        | -      | -        | 112.0  | 79.0     | -      | -        | -      | -        |
| MMR (death per 100,000 live births) 2016 Estimate  | -      | -        | -      | -        | 395.0  | 495.0    | -      | -        | -      | -        |
| Skilled birth attendant coverage (%) (source: DHIS2)   | 32.9   | 53.5     | 41.8   | 56.9     | 44.1   | 59.3     | 25.0   | 53.0     | 40.5   | 64.9     |
| Proportion of pregnant women who attended at least one ANC visit during pregnancy (%) (Source: DHIS2)  | 81.8   | 76.4     | 85.9   | 75.4     | 85.0   | 76.9     | 62.7   | 73.7     | 76.2   | 81.9     |
| Proportion of pregnant women who attended at least four ANC visit during pregnancy (%) (Source: DHIS2) | 29.0   | 35.9     | 39.3   | 39.7     | 38.1   | 39.8     | 20.6   | 32.6     | 37.8   | 48.7     |
| Proportion of children under one year who are fully immunized (%) (Source: DHIS2)                      | 56.4   | 70.2     | 69.5   | 75.7     | 71.5   | 72.4     | 49.8   | 65.9     | 68.2   | 77.0     |
| DPT/Hep+HiB3 dropout rate (%) (Source: DHIS2)  | 6.0    | 6.8      | 6.1    | 7.2      | 13.4   | 6.6      | 29.8   | 10.1     | 4.6    | 4.0      |
| Still Birth Rate (Source : DHIS2)  | 19.1   | 29.3     | 24.4   | 22.6     | 32.9   | 21.5     | 40.0   | 22.6     | 40.2   | 20.4     |

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

### 3.1.2 Health budget and expenditure

The share of health budget in the total county budget allocation increased from 20 per cent in 2014/15 to 26 per cent in 2016/17 and before decreasing to 19 per cent in 2017/18. Actual health expenditure during the period increased from Ksh 0.4 billion in 2014/15 to Ksh 1.1 billion in 2016/17 before decreasing to Ksh 0.9 billion in 2017/18. Spending comprised of 46 per cent recurrent and 54 per cent development (Figure 4a). Absorption rates increased from 36 per cent in 2014/15 to 94 per cent in 2016/17 before decreasing to 83 per cent in 2017/18. The low absorption rates were attributable to failure by the exchequer to release the full amount approved in the health budget, weak procurement systems and slow implementation of health projects.

**Figure 4: Tana River 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 health infrastructure and human resources in all sub-counties. The county aims at leveraging interventions that yield reduction of the infant and maternal mortality, acute malnutrition rate, prevalence rates of HIV/AIDS infections and accelerate uptake of initiatives targeting nutrition services, family planning, immunization, sanitation and safe motherhood. It also aims at realizing operationalization of completed but unopened health facilities, completion of stalled health facilities, refurbishing and renovation of hospital architecture, and scaling up of outreach services to underserved regions.

The county will need to address various challenges during the medium term. These include: inadequate health care personnel; absence of standardized health services management structures for accountability; absence of a staff retention

policy to address high staff turnover; 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

**County governments are responsible for Early Childhood Development Education (ECDE) and Technical and Vocational Education Training (TVET) as per Schedule IV of the Constitution of Kenya 2010.** During the plan period 2013-2017, the county education sector focus was to enhance the quality and access to ECDE; expand youth polytechnics; provide bursary award programme for secondary school education, TVETs and tertiary education; promote a sustainable school feeding programme; improve learning environments; and ensure retention and access to PWDs.

**Gross ECDE enrolment rate increased from 56.3 per cent in 2014 to 98.6 per cent in 2018 while net enrolment rate (NER) increased from 45.9 per cent to 54.6 per cent during the same period.** This was generally higher than national averages of 94.4 per cent for GER but lower for NER at 63.5 per cent. However, long distances from learning centres deterred higher enrolment rates. More boys were enrolled in ECDE than girls in 2018 compared to 2014 in Tana River County as shown in Table 3.

