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KENYA

COUNTRY GENDER PROFILE

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ACRONYMS AND ABBREVIATIONS

ADB	:	African Development Bank
ADF	:	African Development Fund
AGOA	:	African Growth and Opportunity Act
AIDS	:	Acquired Immune Deficiency Syndrome
AMFI	:	Association for Microfinance Institutions
AMREF	:	African Medical and Research Foundation
ARV	:	Anti Retro- Viral
ASAL	:	Arid and Semi-Arid Lands
BPFA	:	Beijing Platform of Action
CBF	:	Constituency Bursary Fund
CEDAW	:	Convention on the Elimination of All Forms of Discrimination Against Women
CBK	:	Central Bank of Kenya
CBI	:	Cross Border Initiative
CBOs	:	Community Based Organisations
CDF	:	Constituency Development Fund
CHAK	:	Children Health Association of Kenya
COMESA	:	Common Market for Eastern and Southern Africa
CRC	:	Conventions on the Right of the Child
CSP	:	Country Strategy Paper
DFID	:	Department For International Development (UK)
DHMT	:	District Health Management Team
DMOH	:	District Medical Health Officer
EAC	:	East African Community
ECDE	:	Early Childhood Education and Development
EIA	:	Environmental Impact Assessment
EMCA	:	Environmental Management and Coordination Act
EmOC	:	Emergency Obstetric Care
ERS	:	Economic Recovery Strategy
ESAF	:	Enhanced Structural Adjustment Facility
ESW	:	Economic and Sector Work
EU	:	European Union
FAWE	:	Forum for African Women Educationalists
FHOK	:	Family Health Options Kenya
FIDA	:	Kenya Federation of Women Lawyers
FPE	:	Free Primary Education
GDP	:	Gross Domestic Product
GFP	:	Gender Focal Point
GNP	:	Gross National Product
GoK	:	Government of Kenya
GOWE	:	Growth-Oriented Women Entrepreneurs
HELB	:	Higher Education Loans Board
HIPC	:	Heavily Indebted Poor Countries
ICPD	:	International Conference on Population and Development
ICTs	:	Information and Communications Technologies
ICT4D	:	Information and Communications Technology for Development

IMT	:	Intermediate Transport
IP-ERS	:	Investment Program for the Economic Recovery Strategy
I-PRSP	:	Interim Poverty Reduction Strategy Paper
KANCO	:	Kenya AIDS NGO Consortium
KANU	:	Kenya African National Party
KACA	:	Kenya Anti Corruption Authority
KCB	:	Kenya Commercial Bank
KCS	:	Kenya Catholic Secretariat
KDHS	:	Kenya Demographic and Health Survey
KEMRI	:	Kenya Medical Research Institution
KENGEN	:	Kenya Electricity Generation Company
KENSUP	:	Kenya Slum Upgrading Project
KESSP	:	Kenya Education Sector Support Programme
KIHBS	:	Kenya Integrated Household Budget Survey
KSh	:	Kenya Shilling
LATF	:	Local Authority Transfer Fund
MDG	:	Millennium Development Goals
MFI	:	Microfinance Institutions
MGSCSS	:	Ministry of Gender, Sports, Culture and Social Services
SMEs	:	Small and Medium-sized enterprises
MSSEs	:	Micro and Small Scale Enterprises
MTEF	:	Medium-Term Expenditure Framework
NACC	:	National AIDS Control Council
NARC	:	National Rainbow Coalition
NFLS	:	Nairobi Forward Looking Strategies for the Advancement of Women
KLWV	:	The League of Kenya Women Voters
NCWK	:	National Council of Women of Kenya
NEAP	:	National Environment Action Plan
NEMA	:	National Environmental Management Agency
NEPAD	:	New Partnership for Africa's Development
NESC	:	National Economic and Social Council
NGO	:	Non-Governmental Organisation
NHIF	:	National Hospital Insurance Fund
NHSSP	:	National Health Sector Strategic Plan
NPEP	:	National Poverty Eradication Plan
PPP	:	Private-Public Partnership
PRGF	:	Poverty Reduction and Growth Facility
PRSP	:	Poverty Reduction Strategy Paper
ROSCAs	:	Rotating Savings and Credit Associations
RTO	:	Regional Telephone Operations
SME	:	Small and Medium-Scale Enterprise
TFR	:	Total Fertility Rate
TIVET	:	Technical, Industrial, Vocational and Entrepreneurship Training
UA	:	Unit of Account
YWLI	:	Young Women's Leadership Institute
WMS	:	Welfare Monitoring Survey

Executive Summary

1. Introduction

The African Development Bank is supporting member countries to develop gender profiles to assist the gender mainstreaming efforts of the Bank, African countries and development partners. Gender Profiles identify gender-related policy and programme interventions, which could lead to poverty reduction, economic growth and human development within member countries.

