

# WAJIR

## SOCIAL SECTOR BUDGET BRIEF

### (2013-14 to 2015-16)



## Highlights

- The Wajir County spent Ksh 6 billion in 2015-2016, out of which 32 per cent was spent on social sector.
- The drop in overall budget and execution in 2015-2016 in comparison to 2014-2015 needs to be reviewed by the county government.
- The county is suffering from poor nutrition and sanitation status and it is suggested to include specific programmatic budget lines under health sector to ensure proper tracking and prioritisation of such investments.
- From 2013-2014 to 2015-2016, the budget allocation in the Education sector has increased, but still enrolment rates are very low. The study suggests that the county should work on improving perennial issues like socio-cultural barriers etc.
- It is worthy to note that the county has allocated budget for gender promotion and culture & social services. However the study could not track county's allocation to social protection and child related services, due to lack of specific budget lines.
- Over the year, the county has allocated increasing budget for new infrastructure development under water sector. However it has been noted that county didn't provide credible data to water services regulatory board for performance review and hence this study couldn't analyse the impact of increasing expenditure on key water indicators.

## Introduction

*Wajir County* is located in the former North Eastern Province of Kenya, covering an area of 56,685.9 km<sup>2</sup>. The county is divided into 8 sub-counties and 30 wards. The estimated population of the county is little below one million, consisting of 55 per cent male and 45 per cent female. The child population is high, representing 57 per cent of the total population.

The county focuses on five broad areas of development (County Fiscal Strategy Paper) including improving business environment, fiscal reforms and efficient budget implementation; modernizing the key productive sectors of livestock and agriculture; investing in efficient transport, water and energy infrastructure; investing in efficient social service delivery; and fostering sustainable development through climate change adaptation strategy and disaster management.

### Administrative and demographic profile

|                              |          |
|------------------------------|----------|
| Area (km <sup>2</sup> )      | 56,685.9 |
| Number of sub-counties       | 8        |
| Number of wards              | 30       |
| Total population (2015)      | 800,856  |
| Male                         | 439,952  |
| Female                       | 360,624  |
| Under 5 year                 | 111,768  |
| Primary school age (6-13)    | 248,096  |
| Secondary school age (14-17) | 95,282   |

*Source: CIDP (2013-17)*

The interventions in the social service inter alia include quality, well-equipped and accessible healthcare services and quality education as well as social safety net, and putting in place adequate skills and human resources.

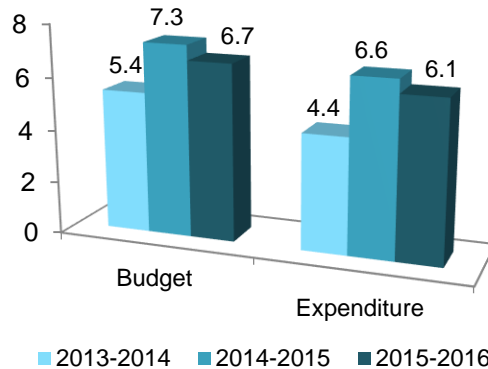
## Overall budget/expenditure

In 2013-14, the first year of devolution, the county budget estimate was Ksh 5.4 billion (*Figure 1*). The county scaled up the budget to Ksh 7.3 billion in 2014-2015, representing a phenomenal increase by 35 per cent. In 2015-16, budget was slightly dropped to Ksh 6.7 billion, recording an 8 per cent decline. In 2015-2016, around 45 per cent of the total budget was allocated to social sector.

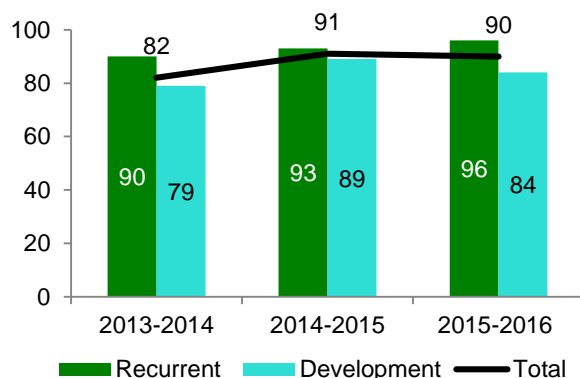
In terms of actual expenditure, the county spent Ksh 6 billion in 2015-2016, that is 39 per cent increased in expenditure in comparison to 2013-2014. Out of total expenses, 32 per cent was spent on social sector in 2015-2016.