**Table 3: Tana River county selected education sector performance indicators**

| Pre-primary School                             | 2014-County | 2014-National | 2018-County | 2018-National |
|--|-------------|---------------|-------------|---------------|
| Gross enrolment ratio (%)                      | 56.3        | 73.6          | 98.6        | 94.4          |
| Net enrolment ratio (%)                        | 45.9        | 71.8          | 54.6        | 63.5          |
| Male (%)                                       | 36.7        | 73.4          | 56.0        | 62.5          |
| Female (%)                                     | 52.1        | 70.2          | 53.3        | 65.0          |
| School size (Public) (Pupils) (Average)        | 92.0        | 75.0          | 122.0       | 85.0          |
| Gender parity index (value)                    | 0.9         | 1.0           | -           | -             |
| Pupil-teacher ratio (No.) (Public)             | 51.0        | 31.0          | 44.0        | 31.0          |
| Proportion of enrolment in private schools (%) | 11.2        | 31.5          | 16.0        | 33.0          |
| Primary School                                 | 2014-County | 2014-National | 2018-County | 2018-National |
| Gross enrolment ratio (%)                      | 60.4        | 104.0         | 91.0        | 107.2         |
| Net enrolment ratio (%)                        | 49.2        | 88.0          | 69.1        | 82.4          |
| Male (%)                                       | 42.3        | 86.0          | 68.8        | 81.7          |
| Female (%)                                     | 55.0        | 90.0          | 69.4        | 83.0          |
| School size (Public) Average No. of pupils     | 280.0       | 338.0         | 302.0       | 375.0         |
| Gender parity index (Value)                    | 0.9         | 1.0           | -           | -             |
| Pupil-teacher ratio (No.)                      | 40.0        | 42.0          | 39.0        | 40.0          |
| Proportion of enrolment in private schools (%) | 6.0         | 16.0          | 8.0         | 16.0          |
| Secondary School                               | 2014-County | 2014-National | 2018-County | 2018-National |
| Gross enrolment ratio (%)                      | 16.7        | 58.7          | 63.9        | 66.2          |
| Net enrolment ratio (%)                        | 13.0        | 47.4          | 27.0        | 37.5          |
| Male (%)                                       | 21.0        | 49.6          | 33.9        | 35.4          |
| Female (%)                                     | 5.0         | 45.2          | 15.2        | 39.8          |
| School size (Public)                           | -           | -             | 338.9       | 392.0         |
| Gender parity index (value)                    | 0.5         | 0.9           | -           | -             |
| Pupil-teacher ratio (No.) (TSC)                | 32.0        | 30.0          | 34.0        | 32.0          |
| Pupil-teacher ratio (No.) (TSC and BOM)        | 21.9        | 20.2          | 22.0        | 20.0          |
| Proportion of enrolment in private schools (%) | 13.4        | 30.7          | 1.8         | 5.8           |

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

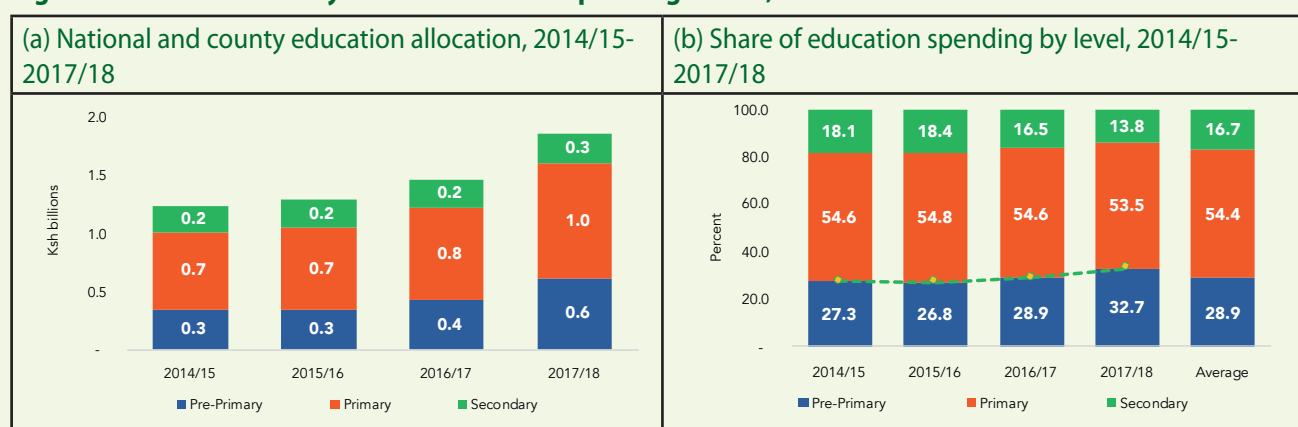
**Gross primary and secondary enrolment rates stood at 91.0 per cent and 63.9 per cent in 2018, respectively.** Net enrolment rate (NER) increased from 49.2 per cent to 69.1 per cent for primary school and from 13 per cent to 27 per cent for secondary school during the same period. The proportion of girls of school-going age enrolled at both levels was higher than the proportion of boys of school-going age enrolled. There are six (6) vocational training centres with a total enrolment of 375 students, and 35 vocational training instructors.

