

Eyes on Social Sector Budgets

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



County Government of Bungoma

KEY HIGHLIGHTS OF THE BRIEF

This brief provides an analysis on how the County Government of **Bungoma** plans and 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, child protection, youth and women, 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 59 per cent of the Gross County Product (GCP)¹ of Bungoma, which ranks 11th (2.3%) in GDP contribution among the 47 counties in Kenya, comes from agriculture. However, agricultural productivity is vulnerable to weather shocks resulting in unpredictable economic growth trends. Moving forward, the county should put measures in place to mitigate weather shocks, while at the same time promoting manufacturing through agroprocessing, and enhancing access to agriculture markets, including through collaboration with private sector.
- b) The county's of own source revenue increased from Ksh 504 million in 2014/15 to Ksh 656 million in 2017/18. However, as a share of total revenue, own source revenue increased from 7 per cent in 2014/15 to 7.5 per cent in 2015/16 before decreasing to 6.4 per cent in 2017/18. Overall, total county revenue increased from Ksh 8.4 billion in 2014/15 to Ksh 10.1 billion in 2017/18, mainly because of equitable share transfers. There is need for the county to enhance capacity for own source revenue forecasting and analysis, and strengthen measures for tax collection and management.
- c) Maternal and child health outcomes generally improved in part due to the increase in budget allocation from Ksh 1.7 billion in 2014/15 to Ksh 4.5 billion in 2017/18. The county will need to overcome the following challenges in order to achieve its targets: inadequate medical staff, inadequate budget for implementation of health programmes and poor prioritization especially as it pertains to acquisition of medical equipment. There is need for the county to channel funds towards improving quality of maternal health and integrate stillbirths within women's and children's health programmes.
- d) The budget for Early Childhood Development Education (ECDE) increased slightly from Ksh 0.6 billion in 2014/15 to Ksh 2.1 billion in 2017/18. Gross ECDE enrolment rate (GER) increased from 59.8 per cent in 2014 to 101.5 per cent in 2018 while net enrolment rate (NER) increased from 43 per cent to 59.5 per cent during the same period. Looking forward, the challenge for the county is to ensure equitable distribution and effective utilization of available resources.
- e) The budget for water and sanitation increased slightly from Ksh 0.4 billion in 2014/15 to Ksh 0.9 billion in 2017/18. However, access to improved water and sanitation remained constant at 76 per cent and 39 per cent, respectively. There is need for the county to put in place initiatives to reduce non-revenue water in order to minimize losses and hence channel funds towards improvement of water supply. This would in turn reduce the time women and girls spend on fetching water and allow them to instead focus on other socioeconomic activities.
- f) The allocation to child protection youth and women in nominal terms increased from Ksh 0.3 billion in 2014/15 to Ksh 0.45 billion in 2017/18. The substantial increase in cases of reported child neglect and abandonment from 30 cases in 2014 to 3,222 cases in 2018 implies that the government needs to increase allocation to the sector to expand services that reach out to vulnerable girls as a protective measure against early/unplanned pregnancies, and early and forced marriages..
- g) The county spending on nutrition (direct nutrition interventions) in nominal terms decreased from Ksh 132 million in 2014/15 to Ksh 67 million in 2015/16 before increasing to Ksh 93 million in 2017/18. The county should ensure that

direct nutrition interventions, across several sectors such agriculture, education and health are budgeted for, with visible budget lines. Moreover, nutrition should be well articulated in the County Integrated Development Plans.

- h) The budget execution rate for most social sector budgets remained low during the period, especially for education, water and sanitation, and child protection, youth and women. For instance, budget execution rates for child protection, youth and women fluctuated between 71 per cent in 2016/17 and 47 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 recorded an increase in number of reported cases of child neglect and abandonment from 30 in 2014 to 3,222 cases in 2018, yet there is no specific budget line for this. The same also applies to gender-based violence which has increased in recent years.

1. COUNTY OVERVIEW

Bungoma occupies a land area of approximately 3,032 km² and is divided into 9 sub-counties and 45 wards. The county's population is 1,670,570 representing 3.5 per cent of the national population. The county population is constituted of 858,389 females 812,146 males and 35 intersex persons.

In 2015/16, the overall poverty rate of the county was 36 per cent with 8.8 per cent living in extreme poverty, which is at par with the overall national rates of 36.1 per cent and 8.6 per cent, respectively. Among children, more than one in three were affected by monetary poverty or lack of financial means.² For youth and women 26.4 per cent and 35.3 per cent are affected by monetary poverty, respectively. Additionally, 68.3 per cent of children were living in multidimensional poverty; that is, they were deprived in multiple dimensions including nutrition, health care, education, housing and sanitation.³ The proportion of youth and women in multidimensional poverty were 70.2 and 82.9 per cent, respectively. The overall high rates of poverty, especially among younger populations, means that planning and budgeting processes should better consider human capital sectors so that the county can maximize the productive and innovative potential of its future workforce and initiate a fast and sustainable growth trajectory (Table 1).

