

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



County Government of Narok

KEY HIGHLIGHTS OF THE BRIEF

This is a review on how the County Government of **Narok** plans and budgets to support the needs of children, youth and women. The analysis focused on social sector budgets and actual expenditures for the period 2013/14-2017/18, including health, education, social protection services, water and sanitation, and nutrition sectors. The analysis is based on budget data and information collected from county policy documents and through interviews with relevant county stakeholders. The key findings and recommendations from the analysis are summarized below:

- a) **An estimated 67 per cent of the Gross County Product (GCP)¹ of Narok, which was ranked 11th (2.3% contribution to GDP) of all the 47 counties in Kenya in terms of GDP contribution comes from agriculture.** However, agricultural productivity is vulnerable to weather shocks, thus requiring measures to mitigate the shocks, while promoting manufacturing through agro-processing, and enhancing access to agriculture markets. Moving forward, the county needs to continue supporting farmers to enhance the marketing of their produce and promote value addition. It also needs to attract more investments in manufacturing, and services to have a balanced economy.
- b) **The county's own source revenue increased from Ksh 1.7 billion in 2014/15 to Ksh 1.9 billion 2017/18.** However, as a share of total revenue, the county's own source revenue declined from 26.1 per cent in 2014/15 to 18.6 per cent in 2017/18. Equitable share transfer increased from Ksh 4.9 billion to Ksh 6.3 billion during the same period. To improve the share of its own source revenue, the county should implement innovative and accountable strategies for revenue payment and management, increasing revenue base, administration capacity and public awareness.
- c) **The budget for health increased from Ksh 0.9 billion in 2014/15 to Ksh 2.1 billion in 2017/18, resulting into improvement in maternal and child health outcomes during the same period.** For example, the number of women who had access to skilled birth attendant during delivery, which was 27.6 per cent in 2014, improved to 33.6 per cent in 2018. The share of fully immunized children in the county improved slightly from 55.7 per cent in 2014 to 58.9 per cent in 2018. However, the county lags the national averages, which calls for continued scaling up of investments. The county should continue strengthening efficiency in utilization of available resources, and awareness on availability and importance of free maternity services in the county.
- d) **The budget for Early Childhood Development Education (ECDE) increased from Ksh 0.7 billion in 2014/15 to Ksh 1.5 billion in 2017/18.** Partly because of increased spending on ECDE, the gross ECDE enrolment rate in the county went up from 9 per cent in 2014 to 15 per cent in 2018. This indicates that the county needs to sustain the allocation trends for the ECDE programme towards quality education and sustainability of enrolment. Looking forward, the county should ensure adequate provision of financial resources, teaching staff and provide adequate teaching and learning materials and equipment for the ECDE sector.
- e) **The county allocation for water and sanitation remained constant at Ksh 0.2 billion which was 2 per cent of the county total budget over the review period.** This was an under-investment given that about 65 per cent of the population have no access to improved water sources. The county needs to increase allocation for WASH. The county should improve execution of WASH budget for improved WASH-related indicators.
- f) **The county's allocation to child protection, youth and women increased from Ksh 20 million in 2014/15 to Ksh 90 million in 2017/2018.** Looking forward, the county needs to increase allocation to child protection given the high levels of child neglect, abandonment and child labour; and expand relevant social services to reach vulnerable girls as a protective measure against early pregnancies, FGM, early and/or forced marriages.

- g) **The county allocated Ksh 144 million for nutrition spending in 2014/15 but reduced to Ksh 31 million in 2015/16 with no allocation in 2016/17 and 2017/2018.** The execution rate was about 50 per cent despite 32.5 per cent of the children being stunted. The county should ensure that direct nutrition interventions in sectors such as agriculture, education and health are budgeted for with visible budget lines in the county plans and budgets.
- h) **The budget execution rate for most social sector budgets, especially health and education was above 90 per cent compared to water and nutrition, which was below 60 per cent.** There is need for inter-departmental peer review and learning to enhance budget utilization. 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 number of reported cases of child neglect and abandonment from one case in 2014 to 1,441 in 2018, yet there is no specific budget line for this. The same also applies to gender-based violence, which increased during the review period.

1. COUNTY OVERVIEW

Narok county occupies a land area of approximately 17,933 km² and is divided into 11 sub-counties and 55 wards. The county's population is projected at 1.17 million in 2018, which is 2.3 per cent of the national population.

In 2015/16, the overall poverty rate of the county was 23.0 per cent, with 5.5 per cent living in extreme poverty, which is slightly better than the overall national rates of 36.1 per cent and 8.6 per cent, respectively. Among children, 24.7 per cent were affected by monetary poverty or lack of financial means,² compared to 17.2 per cent for youth and 23.0 per cent for women. Additionally, 77.6 per cent of children were living in multidimensional poverty; that is, deprived in several areas including nutrition, healthcare, education, housing and drinking water³ with youth and women recording 71.2 and 78.1 per cent, respectively. The overall high rates of poverty, especially among women and 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.

Table 1: Narok county administrative, poverty and demographic profile

Administrative Profile							Latest Available
Area (km ²)							17,933
Number of sub-counties							-
Number of wards							-
Overall poverty (%)							23%
Extreme poverty (%)							5.5%
Population (2019)							1,157,873
Group	Children	National Children	Youths	National Youths	Wo/men	National Wo/men	
Monetary Poor							
Male (%)	24.6	42.1	16.8	29.1	16.2	30.5	
Female (%)	24.8	41.0	17.5	28.8	29.5	34.1	
Total (%)	24.7	41.6	17.2	28.9	23.0	32.4	
Population	553,524	20,742,290	301,160	13,443,268	150,440	7,847,350	
Multidimensionally Poor							
Male (%)	82.5	49.3	69.1	44.7	70.1	51.0	
Female (%)	73.0	47.1	73.0	49.4	78.1	60.8	
Total (%)	77.6	48.2	71.2	47.1	75.8	56.1	
Population	553,524	20,742,290	301,160	13,443,268	150,440	7,847,350	

Source: Kenya National Bureau of Statistics (2018)

