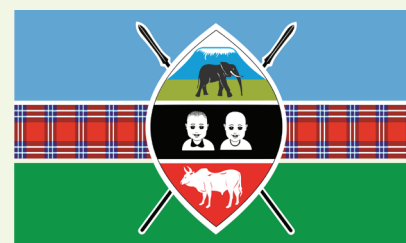


Children, Youth and Women Sensitive Planning and Budgeting in Kenya: Kajiado County Brief, 2014/15-2017/18



County Government of Kajiado

KEY HIGHLIGHTS OF THE BRIEF

This brief provides how the County Government of **Kajiado** plans and budgets to support the needs of children, youth and women. The analysis focused on social sector (health, education, water and sanitation, social protection and empowerment, and nutrition) budgets for the period 2014/15-2017/18. The analysis was based on budget information collected from the Office of the Controller of Budget, county policy documents and face-to-face interviews with relevant county stakeholders. The key highlights from the analysis are summarized below:

- a) **Kajiado county's economy is largely driven by the services sector, which contributed to 66 per cent of the Gross County Product (GCP)¹ and accounted for 1.5 per cent of the total national GDP as of 2017, ranking 22nd among the 47 counties in terms of contribution to GDP.** The county should continue creating an enabling business environment to attract more investments in the services, manufacturing, industry and agricultural sectors, and invest in enhancing farmers' capacities in modern agricultural/livestock methods, extension services, agribusiness and research.
- b) **The county's own source revenue decreased from Ksh 0.8 billion in 2014/15 to Ksh 0.6 billion in 2016/17 but improved to Ksh 0.7 billion in 2017/18 while the equitable share transfer increased from Ksh 3.9 billion to Ksh 5.8 billion during the review period.** The county can improve its revenue collections by enhancing fiscal efforts to accelerate revenue mobilization from local and conditional grants sources.
- c) **The county health actual expenditure persistently increased from Ksh 0.5 billion in 2014/15 to Ksh 1.7 in 2017/18.** Despite improvement in number of people accessing a skilled birth attendant during delivery in the county from 46.5 per cent in 2017 to 62.9 per cent in 2018, the coverage was still below the national average. In addition to continued sensitization on availability of and importance of maternal services, the county ought to invest more in the sector for better outcomes.
- d) **The Early Childhood Development Education (ECDE) budget in the county declined from Ksh 0.9 billion in 2015/16 to Ksh 0.7 billion in 2017/18.** Moreover, the gross ECDE enrolment rate improved by 20 per cent, the net enrollment declined by 7 per cent, and more girls than boys enrolled during the review period. This indicates that the county needs to allocate more ECDE resources to ensure equitable distribution and effective utilization. There is need to adequately finance the ECDE and ring-fence the ECDE budget, which has been declining and affecting the education outcomes for the young children.
- e) **Total spending in water and sanitation increased from Ksh 0.2 billion in 2014/15 to Ksh 0.5 billion in 2016/17 and declined to Ksh 0.2 billion in 2017/18.** Non-revenue water declined to 42 per cent in 2018 from 70 per cent in 2014, implying a significant reduction in water losses. The county needs to invest more in the sector's infrastructure to gain from the water utility revenue that will enhance water service delivery and in meeting operations and maintenance costs.
- f) **The county's child protection, youth and women budget allocation as a share of total county budget allocation was only once (2017/18) during the review period, amounting to Ksh 0.08 billion.** This was an under-investment given that this segment of the population is the most vulnerable and therefore the need to prioritize the sector in future allocations. With increasing demand for protection programmes such cash transfers, there is need to align the county government protection programmes with those of the national government to avoid duplication of the activities while ensuring that the available resources are focused to the relevant beneficiaries.

- g) **The county had not initiated the 100 per cent nutrition sensitive (direct nutrition interventions) spending since there was no clear budgetary allocation for nutrition during the review period.** Vitamin A supplementation among children aged 6 to 59 months was 32 per cent below the target proportion of 80 per cent and 12 per cent below the national coverage of 24 per cent. The county should ensure that direct nutrition interventions, across several sectors such as agriculture, education and health, are budgeted for with visible budget lines.
- h) **The budget execution rates for child protection, youth and women, water and sanitation, were relatively low.** Besides, the best budget execution rate for water and sanitation was 65 per cent while for child protection, youth and women was 54 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 systems 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 20 in 2014 to 932 cases in 2018, yet there is no specific budget line for this.

1. COUNTY OVERVIEW

Kajiado occupies a land area of approximately 21,901 km² and is divided into 5 sub-counties and 25 wards. The county's population as of 2019 was 1.12 million, representing 2.4 per cent of the national population. The total county population is constituted of 557,098 males, 560,704 females, and 38 intersex persons.

In 2015/2016, the overall poverty rate of the county was 41 per cent with 11.4 per cent living in extreme poverty, against the overall national rates of 36.1 per cent and 8.6 per cent, respectively. Among children, almost one in two were affected by monetary poverty or lack of financial means, which further affected 36.1 per cent of the youth and 41.4 per cent of women. The rates were generally higher than the national rates of 41.6, 28.9 and 34.1 per cent, respectively, indicating that monetary poverty was a challenge in the county. Additionally, 37.1 per cent of children were living in multidimensional poverty; that is, being deprived in multiple dimensions including, nutrition, health care, education, housing and drinking water, with the youth and women recording 36.6 per cent and 49.4 per cent, respectively. In comparison to the national rates of 48.2, 47.1 and 60.8 per cent, respectively, the county's multidimensional poverty was significantly less than the national rates. The high rates of overall poverty, especially among younger populations suggest that planning and budgeting

Table 1: Kajiado county administrative, poverty and demographic profile

Administrative Profile						Latest Available	
Area (km ²)						21,901	
Number of sub-counties						5	
Number of wards						25	
Overall poverty (%)						41	
Extreme poverty (%)						11.4	
Population (2019)						1,117,840	
Group	Children	National Children	Youths	National Youths	Wo/men	National Wo/men	
Monetary Poor							
Male (%)	49.5	42.1	37.4	29.1	30.8	30.5	
Female (%)	48.6	41.0	35.0	28.8	41.4	34.1	
Total (%)	49.1	41.6	36.1	28.9	37.7	32.4	
Population	370,891	20,742,290	297,836	13,443,268	145,572	7,847,350	
Multidimensionally Poor							
Male (%)	35.9	49.3	40.0	44.7	28.1	51.0	
Female (%)	38.6	47.1	33.8	49.4	49.5	60.8	
Total (%)	37.1	48.2	36.6	47.1	39.1	56.1	
Population	370,891	20,742,290	297,836	13,443,268	145,572	7,847,350	

Source: Kenya National Bureau of Statistics (2018)

processes should consider these human capital sectors. This will enable the county to maximize on the productive and innovative potential of its future workforce and initiate a fast and sustainable growth trajectory.

