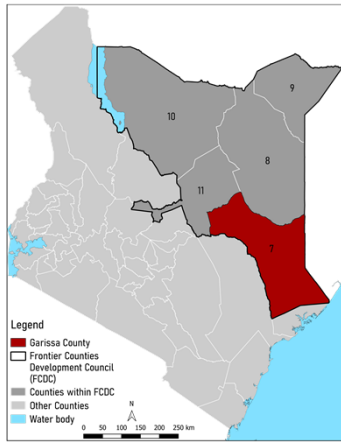


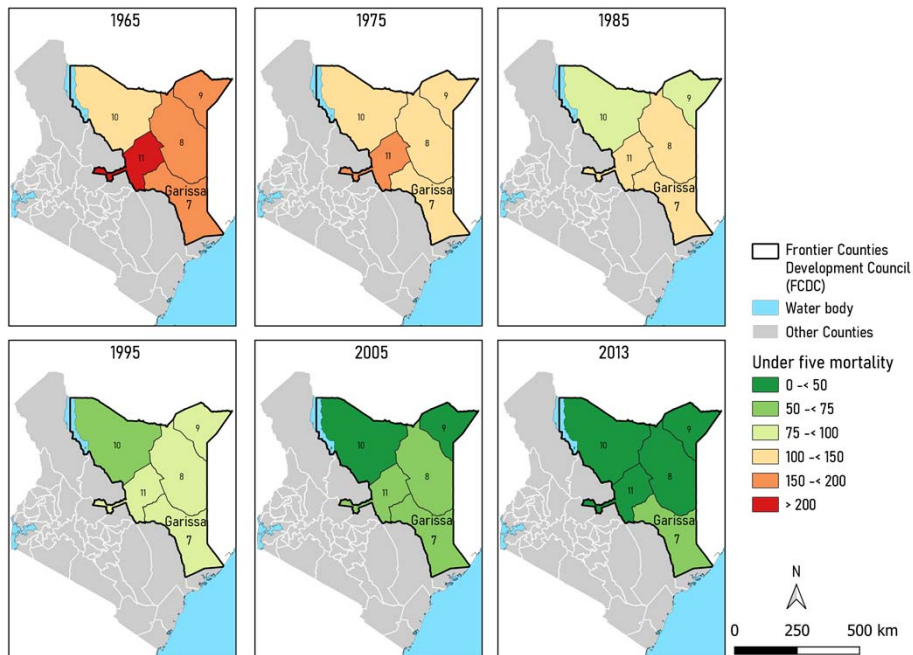
1. General Profile



Year	2009	2019
Total population*	623,060	841,353
Female of childbearing age (15-49)**	120,554	272,625
Population under five years**	97,676	192,600
Urban population*	-	178,508
Population with primary school education*	-	80,657
Average rainfall (mm)***	410	576

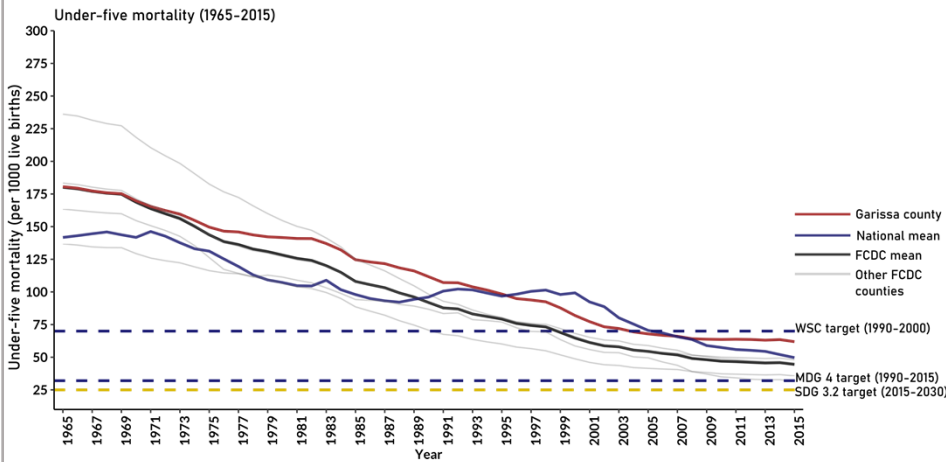
2. Under-five mortality (U5M), 1965-2015

2.1 U5M (per 1000 live births)



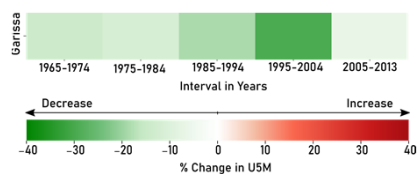
Mean U5M per 1000 live births in Garissa and FCDC every 10 years between 1965 and 2013.

2.2 Trends in U5M and progress towards achieving global targets



U5M trends in Garissa, relative to the national mean, FCDC mean and progress in meeting global U5M reduction targets set during World Summit for Children (WSC), the Millennium Development Goal (MDG) 4 and the Sustainable Development Goal (SDG) 3.2.

