

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



County Government of Uasin Gishu

### KEY HIGHLIGHTS OF THE BRIEF

This brief provides an analysis on how the County Government of **Uasin Gishu** 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, focusing on health, education, social and child protection services, nutrition, water and sanitation. The analysis was based on budget data and information collected from county policy documents and through interviews with relevant county stakeholders. The key highlights from the analysis are summarized below:

- a). **An estimated 50 per cent of the Gross County Product (GCP)<sup>1</sup> of Uasin Gishu, which is the 10<sup>th</sup> largest (2.3% contribution to GDP) of all 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 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.
- b). **The county's own source revenue fluctuated between Ksh 5.5 billion in 2014/15 and Ksh 6.3 billion in 2017/18.** However, as a share of total revenue, own source revenue decreased from 16.2 per cent in 2014/15 to 10.8 per cent in 2017/18. Overall, total county revenue increased from Ksh 5.08 billion in 2014/15 to Ksh 5.72 billion in 2017/18, mainly because of equitable share transfers. The county needs to fast track automation of revenue collection streams to minimize losses in own source revenue and hence promote growth.
- c). **Maternal and child health outcomes generally improved, in part due to increase in budget allocation from Ksh 1.1 billion in 2014/15 to Ksh 2.0 billion in 2017/18.** However, the proportion of pregnant women who attended at least one ante-natal clinic (ANC) visit during pregnancy decreased from 86.8 per cent to 82.3 per cent. In addition, child immunization rates dropped from 89.4 per cent to 83.1 per cent during the period. Investments in the sector should be channelled towards creating awareness on services available under free maternity services, immunization programmes, and exploration of non-financial constraints to access of these services.
- d). **The budget for Early Childhood Development Education (ECDE) decreased from Ksh 0.7 billion in 2014/15 and 2015/16 to Ksh 0.5 billion in 2017/18.** Gross Enrolment increased from 60.8 per cent in 2014 to 103.7 per cent in 2018 while net enrolment increased from 59.7 per cent to 76.8 per cent. Looking forward, the challenge for the county is to ensure equitable distribution and effective utilization of available resources to fast track the attainment of 100 per cent Net Enrolment Ratio (NER) in ECDE. In addition, the county should ring-fence ECDE resources<sup>2</sup> so that they are not used for other purposes such as secondary and higher education bursaries.
- e). **The budget for water and sanitation (WASH) increased from Ksh 0.35 billion in 2014/15 and 2015/16 to Ksh 0.41 billion in 2017/18.** Access to improved water and sanitation remained constant at 69 per cent and 83 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.
- f). **The allocation to child protection, youth and women in nominal terms increased from Ksh 0.15 billion in 2016/17 to Ksh 0.30 billion in 2017/18.** The increase in child neglect and abandonment cases 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 was Ksh 15 million in 2014/15 and Ksh 13.5 million in 2017/18.** There was no direct spending on nutrition prior to this. There is need to consistently allocate resources towards nutrition-specific and sensitive programmes in the various sectors. The county has, however, developed a nutrition bill to guide activities of the sector and fast track attainment of national targets by 2022.
- h). The budget execution rate for most social sector budgets fluctuated between a maximum of 93 per cent in 2016/17 for the health sector and a minimum of 66 per cent in 2017/18 in water and sanitation.** The low budget execution rates were attributed to, in part, delays in release of approved budgets by the National Treasury, and weak procurement and cash flow planning by the county. 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 the number of reported cases of child neglect and abandonment from 51 in 2014 to 2,165 cases in 2018, yet there is no specific budget line for this. The same applies to gender-based violence, which has increased in recent years.

## 1. COUNTY OVERVIEW

**Uasin Gishu** occupies a land area of approximately 3,345 km<sup>2</sup> and is divided into 6 sub-counties and 30 wards. The county's population is 1,163,186, which represents 2.45 percent of the national population. This is constituted of 580,269 males, 582,889 females and 28 intersex persons.

**In 2015/16, the overall poverty rate of the county was 41 per cent with 12.1 per cent living in extreme poverty, which is slightly better than the overall national rates of 36.1 and 8.6 per cent, respectively.** Among children, almost one in two were affected by monetary poverty or lack of financial means<sup>3</sup>. Additionally, 32.0 per cent of youth and 39.9 per cent of women were affected by monetary poverty. Moreover, 35.3 per cent of children were living in multidimensional poverty;<sup>4</sup> that is, deprived in multiple dimensions including nutrition, healthcare, education, housing and drinking water. The proportion of youth and women in multidimensional poverty were 45.3 per cent and 58.4 per cent, respectively. The

**Table 1: Uasin Gishu county administrative, poverty and demographic profile**

Administrative Profile							Latest Available
Area (km <sup>2</sup> )							3,345
Number of sub-counties							6
Number of wards							30
Overall poverty (%)							41
Extreme poverty (%)							12.1
Population (2019)							1,163,186
Group	Children	National Children	Youths	National Youths	Women	National Women	
Monetary Poor							
Male (%)	48.0	42.1	30.1	29.1	39.2		30.5
Female (%)	44.9	41.0	33.8	28.8	39.9		34.1
Total (%)	46.5	41.6	32.0	28.9	40.0		32.4
Population	486,484	20,742,290	381,823	13,443,268	184,388		7,847,350
Multidimensionally Poor							
Male (%)	38.2	49.3	47.1	44.7	48.5		51.0
Female (%)	32.3	47.1	43.7	49.4	58.4		60.8
Total (%)	35.3	48.2	45.3	47.1	54.2		56.1
Population	486,484	20,742,290	381,823	13,443,268	184,388		7,847,350

Source: Kenya National Bureau of Statistics (2018)

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.