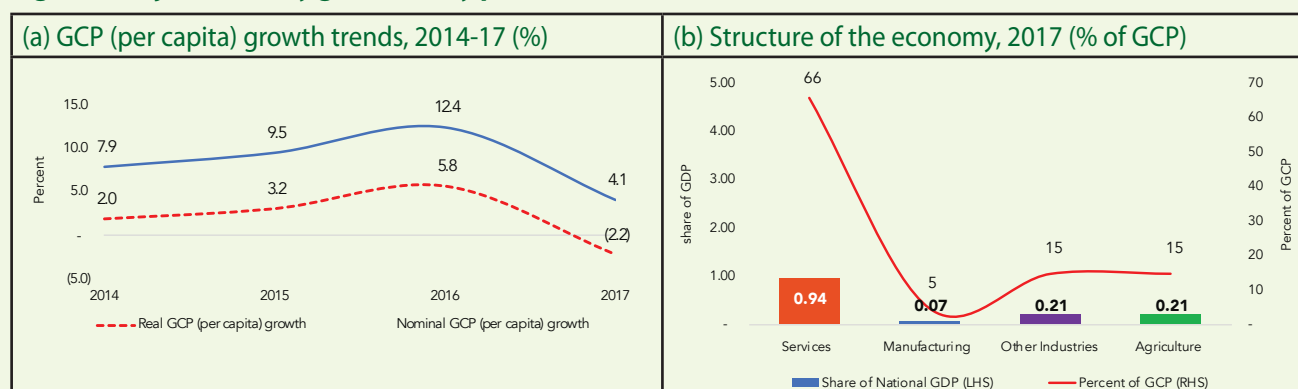
2. STATE OF COUNTY ECONOMY

2.1 Gross County Product Growth

Kajiado county accounted for 1.5 per cent of the national GDP in 2017. In real per capita terms, the economy expanded from 2 per cent in 2014 to 5.8 per cent in 2016, before contracting to negative 2.2 per cent in 2017 (Figure 1a). The most recent downturn was largely due to the prolonged electioneering period.

The economy remained reliant on services sector, which accounted for 66 per cent of the GCP and 0.9 per cent of the national GDP (Figure 1b). Agriculture and industries, including but not limited to electricity supply, water supply and construction contributed 15 per cent each to GCP and 0.2 per cent each for the national GDP. The manufacturing sector contributed to 5 per cent of the GCP while only contributing to 0.1 per cent of the national GDP. These sectors are all important drivers of job creation for youth and women. There is need, therefore, for enhanced efforts to improve their performance by creating a business environment that will attract investments within the county. Moreover, to increase agricultural/livestock productivity and the participation of women and youth within the sector, the county should set up mechanisms that will reduce the cost of farming, enhance the marketing of agricultural/livestock products and promote agricultural/livestock value chains. This can be done through developing infrastructure and enhancing farmers' capacities in modern agricultural/livestock methods, extension services, agribusiness and research.

Figure 1: Kajiado County gross county product and economic structure, 2014-17

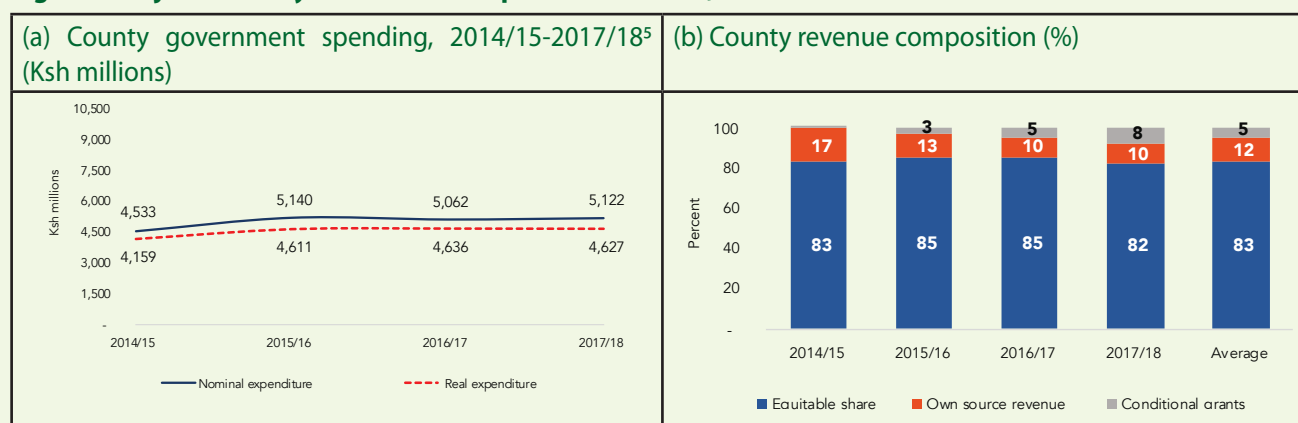


Source: KNBS (2019) Statistics

2.2 Overall Budget Performance

The county government annual spending grew from Ksh 4.5 billion to Ksh 5.1 billion between 2014/15 and 2015/16, before a moderate cut to Ksh 5.0 billion in 2016/17 and a moderate increase to Ksh 5.1 billion in 2017/18 (Figure 2a). The spending was heavily dependent on the national government transfers that accounted for 83.8 per cent during the review period. In nominal terms, own source revenue decreased from Ksh 0.8 billion in 2014/15 to Ksh 0.6 billion in 2016/17 but improved to Ksh 0.7 billion in 2017/18 while the equitable share transfer increased from Ksh 3.9 billion to Ksh 5.8 billion during the same period. Own source revenue declined from 16.8 per cent in 2014/15 to 9.7 per cent in 2017/18 while the share of conditional

