

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



County Government of Nyeri

KEY HIGHLIGHTS OF THE BRIEF

This brief provides an analysis on how the County Government of **Nyeri** 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 53 per cent of the Gross County Product (GCP)¹ of Nyeri, which is ranked 14th (2.2% contribution to GDP) of all the 47 counties in Kenya, comes from agriculture while 40 per cent is from services.** However, agricultural productivity is vulnerable to weather shocks, resulting in unpredictable economic growth trends. Moving forward, there is need for the county to grow the economy, promote value addition in services, while boosting manufacturing for improved economic activities, job creation and better incomes especially for youth and women.
- b) **The county's own source revenue increased from Ksh 33 million in 2014/15 to Ksh 56.6 million in 2017/18.** However, the county's own source revenue as a share of total revenue declined from 14 per cent in 2014/15 to 12 per cent in 2017/18 mainly because of equitable share transfers. There is need for the county to strengthen legal and institutional frameworks for tax and non-tax revenue generation as mechanisms to mitigate losses associated with cash handling and poor internal controls and audit mechanisms, while coming up with innovative strategies to grow own source revenue for improved fiscal performance.
- c) **Maternal and child health outcomes have improved, including the rate of child immunization.** The number of women who had access to a skilled birth attendant during delivery increased from 45.1 per cent in 2014 to 84.9 per cent in 2018. This is largely because of the introduction of free maternity services in 2013. The share of fully immunized children in the county improved from 84.3 per cent in 2014 to 88.4 per cent in 2018. To improve this further, the county should increase sensitization on use of skilled deliveries and investments in immunization.
- d) **The budget for Early Childhood Development Education (ECDE) increased from Ksh 126.5 million in 2014/15 to Ksh 278.4 million in 2017/18.** Partly because of increased spending on ECDE, gross ECDE enrolment rate in the county increased from 59.2 per cent in 2014 to 80.1 per cent in 2018. The county needs to conduct public awareness to promote ECDE², alongside vocational and technical training enrolment and address access challenges. It should also ring-fence ECDE resources so that they are not used for other purposes such as secondary and higher education bursaries.
- e) **The county allocation for water and sanitation increased from Ksh 252.2 million in 2014 to Ksh 384.3 million in 2018, which was 4 per cent and 7 per cent, respectively, of the county total budget.** This was an under-investment given that about 17 per cent of the population had no access to improved water sources by 2018. The county needs to increase allocation for WASH.
- f) **The county's allocation to child protection, youth and women increased from Ksh 73.4 million to Ksh 263.1 million during the review period.** The county reported high disparity between the approved budget and the exchequer releases. 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.
- g) **The county committed Ksh 0.69 million in 2015/16/ and only Ksh 0.3 million in 2017/18 to interventions that directly contribute to boosting child nutrition, at a time when 15 per cent of the children were stunted.** The

county should 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 56 per cent in 2014/15 to 48 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 would be better placed to effectively deliver the above-mentioned services, especially to women and girls. On child protection, for example, the county had extremely few cases of child abuse reported, and no cases of FGM, most likely because the culture condones such practices and hence no reporting. There is no specific budget line for this, which could also be a factor. The same also applies to gender-based violence, which has increased in recent years.

1. COUNTY OVERVIEW

Nyeri county occupies a land area of approximately 3,337 km² and is divided into 6 sub-counties and 30 wards. The county's population is 759,164, representing 1.6 per cent of the national population. This constituted of 384,845 females, 374,288 males and 31 intersex persons.

In 2015/16, the overall poverty rate of Nyeri County was 19.3 per cent with 0.2 per cent living in extreme poverty, which is better than the overall national rates of 36.1 per cent and 8.6 per cent, respectively. Among children, more than one in five were affected by monetary poverty or lack of financial means.³ Additionally, 16.7 per cent of youth and 17.7 per cent of women were also affected by monetary poverty. Moreover, 11.2 per cent of children were living in multidimensional poverty⁴ (deprived in multiple dimensions including nutrition, healthcare, education, housing and drinking water). The proportions of the youth and women in multidimensional poverty were 34.0 per cent and 41.6 per cent, respectively. Poverty levels for all categories fall below the national average. Levels of monetary poverty rates are highest among children while multidimensional poverty rates are highest among women. The overall high rates of poverty, especially among women, means that planning and budgeting processes should better consider the human capital sectors

Table 1: Nyeri county administrative, poverty and demographic profile

Administrative Profile							Latest Available
Area (km ²)							3,337
Number of sub-counties							6
Number of wards							30
Overall poverty (%)							19.3
Extreme poverty (%)							0.2
Population (2019)							759,164
Group	Children	National Children	Youths	National Youths	Wo/men	National Wo/men	
Monetary Poor							
Male (%)	21.4	42.1	17.5	29.1	19.5	30.5	
Female (%)	23.3	41.0	16.1	28.8	17.7	34.1	
Total (%)	22.3	41.6	16.7	28.9	18.1	32.4	
Population	294,177	20,742,290	225,255	13,443,268	196,315	7,847,350	
Multidimensionally Poor							
Male (%)	12.6	49.3	33.6	44.7	37.5	51.0	
Female (%)	9.5	47.1	34.4	49.4	41.6	60.8	
Total (%)	11.2	48.2	34.0	47.1	39.2	56.1	
Population	294,177	20,742,290	225,255	13,443,268	196,315	7,847,350	

Source: Kenya National Bureau of Statistics (2018)

so that the county can maximize on the productive and innovative potential of its future workforce and initiate a fast and sustainable growth trajectory (Table 1).