The performance of county in terms of budget absorption during the reporting period had been satisfactory. In 2013-14, the overall budget absorption was 82 per cent mainly due to low absorption of the development budget viz. 79 per cent. The key factors that affected execution of development budget were lack of a monitoring, evaluation and reporting framework to guide monitoring of projects, and frequent revisions of the budget. The county took several steps to address these issues (e.g. improvement in staff capacity through training and recruitment of chief officers and other technical staff, embracing the use of IFMIS to process financial transactions) and as a result absorption of development budget

**Figure 1: County budget & expenditure (Ksh billion)**



**Figure 2: County budget absorption rates (%)**



significantly improved to 89 per cent in 2014-2015. However, in 2015-16 the county closed the year at a marginally lower absorption rate of 84 per cent mainly on account of delay in submission of quarterly financial reports to the COB, delay in disbursement of funds by National Treasury, delay in finalization and approval of the secondary budget for FY 15/16 and failure by County Assembly to adopt IFMIS in processing financial transactions. The recurrent budget absorption rate improved over the years due to growing workforce in the county.

In 2013-14, salary/wage bills amounted to Ksh 1.1 billion, representing 23 per cent of the total

## Health

Wajir has 128 health facilities, consisting of 26 basic primary health facility, 89 dispensaries, 9 primary care hospitals and 4 secondary care hospitals<sup>1</sup>. According to the 2005/2006 KIHBS, 95.9 per cent of the population has to cover more than 5 Km to access a health facility and only 4.1 per cent can access a health facility within less than 1 km (*For further details see County Wajir ADP 2015-2016 p 20*).

The county's health indicators reflect a mixed trend. Between 2013 and 2015, the MCH indicators like skilled delivery and exclusive breastfeeding improved significantly. However, during the same period coverage of 4+ ANC visits and immunization coverage dropped. The county is also faced with extreme nutrition challenge. It has 14.2 per cent wasted and 21.1 per cent underweight children, much higher than the national average of 4 per cent and 11 per cent respectively.

In 2014-2015, the county government allocated Ksh 1.3 billion for health sector, which represented 17 per cent of its total budget (*Figure 3*). The following year, the budget was increased marginally to Ksh 1.4 billion, increasing the health share to 21 per cent in the overall county budget.

In terms of composition, development budget had a share of 54 per cent in the total health budget in 2014-15, which marginally reduced to 52 per cent in 2015-16 (*Figure 4*).

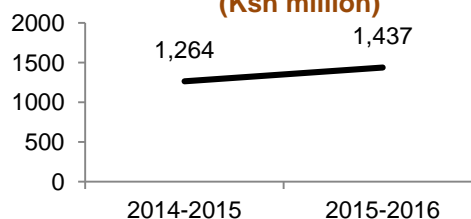
county expenditure. The figure went up to Ksh 1.7 billion in 2014-15 mainly due to recruitment of new staff and annual increments in salaries, and the share in overall expenditure also increased to 26 per cent. The wage bills stand at Ksh 2.2 billion in 2015-2016. This presented an increase of 28 per cent in comparison to FY 2014-2015 and is attributed to a growing workforce in the county and regular annual salary increment.

The present study observed inconsistencies in the data reported in CBIRR 2015-2016, and recommends reconciliation, especially the totalling of budget data needs revision.

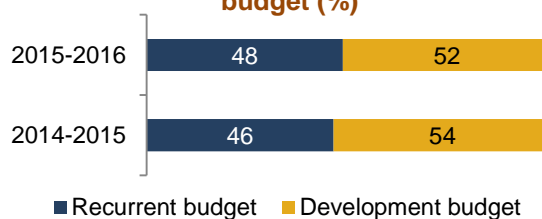
| Select health indicators                    |              |              |
|---------------------------------------------|--------------|--------------|
| <b>MCH service coverage (%)<sup>1</sup></b> | <b>2013</b>  | <b>2015</b>  |
| 4+ ANC visits                               | 41.4         | 40.4         |
| Skilled delivery                            | 63.2         | 73.1         |
| Exclusive breastfeeding                     | 70.1         | 93.1         |
| Fully immunized child                       | 76.5         | 55.2         |
| <b>Nutrition status (%)<sup>2</sup></b>     | <b>Wajir</b> | <b>Kenya</b> |
| Stunted children                            | 26.4         | 26.0         |
| Wasted children                             | 14.2         | 4.0          |
| Underweight children                        | 21.1         | 11.0         |
| <b>HIV (%)<sup>3</sup></b>                  |              |              |
| HIV adult prevalence                        | 0.2          | 6.0          |
| ART adult coverage                          | 26           | 79           |
| ART children coverage                       | 4            | 42           |