### 3.2.2 ECDE budget and expenditure

The share of ECDE spending ECDE budget allocation increased from Ksh 0.3 billion in 2014/15 to Ksh 0.6 billion in 2017/18. Allocations to primary school education increased from Ksh 0.7 billion in 2014/15 to Ksh 1 billion in 2017/18 while spending on secondary school increased from Ksh 0.2 billion to Ksh 0.3 billion in the same period (Figure 5a). Spending on ECDE as a share of total spending on ECDE increased from 27.3 per cent in 2014/15 to 32.7 per cent in 2017/18 (Figure 5b).

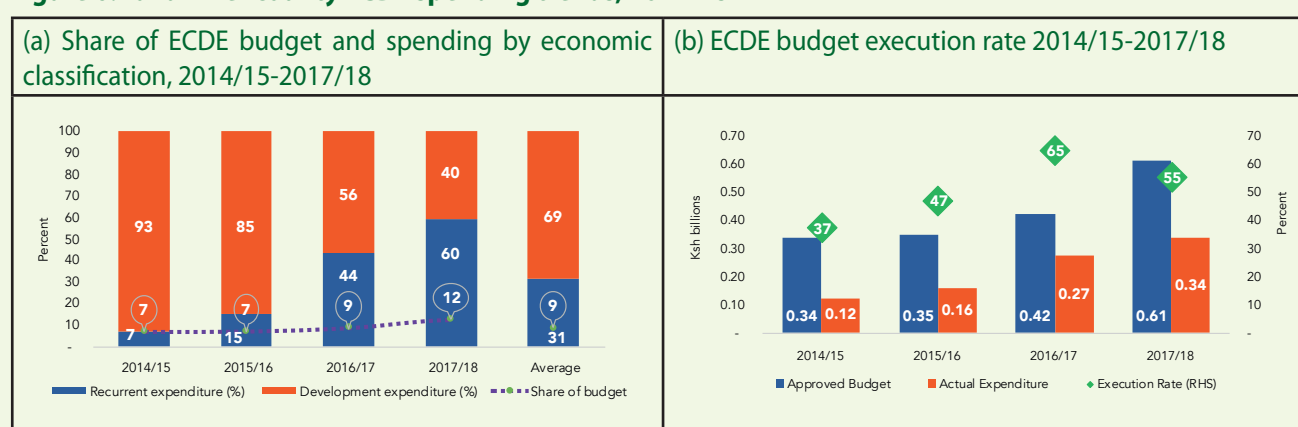
The share of ECDE budget in the total county budget spending averaged 9 per cent, increasing from 7 per cent in 2014/15 to 12 per cent in 2017/18. The spending comprised of, on average, 69 per cent development expenditure and 31 per cent recurrent expenditure during the period (Figure 6a). Although the budget execution rates increased from 37 per cent in 2014/15 to 65 per cent in 2016/17, they were relatively low.