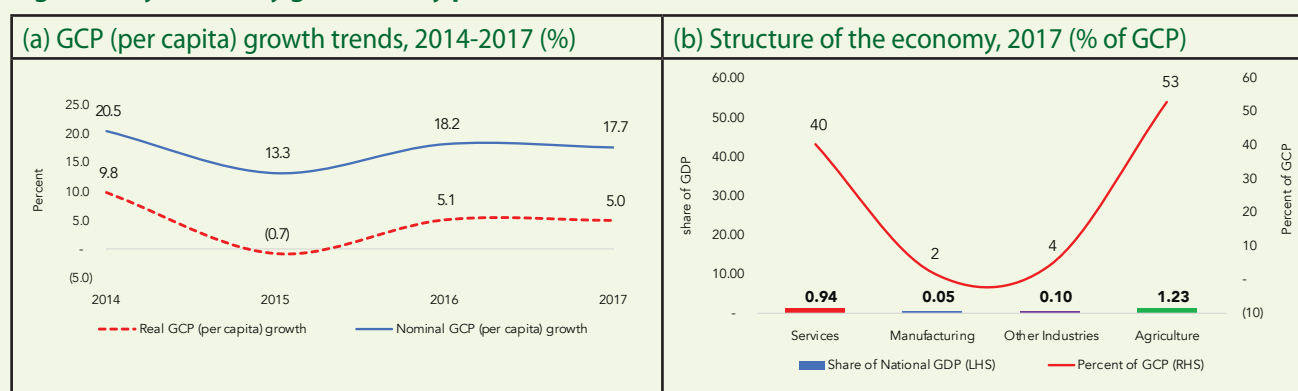
2. STATE OF COUNTY ECONOMY

2.1 Gross County Product Growth

Nyeri county accounted for 2.2 per cent of the national GDP in 2017. Its Gross County Product (GCP) per capita growth rate fluctuated between a maximum of 9.8 per cent in 2014 and a minimum of negative 0.7 per cent in 2015 (Figure 1a). The most recent downturn was largely due to the prolonged drought across the county, and volatility in the business environment.

The economy remains reliant on agriculture, which accounts for nearly 53 per cent of GCP and 1.2 per cent of the national GDP in 2017 (Figure 1b). The key agricultural products produced include tea, coffee, fruits, vegetable, beef and mutton. Manufacturing and services sub-sectors contributed 4.3 per cent and 0.05 per cent to the GCP while other industries including agro-processing, mining and tourism accounted for 40.5 per cent to the county economy. Value addition and processing of agricultural products is mainly done outside the county and country. To increase productivity and the participation of women and youth within the sector, the county needs to continue supporting farmers by intensifying extension services and providing farm inputs among other reforms, specially to reduce the cost of farming, and enhance the marketing of their produce and promote value addition.

Figure 1: Nyeri County gross county product and economic structure, 2014/15-2017/18

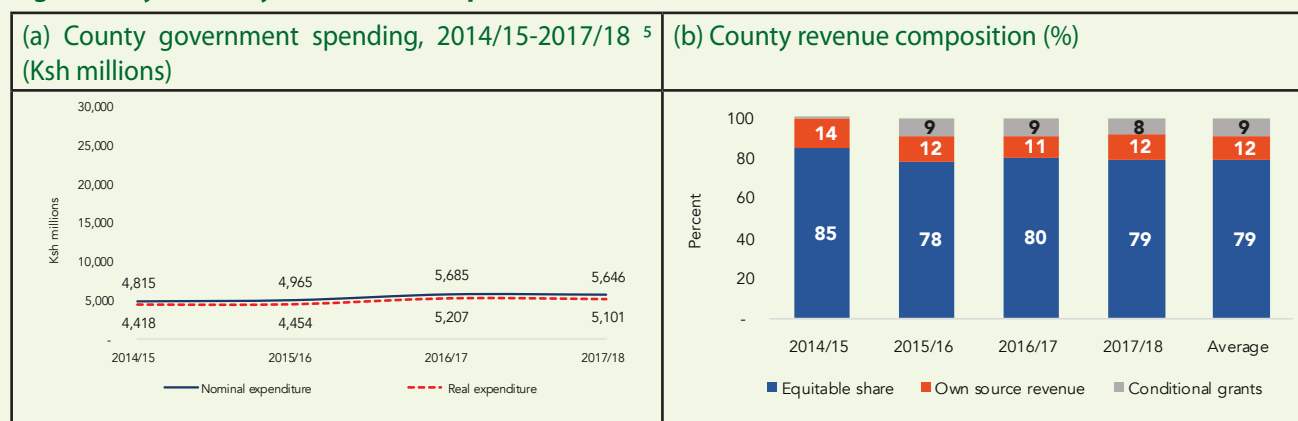


Source: KNBS (2019) Statistics

2.2 Overall Budget Performance

The county government annual spending, in real terms, grew from Ksh 4.41 billion in 2014/15 to Ksh 5.21 billion in 2016/17 before a moderate cut to Ksh 5.1 billion in 2017/18 (Figure 2(a)). The effect of inflation accounted for, on average, Ksh 406 million in loss of purchasing power during the period. This spending is heavily dependent on national government transfers, which accounted for, on average, 79 per cent between 2014/15 and 2017/18. In nominal terms, own source revenue increased from Ksh 432.22 million in 2014/15 to Ksh 760.22 million in 2017/18 while the equitable share transfer increased from Ksh 3.2 billion to Ksh 4.9 billion during the same period. Own source revenue as a share of the total revenue increased from 10 per cent in 2014/15 to 12 per cent in 2017/18. The contribution of own source revenue and