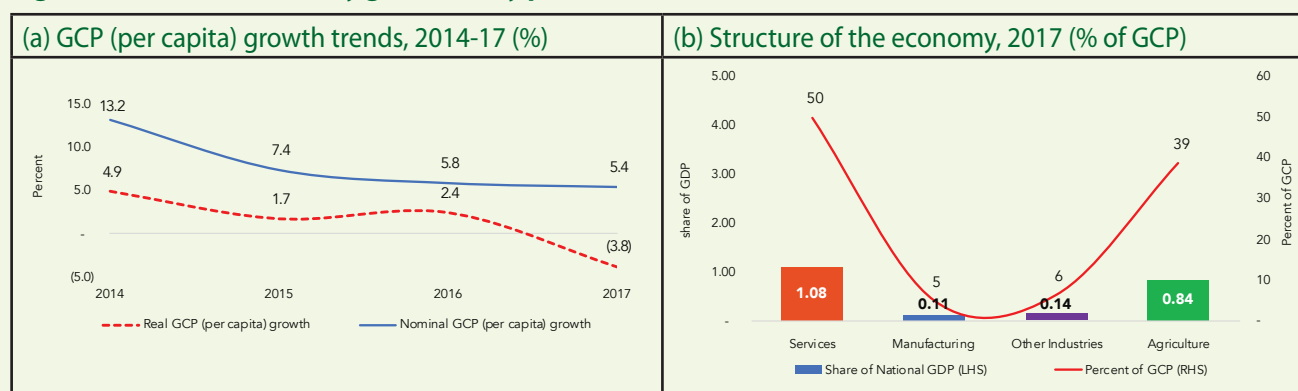
## 2. STATE OF COUNTY ECONOMY

### 2.1 Gross County Product Growth

**Uasin Gishu accounted for 2.3 per cent of the national GDP in 2017.** Its real GDP per capita decreased from 4.9 per cent in 2014 to 1.7 per cent in 2015 before increasing slightly to 2.4 per cent in 2016 and then decreasing to negative 3.8 per cent in 2017. The most recent downturn was largely due to the prolonged drought across the county.

**The economy is heavily reliant on the services sub-sector, which accounted for 50 per cent of the GCP and 1.1 per cent of the national GDP.** Agriculture accounts for 39 per cent of the GCP while manufacturing and other industries account for 6.3 per cent and 4.9 per cent of the GCP, respectively. This trend calls for diversification to manufacturing, and the county is making efforts to revive the manufacturing industry, which is particularly important for job creation. The county should put in place mechanisms to reduce the cost of farming, enhance the marketing of agricultural produce and promote agricultural value chains to enhance productivity of the agriculture sector. Participation of women and youth within the sectors should also be enhanced.

**Figure 1: Uasin Gishu county gross county product and economic structure, 2014-17**

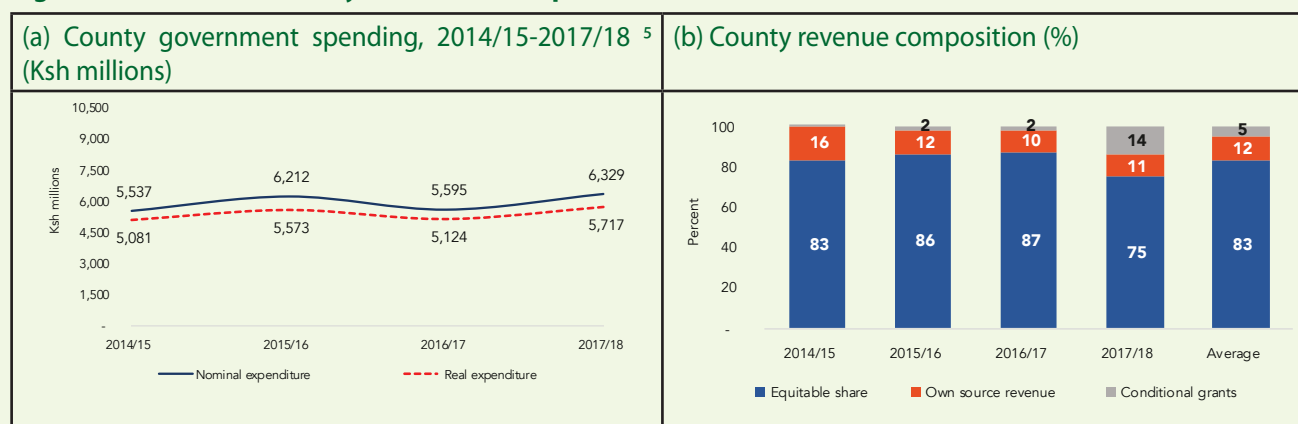


Source: KNBS (2019) Statistics

### 2.2 Overall Budget Performance

**The county government annual spending in real terms grew from Ksh 5.08 billion to Ksh 5.57 billion between 2014/15 and 2015/16, before decreasing to Ksh 5.12 billion in 2016/17 and later increasing to Ksh 5.72 billion in 2017/18 (Figure 2a).** The effect of inflation accounted for, on average, Ksh 448 million in loss of purchasing power during the period. This spending is heavily dependent on national government transfers, which account for, on average, 82.9 per cent during the period. In nominal terms, own source revenue fluctuated from Ksh 5.5 billion in 2014/15 and Ksh 6.3 billion in 2017/18 while equitable share increased from Ksh 5.1 billion in 2014/15 to Ksh 5.7 billion in 2017/18. Own source revenue