<sup>1</sup> DHIS 2013 & 2015    <sup>2</sup> KDHS 2014  
<sup>3</sup> Kenya HIV County Profiles 2014

**Figure 3: Trends in health budget (Ksh million)**

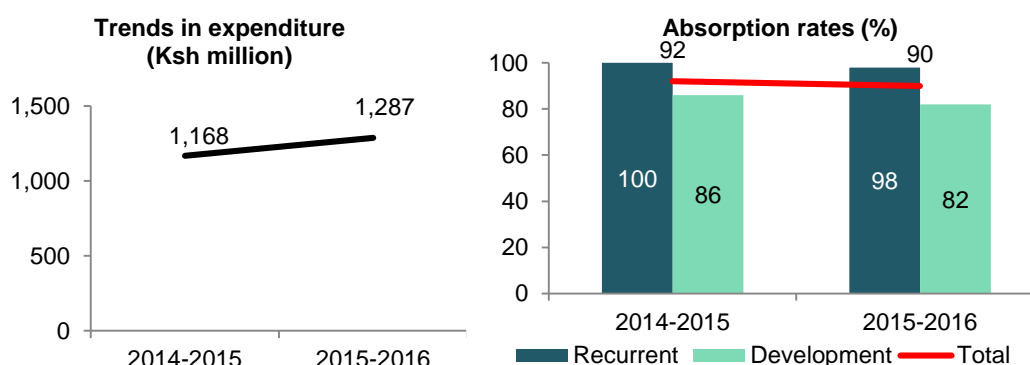


**Figure 4: Composition of health budget (%)**

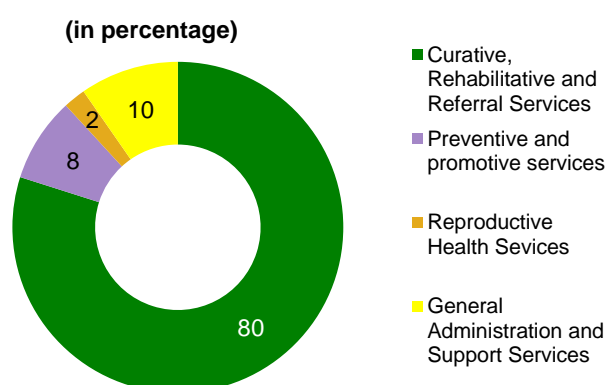


<sup>1</sup>Health facility data:  
<http://kmhfl.health.go.ke/#/home>

**Figure 5: Health expenditure and absorption rates**



**Figure 6: Health budget by programmes (2015-16)**



Source: Programmatic distribution of budget data sourced from Summary of Expenditure by Programmes FY 2015-16

The actual health spending by the county were Ksh 1.2 billion in 2014-2015 and Ksh 1.3 billion in 2015-16 representing budget absorption rates of 92 per cent and 90 per cent respectively. The execution of recurrent budget were around 100 per cent in 2014-2015 and 98 per cent 2015-2016 (Figure 5).

The utilization of the development budget had also been at par with the recurrent budget. In 2014-15, absorption of development budget was 86 per cent. Recruitment of new technical staff, improvement in adherence to approved annual procurement had been responsible for improved development budget absorption (see CBIRR, 2014-15). However the same reduced to 82 per cent in 2015-16 and needs to be reviewed by the government.