2. Historical Overview

Kenya attained independence from Britain in 1963 with Jomo Kenyatta becoming its first president. The country was dominated by the ruling Kenya African National Union (KANU) until 2002 when multi-party elections took place. Kenya has a population of 32 million people from more than 40 ethnic groups. Fifty-six percent of the population lives below \$1 per day and 34% and 26% of rural and urban households respectively are female-headed. The country's population is characterized by low and declining life expectancy, increasing fertility rates, high infant mortality and death rates, leading to declining population growth rates. The incidence of poverty was estimated to be 46% in 2005/6. In rural areas the prevalence of poverty is almost the same for male and female-headed households, which suggests that the economic role of rural men has declined.

3. Gender Policy, Institutional and Legal Frameworks

The national machinery for coordinating gender mainstreaming is the Division of Gender within the Ministry of Gender, Sports, Culture and Social Services (MGSC&SS). The National Policy on Gender and Development 2000 provides the framework for the state to address gender imbalances and inequality. The government also established a National Commission for Gender and Development in 2004. Many legal provisions are in the process of being promulgated and positive effects are still to be seen. Since legal literacy is low resulting in many women being unaware of civil laws, customary laws, which often discriminate against them, are reverted to. Kenya has a vibrant NGO sector, but many of the NGOs which deal with gender concerns address practical gender interests only. Those which address strategic interests often lack capacity and funding. At the grassroots level a multitude of women's groups engage in self-help, saving and educational projects.

4. Gender Analysis by Sector

4.1 The **macro-economic framework** adopted by the Government is a pro-growth strategy that aims to address poverty and ensure sustainable development. Kenya has a relatively diversified economy. Policies focus on the promotion of access to markets through infrastructure provision, credit and employment generation, increased public resources towards poverty reduction, enhanced security of the poor and vulnerable groups as well as human capital development. The national budget is not engendered and 13 Ministries lack budgetary allocations targeting gender activities.

4.2 The Kenyan economy is based on **agriculture** with an estimated 3 million small agricultural holdings. About 80% of the Kenyan population lives in the rural areas, and about 75% derive their livelihood from agriculture. Land scarcity is a common feature of smallholder production systems

particularly in the high potential areas. The situation is worse for women who own between 1-5% of land titles. Due to male migration to urban areas in search of paid employment more women live in the rural areas. While women play an important role in agricultural production contributing up to 80% of all labour in food production, they receive only 7% of agricultural extension information. In addition to other activities such as collection of fuel wood, poles for construction, fetching water for domestic use, cooking and feeding of the family, it is estimated that women are managing over 40% of all smallholder farms. Rural men have recently experienced a process of economic marginalisation.

4.3 The provision of **education** and training to all Kenyans is fundamental to the success of the Government of Kenya's (GoK's) overall development strategy. The GoK introduced Free Primary Education (FPE) in 2003, which increased the General Enrolment Rate (GER) and created near gender parity in some provinces. Enrolment in secondary education was 31.7% for boys and 27.3% for girls. The national completion rate was 91.5% for boys and 87.5% for girls, but the gender gap has been closing steadily, with a decrease in the completion rate of boys. Girls nonetheless face bigger problems in secondary schools largely due to the high cost of education, patriarchal values, school girl pregnancies and dropout, early marriage and HIV/AIDS. The gender gaps widens further in Tertiary education where the numbers of girls are particularly low in non-traditional subjects and in university management.

4.4 The Second **Health** Sector Strategic Plan seeks to increase equitable access to health services and improve quality and efficiency. Health service delivery in rural areas continues to lag behind urban areas, with arid areas being particularly sub-standard. However Kenya could improve some health care indicators, including the fertility rate, which has increased slightly and the percentage of medically assisted births which has declined. Maternal health remains constrained by the lack of Emergency Obstetric Care (EmOC) facilities, shortage of trained staff and the high number of illegal abortions. Adolescent sexual and reproductive health is another area which needs improvement, particularly access to youth-friendly reproductive health clinics, which would reduce teenage pregnancy, lower the abortion rate and decrease STIs (Sexually Transmitted Diseases).

4.5 Kenya has an inadequate and weak **infrastructure** as a result of years of under investment. Biomass, mainly wood fuels, accounts for over two-thirds of total energy consumption. Eighty percent of rural Kenyan women spend between 1-5 hours per household per day searching for fuel wood. It is estimated that 89% and 49% as well as 94.8% and 76.6% of urban and rural population respectively have access to safe drinking water and sanitation respectively. Despite the country's elaborate road network, rural mechanised and motorized transport is largely non-existent. In the urban areas, public transport is unaffordable to many low paid workers, leading to low productivity.

5. Cross-cutting Issues

5.1 Kenya's **environment** and natural resources have been adversely impacted by high population growth, degradation and poor land management practices. Environmental problems are particularly severe in arid and semi-arid lands. As 99% of the rural population use fuel wood and 80% of the population use charcoal, deforestation is a significant problem. Current closed forest stands at 1.7% against the recommended level of 10%. Within the domestic environment, indiscriminate disposal of waste leads to environmental contamination including water pollution.