Administrative Profile Latest Available								
Area (km²)				3,032				
Number of sub-countie	S					9		
Number of wards						45		
Overall poverty (%)						36		
Extreme poverty (%)						8.8		
Population (2019)						1,670,570		
Group	Children	National Children	Youths	National Youths	Wo/men	National Wo/men		
Monetary Poor	Monetary Poor							
Male (%)	41.6	42.1	22.7	29.1	31.5	30.5		
Female (%)	37.2	41.0	29.5	28.8	35.3	34.1		
Total (%)	39.4	41.6	26.4	28.9	33.3	32.4		
Population	826,371	20,742,290	410,086	13,443,268	224,672	7,847,350		
Multidimensionally P	Multidimensionally Poor							
Male (%)	71.7	49.3	68.9	44.7	73.6	51.0		
Female (%)	65.0	47.1	71.3	49.4	82.9	60.8		
Total (%)	68.3	48.2	70.2	47.1	78.6	56.1		
Population	826,371	20,742,290	410,086	13,443,268	224,672	7,847,350		

Table 1: Bungoma county administrative, poverty and demographic profile

Source: Kenya National Bureau of Statistics, (various)

2. STATE OF COUNTY ECONOMY

2.1 Gross County Product Growth

Bungoma county accounted for 2.3 per cent of the national GDP in 2017. In real per capita terms, the GCP per capita growth rate fluctuated between a maximum of 23.2 per cent in 2016 and a minimum of negative 0.2 per cent in 2015. The most recent downturn, to a growth rate of 5.1 per cent, was largely due to the prolonged drought across the county.

The economy remains heavily reliant on agriculture which accounts for 59 per cent and 1.43 per cent of national GDP. The service sector contributes 37 per cent to GCP while manufacturing and other industries- including mining and electricity supply-sector contribute 0.9 per cent and 3 per cent to GCP, respectively (Figure 1b). This trend calls for diversification to manufacturing and other industries which are particularly important for job creation. In order to increase agricultural productivity and the participation of women and youth within the sector, the county should put in place mechanisms to reduce the cost of farming, enhance the marketing of agricultural produce and promote agricultural value chains. 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 investment in manufacturing as well as services, for a balanced economy. This can be done through collaboration with different subsectors, especially the private sector.

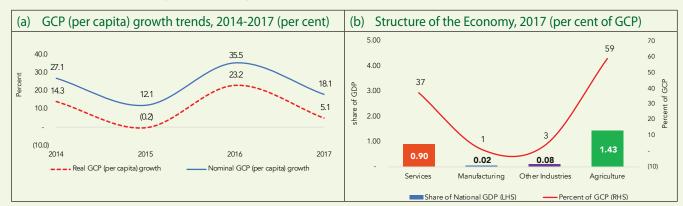


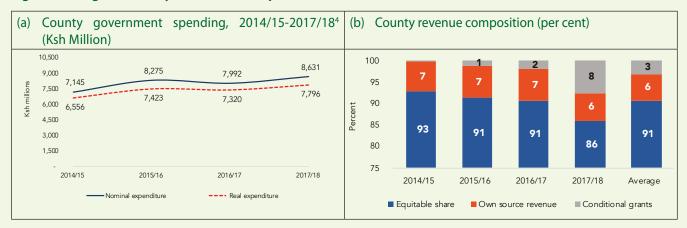
Figure 1: Bungoma county gross county product and economic structure, 2014-2017

Source: KNBS statistics, 2019

2.2 Overall Budget Performance

The county government annual spending, in real terms, grew from Ksh 6.6 billion in 2014/15 to Ksh 7.8 billion in 2017/18 (Figure 2a). The effect of inflation accounts for on average Ksh 608 million in loss of purchasing power during the period. This spending is heavily dependent on equitable share transfers, which increased from Ksh 6.7 billion in 2014/15 to Ksh 8.8 billion in 2017/18, and accounted for 90.2 per cent of revenue during the period. In nominal terms, own source revenue increased from Ksh 504 million in 2014/15 to Ksh 656 million in 2017/18. The total revenue for the county increased from Ksh 8.4 billion in 2014/15 to Ksh 10.1 billion in 2017/18. The contribution of own source revenue increased from 7 per cent in 2014/15 to 7.5 per cent in 2015/16 before decreasing to 6.4 per cent in 2017/18. Conditional grants on the other hand increased from 0.2 per cent in 2014/15 to 7.6 per cent at the end of the period. There is need for enhanced fiscal efforts to accelerate revenue mobilization from both local revenue and conditional grants.

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



Source: Controller of Budget reports, 2014-2018

The development share of actual spending decreased from 36 per cent in 2014/15 to 17 per cent in 2017/18. The recurrent expenditure, constituted of personnel emoluments and operation and maintenance, increased from 63 per cent in 2014/15 to 83 per cent in 2017/18. Wages alone accounted for between 54 per cent in 2017/18 and 35 per cent in 2015/16 (Figure 3a). The county therefore only complied with the Public Finance Management (PFM) Act, 2012 provision, that ceils development spending at a minimum of 30 per cent of total budget, between 2014/15 and 2015/16. It did not comply with the PFM Regulations 2015 which requires that not more than 35 per cent of the county's total revenue should go to payment of wages and salaries in the year 2016/17 and 2017/18.