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



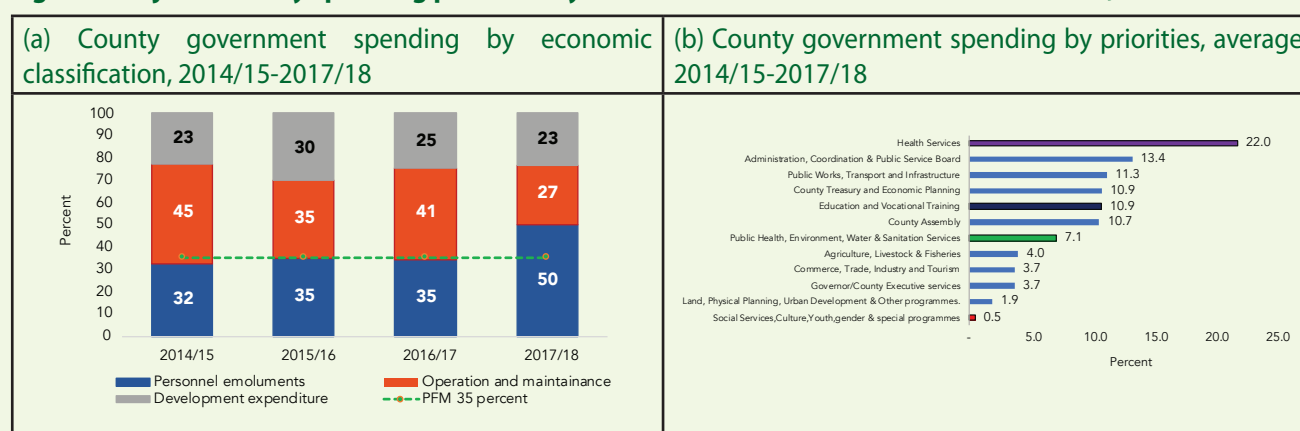
Source: Office of the Controller of Budget (Various) reports, 2014-2018

grants improved from 0.3 per cent in 2014/15 to 8.1 per cent in 2017/18 (Figure 2b). The burden of the drop in the county government spending predominantly affects social sector spending, which is recurrent in nature, prompting the need for enhanced fiscal efforts to accelerate revenue mobilization from local and conditional grants sources to finance the sector.

The development share of actual spending increased from 23 per cent in 2014/15 to 30 per cent in 2015/16, but declined to 23 per cent in 2017/18. The recurrent expenditure constituting personal emoluments (38%) and operation and maintenance (37%), on average, dominated the total spending during the period (Figure 3a). The Public Finance Management (PFM) Act 2012 provision that ceils development spending at a minimum of 30 per cent of the total budget was only observed in 2015/16 and violated in the other financial years. Moreover, Regulations 2015, which require that not more than 35 per cent of the county's total revenue should go to payment of wages and salaries was violated in the actual spending of 2017/18 only during the review period.

The county spent approximately 44.5 per cent of the total expenditure in the period under review on health, education, agriculture, nutrition, social protection, youth, gender, water and sanitation. These sectors are regarded as being more sensitive to the needs of children, youth and women. The effect of this expenditure in the various programmes and activities vary based on the key indicators (Figure 3b).

Figure 3: Kajiado county spending priorities by economic and administrative classification, 2014-18



Source: Controller of Budget reports, 2014-2018

3. ANALYSIS OF SOCIAL SECTOR SPENDING

3.1 Health

3.1.1 Health sector priorities

During the CIDP 2013–2017 period, the county prioritized to: Increase the proportion of fully immunized children from 68 per cent to 90 per cent; reduce the risk of mother to child transmission of HIV from 74 per cent to 85 per cent; increase the proportion of dewormed school children from 35 per cent to 85 per cent; increase cervical cancer and breast cancer screening from 0.4 to 20 per cent; increase cancer treatment cases from 1.2 per cent to 2 per cent; increase the proportion of skilled birth attendant deliveries from 27 per cent to 60 per cent; increase the proportion of family planning distribution among women from 36 per cent to 60 per cent; reduce the proportion of facility-based fresh still births from 7 per cent to 1 per cent; increase the proportion of pregnant women attending focused four antenatal care visits from 28 per cent to 50 per cent; improve the supply of essential medicines from 64 per cent to 30 per cent; increase the number of hospitals and health centres with functional microscopes from 55 per cent to 100 per cent; and increase the proportion of infants under 6 months on exclusive breastfeeding from 27 per cent to 40 per cent by 2017.

Skilled birth attendance coverage in the county improved from 44.3 per cent in 2014 to 54.4 per cent in 2016 and declined to 46.5 per cent in 2017, but later improved to 62.9 per cent in 2018. This can be partly explained by the introduction of free maternity services in 2013. The rates were, however, below the national averages in the review period, prompting the need to address the situation. The proportion of pregnant women who attended at least one ANC visit during pregnancy was generally better than the national rates in the review period. In 2014, the rate was 104.8 per cent with the highest recorded in 2018 at 108.9 per cent. Besides, the proportion of pregnant women who attended at least four ANC visits during pregnancy improved from 44.3 per cent in 2014 to 49.5 per cent in 2016 and declined to 35.8 per cent in 2017 but improved to 59.8 per cent in 2018. The rates were all better than the national averages in the review period. Maternal mortality rate per 100,000 live births was estimated to be 243 compared to the national average of 495 in 2016.

The proportion of children under one year who fully got immunized improved from 75.8 per cent in 2014 to 93.8 per cent in 2016 and declined to 74.7 per cent in 2017 but improved to 91.0 per cent in 2018. Still births in the county

declined in the review period from 54.3 per cent in 2014 to 19.5 per cent in 2018. Other vaccines (DPT/Hep+HiB3) dropout rates were more in 2017 at 9.8 per cent, although below the national average of 10.1 per cent and less at 3.6 per cent in 2018 against the national average of 4 per cent. Under five mortality per 1,000 live births was estimated to be 53 against the national average of 79 in 2016. There is need therefore for continued sensitization on availability of and importance of maternal services.