**Figure 2: Uasin Gishu county revenue and expenditure trends, 2014-18**



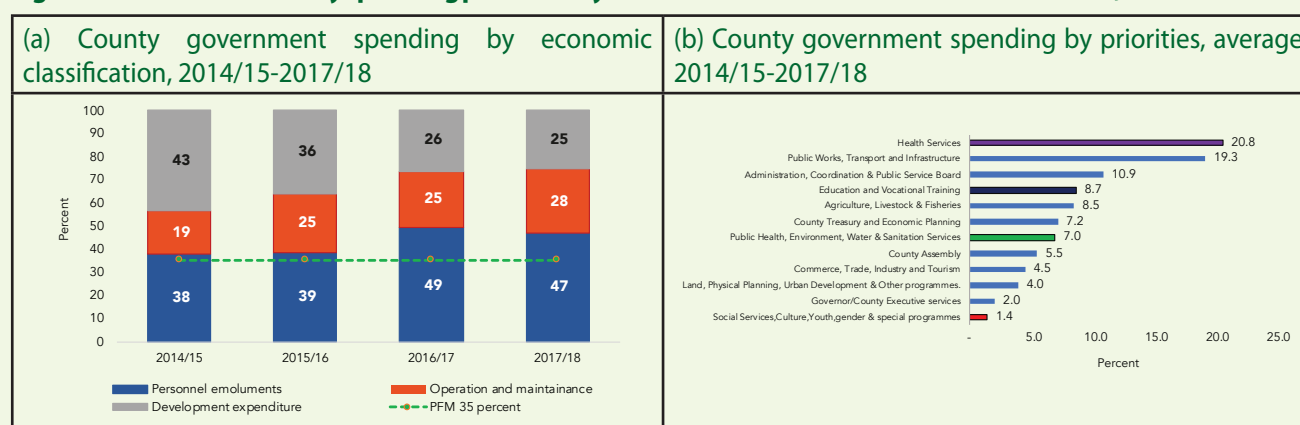
Source: Office of the Controller of Budget (Various) reports, 2014-2018

as a share of total revenue decreased from 16.2 per cent in 2014/15 to 10.3 per cent in 2016/17, then increased slightly to 10.8 per cent in 2017/18. The contribution of conditional grants to total county revenue increased from 0.3 per cent in 2014/15 to 14.2 per cent in 2017/18. There is need for enhanced fiscal efforts to accelerate revenue mobilization from local revenue.

**The development share of actual spending decreased from 43 per cent in 2014/15 to 25 per cent in 2017/18.** The recurrent expenditure constituted of personnel emoluments and operations and maintenance costs, which accounted for above 50 per cent throughout the period. Wages alone account for between 38 per cent of all expenditure in 2014/15 and 49 per cent in 2016/17. This implies that the county has low compliance with the Public Finance Management (PFM) Act 2012 provision that caps development spending at a minimum of 30 per cent of total budget. The county did not comply with the 2015 Regulations, which require that not more than 35 per cent of the county's total revenue should go to payment of wages and salaries.

The county spent over 46.4 per cent of total expenditure during the period under review on health, education, agriculture, nutrition, social protection, youth, gender, water and sanitation. These sectors are regarded as being more sensitive to the needs of children, youth and women. The effects of this expenditure on the various programmes and activities vary across sectors.

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



Source: Controller of Budget reports, 2014-2018

### 3. ANALYSIS OF SOCIAL SECTOR SPENDING

#### 3.1 Health

##### 3.1.1 County priorities

**During the period under review, the county outlined key priorities that targeted children, youth and women.** The sector's priorities 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; and improving the quality of health services in existing facilities by equipping and improving the human resource base.

**Maternal mortality in the county stood at 191 per 100,000 live births in 2016, better than the national average of 495 per 100,000.** The number of women who had access to skilled delivery increased from 63.4 per cent in 2014 to 66.6 per cent in 2018. This can be attributed to the introduction of free maternity services nationwide. However, the proportion of pregnant women who attended at least one ANC visit during the pregnancy decreased from 86.8 per cent in 2014 to 82.3 per cent in 2018, while those that attended at least four increased from 40.9 per cent to 42.4 per cent. Increased access to skilled birth attendant during delivery can explain the decrease in still births during the period from 19.6 per cent to 18.3 per cent.

**Under 5 mortality stood at 80 per 1,000 live births in 2016, slightly above the national average of 79 per 100,000.** The proportion of children under one year who are fully immunized decreased from 89.4 per cent in 2014 to 83.1 per cent in 2018. However, DPT/Hep +HiB3 dropout rates decreased from 4.6 per cent in 2014 to 3.9 per cent in 2018.

**Table 2: Uasin Gishu county selected health sector performance indicators**

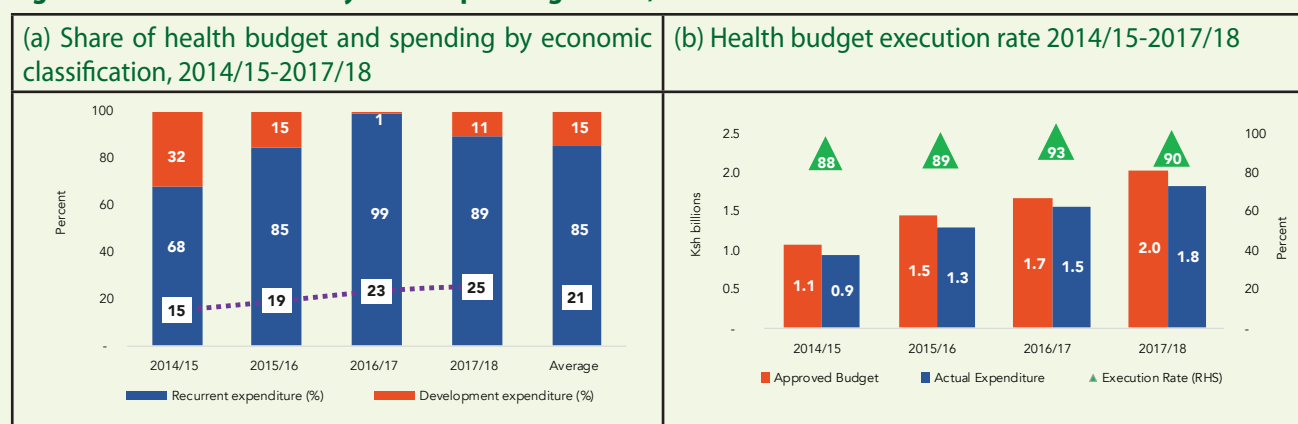
Selected Health Indicators	2014		2015		2016		2017		2018	
	County	National	County	National	County	National	County	National	County	National
U5MR (death per 1,000 live births) 2016 Estimate	-	-	-	-	80.0	79.0	-	-	-	-
MMR (death per 100,000 live births) 2016 Estimate	-	-	-	-	191.0	495.0	-	-	-	-
Skilled birth attendant coverage (%) (source: DHIS2)	63.4	53.5	63.1	56.9	64.6	59.3	54.2	53.0	66.6	64.9
Proportion of pregnant women who attended at least one ANC visit during pregnancy (%) (Source: DHIS2)	86.8	76.4	81.4	75.4	81.6	76.9	73.7	73.7	82.3	81.9
Proportion of pregnant women who attended at least four ANC visit during pregnancy (%) (Source: DHIS2)	40.9	35.9	41.3	39.7	38.2	39.8	34.0	32.6	42.4	48.7
Proportion of children under one year who are fully immunized (%) (Source: DHIS2)	89.4	70.2	85.8	75.7	79.8	72.4	88.4	65.9	83.1	77.0
DPT/Hep+HiB3 dropout rate (%) (Source: DHIS2)	4.6	6.8	5.7	7.2	3.2	6.6	7.5	10.1	3.9	4.0
Still Birth Rate (Source : DHIS2)	19.6	29.3	14.3	22.6	19.1	21.5	24.5	22.6	18.3	20.4

