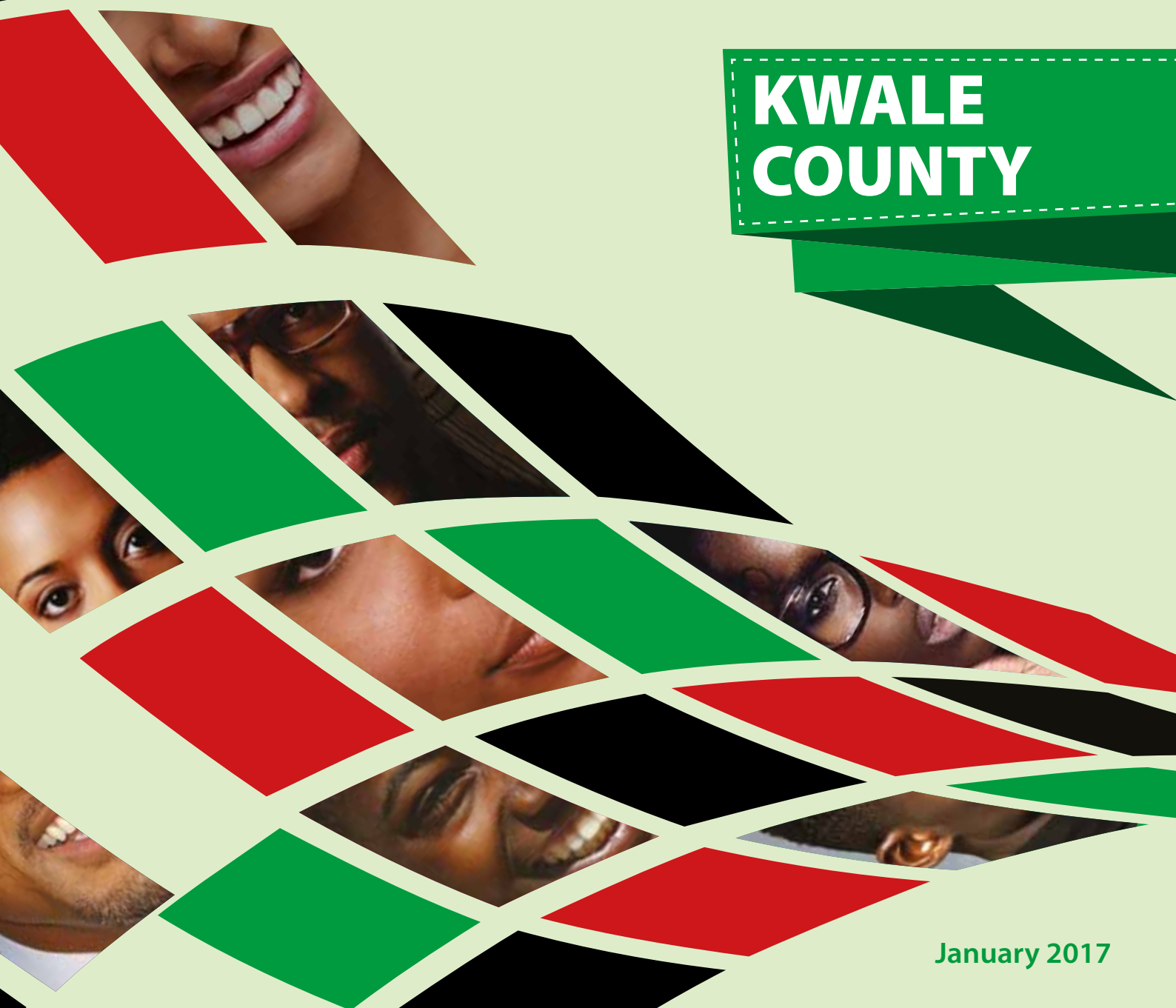




2015 KENYA NATIONAL **ADOLESCENT AND YOUTH** SURVEY (NAYS)

KWALE
COUNTY



January 2017



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Acronyms and Abbreviations

AFIDEP	African Institute for Development Policy	M&E	Monitoring and Evaluation
AIDS	Acquired Immuno-Deficiency Syndrome	NASSEPV	National Sample Survey and Evaluation Programme
AGPO	Access to Government Procurement Opportunities	NAYS	National Adolescents and Youth Survey
CBO	Community Based Organisation	NER	Net Enrolment Rate
CDF	Constituency Development Fund	NGO	Non-Governmental Organisation
CPC	County Population Coordinators	NYS	National Youth Service
CPR	Contraceptive Prevalence Rate	PADIS	Population, Administration, and Decision Information System International
DemDiv	Demographic Dividend	PWDs	Persons With Disabilities
DSA	Drug and Substance Abuse	SGBV	Sexual and Gender Based Violence
FGD	Focus Group Discussion	SRH	Sexual Reproductive Health
FGM	Female Genital Mutilation	STI	Sexually Transmitted Infections
FHOK	Family Health Option Kenya	TFR	Total Fertility Rates
FP	Family Planning	UNFPA	United Nations Population Fund
FPE	Free Primary Education	USAID	United States Agency for International Development
GER	Gross Enrolment Rate	WEF	Women Enterprise Fund
HDI	Human Development Index	YEDF	Youth Enterprise Development Fund
HIV	Human Immuno-Deficiency Virus	YFS	Youth Friendly Services
ICT	Information and Communication Technology		
IDI	In-Depth Interview		
KDHS	Kenya Demographic and Health Survey		
KII	Key Informant Interview		
KIPPRA	Kenya Institute for Public Policy Research & Analysis		
KKV	Kazi Kwa Vijana		
KNBS	Kenya National Bureau of Statistics		

Glossary of Terms

Demographic Dividend	The accelerated economic growth that is achieved through a reduction in the population growth rate coupled with strategic investments in the health, education, and economic opportunities for the population.
Demographic Window	Period when the proportion of a country's population aged below 15 years falls below 30 percent of the total population while at the same time the proportion of those aged 65 years and above is still below 15 percent of the total population.
Gross Enrolment Rate (GER)	This rate identifies the number of children newly admitted to the first year of school, regardless of age as a percentage of children who are entitled to admission.
Human Development Index	The Human Development Index (HDI) is a composite statistic of life expectancy, education, and income per capita indicators, which are used to rank countries into four tiers of human development. A country scores higher HDI when the life expectancy at birth is longer, the education period is longer, and the income per capita is higher.
Mwongozo	Code of governance for state corporations in Kenya.
Net Enrolment Rate (NER)	Age-specific corresponds to the legal admission age. Ratio of children of official school-age who are enrolled in school to the population of the corresponding school age.
Nyumba Kumi Initiative	Security model that encompasses groups of 10 houses with the aim of enhancing security.
Transition Rate	The proportion of children admitted, relative to the number of those who were, the year before, in the final school-year of the preceding level.

KWALE COUNTY



Foreword

Kenya has a large population of young people below the age of 35 years. Three in every four Kenyans are young people. This population segment presents both a challenge and opportunity to the country's development agenda. The main challenge brought about by this population is the ever growing need for social services such as health, education, and other social amenities. Each year, an increasing number of these young people graduate from educational institutions thereby necessitating an increase in the creation of employment and income opportunities to meet the demands of this group. On the other hand, if Kenya can meet the social and economic needs of this population, then the socio-economic development of the country will be greatly enhanced. In this case the large population of young people will become an asset to the country. It is in recognition of this that the Government of Kenya has put in place several initiatives aimed at improving the socio-economic opportunities and well-being of young people.

The demographic dividend concept advocates for strategic investments in health, education, economic and governance with a view of ensuring that the population of young people is healthy, well-educated, trained for the job market, and economically engaged in a well governed environment. Kenya subscribes to the ideals of this concept whose eventual outcome is accelerated socio-economic growth and improved quality of life which is in line with the aspirations of *Kenya Vision 2030*. In this regard, Kenya's challenge is to match the population growth rate with the available resources.

Results from the modelling of Kenya's demographic dividend potential, which was done in 2014, showed impressive results that the country can achieve on the social and economic fronts when strategic investments are made in these sectors. However, for Kenya to realize these benefits, each of the forty seven counties in the country will have to make strategic investments in health, education, economic, and governance so that the full potential of young people can be harnessed and socio-economic growth accelerated. The 2015 Kenya National Adolescents and Youth Survey (NAYS) was occasioned by the need to provide each county with information on their respective demographic dividend potential and the specific actions that they need to undertake to realize this potential. This report will therefore be very useful to counties when planning for their respective development activities. It is my hope that each county will make use of this report and contribute to making Kenya a better country where citizens enjoy a high quality of life in a safe environment.

