Country Profile

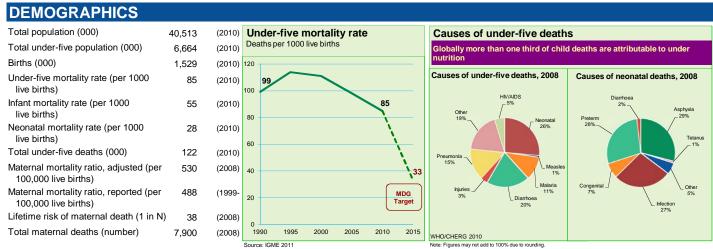
Kenya

Maternal, Newborn & Child Survival

March 2012



Kenya



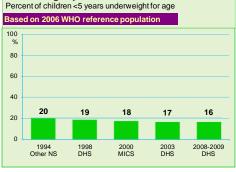
INTERVENTION COVERAGE FOR MOTHERS **NEWBORNS AND CHILDREN NUTRITION**⁴

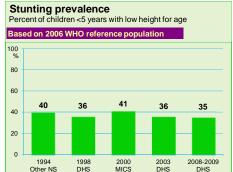
Wasting prevalence (based on 2006 WHO reference population, moderate and severe, %)

(2008-Introduction of solid, semi-solid or soft foods (6-9 months, %)

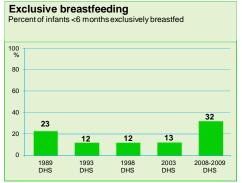
(2008-Low birthweight incidence (%) 8 (2008-

Underweight prevalence



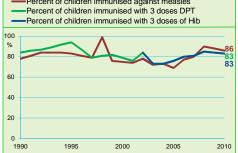


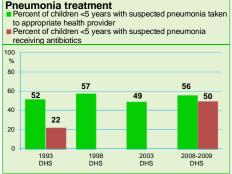
85

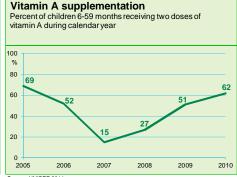


CHILD HEALTH Immunization Percent of children immunised against measles

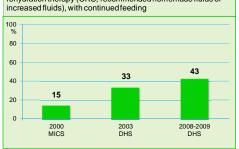
Source: WHO/UNICEE 2011

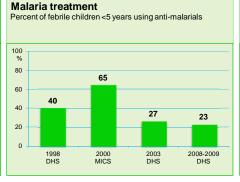


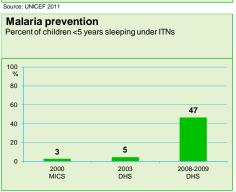




Diarrhoeal disease treatment Percent of children <5 years with diarrhoea receiving oral rehydration therapy (ORS, recommended homemade fluids or



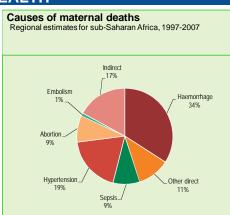


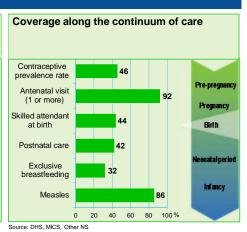


Kenya

MATERNAL AND NEWBORN HEALTH

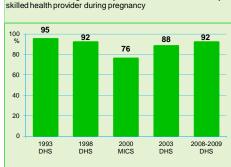
Proportion of women with low BMI (< 18.5 Kg/m2, %)	12	(2003)
Demand for family planning satisfied (%)	60	(2008-
Total fertility rate	4.7	(2010)
Adolescent birth rate (births per 1000 woman aged 15-19 yr)	106	(2004-
Antenatal visit for woman (4 or more visits, %)	47	(2008-
Early initiation of breastfeeding (within 1 hour of birth, %)	58	(2008-
Institutional deliveries (%)	43	(2008-
Postnatal visit for baby (within 2 days for home births, %)	-	-
Postnatal visit for mother (within 2 days %)	42	(2008-







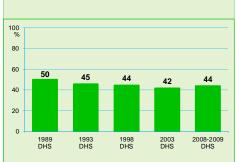
Percent of women aged 15-49 years attended at least once by a skilled health provider during pregnancy