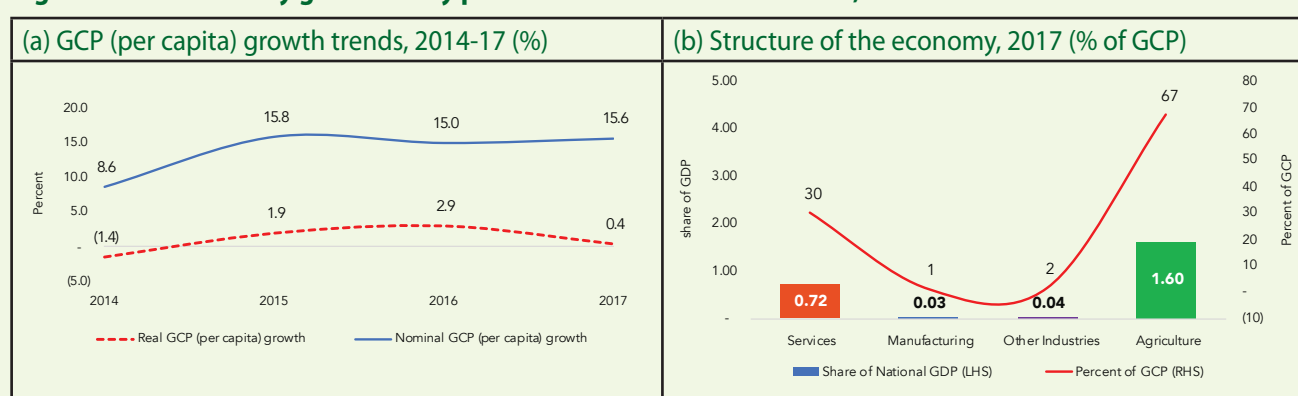
2. STATE OF COUNTY ECONOMY

2.1 Gross County Product Growth

Narok county accounted for 2.3 per cent of the national GDP in 2017, ranking 13th out of the 47 counties. Economic growth in Narok county has fluctuated significantly since 2013. In real per capita terms, the economy dropped by negative 1.4 per cent in 2014 before rising by 1.9 per cent in 2015, then reaching 2.9 per cent again in 2016 followed by deceleration to 0.4 per cent in 2017 (Figure 1a). The most recent downturn was largely due to the prolonged electioneering period.

The economy remains heavily reliant on agriculture, which accounted for 67 per cent of GCP followed by services sector with 30 per cent (Figure 1b). The manufacturing sector contributed 1 per cent while other industries (including mining, quarrying, electricity, water and construction) contributed 2 per cent). The county needs to diversify its economy since agriculture is taking a significant share. This can be done by encouraging agro-processing, which will enhance manufacturing and expand the services sector. The county also needs to promote agricultural productivity since it is significant in the participation of women and youth for jobs and income. The county should put in place mechanisms to reduce the cost of farming, enhance the marketing of agricultural produce and promote agricultural value chains. This can be done through developing infrastructure and enhancing farmers' capacities in modern agricultural methods. Extension services, agribusiness and research needs to be promoted. The county should also seek to attract more investments in manufacturing, and services, for a balanced economy. This can be done through collaboration with different sub-sectors, especially the private sector.

Figure 1: Narok County gross county product and economic structure, 2013-17



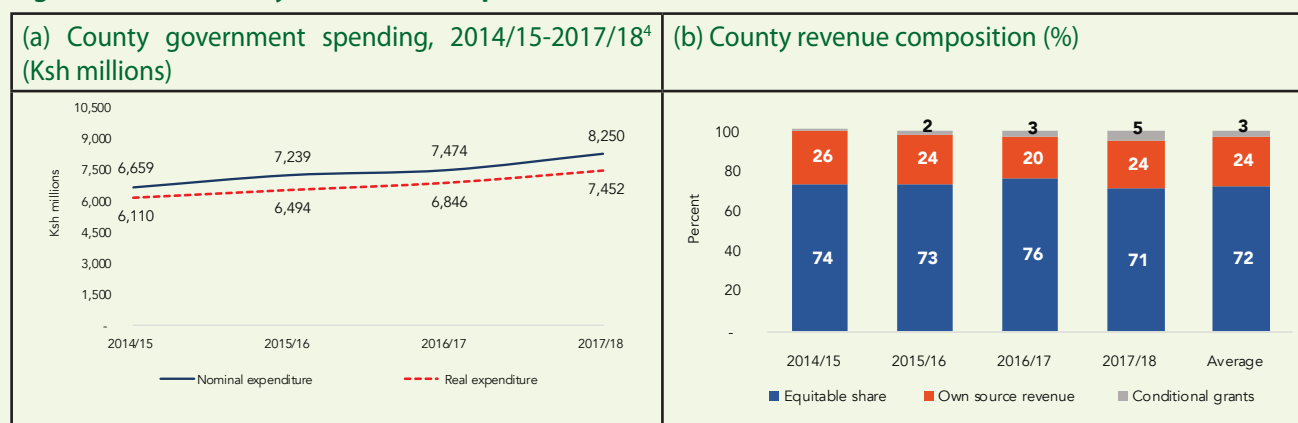
Source: KNBS (2019) Statistics

2.2 Overall Budget Performance

The county government annual spending grew from Ksh 6.66 billion to Ksh 7.24 billion in 2014/15, before a moderate rise in 2017/18 to 8.25 million (Figure 2a). The effect of inflation accounted for, on average, Ksh 0.7 billion in loss of purchasing power during the period. This spending is heavily dependent on national government transfers accounting for 76 per cent. The burden of the drop in county government spending predominantly affects social sector spending, which are recurrent in nature. In nominal terms, own source revenue was 24 per cent of total county revenue, on average, having increased from Ksh 1.7 billion in 2014/15 to Ksh 1.9 billion in 2017/18 while the equitable share transfer increased from Ksh 4.9 billion to Ksh 6.3 billion during the same period. There is need for enhanced fiscal efforts to accelerate revenue mobilization from both local revenue and conditional grants to cover the decline in own source revenue from 26.1 per cent in 2014/15 to 23.9 per cent of total revenue in 2017/18 (Figure 2b).