Mr. Saitoti Torome, CBS
Principal Secretary
State Department of Planning

Acknowledgment

The Kenya National Adolescents and Youth Survey (NAYS) was conducted in 2015 with the goal of contributing to the country's efforts of harnessing the potential of the young people in accelerating national development. Results from this survey will inform counties on the actions that they need to undertake in order to achieve accelerated economic growth

The 2015 NAYS was implemented through a collaborative effort between NCPD and various partners and stakeholders. In this regard, NCPD would like to thank the United Nations Population Fund (UNFPA) and the Norwegian Government, through the African Institute for Development Policy (AFIDEP), for both their technical and financial support to the survey.

The implementation of the 2015 NAYS was guided by a Task Force made up of two committees, namely; Steering and Technical Committees. The Steering Committee provided advice on the conceptualisation and the implementation strategies and modalities while the Technical Committee was responsible for the development of the survey tools, recruitment and training of the research assistants, coordination, and supervision of data collection, data processing, analysis and report writing. NCPD is grateful to members of the two committees.

The NCPD's County Population Coordinators (CPCs) were responsible for introducing the research assistants to the various counties under their jurisdiction and ensuring their smooth movement within the counties. They were also responsible for conducting the Key Informant Interviews. Given the success of the fieldwork, NCPD would like to thank all the CPCs.

Finally, NCPD would like to take this opportunity to thank the Council of Governors and the individual Governors for facilitating the entry of the research teams into the counties, and the respondents in all the counties who participated in the focus group discussions, in-depth interviews, and the key informant interviews. These respondents include community members, pupils, students, health workers, and heads of learning institutions, programme managers, employers, and government officials. The information that was provided by these respondents facilitated the development of this report. It is therefore NCPD's hope that this report will be useful to all the counties as they contribute to the national efforts towards harnessing the demographic dividend.

Dr. Josephine Kibaru-Mbae, OGW
 Director General
 National Council for Population and Development

Executive Summary

This report presents the profile of Kwale County based on the findings of the 2015 National Adolescents and Youth Survey conducted by the national council for population development, NCPD in conjunction with Ministry of Education, Science and Technology, Ministry of Health, Youth department, KNBS and various development partners. The survey covered all the 47 counties with the multiple objectives of examining what potential exists for a demographic dividend in each of the 47 counties, identifying health, education, economic and governance issues that affect young people in each county, identifying what specific investment opportunities that could accelerate achievement of the demographic dividend and providing policy and programme recommendations based on the survey findings.

This report interrogates the demographic profile of the county and the prevailing socio-economic indicators of the county and further identifies the challenges and opportunities that exist for harnessing the benefits of a growing youth population. The report therefore presents a preview the demographic, health, education, economic and governance indicators which are the main sectors whose performance impact on building a county that would be responsive to the young people.

The total population of Kwale County in 2009 was 649,589 people and is projected to increase to 1,077,906 people by 2030 and to 1,688,834 people by 2050 if the current fertility and mortality levels persist. The County has a high proportion of the population (47 percent) below age 15 but this population is projected to decrease to 37 percent and to 26 percent in the year 2030 and 2050 respectively. As the proportion of population of the young people declines, it is projected that the working age population will increase from 49 percent in 2009 to 68 percent in 2050. These population changes will result in the dependency ratio decreasing from 102 to 46 over the same period. Consequently, the county's demographic window of opportunity is projected to open in the year 2044 and close in 2084.

Kwale County has a fertility rate of 4.7 children per woman. Forty-two percent of the married women in the county are using contraceptives. Fifty percent of all births in the county are delivered by a skilled health worker and 85 percent of the children 12-23 months are fully vaccinated. The HIV prevalence rate is 5.7 percent.

The main health challenges facing young people in the county are drugs and subsistence abuse, drug and substance abuse, sexually transmitted infections, teenage pregnancies and water borne diseases. These are attributed to by peer pressure, poverty, lack of parental guidance. The report recommends strengthening of young people's access to reproductive health information and services, increased public awareness on the issues affecting young people, enforcement of laws that prohibit access to drugs and alcohol to young people and provision of guidance and counseling services to the youth.

In regard to education, the primary school net enrolment rate is 76 percent. This means that about 24 percent of the primary school age children are out of school in the county. However, the secondary school net enrolment rate is much lower. It is 25.3 percent. It is estimated that 39,561 primary school age and 54,161 secondary school age children are out of school in the county. The main challenges affecting the education of young people in the county include poverty (lack of school fees), drug and substance abuse, teenage pregnancies, inadequate schools and parental negligence. The county government and other stakeholders should to enable all the school-age children in the county have access to education through addressing the issues highlighted in this report.

There are numerous insecurity issues in the county and the residents prefer solving them through the assistance of community elders. Corruption, especially bribery, is cited as main challenge in the justice system. Young people are rarely considered in the county project implementation. The Human Development Index for Kwale County is lower than the national average indicative of a lower quality of life. Young people in this county are involved in casual labour, *bodaboda* small scale businesses and work as beach boys. The main motivation is to get income and sustain them. Most young people find that there are many restrictions in accessing fund from available interventions and the funding is inadequate to finance their projects.



INTRODUCTION

1.1 Background

1.1.1 Youth in Kenya

The United Nations uses the terms 'youth' and 'young people' interchangeably to mean people aged 15-24 years with the understanding that member states and other entities may use different definitions. The Constitution of Kenya (2010) defines youth as those individuals who have attained the age of 18 years but have not attained the age of 35 years. Those aged 18-34 years constitute about 30 percent of Kenya's total population while those aged 0-34 years constitute 78 percent of the population. This youthful population is a demographic asset and investing in their education, health, skill development and employment prospects will accelerate a demographic dividend. To reap the benefits of this dividend, Kenya must make sound investment in health, education and economic development.

1.1.2 The Demographic Dividend

The demographic dividend refers to the accelerated economic development that a country can attain by slowing down the pace of population growth while at the same time making strategic investments in the health, education, economic, and governance sectors. The demographic dividend concept is being popularized in developing countries as a potential solution to their development challenges. In embracing this concept, Kenya modelled the demographic dividend in 2014 using the *DemDiv* Model that was developed by Futures Group. The modeling of Kenya's demographic dividend was supported by USAID through the Health Policy Project. Results from the model showed that Kenya could achieve the following results by 2050 through implementation of activities aimed at achieving the demographic dividend: Investments per capita will increase to about US\$ 2,000 from the current figure of about US\$ 200; Fertility levels will decline to an average of 2 children per woman from the current 4 children per woman thereby decreasing the dependency ratio: Even with an increase in the population size, the employment gap (i.e. people in the labour force who are not active) will be 8 million which is less than the current gap of 10 million. These results are consistent with the aspirations of *Kenya Vision 2030*.

1.1.3 Population Size, Growth and Composition

The population of Kenya was enumerated at 38.6 million during the 2009 Kenya Population and Housing Census. It was estimated to be increasing at a rate of 1 million people each year representing

a growth rate of about 2.9 percent annually. From the census results, the dependency ratio was 87 dependents for every 100 people in the working ages (15-64 years). The same census also indicated that Kenya's population-age structure is youthful because the population of children below the age of 15 years was 43 percent, way above the cut-off limit of 35 percent. This was corroborated by the fact that those aged below 35 years constitute 78 percent of the country's total population. This population-age structure does not lend itself to the country's efforts to attain a rapid economic growth because most of the resources are spent on meeting the ever increasing social needs (health, housing, education, water and sanitation) of the fast growing population.

Kenya's Population Policy for National Development recognizes that the rapid growth in the population size is a constraint to national development. To counter this, the policy proposes a reduction in the fertility levels from 5 children per woman in 2009 to 2 children per woman in 2050. According to the 2014 KDHS, the fertility level was 4 children per woman in 2014 which is a clear indication that the fertility levels are dropping. If this trend continues and Kenya achieves a fertility level of 2 children by 2050 then the population size will increase to 59 million in 2030 and 75 million in 2050 with the proportion of those aged below 15 years decreasing to 33 and 25 percent respectively. The dependency ratio for the country in 2030 and 2050 will be 57 and 45 dependents for every 100 people in the working ages (15-64 years) respectively.