**Figure 5: Tana River county overall education spending trends, 2014-18**



Source: National Treasury (Various), IFMIS

**Figure 6: Tana River county ECDE spending trends, 2014-18**



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

### 3.2.3 Education medium term expectations

The county government has planned to enhance early childhood development training through more infrastructural developments, employment of more ECDE teachers, provision of sanitation facilities and enhanced school feeding programmes. However, more needs to be done to improve enrolment to education institutions and address issues of early school drop-outs and chronic absenteeism in schools. Further, there needs to be more deliberate efforts to mainstream education of Persons With Disabilities (PWDs). The county needs to scale-up girl child education, and access of education by nomadic communities through setting up of mobile and boarding schools. To achieve these objectives, the county will require to partner with the national government and the private sector to enhance ECDE and vocation training through infrastructural development, and equip both ECDE and vocational training centres.

### 3.3 Water and Sanitation

#### 3.3.1 Water and sanitation priorities

The County Integrated Development Plan (CIDP) 2013-2017 outlined investments in the expansion of water and sanitation infrastructure as the main sector priority. Additionally, the sector would prioritize creation of awareness on the importance of hand washing facilities and management of human waste disposal in rural and informal settlements in the county urban setups.

**Access to improved water and sanitation remained constant at 67 and 60 per cent, respectively.** The population within the service area of water service providers increased from 17 per cent to 51 per cent between 2014 and 2018. The proportion with potential of open defecation declined from 68 per cent 2014 to 34 per cent in 2018, although the county has a significantly high population without a toilet facility, constraining the county's target of reducing the burden of communicable diseases.

**Table 4: Tana River county selected WASH sector performance indicators**

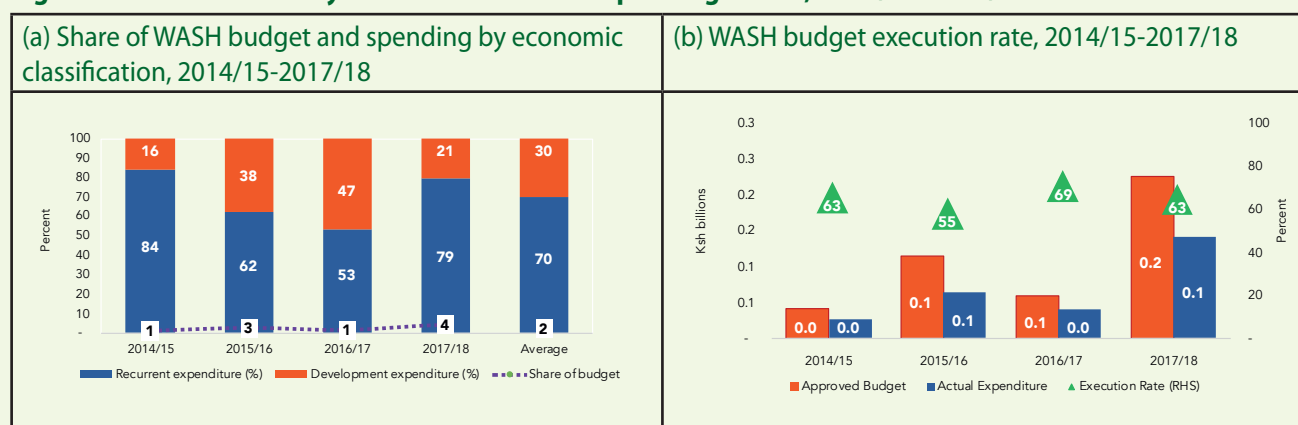
| Indicators   | 2014-County | 2014-National | 2018-County | 2018-National |
|--|-------------|---------------|-------------|---------------|
| County population within service areas of WSPs (%)             | 17          | *             | 51          | *             |
| Water coverage by utilities (%)                                | n.d.        | 53            | n.d.        | *             |
| Non-revenue water (NRW) (%)                                    | n.d.        | 42            | n.d.        | *             |
| Sanitation coverage within utility area (%)                    | n.d.        | 69            | -           | *             |
| Sewerage coverage (%)  | -           | *             | n.d.        | *             |
| Access to improved water (%)                                   | 67          | *             | 67          | *             |
| Access to improved sanitation (%)                              | 60          | *             | 60          | 59            |
| No toilet facility – Potential open defecation county-wide (%) | 68          | *             | 34          | 8             |