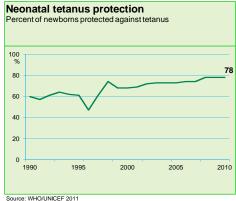




Note: Figures may not add to 100% due to rounding

Source: WHO 2010





HIV AND AIDS

HIV prevalence among young women (15-24 yrs,%)

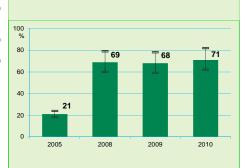
HIV prevalence among young 1.8 [1.3 - 2.4] (2009)

HIV prevalence among young 1.8 [1.3 - 2.4] (200 men (15-24 yrs,%)

HIV+ children receiving ART (%) 32 [22 - 59] (2009)

Orphan school attendance ratio 0.95 (2003)

Prevention of mother-to-child transmission of HIV Percent of HIV+ pregnant women receiving ARVs for PMTCT



Source: MOH/UNAIDS/WHO

Sanitation coverage

EDUCATION

Survival to last grade of primary school (total, admin data, %)

Survival to last grade of primary school (male, admin data, %)

Survival to last grade of primary school (female, admin data, %)

Primary school net enrolment ratio (total, admin data, %)

Primary school net enrolment ratio (male, admin data, %)

Primary school net enrolment ratio 84 (2009) (female, admin data, %)

83

83

(2009)

(2009)

WATER AND SANITATION

Drinking water coverage Percent of population by type of drinking water source, 2010 Other improved Unimproved Surface water ■Piped onto premises 100% 24 14 30 80% 17 37 60% 18 40% 40 40 45 19 12 0% Total Urban Rural

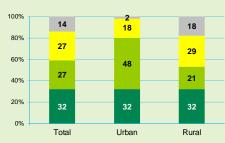
Percent of population by type of sanitation facility, 2010

Improved facility Shared facility Unimproved facility Open

100%

14

2
18



Open defecation

Source: WHO/UNIEF JMP 2012

CHILD PROTECTION

Women aged 20-24 years who were married or in union by age 18 (%)	26	(2008-
Birth registration (%)	60	(2008-
Female genital mutilation/cutting (%)	27	(2008-

Source: WHO/UNIEF JMP 2012

D	ISPA	RIT	IES	IN I	NTE	RVE	ENTI	ON	COV	/ER	AGE	1			
		Gender		Residence		Wealth Quintile									
Indicator	Total	Male	Female	Ratio of Male to Female	Urban	Rural	Ratio of Urban to Rural	Poorest	Second	Middle	Fourth	Richest	Ratio of Richest to Poorest	Equity chart ²	Source
DEMOGRAPHICS ³															
Under-five mortalty rate (per 1,000 live births)	85	-	-	-	-	-	-	98	102	92	51	68	0.7		IGME 2011
NUTRITION 4															
Low birth weight incidence (%)	8	-	-	-	7	8	0.9	8	8	8	7	7	0.9		DHS 2008-2009
Underweight prevalence (based on 2006 WHO reference population, %)	16	17	15	1.1	10	17	0.6	25	17	16	10	9	0.4		DHS 2008-2009
Stunting prevalence (based on 2006 WHO reference population, %)	35	37	33	1.1	26	37	0.7	44	39	34	29	25	0.6		DHS 2008-2009
Wasting prevalence (based on 2006 WHO reference population, %)	7	8	6	1.4	5	7	0.8	11	6	6	5	4	0.3		DHS 2008-2009
Exclusive breastfeeding (0-5 months, %)	32	27	38	0.7	24	33	0.7	42	29	24	31	28	0.7		DHS 2008-2009
Introduction of solid, semi-solid or soft foods (6-9 months, %)	85	87	83	1.1	94	83	1.1	68	98	89	79	95	1.4		DHS 2008-2009
Household consuming adequately iodized salt (15 ppm or more, %)	98	-	-	-	98	98	1.0	97	97	98	97	98	1.0		DHS 2008-2009
CHILD HEALTH 5															
Care seeking for pneumonia (%)	56	57	54	1.1	66	54	1.2	57	48	63	52	63	1.1	nhi	DHS 2008-2009
Antibiotic use for pneumonia (%)	50	48	51	0.9	47	50	0.9	48	57	62	42	38	0.8	Hh	DHS 2008-2009
Diarrhoeal treatment - children receiving ORT and continued feeding (%)	43	43	42	1.0	44	42	1.1	49	35	41	43	41	0.8	liii	DHS 2008-2009
Malaria prevention - children sleeping under ITNs (%)	47	46	47	1.0	62	44	1.4	38	42	49	51	58	1.5		DHS 2008-2009
Malaria treatment - febrile children receiving antimalarial medicines (%)	23	-	-	-	26	23	1.1	21	24	30	18	23	1.1		DHS 2008-2009
MATERNAL AND NEWBORN HEAD	LTH				_				,		r				
Antenatal care coverage at least one visit (%)	92	-	-	-	96	90	1.1	84	93	93	93	96	1.1		DHS 2008-2009
Antenatal care coverage (4 or more visits, %)	47	-	-	-	60	44	1.4	-	-	-	-	-	-		DHS 2008-2009
Skilled attendant at delivery (%)	44	-	-	-	75	37	2.0	20	31	42	53	81	4.0	.ad	DHS 2008-2009
Early initiation of breastfeeding (%)	58	57	59	1.0	54	59	0.9	58	59	56	60	57	1.0		DHS 2008-2009
WATER AND SANITATION 6															
Use of improved drinking water sources (%)	59	-	-	-	82	52	1.6	35	48	55	71	93	2.6	ad	2010 (WHO/UNICEF
Use of improved sanitation facilities (%)	32	-	-	-	32	32	1.0	10	23	37	64	88	8.5	.,,1	JMP 2012) 2010 (WHO/UNICEF JMP 2012)
EDUCATION															VIII 20121
Survival rate to last grade of primary school (survey data, %)	96	96	97	1.0	99	96	1.0	89	97	97	98	100	1.1		DHS 2008-2009
Primary school net attendance ratio (survey data, %)	74	72	75	1.0	81	72	1.1	58	75	75	79	78	1.3	ıIIII	DHS 2008-2009
CHILD PROTECTION															
Women aged 20-24 years who were married or in union by age 18 (%)	26	-	-	-	-	-	-	-	-	-	-	-	-		DHS 2008-2009
Birth registration (%)	60	61	59	1.0	76	57	1.3	48	54	59	66	80	1.7	uH	DHS 2008-2009
Female genital mutilation/cutting (%)	27	-	-	-	17	31	0.5	40	31	29	26	15	0.4		DHS 2008-2009