1.2 Survey Rationale

In 2014, NCPD and various partners modeled Kenya's demographic dividend using the *DemDiv* model. The impressive results from the modeling exercise showed that Kenya could achieve accelerated socio-economic growth through targeted investments. However, it was recognized that for this to happen, each of the 47 counties would have to play a role. Unfortunately, information on the demographic dividend potential for each county and the specific activities that they each need to implement so as to benefit from this potential was largely lacking. Given the differences in the health, education, economic and governance status of the counties, it was necessary to conduct this survey to generate county specific information on the demographic dividend potential and activities that need to be implemented. With this information at hand, each county would know what they need to do to harness the potential of their youthful population.

1.3 Survey Goal and Objectives

Survey Goal

The goal of the 2015 National Adolescents and Youth Survey was to provide solid evidence on how the growing youth population can be harnessed to accelerate economic growth and achieve a demographic dividend.

Survey Objectives

The objectives of the 2015 NAYS were:

- a. To generate a profile of adolescents and young people in each county. This includes the population size, age distribution, and socio-demographic characteristics.
- b. Identify Health, Education, Economic and Governance issues that affect young people in each county.
- c. Identify investment opportunities in the key sectors in each county.
- d. Provide policy and programme recommendations based on the survey findings.

1.4 Survey Organisation

The implementation of the survey was facilitated by two committees; Steering and Technical committees whose members were drawn from different organisations representing the different sectors that have a key role in the country's efforts to harness the demographic dividend. Members of the Steering Committee were involved in providing policy guidance and field work monitoring while members of the Technical Committee were involved in giving technical input and supervision of field teams alongside the NCPD County Population Coordinators.

1.4.1 Pre-test

The survey pre-test was conducted in April 2015, where 26 Technical Committee members and a selection of research assistants participated. The purpose of the pre-test was to check on the flow and meaning of questions, language used in the tools, and the time it would take to administer each tool. During the pre-test, the programme for the fieldwork training was developed and reviewed to ensure that the training for the fieldwork would cover all the necessary aspects that are required to fully equip the research assistants in readiness for the data collection exercise.

1.4.2 Trainings

The Technical Committee members were trained for three days, in February 2015, on demographic dividend and its applicability in the Kenyan context so that they could be conversant with the concept before embarking on the development of the survey tools. This enabled the Technical Committee members to develop the data collection tools that responded to the objectives of the survey.

In April 2015, thirty-four (34) research assistants were competitively recruited for data collection in the 47 counties. They were trained from 29th April to 9th May 2015 in Nakuru. The trainees were taken through the survey tools, materials and modalities of recruiting the respondents for the different tools that were to be administered. They were also trained on how to conduct interviews. Different methodologies and approaches were used in the training to ensure that the research assistants were well equipped to collect quality data.

1.5 Survey Methodology and Implementation

The NAYS survey used two methodologies namely; quantitative and qualitative. The quantitative methodology involved the desk review of secondary data from the 2009 Kenya Population and Housing Census, the 2014 Kenya Demographic and Health Survey (KDHS), the 2014 Economic Survey and the 2014 Basic Education Statistical Booklet. These sources were used to generate information on population, health, education, and economic issues at both national and county levels. It presented a synopsis of the demographic and socioeconomic characteristics of the country and each of the counties. The quantitative methodology also involved the generation of population projection data for each of the counties using PADIS software. The qualitative methodology involved the collection of qualitative data through focus group discussions, in-depth interviews, and key informant interviews.

1.5.1 Survey Tools

In collecting the qualitative data, the following tools were used:

- a. Focus Group Discussions (FGD) guides for conducting focus group discussions.
- b. Key Informant Interview (KII) guides for conducting key informant interviews with policy/ decision makers at county level.
- c. In-Depth Interview (IDI) guides conducting in-depth interviews with service providers in health, education, and economic sectors.
- d. Check list for youth-serving organisations.

The FGD, KII, and IDI guides were used to solicit information on the key issues affecting the wellbeing and participation of young people in terms of health, education, economic opportunities and governance. In addition to this, the tools were used to collect information on how the identified issues could be addressed. The checklist for youth serving organisations was used to assess the state of health and education facilities and services for young people.

1.5.2 Sampling

The sample for the qualitative component of the survey was national in scope covering the 47 counties in Kenya. These counties were clustered into 16 survey regions based on social-demographic characteristics. Table 1.1 shows the clustering of all the counties from which the set of all the tools were administered.

Table 1.1 Cluster counties by study regions

	Region	Counties
1.	Nairobi	Nairobi
2.	North Eastern	Garrisa, Wajir, Mandera
3.	Upper Eastern	Isiolo, Marsabit
4.	Central Eastern	Meru, Embu, Tharaka Nithi
5.	Lower Eastern	Kitui, Makueni, Machakos
6.	North Rift (1)	Trans Nzoia, West Pokot, Turkana,
7.	North Rift (2)	UasinGishu, Elgeiyo Marakwet, Nandi
8.	Central Rift	Nakuru, Kericho, Bomet, Baringo
9.	South Rift	Kajiado, Narok, Samburu
10.	Western	Kakamega, Vihiga, Bungoma, Busia
11.	Nyanza South	Kisii, Nyamira, Migori (Kuria)
12.	Nyanza North	Kisumu, Siaya, Homa Bay, Migori (Luo)
13.	Central (1)	Kiambu, Murang'a, Kirinyaga,
14.	Central (2)	Nyeri, Nyandarua, Laikipia
15.	Coast (1)	Mombasa, Kwale, TaitaTaveta,
16.	Coast (2)	Tana River, Lamu, Kilifi

In mapping out areas where the data was collected from, the survey was guided by the National Sample Survey and Evaluation Programme (NASSEP V) which is developed and managed by the Kenya National Bureau of Statistics. Each tool was administered to targeted respondents who had been determined using criteria that had been set prior to the survey field work. The criteria used to recruit those who would participate in the focus group discussions were; age, sex, and schooling status. FGDs were conducted for the following age groups 10-14, 15-19, 20-24, 25-34 and 35-60 years. Given the survey objectives, the young people responded to issues on health, education, economic, and governance—that touched on their daily lives. The older age groups (35-60 years) gave their perceptions on health, education, economic, and governance as it relates to the young people. In order to triangulate the information collected, Key Informant Interviews (KIIs) and In-Depth Interviews (IDIs) were used to collect information from key informants and service providers respectively. The KIIs

were administered to policy makers' in-charge of the specific sectors of interest in the counties. The respondents to the IDIs were service providers in the health, education and economic sectors.

Table 1.2 and 1.3 show that the target for each county was 8 Key Informant Interviews, 8 In-Depth Interviews, and 9 Focus Group Discussions.

Table 1.2 Key informant interviews and in-depth interviews sample frame for each county

Sector	Key Informant Interviews (KIIs)	In-Depth Interviews (IDIs)
Health	County Executive Committee Member (CEC) – Health OR Chief Officer Health OR County Director of Health	1. Health Facility In-charge 2. Manager In-charge of Youth Serving Organisation in Health
Education	1. County Director of Education (CDE) 2. County Executive Committee Member (CEC) - Education	1. Primary School with Pre-primary – School heads (1 public School) 2. Secondary School – Principals (1 public school) 3. Tertiary Institutions – Dean of student (1) 4. TVET (1)
Economy	1. County Director of Youth Development 2. County Executive Committee Member (CEC) - Youth Affairs 3. CEC to be selected depending on the main economic activity of the county	1. Enterprise Development Fund Representative (UWEZO, YEDF, WEF etc) 2. A leading employer in the County
Governance	1. County Commissioner 2. County Executive Committee Member (CEC) – Public Administration	N/A

Table 1.3 Focus group discussions sample frame for each county

Group	Additional Criteria	No. of FGDs	Place
Young people, Age 10-14	1 for males and 1 for females	2	School
Young people, Age 15-19	1 for males and 1 for females	2	School
Young people, Age 15-19	1 mixed group out of school (male & female, married & unmarried)	1	Community
Young people Age 15-24	1 for marginalized populations	1	Community
Young people, Age 20-24	1 for married and unmarried youths	1	Community
Young people, Age 25-34	1 for married and unmarried youths	1	Community
Older people, Age 35-60	1 for older people (male and female)	1	Community

1.5.3 Data Collection

Data collection was done by 16 teams, each consisting of two research assistants. The fieldwork commenced on 11th May and ended on 31st July 2015. Each team was assigned two or three counties for data collection. In addition to this, each team had a vehicle and a driver to ensure smooth movement during the data collection exercise. Using the field work plan developed during the fieldwork training, the research assistants systematically collected data from their assigned regions. Throughout this process, they were guided by their respective supervisors. At the end of each day the team members got together to share their experiences and prepare the day's summaries. This sharing helped the teams to strategize the next day's work. Table 1.4 summarizes the response rate for the interviews conducted using the FGD, KII, and IDI guides.