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

### 3.1.2 Budget and expenditure

The share of the health budget as a proportion of the total county budget allocation increased from 15 per cent in 2014/15 to 25 per cent in 2017/18. Health budget allocation in nominal terms increased from Ksh 1.1 billion in 2014/15 to Ksh 2.0 billion in 2017/18. Health actual expenditure increased from Ksh 0.9 billion in 2014/15 to Ksh 1.8 billion in 2017/18. The absorption rate increased between 2014/15 and 2016/17, from 88 per cent to 93 per cent before decreasing to 90 per cent in 2017/18. This is attributable to failure by the exchequer to release the full amount approved in the health budget. Health actual expenditure expanded from about Ksh 0.9 billion to Ksh 1.8 billion.

**Figure 4: Uasin Gishu county health spending trends, 2014-18**



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

### 3.1.3 Medium term expectations

The county aims to continue investing in health, especially in child and maternal health by prioritizing quality health infrastructure and human resources in all sub-counties. There is commitment by the county to increase screening and management of non-communicable diseases (NCDs) such as cervical cancer (10,000-20,000), breast cancer (2,500-6,000), disability (6,000-4,000) and stunting in children (3,000-5,500). The county aims to increase awareness on NCDs from 10% to 100%, and control communicable diseases for under 1 year to improve from 78% to 91%. The county also aims to prioritize investments in reproductive health information especially for the youth and women by increasing family planning coverage from 60% to 80% and undertake awareness campaigns on the importance of healthy practices. It also aims to continue investing in quality health services by employing more health service providers, constructing more health facilities and equipping them, and also improving the referral system. The number of health facilities providing support to victims of

sexual gender-based violence is set to increase from 6 to 96. On social protection in health, the county commits to increase the number of health facilities using *mama* kits from 20 to 200.

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 County priorities

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

**Gross ECDE enrolment rate increased from 60.8 per cent in 2014 to 103.7 per cent in 2018, while net enrolment rate (NER) increased from 59.7 per cent to 76.8 per cent during the same period.** This indicates that more children joined ECDE than before implementation of devolution. NER and GER were generally higher than national averages of 94.4 per cent and 63.5 per cent, respectively, indicative of better access to ECDE facilities in the county. More girls of school going age enrolled in ECDE than boys in Uasin Gishu County (Table 3).

**Gross primary and secondary gross enrolment rates stood at 114.5 per cent and 76.3 per cent in 2018, respectively. Net enrolment rate (NER) increased from 84.0 per cent to 87.1 per cent for primary school and increased from 38.2 per cent to 39.6 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 girls in both primary and secondary school.

**The enrolment at VTCs declined from 841 in 2013 to 762 in 2017.** A total of 38 instructors were employed, representing a student teacher ratio of 1: 20.

