SEXUAL REPRODUCTIVE HEALTH AND RIGHTS MEETING

ISIOLO

FROM 18TH-19TH SEPTEMBER

PRESENTER: ABDIA ADAN

COUNTY R.H.FOCAL PERSON
WAJIR COUNTY PROFILE

Wajir County is located in the North Eastern region of Kenya. The County lies between latitudes 3° N 60’N and 0° 20’ N and Longitudes 39° E 41° E and covers an area of 56,685.9 km square.

The total population of Wajir County is 661,941. Women of reproductive age is 158,866. The County borders Mandera County to the North East, Ethiopia to North, Somalia to East, Garissa County to the South, Isiolo to the South West and Marsabit to the West.

The livelihood of this population is mainly pastoralists and business people in the urban centres. The number of households is about 110,324. The county consists of six sub county unit; Wajir East, Tarbaj, Wajir North, Wajir West, Wajir South and Eldas.
No. of Facilities Offering;

- BOEC = 66
- COEC = 1
<table>
<thead>
<tr>
<th>No.</th>
<th>Description</th>
<th>National</th>
<th>NEP</th>
<th>Wajir County</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Skilled Deliveries</td>
<td>43%</td>
<td>21%</td>
<td>42%</td>
</tr>
<tr>
<td>2.</td>
<td>ANC 1st Visit</td>
<td>92%</td>
<td>70%</td>
<td>88%</td>
</tr>
<tr>
<td>3.</td>
<td>ANC 4th Visit</td>
<td>47%</td>
<td>43%</td>
<td>39%</td>
</tr>
<tr>
<td>4.</td>
<td>WRA receiving FP commodities</td>
<td>26%</td>
<td>28%</td>
<td>4%</td>
</tr>
<tr>
<td>5.</td>
<td>PNC</td>
<td>58%</td>
<td>10%</td>
<td>8%</td>
</tr>
<tr>
<td>6.</td>
<td>PMTCT (ANC)</td>
<td></td>
<td></td>
<td>11,223 (7 positives)</td>
</tr>
<tr>
<td>7.</td>
<td>Maternal mortality</td>
<td>488/100000 live birth</td>
<td>1000/100000 live birth</td>
<td>1000/100000</td>
</tr>
<tr>
<td>8.</td>
<td>Maternity PMTCT - Tested</td>
<td></td>
<td></td>
<td>2963</td>
</tr>
<tr>
<td>9.</td>
<td>WRA screened for cervical cancer</td>
<td></td>
<td></td>
<td>1%</td>
</tr>
</tbody>
</table>
STRENGTH/OPPORTUNITIES

- DHIS
- Availability of health partners
- Health facilities (Infrastructure) including nomadic clinic
- CHMT
- Community units and other Corps
CHALLENGES

- Staff shortage/Turn over
- Community lifestyle (hard to reach)
- Lack of supplies
- Social, Cultural, Religious barriers
- Lack of youth friendly centres
- Poor referral systems
- High illiteracy levels
RECOMMENDATIONS

- Training of HCW and CHWs on sexual reproductive health and rights
- Sensitization of the community on availability of the services.
- Procurement of commodities.
- Use religious leaders as entry points to reproductive health issues.
- Establishment of culture and religious friendly youth centre.
- Development of IEC and BCC materials.
- Training of health managers on management skills to improve supervision quality.
- Sensitization of the political leaders
- Performance based approach.
- Support health providers on operational re
THANKS