Table 1.4 shows that IDIs had the highest response at 93 percent followed by FGDs at 92 percent. KIIs, which targeted the policy makers at county level, had the lowest response rate at 78 percent.

Table 1.4 Survey response rates

	Focus Group Discussions	Key Informant Interviews	In-Depth Interviews
Interviews Targeted	423	376	376
Interviews Conducted	389	294	348
Coverage (percent)	92%	78%	93%

1.5.4 Data Processing and Analysis

As part of the data collection exercise, the interviews were captured using both digital recorders and note books. The data was then transcribed in the original language of the interview and was translated into English language, in cases where the interview language was not English. The hard copies of the English scripts were then typed using Microsoft Word to convert them into soft copies. This was done by the research assistants. On receipt of the data at NCPD headquarters, the same was handed over to data clerks for checking, cleaning and processing.

The quantitative data was processed using SPSS and PADIS while the qualitative data was processed using NVIVO QRS (version 10) software. NVIVO software was used to access, organize, manage, shape, code, explore, extract and analyse the textual data. A team of 13 data clerks was trained on how to process the data using this software. To ensure consistency and quality, two supervisors reviewed and verified the coded data.

2

KWALE COUNTY SURVEY FINDINGS

2.1 Background

This section provides description of the County in terms of location, area, administrative units and natural conditions.

Kwale County is one of the six coastal counties with an area of 8,270.2 Km², of which 62 Km² is under water. The county is bordered by Taita Taveta County to the North West, Kilifi County to the North East, Taita Taveta and Kilifi to the North, Mombasa County and Indian Ocean to the East and United Republic of Tanzania to the South. The County has three administrative sub-counties: Matuga, Kinango and Msambweni that are further divided into nine divisions. There are 37 locations and 84 sub locations. There are four constituencies: Matuga, Kinango, Msambweni and Lungalunga with 20 wards.

The county is popular for its white sand beaches which cover approximately 250 km.

The county is divided into agro-ecological zones in terms of agricultural potential, medium potential land constitutes 15 percent while marginal lands constitute 18 per cent of the total land area. Range, arid and semi-arid land suitable only for livestock and limited cultivation of drought resistant crops make up 67 percent of the total land. Annual precipitation is unreliable and is less than 800mm on the average.

2.2 Demographic and Socio-Economic Situation

Demographic profiles including population size and distribution and socio-economic situation are highlighted in this section.

2.2.1 Population Size and Age Distribution

Table 2.1 Population size and age distribution

Indicator	2009	2030	2050
Population Size	649,589	1,077,906	1,458,755
Proportion of Population Below Age 15	47.3%	36.7%	26.4%
Proportion of Population Above Age 64	3.3%	3.0%	5.3%
Proportion of Population in the Working Ages (15-64)	49.4%	60.3%	68.3%
Dependency Ratio	102.4	65.7	46.3
Year Demographic Window of Opportunity Opens	2044		

The County population was estimated at 649,589 people according to 2009 census with the population below age 15 constituting 47 per cent of the total. This population of young people is a resource for economic growth and social progress if the government responds to their needs and aspirations and enables them to engage meaningfully in the economy. The working-age population (15-64 year old) constituted 49 per cent of the population. With a large working population and fewer dependents, the County has an opportunity for rapid economic growth. If the large population of young people is engaged in productive activities, level of per capita income will increase and the County can achieve a demographic bonus. The Demographic Window of Opportunity for the County will open in 2044 meaning that supportive policies aimed at building the human capital of young people need to be in place.

2.2.2 Socio-economic Characteristics

The section discusses socio-economic characteristics which include health, education and human development indicator.

Table 2.2 The socio-economic characteristics

Socio-economic characteristics	Indicators	
Health	Average Number of Children Per Woman	4.7
	Proportion of Married Women Using Contraception	41.5%
	Proportion of Births Attended by A Skilled Health Worker	50.1%
	HIV Prevalence	5.7%
	Children 12-23 months fully vaccinated	84.5%
Education	Primary School Net Enrolment Rate	76.1%
	Primary School Pupil-Teacher Ratio	36.4
	Number of Primary School-Age Children Out of School	39,561
	Secondary School Net Enrolment Rate	25.3%
	Secondary School Pupil-Teacher Ratio	21.9
	Number of Secondary School-Age Teenagers Out of School	54,161
Human Development Indicator	Human Development Index	0.4354491

Family planning and access to skilled delivery at birth are some of the key health interventions that contribute to reduction in maternal mortality. In Kwale County the proportion of married women using contraception stands at 42 percent compared to the national average of 58 percent. Only 50 percent of births are attended by a skilled health worker compared to 62 percent at the national level. Fertility remains high at about five children per women compared to the national average of 3.9 births per woman.

Education is critical for economic development and in enhancing people's achievements and capabilities. The net enrolment rate in primary education is about 76 percent while in secondary education stands at only 25 percent demonstrating poor translation from primary to secondary level as highlighted in table 2.2. There are very many school-age children both for primary (39,561) and secondary school (54,161) who are out of school.

The Human Development Index (HDI) measures a country's development. It is a composite index that measures broad level of economic well-being focusing on education, health and income. Ideally the index should be as close as possible to 1. The HDI for the County was 0.435 in 2013 compared to the national score of 0.520

2.3 Health and Young People

2.3.1 The Main Health Problems Affecting Young People

The interviews addressed various health problems affecting young people, causes and ways of addressing the problems.

Table 2.3 presents a summary of the findings.

Table 2.3 Main health issues affecting young people

Main Health problems	Causes	Consequences	Ways of addressing these problems
Drug and substance abuse STI and HIV/AIDS Teenage pregnancies Water borne diseases (bilharzia, cholera, typhoid) Poor hygiene	Parental negligence Poverty Lack of sexual and reproductive health information Unprotected sex Prostitution and men having sex with men (MSM) Culture Lack of employment opportunities	School drop out Early marriages Idleness Poverty Rise in crime level Low literacy levels	Sensitization and awareness creation Abstinence Life skills Guidance and counseling Establish recreational / sport center to keep the youth busy Drug rehabilitation and counseling centre Provide clean water by digging boreholes especially in schools

Young people indulge in risky social behaviour that predisposes them to ill health. Drug and substance abuse, STI and HIV/AIDS, and teenage pregnancies were identified as the key health problems affecting the youth in the County. This was mentioned among most of the age groups. There was however low mention of drug abuse as a health concern among the younger ages 10-14. According to the respondents, drug and substance abuse was common among the boys.

The most abused substances are khat (miraa), 'mogokaa', brown sugar, heroin, bhang, alcohol, tobacco. Some of the drugs for example 'mogokaa' are common because of the low price.

“Even at 50 bob you can get.”

[FGD. Male in School 15-19, Kwale County]

The existence of drug abuse problem was also highlighted by policy makers:

“The major health problem for the adolescents is drug abuse ;within the drug abuse we have the IDUs that’s the intravenous drug users, alcohol, mirraa ; we have quite a lot on substance abuse generally.”

[Key Informant, Kwale]

The older respondents registered their concern about abuse of multiple drugs:

“The other day, I heard a young people saying you have to add tobacco for it to work. Then they add alcohol which I think is the one that gives them sicknesses, and then they smoke bhang. So imagine that one head has been stashed tobacco, brown sugar, then bhang, drain it with alcohol and finish with miraa.”

[FGD. 35-60 Older Peoples, Kinango, Kwale]

Early age pregnancy and childbearing are mostly the consequences of ill-timed and risky sexual behaviour. The findings showed that teenage pregnancy is a common problem as discussed across the age groups.

“Teenage pregnancy is common because when you go to the clinics you see young girls at the age of 12 and 14 waiting to be attended because they are pregnant or they are carrying babies already. And you won’t miss like 2 girls every day.”

[FGD. 25-34 Mixed Young People]

The policy makers also mentioned early pregnancies as a challenge.

“...a concern to us is the issue of early pregnancy particularly early marriages which possess a threat to the young in terms of health.”

[Key Informant, Kwale]

There were concerns about HIV/AIDS and other Sexually Transmitted Infections (STIs) in the County.

“We also have the sexually transmitted infections which is so diverse, the worst they have is HIV, then Hepatis B, and Hepatis C and gonorrhoea which are also transmitted through sexual intercourse.”

[Key Informant, Kwale]

The common health problems were attributed to various reasons. Teenage pregnancies for example tend to be encouraged by the parents. The respondents indicated that it has become a business such that when girls get pregnant parents demand money from the responsible men. The problem of teenage pregnancy was therefore attributed to parental negligence:

“It has become a business; girls get pregnant then their parents ask for money from the responsible men.”