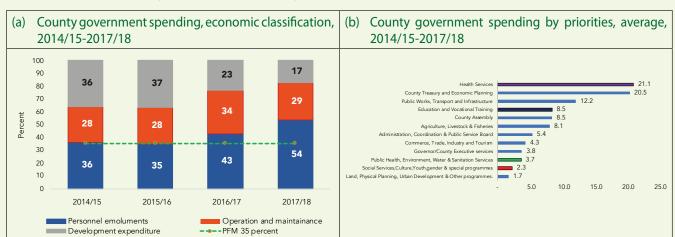


Figure 3: Bungoma county spending priorities by economic and administrative classification, 2014/15-2017/18

Source: Office of the Controller of Budget (Various) reports, 2014/15-2017/18

The county spent about 43.6 per cent of total expenditure during the period under review on Health, Education, Agriculture, Nutrition, Social Protection, Youth, Gender, Water and Sanitation. These sectors are regarded as being more sensitive to the needs of children, youth and women. The effect of this expenditure on the various programmes and activities vary across sectors.

3. ANALYSIS OF SOCIAL SECTOR SPENDING

3.1 Health

The 2013-2017 CIDP outlined key priorities for the health sector. These included: elimination of communicable diseases; halting and reversing the burden of non-communicable conditions that was rising; minimizing the exposure of health risk factors and provision of health services; improving the quality of health services in existing facilities by equipping

Selected Health Indicators	2014		2015		2016		2017		2018	
	County	National								
U5MR (death per 1,000 live births) 2016 Estimate	-	-	-	-	115.0	79.0	-	-	-	-
MMR (death per 100,000 live births) 2016 Estimate	-	-	-	-	259.0	495.0	-	-	-	-
Skilled birth attendant coverage (%) (source: DHIS2)	50.7	53.5	59.2	56.9	61.6	59.3	53.9	53.0	72.0	64.9
Proportion of pregnant women who attended at least one ANC visit during pregnancy (%) (Source: DHIS2)	77.0	76.4	83.2	75.4	73.1	76.9	69.2	73.7	84.8	81.9
Proportion of pregnant women who attended at least four ANC visit during pregnancy (%) (Source: DHIS2)	31.0	35.9	37.1	39.7	36.8	39.8	25.1	32.6	50.7	48.7
Proportion of children under one year who are fully immunized (%) (Source: DHIS2)	76.4	70.2	84.2	75.7	72.3	72.4	54.2	65.9	82.8	77.0
DPT/Hep+HiB3 dropout rate (%) (Source: DHIS2)	7.3	6.8	8.1	7.2	9.3	6.6	15.3	10.1	1.7	4.0
Still Birth Rate (%) (Source: DHIS2)	23.7	29.3	17.4	22.6	15.1	21.5	17.2	22.6	14.5	20.4

Source: DHIS 2014,2018

and improving the human resource base. In addition, the county intended to construct model health centres with fully equipped maternity units and develop and implement a sexual and reproductive health programme for the youth.

The number of women with access to skilled birth attendant during delivery increased from 50.7 per cent in 2014 to 72.0 per cent in 2018 due to introduction of free maternity services in 2013. The share of fully immunized children increased from 76.4 per cent in 2014 to 82.8 per cent in 2018. Under 5 mortality rate is estimated at 115 deaths per 1,000 live births (above the national average of 79 per 1000 live births) in 2016 while maternal mortality is estimated at 259 per 100,000 live births (below the national average of 495 per 100,000 live births). The proportion of women who attended at least one ANC visit during pregnancy, and those that attended four both increased while DPT/Hep+HiB3 dropout rates decreased from 7.3 per cent in 2014 to 1.7 per cent in 2018.

3.1.1 Health budget and expenditure

The share of health budget as a proportion of total county budget allocation increased from 17 per cent in 2014/15 to 24 per cent in 2017/18. In nominal terms, budget allocation to health grew from Ksh 1.7 billion in 2014/15 to Ksh 4.5 billion in 2017/18. Health actual expenditure increased from Ksh 1.6 billion in 2014/15 to Ksh 3.9 billion in 2017/18. Spending on health comprised of 12 per cent recurrent expenditure and 88 per cent development expenditure (Figure 4a). The absorption rates fluctuated between a maximum of 93 per cent in 2014/15 and a minimum of 75 per cent in 2015/16. This is attributable to exchequers failure to release the full amount approved in the health budget.