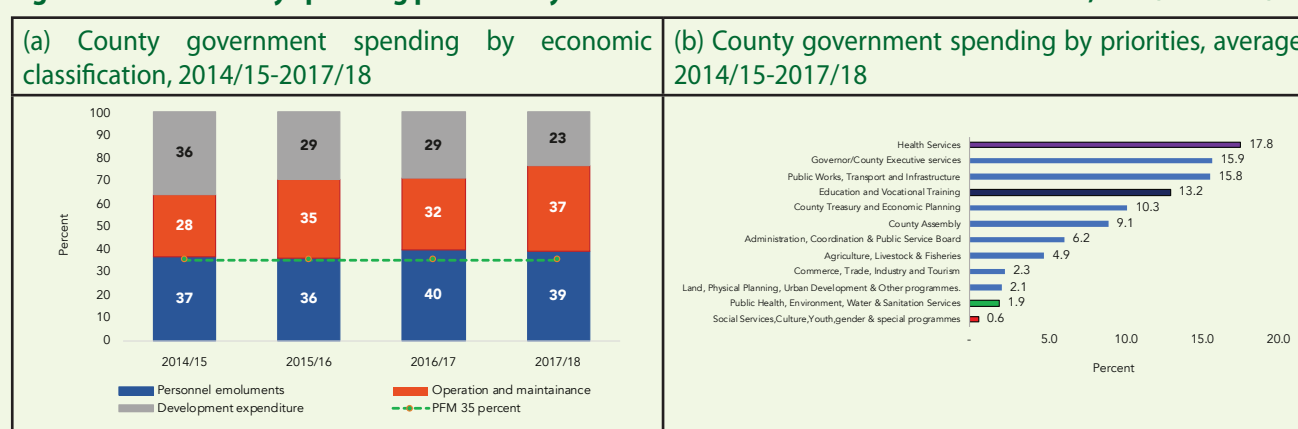
The development share of the of actual spending has been declining from 36 per cent in 2014/15 to 23 per cent in 2017/18. Recurrent expenditure of the county expenditure, which includes wages, operations and maintenance dominates spending, having constituted 39 per cent spent on personnel emolument and 37 per cent spent on operations and maintenance, respectively. This leaves only 23 per cent of the county income available for development, which compromises the county long-term objectives, including infrastructure development (Figure 3a). The county needs to improve on compliance with 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 only a maximum of 35 per cent of the county's total revenue for wages and salaries.

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



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

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



Source: Controller of Budget reports, 2014-2018

The county spent over 40.4 per cent of total expenditure during the period under review on health, education, agriculture, nutrition, social protection, youth, gender, water and sanitation. These sectors are regarded as being more sensitive to the needs of children, youth and women. Health services spending accounts for the largest share of total spending at 17.8 per cent of the total spend during the review period. The education sector (Early Childhood Development Education - ECDE and Vocational Training Centres - VTCs) received 13.2 per cent while water and sanitation received 1.9 per cent, social services, culture youth and gender received 0.6 per cent, and agriculture 4.9 per cent (Figure 3b). The impact of this expenditure on the various programmes and activities varies across sectors.

3. ANALYSIS OF SOCIAL SECTOR SPENDING

3.1 Health

Health is a key spending priority of the county government, consuming about 17.8 per cent of the total budget in between the period 2014 and 2018. During this period, the sector gave priority to reduction of high HIV prevalence in the county, increased access and uptake of family planning, improved access to immunization among the children, increased skilled birth attendants during deliveries, reduction of all levels malnutrition, halting and reversing the rising burden of non-communicable diseases, and reducing the burden of communicable conditions. The sector's priority projects included: construction/renovation of facilities; ambulances services; automation of health records; recruitment of nurses and public health officers; health promotion campaigns; community screening; trachoma control; TB diagnostic and treatment; ART/PMTCT provision; polio and measles immunization campaigns; community-led total sanitation; malaria outbreak control; hospital transport services; and integrated outreaches.

The number of women with access to a skilled birth attendant during delivery increased from 27.6 per cent in 2014 to 33.6 in 2018. This is attributed to the introduction of free maternity services in 2013. This was lower than the national average of 64.9 per cent in 2018, indicative of relatively limited access to health services to expectant mothers in the county. The proportion of children who were fully immunized improved during the review period, although below the national average. The share of fully immunized children in the county improved from 55.7 per cent in 2014 to 58.9 per cent

Table 2: Narok 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	-	-	-	-	58.0	79.0	-	-	-	-
MMR (death per 100,000 live births) 2016 Estimate	-	-	-	-	299.0	495.0	-	-	-	-
Skilled birth attendant coverage (%) (source: DHIS2)	27.6	53.5	38.1	56.9	36.7	59.3	23.3	53.0	33.6	64.9
Proportion of pregnant women who attended at least one ANC visit during pregnancy (%) (Source: DHIS2)	76.4	76.4	85.8	75.4	78.3	76.9	57.0	73.7	68.6	81.9
Proportion of pregnant women who attended at least four ANC visit during pregnancy (%) (Source: DHIS2)	21.1	35.9	28.2	39.7	24.6	39.8	17.2	32.6	24.4	48.7
Proportion of children under one year who are fully immunized (%) (Source: DHIS2)	55.7	70.2	67.5	75.7	68.1	72.4	46.7	65.9	58.9	77.0
DPT/Hep+HiB3 dropout rate (%) (Source: DHIS2)	8.1	6.8	10.0	7.2	11.1	6.6	14.0	10.1	4.1	4.0
Still Birth Rate (Source : DHIS2)	21.0	29.3	24.7	22.6	22.0	21.5	43.9	22.6	33.7	20.4