5.2 Kenya's **HIV/AIDS** infection rate has declined to 7% in 2004, apparently due to changed sexual behaviour. However 2 million Kenyans are living with HIV/AIDS today and the number of orphans stands at 2 million. HIV/AIDS affects women and men differently due to their biological, socio-cultural and economic circumstances, with girls and women more vulnerable to HIV infection. Girls are also more affected by the pandemic since they are often called upon to provide care for their sick parents and relatives which has led to a feminization of the HIV/AIDS pandemic.

5.3 On **leadership and decision making**, even though women form more than half the population of Kenya, they are grossly under-represented in leadership and decision-making positions, with only 8.1% women parliamentarians. The situation is similar with regard to higher level public sector positions and in the private sector. There are many serious challenges facing women with leadership ambitions, even though many initiatives and projects seek to promote women leaders.

5.4 **Gender-based violence** is a serious problem, with one woman being raped every 30 seconds. Forms of gender-based violence (GBV) include assault, rape, defilement, battery, sexual harassment, emotional abuse and female genital mutilation. Nearly half of the victims of GBV are minors, and incest and child defilement are also on the increase. Domestic violence is also rife with one in every four women being beaten by her partner. Female genital mutilation still affects 32% of the population, even though the incidence among the young has halved. Some Kenyan communities still practice widow inheritance which is said to fuel HIV/AIDS infection.

6. Recommendations for ADB Interventions

The Bank Group started supporting Kenya in 1967 and currently supports sixteen approved and ongoing projects with a total value of UA299 million. Recommendations for improving ADB interventions include the need to support gender mainstreaming capacity in ministries and make use of gender focal points in ministries where they exist in project formulation and supervision. The report also suggests that the Bank further support Small and Medium Enterprise (SME) development through the African Women in Business Initiative, adopt the 30 % quota for appointments in public sector jobs, including the hiring of project staff. Sector interventions include support to the gender unit of the Ministry of Agriculture, support in the area of appropriate technology, training of female extension officers, and inclusion of Kenyan women's lack of control over land in dialogue missions. Social sector interventions include support to girl-friendly secondary and tertiary education, support to women's leadership, prevention of GBV and support to orphans, other vulnerable children and the elderly. Infrastructure projects should pay more attention to the intermediate transport needs of women, support for non-polluting energy sources and improvement of sanitation and water facilities in rural areas.

7. Recommendations to government, donors and NGOs

Effective gender mainstreaming of all policies and programmes is a precondition for achieving gender equality. Capacity to do so is very weak and needs to be urgently improved, with sufficient funding, staffing and operations budgets going to the national machinery, as well as gender disaggregated data collection. Gender training at all levels including management is also still necessary. In addition the following recommendations are made:

- Laws aimed at improving the situation of women need to be ratified, and campaigns that disseminate new legal provisions also among the less educated need to be continued;
- Access to the legal system needs to be improved;
- The question of land rights needs to be approached;
- Women need to have better access to credit, particularly for the expansion of micro-enterprises;
- The economic marginalisation of men which overburdens women needs to be reversed to raise rural productivity;
- Quality and regional equity of education needs to be improved. Girls' empowerment approaches piloted by the Forum for African Women Educationalists (FAWE) need to be replicated nationally to improve enrolment of girls at post-primary levels;
- Adolescent sexual reproductive health and maternal mortality are still areas that need extra attention;
- Infrastructure projects need to be formulated with the needs of men and women in mind; and
- The gender nature of the HIV/AIDS pandemic, the high level of GBV as well as women's lack of access to decision-making in the political sphere need to be addressed.

1. INTRODUCTION AND BACKGROUND

Objectives of the Study

1.1 The African Development Bank Group's (ADB) gender policy, approved in July 2001, provides the requisite conceptual and operational framework for promoting gender responsive development in Africa. Through this policy, the Bank seeks to promote the mainstreaming of gender in Bank operations and to assist African Regional Member Countries (RMCs) in obtaining gender equality objectives. The policy is designed to concretise the commitment of the ADB to promote gender mainstreaming as a means of fostering poverty reduction and economic development on the continent. This broad objective is contained in the Bank's 1999-approved Vision document on the Bank's overarching development strategy in which gender is singled out as a priority cross-cutting issue which must permeate all Bank operations. The Vision document also requires the Bank to work closely with RMCs to mainstream a gender perspective and to promote the empowerment of women.