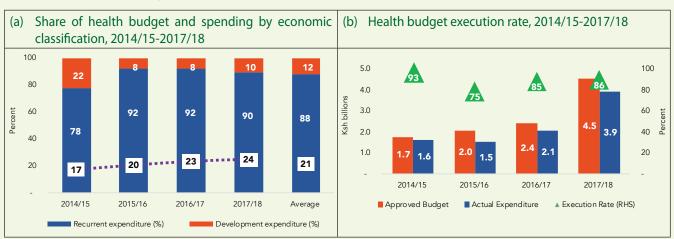


Figure 4: Bungoma county health spending trends, 2014/15-2017/18

Source: Office of the Controller of Budget (Various) reports, 2014/15-2017/18

3.1.2 Health sector medium term expectations

The CIDP 2018-2022 has outlined key priorities for the health sector. The county intends to commemorate all health related holidays, including: World Breast Feeding Day; World Immunization Week; and International Contraception Day. The county also seeks to reduce financial hardship caused by out of pocket expenditure by scaling up NHIF coverage. The county intends to construct a theatre and wards in every sub-county hospital to meet the standards of Comprehensive Essential Maternal Obstetric and Neonatal Care (CEmONC); increase the number of skilled birth attendant deliveries and number of mothers completing the fourth antenatal visit; and reduce the number of facility-based maternal deaths. The county also intends to increase the number of under 5 children that are fully immunized. The county will need to overcome the following challenges to achieve its targets: inadequate medical staff, inadequate budget for implementation of health programmes and poor prioritization especially as it pertains to acquisition of medical equipment.

3.2 Education and Vocational Training

3.2.1 Education sector priorities

County governments are responsible for Early Childhood Development and Education (ECDE) and TVETs under Schedule IV of the Constitution of Kenya 2010. The 2013-2017 CIDP outlined key priorities for the education sector. These priorities included: establishment of ECD wings in each school; improving teaching/learning environment to enhance child retention; improving pupil book and teacher pupil/student ratios; and implementing the school feeding programme. In line with its responsibility on TVET, the county sought to promote attitudinal change towards local youth and technical institutes and develop and enact a bill on technical and vocational training.

Gross ECDE enrolment rate (GER) increased from 59.8 per cent in 2014 to 101.5 per cent in 2018 while net enrolment rate (NER) increased from 43.0 per cent to 59.5 per cent during the same period. GER was generally higher than national average of 94.4 per cent while NER was below the national average of 63.5 per cent in 2018, indicating the need for to mobilize more children who have attained the school going age to joined ECDE as shown in Table 3.

Gross primary and secondary gross enrolment rates stood at 113.2 per cent and 66 per cent in 2018, respectively. Net enrolment rate (NER) decreased from 93 per cent to 82.1 per cent for primary school and decreased from 63.4 per cent to 40.5 per cent for secondary school during the same period. At both levels more girls than boys of school going age were enrolled in school. In 2018, the county had 97 TVET institutions.

Table 3: Bungoma county	selected education sector	performance indicators
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Pre-primary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	59.8	73.6	101.5	94.4
Net enrolment ratio (%)	43.0	71.8	59.5	63.5
Male (%)	45.0	73.4	58.3	62.5
Female (%)	41.0	70.2	61.5	65.0
School size (Public) (Pupils) (Average)	105.0	75.0	142.0	85.0
Gender parity index (value)	1.0	1.0	-	-
Pupil-teacher ratio (No.) (Public)	51.0	31.0	37.0	31.0
Proportion of enrolment in private schools (%)	18.5	31.5	22.0	33.0
Primary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	102.0	104.0	113.2	107.2
Net enrolment ratio (%)	93.0	88.0	82.1	82.4
Male (%)	94.0	86.0	80.8	81.7
Female (%)	92.0	90.0	83.2	83.0
School size (Public) Average No. of pupils	657.0	338.0	624.0	375.0
Gender parity index (Value)	0.8	1.0	-	-
Pupil-teacher ratio (No.)	58.0	42.0	57.0	40.0
Proportion of enrolment in private schools (%)	8.0	16.0	10.0	16.0
Secondary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	78.0	58.7	66.0	66.2
Net enrolment ratio (%)	63.4	47.4	40.5	37.5
Male (%)	73.8	49.6	37.5	35.4
Female (%)	54.5	45.2	43.8	39.8
School size (Public)	352.0	-	435.0	392.0
Gender parity index (value)	0.8	0.9	-	-
Pupil-teacher ratio (No.) (TSC)	35.0	30.0	38.0	32.0
Pupil-teacher ratio (No.) (TSC and BOM)	22.0	20.2	22.0	20.0
Proportion of enrolment in private schools (%)	22.8	30.7	1.3	5.8

Source: Education statistical booklets, 2014-2018

3.2.2 Basic education budget and expenditure

The ECDE budget allocation decreased from Ksh 0.9 billion in 2014/15 to Ksh 0.6 billion in 2016/17 before increasing to Ksh 2.1 billion in 2017/18. Allocations to primary school education increased from Ksh 5.2 billion in 2014/15 to Ksh 7.6 billion in 2017/18 while those to secondary school increased from Ksh 3.8 billion in 2014/15 to Ksh 4.5 billion in 2017/18 (Figure 5a). Spending on ECDE as a share of total spending on basic education decreased from 9.1 per cent in 2014/15 to 5.8 per cent in 2016/17 before increasing to 14.9 per cent in 2017/18 (Figure 5b).