[FGD. 25-34 Mixed young people]

Traditions about early marriages also encourage the practice. Other reasons included inadequate reproductive health information among the young people in the County.

Parental negligence was also identified by the older respondents as responsible for young people engaging in drug abuse:

“Like there is boy in some school who carries some bhang in his books and I hear it is the parent who sells the bhang. I mean automatically the boy will also smoke it. Most of these issues are also as a result of the parents.”

[FGD. 35-60 Older people]

The older ages were also concerned that too many rights were contributing to drug abuse:

“The rights are too many, there is a children’s court, a children’s parliament, and there are even loans for students.....now it is the government that has given all these rights to the kid that is spoiling everything.”

[FGD. 35-60 Older people, Kinango, Kwale]

Poverty, unprotected sex, prostitution and men having sex with men (MSMs) were a concern related to the spread of HIV/AIDS.

“There are also issues of female sex workers and MSMs. These have also added onto the health challenges of this county. These vices are rampant because this is a cosmopolitan county and also because of the beach and tourism. The dangerous thing is that even young ladies and men are being recruited into sex working and MSMs which exposes them to various health risks.

[FGD. 25-34 Mixed young people, Kwale]

Policy makers highlighted culture as an important factor contributing to health problems.

“Some people delay in seeking medical help because they believe in their customs so that they have to use traditional medicine first of all before they come to the facility.”

[Key Informant, Kwale County]

Other health concerns mentioned especially by the younger age groups include bilharzia and cholera which were associated with lack of clean water especially in schools.

“Sometimes like for example here in this school we’ve got shortage of water so we have to wait for the rain to come... when it is sunny, we have to go far to get water and that is wastage of time.”

[FGD. 15-19 female in school, lunga lunga, Kwale]

2.3.2 Ways of Addressing These Problems

Starting projects for the youth was suggested as an important way of addressing the drug abuse problem which was associated with idleness. Other proposed solutions include guidance and counselling, establishment of recreational/sport center to keep the youth busy and drug rehabilitation. Digging boreholes to provide clean water especially in schools was mentioned as a way of addressing water borne diseases.

2.3.3 Access and Availability of Health Information and Services

The study collected information on access and availability of health information and services. Table 2.4 summarizes the responses in terms of sources, type and usefulness of information.

Table 2.4 Access and availability of health information and services

Sources of health information & services	Types of Health Information & Services	Usefulness of Information	Preferred Sources
Public Health	STI/HIV- Causes	Increased knowledge	Health Facilities
Talks- barazas	Sex Education	Disease Prevention	Media
Health Facilities	Health Education & Awareness	Behaviour change	Schools/learning institutions
Schools	Family planning		
Media (radios, television , internet)			

Young people mentioned health facilities as the main source of information. They however indicated that they did not like accessing information from these facilities due to lack of confidentiality and youth friendly services.

“Youths do not like going to these public hospitals to access such services. That is why you will get like there is a Reach Out office here where you will see youth converging at any given time because you will find young people running them because they are NGOs. But in public institutions, everyone will know that you go there.”

[Mixed young people, 25-34]

Most of the younger people 15-19 years preferred to get information from the hospitals. Age group 10-14 identified school as the main source of health information while banners, social media/ internet and community health workers were mentioned as sources of information by older people. Parents and churches were rarely mentioned as sources of information across the age groups.

The older people raised concern that information provided did not target the youth.

“You will never see government hospitals targeting the youths for information and for the NGOs that do it, it is very rare.”

[FDG. Mixed 25-34, Kwale]

The study found that information provided was mainly on condom use, family planning, HIV/AIDS and STIs, drug abuse as indicated by majority of the respondents. Information on breast and prostate cancer, and post rape care was rare and was only mentioned by ages 20-24.

2.3.4 Challenges in Accessing Health Information or Services

This section discusses the main sexual reproductive health/family planning information and services available and challenges in accessing these services and how to address the challenges.

Table 2.5 Challenges in accessing health information or services

Main Sexual Reproductive Health /Family Planning information & services available & accessible	Challenges in accessing Sexual Reproductive Health /Family Planning information & services	Addressing Challenges
Condoms Injectables Education about sexual and reproductive health Breast and prostate cancer screening Post rape care	Cost of health care Long distance to the health facility Lack of confidentiality by health providers Lack of cancer scanning and equipment machines Cost and difficulties in transport to the health facilities especially for the People with disability (PWDs) Attitude of service providers Lack of youth friendly services Stigma Inadequate family planning commodities	Sensitization and civic education Provide youth friendly services Revive youth groups to sensitize fellow young people Improve accessibility of health services Strict supervision of health providers Reshuffles medical staff to avoid overstaying in one health facility Supervision of health providers to instill discipline (especially with regard to laziness).

The study identified several challenges young people encounter while accessing sexual reproductive health and family planning (SRH/FP) information and services. Cost of health care was an important consideration for the young people. This was highlighted as a major challenge in accessing health care by majority of the respondents. This challenge could be attributed to high unemployment that compromises affordability.

Long distance to the health facility was also mentioned as a challenge that especially put lives of mothers in danger as stated by older people:

“The maternity wings are inadequate and not available in the villages, you get a mother is in labour pains at night and you have to carry them on a motorbike to the main hospital that has the facilities.”

[FGD. Mixed Group, 35-60, Kwale]

The study showed that young people face challenges in accessing health services due to fear and privacy concerns. The attitude of the service providers and lack of privacy and confidentiality discouraged young people from accessing services including seeking information.

“They don’t maintain confidentiality especially at the VCT section so most people do not visit the VCT”

[FGD. Mixed group 20-24, Kwale]

“The health workers are very harsh and ruthless they make people queue for long hours.”

[FGD. Mixed group 20-24, Kwale]

Although contraception is one of the best means of preventing unintended pregnancies and early child bearing, the study revealed existence of negative attitudes towards family planning especially by parents.

“Our parents have a negative attitude towards family planning because they never used it during their time so they also discourage their children from doing so. It’s only those who’ve interacted with other people who can use the services.”

[FGD. Mixed young people, 15-19]

According to policy makers, the key challenges that young people face when accessing health services include stigma, cost of the service, and distance to the health facility, health provider attitudes, and inadequate family planning commodities.

The study also established that generally the county lacks of youth friendly health services. These services were only available in a few private hospitals.

2.3.5 Organisations Addressing Health

The study established that most of the organisations providing health services are non-governmental organisations (NGOs.). These included Plan International, Marie Stopes which provides reproductive health services, Teens Watch that addresses issues of drug, and International Centre for Reproductive Health (ICRH) which addresses reproductive health issues including HIV screening. These organisations were popular with the young people due to the nature of services provided.

“I will say that they have really helped in improving the health status of the youth because first of all these centers are youth friendly. They are welcoming to the youths and give out their services in confidentiality and privacy. As a result the youths are free to discuss their issues without any fear. Like Reach Out they do have a resource center where the youths can go and chill, watch television, share ideas and experiences.”

[FGD. Mixed Young People 25-34]

2.3.6 Opportunities for Improvement

Key opportunities highlighted include continuous education and awareness creation in schools and among community members, making use of existing stakeholder forums to create awareness and targeting information to the right audience.

“I think the information is there but it is not reaching the right audience. For instance there is a lot of information on family planning out there but look at the people who get this information, very young minds in class 4, while the people intended to get it fail to access it. Radio Kaya for instance does talk a lot about family planning issues, but it does not put in mind who is listening. Sometimes you get school kids listening then after that they go and practice what they have heard. So the information is there but it is not reaching the right age group.”

[FGD. Mixed 25-34, Kwale County]

2.4 Education and Young People

Education is viewed as a key to future success as it prepares young people with skills to enter the labour market and realize productive lives. Education is also one of the key pillars for achieving the demographic dividend. The study identified problems that affect education of young people as discussed below:

2.4.1 Main Education problems affecting Young People

Table 2.6 Main education problems affecting Young People

Main Education Issues affecting Young People	Causes	Consequences	Ways of Addressing Education Issues
Teachers and student absenteeism Drug and substance abuse Poverty Early pregnancies Child labour Lack of facilities for children with special needs Parental negligence	Peer pressure Parental negligence Culture	School dropout Teenage pregnancies	Provision of bursaries

Teachers and student absenteeism, drug and substance abuse were identified as key concerns with regard to education of young people in the County. This was discussed mainly by the younger ages.

Other problems identified include poverty, early marriages and traditional practices.

“The Makonde tribe interferes with education of their children during initiation because they sometimes don’t attend school for three months.”