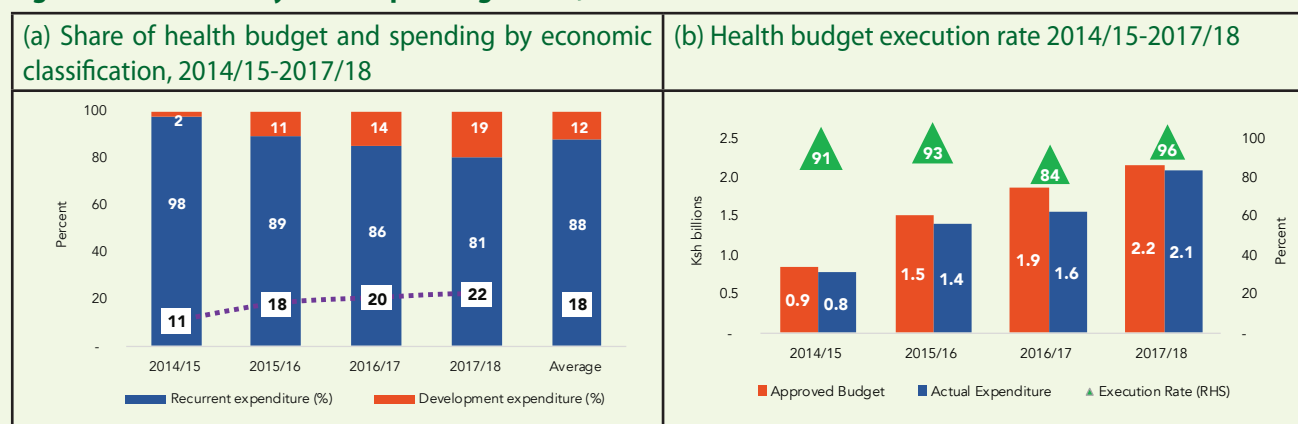
Source: Ministry of Health (2018), Demographic Health Information System (DHIS)

in 2018. Infant mortality and under 5 mortality rate was estimated at 58 deaths per 1,000 live births in 2016, slightly lower than the national average of 79 deaths per 1,000 live births.

3.1.1 Health budget and expenditure

The share of health budget in the total county budget allocation rose from 11 per cent to 22 per cent over the review period, which comprised of over 88 per cent recurrent and 12 per cent development (Figure 4a). Despite the expansion in county health budget allocation from Ksh 0.9 billion in 2014/15 to Ksh 2.2 billion in 2017/18, the absorption rate declined during the review period. This is attributable to failure by the exchequers to release the full amount approved in the health budget. Health actual expenditure expanded from about Ksh 0.8 billion to Ksh 2.1 billion. This translated to absorption rate of over 96 per cent in 2017/18, being the highest for the years under review.

Figure 4: Narok county health spending trends, 2014-18



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

3.1.2 Health medium term expectations

The county health sector priorities for the period 2018-2022 include: enhancing health emergency response systems; rehabilitation, upgrading and equipping of the county health facilities; reducing child and maternal mortality rate; and developing systems of attracting, motivating and retaining medical practitioners. The county will implement the curative health services programme, which will focus on equipping health facilities, providing curative and diagnostic services, and management of referral services. On the preventive and promotive health services, the focus will be on reproductive, maternal, newborn child, adolescent health, disease prevention and control, nutrition, health promotion, environmental health and community health services.

To realize these new milestones, the county will need to address various challenges including: poverty, limited resources, inefficiencies in utilization of available resources and weak regulatory systems. Challenges in the health environment include high maternal, neonatal and child mortalities from preventable conditions, high adolescent pregnancies, increasing cases of newly

infected with HIV, and management of injuries and non-communicable diseases. Poverty remains a major challenge affecting people's ability to maintain health and seek health when needed. Limited resources, inefficiencies in utilization of available resources and weak regulatory systems have greatly constrained the sector from effectively responding to these challenges.

3.2 Education and Vocational Training

3.2.1 Education sector priorities

County governments are responsible for Early Childhood Development Education (ECDE) and TVETs, and Schedule IV of the Constitution of Kenya 2010. During the plan period 2013-2017, the focus of the county education sector was to enhancing the quality and access to ECDE, youth polytechnics and the bursary award programme for secondary, TVETs and tertiary education.

Gross ECDE enrolment rate increased from 70.4 per cent in 2014 to 90.6 per cent in 2018 while net enrolment rate (NER) decreased from 67.0 per cent to 47.7 per cent during the same period. This was generally lower than the national averages, indicating that less children joined ECDE than before with implementation of devolution. More boys are enrolled in ECDE than girls in Narok county. There is inequality in access to education between male and female school-going children in favour of boys as shown in Table 3.

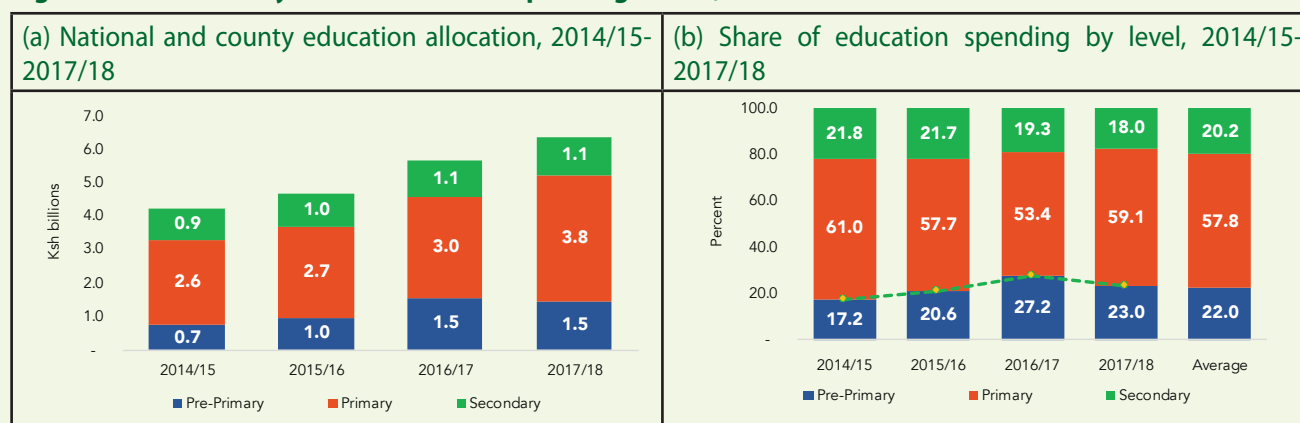
Table 3: Narok county selected education sector performance indicators