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

#### 3.3.2 Water and sanitation budget and expenditure

The total budget allocation to the sector as a share of total county budget allocation during the review period increased from 1 per cent in 2014/15 to 3 per cent in 2015/16 before decreasing to 1 per cent in 2016/17 then increasing to 4 per cent in 2017/18. The total spending on the sector fluctuated over the period, recording a high of Ksh 225 million in 2017/18 and a low of Ksh 40 million in 2014/15. The share of development expenditure during the period was, on average, 30 per cent of total spending while recurrent expenditure accounted for 70 per cent. The absorption rate decreased from 63 per cent in 2014/15 to 55 per cent in 2015/16 then increased to 69 per cent in 2016/17 before decreasing to 63 per cent in 2017/18.

**Figure 7: Tana River county water and sanitation spending trends, 2014/15-2017/18**



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

#### 3.3.3 Water and sanitation medium term expectations

In the plan period 2018-2022, the county aims to continue with provision of clean water and solid waste management, and increasing access to decent sanitation. With a declining percentage of population under sewer coverage, few technical staff in the water sector, high breakage of water pumps compounded by a declining share of recurrent spending in water and



sanitation (WASH), more focus will be on operations and maintenance for the county to realize the outlined millstones. The county needs to employ best practices in waste water management, and wetland conservation in some farms. Garbage and waste disposal need to be enhanced. There will be need for hygiene sensitization to change community behaviour, attitudes and practices.

### 3.4 Child Protection, Youth and Women

#### 3.4.1 County priorities

The County Integrated Development Plan (CIDP) 2013-2017 highlighted various social development interventions for the improvement of welfare of children, youth, women and persons with disabilities (PWDs). These included establishing a child protection centre, providing alternative family care for orphans, cash transfers to older persons and PWDs, ensure accessibility of public offices by PWDs, providing grants to youths and women groups, construction and equipping of youth empowerment centres, and construction of multipurpose hall for exhibition of talents.

Specifically, on social child protection, the county recorded a high number of reported cases of child neglect and abandonment rising from 1 case in 2014 to 253 cases in 2018. However, cases of child sexual abuse and child labour declined significantly. The county recorded 1 case of child trafficking, 5 cases of child labour, and 13 cases of emotional abuse and 1 case of physical abuse.

The county reported only two cases of female genital mutilation (FGM). The low/non-reporting of FGM to government institutions can be attributed to either the intensive campaigns and initiatives to protect the girl child, or fear by the population to report such cases, and culture that approves such practices.

**Table 5: Tana River county selected child protection performance indicators**

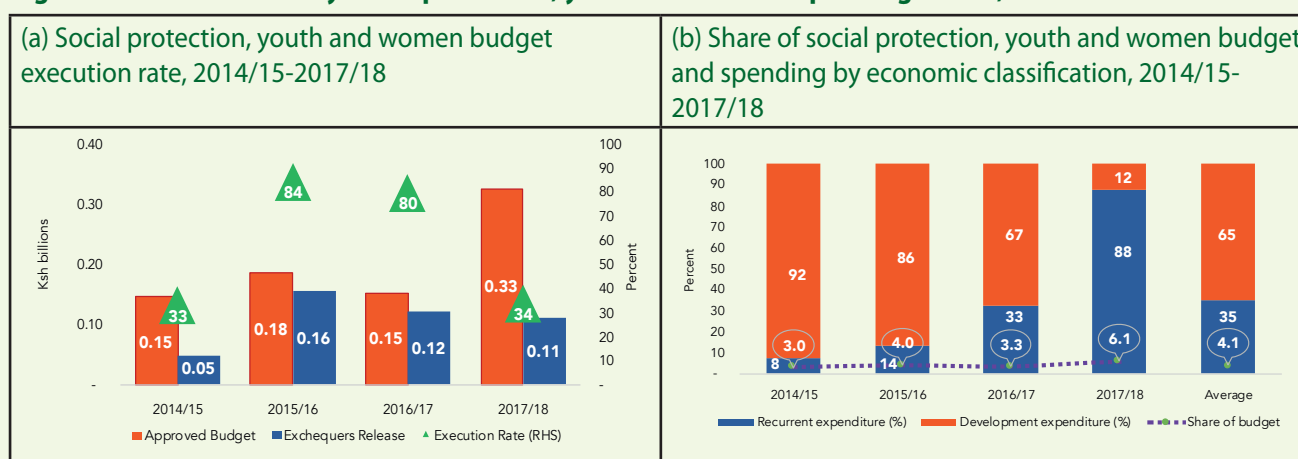
| Indicators                                  | 2014-County | 2014-National | 2018-County | 2018-National |
|---|-------------|---------------|-------------|---------------|
| Child Neglect and Abandonment               | 1           | 767           | 253         | 73245         |
| Child Sexual Abuse                          | 6           | 636           | -           | 172           |
| Child Trafficking, Abduction and Kidnapping | -           | 32            | 1           | 1022          |
| Child Labour                                | -           | 168           | 5           | 378           |
| Child Emotional Abuse                       | -           | 58            | 13          | 853           |
| Child Physical Abuse                        | 1           | 583           | 1           | 2031          |
| Female Genital Mutilation                   | -           | 9             | -           | 40            |