Table 2: Kajiado county selected health sector performance indicators

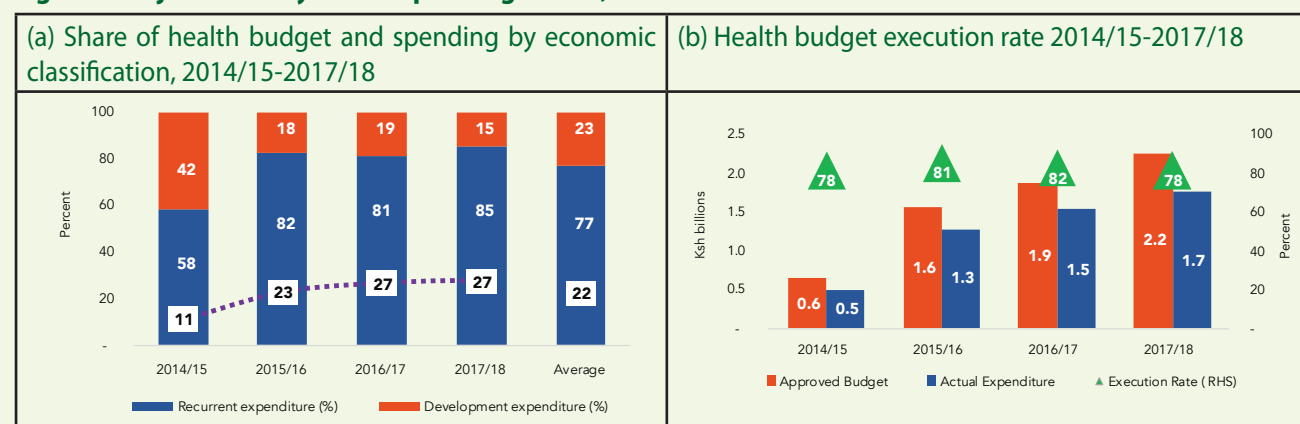
Selected Health Indicators	2014		2015		2016		2017		2018	
	County	National	County	National	County	National	County	National	County	National
USMR (death per 1,000 live births) 2016 Estimate	-	-	-	-	53.0	79.0	-	-	-	-
MMR (death per 100,000 live births) 2016 Estimate	-	-	-	-	243.0	495.0	-	-	-	-
Skilled birth attendant coverage (%) (source: DHIS2)	44.3	53.5	47.4	56.9	54.4	59.3	46.5	53.0	62.9	64.9
Proportion of pregnant women who attended at least one ANC visit during pregnancy (%) (Source: DHIS2)	104.8	76.4	98.4	75.4	102.8	76.9	87.5	73.7	108.9	81.9
Proportion of pregnant women who attended at least four ANC visit during pregnancy (%) (Source: DHIS2)	44.3	35.9	44.1	39.7	49.5	39.8	35.8	32.6	59.8	48.7
Proportion of children under one year who are fully immunized (%) (Source: DHIS2)	75.8	70.2	85.7	75.7	93.8	72.4	74.7	65.9	91.0	77.0
DPT/Hep+HiB3 dropout rate (%) (Source: DHIS2)	7.3	6.8	7.5	7.2	6.7	6.6	9.8	10.1	3.6	4.0
Still Birth Rate (Source : DHIS2)	54.3	29.3	25.4	22.6	25.9	21.5	21.5	22.6	19.5	20.4

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

3.1.2 Health budget and expenditure

The share of the health budget in the total county budget allocation increased from 11 per cent in 2014/15 to 27 per cent in 2016/17 and remained constant in 2017/18. The recurrent expenditure during the review period was, on average, 77 per cent while the development expenditure was 23 per cent (Figure 4a). The actual health expenditure increased from Ksh 0.5 billion in 2014/15 to Ksh 1.7 billion in 2017/18. The absorption rate increased from 78 per cent in 2014/15 to 82 per cent in 2016/17 before declining to 78 per cent in 2017/18. This is attributable to failure by the county exchequer to release the full amount approved in the health budget.

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



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

3.1.3 Health sector medium term expectations

During the period 2018–2022, the county in collaboration with the national government and other partners aims to: establish nomadic clinics, community health units, primary care facilities; upgrade and equip existing facilities to Level four; upgrade Loitoktok Medical Training Centre; improve the drugs management system; acquire and equip ambulances; recruit and train medical staff; domesticate national health policies; develop health sectoral, strategic and investment plans; equip health facilities with a robust ICT infrastructure; conduct community awareness on NCDs, CDs and NTDs and create their mitigation measures; and improve maternal and child healthcare.

To realize these new milestones, the county will need to address various challenges, including: limited funds relative to health needs for the county, including those for children and mothers; long procurement processes; delays by the National Treasury in releasing funding to the sector; and pending bills affecting the overall sector absorption rate.

3.2 Education and Vocational Training

3.2.1 Education sector priorities

The county governments are responsible for Early Childhood Development Education (ECDE) and youth polytechnics, which are part of Technical Vocational Education and Training (TVET) as per Schedule IV of the Constitution of Kenya 2010. During the plan period 2013-2017, the focus of the county education sector was on basic education to: provide adequate facilities for ECD learners; expand education facilities; increase awareness on the importance of education for both girls and boys to improve enrolment rates; and improve retention rates. At tertiary level, the county prioritized to establish more technical colleges; inspect colleges to ensure they offer quality education; and provide funds to support needy children.

Gross ECDE enrolment rate increased from 76.7 per cent in 2014 to 96.6 per cent in 2018 while net enrolment rate (NER) increased from 68.0 per cent to 61.3 per cent during the same period. GER was higher than national averages of 94.4 per cent while NER was below the national average of 63.5 per cent, indicating that more children joined ECDE than before with the implementation of devolution. More girls are enrolled in ECDE and secondary education than boys in Kajiado county.

Gross primary and secondary enrolment rates stood at 102.4 per cent and 62.9 per cent in 2018, respectively. Net enrolment rate (NER) improved from 75.0 per cent to 80.6 per cent for primary school and increased from 35.0 per cent to 45.6 per cent for secondary school during the same period. There was inequality in access to primary education between male and female school-going children in favour of boys. However, more girls than boys enrolled in secondary school during the review period (Table 3). In addition, both primary and secondary enrolment rates in terms of NER and GER were below the national rates. In 2018, there were 8 accredited vocational centres in the county.