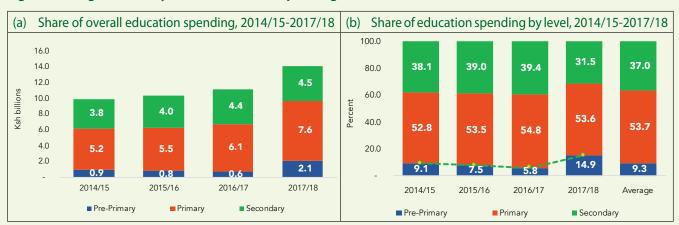


Figure 5: Bungoma county overall education spending trends, 2014/15-20217/18

Source: National treasury (Various), IFMIS

The share of ECDE budget in total county budget allocation decreased from 9 per cent in 2014/15 to 6 per cent in 2016/17 before increasing to 20 per cent in 2017/18. Total spending on ECDE increased from Ksh 0.57 billion in 2014/15 to Ksh 0.60 billion in 2015/16 before decreasing to Ksh 0.59 billion and then increasing to Ksh 1.55 billion in 2017/18 (Figure 6b). Spending comprised of 34 per cent development expenditure and 66 per cent recurrent expenditure (Figure 6a). The absorption rates increased from 63 per cent in 2014/15 to 91 per cent in 2016/17 before decreasing to 74 per cent in 2017/18.

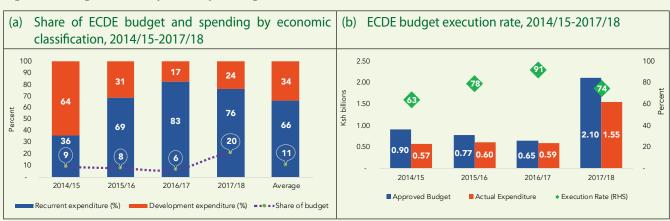


Figure 6: Bungoma county ECDE spending trends, 2014/15-2017/18

Source: Controller of Budget reports, 2014-2018

3.2.3 Education sector medium term expectations

The CIDP 2018-2022 has outlined key priorities for the education sector. The county intends to continue undertaking quality assurance and reviewing standards of education and training at ECDE and Vocational levels. It also seeks to provide and maintain sufficient teaching and training service for all public ECDE and Vocational institutions. The county also plans to maintain a sufficient teaching force in public ECDE/Vocational institutions; strengthen linkages between TVET institutions and other higher education and training institutions with communities and industry; and promote Open and Distance Learning and integrate Information and Communication Technology (ICT) in Curriculum delivery at all levels of education and training. Some of the prevailing challenges for the sector were delays in release of funds from the national treasury, inadequate teaching and learning materials, high teacher-pupil ratio in ECDE facilities, delays in completion of projects especially vocational training centres, and low enrolment of students in Vocational Training Centres.

3.3 Water and Sanitation

3.3.1 Water and Sanitation Priorities

The 2013-2017 CIDP outlined key priorities for the water and sanitation sector. The county sought to construct community water kiosks; drilling boreholes and promote spring protection; develop a 5 year water sector Strategic Plan and the Bungoma County Water Master Plan; and maintain River Gauging stations and hydro meteorological stations. In line with sanitation, the county sought to promote proper waste disposal systems by offering trainings through the public health department. It also intended to provide support for construction of VIP latrines and upgrade existing slums.

Access to improved water and sanitation remained constant at 76 per cent and 39 per cent, respectively. The population within the service area of water utility (company) decreased from 17 per cent to 9 per cent between 2014 and 2018. The proportion of population covered or served by the utility improved from 63 per cent in 2014 to 84 per cent in 2018. The sector experiences the problem of non-revenue water⁵ at about 41 per cent as at 2018. High non-revenue water denies the water utility revenue to enhance water service delivery and in meeting operations and maintenance costs.

Table 4: Bungoma county selected WASH sector performance indicators

Indicators	2014-County	2014-National	2018-County	2018-National
County population within service areas of WSPs (%)	17	*	9	*
Water coverage by utilities (%)	63	53	84	*
Non-revenue water (NRW) (%)	40	42	41	*
Sanitation coverage within utility area (%)	60	69	-	*
Sewerage coverage (%)	-	*	34	*
Access to improved water (%)	76	*	76	*
Access to improved sanitation (%)	39	*	39	59
No toilet facility – Potential open defecation county-wide (%)	7	*	7	8

Source: KDHS 2014, CIDP 2018 *Data not available

3.3.2 Water and sanitation budget and expenditure

The total budget allocation to the sector as a share of total county budget allocation decreased from 4 per cent in 2014/15 and 2015/16 to 2 per cent in 2016/17 before increasing to 5 per cent in 2017/18. The approved budget allocation to the sector was Ksh 0.4 billion in 2014/15, following which it decreased to Ksh 0.3 billion in 2016/17 then increased to Ksh 0.9 billion in 2017/18. Spending constituted of 19 per cent recurrent expenditure and 81 per cent development expenditure. The absorption rate increased from 34 per cent in 2014/15 to 89 per cent in 2015/16 before decreasing to 61 per cent in 2017/18 (Figure 7 b).

