2. General Profile

2.1 U5M (per 1000 live births)

2.2 Trends in U5M and progress towards achieving global targets


3.1 Child Factors

a) Breast feeding indicators: 1993 and 2014

b) 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.
### 3.2 Maternal factors


- Maternal literacy 88.33% - 92.05%
- Birth interval 76.95% - 81.28%
- Low parity 44.46% - 72.48%
- Maternal education 51.59% - 37.72%
- Female-headed household 42.19% - 35.09%
- Contraceptive 21.13% - 20.6%

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) 96.31% - 79.64%
- Skilled birth attendance (SBA) 68.49% - 52.87%
- Health facility delivery (HFD) 59.36% - 28.73%

### 3.4 Household factors

#### Infections

#### 3.6.1 Malaria Prevalence

Malaria prevalence in Taita Taveta and other JKP counties.

#### 3.6.2 HIV Prevalence


#### Key Messages

- Unlike other JKP counties, Taita Taveta had a slight increase in USM between 1965 and 1975, after which the USM declined with the greatest reduction rate of 22% observed between 1995-2005. By 2014, while most counties had USM rates more than 30% above the national mean, the rate in Taita Taveta was only 7.8% higher. As a result, it had the lowest USM in JKP at 56.08 per 1000 live births.
- HIV prevalence decreased to 4.93% by 2014. Malaria prevalence was at 5.03%. However, after 2003 malaria transmission rates significantly dropped and remained below 5% between 2007 and 2013.
- Taita Taveta had the highest proportion of literate and educated mothers alongside contraceptive usage in JKP, which corresponded to the high prevalence for longer birth intervals and low parity observed in 2014.
- There were substantial improvements in the breastfeeding practices and nutritional status.
- Except for the slight decrease in the pregnant women receiving at least four antenatal care, the rate of health care utilization improved.
- Taita Taveta had the highest vaccination coverage across most years, remaining above 80% even after the drop that occurred between 1993 and 2003.
- By 2014, 75% of households had access to water, of which 68% had access to piped water for drinking. Access to sanitation remained above 90%, and more than 63% of households were classified as least poor.