Pre-primary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	70.4	73.6	90.6	94.4
Net enrolment ratio (%)	67.0	71.8	47.7	63.5
Male (%)	70.8	73.4	44.5	62.5
Female (%)	63.2	70.2	48.9	65.0
School size (Public) (Pupils) (Average)	85.0	75.0	104.0	85.0
Gender parity index (value)	0.9	1.0	-	-
Pupil-teacher ratio (No.) (Public)	46.0	31.0	37.0	31.0
Proportion of enrolment in private schools (%)	16.5	31.5	19.0	33.0
Primary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	89.0	104.0	104.0	107.2
Net enrolment ratio (%)	79.5	88.0	76.1	82.4
Male (%)	89.0	86.0	71.0	81.7
Female (%)	70.0	90.0	81.0	83.0
School size (Public) Average No. of pupils	351.0	338.0	362.0	375.0
Gender parity index (Value)	0.9	1.0	-	-
Pupil-teacher ratio (No.)	51.0	42.0	51.0	40.0
Proportion of enrolment in private schools (%)	9.0	16.0	10.0	16.0
Secondary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	44.0	58.7	37.6	66.2
Net enrolment ratio (%)	45.0	47.4	20.9	37.5
Male (%)	42.0	49.6	20.7	35.4
Female (%)	48.0	45.2	21.2	39.8
School size (Public)	-	-	306.1	392.0
Gender parity index (value)	0.7	0.9	-	-
Pupil-teacher ratio (No.) (TSC)	34.0	30.0	35.0	32.0
Pupil-teacher ratio (No.) (TSC and BOM)	20.8	20.2	20.0	20.0
Proportion of enrolment in private schools (%)	49.0	30.7	4.6	5.8

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

Gross primary and secondary enrolment rates stood at 104.0 per cent and 37.6 per cent in 2018, respectively. Net enrolment rate (NER) decreased from 79.5 per cent to 76.1 per cent for primary school and also decreased from 45 per cent to 20.9 per cent for secondary school between 2014 and 2018. There is inequality in access to primary education between male and female school-going children in favour of boys as shown in Table 3. More boys than girls enrolled in primary school while more girls than boys enrolled in secondary school.

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



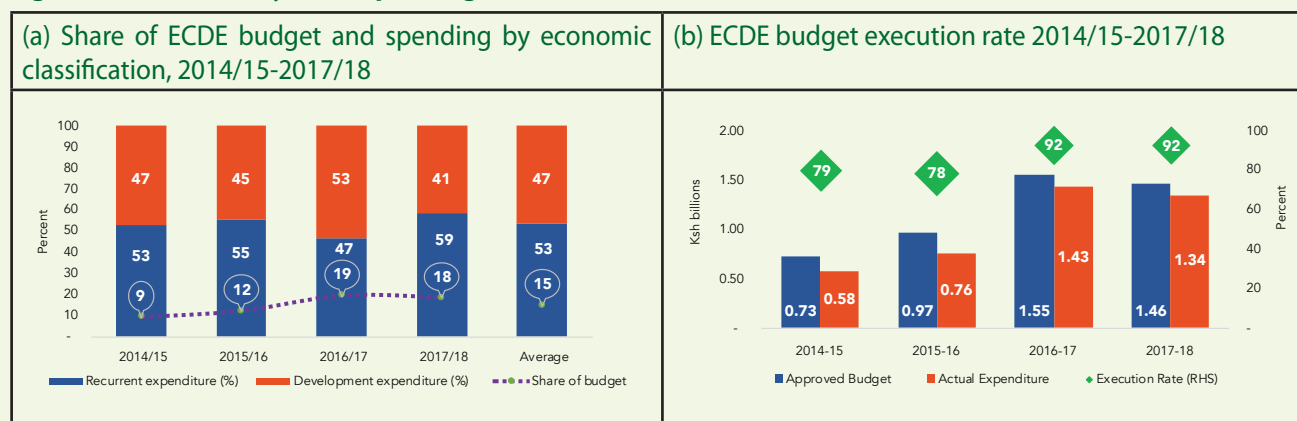
Source: National Treasury (Various), IFMIS

3.2.2 Education and vocational training budget and expenditure

The share of ECDE allocation in the county, in nominal terms, increased from Ksh 0.7 billion in 2014/15 to Ksh 1.5 billion in 2016/17 and 2017/18. The county expanded the primary school level budget from Ksh 2.6 billion in 2014/15 to Ksh 3.8 billion in 2017/18 while the secondary school budget increased from Ksh 0.9 billion in 2014/15 to Ksh 1.1 billion in 2016/17 and 2017/18 (Figure 5a). ECDE allocation averaged 22 per cent of the total education spending in the county (Figure 5b).

The share of ECDE budget in the total county budget allocation increased from 9 per cent in 2014/15 to 19 per cent in 2016/17 before decreasing to 18 per cent in 2017/18. Total spending on ECDE increased from Ksh 0.58 billion in 2014/15 to Ksh 1.43 billion in 2016/17 before decreasing to Ksh 1.34 billion in 2017/18 (Figure 6b). Spending comprised of, on average, 47 per cent development expenditure and 53 per cent recurrent expenditure during the period (Figure 6a). The absorption rates decreased from 79 per cent in 2014/15 to 78 per cent in 2015/16 before increasing to 92 per cent in 2016/17 and 2017/18.

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



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

3.2.3 Education medium term expectations

The county government with support from stakeholders aims to continue investing in construction of ECDE centres; recruitment of ECDE teachers; promoting the need to embrace vocational training centres at the county through expansion of VTCs and promoting vocational trainings; improving access to primary and secondary education; building sporting talent in Narok; empowering talent; and empowerment programmes.

