



Investing in Wajir County's child/birth spacing programme



Background

Wajir County, a semi-arid county. It covers an area of 56,685.9Km² and has a total population of 781,263 with 415,374 males and 365,840 females⁵.

Wajir County has 122 public health facilities, 29 private facilities and two facilities run by NGOs/missions. The county has 10 level-four hospitals, 26 level-three health centers, 79 level-two dispensaries, three private hospitals, one nursing home and 27 clinics.

According to the 2015/2016 KIHBS, only 0.2 % of the population has medical insurance cover which is exceptionally low. 95.9% of the population must cover more than 5Km to access a health facility and only 4.1% access a health facility within less than 1Km.

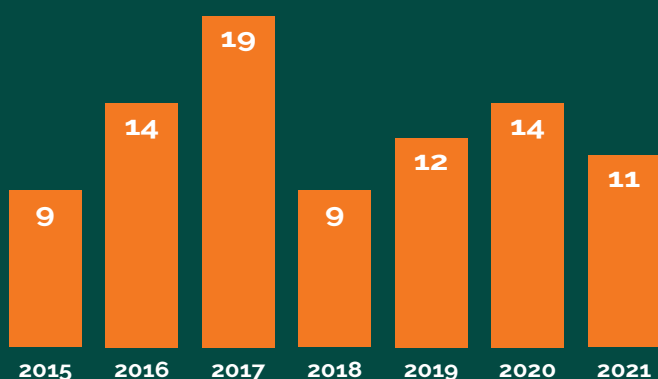
The county is served by one medical consultant, one dentist, twenty-eight doctors, eight pharmacists, 93 Registered clinical officers, 327 nurses, 60 lab technologists, 57 public health officers, 10 pharm techs, 62 community health assistants and 55 nutritionists. The doctor to patient ratio is 1:29,413 compared to internationally recommended standards of 1:5,000. The nurse patient ratio is 1:2,608 compared to internationally recommended standards of 1:333. (County Government of Wajir, 2018).

Social statistics

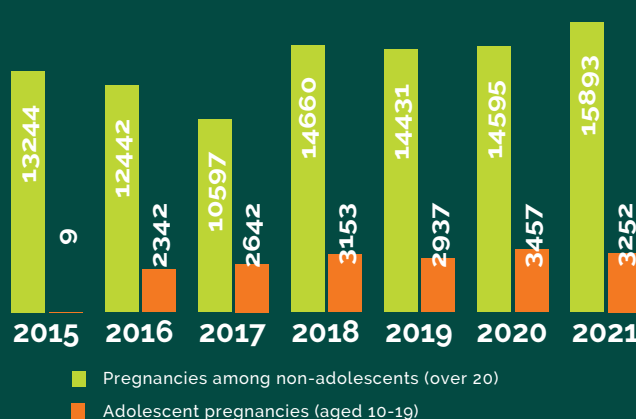
Population (2019) ⁵	Male	415,374
	Female	365,840
	Intersex	49
	Total	781,263
Total fertility rate (number of children per woman) (2019) ⁶		6.7
Absolute poverty rate ^{(2015)⁷}		62%
% Distribution of population aged 15 years and above with ability to read and write (2015) ⁸	Male	45%
	Female	26%
	Total	36%

Contraceptive prevalence in Wajir County is the second lowest in the country with only 2% of married women using modern methods of FP. This low uptake of FP is attributed to cultural beliefs and practices in the community. This has led to high population growth and increase in poverty due to poorly planned families, which strain the local resources

Number of maternal deaths per year



Number of adolescent pregnancies per year



5

maternal deaths could have been prevented through child/birth spacing in 2021¹

1/5



pregnant women were adolescents in 2021*

To tackle both maternal deaths and teenage pregnancies, more investments in family planning are required.