Table 3: Kajiado county selected education sector performance indicators

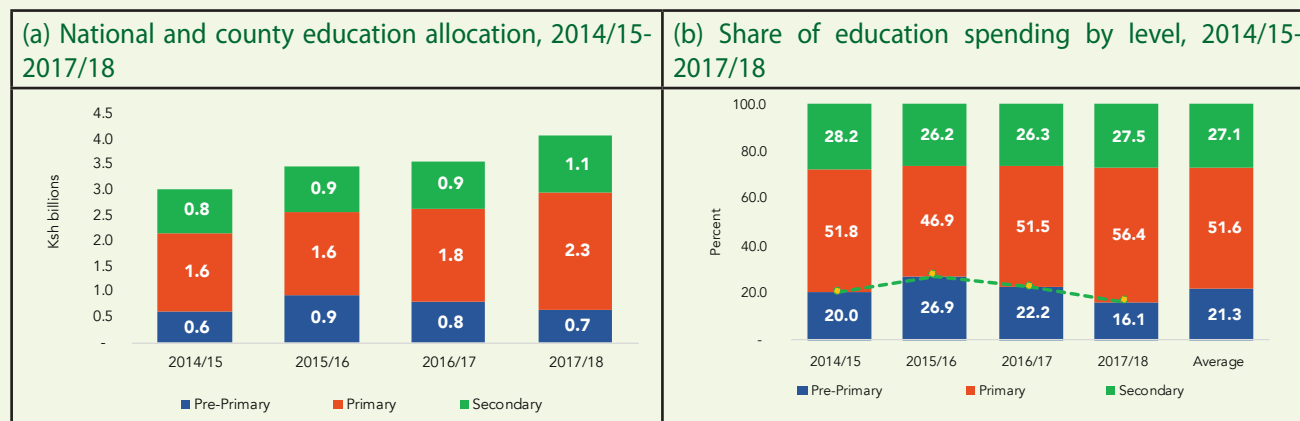
Pre-primary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	76.7	73.6	96.6	94.4
Net enrolment ratio (%)	68.0	71.8	61.3	63.5
Male (%)	42.2	73.4	57.9	62.5
Female (%)	93.8	70.2	65.8	65.0
School size (Public) (Pupils) (Average)	67.0	75.0	70.0	85.0
Gender parity index (value)	0.9	1.0	-	-
Pupil-teacher ratio (No.) (Public)	19.0	31.0	25.0	31.0
Proportion of enrolment in private schools (%)	45.1	31.5	44.0	33.0
Primary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	86.2	104.0	102.4	107.2
Net enrolment ratio (%)	75.0	88.0	80.6	82.4
Male (%)	76.5	86.0	82.1	81.7
Female (%)	73.5	90.0	78.7	83.0
School size (Public) Average No. of pupils	279.0	338.0	287.0	375.0
Gender parity index (Value)	0.9	1.0	-	-
Pupil-teacher ratio (No.)	60.0	42.0	41.0	40.0
Proportion of enrolment in private schools (%)	27.0	16.0	26.0	16.0
Secondary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	22.7	58.7	62.9	66.2
Net enrolment ratio (%)	35.0	47.4	45.6	37.5
Male (%)	27.2	49.6	44.2	35.4
Female (%)	42.8	45.2	47.1	39.8
School size (Public)	-	-	413.4	392.0
Gender parity index (value)	0.9	0.9	-	-
Pupil-teacher ratio (No.) (TSC)	21.0	30.0	26.0	32.0
Pupil-teacher ratio (No.) (TSC and BOM)	18.7	20.2	19.0	20.0
Proportion of enrolment in private schools (%)	23.0	30.7	22.8	5.8

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

3.2.2 Education and vocational training budget and expenditure

The share of ECDE allocation in the county increased from Ksh 0.6 billion in 2014/15 to Ksh 0.9 billion in 2015/16 before decreasing to Ksh 0.7 billion in 2017/18. The county expanded the primary school level budget from Ksh 1.6 billion in 2014/15 to Ksh 2.3 billion in 2017/18 while the secondary school budget increased from Ksh 0.8 billion in 2014/15 to Ksh 1.1 billion in 2017/18 (Figure 5a). ECDE allocation averaged 21.3 per cent of the total education spending in the county (Figure 5b).

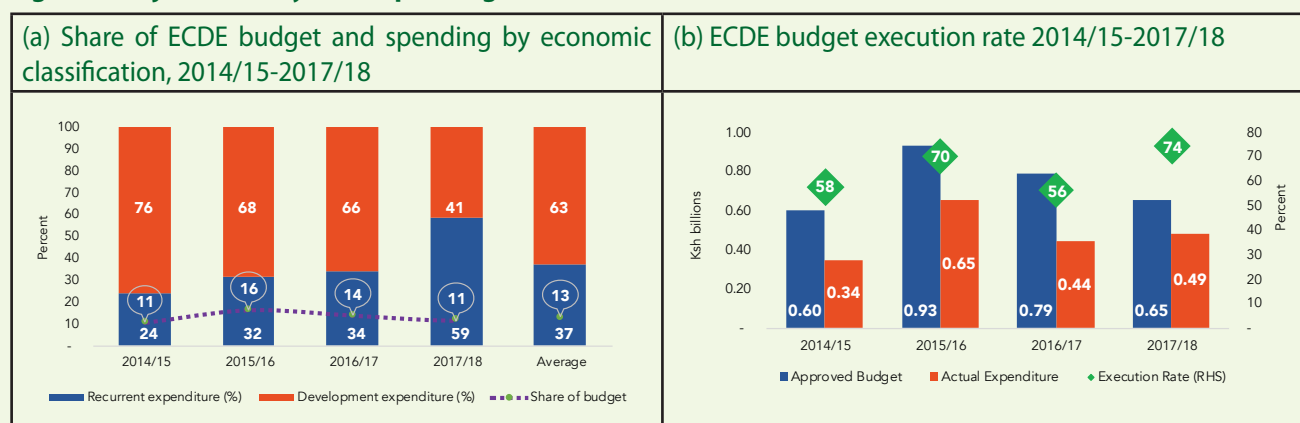
Figure 5: Kajiado county overall education spending trends, 2014-18