3.3 Water and Sanitation

3.3.1 Water and sanitation sector priorities

The 2013-2017 Narok County Integrated Development Plan outlined investment in the expansion of water and sanitation infrastructure. Some priority areas included: Construction of water treatment plant; installation of new

distribution lines; rehabilitation of existing boreholes; pipeline extensions; construction of dams, boreholes and water pans; and distribution of water tanks.

Access to improved water was estimated at 35 per cent of the population against the national average of 72.6 per cent. The population within the service area of water utility (company) increased from 5 per cent to 7 per cent between 2014 and 2018. The proportion of population covered or served by the utility improved from 37 per cent in 2014 to 45 per cent in 2018. The sector experiences the problem of non-revenue water⁵ at about 37 per cent as at 2018, a stagnation from 2014. High non-revenue water denies the water utility revenue to enhance water service delivery and in meeting operations and maintenance costs.

Table 4: Narok county selected WASH sector performance indicators

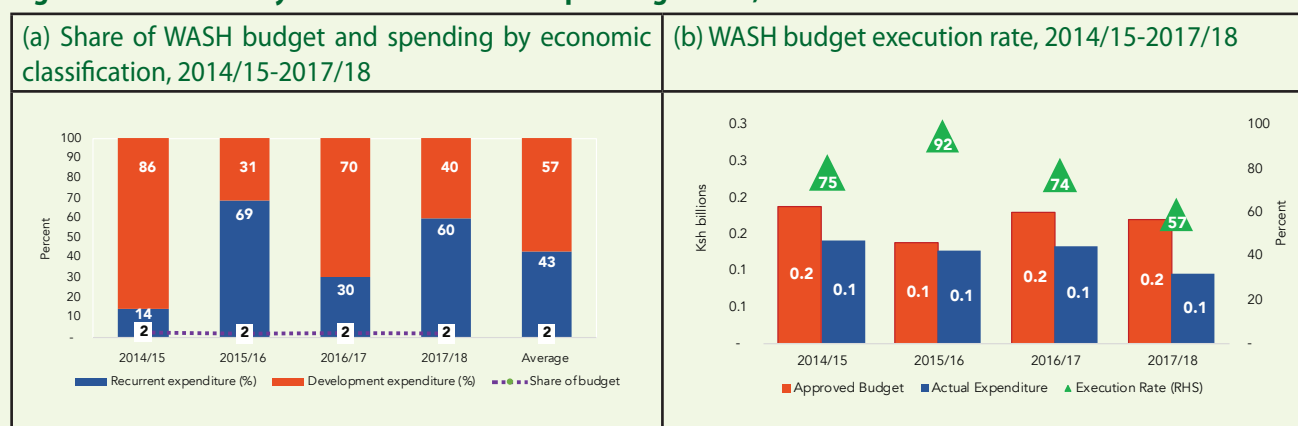
Indicators	2014-County	2014-National	2018-County	2018-National
County population within service areas of WSPs (%)	5	*	7	*
Water coverage by utilities (%)	37	53	45	*
Non-revenue water (NRW) (%)	37	42	n.c.d.	*
Sanitation coverage within utility area (%)	66	69	-	*
Sewerage coverage (%)	-	*	-	*
Access to improved water (%)	35	*	35	*
Access to improved sanitation (%)	42	*	42	59
No toilet facility – Potential open defecation county-wide (%)	31	*	31	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

Water and sanitation received about Ksh 0.171 billion, which translated to an average of 2 per cent of the total county budget. This comprised of 57 per cent development and 43 per cent recurrent spending (Figure 7a). While the approved budget reduced from Ksh 0.142 billion in 2014/15 to Ksh 0.096 billion in 2017/18, the absorption rate declined from 75 per cent in 2014/15 to 57 per cent in 2017/18, respectively. This is also attributed to failure by the exchequer to release the entire approved budget amount, and also capacity constraints.

Figure 7: Narok county water and sanitation spending trends, 2013-18



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 increase access and availability of safe water by investing in water supply infrastructure development and rehabilitation, provision of sanitation services, and protecting and conservation of existing water sources. This will be achieved through construction of dams and pans for water storage, construction of water supplies, drilling and equipping of boreholes, springs protection and development, supporting rain water harvesting in institutions and communities, rehabilitation of water systems, and construction of sanitation and sewerage facilities to improve services in rural and urban areas.

3.4 Social Protection and Empowerment

3.4.1 Social protection and empowerment priorities

The County Integrated Development Plan (2013-2017) underscored the role of social protection, culture and recreation sector in promoting gender, children and social development; culture and arts; youth affairs and sports.

This is aimed at sustainable and equitable socio-cultural and economic empowerment. Some of the priorities included: establishment of county cultural centres and libraries; Maasai cultural programme; construction of modern museum; development of youth empowerment centres; youth groups training; establishing a county youth endowment fund; *boda boda* (motor bike riders) training; construction and/renovation of sports stadiums; establishing a sports and talent academy and a high altitude camp; construction of a Persons With Disability (PWDs) sports complex; anti-female genital mutilation (FGM) campaigns; establishing a county women endowment fund, women economic empowerment programme; development of home craft centres; empowerment of women groups, self-help groups and PWD groups; establishing a rescue centre for girls; support to the disabled, orphaned and vulnerable children (OVCs) and elderly persons and special needs groups; among others.

The availability and disaggregation of data to support policy analysis on social protection, services and empowerment dimensions especially for youth, women and persons with disability is a major challenge for the county. This calls for concerted effort to build capacity on data. However, some sources have data on children, which easily enables analysis of child protection (Table 5)

Specifically, on social child protection, the county recorded a high number of reported cases of child neglect and abandonment rising from 13 cases in 2014 to 648 cases in 2018. Similarly, child trafficking, abduction and kidnapping increased from 0 in 2014 to 5 in 2018. Moreover, cases of child sexual abuse and child labour increased from 1 in 2014 to 27 in 2018.