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

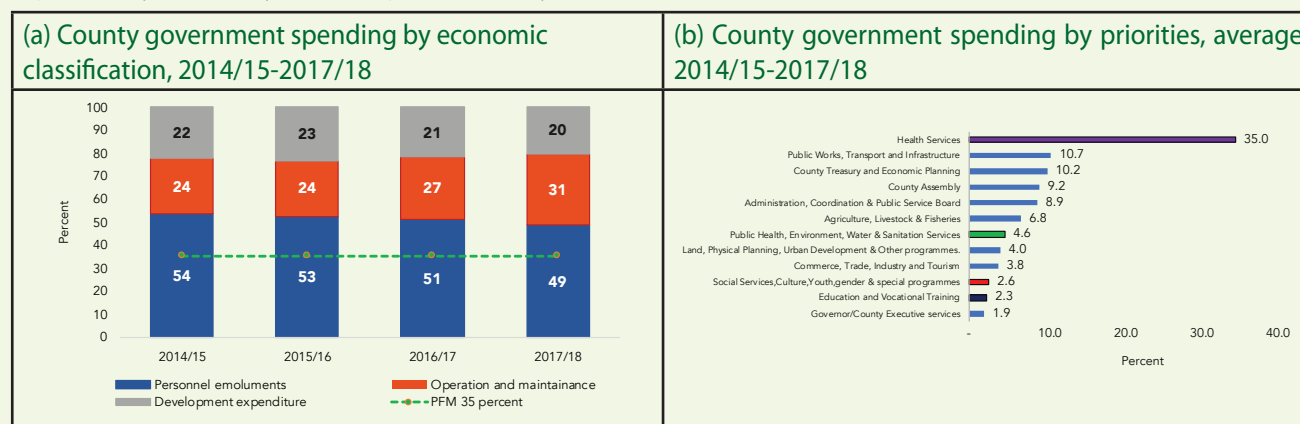


Source: Office of the Controller of Budget (Various) reports, 2014-2018

conditional grants was, on average, 26 percent (Figure 2b). There is need for enhanced fiscal efforts to accelerate revenue mobilization from both local revenue and conditional grants.

The share of actual development budget increased from 22 per cent in 2014/15 to 23 per cent before decreasing to 20 per cent in 2017/18. The recurrent expenditure, which constituted of personnel emoluments and operations and maintenance, accounted for between 77 per cent and 80 per cent throughout the period. Wages alone accounted for between 49 per cent and 54 per cent of government spending throughout the period (Figure 3a). This reflects non-compliance to the Public Finance Management (PFM) Act 2012 provision that ceils development spending at a minimum of 30 per cent of total budget, and the 2015 Regulations which require that not more than 35 per cent of the county's total revenue should go to payment of wages and salaries.

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



Source: Controller of Budget reports, 2014-2018

The county spent approximately 51.0 per cent of the total expenditure during the period under review on health, education, agriculture, nutrition, social protection, youth, gender, water and sanitation. These sectors are regarded as more sensitive to the needs of children, youth and women. The impact of this expenditure in the various programmes and activities varies across sectors.

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 county's priorities included: increasing immunization coverage; increasing Voluntary Counselling and Testing (VCT) uptake; reducing child mortality rates; upgrading, rehabilitating, and constructing and equipping health facilities and establishing youth friendly centres to sensitize the youth on HIV and AIDS and reproductive health issues. Further, in catering for Persons with Disabilities (PWDs), the county planned to exempt them from cost sharing charges to ensure accessibility to health services; construction of disability inclusive buildings and facilities; construction of orthopedic, physiotherapy and rehabilitation units; training and sensitizing medical staff to be disability friendly when giving services; and training of sign language interpreters and deploying them to Level 4 and 5 hospitals.

The health status of children in the county generally improved over the review period. The status of all the selected health indicators, except under 5 mortality, which stood at 115 per 1,000 live births and still birth rate which stood at 21.7 per cent, was better than the national average in all instances. Indicators that have improved between 2014 and 2018 include: proportion of fully immunized children under 1 year from 42.4 per cent to 78.4 per cent; DPT/Hep +HiB3 drop out rate from 7.6 per cent to 4.0 per cent; skilled birth attendant coverage from 45.1 per cent to 84.9 per cent; proportion of pregnant women who attended at least four ANC visits during pregnancy from 38.3 per cent to 70.8 per cent; and proportion of pregnant women who attended at least one ANC visits during pregnancy from 43.8 per cent to 86.0 per cent.

3.1.2 Health budget and expenditure

The share of health budget in the total county budget allocation decreased from 39 per cent in 2014/15 to 32 per cent in 2017/18. The actual health expenditure expanded from Ksh 1 billion in 2014/15 to Ksh 1.1 billion in 2015/16 and 2016/17 before decreasing to Ksh 0.4 billion in 2017/18. The absorption rate declined from 89 per cent in 2014/15 to 85 per

Table 2: Nyeri 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	-	-	-	-	50.0	79.0	-	-	-	-
MMR (death per 100,000 live births) 2016 Estimate	-	-	-	-	318.0	495.0	-	-	-	-
Skilled birth attendant coverage (%) (source: DHIS2)	45.1	53.5	32.5	56.9	63.8	59.3	82.7	53.0	84.9	64.9
Proportion of pregnant women who attended at least one ANC visit during pregnancy (%) (Source: DHIS2)	43.8	76.4	33.1	75.4	66.4	76.9	80.7	73.7	86.0	81.9
Proportion of pregnant women who attended at least four ANC visit during pregnancy (%) (Source: DHIS2)	38.3	35.9	31.9	39.7	62.1	39.8	60.5	32.6	70.8	48.7
Proportion of children under one year who are fully immunized (%) (Source: DHIS2)	42.4	70.2	37.4	75.7	31.5	72.4	79.7	65.9	78.4	77.0
DPT/Hep+HiB3 dropout rate (%) (Source: DHIS2)	7.6	6.8	6.1	7.2	2.7	6.6	8.6	10.1	4.0	4.0
Still Birth Rate (Source : DHIS2)	19.1	29.3	16.2	22.6	18.3	21.5	20.2	22.6	21.7	20.4