In line with its development plans, the county had implemented a number of projects such as recruited new health personnel majority being nurses which resulted in improvement in health indicators; constructed new dispensaries and new maternity wings to improve maternal health services; improved the county referral system – MCH, lab and paediatric section, and purchased new ambulances and repaired old ones. They also

constructed public toilets across the county to improve sanitation for the peri-urban poor and invested in rehabilitation of Wajir town dump site. (See *The promise of devolution 2016*, p 31). Though the county has invested in construction of toilets and improving sanitation status for its people, the county is at high risk of outbreak of Cholera (*Médecins Sans Frontières warned for future cholera strike in Wajir in Feb*) and needs attention of the county government.

Curative, rehabilitative and referral services accounted for the largest share in the total health outlay (Figure 6). In 2015-16, allocation for these services was 80 per cent, while the shares of preventive and promotive services, reproductive health services, and general administration and support services were 8 per cent, 2 per cent, and 10 per cent respectively. The county may review this highly skewed allocation towards curative services and ensure budget efficiency. In terms of the specific programmatic budget lines, county allocated Ksh 69 million to sanitation services; Ksh 21 million to health outreach services; Ksh 5 million to child health and immunisation

services and Ksh 25 million to maternal health services.

In the absence of specific budget lines for nutrition, and HIV/AIDS, this brief could not

## Education

Under devolution, the county is responsible for providing and coordinating quality education and training for inclusive socio-cultural and economic development for all.

At present, the county runs 236 early childhood development and education (ECDE) centres and 4 youth polytechnics (see *ADP 2015-16*). In addition, there are 217 primary and 40 secondary schools that are funded and managed by the national government. The number of teachers currently providing basic education is 1,961, consisting of 699 ECDE, 960 primary, and 302 secondary school teachers.

With second highest illiteracy rate, at 76 per cent, the county is faced with issue of limited skills, knowledge and innovativeness. Access to basic education in the county stands quite lower than the status at national level. As of 2015, gross enrolment ratio (GER) is 28.7 per cent at pre-primary level, 37.3 per cent at primary level, and 14.2 per cent at secondary level which are very low than respective national average. Similarly, with net enrolment ratio (NER) of 28.0 per cent at pre-primary level, 32.9 per cent at primary level and 9.1 per cent at secondary level, the county has recorded poor performance *vis-à-vis* the national average. The shortage of 536 and 113 teachers in primary and secondary schools especially the ones in rural areas, could have been the reason for low enrolment rates (see *ADP 2015-2016*, p 21).

At present, gender parity index (GPI) values of the county at ECDE, primary, and secondary education level stand at 0.61, 0.53, and 0.39 respectively. The values indicate that boys and girls don't have equal access to pre-primary and primary education, while at the secondary level girls enrolment is less than half of the boys. In fact, the GPIs at all the three levels of education is much lower than the national average, which indicates poor performance in providing equitable access to secondary level education. The socio-economic and cultural factors like early marriages, female genital mutilation and exploitation of women has affected girls' child education (See *Wajir ADP 2015-2016* p 23).

The county's budget allocation for education was 4 per cent and 6 per cent in 2014-15 and

track the county's own budget and expenditure in the same. It is recommended that county has a specific budget line for these programmes as well to improve the budget transparency.

| Select education indicators (2015) |       |       |
|------------------------------------|-------|-------|
| Pre-primary education              | Wajir | Kenya |
| Gross enrolment ratio (%)          | 28.7  | 76.5  |
| Net enrolment ratio (%)            | 28.0  | 74.6  |
| Gender parity index (value)        | 0.61  | 0.96  |
| Pupil teacher ratio* (no.)         | 30.3  | 31.9  |
| Primary education                  |       |       |
| Gross enrolment ratio (%)          | 37.3  | 103.6 |
| Net enrolment ratio (%)            | 32.9  | 88.4  |
| Gender parity index (value)        | 0.53  | 0.96  |
| Pupil teacher ratio* (no.)         | 55.1  | 35.2  |
| Secondary education (%)            |       |       |
| Gross enrolment ratio (%)          | 14.2  | 63.3  |
| Net enrolment ratio (%)            | 9.1   | 47.8  |
| Gender parity index (value)        | 0.39  | 0.89  |
| Pupil teacher ratio* (no.)         | 22.9  | 20.7  |

\* The figures pertain to public schools  
Source: State Department of Education, Nairobi

2015-16 respectively (Figure 7). In absolute

Figure 7: Trends in education budget (Ksh million)