1.2 The Kenya Gender Profile identifies specific gender issues relevant at both macro economic and sectoral levels. It is a follow-on publication of already existing gender studies, such as *The Kenyan Strategic Gender Assessment (2003)* by the World Bank which examines the legal, cultural, administrative and regulatory barriers to women's access to productive resources and cultural impediments to gender equality to the exclusion of up-to-date data arranged by sector. This Gender Profile, by contrast, explores all sectors as well as issues of HIV/AIDS and GBV. The aim of this report is to present the Bank and other stakeholders in Kenya with a document they can use for development planning and for funding gender related sectoral activities. In carrying out this exercise, this profile seeks to identify the short and long-term gender concerns relevant to poverty reduction and sustainable development. This is to contribute to help Kenya move closer to gender parity and to facilitate mainstreaming gender into Bank operations in Kenya.

Methodology

1.3 The methodology adopted in carrying out this exercise included desk and internet research, data collection, analysis and reviews; meetings and interviews with key stakeholders and a one day workshop. Meetings and consultations were held with the Ministry of Gender, Sports, Culture and Social Services (MGSCSS) management and staff, other Ministries and government agencies, the United Nations Organisations (UNFPA, UNIFEM, UNEP), the National Gender Development Commission, various non-governmental organisations (NGOs) and civil society groups.

Box 1: Stakeholder Consultation

The study has used a participatory approach including a one-day stakeholder workshop held in Nairobi which gathered 39 participants from a wide range of stakeholders including government, bi- and multilateral donors and NGO/CBOs. The workshop discussed the report both in plenary meetings and in break-out groups. The workshop pointed to many constraints which included lack of finance, capacity and misunderstanding of gender concept, and developed a number of recommendations for strategic interventions in all sectors. The stakeholders generally thought that communities need to be further empowered, and within them women need to be empowered to participate in decision making concerning all sectors. The need for continuous advocacy for women's rights, improved service delivery and implementation of policies as well as the fast tracking of important reformed legislation such as the land act and succession law were also recommended. The workshop also stressed again that gender profiles also need to bring out the contributions and needs of men and stress the involvement of men in all aspects of life.

1.4 Most data that examine gender stakeholders, challenges and recommendations in each sector are derived from face-to-face interviews, contributions of participants at a stakeholders' workshop and from relevant published data supplied by stakeholders. For this report gender stakeholders include government ministries and other government organisations, NGOs, donors, civil society and the private sector. A summary of relevant stakeholders is included in Annex 5. This review is not meant to be exhaustive, given the number of stakeholders and diversity of topical areas covered, and meant to highlight the main activities and challenges in the area of activities which pursue gender equity. Every effort was made to present the latest available information on topics covered, although some data sources were not available. Gaps might therefore remain in the text. Due to the nature of this study many other authors' works were reviewed and they are acknowledged in the reference section.

Format of the Document

1.5 Section 2 gives a country description for readers not acquainted with Kenya. Section 3 identifies the legal and policy frameworks for gender activities. Sections 4 and 5 examine each sector or cross-cutting issue by giving a brief descriptive overview, followed by a discussion of the main gender stakeholders, sector analysis and the main strategic options for interventions. Section 6 examines current and future Bank interventions in Kenya, and Section 7 describes possible interventions and challenges that are common throughout most sectors and cross-cutting issues discussed in the document.

2. HISTORICAL OVERVIEW AND SOCIO-ECONOMIC PROFILE

2.1 Colonial and Post-Colonial History

2.1.1 The colonial history of Kenya dates from the establishment of Imperial Germany's protectorate over the Sultan of Zanzibar's coastal possessions in 1885, followed by the arrival of the British East Africa Company (BEAC) in 1888. Due to severe financial difficulties of the British East Africa Company, the British government established direct rule through the East African Protectorate in 1895, and from 1902 onwards opened the fertile highlands to white settlers. In 1920 Kenya was declared a Crown Colony, which provided for power sharing of the settlers. Africans were excluded from direct political participation until 1944.

2.1.2 As a reaction to their exclusion from political representation the Kikuyu people founded Kenya's first African political protest movement, the Young Kikuyu Association, in 1921. It later became the Kenya African Union (KAU), an African nationalist organization demanding access to white-owned land, led by Jomo Kenyatta. From 1952 to 1959, Kenya was under a state of emergency arising from the Mau Mau rebellion against British colonial rule. Women acted as reconnaissance and intelligence officers, and cooked, carried food and arms in what was termed a "civilian army". Some Mau Mau women members were also engaged in combat. At independence the political leadership acknowledged the contribution of women to the independence struggle, but this was not translated into sharing decision-making in the new state.

2.1.3 The Kenya African National Union (KANU) formed the government after independence in 1963, with Kenyatta as President. A small but significant leftist opposition party, the Kenya People's Union (KPU), led by Jaramogi Oginga Odinga, a former vice president and Luo (Kenya) elder, was

banned. After 1969 Kenya became a single party system under KANU. After local and foreign pressure parliament repealed the one-party section of the constitution in December 1991. Multiparty elections held in December 1992 gave KANU a majority of seats, and President Daniel Arab Moi was re-elected for another five-year term, although opposition parties won 45% of the parliamentary seats. Further liberalization in November 1997 allowed for the expansion of political parties from 11 to 26. In 2002 a coalition of opposition parties led by Mwai Kibaki won the elections.