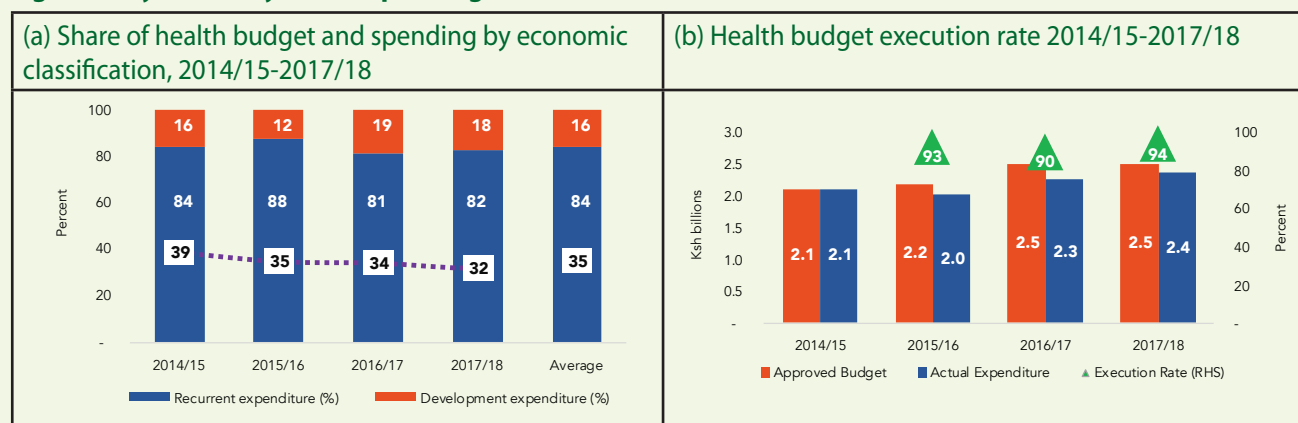
Source: Ministry of Health (2018), Demographic Health Information System (DHIS)

cent in 2015/16 and 2016/17 before dropping to 32 per cent in 2017/18. This is attributable to the declining county own source revenue and delays in the disbursement of equitable share allocation by the National Treasury. Delays of partners in honoring commitments and disbursements into core shared projects also affected the county.

3.1.3 Health sector 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 the sub-counties. The county also aims to prioritize reduced

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



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

prevalence of communicable diseases, and increase awareness, advocacy and early detection to reduce the incidence of non-communicable diseases. This will in turn translate to reduced infant, under five and maternal mortality rates, reduce morbidity and increase immunization coverage. It is also keen on investing in reproductive health information, especially for the youth and undertake awareness campaigns on the importance of family planning. Further, the county will invest in provision of quality health services through employment of more health service providers, construction of more health facilities and equipping them.

In achieving these milestones, the county aims to address various challenges, including: limited funds relative to health needs for the county, including those for children and mothers. The county will also need to ensure that there is adequate allocation for both recurrent and development health expenditures. Further, it also needs to adequately distribute and manage the health workforce; address long procurement processes; and address pending bills affecting the overall sector absorption rate. During the review period, very few programmes were actualized for PWDs and, therefore, there is need to itemize budget lines for PWDs and increase their access to health facilities. The county will also need to

promote women's empowerment through income generating initiatives and affirmative action programmes for better health outcomes for women and children.

3.2 Education and Vocational Training

3.2.1 Education Sector Priorities

County governments are responsible for Early Childhood Development and Education (ECDE) and youth polytechnics, which are part of the Technical Vocational Education and Training (TVET) as per Schedule IV of the Constitution of Kenya 2010. During the plan period 2014-2018, the county education sector focused on enhancing the quality and access to ECDE, youth polytechnics, adult literacy and the bursary award programme for secondary schools, TVETs and tertiary education. Further, it planned to create awareness on drug abuse and gang infiltration among the youth to increase enrolment rates and reduce school drop outs.

Gross ECDE enrolment rate increased from 59.2 per cent in 2014 to 80.1 per cent in 2018 while net enrolment rate (NER) increased from 47.0 per cent to 69.5 per cent during the same period. Despite the increased number of children joining ECDE due to devolution, enrolment is still lower than the national averages of 94.4 per cent for GER while NER is higher than the national average of 63.5 per cent. An equal number of boys and girls are enrolled in ECDE in Nyeri County. There is equality in access to education between male and female school-going children as shown in Table 3.

Gross primary and secondary enrolment rates stood at 119 per cent and 91.8 per cent in 2018, respectively. Net enrolment rate (NER) decreased from 99.0 per cent to 95.9 per cent for primary school and 95.0 per cent to 59.9 per cent for secondary school during the same period. This indicates low transition rates from primary to secondary. The declining transition rates were higher for females than males from 2014/15 to 2017/18 as shown in Table 3. According to the CIDP, there are 49 youth polytechnics with a total population of 3,882 trainees.

There are 3 public vocational training centres, and the county government is setting up three (3) new institutions.

3.2.2 Basic education budget and expenditure

The ECDE budget allocation increased from Ksh 0.1 billion in 2014/15 to Ksh 0.3 billion in subsequent years. The share of ECDE spending as a proportion of total education was, on average, 3.7 per cent during the period. Spending on