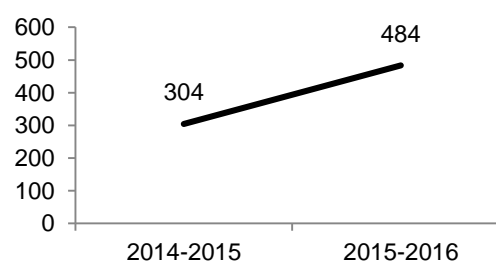
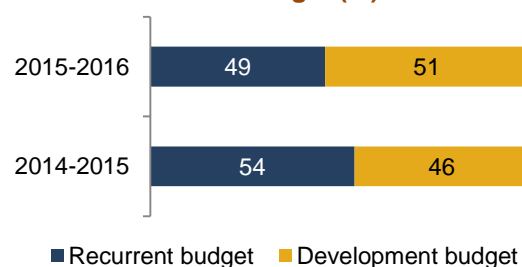


Figure 8: Composition of education budget (%)

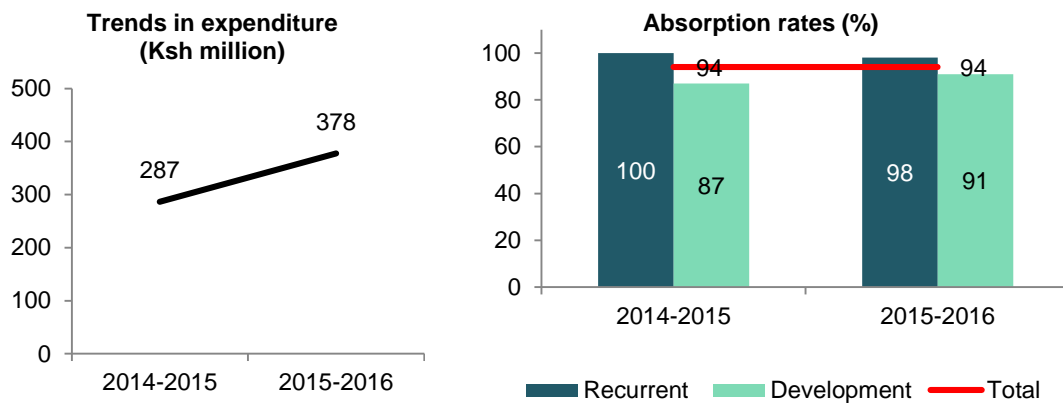


terms, the budget was steadily scaled up from Ksh 304 million in 2014-15 to Ksh 484 million

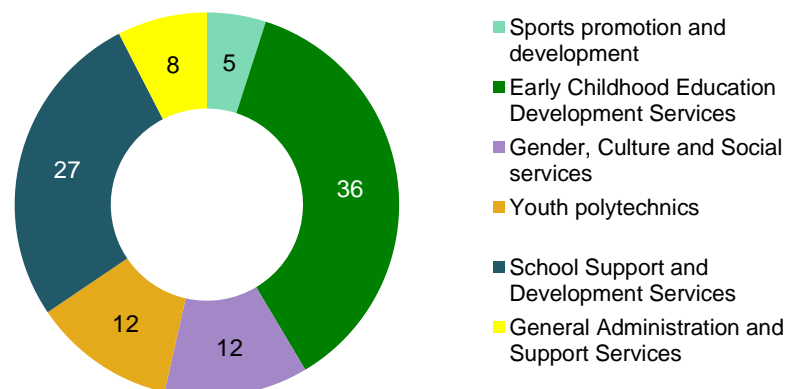
in 2015-16. Over the same period, the recurrent and development budget ratio shifted from 54:46 in 2014-15 to 49:51 in 2015-16

creating more fiscal space for developmental activities (*Figure 8*).

**Figure 9: Education expenditure and absorption rates**



**Figure 10: Education budget by programmes (2015-16) (in percentage)**



Source: Programmatic distribution of budget data sourced from Summary of Expenditure by Programmes FY 2015-16

In 2014-15 and 2015-16, the county maintained the overall absorption rate of education budget at 94 per cent (*Figure 9*). During the same period, execution of recurrent budget decreased slightly from 100 per cent to 98 per cent. With the increase in proportion of developmental budget over the years, actual spending also improved. The absorption rates increased from 87 per cent in 2014-15 to 91 per cent in 2015-16. The absorption of funds suffered due to slow release of funds by the National Treasury and long procurement procedures (see *CBROP 2015*).

conference in May 2014 (see *the promise of devolution, 2016*).