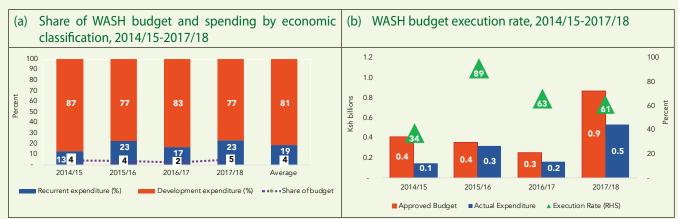


Figure 7: Bungoma county water and sanitation spending trends, 2014/15-2017/18

Source: Office of the Controller of Budget (Various) reports, 2014/15-2017/18

3.3.3 Water and Sanitation Sector Medium Term Expectation

The CIDP 2018-2022 has outlined key priorities for the water and sanitation sector. The county intends to implement integrated solid waste management through enhancing solid waste collection and disposal services, waste management and recycling. The county also plans to increase sewerage services provision and rehabilitate urban sewerage systems. For water resources management: the county plans to invest in water harvesting and storage systems; undertaking water quality monitoring and hydrological surveys; and flushing and test pumping of existing boreholes.

3.4 Child Protection, Youth, Gender, and Culture

3.4.1 Child Protection, Youth and Women Priorities

The CIDP 2013-2017 highlighted key priorities for child protection, youth and women. For the youth, the county sought to create Producer Business; expand rural electrification to encourage investment in ICT and boost employment of unemployed youth; implement youth development programmes around environment, sports, health and employment; set up youth savings and credit cooperative societies; and commemorate international youth week. In addition, the county intended to develop a youth skills inventory and implement a drug and substance control and peace building programme. The county targeted engendering development programmes and policies to create a level field for both young men and women to participate in national development. The county also developed the following affirmative action funds: Youth Enterprise Fund; Women Enterprise Fund; and Consolidated Social Protection Fund. It also intended to formulate policies on credit access for youth and women. For children, the county planned to implement Cash Transfer Programme for Orphaned and Vulnerable Children (OVCs) and conduct a baseline survey to establish a database for OVC, and children rights and child care organizations. The county intended to establish a juvenile court and focal points to mainstream children's development.

The county recorded a high number of reported cases of child neglect and abandonment, from 30 cases in 2014 to 3,222 cases in 2018. Similarly, the child emotional abuse increased from 1 case in 2014 to 13 in 2018. However, cases of child sexual abuse and child labour declined significantly.

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

Indicators	2014-County	2014-National	2018-County	2018-National
Child Neglect and Abandonment	30	767	3,222	73245
Child Sexual Abuse	29	636	2	172
Child Trafficking, Abduction and Kidnapping	-	32	4	1022
Child Labour	7	168	4	378
Child Emotional Abuse	1	58	13	853
Child Physical Abuse	18	583	16	2031
Female Genital Mutilation	-	9	-	40

Source: KDHS 2014, CIDP 2018

3.4.2 Child protection, youth and women budget and expenditure

The sector's budget allocation as a share of total county budget allocation decreased from 2.9 per cent in 2014/15 to 1.5 per cent in 2015/16 then increased to 2.4 per cent in 2016/17 and 2017/18. Total approved budget allocation decreased from Ksh 0.3 billion in 2014/15 to Ksh 0.15 billion in 2015/16 before increasing to Ksh 0.45 billion in 2017/18. Exchequer releases decreased from Ksh 0.19 billion in 2014/15 to Ksh 0.08 billion in 2015/16 before increasing to Ksh 0.21 billion in 2017/18. The absorption rates decreased from 65 per cent in 2014/15 to 56 per cent in 2015/16 then increased to 71 per cent in 2016/17 before decreasing to 47 per cent in 2017/18. Spending on the sector consisted of 47 per cent recurrent expenditure and 53 per cent development expenditure.

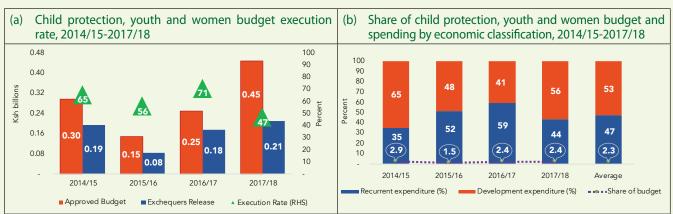


Figure 8: Bungoma county child protection, youth and women spending trends, 2014/15-2017/18

Source: Office of the Controller of Budget (Various) reports, 2014/15-2017/18

3.4.3 Social protection medium term expectations

The CIDP 2018-2022 has outlined key priorities for child protection, youth and women sector. For youth, the county intends to promote life skills and livelihood support to the youth; develop and adopt a regulatory framework policy for youth affirmative action; support entrepreneurship through tax rebates to create employment opportunities; establish centres of technical advisory services; enhance mind-set change campaigns; develop and manage sports management facilities; and establish sports talent academies and county clubs. The county also targets to increase women-owned enterprises, women in key decision-making positions and women absorbed into national sporting teams. The county is also constructing a leadership and empowerment academy for women. It also plans to continue providing access to affordable credit for youth and women. It is envisioned that during the period, the county will also reunite street children with their families.