2.1.4 Prior to 2002 the ruling party had successfully co-opted the national women's organization Maendeleo ya Wanawake (MYWO), which pre-dated KANU as a women's mass movement. Government patronage of MYWO disempowered more progressive women's organizations, as well as leaders that were more militant and supportive of women's interests. Even though KANU severed its links with MYWO with the entry into multi-party politics, the stigma of the close connection of the organization to the party has remained. Instead the opening of the political system gave rise to a vibrant new women's movement and many women's groups started to lobby for women's political representation, and strategic changes to legal provisions. Unfortunately the country has remained very patriarchal and the progress women have made to gain decision making power has been very slow. It has been suggested that the political situation with proliferating parties and quick changes of alliances has contributed to limiting women's influence in public affairs.

2.1.5 Kenya has nonetheless produced many strong women leaders, such as Wangari Maathai, who received the Nobel Peace Prize in 2004 for her work in the Greenbelt Movement. She was the first woman in East and Central Africa who earned a PhD and in 2002 she was elected to parliament, holding the position of a deputy minister. Kenya has many other distinguished women academics and politicians, and scholarship on gender analysis is well developed with at least 2 universities offering gender studies as a subject area.

2.2 National Demographic Indicators

2.2.1 Kenya's current population is estimated at 32 million people, of whom 75-80% lives in the rural areas. The rural sex ratio is significantly lower than the urban sex ratio (97 males per 100 females in rural areas against a sex ratio of 99 in urban areas) due to male out-migration to urban areas. The population growth rate was estimated to be 2.57 % in 2006 up from 1.14% in 2004. The population distribution varies from 230 persons per km² in high potential areas to 3 persons per km² in arid areas. According to the 2005/6 Kenya Integrated Household Survey (KIHS) 30.9 % of rural and 23.5 % of urban households were headed by women, down from 34 and 26% respectively in 2003. Nairobi Province had the lowest incidence of female headed households (19.2%) while Nyanza Province had the highest incidence with 36.6%. Within districts Samburu District has 79.1% female-headed households. The average household size is 5.1 persons and 63.5% of all marriages are monogamous. Kenya has a high age dependency ratio which in 2005 stood at 84, down from 90 in 2003. Since 42% of the population is aged below 15 years the country has a high dependency burden placing high demands on education and health care delivery. The country's population is characterized by high mortality rates, low and declining life expectancy, increased fertility rates (from 4.7 children per woman in 1995-1998 to 4.8 in 2000-2003), high infant mortality and death rates, and declining population growth rates (which could be attributed to the HIV/AIDS pandemic). All these pose enormous challenges for achieving the Millennium Development Goals (MDGs). Kenya is also a highly unequal society with a Gini coefficient for household income of 0.57, much

higher than Uganda (0.37) and Tanzania (0.38). Inequality has been increasing since 1994 when the Gini coefficient was 0.45.

2.2.2 The population in absolute poverty was estimated to be 44.7% in 1992, 52% in 1997, and 56% in 2002 and 53% in 2005¹. The 2005/6 KIHBS arrived at an overall poverty level of 46% (49.1% rural and 33.7% urban). Overall poverty was highest in the North Eastern and Coastal provinces (73.9% and 69.7% respectively) and decreased most in Nairobi and Nyanza Provinces (from 52.6% and 71% in 2000 to 21.3% and 47.6% respectively). The major indicators of poverty can be recognized in a number of sectors: low coverage of water supply services; a general decline in child nutrition and the provision of health services; increased pressure on environmental goods and services, especially forest resources; and increased numbers of people receiving below the minimum level of dietary energy consumption. Women are more likely than men to be poor, and they are more vulnerable to adverse shocks. In Kenya 54% of rural and 63% of urban women and girls are estimated to live below the poverty line. While nearly half of all female headed households are considered to be poor, there is also evidence that there is no longer a significant difference in the incidence of poverty between male and female-headed households. In urban areas, however, the prevalence of poverty in female-headed households was 42.2% in 2005/2006, substantially higher than the 30% prevalence for male-headed households.

2.2.3 The country is divided into eight administrative regions called provinces: North Eastern, Eastern, Central, Nairobi, Coast, Western, Nyanza and Rift Valley. These are further subdivided into districts, divisions, locations and sub-locations. The central government appoints a commissioner for each district and region. There are also local authorities which are under the jurisdiction of the Ministry of Local Government. Local council members are elected every five years during general elections. Political parties also nominate some council members in proportion to the number of votes the party garnered during the elections. The Councillors elect the Mayors and their Deputies.