[FGD. Mixed 15-19, Kwale]

Parental negligence was also highlighted as contributing to school dropout and none progression to higher levels especially in environments where parents do not value education. Negligence could be attributed to parents being illiterate, poor or single.

“When parents have taken you to form 4 and you have completed they take it that is the end of their duties in education, so they stop. Now they expect you to go find a job and start repaying them for taking care of you and educating you. Apparently that is the Mijikenda culture in this County.”

[FGD. Mixed 20-24, Kwale]

“I would say there are some parents who are ignorant towards education issues. For instance if the parents did not go to school then they will most likely prevent their kids to go to school since they do not know the value of education.”

[FGD. Mixed older people 35-60]

The key informants raised concern over poor transition to secondary levels.

“In class 1, 2, 3 the girls are more than the boys but when it comes to upper primary, the number of the girls lowers, and then in secondary school the same case happens.”

[Key Informant, Kwale]

Peer pressure, lack of role models and lack of jobs were highlighted as factors that demoralize young people leading to school dropout and drug abuse. Early marriage was also mentioned among older respondents as a reason why girls drop out of school. The practice was common despite age restriction set by the law.

“In Kinango there are early marriages. You get students in class 4, 5 until 8 getting married off.”

[FGD. Mixed older people 35-60]

In addition, poor infrastructure and long distances to the schools were also cited as affecting quality of education.

“The other day I was sent a picture of a school whereby the staffroom had thatches as its roof and they were partly blown away by the wind. And then the tables were made of mere sticks. And that is the staffroom, so what about the classrooms? And you expect a student in that school to complete with others in well-furnished schools.”

[FGD. Mixed 20-24, Kwale]

Poverty, lack of school fees and teenage pregnancy were cited as a challenge by policy makers.

“Early pregnancies are here. They are very common here. And when you try to find out what is the cause, they are after money.... they are cheated by bodabodas just given even 10 shillings, tomorrow 20 shillings.”

[FGD. Mixed older people 35-60]

2.4.2 Availability and Accessibility of Education Services

With regard to availability, the study found that there was an increase in the number of primary schools although there were still areas like Kinango where schools are scattered and this inhibited easy access. The secondary schools were many but quality of education was a key concern due to poor staffing.

ECDEs were not enough and there was neither teacher training college nor institutions providing adult education. Special schools were inadequate as highlighted by respondents aged 25-34.

“There is an inadequacy of special schools in this county. I think we only have a school for the dumb but no school for the blind. Like me now I had to take my son to Thika School for the Blind because there was no any school in this county that could accommodate him. So imagine me travelling with my blind son to Thika for education. So if the government could establish more of these special schools then that would be better.”

[FGD. Mixed young people 25-34]

The respondents indicated there was lack of adult literacy classes to cater for the school drop outs.

“We do have very many youths who completed primary level but were unable to transit to secondary and also those who enrolled into secondary schools but failed to complete their studies. So with adult education at least these youths who have come of age can at least go back to school and study whatever they were unable to study before. Now what they are doing is that they have to look for private tutors who are very expensive compared to when they are registered under adult education.”

[FGD. Mixed young people 25-34]

Key Challenges

Poor staffing and inadequate infrastructure were identified as key challenges to education in the County. Libraries, laboratories, boarding facilities, classrooms were generally not enough and with introduction of free primary education parents were not willing to contribute money for construction.

“I almost lack six classes because the enrolment is big and since the Free Primary Education was introduced if you tell parents to organize a harambee to build a class they say education is free.”

[KII. Education Official Kwale]

Respondents mentioned that although polytechnics were many, they were not adequately equipped.

“In Kwale they are available but not with adequate facilities, for example, we have Mabesheni, Kamale, Bana na Kunaze. They have become many but with no facilities. You might find a student studying an electrical course but the institution does not even have electricity.”

[IDI. Education Official, Kwale]

The respondents also indicated that most education institutions do not have facilities for people with special needs or people living with disabilities.

Poor sanitation and hygiene in schools were cited as a problem by the younger ages. Key education officials also cited sanitation as a serious problem. Water shortage was also highlighted as a major concern.

“Latrines are very dirty; if you go to all of them they are full.”

[FGD. Female young people 15-19, Kwale]

“The pupil-toilet ratio in all the schools is not met because the ratio is 1 latrine for 25 girls or 30 boys. At these ratios none of our schools have met that particular ratio. Generally our water and sanitation facilities are inadequate.”

[IDI. Education official, Kwale]

2.4.3 Relevance of Courses and the Labour Market Requirement

There were mixed feelings with regard to relevance of courses being offered in the polytechnic and colleges. Education officials considered the courses relevant for the job market. For example the heads of institutions considered the courses offered marketable.

“I do not think there is any that has no market, they are all marketable. For example, people buy cars every day. It is the same for carpentry because as the population increases, people need more houses and doors. It’s the same for masonry, people are building houses.”

[IDI. Education Official, Kwale]

However some of the respondents did not consider the courses offered market to be driven.

“I do not think they are relevant because my son has a diploma in clearing and forwarding and till today I still give him food, he eats in my house. Actually when he gets a job I will be thankful.”

[FGD. Mixed older people 34-60]

2.4.4 Organisations Addressing the Educational Challenges Facing Young People

Various organisations were involved in education of young people as discussed below: Kwale Women Empowering Youth Association (KWEA) has mentorship programmes for students and they provide financial support for girl child education through fundraising. Child Welfare Society pays school fees for the needy both in secondary and primary schools. CRADLE provides school fees in primary and secondary and sponsor vocational training for the girl child. Base Titanium has constructed schools, laboratories and employed teachers in certain schools. Plan International provided support to girl child education and constructed ECD centers.

2.4.5 Opportunity for Young People to Gain Skills

Survey findings indicated that internships, apprenticeship, and mentorships opportunities were rare.

“It is not easy to get internship and they do not pay interns. Sometimes you have to use the influence of leaders.”

[FGD. Mixed Young People 20-24]

The respondents also expressed concern over inequalities between boys and girls when accessing education due to a lot of emphasis on empowerment of the girl child.

“The differences are there. Looking at the recent past and the present there has been too much emphasis on women empowerment. Everything has been about the girl child to an extent where the boy child is forgotten. Many services and chance go to the girl child now and are not equally distributed. Even if you look at scholarships and sponsorships, the girl has more chances of accessing them than the boy child. For a boy to access such services then he has to struggle a lot.”

[FGD. Mixed young people 25-34]

2.5 Economic Status and Young People

The section focuses on the main economic activities that young people are engaged in, interventions and programmes addressing youth unemployment, availability and access to ICT services, and savings and investments for old age.

2.5.1 Main Employment and Income Opportunities for Young People

Table 2.7 The main economic activities that young people (10-19) years are engaged in

Main economic activities	Challenge encountered	How to address challenges encountered
Motorcycle transport (Boda boda)	Poor pay and exploitation	Capacity building/education
Casual / manual labour (construction)	Harassment by employer	Financial support
Business/trade		Enforcement of child laws
Beach boys (“Masteda”)		
Employed in cyber cafes		

The study established that young people aged 10-19 engaged in various economic activities such as motorcycle transport (*boda boda*), casual or manual labour, trade and small businesses.

2.5.2 Why they Engage in these Activities

The young people engaged in these activities due to parental negligence and lack of basic needs due to poverty.

“Young people engage in these activities because of poverty. In their families they live in poor conditions so they have to engage in these activities to get school fee and money for other uses.”

[FGD. Young females 15-19]

Young people engaging in economic activities experienced challenges especially exploitation by the employers and poor pay.

Table 2.8 Interventions and programmes addressing youth unemployment

Main interventions and programmes	Challenges in accessing these interventions	Ways to address the challenges
Uwezo fund National Youth Service (NYS) Women Enterprise Fund (WEF)	Corruption	Sensitization on interventions

The main interventions and programmes include Uwezo funds, National Youth Service and Women Enterprise Funds.

2.5.3 Challenges in Accessing These Interventions

The respondents indicated that the young people are willing to venture into business but funds are not easily available. Funds, it was observed that young people were reluctant to get Uwezo loans because the amounts given are considered inadequate to start meaningful businesses.

“Youth are very ready to start their own business but the problem is where to get money for them to start businesses is where the problem is. They are told to form a group of five or six, and when they do and fill the forms they only get 5,000.... What sort of business will that actually do? If its five people and they have been given 20,000 they go and divide the money and everyone goes away. So now if there are loans like Uwezo Fund, let them be given big money like 500,000 to open businesses successfully.”