Table 3: Nyeri county selected education sector performance indicators

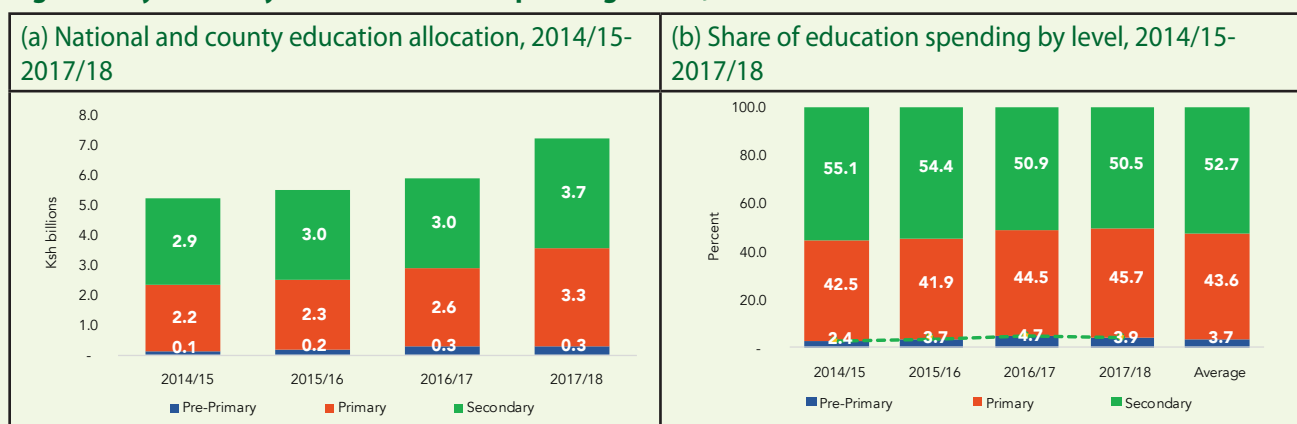
Pre-primary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	59.2	73.6	80.1	94.4
Net enrolment ratio (%)	47.0	71.8	69.5	63.5
Male (%)	46.0	73.4	69.4	62.5
Female (%)	48.0	70.2	69.6	65.0
School size (Public) (Pupils) (Average)	49.0	75.0	46.0	85.0
Gender parity index (value)	1.0	1.0	-	-
Pupil-teacher ratio (No.) (Public)	52.0	31.0	22.0	31.0
Proportion of enrolment in private schools (%)	48.8	31.5	47.0	33.0
Primary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	104.0	104.0	119.0	107.2
Net enrolment ratio (%)	99.0	88.0	95.9	82.4
Male (%)	99.0	86.0	93.4	81.7
Female (%)	99.0	90.0	98.9	83.0
School size (Public) Average No. of pupils	253.0	338.0	273.0	375.0
Gender parity index (Value)	1.0	1.0	-	-
Pupil-teacher ratio (No.)	28.0	42.0	25.0	40.0
Proportion of enrolment in private schools (%)	23.0	16.0	21.0	16.0
Secondary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	98.9	58.7	91.8	66.2
Net enrolment ratio (%)	95.0	47.4	59.9	37.5
Male (%)	84.0	49.6	55.7	35.4
Female (%)	106.0	45.2	64.8	39.8
School size (Public)	-	-	328.3	392.0
Gender parity index (value)	1.0	0.9	-	-
Pupil-teacher ratio (No.) (TSC)	24.0	30.0	24.0	32.0
Pupil-teacher ratio (No.) (TSC and BOM)	20.5	20.2	20.0	20.0
Proportion of enrolment in private schools (%)	18.0	30.7	4.5	5.8

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

primary and secondary education increased from Ksh 2.2 billion in 2014/15 to Ksh 3.3 billion in 2017/18 and Ksh 2.9 billion in 2014/15 to Ksh 3.7 billion in 2017/18, respectively (Figure 5a).

The share of ECDE budget in the total county budget allocation averaged 4 per cent over the review period, comprising of an average 36 per cent development and 36 per cent recurrent (Figure 6a). The absorption rate declined from an average 75 per cent in 2015/16 to 45 per cent in 2017/18 (Figure 6b).

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

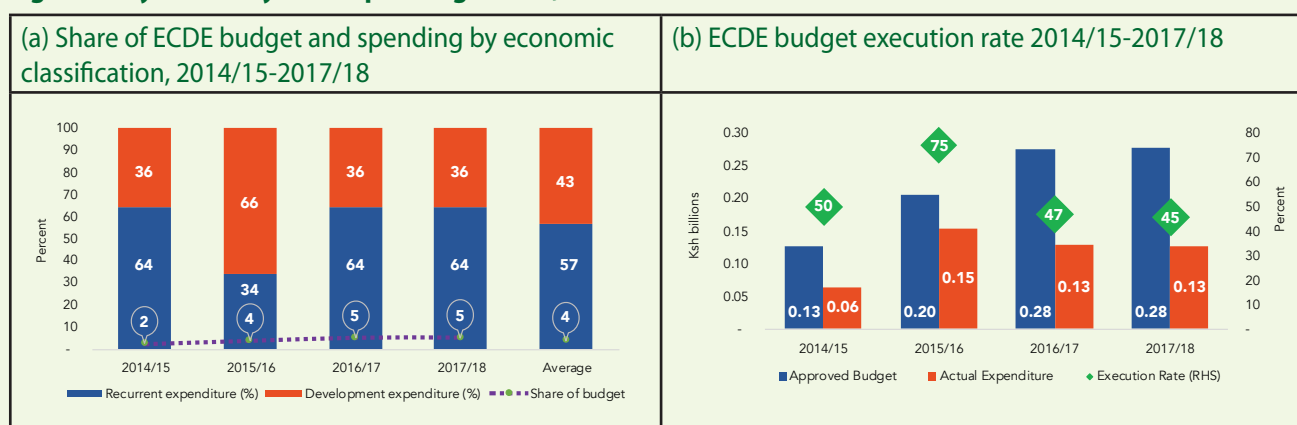


Source: National Treasury (Various), IFMIS

3.2.3 Education medium term expectations

Financial constraints, shortage of staff, inadequate working tools and equipment hinder service delivery at ECDE facilities. The county aims to continue providing quality education, training, ICT, research and innovation services through

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



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

investing in children and youth education through construction, equipping and staffing of ECDE and vocational training centres. Campaigns and sensitization on the part of the youth, especially young women to join TVETs, will be critical. The county also aims to integrate technical and vocational training programmes into local economic development strategies, and making sure training is valuable to labour market opportunities. The county further seeks to ensure that programmes are implemented to reach out to vulnerable and marginalized individuals, and ensuring they have access to education and training that meets their needs.