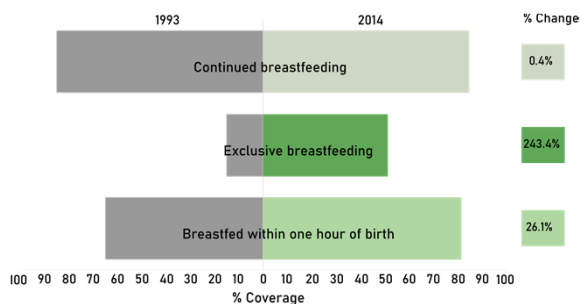
Percentage change in the mean U5M



3. Determinants of Child Survival, 1993-2014

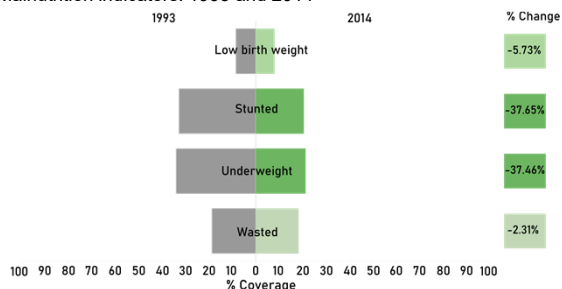
3.1 Child Factors

a). Breast feeding indicators: 1993 and 2014



Coverage of breast feeding indicators, and the percentage change between 1993 and 2014. Green indicates an improvement. The darker the green the greater the improvement.

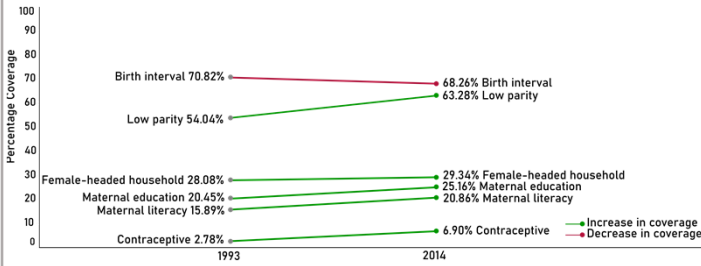
b). Malnutrition indicators: 1993 and 2014



Coverage of malnutrition indicators, and the percentage change between 1993 and 2014. Red indicates deterioration in the indicator and green an improvement.

3.2 Maternal factors

Comparing maternal factors in 1993 and 2014.

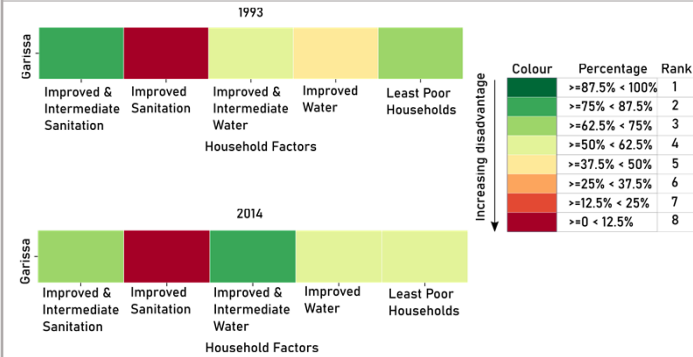


Note: Birth interval - the proportion of children with a preceding or succeeding birth interval > 24 months.

Low parity - the proportion of women aged <30 years with less than 3 or aged >29 years with less than 5 children

Maternal education - The proportion of mothers (15-49 years) who had greater than primary education at the time of the survey.

3.4 Household factors



Note: Improved sanitation - proportion of households who have access to flush toilet facilities.

Improved and intermediate sanitation have access to any form of a toilet facility.

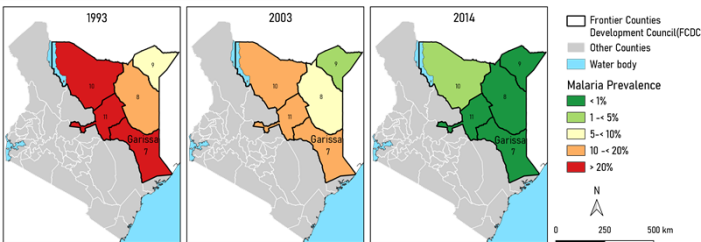
Improved water is the proportion of households who have access to piped water for drinking.

Improved and intermediate have access to either piped or boreholes/wells water for drinking.

Least poor households - proportion of households considered not poor comprising of the 1st, 2nd and 3rd quintiles of the wealth index.

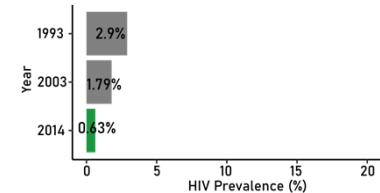
3.6 Infections

3.6.1 Malaria Prevalence



Malaria prevalence in Garissa and other FDC counties.