[Mixed older people, 35-60]

Other concerns included unfavorable terms especially for the individual loans. Most of the respondents indicated that although there must be rules and regulations governing issuing of youth funds to avoid defaulting, the terms should be favourable.

There were varied responses with regard to how youth funds are disbursed which is an indication of misinformation. This calls for awareness creation among the young people.

2.5.4 Availability and Access to ICT Services

Table 2.9 Availability and access to ICT services

Available ICT services	Challenges	Ways of addressing the challenges
Radio	Inadequate ICT centers	Establish ICT centers
Television	Cost	Provide computer training
Internet	Network problems	Provide electricity
Mobile phones	Lack of electricity	Provide affordable ICT services
Computers	Lack of teachers	Avail teachers

ICT services available in the county included radio, television, internet, mobile phones. The main type of information sought by young people included job adverts, online entertainment and courses, social networking, business information, academic research. ICT was available in cyber cafes and it was also taught in schools, colleges and polytechnic.

Challenges encountered in accessing ICT services included lack of power supply, inadequate ICT services for example cyber cafes, cost of services and poor network.

ICT facilities were generally not available in most primary and secondary schools and where available there were no computer literate teachers as indicated by both young and older respondents.

“The problem is that even in schools which have computers; the teachers themselves do not know how to operate them, so how will they teach?”

[FGD. Mixed older people 35-60]

“Computer lab is well equipped, computers are there but it is the teachers that we miss.”

[FGD. Male 15-19]

2.5.5 Organisations Addressing Youth Economic Empowerment

Some of the organisations addressing youth economic empowerment include Faulu Kenya and Kenya Women Finance Trust which provide loans while Base Titanium engages young people on temporary basis, Community Development Fund (CDF).

Sectors in the County with potential to create jobs for young people

Tourism, agriculture especially agribusiness, mining, fisheries were identified as some of the potential sectors to create jobs.

2.5.6 Savings and Investment for Old Age

The study sought to find out whether young people save or invest for old age. Results indicate that some young people think about saving for old age. Others cited that young people would like to save but were constrained by lack of income. There were those who did not see the need to save at all.

“The young people do not save considering that life expectancy has reduced they do not see the need to save.”

[Mixed young people 15-19]

“Long time ago the youths used not to save but now I am seeing them developing a culture of saving. For instance I do have a group which we save among ourselves. It is a sort of a table banking thing”.

[FGD. Mixed young people 25-34]

2.6 Governance and Young People

The section presents findings on governance issues. The discussion encompasses the justice system, security, cohesion, transparency and accountability, inclusiveness, effectiveness and efficiency in the utilisation of resources.

2.6.1 Rule of Law

Justice System

Table 2.10 Main cases, challenges, and ways of addressing

Main cases	Challenges	Ways of addressing
Corruption	Bribery	
Crime – livestock theft	Corruption	
Land disputes	Witchcraft	
Murder		
Rape		
Sexual assault is very common,		
Drugs		

Corruption, crime, land disputes were identified as the main cases in the County. High levels of crime were related to laxity by the police according to the younger ages;

“The police are just there just to show that there are some police in lunga lunga but they are not working. When they are hungry they go to the road and arrest people.”

[15-19 Female young people, Lunga lunga]

Preferred ways of solving disputes

The respondents indicated that different cases were solved differently but the council of elders was the most preferred way of solving disputes

“We still live like a community, we do not take our cases to courts because we believe if we go to the court then we will create enmity amongst ourselves. So they decide to sit down with the elders and solve their differences.”

[Mixed Older People 35-60]

The younger people had similar response.

“Most people do not prefer the courts; they go to the chiefs and village elders. The cases that are solved in the courts are land disputes.”

[Mixed young people 15-19]

Challenges when solving the disputes

Bribery, corruption were the key challenges when solving disputes. Bribery was common especially with regard to sexual assault cases and teenage pregnancies:

“They work with the health workers and the probation department. They bribe them and then the case is just solved among the families so the child does not get justice and they do not even go through counselling.”

[Mixed young people 20-24]

“You find that in cases of teenage pregnancy the man responsible gives some money to the parents of the girl. Then the parents decide to withdraw the case not knowing that they are denying the girl justice. They opt to have the girl abort in most cases and the girl drops out of school.”

[Mixed young people 20-24]

Security

Apart from petty crimes such as theft, witchcraft related crimes and man versus wildlife conflict, respondents indicated that the security situation is generally okay and can be summarized by the excerpt below:

Kwale County is a very peaceful county. They only try to bring conflicts during elections; they are politically instigated.

[Mixed young people 20-24]

Role of young people in maintaining security

Young peoples' main role in maintaining security was by reporting suspicious characters and participating in community policing.

“Maybe you have seen or witnessed something suspicious; you go report so as the police make a follow up. Security begins straight away from the community, with you yourself.”

[15-19 Female young people Lunga lungu]

Young people face challenges in ensuring that there is security for fear of victimization by the police and as such shy away from reporting cases.

“The youths do fear reporting cases to the police because it is like there is some tension between the police and the youth. If a youth goes to report a case, he will not come back. It is better an elder like me if I go they will listen to me, but the youth he will be accused to be one of the criminals.”

[Mixed older people, 35-60]

Cohesion

Although most respondents indicated that there was generally no tension or discrimination between young people based on either tribe religion or educational level, the younger respondents (15-19) cited tribalism as affecting cohesion in the County.

People are secluding themselves. The digos are with their own and the Kambas with their own; in fact it is a huge issue. They are using the excuse that you are a Kamba so you do not belong”. 15-19 Female Young People, Kwale.

2.6.2 Transparency and Accountability

Mechanisms to inform young people on planned and ongoing activities were available. These included notice boards where information is posted, youth offices, radio and the newspaper; ward offices and the chief barazas, suggestion boxes, County website and face book.

With regard to mechanisms in place to ensure accountability and transparency, younger ages were generally not aware of the mechanisms in place. The older respondents (35-60) mentioned sacking and legal process as mechanism that has been used to ensure accountability. Additionally policy makers cited supervision, progress reports and public participation as ways of monitoring project implementation and ensuring transparency.

“There is no development activity which happens before seeking the consent of the people, and even after the consent.., the people are actually involved in the development of that project, through development committees that they choose themselves. And they are also at liberty to fault any project. We also have reports from departments, highlighting the areas of achievement, failures and mitigating factors.”

[Public administration official, Kwale]

2.6.3 Consensus, Equity, Inclusiveness, Participation and Responsiveness

Youth Involvement in Budget Process, Project Identification, Design and Implementation

The young people at times provide their views during project implementation but in other instances projects are started without their involvement; - a concern raised among the younger ages. In certain cases they are involved during project implementation for example as casual labourers during construction.

“The only bad thing is that the projects are launched without us being told, we just see them happening.”

[Mixed young people, 15-19]

In other instances young people’s views are not considered at all.

“But you know in public participation you either add or subtract. But imagine even after giving our views the MCA comes and tells us that he was not able to incorporate our ideas because the other leaders were too strong for him. This means these things are planned way ahead and they only come to us as a way of formality.”

[Mixed young people 25-34, Kwale]

At time only a few selected young people participate in projects.

“Participation here also happens in two ways. If it something that has no money then the government will call everyone, tell the leaders to mobilize the youths they come and participate in this and this. But if it is a project that has money, then mobilization will secretly be done through mobile phones and sms. They will call those they know only and tell them to come with 2 more people at such and such place at this time. So this public participation is very low and almost nonexistent. If it were there then we as a community would have progressed.”

[Mixed young people 25-34, Kwale]

Policy makers however indicated that young people are involved as members of development committees for example at village and ward levels.

“Young people are part of members of the development committee at the village level and at the ward level.”

[Government official, Kwale]

Why young people are not involved

Various reasons were cited as to why young people are not involved in the project process. With regard to participation during implementation, respondents indicated that some young people were not willing to do manual work, others refused casual jobs because the money was little, while other were generally lazy and preferred touting jobs.

“They are saying money is little so they prefer standing at the stage touting and be given 10 bob per matatu instead of cutting cane at 300 shillings per day.”

[Mixed older people, 35-60]

Others are not involved due to lack of relevant qualifications.

“The greatest problem is that young people do not have the qualifications. Most of them did not proceed with their school either because of poverty. So you find that they end up missing opportunities.”

[KII. Policy maker, Kwale]

Roles young people like to play in projects and programmes in project committees and in the implementation

The young people indicated that they would like to be involved in every stage of the projects but raised concern their views were not taken into consideration during the planning phase.