3.3 Water and Sanitation

The County Integrated Development Plan 2018-2022 outlined investment in the expansion of water and sanitation infrastructure as the main sector priority. The county boasts of two water towers, Aberdare Ranges and Mount Kenya that serve as catchment areas for over 10 rivers providing several sources of water for domestic, wildlife, livestock and irrigation purposes. The county prioritized increased access to clean and portable water by expanding the distribution network. Additionally, the sector aims to prioritize creation of awareness on 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 83 per cent and 55 per cent, respectively. The population within the service area of water utility (company) decreased from 77 per cent to 75 per cent between 2014 and 2018. The proportion of population covered or served by the utility improved from 66 per cent in 2014 to 74 per cent

in 2018. The sector experienced an improvement in non-revenue water⁶ to 30 per cent as at 2018 from 49 per cent in 2014. This is a good improvement, since high non-revenue water denies the water utility revenue to enhance water service delivery and in meeting operations and maintenance costs.

3.3.1 Water and sanitation budget and expenditure

The total budget allocation to the sector as a share of the total county budget allocation during the review period

Table 4: Nyeri county selected WASH sector performance indicators

Indicators	2014-County	2014-National	2018-County	2018-National
County population within service areas of WSPs (%)	77	*	75	*
Water coverage by utilities (%)	66	53	74	*
Non-revenue water (NRW) (%)	49	42	30	*
Sanitation coverage within utility area (%)	78	69	-	*
Sewerage coverage (%)	-	*	13	*
Access to improved water (%)	83	*	83	*
Access to improved sanitation (%)	55	*	55	59
No toilet facility – Potential open defecation county-wide (%)	2	*	-	8

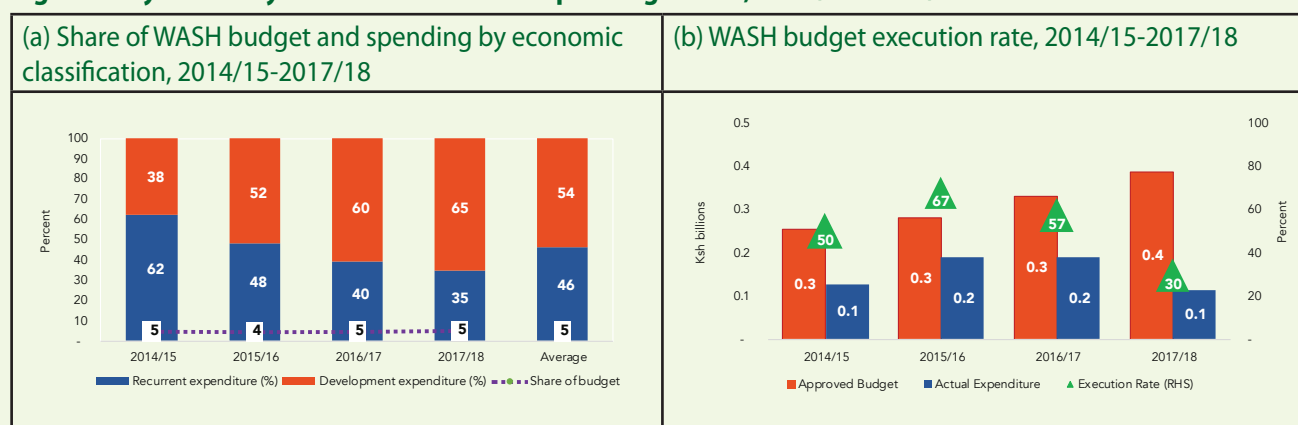
Source: Kenya National Bureau of Statistics (2014), KDHS 2014; County Integrated Development Plan (CIDP) 2018. NB: * Data not available

decreased from 5 per cent in 2014/15 to 4 per cent in 2015/16 before increasing to 5 per cent for the remainder of the period. The total budget allocation increased from Ksh 0.3 billion in 2014/15, 2015/16 and 2016/17 to Ksh 0.4 billion in 2017/18. The total spending on the sector increased from Ksh 0.1 billion in 2014/15 to Ksh 0.2 billion in 2015/16 and 2016/17 before decreasing to Ksh 0.1 billion in 2017/18. The share of development expenditure during the period was, on average, 54 per cent of total spending while recurrent expenditure accounted for 46 per cent. The absorption rate increased from 50 per cent in 2014/15 to 67 per cent in 2015/16, then decreased to 30 per cent in 2017/18. This is also attributed to failure by the exchequer to release the entire amount in approved budget, in addition to capacity constraints.

3.3.2 Water and sanitation medium term expectations

In the CIDP 2018-2022, the county aims to continue with provision of clean water and solid waste management,

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



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

and increased access to decent sanitation. Targeted programmes include promoting water conservation through metering devices, construction of dam/pans and promoting roof harvesting at household level, revitalizing the boreholes by enhancing the green economy, and separating storm water and sewerage system. 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 needs to be given to operations and maintenance for the county to realize the outlined milestones.

3.4 Child Protection, Youth and Women

3.4.1 Child protection, youth and women assistance priorities

The County Integrated Development Plan (CIDP) 2018 to 2022 highlighted coordination and development of communities through social welfare; empowerment of women, PWDs and youth through training; and identifying and reducing the number of orphaned and vulnerable children (OVCs) and children in need of care and protection in charitable children institutions and reintegrating them back to the families, communities and alternative family care while adopting a system's approach to child protection. The key areas of focus for the youth, gender and culture included management of sports activities; promotion and regulation of responsible gaming; and promotion of cultural development activities and coordination of inclusion and gender. In addition, the county planned to provide care and protection of children with disabilities and special needs.

Specifically, on child protection, the county recorded a high number of reported cases of child neglect and abandonment, rising from 17 cases in 2014 to 2,085 cases in 2018. Similarly, reported cases of child trafficking, abduction and kidnapping were 9 in 2018. However, cases of child sexual abuse declined while cases of child labour increased significantly during the period (Table 5).