2.2.4 Kenya has more than 40 ethnic groups, broadly classified into 3 categories: the Bantus, the Nilotes and the Cushites. Kenyan societies have historically operated on a patriarchal basis with the women having a lower status than men. Under the prevailing patrilineal system most Kenyans in rural areas live in homesteads under the authority of a male family head. A number of homesteads constitute a lineage and several joint lineages form a clan, which is the highest traditional social unit. The clan is ruled by a group of elders, all men, who are normally heads of lineages. Normally, women do not occupy leadership positions and do not have decision-making power on matters concerning the clan. This system has produced systematic gender inequalities by sustaining gender differences in decision-making and resource ownership. In most communities, men control the means of production, labour and surplus production. Women largely access resources through parentage or marriage but with no ownership, control or decision-making power. Social and cultural constructions dictate separate roles, behavioural attributes and expectations for men and women.

¹ World Bank, cited in Kenya: Gender and Economic Growth Assessment May 2006

3. GENDER POLICY, INSTITUTIONAL AND LEGAL FRAMEWORKS

3.1 Gender Policy Framework

3.1.1 The Government of Kenya developed a *National Gender and Development Policy* in 2000, which forms the framework for guiding different sectors and agencies. The policy guidelines address the following critical areas: (i) the economy; (ii) poverty and sustainable livelihoods; (iii) law; (iv) political participation and decision-making; (v) education and training, (vi) health and population; (vii) the media and (viii) policy implementation and resource mobilization

3.1.2 The *National Policy on Gender and Development* (2000) provides a framework for the state to reduce gender imbalance and inequality. The policy mandates the Government to address gender inequalities strategically through established institutional frameworks. The *Sessional Paper No. 2 2006 on Gender Equality and Development* provides a framework for the operationalization of gender mainstreaming in policy, planning and programming in Kenya. The Government is also in the process of developing a *Gender Mainstreaming Implementation Plan of Action for the National Policy on Gender and Development*, a draft of which was presented in August 2007.

3.1.3 Both the National Policy and the Sessional Paper No. 2 recognize that it is the right of women, men, girls and boys to participate in and benefit equally from development initiatives. The policy framework recognizes that equality between women and men is a matter of human rights, development and a condition for social justice. The Sessional Paper seeks to link the Gender and Development Policy with other Government policies especially the *Economic Recovery Strategy for Wealth and Employment Creation* (2003- 2007). It outlines strategies of implementing programmes in the macro-economic framework, law and administration of justice, education, health, agriculture, environment and information communication technology (ICT).

3.1.4 The policy framework captures and re-iterates Kenya's commitment to the Beijing Platform for Action (BPFA), the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), the International Conference on Population and Development Programme of Action (ICPD PoA) and the Millennium Development Goals (MDGs), all of which Kenya signed, for their potential as mutually supporting processes for the advancement of gender equality.

3.1.5 In 2006 the African Peer Review Mechanism (APRM), of which ADB is a member, published a report on Kenya, which pointed to several shortcomings with regard to Kenya's achievements in gender mainstreaming, particularly with regard to women's participation in decision making and legal reforms. It made precise recommendations to address these areas.

3.2 Institutional Gender Framework

3.2.1 Kenya's participation in the first UN Conference on Women in 1975 in Mexico set in motion a process which led to the establishment of the Women's Bureau in the Ministry of Culture and Social Services in 1976. As part of the national machinery the Women's Bureau was mandated to advance the rights of women in policy formulation, implementation, monitoring and evaluation, and to coordinate Government initiatives and programmes for women, collect and analyse gender

disaggregated data and information, and liaise with NGOs, women's organizations and other relevant stakeholders.

3.2.2 The Government strengthened the national machinery in 2004 by establishing the National Commission on Gender and Development and by elevating the Women's Bureau into the Department of Gender in December 2004. In February 2007, the Department of Gender merged with the Department of Social Services and is now the Department of Gender and Social Services with a division on gender. The up-grading of the Division of Gender into a fully fledged Department in 2004 lent more voice to the unit and indicated a change in value placed on achieving gender equality. Conversely, the fact that it now has been down-graded to a division again might be a sign that gender equality goals are again neglected. However, the Ministry has now also put in place a new position of Gender Secretary, who reports directly to the PS, which might lend Gender more weight overall. Other recent changes at the ministerial level, discussed below, suggest a similar trend.

3.2.3 The Division of Gender (previously Department of Gender) draws its mandate from Presidential Circular No. 1 of September 2004, which assigned it the responsibility to integrate gender dimensions into future policy formulation, planning and implementation. Its key functions are to:

- i) Formulate and review gender responsive policies across sectors for the integration of women, men, girls and boys into the development process;
- ii) Facilitate domestication and implementation of resolutions made at international and regional levels;
- iii) Co-ordinate and harmonize implementation of the National policy on gender and development and other gender responsive interventions implemented by GOK, NGOs and other agencies;
- iv) Lobby and advocate for gender mainstreaming in the development process, and engendering of the national budget; and
- v) Promote the generation of gender disaggregated data/information on gender equality indicators.