Source: National Treasury (Various), IFMIS

The share of ECDE budget in the total county budget allocation increased from 11 per cent in 2014/15 to 16 per cent in 2015/16 before decreasing to 11 per cent in 2017/18. Total spending on ECDE increased from Ksh 0.34 billion in 2014/15 to Ksh 0.65 billion in 2015/16 before decreasing to Ksh 0.44 billion in 2016/17 and increasing to Ksh 0.49 billion in 2017/18 (Figure 6b). Spending comprised of, on average, 63 per cent development expenditure and 27 per cent recurrent expenditure during the period (Figure 6a). The absorption rates fluctuated between a maximum of 70 per cent in 2015/16 and a minimum of 56 per cent in 2016/17.

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



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

3.2.3 Education sector medium term expectations

The county government with support from stakeholders in the period 2018–2022 aims to: improve net enrolment rates at ECDE, primary and secondary level of learning; improve education quality by employing more teachers at ECDE, primary, and secondary level of learning; improve the county literacy rate; and enhance the retention of learners from basic to tertiary levels of learning.

3.3 Water and Sanitation

3.3.1 Water and sanitation priorities

The 2013-2017 Kajiado County Integrated Development Plan outlined the key priorities for both water and sanitation sub-sectors. Regarding sanitation, the county sought to: develop a sewage treatment plant in each sub-county; implement a community-led total sanitation programme; and to scale up the proportion of households with functional toilets from 35

per cent to 90 per cent. Besides, the county also sought to increase the proportion of population with access to safe water from 60 per cent to 85 per cent by 2017.

Access to improved water and sanitation was recorded at 87 per cent and 84 per cent, respectively. Both rates were better than the national averages of 72.6 per cent and 59.0 per cent, respectively. The population within the service area of water utility (company) decreased from 73 per cent to 60 per cent between 2014 and 2018. The proportion of population covered or served by the utility improved from 25 per cent in 2014 to 43 per cent in 2018. The sector experiences the problem of non-revenue water at about 42 per cent as at 2018; an improvement from 70 per cent in 2014. High non-revenue water denies the water utility revenue to enhance water service delivery and in meeting operations and maintenance costs.

Table 4: Kajiado county selected WASH sector performance indicators

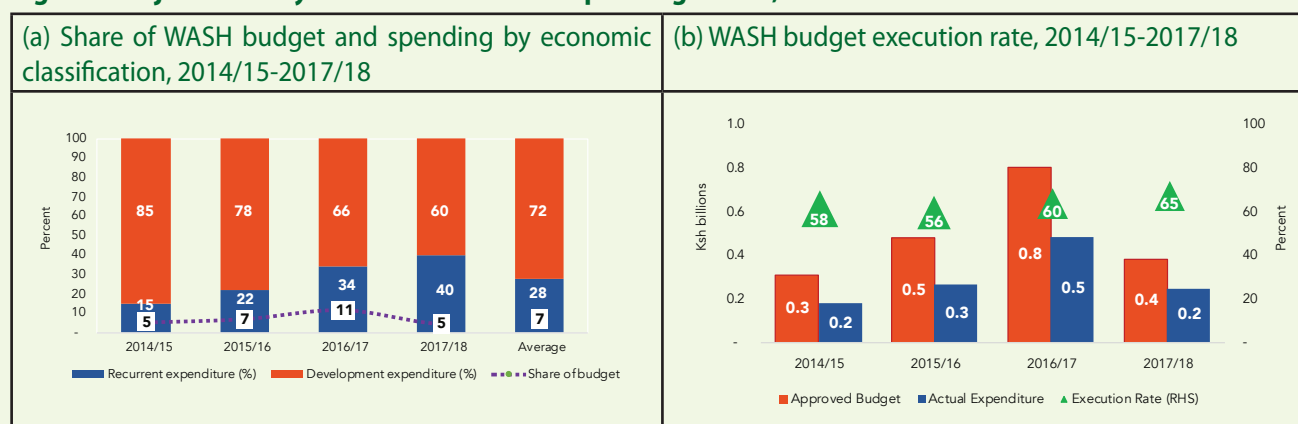
Indicators	2014-County	2014-National	2018-County	2018-National
County population within service areas of WSPs (%)	73	*	60	*
Water coverage by utilities (%)	25	53	43	*
Non-revenue water (NRW) (%)	70	42	42	*
Sanitation coverage within utility area (%)	65	69	-	*
Sewerage coverage (%)	-	*	-	*
Access to improved water (%)	87	*	87	72.6
Access to improved sanitation (%)	84	*	84	59
No toilet facility – Potential open defecation county-wide (%)	12	*	12	8

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

3.3.2 Water and sanitation budget and expenditure

The total budget allocation to the sector as a share of the total county budget allocation during the review period was, on average, 7 per cent. Total spending of the sector improved from Ksh 0.2 billion in 2014/15 to Ksh 0.5 billion in 2016/17 and declined to Ksh 0.2 billion in 2017/18. This comprised of 72 per cent development and 28 per cent recurrent spending. The approved budget more than doubled from Ksh 0.31 billion in 2014/15 to Ksh 0.80 billion in 2016/17 before declining to 0.38 billion in 2017/18. The absorption rate increased consistently from 56 per cent in 2015/16 to 65 per cent in 2017/18 (Figure 7a) (b).

Figure 7: Kajiado county water and sanitation spending trends, 2014-18



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

3.3.3 Water and sanitation medium term expectations

In the plan period of 2018-2022, the county aims to: continue with the provision of clean water by constructing two dams in each sub-county; improve solid waste management; improve the management capacity of water service providers; and protect water catchment areas.