The county reported only 3 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: Narok county selected child protection performance indicators (No. of reported cases)

Indicators	2014-County	2014-National	2018-County	2018-National
Child Neglect and Abandonment	13	767	648	73245
Child Sexual Abuse	18	636	6	172
Child Trafficking, Abduction and Kidnapping	-	32	5	1022
Child Labour	1	168	10	378
Child Emotional Abuse	-	58	13	853
Child Physical Abuse	1	583	27	2031
Female Genital Mutilation	2	9	3	40

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

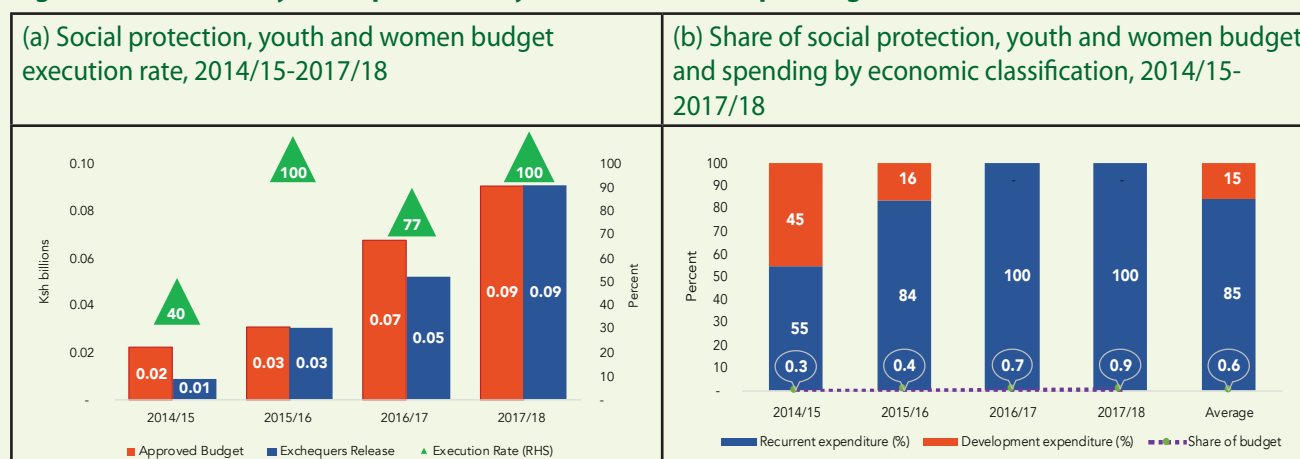
3.4.2 Social protection budget and expenditure

The county's allocation to social protection, youth and women increased from Ksh 20 million in 2014/15 to Ksh 90 million in 2017/2018. Absorption rate improved from 40 per cent in 2014/15 to 77 per cent in 2016/17 before reaching 100 per cent in 2017/18 due to prolonged election period and failure by the county exchequer to release the entire approved budget amount (Figure 8a). The Ksh 0.09 billion represented 0.09 per cent of the overall county budget. The share of recurrent spending gradually increased from 55 per cent to 100 per cent between 2014/15 and 2017/18, averaging 85 per cent during the review period (Figure 8b).

3.4.3 Social protection and empowerment medium term expectations

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. Some of the priority areas include technical vocational education and training; bursary fund; sport training and competition; talents and personal development; development and management of sport facilities; development and promotion of culture; social assistance to vulnerable groups; community development and gender and youth development.

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



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

3.5 Nutrition

3.5.1 Nutrition priorities

In the County Integrated Development Plan for 2013-2017, the county focused on promotion of nutrition education and improvement of nutritional status of households to eliminate malnutrition cases. Some priority areas included: nutrition supplements and feeding programme in ECDE centres.

The county nutrition indicators remained relatively low according to the year 2014 and 2018 data. Stunting, wasting and underweight children stood at 32.5 per cent, 11.6 per cent and 22 per cent, respectively, in 2014. These levels were slightly higher than the national average (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. Vitamin A supplementation among children aged 6 to 59 months was low when compared to the target proportion of 80 per cent and far below the national coverages of 24 per cent in 2014.

The proportion of overweight or obese women in the county stood at 26 per cent, higher than the national average of 29 per cent. The average Body Mass Index (BMI)⁶ of women in the county was 23, which was comparable to the national average, and this was within the normal range.

Table 6: Selected nutrition performance indicators

Indicators	2014-County	2014-National
Stunted children (%)	32.5	26.0
Wasted children (%)	11.6	4.0
Underweight children (%)	22.0	11.0
Vitamin A supplements coverage	7.3	24.0
Proportion of children aged 6 to 59 months- Received Vitamin A supplement	57.9	71.4
Proportion of children consuming adequately iodized salt.	100.0	99.1
Proportion of households consuming adequately iodized salt.	100.0	99.2
" Household salt iodization (50 – 80 mg/Kg KIO ₃) (% samples) "	32.0	57.0
Number of Women (BMI)	23.0	23.2
Overweight or obesity among women aged 15 to 49 years.	25.7	28.9

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

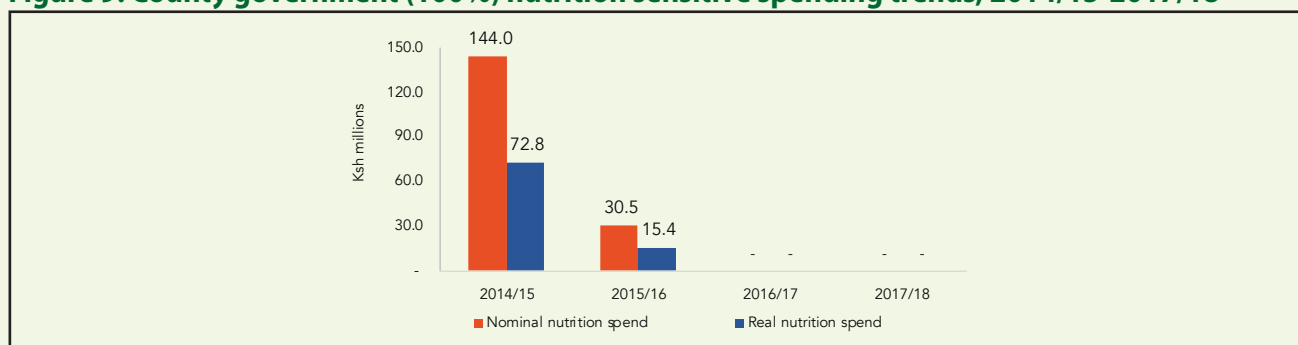
3.5.2 Nutrition budget and expenditure

Considering 100 per cent nutrition sensitive (direct nutrition interventions) spending, the county has not been financing nutrition post-2014/15. The county allocated Ksh 144 million for nutrition spending in 2014/15 and Ksh 31 million in 2015/16 with no allocation in 2016/17 and 2017/2018. However, the execution rate was about 50 per cent for both years.