Notwithstanding low utilisation of development budget in 2015-2016, the county had implemented several projects e.g. construction of legislated bursary act and distribution of bursaries; recruitment of ECD teachers across the county; construction of ECD model schools and classrooms and distribution of sanitary pads to girl schools. During the reporting period, the county held the first education

Among the programmes, early childhood education development (ECCD) services had received highest budget allocation. In 2015-16, budget allocations for ECCD services and school support and development services were 36 per cent and 27 per cent respectively (*Figure 10*). The county allocated Ksh 67 million and Ksh 110 million for ECCD infrastructure and ECCD support services respectively. Under school support and development services, the county has allocated Ksh 73 million and Ksh 57 million to scholarships and bursaries & schools development support services respectively.

Despite significant progress in education the county is faced with challenges. The adult low literacy levels at 23.6 per cent (*for details refer to ADP FY 2015-2016 p 21*) is due to socio-economic and cultural factors affecting girls'

education; understaffing; poor performance in examinations due to frequent absenteeism; inadequate physical infrastructure in most of

### Social services

The social services lies under the mandate of education, youth, gender and social services department.

The county allocated Ksh 58 million to gender, culture and social services in 2015-2016. Under this, Ksh 39 million was allocated to

### Water Services

Wajir County has seasonal Ewaso Nyiro River as the main source of water and other sources include boreholes, shallow wells, pans and dams for human and livestock consumption. There are 11,000 shallow wells, 250 water pans and 178 bore holes. The proportion of households with access to piped water is 1.4 per cent of the county's population. The average distance to the nearest water point has improved from 30 km in 2013 to approximately 20 km in 2015 (for details see ADP 2015-2016 p 19). It has been noted that county didn't provide credible data to water services regulatory board for performance review and hence this study couldn't analyse the impact of increasing expenditure on key water indicators over the years.

The county's budget allocation for water was 15 per cent and 19 per cent in 2014-2015 and 2015-2016 respectively (Figure 11). In absolute terms, the budget slightly increased to Ksh 1,304 million in 2015-2016 from Ksh 1,117 million in 2014-2015. Over the same period, the recurrent and development budget ratio shifted from 13:87 in 2014-2015 to 16:84 in 2015-2016 slightly decreasing the fiscal space for development activities (Figure 12).

In 2014-2015 and 2015-2016, overall absorption of water budget decreased from 98 per cent to 95 per cent (Figure 13). During the same period, execution of recurrent budget decreased from 100 per cent to 91 per cent, and execution of development budget decreased to 90 per cent in 2015-2016 from 97 per cent in 2014-2015. The high utilisation of the water development budget could be substantiated by implementation of several projects e.g., drilling of boreholes across the county; digging of new water pans with total capacity of cubic meter; rehabilitation of water

the schools (especially secondary) affects the quality of education in the county.

promotion of culture and social services and Ksh 19 million to gender promotion services. From the ADP FY 2015-2016, we understand that around Ksh 5 million was budgeted for severely elderly fund.

| Select water indicators                            |      |        |
|----------------------------------------------------|------|--------|
|                                                    | 2013 | 2016   |
| County population within service areas of WSPs (%) | n.d. | 13     |
| Water coverage (%)                                 | n.d. | n.c.d. |
| Non-Revenue Water (%)                              | n.d. | n.c.d. |

\* n.d. = no data; n.c.d. = non-credible data  
Source: Report on performance review of Kenya's Water services sector 2013 and 2016

Figure 11: Trends in water budget (Ksh million)