3.4 Child Protection, Youth and Women

3.4.1 Child protection, youth and women priorities

The County Integrated Development Plan (CIDP) 2013-2017 highlighted key priorities for the sector. For the youth, the county prioritized to establish a county sports academy; construct new stadia and rehabilitate other existing facilities; construct new and renovate select youth polytechnics, youth and empowerment centres; and to establish youth market days and trade fairs. Furthermore, the county was to construct county and sub-county culture offices, county archives, and

10 modern social halls and resource centres; and develop the Maasai creative cultural industries (authorship and publishing, music and dance, drama, acrobatics poetry, story telling, public speaking, theatre). Moreover, the county was to provide the women/youth enterprise fund, sensitize residents on the importance of gender participation in development activities, and expand existing orphanages to cater for the orphaned and vulnerable children (OVCs).

Specifically, on child protection, the county recorded a high number of reported cases of child neglect and abandonment, rising from 20 cases in 2014 to 932 cases in 2018. Similarly, child emotional abuse increased from 1 reported case in 2014 to 13 cases in 2018. However, reported cases of child sexual abuse and child labour declined significantly. Cases of child physical abuse increased by 2 cases while 16 cases of child trafficking, abduction and kidnapping were reported in 2018.

The county reported only one case 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: Kajiado county selected child protection performance indicators (No. of reported cases)

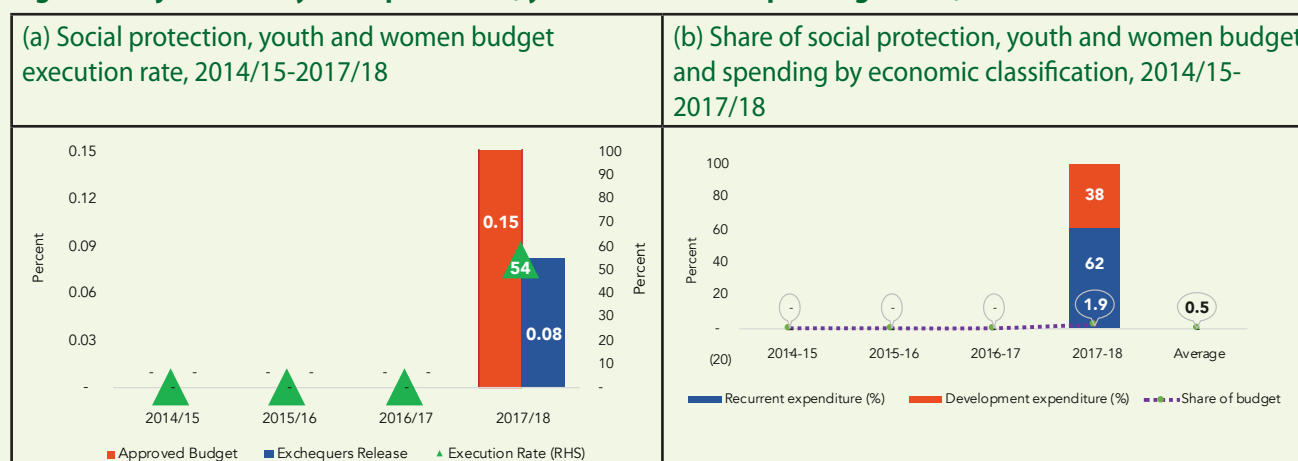
Indicators	2014-County	2014-National	2018-County	2018-National
Child Neglect and Abandonment	20	767	932	73,245
Child Sexual Abuse	22	636	-	172
Child Trafficking, Abduction and Kidnapping	-	32	16	1,022
Child Labour	5	168	1	378
Child Emotional Abuse	1	58	13	853
Child Physical Abuse	20	583	22	2,031
Female Genital Mutilation	1	9	1	40

Source: Kenya National Bureau of Statistics (2014), KDHS 2014; County Integrated Development Plan (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 during the review period averaged 1.9 per cent. The allocation was only for 2017/18 in the review period. The budget absorption rate was at 54 per cent in 2017/18 mainly attributed to failure by the exchequer to release the entire approved budget amount (Figure 8a). The share of recurrent spending was 62 per cent and 38 per cent for development expenditure (Figure 8b). There was no clear budgetary allocation for social protection, youth and women between the period 2014/15 and 2016/17.

Figure 8: Kajiado county Child protection, youth and women spending trends, 2014-18



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

3.4.3 Child protection, youth and women medium term expectations

Between the plan period 2018 and 2022, the county aims to: provide social protection to the vulnerable groups; enhance social and economic support for Persons with Disability (PWDs); control the betting and gambling industry; reduce alcohol and substance abuse; and provide a conducive environment for exploitation and preservation of cultural heritage. Besides, the county will continue with the construction of sports infrastructure; develop a sports policy; and conduct capacity building on sports. To promote gender equality, the county will develop a gender-based violence (GBV) response framework and a recovery centre; rescue girls from undergoing FGM; and provide women/youth enterprise fund.

3.5 Nutrition

The CIDP 2013-2017 outlined key areas of focus in the nutrition sector. The county sought to reduce; the proportion of adult population with a BMI over 25 from 45 per cent to 35 per cent; the proportion of newborns with low birth weight from 14 per cent to 5 per cent; the proportion of children under years of age who are stunted from 22 per cent to 5 per cent; and the proportion of children under five years of age who are underweight from 29 per cent to 5 per cent.

Several county nutrition indicators remained relatively better than the national indicators, according to 2014 data. These indicators were: stunting that stood at 18.2 per cent of the population; wasting and underweight children that stood at 3.0 per cent and 8.1 per cent, respectively; and the proportion of households consuming adequately iodized salt at 99.5 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 coverage of 24 per cent in 2014 (Table 6).

The proportion of overweight or obese women in the county stood at 44.0 per cent, higher than the national average of 28.9 per cent. The average Body Mass Index (BMI) of women in the county was 24.9, which was also higher than the national average.

Table 6: Selected nutrition performance indicators

Indicators	2014-County	2014-National
Stunted children (%)	18.2	26.0
Wasted children (%)	3.0	4.0
Underweight children (%)	8.1	11.0
Vitamin A supplements coverage	12.3	24.0
Proportion of children aged 6 to 59 months- Received Vitamin A supplement	47.8	71.4
Proportion of children consuming adequately iodized salt.	99.6	99.1
Proportion of households consuming adequately iodized salt.	99.5	99.2
" Household salt iodization (50 – 80 mg/Kg KIO3 (% samples) "	56.0	57.0
Number of Women (BMI)	24.9	23.2
Overweight or obesity among women aged 15 to 49 years.	44.0	28.9

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

3.5.1 Nutrition budget and expenditure

The county had not initiated the 100 per cent nutrition sensitive (direct nutrition interventions) spending. There was no clear budgetary allocation for nutrition for the review period.