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. The priority areas for the county include: nutritional advocacy forums; food and nutritional campaigns; health and nutrition services per ward for ECDE centres; provision

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



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

of nutrition supplements in health centres, among others; nutrition in ECDE feeding programme; nutrition and human ecology extension; integration of nutritional services in agriculture, livestock and fisheries; training of healthcare workers and community health volunteers.

3.6 Other Initiatives for Special Interest Groups

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

a) AGPO

The county continued to promote the implementation of Access to Government Procurement Opportunities (AGPO) programme.

b) Children

The county has improved infrastructure of ECDE classrooms and increased enrolment to the same.

c) Youth

The county has trained 1,000 *Boda Boda* riders on driving safety and issued them with driving licenses. They have further trained 250 youth groups on income generating activities. The county has acquired tools, equipment and additional instructors for all the 9 Vocational Training Centres and tuition subsidies have been provided for all students enrolled to them. A county youth endowment fund has been established.

d) Women

The county has trained 6,020 women on income generating activities, which is critical to improving their living standards of living. It has further trained and funded 60 women through proposals. The county has also created FGM awareness by holding forums to encourage discourse around the issue. A county women endowment fund has been established.

e) PWDs

The county undertakes rescue operations of hidden PWDs from their homes and sponsor them to special schools. It also supports employment of PWDs and provides them with assistive devices such as wheel chairs and crutches. The county allocates bursaries to PWDs and funds PWD groups to engage in income generating activities. The county has made plans to construct PWDs sports facilities to promote PWDs' sports,

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	The County contributed 2.3 per cent to the country's Gross Domestic Product (GDP) in 2017, ranking 11 th among the 47 counties and dominated by agriculture with 67 per cent share of Gross County Product (GCP).	Agricultural productivity is vulnerable to weather shocks requiring measures to mitigate the shocks, while promoting manufacturing through agro-processing, and enhancing access to agriculture markets.	County Treasury and Planning/ County Executive/Department of Agriculture
Revenue	The county's own source revenue increased from Ksh 1.7 billion in 2014/15 to Ksh 1.9 billion in 2017/18. However, this declined as a share of total revenue from 26.1 per cent in 2014/15 to 18.6 per cent in 2017/18.	To improve the share of its own source revenue, the county should implement innovative and accountable strategies for revenue payment and management, increasing revenue base, administration capacity and public awareness.	County Treasury and Planning/ Directorate of Revenue
Expenditures	The budget execution rate for health and education was above 90 per cent compared to water and nutrition which was below 60 per cent.	There is need for interdepartmental peer review and learning to enhance budget utilization.	All sectors/County Treasury and Planning/ County Executive
Health	County health budget allocation increased from Ksh 0.9 billion in 2013/14 to Ksh 2.1 billion in 2017/18, resulting into improvement in maternal and child health outcomes during the same period.	The county should continue strengthening efficiency in utilization of available resources and awareness on availability and importance of free maternity services in the county.	County Treasury and Planning/ County Department of Health

Education	The budget for Early Childhood Development Education (ECDE) increased from Ksh 0.7 billion in 2014/15 to Ksh 1.5 billion in 2017/18.	This indicates that the county needs sustain the allocation trends for the ECDE program towards quality education and sustainability of increased enrolment	County Treasury and Planning / County Department of Education
WASH	The county allocation for water and sanitation remained constant at Ksh 0.2 billion, which was 2 per cent of the county total budget over the review period.	The county needs to increase allocation for WASH. There was under-investment given that about 65 per cent of the population have no access to improved water.	County Treasury and Planning/ County Department of Water and Sanitation/Water Service Providers
Child Protection, Youth and Women	The county's allocation to child protection, youth and women increased from Ksh 20 million in 2014/15 to Ksh 90 million in 2017/2018.	Looking forward, the county needs to increase allocation to child protection given the high levels of child neglect, abandonment and child labour; and expand relevant social services to reach vulnerable girls as a protective measure against early pregnancies, FGM, early and/or forced marriages.	County Treasury and Planning/ County Department of Culture and Social Services
Sector	Finding	Recommendation	Responsibility
Nutrition	The county allocated Ksh 144 million for nutrition spending in 2014/15 but reduced to Ksh 31 million in 2015/16 with no allocation in 2016/17 and 2017/2018.	The county should ensure that direct nutrition interventions in sectors like agriculture, education and health are budgeted for with visible budget lines in the County plans and budgets.	County Treasury and Planning/ County Department of Health and All other sectors, namely: Education, Agriculture, Social Protection and WASH
Budget Execution	The budget execution rate for most social sector budgets, especially health and education was above 90 per cent compared to water and nutrition which was below 60 per cent.	There is need for interdepartmental peer review and learning to enhance budget utilization. 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	County Treasury and Planning/ All Departments
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.	There is need for specific budget lines for these and for gender-based violence, which has increased in recent years.	County planning, statistics and M&E unit. County planning, statistics and M&E unit, and Social/Gender Departments

(Endnotes)

- Gross county product is conceptually equivalent to the county share of GDP. Gross domestic product is a measure of newly created value through production by resident economic agents (in this case individuals, households, businesses, establishments, and enterprises resident in Kenya).
- Monetary poor people are considered at risk of monetary poverty when their equivalised disposable income (after social transfers) is below the at-risk-of-poverty threshold, which is set at 60% of the national median value.
- Multidimensional poverty 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.
- 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