Note: The format for this Country Profile has been adapted from the Countdown to 2015 report. Coverage data have been largely derived from national household surveys such as the Multiple Indicator Cluster Surveys (MICS) and Demographic and Health Surveys (DHS). For the majority of coverage indicators, UNICEF global databases were used. Other organizations such as the World Health Organization, UNAIDS, United Nations Population Fund, London School of Hygiene and Tropical Medicine and Saving Newborn Lives also provided data. Details on indicators, data sources, and definitions of indicators, can be found at www.childinfo.org.

^{1. &}lt;u>Disparities</u> - Disparity information is only available for data directly derived from household surveys such as MICS and DHS. Therefore, disparity data are not available for the following indicators: vitamin A supplementation, immunization, and for HIV/AIDS. In addition, neither UNICEF Global Databases nor databases from partner organizations maintain disparity data for the following indicators: total fertility rate, unmet need, institutional deliveries, contraceptive prevalence, adolescent birth rate.

^{2.} Equity chart - Displays values for the five wealth quintiles to the left. The scale is 0 to 100% for all charts except U5MR, which shows a range of 0 to 300 deaths per 1,000 live births.

^{3.} U5MR - Wealth quintile data are derived directly from MICS, DHS or other surveys. The total is the inter-agency estimate published by the UN Inter-agency Group for Child Mortality Estimation (IGME).

^{4. &}lt;u>Anthropometric indicators - Reference Standards for Underweight, Stunting and Wasting.</u> New international Child Growth Standards for infants and young children were released by WHO in 2006, replacing the older NCHS/WHO reference population. In using the 2006 WHO reference population, estimates generally change in the following manner: stunting is greater throughout childhood; underweight rates are higher during the first half of infancy and lower thereafter; and, wasting rates are higher during infancy. Please note that there may be small discrepancies between the totals and the disparity data, as the totals have undergone additional analysis.

^{5.} Child Health - All indicators in this section refer to children under 5 years of age.

^{6.} Water and sanitation - Wealth quintile data are derived from MICS or DHS surveys. Urban, rural and total coverage estimates provided are for 2010 and are those published by the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation.