Child Survival and its Determinants

1. General Profile

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

2.1 U5M (per 1000 live births)

2.2 Trends in U5M and progress towards achieving global targets


3.1 Child Factors

3.2 Malnutrition 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.

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


- Maternal literacy: 82.0% in 1993 and 80.0% in 2014.
- Low parity: 63.2% in 1993 and 60.9% in 2014.
- Maternal education: 53.2% in 1993 and 54.7% in 2014.
- Contraceptive use: 23.3% in 1993 and 36.7% in 2014.
- Female-headed households: 22.8% in 1993 and 25.1% in 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.

3.3 Health Care Utilization


- Antenatal care (ANC) 93.8% in 1993 and 97.9% in 2014.
- Diarrhea treatment 90.2% in 1993 and 94.0% in 2014.
- Child-ITN use 59.3% in 1993 and 62.9% in 2014.

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)

Antimalarial: 13.74
IPTp2: 10.34

Note: TT2-Two doses of tetanus toxoid Injection
IPTp-Intermittent preventive treatment in pregnancy
ORS - Oral rehydration salts use
DPT3 - 3rd dose of diphtheria–tetanus–pertussis vaccine
Polio3 – 3rd dose of polio vaccine
Child-ITN - Insecticide treated bed nets use by children

3.4 Household factors

- Improved & Intermediate Sanitation: 1993 19%, 2014 21%
- Improved Water: 1993 19%, 2014 20%
- Least Poor Households: 1993 19%, 2014 20%

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.

3.5 Health Interventions


- Dark green indicates high coverage and red low coverage.
- Vaccination coverage improved from 59% in 2003 to 79% in 2014. However, much higher coverage (above 80%) had been achieved in the early 90s.
- Access to clean water and sanitation remained high and could be associated with the decreased proportion of children seeking diarrhoea treatment. In addition, Mombasa had over 90% of households classified as least poor, the region’s highest.

3.6 Infections

3.6.1 Malaria Prevalence

Malaria prevalence in Mombasa and other JKP counties.

- Between 1995 and 2004, Mombasa reduced the U5M rate by 33.4%. However, after 2005 the U5M rate increased by 12.11% and was higher than the national mean by about 8% in 2014. Regardless, the rate was second-lowest (56.6 per 1000 live births) in JKP after Taita Taveta.
- HIV prevalence decreased steadily over time, but it was not until 2003 that Malaria prevalence began decreasing. From 2006, the transmission rates remained below 5%, corresponding to the improvements in most malaria interventions.
- The proportion of literate and educated mothers alongside contraceptive use was the second-highest in the region, which could have influenced the higher prevalence for longer birth intervals and low parity relative to other JKP counties.
- Breastfeeding practices and nutritional status improved.
- Overall, Mombasa seemed to be doing well in terms of maternal health care. In fact, by 2014, the proportion of births attended to by skilled birth attendants, health facility deliveries, and antenatal care (ANC) was the region’s highest.
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Key Messages

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