3.5 Nutrition

3.5.1 County priorities

The CIDP 2013-2017 highlighted key priorities for the nutrition sub-sector. These included: undertaking nutrition training for mothers to aid in reducing cases of malnutrition; encouraging healthy lifestyles, exercising and consumption of natural and unprocessed foods to reduce lifestyle related ailments; and provision of nutrition supplements and training through public private partnerships.

Stunted children as a proportion of the population was 24 per cent while wasted and underweight children was 2 per cent and 9 per cent, respectively. Households consuming adequately iodized salt in the county was 99 per cent. Vitamin A supplementation among children aged 6 to 59 months was 22 per cent, below the intended target of 80 per cent.

Table 6: Selected nutrition performance indicators

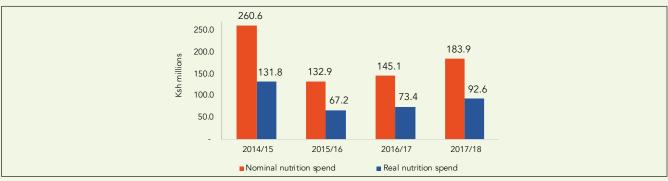
Indicators	2014-County	2014-National
Stunted children (%)	24.4	26.0
Wasted children (%)	1.8	4.0
Underweight children (%)	9.0	11.0
Vitamin A supplements coverage	21.5	24.0
Proportion of children aged 6 to 59 months- Received Vitamin A supplement	87.6	71.4
Proportion of children consuming adequately iodized salt	99.4	99.1
Proportion of households consuming adequately iodized salt	99.6	99.2
Household salt iodization (50–80 mg/Kg KIO_3) (% samples)	47.0	57.0
Number of Women (BMI)	22.9	23.2
Overweight or obesity among women aged 15 to 49 years.	24.1	28.9

Source: KDHS 2014

3.5.2 Nutrition budget and expenditure

Considering 100 per cent nutrition specific interventions (direct nutrition interventions), the county spending in real terms dropped from Ksh 132 million in 2014/15 to Ksh 67 million in 2015/16 before increasing to Ksh 93 million in 2017/18.





Source: National Treasury IFMIS 204-2018

3.5.3 Nutrition medium term expectations

The CIDP 2018-2022 has outlined key priorities for the water and sanitation sector. It intends to increase the number of pregnant women given iron and folic acid supplements, the number of children given vitamin A supplements, and the facilities providing nutritional services. The county also plans to promote food and nutrition security through the KCEP-CRAL project and establishment of tissue culture banana screens in houses. In the period 2018-2022 the county plans to promote nutrition education and strengthen the Community Units to offer broad based services in order 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 county still faces challenges of inadequate extension officers and vandalism of established soil testing laboratories.

3.6 Other Initiatives for Special Interest Groups

Box 1: Key Highlights on Children, Youth, Women and PWDs Initiatives

a) AGPO

The county is implementing the access to government opportunities programme for which vulnerable groups are being trained.

b) Children

The county has drafted a children's policy, has established children's rights networks, and coordinates children placement in child care centres and homes.

b) Youth

The county has drafted a youth policy, is implementing the Ajira/Tujiajiri Programme for the youth, has constructed youth empowerment centres and undertakes talent searches and sports development. The county also gives attachment opportunities to college students.

c) Women

The county has drafted a gender policy and Sexual Gender Based Violence Bill. The county also holds community sensitization forums on gender issues and has established gender technical working groups to mainstream gender into county policies and programmes. An SGBV referral centre has also been established in Ndegelwa.

d) PWDs

The county has established a fund for PWDs dubbed "BUCODEF". The county also supports paravolly for PWDs and provision of assistive devices.