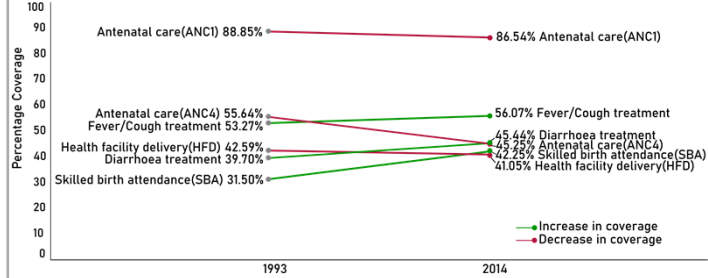
3.6.2 HIV Prevalence



North Eastern province HIV Prevalence (NACC Kenya) in 1993, 2003 and 2014.

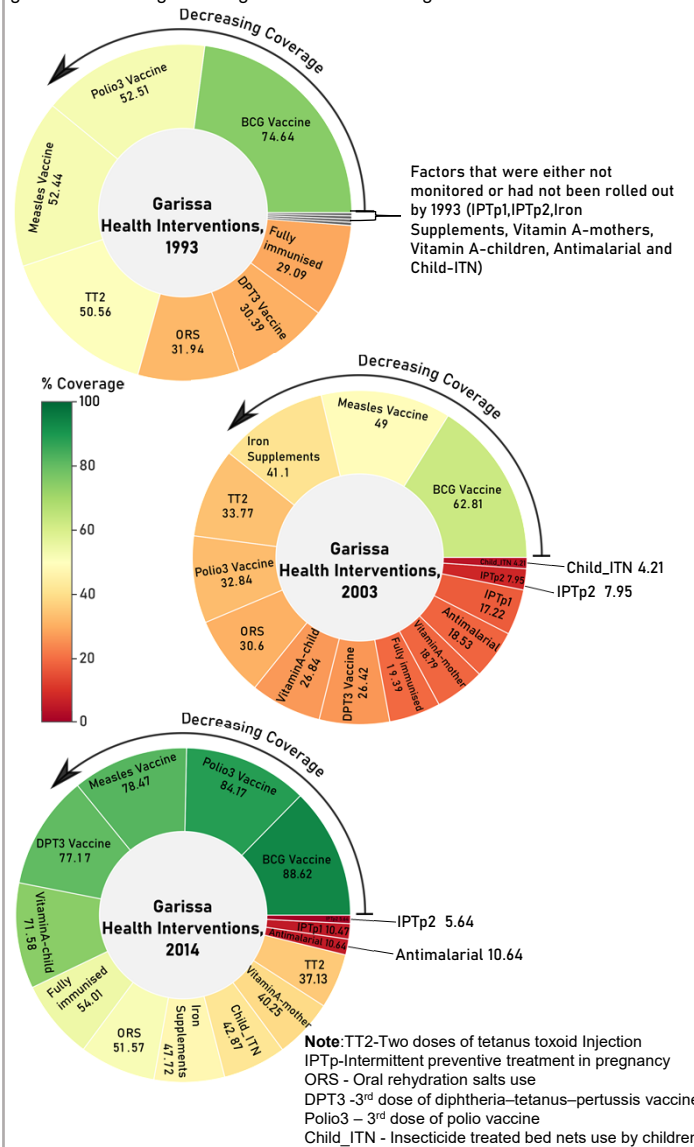
3.3 Health Care Utilization

Comparing health care utilization coverage in 1993 and 2014.



3.5 Health Interventions

Coverage of child and maternal health interventions in 1993, 2003 and 2014. Dark green indicates high coverage and red low coverage.



Factors that were either not monitored or had not been rolled out by 1993 (IPTp1, IPTp2, Iron Supplements, Vitamin A-mothers, Vitamin A-children, Antimalarial and Child-ITN)

Key Messages

- The U5M rate in Garissa has been declining but at a relatively slower pace than other FDC counties. Progress was more pronounced between 1995 and 2004 at a rate of 29%. It was also the only period when the rate was lower than the national mean. However, after 2007 Garissa was the only county in the region with a U5M rate higher than the national mean. By 2014, the rate was at 63.49 per 1000 live births, the highest in the region.
- In the early 90s, there was an increase in HIV prevalence; however, since 1997, HIV prevalence has declined steadily. Malaria transmission rates have also reduced from an average of 20% in the early 1990s to below 1% since 2009. This corresponded with the improvements in ITN coverage.
- Even though maternal literacy and education levels were the second-highest in the region, at the national level Garissa was among the bottom ten counties. This was also the case for contraceptive usage and prevalence for longer birth intervals and low parity.
- Health facility deliveries and antenatal coverage reduced slightly. However, the proportion of deliveries attended to by skilled birth attendants improved noticeably and was the region's highest.
- Breastfeeding practices and nutritional status have improved. In fact, Garissa had the most significant improvement in reducing prevalence for stunting and wasting children in the region.
- Vaccination coverage was second-lowest in the region and country; however, it had improved by 85% between 1993 and 2014, a tremendous improvement relative to other FDC counties.
- At 81%, Garissa had the highest access to clean water in the region, with 60% of households having access to piped water by 2014. On the contrary, the proportion of households with access to sanitation and those classified as poor dropped.