**Table 3: Uasin Gishu county selected education sector performance indicators**

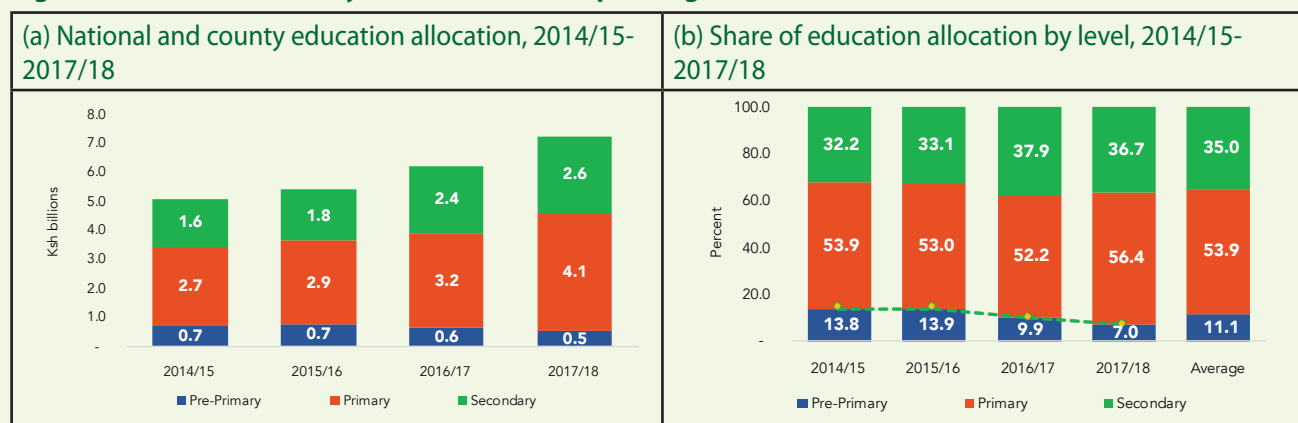
Pre-primary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	60.8	73.6	103.7	94.4
Net enrolment ratio (%)	59.7	71.8	76.8	63.5
Male (%)	61.8	73.4	72.2	62.5
Female (%)	57.6	70.2	81.2	65.0
School size (Public) (Pupils) (Average)	72.0	75.0	91.0	85.0
Gender parity index (value)	0.9	1.0	-	-
Pupil-teacher ratio (No.) (Public)	31.0	31.0	24.0	31.0
Proportion of enrolment in private schools (%)	33.3	31.5	39.0	33.0
Primary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	89.5	104.0	114.5	107.2
Net enrolment ratio (%)	84.0	88.0	87.1	82.4
Male (%)	88.0	86.0	85.7	81.7
Female (%)	91.0	90.0	88.7	83.0
School size (Public) Average No. of pupils	333.0	338.0	368.0	375.0
Gender parity index (Value)	1.0	1.0	-	-
Pupil-teacher ratio (No.)	37.0	42.0	35.0	40.0
Proportion of enrolment in private schools (%)	15.0	16.0	20.0	16.0
Secondary School	2014-County	2014-National	2018-County	2018-National
Gross enrolment ratio (%)	65.0	58.7	76.3	66.2
Net enrolment ratio (%)	38.2	47.4	39.6	37.5
Male (%)	36.7	49.6	33.3	35.4
Female (%)	39.7	45.2	44.9	39.8
School size (Public)	-	-	451.8	392.0
Gender parity index (value)	1.1	0.9	-	-
Pupil-teacher ratio (No.) (TSC)	29.0	30.0	30.0	32.0
Pupil-teacher ratio (No.) (TSC and BOM)	18.6	20.2	19.0	20.0
Proportion of enrolment in private schools (%)	38.9	30.7	5.2	5.8

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

### 3.2.2 Budget and expenditure

The ECDE budget allocation stagnated at Ksh 0.7 billion in 2014/15 and 2015/16 before decreasing to Ksh 0.5 billion in 2017/18. Allocations to primary school education increased from Ksh 2.7 billion in 2014/15 to Ksh 4.1 billion in 2017/18 while allocations to secondary school increased from Ksh 1.6 billion in 2014/15 to Ksh 2.6 billion in 2017/18 (Figure 5a). Allocations to ECDE as a share of total spending on basic education decreased from 13.8 per cent in 2014/15 to 7 per cent in 2017/18 (Figure 5b).

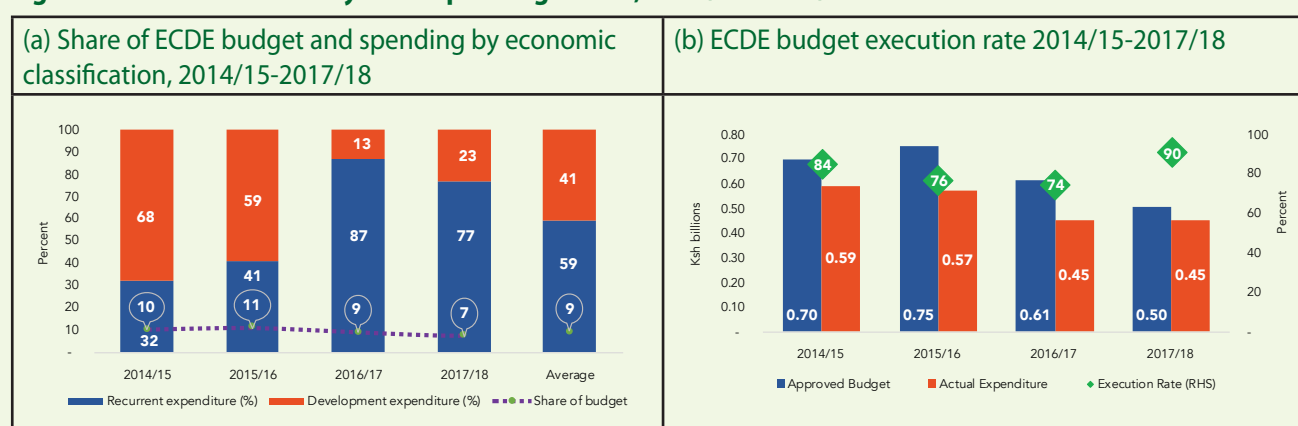
**Figure 5: Uasin Gishu county overall education spending trends, 2014/15-2017/18**



Source: National Treasury (Various), IFMIS

The share of ECDE budget in the total county budget allocation increased from 10 per cent in 2014/15 to 11 per cent in 2015/16 before decreasing to 7 per cent in 2017/18. Total spending on ECDE decreased from Ksh 0.59 billion in 2014/15 to Ksh 0.45 billion in 2016/17 and 2017/18 (Figure 6b). Spending comprised of, on average, 41 per cent development expenditure and 59 per cent recurrent expenditure during the period (Figure 6a). The absorption rates decreased from 84 per cent in 2014/15 to 74 per cent in 2016/17 before increasing to 90 per cent in 2017/18.

**Figure 6: Uasin Gishu county ECDE spending trends, 2014/15-2017/18**



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

### 3.2.3 Medium term expectations

The county government with support from stakeholders aims to continue investing in early childhood development through infrastructural development, employment of ECDE teachers, provision of sanitation facilities, bursaries and scholarships to needy TVET students from 1,212-8,000, and improvement of school feeding programme from 5,000-25,000 children. To achieve these objectives, the county will require to partner with the national government and the private sector to enhance ECDE and vocational training through infrastructural development, and equipment of both ECDE and vocational training centres.

### 3.3 Water and Sanitation

#### 3.3.1 County priorities

The 2013-2017 Uasin Gishu County Integrated Development Plan outlined upgrading and extension of water and sanitation infrastructure as the main sector priority. Additionally, the county would invest in protection and conservation of existing water sources and catchment areas, promoting rain water harvesting and investing in storage infrastructure and building and expanding sewer network systems to enhance waste management. The sector would prioritize sensitizing communities on water and waste management.