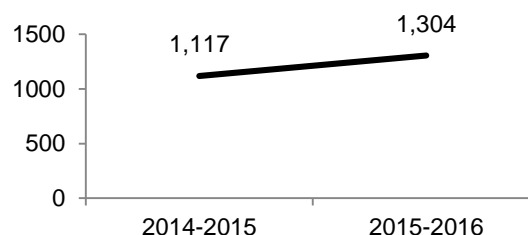
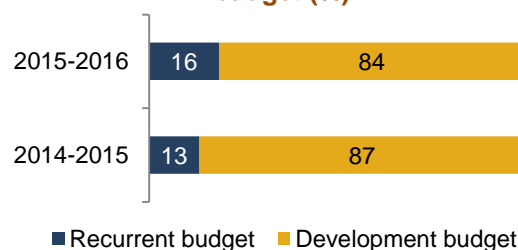
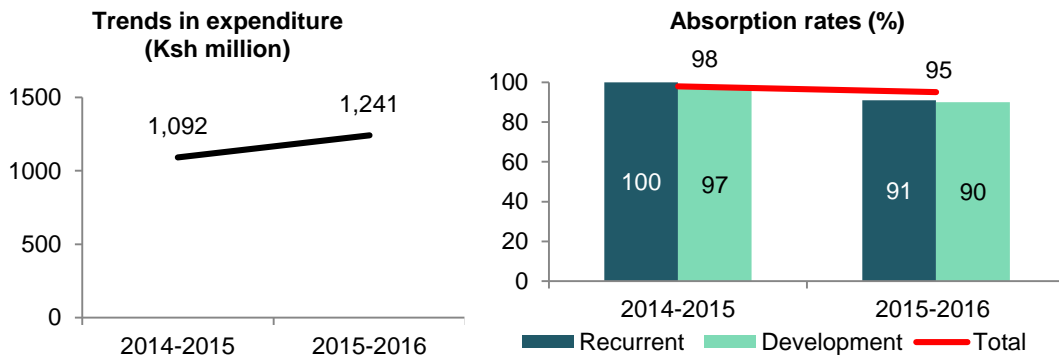


Figure 12: Composition of water budget (%)

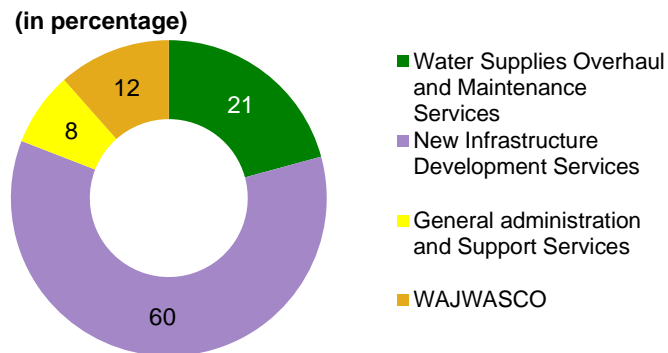


pans; construction of water storage tanks across the county; establishment of Wajir water & sewerage company (WAJWASCO) to manage water services and construction of sand dams to conserve water and recharge the swallow wells (see the promise of devolution, 2016).

**Figure 13: Water expenditure and absorption rates**



**Figure 14: Water budget by programmes (2015-16)**



Source: Programmatic distribution of budget data sourced from Summary of Expenditure by Programmes FY 2015-16

Availability and accessibility of water is a major challenge in Wajir, and county has prioritised new infrastructure and development services under programmatic allocation of budget. In 2015-2016, budget allocations for new infrastructure development services, water supplies overhaul and maintenance services, WAJWASCO and general administration and support services were 60 per cent, 21 per cent, 12 per cent and 8 per cent respectively (Figure 14). In the lack of disaggregated expenditure data in terms of mentioned sub-

departments in 2015-2016, this brief could not comment on absorption rates at this level.

Despite significant progress in water sector, the county is faced with challenges. There is still acute water scarcity with only 40 per cent of the population having access to safe water and additional resources are required for construction of adequate water supply facilities.



*Technical Note:-*

- The social sector analysis is based on the financial data of the four departments, viz. (a) health services; (b) education, culture and youth; and (c) water sanitation and natural resources.
- The annual budget and expenditure data has been sourced from County Budget Implementation Review Report of 2013-2014, 2014-2015 and 2015-2016. The present study observed inconsistencies in the data reported in CBIRR 2015-2016, and recommends reconciliation.
- The programme wise budget bifurcation has been taken from *Summary of Expenditure by Programmes FY 2015-16*. Programme Based Budget (PBB) for the county was not available.
- Due to absence of specific budget lines, the study could not track and comment on allocation/ expenditure for HIV and nutrition related activities.