The county has no records for cases of FGM. The low/non-reporting of Female Genital Mutilation (FGM) to government institutions can be attributed to either the intensive campaigns and initiatives to protect the girl child, fear by the population

Table 5: Nyeri county selected child protection performance indicators (No. of reported cases)

Indicators	2014-County	2014-National	2018-County	2018-National
Child Neglect and Abandonment	17	767	2,085	73245
Child Sexual Abuse	10	636	5	172
Child Trafficking, Abduction and Kidnapping	-	32	9	1022
Child Labour	1	168	15	378
Child Emotional Abuse	-	58	13	853
Child Physical Abuse	10	583	19	2031
Female Genital Mutilation	-	9	-	40

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

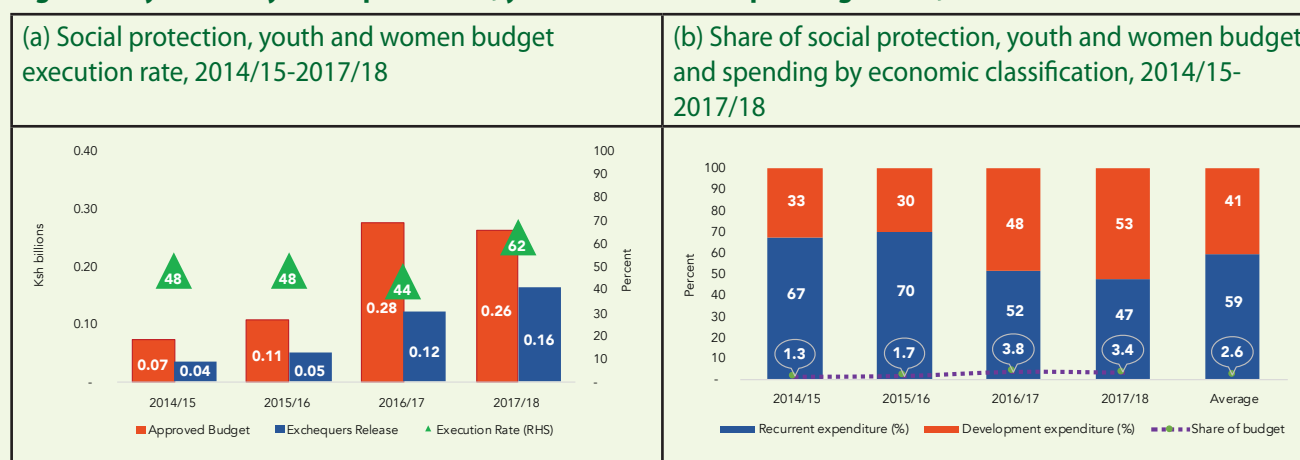
to report such cases, or a culture that does not approve such practices.

3.4.2 Child protection, youth and women budget and expenditure

The sector's budget allocation as a share of total county budget allocation during the review period averaged 2.3 per cent. Spending on the sector was, on average, Ksh 0.13 billion and constituted 59 per cent recurrent and 41 per cent development. The share of recurrent expenditure was highest in 2015/16, accounting for 70 per cent of total expenditure. The absorption rates declined from 48 per cent in 2014/15 and 2015/16 to 44 per cent in 2016/17 before swelling to 62 per cent in 2017/18 (Figure 8b).

3.4.3 Child protection, youth and women medium term expectations

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



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

Over the period 2018 and 2022, the county aims to provide care, support and build capacities of individuals, vulnerable groups and communities including youth, women and PWDs for equity and self-reliance. The county, with support from various development partners, aims to implement various programmes to promote and enhance social initiatives, gender empowerment and mainstreaming; improve recreation services; enhance infrastructure and promote sporting activities for the sportsmen/women. Other programmes will also focus on enhancing child care and facilities, including upgrading the children homes; enhance youth skills through innovative initiatives such as talent academies to nurture sprouting talents, and entrepreneurial and youth empowerment expertise. 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. Continued investment and partnerships in awareness raising initiatives towards ending violence against women and girls will promote social inclusion, leading to transformative development for the county.

3.5 Nutrition

3.5.1 Nutrition priorities

The CIDP 2018-2022 outlined key areas of focus in the nutrition sector. The county sought to undertake promotion of nutrition education and improve nutrition status of households to eliminate malnutrition cases.

For children, county nutrition indicators were higher than national averages according to 2014 data. Stunting stood at 15 per cent of the population while wasting and underweight were not reported in 2014 (Table 6). Furthermore, while the proportion of households consuming adequately iodized salt in the county was lower than the national figure, the proportion remained lower than the target proportion of 100 per cent.

The proportion of overweight or obese women in the county is stood at 49 per cent, higher than the national average of 29 per cent. The average (BMI)⁷ of women in the county was 25.

3.5.2 Nutrition budget and expenditure

Table 6: Selected nutrition performance indicators

Indicators	2014-County	2014-National
Stunted children (%)	15.1	26.0
Wasted children (%)	-	4.0
Underweight children (%)	-	11.0
Vitamin A supplements coverage	30.0	24.0
Proportion of children aged 6 to 59 months- Received Vitamin A supplement	76.1	71.4
Proportion of children consuming adequately iodized salt.	100.0	99.1
Proportion of households consuming adequately iodized salt.	99.9	99.2
" Household salt iodization (50 – 80 mg/Kg KIO3) (% samples) "	37.0	57.0
Number of Women (BMI)	25.3	23.2
Overweight or obesity among women aged 15 to 49 years.	49.2	28.9