Access to improved water and sanitation remained constant at 69 per cent and 83 per cent, respectively. The population within the service area of water utility (company) decreased from 37 per cent to 35 per cent between 2014 and 2018. The proportion of population covered or served by the utility improved from 72 per cent in 2014 to 74 per cent in 2018. The sector experiences the problem of non-revenue water<sup>6</sup> at about 42 per cent as at 2018; deteriorating from 32 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: Uasin Gishu county selected WASH sector performance indicators**

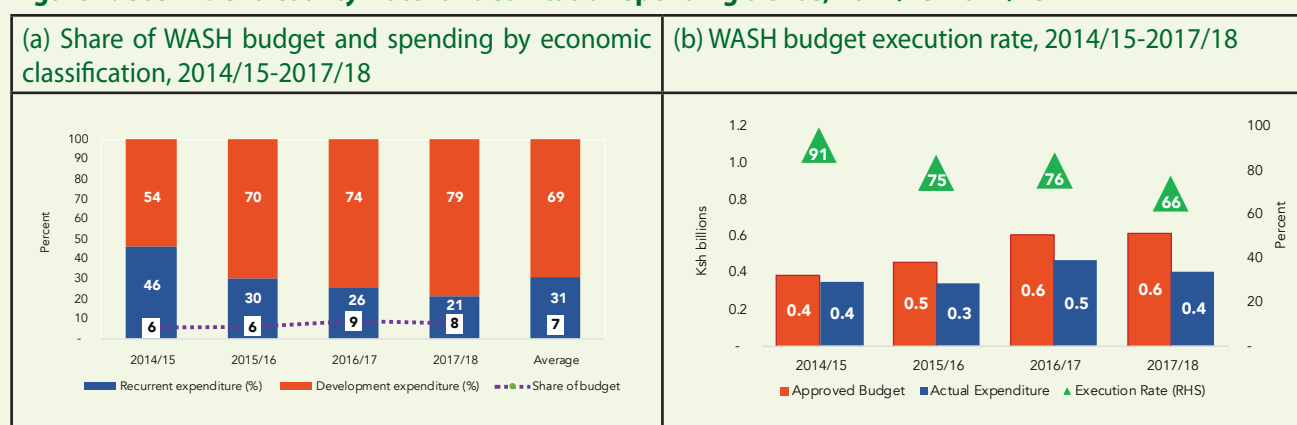
Indicators	2014-County	2014-National	2018-County	2018-National
County population within service areas of WSPs (%)	37	*	35	*
Water coverage by utilities (%)	72	53	74	*
Non-revenue water (NRW) (%)	32	42	42	*
Sanitation coverage within utility area (%)	97	69	-	*
Sewerage coverage (%)	-	*	32	*
Access to improved water (%)	69	*	69	*
Access to improved sanitation (%)	83	*	83	59
No toilet facility – Potential open defecation county-wide (%)	1	*	1	8

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

#### 3.3.2 Budget and expenditure

The total budget allocation to the sector as a share of total county budget allocation increased from 6 per cent in 2014/15 and 2015/16 to 9 per cent in 2016/17 before decreasing to 8 per cent. Total spending on the sector increased from Ksh 0.35 billion in 2014/15 and 2015/16 to Ksh 0.47 billion in 2016/17 before decreasing to Ksh 0.41 billion in 2017/18. Spending consisted of, on average, 31 per cent recurrent and 69 per cent development. The approved budget allocation to the county increased from Ksh 0.39 billion in 2014/15 to Ksh 0.62 billion in 2017/18. However, the absorption rate decreased from 92 per cent in 2014/15 to 66 per cent in 2017/18. This is also attributed to failure by the exchequer to release the entire approved budget amount, and also capacity constraints.

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



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



### 3.3.3 Medium term expectations

In the plan period of 2018-2022, the county aims to continue with provision of clean water and solid waste management, and increase access to decent sanitation. The key priority programmes include construction of dams, development of distribution and extension, rehabilitation of existing water systems to increase access, and ensure reasonable distance of access. This will especially help in increasing access and in turn reduce the time women and girls spend on fetching water and allow them to instead focus on schooling and other economic activities. The county will also construct sewer lines to reach more households and rehabilitate and maintain sewer lines to improve the counties sanitation. To achieve, the department will need to strengthen the capacity of the water supply scheme, and strengthen partnerships in water and sanitation development. Environmental protection and conservation remain a key focus area for the county.

## 3.4 Child Protection, Youth and Women

### 3.4.1 County priorities

**The County Integrated Development Plan (CIDP) for 2014-2017 highlighted key priorities for children, youth, women, and persons with disabilities (PWDs).** The priorities were: coordinating and development of communities through social welfare; empowerment of youth through training; enhancement and management of sports activities; enhancing; promotion and regulation of responsible gaming; promotion of cultural development activities and coordination of gender mainstreaming as key areas of focus for the education, youth affairs, culture, social services and sports departments. The county planned to facilitate and train women and youth to start self-help groups and establish revolving funds as some of the empowerment activities. Notably, not a lot of attention was set on vulnerable children with the main programme planned being the construction of rehabilitation centre and reintegrating the children back into the society.

**Specifically, on social child protection, the county recorded a high number of reported cases of child neglect and abandonment rising from 51 cases in 2014 to 2,165 cases in 2018.** The child physical abuse increased from 37 in 2014 to 52 in 2018; child emotional abuse increased from 5 to 13 cases; and child labour cases reduced from 11 to 1 per cent.

**The county had no records of cases of Female Genital Mutilation (FGM).** The low/non-reporting of FGM to government institutions can be attributed to either the intensive campaigns and initiatives to protect the girl child, or fear by the population to report such cases, and culture that approves such practices.