3.2.4 The National Commission on Gender and Development was set up by an Act of Parliament in 2004. It is mandated to coordinate, implement and facilitate gender mainstreaming in national development and to advise the Government on gender concerns. The Commission's core mandate is to undertake lobbying and advocacy, monitoring and evaluation, and oversight for legal reforms on issues affecting women and girls. The tasks of the Commission specifically include

- i) To participate in the development of national development policy formulation;
- ii) To liaise with relevant line ministries and exercise general supervision over implementation of the national policy on gender and development;
- iii) To formulate proposals and advise on the establishment and strengthening of institutional mechanisms that promote gender equity and equality particularly with regards to access to and benefit from education, health care, nutrition, shelter, employment and control of economic and natural resources; and
- iv) To initiate legal reforms on issues affecting women and gender equality in collaboration with the Attorney General.

3.2.5 In fact, both gender machinery institutions have been plagued by serious financial and staff constraints and have not been able to conduct their activities adequately. The Mandate of the Department/Division of Gender has, moreover, been misunderstood to include actual gender project implementation, rather than just coordination. As a result the unit, which lacks the capacity to effectively co-ordinate, has not been able to fulfil either its proper or its additional mandates. Similar capacity constraints have also hampered the work of the Commission, which has an operating budget that covers the Director and two professional staff only. This has all but paralyzed the new institution.

3.2.6 The previous Gender Department was mandated to set up Units of Gender Issues (UGIs) in all ministries. But according to a World Bank financed capacity assessment (2005) the gender Desk/Department never had the budget for such activity nor did the line ministries have the necessary budgetary allocations. The assessment concluded that none of the ministries had set up a UGI, while only the Ministry of Agriculture had established a similar formalised structure, the Gender Equity Mobilization Strategy (GEMS). In fact, 76.9% of all the ministries included in the survey were found to have neither budget nor staff to take up responsibilities for gender mainstreaming, while the rest had only limited capacity via gender focal points. Appointments of staff to gender focal points also were and are at too low a level and the appointed persons have lacked mandates, capacity and budgets to effectively carry out their work.

3.2.7 Sessional Paper No. 2 of 2006 has proposed the establishment of Gender Divisions in all ministries. This would suggest that this a new attempt to establish structures similar to the UGIs. These new divisions are expected to be stronger than the focal points, to consist of higher level staff members, to initiate plans and strategies for their ministries, to command and allocate resources to strengthen their ministry's role, performance and effectiveness in implementing the National Development Plan, the Economic Recovery Strategy, the MDGs and the Beijing Platform for Action. Gender Divisions are expected to: (i) provide training and capacity building of staff; (ii) develop concrete approaches, methods and tools for mainstreaming gender; (iii) develop indicators for gender mainstreaming on processes, outcomes and impacts of programmes; (iv) build new constituencies to deepen and sustain gender mainstreaming; and (v) establish performance appraisal systems at the individual and departmental levels. Since budgets are still not allocated for the planned divisions, there is little hope that ministries can be persuaded to establish their own gender divisions. However, most recently in 2007 the Head of the Public Service Commission has issued a directive that line ministries need to appoint gender officers, which are dedicated to the job and should be at a higher level in the public service and stipulates that appointed persons need to be trained. This is the first time that a directive like this was issued and it promises to carry more weight. In August 2007, weeks after the deadline set by the directive, the situation had not noticeably changed yet: the Ministry of Agriculture has remained with its GEMs, and the Ministries of Livestock and Fisheries Development, Trade and Water and Irrigation as well as Education are among those which have established gender units or gender focal points.

3.2.8 New in 2007 has also been the renewed desire to devolve gender machineries to the district level. Itself not an entirely new idea, the Division of Gender has been directed to revive or re-establish Gender Advisory Committees at district level which will act as a watchdog for gender mainstreaming at the district level and below, with representatives from external constituencies, government, community women, NGOs and CBOs as well as youth. Their mandate has been described as coordinating and managing strategic alliances between communities and organisations.

3.2.9 The Draft Gender Mainstreaming Implementation Plan of Action (2007) has recognized that most ministries are not aware of the National Gender Policy and that the first step towards gender mainstreaming would be the development of policy statements linking gender to ministries' core functions, purpose and values. This process would require a harmonized approach and include high level stakeholders from sector ministries, including permanent secretaries, directors, planners, treasury and parliamentarians, local level political leaders and NGOs.

Non-governmental institutions and the women's movement

3.2.10 Due to the decline of provision and quality of public services Kenya has seen a dramatic increase in NGOs, from a few hundred in 1990 to about 3000 in 2003. However, NGO activities appear to have remained poorly coordinated among each other and with government, which has led to duplication of efforts. NGOs are also largely urban based, with lower coverage in rural areas. Not all of these NGOs are concerned with gender issues, and among those that are the majority are women specific interest groups which seek to address women's practical gender interests only and are thus not challenging the status quo of gender relations. However, the 1990s has witnessed a shift with some NGOs beginning to address access to decision-making, governance, law and economic development. The lead organisations have, unfortunately, serious human resource constraints preventing them from adequately addressing inequalities.