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

Table 7: Recommendations and responsible actors

Sector	Finding	Recommendation	Responsibility
Gross County Product	An estimated 59 per cent of the Gross County Product (GCP) of Siaya, which ranks 11 th (2.3%) in GDP contribution among the 47 counties in Kenya, comes from agriculture.	Moving forward, the county should put in place measures to mitigate weather shocks, while at the same time promoting manufacturing through agro-processing, and enhancing access to agriculture markets, including through collaboration with the private sector.	County Treasury and Planning/ County Executive/Department of Agriculture
Revenue	The county's of own source revenue increased from Ksh 504 million in 2014/15 to Ksh 656 million in 2017/18. However, as a share of total revenue, own source revenue increased from 7 per cent in 2014/15 to 7.5 per cent in 2015/16 before decreasing to 6.4 per cent in 2017/18.	There is need for the county to enhance capacity for own source revenue forecasting and analysis, and strengthen measures for tax collection and management.	County Treasury and Planning/ Directorate of Revenue
Health	Maternal and child health outcomes generally improved in part due to increase in budget allocation from Ksh 1.7 billion in 2014/15 to Ksh 4.5 billion in 2017/18. The county will need to overcome the following challenges to achieve its targets: inadequate medical staff, inadequate budget for implementation of health programmes, and poor prioritization especially as it pertains to acquisition of medical equipment.	There is need for the county to channel funds towards improving quality of maternal health and integrate stillbirths within women's and children's health programmes.	County Treasury and Planning/ County Department of Health
Education	The budget for Early Childhood Development Education (ECDE) increased slightly from Ksh 0.6 billion in 2014/15 to Ksh 1.2 billion in 2017/18. Gross ECDE enrolment rate (GER) increased from 59.8 per cent in 2014 to 101.5 per cent in 2018, while net enrolment rate (NER) increased from 43 per cent to 59.5 per cent during the same period.	Looking forward, the challenge for the county is to ensure equitable distribution and effective utilization of available resources to mitigate access gaps.	County Treasury and Planning/ County Department of Education
WASH	The budget for water and sanitation increased slightly from Ksh 0.4 billion in 2014/15 to Ksh 0.9 billion in 2017/18. However, access to improved water and sanitation remained constant at 76 per cent and 39 per cent, respectively.	There is need for the county to put in place initiatives to reduce non-revenue water to minimize losses and hence channel funds towards improvement of water supply. This would in turn reduce the time women and girls spend on fetching water and allow them to instead focus on other socio-economic activities.	County Treasury and Planning/ County Department of Water and Sanitation/Water Utility
Child Protection, Youth and Women	The allocation to child protection, youth and women in nominal terms increased from Ksh 0.3 billion in 2014/15 to Ksh 0.45 billion in 2017/18.	The increase in child neglect and abandonment cases imply that the government needs to increase allocation to the sector in to expand services that reach out to vulnerable girls as a protective measure against early/unplanned pregnancies, and early and forced marriages.	County Treasury and Planning / County Department of Culture and Social Services
Nutrition	The county spending on nutrition (direct nutrition interventions) in nominal terms decreased from Ksh 132 million in 2014/15 to Ksh 67 million in 2015/16 before increasing to Ksh 93 million in 2017/18.	The county should ensure that direct nutrition interventions, across several sectors such agriculture, education and health are budgeted for, with visible budget lines. Moreover, nutrition should be well articulated in the County Integrated Development Plans.	County Treasury and Planning/ County Department of Health and all other sectors namely: education, agriculture, social protection and WASH
Budget Execution	The budget execution rate for most social sector budgets remained low during the period, especially for education, water and sanitation, and child protection, youth and women. For instance, budget execution rates for child protection, youth and women fluctuated between 71 per cent in 2016/17 and 47 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.	All sectors/County Treasury and Planning/ County Executive
Disaggregated Data	Due to limited disaggregation of data in expenditure reports, it was not possible to establish how much of the county government budget was spent on crucial social services such as child protection, youth development, disability and gender mainstreaming.	By having standalone budget lines for child protection, youth development, disability and gender mainstreaming, the county will be better placed to effectively deliver the above-mentioned services, especially to women and girls.	County Planning, Statistics and M&E Unit, and Social/Gender Departments

(Endnotes)

- 1 Gross county product is conceptually equivalent to the county share of GDP. Gross domestic product is a measure of newly created value through production by resident economic agents (in this case individuals, households, businesses, establishments, and enterprises resident in Kenya).
- 2 Monetary 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.
- 3 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.
- 4 Base year 2013
- 5 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).

ACKNOWLEDGEMENTS

The preparation of this County Budget Brief was funded and supported by UNICEF (KCO) in collaboration with UN-Women (KCO) and UNDP (KCO). The brief was prepared under the leadership of The National Treasury, Kenya. The entire process of preparing the brief was guided by Dr Rose Ngugi (Executive Director, KIPPRA). The KIPPRA technical team composed of Dr Eldah Onsomu, Victor Mose, Boaz Munga, Samantha Luseno, Lawrence Kinuthia, Stella Mutuku, Teresa Bosibori, Phares Mugo, Rose Ngara-Muraya and James Ochieng'. The Briefs were edited and designed by Felix Muriithi, Kenneth Kiptanui and Isaiah Muthui.

The contribution from the following government institutions in the production of this brief was instrumental: Council of Governors; County Governments; Controller of Budget; Commission on Revenue Allocation; National Gender and Equality Commission; Ministry of Health - Division of Nutrition and Dietetics; Ministry of Education; Ministry of Water and Irrigation; Ministry of Public Service, Youth and Gender; and the Kenya School of Government.



We are grateful to Maniza Zaman (UNICEF KCO Representative) for the overall leadership and enabling coordination with UN-Women and UNDP. The UNICEF core team composed of Ousmane Niang, Dr Robert Simiyu, Godfrey Ndeng'e, Sicily Matu, Nancy Angwenyi, and Patrick Chege (UNICEF KCO). The process also benefited immensely from Matthew Cummins and Bob Muchabaiwa (UNICEF ESARO) for providing technical guidance.

We are grateful to the UN-Women team composed of Lucy Mathenge, Angela Gichohi, Sebastian Gatimu, Joshua Musyimi and Maureen Gitonga (UN Women KCO) and the UNDP team of Mary Njoroge, Faith Ogola and Tim Colby for their technical contribution.

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