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

Indicators	2014-County	2014-National	2018-County	2018-National
Child Neglect and Abandonment	51	767	2,165	73245
Child Sexual Abuse	30	636	-	172
Child Trafficking, Abduction and Kidnapping	-	32	33	1022
Child Labour	11	168	1	378
Child Emotional Abuse	5	58	13	853
Child Physical Abuse	37	583	52	2031
Female Genital Mutilation	-	9	-	40

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

### 3.4.2 Budget and expenditure

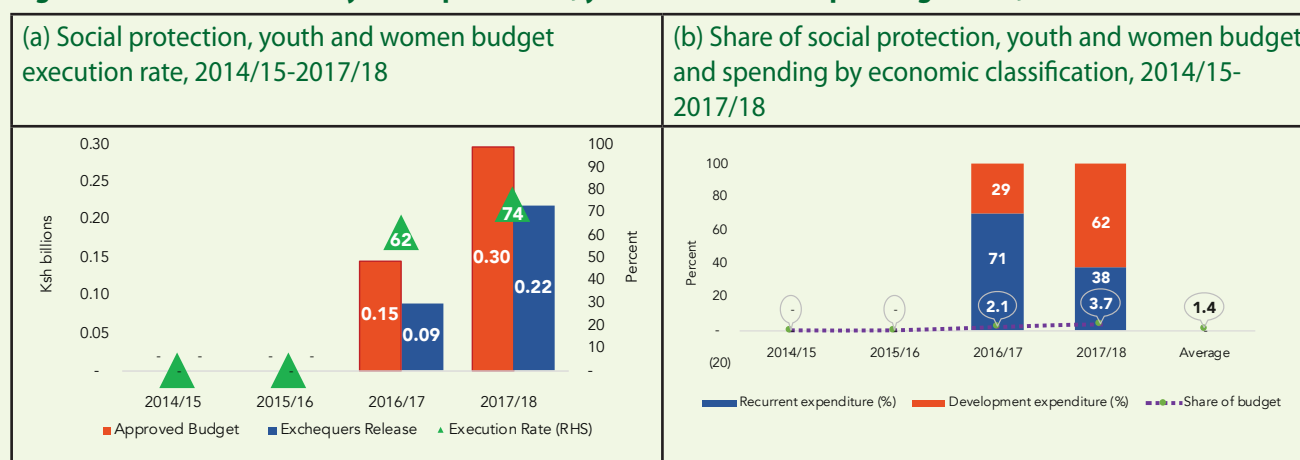
**The sector's budget allocation as a share of total county budget increased from 2.1 per cent in 2016/17 to Ksh 3.7 per cent in 2017/18.** The county's allocation to social protection programmes, in nominal terms, increased from Ksh 0.15 billion in 2016/17 to Ksh 0.30 billion in 2017/18. The county had no allocation to the sector in 2014/15 and 2015/16. The absorption rate for the allocated two financial years improved from 62 per cent in 2016/17 to 74 per cent in 2017/18 (Figure 8a). The share of recurrent spending decreased from 71 per cent to 38 per cent between 2016/17 and 2017/18 while development expenditure increased from 29 per cent to 62 per cent (Figure 8b).

### 3.4.3 Medium term expectations

Between the plan period 2018 and 2022, the county aims to provide care, support and build capacities of individuals, vulnerable groups and communities for equity and self-reliance. The key programmes include refurbishment of social amenities; provision of social safety net programmes and rehabilitation of vulnerable children; and align the county government social protection programmes with national government to avoid duplication of the activities while ensuring that the available resources are focused to the relevant beneficiaries. Few programmes were implemented or budgeted for

to cater for the vulnerable children. In light of increasing abandonment cases and number of street children, the county needs to prioritize social protection programmes for these groups.

**Figure 8: Uasin Gishu county social protection, youth and women spending trends, 2014-18**



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

### 3.5 Nutrition

**Promotion of nutrition education for mothers to improve nutritional status of households and eliminate malnutrition cases** was the focus for the county according to the CIDP 2013-2017.

**For children, stunting stood at 23 per cent of the population, with wasting and underweight children recording 3 per cent and 10 per cent, respectively (Table 6).** The proportion of households consuming adequately iodized salt in the county was 46.0 per cent, lower than the national average. Vitamin A supplementation among children aged 6 to 59 months was 15.0 per cent, which is lower than the target of 80 per cent and below the national coverages of 24.0 per cent in 2014.

**The proportion of overweight or obese women in the county stood at 48.0 per cent, higher than the national average of 28.9 per cent.** The average Body Mass Index (BMI)<sup>7</sup> of women in the county was 25.0.

**Table 6: Selected nutrition performance indicators**

Indicators	2014-County	2014-National
Stunted children (%)	23.0	26.0
Wasted children (%)	3.0	4.0
Underweight children (%)	10.0	11.0
Vitamin A supplements coverage	15.0	24.0
Proportion of children aged 6 to 59 months- Received Vitamin A supplement	78.0	71.4
Proportion of children consuming adequately iodized salt.	100.0	99.1
Proportion of households consuming adequately iodized salt.	100.0	99.2
Household salt iodization (50 – 80 mg/Kg KIO <sub>3</sub> ) (% samples)	46.0	57.0
Number of Women (BMI)	25.0	23.2
Overweight or obesity among women aged 15 to 49 years.	48.0	28.9