Benefits of investing in birth spacing²

1. Health benefits

- Lower number of unintended pregnancies
- Decline in unplanned births
- Reduction in unsafe abortions
- Decrease in maternal deaths

2. Social and economic benefits of healthier birth timing and spacing

- Increase infant survival rates
- Improvement in children's health, education and wellbeing
- More savings as well as a higher household income and gross domestic product per capita as a result of women's economic participation
- Attainment of the demographic dividend

To reap these benefits in Wajir county:



More women need to be reached with family planning services



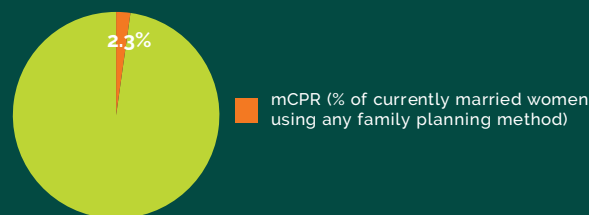
Counselling on and sensitisation to long acting family planning methods must be provided to increase the uptake of long acting methods



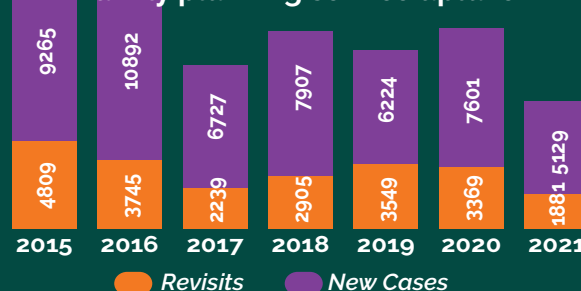
More domestic financing for birth spacing is required

The status of family planning access and funding in Wajir county

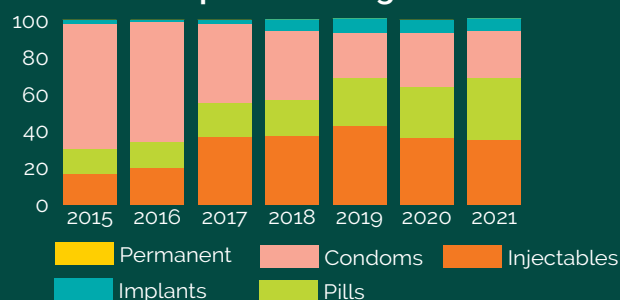
Modern contraceptive prevalence rate (mCPR 2014)⁹



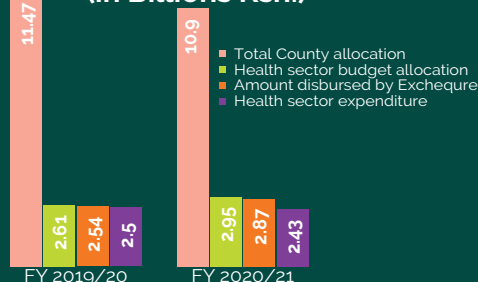
Family planning service uptake*



Family planning method mix among women of reproductive age*



Comparison of funding needs and disbursements (in Billions Ksh.)⁴



References

* Data from Kenya Health Information System as of April 2022

² Ahmed, Saifuddin et al. Maternal deaths averted by contraceptive use: an analysis of 172 countries, The Lancet, Volume 380, Issue 9837, 111 – 125

³ Starrs A, Ekeh A, et al. Accelerate progress—sexual and reproductive health and rights for all: report of the Guttmacher–Lancet Commission, The Lancet, vol. 391, issue 10140, (2018), pp: 2642–2692, Published by Elsevier

^{3a} Kenya Master Health Facility List (KMHL). ^{3b} Kenya harmonized health facility assessment 2018/19 (KHFA)

⁴ County Government budget implementation review report 2018/19, 2019/20 & 2020/21.

⁵ KNBS, 2019 Kenya population and housing census.

⁶ KNBS, Analytical Report on Fertility and Nuptiality, Volume IV, 2019.

⁷ KNBS, Inequality trends and diagnostics in Kenya 2020; Absolute poverty rate is defined as the inability for a household, family or person to meet basic needs including food, shelter, safe drinking water, education and healthcare.

⁸ KNBS, The 2015/16 Kenya integrated household budget survey (KIHS) reports

⁹ Kenya demographic health survey 2014