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

#### 3.4.2 Budget and expenditure on selected social services

The county's allocation to child protection, youth and women grew from Ksh 0.5 billion in 2014/15 to Ksh 0.16 billion in 2015/15 before dropping to Ksh 0.11 in 2017/18, representing 4.1 per cent of the overall county budget during the review period. The share of recurrent expenditure was, on average, 35 per cent of total spending during the period,

**Figure 8: Tana River county social protection, youth and women spending trends, 2014/15-2017/18**



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

while the share of development expenditure was 65 per cent. The absorption rates increased from 33 per cent in 2014/15 to 84 per cent in 2015/16 but declined to 34 per cent in 2017/18 (Figure 8b).

**The sector's budget allocation as a share of the total county budget allocation during the review period increased from 3.0 per cent in 2014/15 to 4.0 per cent in 2015/16, then decreased to 3.3 per cent in 2016/17 before increasing to 6.1 per cent in 2017/18.** The annual budgetary spending fluctuated between a maximum of Ksh 160 million in 2017/18 and a minimum of Ksh 50 million in 2014/1. The share of recurrent expenditure was, on average, 35 per cent of total spending during the period, while the share of development expenditure was 65 per cent. The absorption rates increased from 33 per cent in 2014/15 to 84 per cent in 2015/16 but declined to 34 per cent in 2017/18 (Figure 8b).

### 3.4.3 Child protection, youth and women medium term expectation

Between the plan period 2018 and 2022, the county aims to provide care, support and build capacities of individuals, vulnerable groups and communities for equity and self-reliance. Special attention needs to be paid to inclusion of Persons with Disabilities (PWDs). With increasing demand for social protection in programmes such as cash transfers, there is need to align the county government social protection programmes with those of the national government to avoid duplication of activities while ensuring that the available resources are focused to the relevant beneficiaries. The county will need to focus on enhancing children protection services while discouraging negative traditions, and develop County Child Protection and OVC Policy.

**Table 6: Selected nutrition performance indicators**

| Indicators  | 2014-County | 2014-National |
|---|-------------|---------------|
| Stunted children (%)  | 28.1        | 26.0          |
| Wasted children (%)   | -           | 4.0           |
| Underweight children (%)  | -           | 11.0          |
| Vitamin A supplements coverage  | 32.2        | 24.0          |
| Proportion of children aged 6 to 59 months- Received Vitamin A supplement   | 67.6        | 71.4          |
| Proportion of children consuming adequately iodized salt.                   | 99.6        | 99.1          |
| Proportion of households consuming adequately iodized salt.                 | 99.7        | 99.2          |
| " Household salt iodization (50 – 80 mg/Kg KIO <sub>3</sub> ) (% samples) " | 70.0        | 57.0          |
| Number of Women (BMI)   | 21.5        | 23.2          |
| Overweight or obesity among women aged 15 to 49 years.                      | 19.7        | 28.9          |

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

## 3.5 Nutrition

### 3.5.1 Nutrition priorities

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 2013-2017.