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

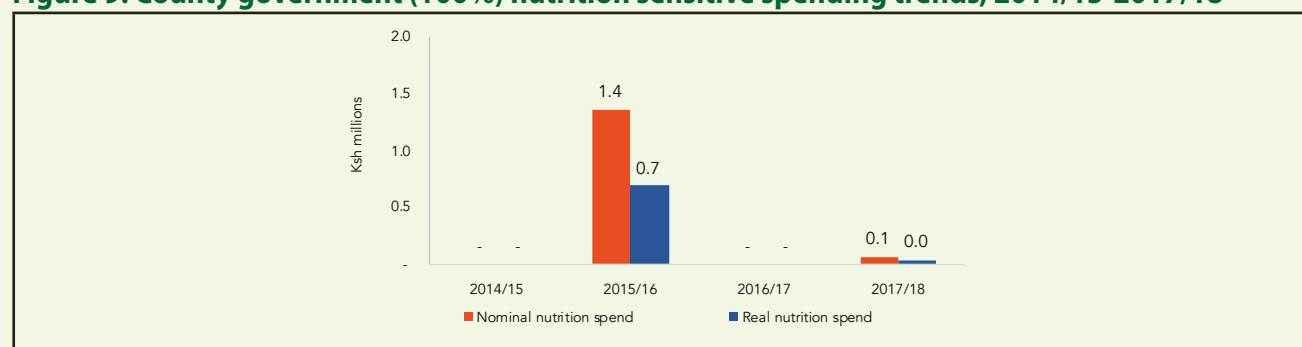
The county spending on nutrition, in real terms (considering direct nutrition interventions), was Ksh 0.69 million in 2015/16 and Ksh 0.03 million. There was no clear spending on nutrition for the period 2014/15 and 2016/17. This could be attributed to lack of a proper nutrition plans in the county.

3.5.3 Nutrition medium term expectations

In the period 2018-2022, the county will need to promote nutrition education, promote balanced diet programmes in public schools 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.

3.6 Other Initiatives for the Special Interest Groups

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



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

4. RECOMMENDATIONS AND IMPLICATIONS FOR POLICY

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

a) AGPO

The county has enhanced Access to Government Procurement Opportunities for special interest groups.

b) Children

The county is investing in reducing cases of malnutrition among school children and establishing child care facilities, including upgrading the children's homes.

c) Youth

The county is investing in capacity building on Business Processes Outsourcing (BPOs) to create jobs for the youth, and develop and nurture talent for the youth and promote trade activities.

d) Women

The county has invested in training women on entrepreneurship skills, creating employment for women, and improving access to reproductive and maternal health services.

e) PWDs

The county is investing in cash transfer programmes for persons with severe disability, inclusivity in decision making and ease of mobility.

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 53 per cent of the Gross County Product (GCP) of Nyeri county comes from agriculture, while 40 per cent is from services.	There is need for the county to grow the economy, promote value addition in services, while boosting manufacturing for improved economic activities, job creation and better incomes especially for youth and women.	County Treasury and Planning/ County Executive/Department of Agriculture
Revenue	The county's own source revenue increased from Ksh 33.0 million in 2014/15 to Ksh 56.6 million in 2017/18.	There is need for the county to strengthen legal and institutional frameworks for tax and non-tax revenue generation as mechanisms to mitigate losses associated with cash handling and poor internal controls and audit mechanisms, while coming up with innovative strategies to grow own source revenue for improved fiscal performance.	County Treasury and Planning/ Directorate of Revenue
Expenditures	The county's direct expenditure on health, education, agriculture, nutrition, social protection, youth, gender, water and sanitation was 51 per cent of total expenditure during the period under review.	The county needs to enhance efficiency of the use of finances in the sector and monitor and evaluate to improve outcomes of programme expenditure.	All sectors/County Treasury and Planning/ County Executive
Health	Maternal and child health outcomes have improved including the rate of child immunization.	To improve this further, the county should increase sensitization on use of skilled deliveries and investments in immunization.	County Treasury and Planning / County Department of Health

Education	The budget for ECDE increased from Ksh 126.5 million in 2014/15 to Ksh 278.4 million in 2017/18.	The county needs to conduct public awareness to promote ECDE, alongside vocational and technical training enrolment and address access challenges. It should also ring-fence ECDE resources so that they are not used for other purposes	County Treasury and Planning/ County Department of Education
WASH	The county allocation for water and sanitation increased from Ksh 252.2 million in 2014 to Ksh 384.3 million in 2018, which was 4 per cent and 7 per cent, respectively, of the county total budget.	The county needs to increase allocation for WASH.	County Treasury and Planning/ County Department of Water and Sanitation/ NYEWASCO
Child Protection, Youth and Women	The county's allocation to child protection, youth and women increased from Ksh 73.4 million to 263.1 million during the review period.	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 available resources are focused to the relevant beneficiaries.	County Treasury and Planning/ County Department of Culture and Social Services
Nutrition	The county committed Ksh 0.69 million in 2015/16 and only Ksh 0.3 million in 2017/18 to interventions that directly contribute to boosting child nutrition, at a time when 15 per cent of the children were stunted.	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 CIDPs.	County Treasury and Planning/ County Department of Health; all other sectors, namely: education, agriculture, social protection and WASH
Budget 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 56 per cent in 2014/15 to 48 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
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.	The county needs standalone budget lines to effectively deliver these services, especially to women and girls given there are no specific budget lines. 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)

- 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).
- See, for example, UNICEF (2017) Early Moments Matter, New York: UNICEF.
- See, for example, UNICEF (2017) Early Moments Matter, New York: UNICEF.
- Monetary poverty measures the lack of financial means of households to provide its members with basic goods and services deemed necessary for their survival and development. Extreme poverty refers to an income below the food poverty line. Households whose adult equivalent food consumption expenditure per person per month fell below Ksh 1,954 in rural areas and Ksh 2,551 in urban areas were deemed to be food poor. Similarly, households whose overall consumption expenditure fell below Ksh 3,252 in rural areas and Ksh 5,995 in urban areas, per person per month were considered to be overall poor.
- 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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For more information, contact

Kenya Institute for Public Policy Research and Analysis
Bishops Road, Bishops Garden Towers
P.O. Box 56445-00200, Nairobi
Tel: 2719933/4 ; Cell: 0736712724, 0724256078
Email: admin@kippra.or.ke
Website: <http://www.kippra.org>
Twitter: @kipprakenya