3.5.2 Nutrition medium term expectations

In the period 2018-2022, the County plans to strengthen nutrition coordination at all levels; create community awareness on maternal nutrition; and increase access, utilization and implementation of school health and nutrition services. To realize the objective, the county will be required to set aside a specific share of nutrition sensitive spending in its budgetary allocations.

3.6 Other Initiatives for the Special Interest Groups

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

a) AGPO

The county promotes the implementation of Access to Government Procurement Opportunities (AGPO) programme by undertaking trainings for women groups on AGPO by sector.

b) Children

The county has launched a child protection management information system. The county has also resolved cases and provided psychological support to 3,089 children and established a network of all charitable children's homes and child protection partners for closer supervision. In addition, the county has established sub-county children offices in all the six sub-counties.

c) Youth

The county has developed a youth entrepreneurship programme in partnership with KCB. Sports promotion is also undertaken through equipping and fencing of sports facilities.

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

d) Women

The county has developed a women economic empowerment policy through which a programme focusing on beadwork, "Taka ni mali", agribusiness, and bricket making was initiated. A county credit facility for women's groups has also been established.

e) PWDs

The county provides assistive devices and full scholarships through the bursary and disability fund to PWDs. The county also promotes PWD compliance to the building code. PWDs were facilitated to participate in the National PWDs sports competitions. Entrepreneurship is promoted through training and provision of credit facilities.

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	Kajiado county's economy was largely driven by the services sector, which contributed to 66 per cent of the Gross County Product (GCP) and accounted for 1.5 per cent of the total national GDP as of 2017, ranking 22 nd among the 47 counties in terms of contribution to GDP.	The county should continue creating an enabling business environment to attract more investments in the services, manufacturing, industry and agricultural sectors, and investing in enhancing farmers' capacities in modern agricultural/livestock methods, extension services, agribusiness and research.	County Treasury and Planning/ County Executive/Department of Trade and Industries
Revenue	The county's own source revenue decreased from Ksh 0.8 billion in 2014/15 to Ksh 0.6 billion in 2016/17 but improved to Ksh 0.7 billion in 2017/18 while the equitable share transfer increased from Ksh 3.9 billion to Ksh 5.8 billion during the review period.	The county can improve its revenue collection by enhancing fiscal efforts to accelerate revenue mobilization from local and conditional grants sources.	County Treasury and Planning/ Directorate of Revenue
Expenditures	The budget execution rates for child protection, youth and women, water and sanitation, were relatively low.	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
Health	The county health actual expenditure persistently increased from Ksh 0.5 billion in 2014/15 to Ksh 1.7 in 2017/18.	In addition to continued sensitization on availability of and importance of maternal services, the county ought to invest more in the sector for better outcomes.	County Treasury and Planning / County Department of Health
Education	The Early Childhood Development Education (ECDE) budget in the county declined from Ksh 0.9 billion in 2015/16 to Ksh 0.7 billion in 2017/18.	There is need to adequately finance the ECDE and ring-fence the ECDE budget, which currently has been experiencing a declining budget, hence affecting the education outcomes for the young children.	County Treasury and Planning/ County Department of Education
WASH	Total spending in water and sanitation improved from Ksh 0.2 billion in 2014/15 to Ksh 0.5 billion in 2016/17 and declined to Ksh 0.2 billion in 2017/18 but there is 42 per cent of non-revenue water in the county.	More investment in the sector's infrastructure to gain from the water utility revenue that will enhance water service delivery and in meeting operations and maintenance costs.	County Treasury and Planning/ County Department of Water and Sanitation/KWSC
Child Protection, Youth and Women	The county's child protection, youth and women budget allocation as a share of total county budget allocation was only once (2017/18) during the review, amounting to Ksh 0.08 billion.	Prioritize the sector in the future allocations. Align the county government social services programmes with national government programmes to avoid duplication of the activities while ensuring that the available resources are focused to the relevant beneficiaries.	County Treasury and Planning/ County Department of Culture and Social Services
Nutrition	The county had not initiated the 100 per cent nutrition sensitive (direct nutrition interventions) spending since there was no clear budgetary allocation for nutrition for the review period.	The county should ensure that direct nutrition interventions, across several sectors such agriculture, education and health are budgeted for, with visible budget lines.	County Treasury and Planning/ County Department of Health and all other sectors, namely: education, agriculture, social protection and WASH.
Budget Execution	The budget execution rates for child protection, youth and women, water and sanitation, were relatively low. Besides, the best budget execution rate for water and sanitation was 65 per cent in 2017/18 while that for child protection, youth and women was 54 per cent in 2017/18/15.	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, Planning and all departments; National Treasury

Disaggregated Data	Due to limited disaggregation of data in expenditure reports, it was not possible to establish how much of the county government budget was spent on crucial social services such as child protection, youth development, disability and gender mainstreaming.	By having standalone budget lines on the listed sectors, the county is 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 See, for example, UNICEF (2017) *Early Moments Matter*, New York: UNICEF.
- 3 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.
- 4 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.
- 5 Base year 2013
- 6 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)
- 7 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.

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. The entire process of preparing the brief was guided by Dr. Rose Ngugi (Executive Director, KIPPRA). The KIPPRA technical team consisted 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 brief was edited and designed by Felix Muriithi, Kenneth Kiptanui and Isaiah Muthui.

The contribution from the following government institutions notably; Council of Governors (CoG), County governments, Controller of Budget (CoB), Commission for Revenue allocation (CRA), National Gender and Equality Commission (NGEC), Ministry of Health (MoH)-Division of Nutrition and Dietetics, Ministry of Education (MoE), Ministry of Water and Irrigation (MoWI), Ministry of Public Service Youth and Gender (MPSYG), Kenya School of Government (KSG) was instrumental in the production of this brief.

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

We are also grateful to the UN Women team comprising 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.

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