The county nutrition indicators remained relatively low, especially for the year 2014. Stunting stood at 28.1 per cent of the population, which was above the national average of 26 per cent. The county realized 32 per cent vitamin A supplements coverage, with 68 per cent of the children aged 6 to 59 months receiving vitamin A supplement. The proportion of overweight or obese women in the county stood at 22 per cent, with the average Body Mass Index (BMI) <sup>5</sup> of women in the around 20.

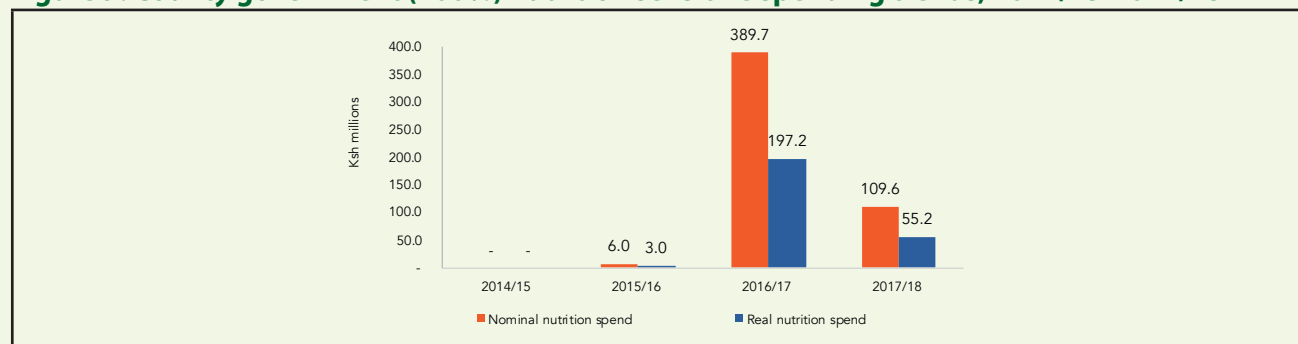
### 3.5.2 Nutrition budget and expenditure

The nutrition real spending increased from Ksh 6 million in 2015/17 to Ksh 197 million in 2016/17 but declined to Ksh 55 million in 2017/18. Inconsistency in budget allocation for nutrition is a key challenge that constrains the county targets of promoting nutrition services.

### 3.5.3 Nutrition medium term expectations

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. To realize the objective, the county will be required to increase the share of nutrition-sensitive spending, which has been inconsistent. There also needs to be improvement of traditional crops, and

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



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

breed improvement services in light of the pastoral lifestyle, and construction of storage facilities for nutrition commodities to improve nutrition in children.

### 3.6 Other Initiatives for the Children, Youth, Women and PWDs

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

- a) **AGPO:** The county promotes the implementation of Access to Government Procurement Opportunities (AGPO) programme.
- b) **Children:** The county has conducted 5 child rescue missions and community awareness campaigns and child rights sensitization events annually. The county constructed, equipped and operationalized a paediatric ward at Hola Hospital, and supports Tana River County child protection committees. 3500 orphaned and vulnerable children have benefited from cash transfers while girls are provided with sanitary pads.
- c) **Youth:** The county has trained 150 youth group leaders, and the Directorate of Youth marks the international youth week annually as a forum to interact with youth and collect information to help improve service delivery, youth's sports tournaments and exposure tours.
- d) **Women:** The county has constituted and launched the County Gender Technical Working Groups. It also aims to refurbish and establish women empowerment and Gender-Based Violence (GBV) rescue centres. The process to develop a gender policy and strategic plan has been initiated. The county has also been training women on leadership and entrepreneurship, and sponsoring gender champions for exposure and study tours.
- e) **PWDs:** The county has constituted and operationalized four (4) county PWDs' committees and gazetted the Disability Mainstreaming Policy. The county has also established the county database for PWDs, supported over 300 with NHIF schemes, and supported 20 PWDs to participate in inter-country sports events. The PWDs champions and leaders actualized the county PWD fund.