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

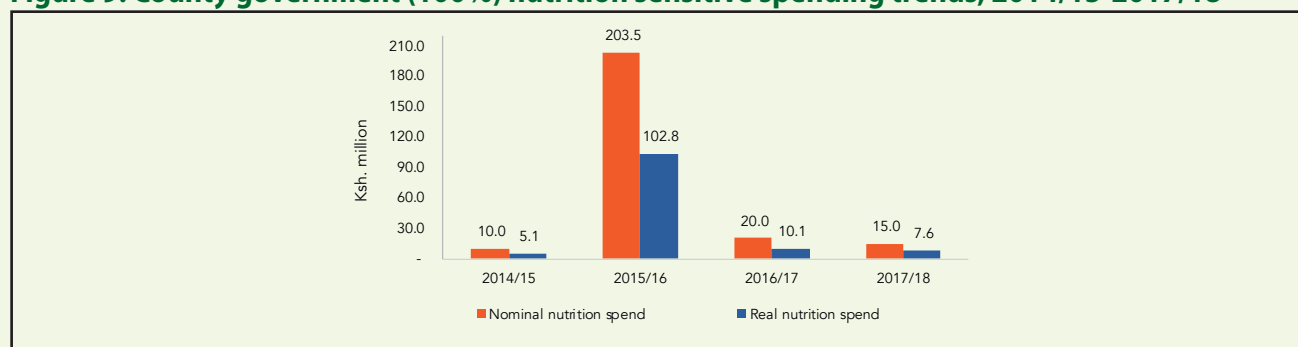
#### 3.5.1 Budget and expenditure

**The county spending on nutrition (direct nutrition interventions) in real terms was Ksh 5 million in 2014/15 after which it increased to Ksh 103 million before decreasing to Ksh 8 million.** This could be attributed to lack of proper nutrition plans in the county.

#### 3.5.2 Medium term expectations

In the period 2018-2022, the county plans to continue promoting nutrition education and strengthening community units to offer broad-based services to eliminate malnutrition cases and improve the health status of children and women in the

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



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

county. To realize the objective, the county will be required to increase the share of nutrition sensitive spending, which has been inconsistent, and leverage on multi-sectoral programmes to promote other nutrition initiatives.

### 3.6 Other Initiatives for Special Interest Groups

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

##### a) Children

The county developed a children play centre policy and has constructed a drop-in rescue centre for street children.

##### b) Youth

The county runs an internship programme that targets sponsorship of at least 700 youth per year. In addition, 1,800 youth have access to advanced loans for college fees by the government. The county also engages the youth in talent promotion through festivals and exhibitions. The county is implementing the *Kijana na Acre Programme*, a revolving fund which provides youth with capital to carry out agriculture on at least one acre of land.

##### c) Women

The county undertakes sensitization on women's rights and provides reduced interest rates on loans issued to women to undertake business.

##### d) PWDs

The county has engaged at least 2 per cent of PWDs in employment. It has also put in place frameworks for provision of group loans for PWDs to do business.

## 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	An estimated 50 per cent of the Gross County Product (GCP) of Uasin Gishu, which is the 10 <sup>th</sup> largest (2.3% contribution to GDP) of all 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/ Department of Industries, Trade and Tourism
Revenue	The county's own source revenue fluctuated from Ksh 5.5 billion in 2014/15 and Ksh 6.3 billion in 2017/18. However, as a share of total revenue, own source revenue decreased from 16.2 per cent in 2014/15 to 10.8 per cent in 2017/18.	The county needs to fast track automation of revenue collection streams to minimize losses in own source revenue and hence promote growth.	County Treasury and Planning/ Directorate of Revenue
Expenditures	The budget execution rate for most social sector budgets fluctuated between a maximum of 93 per cent in 2016/17 for the health sector and a minimum of 66 per cent in 2017/18 in water and sanitation.	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	Maternal and child health outcomes generally improved, in part due to increase in budget allocation from Ksh 1.1 billion in 2014/15 to Ksh 2.0 billion in 2017/18. However, the proportion of pregnant women who attended at least one ANC visit during pregnancy decreased from 86.8 per cent to 82.3 per cent.	Child immunization rates dropped from 89.4 per cent in 2014 to 83.1 per cent during the period. Investments in the sector should be channelled towards creating awareness on services available under free maternity services, and immunization programmes and exploration of non-financial constraints to access of these services.	County Treasury and Planning/County Department of Health
Education	The budget for ECDE decreased from Ksh 0.7 billion in 2014/15 and 2015/16 to Ksh 0.5 billion in 2017/18. Gross enrolment increased from 60.8 per cent in 2014 to 103.7 per cent in 2018 while net enrolment increased from 59.7 per cent to 76.8 per cent.	The challenge for the county is to ensure equitable distribution and effective utilization of available resources to fast track the attainment of 100 per cent NER in ECDE. In addition, the county should ring-fence ECDE resources so that they are not used for other purposes such as secondary and higher education bursaries.	County Treasury and Planning/County Department of Education

WASH	The budget for water and sanitation increased from Ksh 0.35 billion in 2014/15 and 2015/16 to Ksh 0.41 billion in 2017/18. Access to improved water and sanitation remained constant at 69 per cent and 83 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.	County Treasury and Planning/County Department of Water and Sanitation/Eldoret Water and Sanitation Company
Child Protection, Youth and Women	The allocation to child protection, youth and women in nominal terms increased from Ksh 0.15 billion in 2016/17 to Ksh 0.30 billion in 2017/18.	The increase in child neglect and abandonment cases implies that the government needs to increase allocations to the sector in order 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 was Ksh 15 million in 2014/15 and Ksh 13.5 million in 2017/18.	There was no direct spending on nutrition prior to this. There is need to consistently allocate resources towards nutrition-specific and sensitive programmes in the various sectors. The county has, however, developed a nutrition bill to guide activities of the sector and fast track attainment of national targets by 2022.	County Treasury and Planning/County Department of Health and all other sectors, namely education, agriculture, social protection and WASH
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, 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/M<sup>2</sup>. Broadly, a person is categorized as underweight if BMI is below 18.5 Kg/M<sup>2</sup>; normal weight: between 18.5 Kg/M<sup>2</sup> and 25 Kg/M<sup>2</sup>; and overweight: 25 Kg/M<sup>2</sup> to 30 Kg/M<sup>2</sup> and obese: over 30 Kg/M<sup>2</sup>.
- 8 See, for example, UNICEF (2017) Early Moments Matter, New York: UNICEF.

## 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, Samantha Luseno, Lawrence Kinuthia, Stella Mutuku, Teresa Bosibori, Boaz Munga, James Ochieng', 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 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.

#### 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**