“Like now the students who are in school have very good ideas. It would be nice if the governor would listen to their ideas then pick the best ones to develop the county. . . .the youth out there are innovative and if they get a chance they can come up with good things for the county.”

[Young people 15-19 Kwale]

Some policy makers were of a different opinion and pointed out that young people in most cases were selective and unwilling to be involved in hard work.

The problem is that the youths in this county and in many other counties are very selective. For example there is cane cutting here in Ramis...they say that is hard work. Being a watchman 24 hours, they do not want they say “hiyo ni kazi ngumu”

[Policy Maker, Kwale]

How projects and programmes address the young people's needs

Different views were expressed with some respondents stating that projects addressed the needs of the community as a whole including young people for example water projects. Others were of a different opinion citing lack of projects that target the young people in the County.

Some respondents cited programmes that support young people's education.

“For those going to national schools we pay their fees 100percent for the entire period of study for the four years. And for the others who go to other schools, we also portion some bursary for them.”

[KII. Government Official, Kwale]

Education was mentioned as the key to improve young people's involvement in project implementation.

2.6.4 Effectiveness and Efficiency

The section presents findings on how the available resources are allocated to target the young people, the mechanisms in place to ensure resources are used to achieve the expected outcomes and the interventions to improve efficacy and effectiveness in utilization of resources to meet the needs of the young people.

Policy makers indicated that the department of youth ensured that resources are targeted to programmes dealing with the young people.

Mechanisms in place to ensure resources are used to achieve the expected outcomes include monitoring and evaluation, public meetings as cited by policy makers.

To improve efficiency some respondents stated that procedures must be followed and existing laws, must be implemented. Supervision was also mentioned as necessary to ensure projects are actualized.

Planning for old age

Responses indicate that some young people expect to work even in old age and do not think about saving for old age. Some save money in the bank while others are not able to save due to poverty and lack of job opportunities.

2.6.5 Political Leadership

There were varied views with regard to the role political leaders' play in management of youth affairs. Some respondents indicated that the leaders provided jobs for the young people, constructed schools, and purchased school buses while some expressed disappointment with the leaders.

The political leaders have generally discriminated upon us. They only think of us when they want people to go round and campaign for them. But you will never see a situation whereby the leaders come down here and identify a youth who has the potential to lead then they support him to win a political seat.

[Mixed young people, 25-34]

2.7 Perspectives on Growing Population

The respondents cited increased unemployment, poor quality of education, need for more schools, and health services as some of the consequences of growing number of young people.

“Like recently during the police recruitment, they only recruited 2 girls and 2 boys yet close to 50 youth had gone to try their luck.”

[FGD. Mixed young people, 10-14]

2.8 Conclusion and Recommendations

The population of young people in the County is high. Young people in the County face several challenges including child labour, teenage pregnancies, early marriages, drug and substance abuse which interfere with their health and education. Child labour exposes the young people to exploitation and mistreatment while early and child marriages, teenage pregnancies expose them to ill health and deny them opportunity to continue with education. Health workers' negative attitudes discourage young people from seeking health information and services.

Information about interventions and programmes addressing youth unemployment is generally lacking among the young people and this hinder access to funds. This demands awareness creation.

ICT services are not adequate both for the general public and in schools. Computer teachers are also lacking.

Healthy, skilled population is necessary for economic development. The County's demographic wind of opportunity is expected to in 2044. For this to happen, appropriate investments must be made to enhance young people's human capital and increase employment opportunities. They should also improve access to credit and provide sound health care.

Recommendations

Health

1. The study showed that there is a problem of early sexual activity and childbearing and therefore suggest the sexuality education programmes to delay sexual relationships, increase safe sex, discourage early marriages and postpone childbearing are needed.
2. Young people lack access to youth friendly sexual and reproductive health information and services. More efforts should made by the Ministry of Health to improve access to reproductive health services.
3. The barriers to young people seeking sexual and reproductive health information need to be addressed and this calls for a collaborative effort of the health sector, NGOs, and the parents.
4. Drug and substance abuse is a main concern in the County. This should be addressed through collaborative effort of all stakeholders.

Education

1. A good education gives young people the skills and knowledge that will enable them to transit from school into the labour force. Poor quality education, poor staffing, poor infrastructure are key challenges facing young people in the County denying them access to high-quality education. These need to be addressed by the Ministry of Education.
2. Special schools are scarce in the County. The County Government and the Ministry of education need to provide these facilities.
3. Although bursaries are available in the County both from the national and county government, they are not streamlined and are provided in a haphazard manner. This should be addressed.
4. Special support should be extended to young people through apprenticeships, vocational training, and on-the-job learning to improve skills and creativity.

Economic

1. Young people face challenges of rising unemployment and lack of economic opportunities. The County government must identify sectors with potentials for job creation and develop the skills of the youth around such sectors. Some of the key sectors identified by the study as having great potential include agriculture, tourism, fishing, and mining.
2. The Vision 2030 has prioritized information technology (IT) as a strategy for reducing youth unemployment and enhancing economic growth. The ICT sector is currently underdeveloped and the County should improve access in schools and for the general public and address poor power supply especially in the rural areas.
3. Child labour exists in the County and this necessitates application of existing laws on child labour to ensure children complete school and proceed to acquire skills that are useful in the labour market.
4. Supportive government policies are necessary to help young entrepreneurs. This include easy access to credit.
5. Efficient road network is essential for the development of key sectors for example tourism. Efforts towards improvement of basic infrastructure including all -weather – roads are vital for the sector to flourish.

Governance

1. Young people should be engaged in decision-making and service delivery.
2. Issues of corruption need to be addressed by ensuring efficient measurements of performance are in place.

References

Government of Kenya, 2010. *Constitution of Kenya (2010)*, Nairobi

Kenya Bureau of Statistics, 2010. *2009 Kenya Population and Housing Census*, Nairobi

Kenya National Bureau of Statistics, ICF Macro, 2014, *Kenya Demographic and Health Survey, 2014*

Ministry of Devolution and Planning, 2015. *2015 Kenya Economic Survey*, Nairobi

Ministry of Devolution and Planning, UNDP, 2013. *2013 Kenya Human Development Index Report*, Nairobi

Ministry of Education Science and Technology, *2014 Basic Education Statistical Booklet*, Nairobi

Ministry of Health, 2014. *Kenya HIV County Profiles*, Nairobi

Ministry of Planning and National Development, *Kenya Vision 2030*, Nairobi

National AIDS and STI Control Programme, 2012. *Kenya AIDS Indicator Survey (KAIS)*, Nairobi

National Council for Population and Development (NCPD) Health Policy Project (HPP), 2014. *Demographic Dividend Opportunities for Kenya*, Nairobi

National Council for Population and Development (NCPD), 2014. *PADIS Population Projections for Kenya*, Nairobi

National Council for Population and Development, 2012. *Sessional Paper No. 3 of 2012 on Population Policy for National Development*, Nairobi

Annex 1: County Demographic Windows

The United Nations defines the demographic window as the period when the proportion of those aged below 15 years permanently falls below 30 percent of the total population while the proportion of those above 64 years is still below 15 percent of the total population. This period is estimated to last about 40 years and it presents an opportunity for a country to achieve a much faster economic growth driven by the large population of people in the working ages. Table A1.1 below shows that Kenya's demographic window will open in 2038. The proportion of those in the working ages will be 66 percent of the total population and the dependency ratio will be 52. An analysis of the beginning of the demographic window for each of the 47 counties in Kenya shows that the window will open at different times for each county.

Table A1.1 Demographic dividend window opening year

2010s	2020s	2030s	2040s	2050+
Kirinyaga	Kiambu	Makueni	Lamu	Mandera
Nyeri	Embu	Machakos	Nandi	Marsabit
Murang'a	Taita Taveta	Nakuru	Elgeyo Marakwet	Migori
	Meru	Nyandarua	Kajiado	Tana River
	Nairobi	Tharaka Nithi	Kitui	Garissa
	Mombasa	Uasin Gishu	Bomet	Narok
		Laikipia	Siaya	Samburu
		Kisumu	Kakamega	Turkana
		Nyamira	Vihiga	West pokot
		Kericho	Baringo	Wajir
		Kisii	Busia	
			Isiolo	
			Kwale	
			Bungoma	
			Homa Bay	
			Kilifi	
			Trans Nzoia	

Annex 2: Survey Personnel

Coast – 1 Region Survey Personnel

Table A2.1 Coast – 1 Region

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NCPD is a semi-autonomous government agency that formulates and promotes population policy and coordinates related activities for sustainable development in Kenya.

KWALE COUNTY