## 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 County Product | An estimated 55 per cent of the Gross County Product (GCP) of Tana River County comes from agriculture.  | The county should put in place measures to mitigate weather shocks, while promoting manufacturing through agro-processing, and enhancing access to agriculture markets, including through collaboration with the private sector            | Finance and Economic Planning/County Executive/ Department of Agriculture         |
| Revenue              | The county's own source revenue increased from Ksh 32 million in 2014/15 to Ksh 57 million in 2017/18.   | The county should strengthen measures for tax collection and management.   | County Treasury and Planning/ Directorate of Revenue                              |
| Health               | The county health expenditure increased from Ksh 0.4 billion in 2014/15 to Ksh 1.1 billion in 2016/17 but declined to Ksh 0.9 billion in 2017/18.  | The county needs to re-orient the public health interventions and tailor them to address the barriers constraining uptake of maternal services.  | 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 challenge for the county is to ensure equitable distribution and effective utilization of available resources. 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 Ksh 40 million in 2014/15 to Ksh 225 million in 2017/18. However, the county recorded low budget execution rates, recording a highest of 69 per cent in 2015/16 and a lowest of 55 per cent in 2017/18, thus constraining the provision of WASH services. | Increasing WASH financing, national and county government adherence to disbursement schedules and strengthen procurement systems is pivotal in meeting county's target of reducing the burden of communicable diseases.                    | Finance and Economic Planning /County Department of Water and Sanitation/ TAWASCO |

|                                   |  |  |   |
|-----------------------------------|--|--|---|
| Child Protection, Youth and Women | The county's allocation to child protection, youth and women grew from Ksh 0.5 billion in 2014/15 to Ksh 0.16 billion in 2015/15 before dropping to Ksh 0.11 in 2017/18, representing 4.1 per cent of the overall county budget during the review period.      | With increasing demand for protection programmes such as cash transfers, there is need to align the county protection programmes with those of the national government to avoid duplication of the activities while ensuring that the available resources are focused to the relevant beneficiaries.   | County Planning, Statistics and M&E Unit, and Social/Gender Departments   |
| Nutrition                         | The county expenditure for nutrition fluctuated significantly over the period under review. The county real nutrition spending increased from Ksh 6 million in 2015/16 to Ksh 197 million in 2016/17 but declined to Ksh 55 million in 2017/18                 | The county needs to ensure that direct nutrition interventions, across several sectors such as 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 all other sectors, namely education, agriculture and social protection |
| B u d g e t Execution             | The budget execution rate for most social sector budgets, especially health, water and sanitation was low. For instance, budget execution rates for water and sanitation declined from 90 per cent in 2014/15 to 12 per cent in 2017/18.                       | By having standalone budget lines on the above, the county is better placed to effectively deliver the above-mentioned services, especially to women and girls. On child protection, for example, the county recorded an increase in the number of reported cases of child neglect and abandonment from 9 in 2014 to 1,040 cases in 2018, yet there is no specific budget line for this. The same also applies to gender-based violence, which has increased in recent years | County Treasury and Planning; All County Departments; National Treasury   |
| Disaggregated Data                | Due to limited disaggregation of data in expenditure reports, it was not possible to establish how much of the county government budget was spent on crucial social services such as child protection, youth development, disability and gender mainstreaming. | By having standalone budget lines on the above, the county is better placed to effectively deliver the above-mentioned services, especially to women and girls. On child protection, for example, the county recorded an increase in the number of reported cases of child neglect and abandonment from 9 in 2014 to 1,040 cases in 2018, yet there is no specific budget line for this. The same also applies to gender-based violence, which has increased in recent years | County Planning, Statistics and M&E Unit, and Social/Gender Departments   |

#### (Endnotes)

- 1 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).
- 2 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.
- 3 Multidimensional poverty captures different deprivations experienced by poor people in their daily lives, such as lack of access to basic education, health or WASH services, inadequate nutritional intake, experiencing physical or emotional violence or abuse, etc.
- 4 Base year 2013
- 5 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.
- 6 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).

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