3.2.11 Most NGOs are unable to fully implement their programmes due to inadequate funding. Donor funding of gender equity programmes is patchy and inconsistent. Some donors prefer to fund gender within particular fields rather than on its own. Many gender initiatives are not considered 'serious' and therefore do not attract funding; even if funding is secured, financial uncertainty continue until the projects/programmes are completed. Moreover, project funding does not adequately cover the operating costs of NGOs. Many NGOs and CBOs also do not have the capacity to meet the requirements of donor funding, including capacity to access and complete forms and present project proposals.

3.2.12 Given the weaknesses of the national machinery, the NGO sector effectively implements most of gender policies and strategies, and also drives policy development and legal reforms. Overall, NGOs are clustered in the areas of micro-finance, agriculture and food security, HIV/AIDS, women's political empowerment and GBV. They are generally less active in the infrastructure sub-sectors and the environment. Health and education has many donors supporting the sectors through SWAps or sector budget support. This means that their ability/willingness to fund NGO-led projects is restricted. At the same time NGOs have difficulties accessing funds from government.

3.2.13 Kenya also has a vibrant *women's movement* which emerged with the opening of the political system. At the grassroots level Kenya has seen a formidable plethora of more informal women's groups, traditionally as collective self help organisations, providing economic and labour assistance to women during childbirth and in family crisis. The formation of women's groups was encouraged by the government as a development strategy with registration to *Maendeleo ya Wanawake*. In 2005 some 1,333,135 women's groups with a total membership of over 5 million existed. Women's groups typically support various income generating activities, promote education activities and assist members in times of crises. Many also act as informal savings and credit groups ('merry-go-rounds'). Together with the NGOs women's groups have helped raise the status of women. However, critics have suggested that the thrust of the women's movement has also been diminished by the lack of unity and division along political party lines.

3.3 Legal Framework

3.3.1 Kenya has a dual legal and regulatory framework in which customary, religious and statutory laws exist side by side. According to Kenya's customary law, land is communally owned but the right to use it is passed through the male line. Several cultural practices, in particular polygamy, widow inheritance, early marriage and female genital mutilation, are strong factors that keep women subjugated, particularly in rural areas. Moreover, the constitutional provision against discrimination does not overrule customary laws, with the result that they are frequently applied, particularly in rural areas where legal literacy is lower. Women's access to and control over property is governed by three types of law, namely the matrimonial, family and succession laws. Since Kenyan law recognizes African Customary, Muslim, Hindu and statutory marriages, not all marriages need to be registered, with the result that some women find themselves inadvertently in polygamous non-statutory marriages where they are deprived of property and other rights.

3.3.2 The **Constitution of Kenya** provides in section 70 that every person in Kenya is entitled to the fundamental rights and freedoms of the individual, whatever his/her race, tribe, place of origin, residence, political opinions, colour, creed or sex. Section 82 (1) of the Constitution provides that no law shall make any provision that is discriminatory either of itself or in its effect. However, subsection (4) also states that citizenship, matters of adoption, marriage, divorce, burial and inheritance and customary law can be exempted from the clause. Furthermore, the Kenyan Constitution does not extend full citizenship to women because they are not entitled to pass their citizenship either to their spouse or their children. The law also requires married women to seek the permission of the husband when obtaining a national identity card.

3.3.3 In 2005 Kenyans rejected the adoption of a new constitution in a referendum. The rejected constitution, the result of a long consultation process, would have provided for many salient gender equality goals, such as the right of men and women for equal treatment and equal opportunities in political, economic, cultural and social life. It would have removed the inequalities that still exist with regard to inheritance and property ownership. It would have addressed the fact that culture, tradition and custom still override constitutional provisions. The new constitution would also have required Parliament to promulgate the Marriages Act. The challenge now remains to ensure that the gains realized in the proposed Constitution are included in the final Constitution.

3.3.4 However, Kenya has also promulgated a number of laws which seek to remove discrimination. Amongst these we find the **Children's Act of 2001** which is intended to give effect to the principles of the Conventions on the Right of the Child (CRC) and the African Charter on the Rights and Welfare of the Child. The Bill makes early marriages illegal, it prohibits Female Genital Mutilation (FGM) for girls under 18 years of age, and it seeks to assure the rights of children to survival, medical care, and education. Consequently both boys and girls have been accorded equal education opportunities through free primary education. In addition, Family Courts have been established as a Division of the High Court. The family court system was a milestone in helping women access justice particularly with regard to matrimonial disputes, property division, succession and inheritance. However thus far the family court exists in Nairobi only, making it inaccessible to many.

3.3.5 A comprehensive **Draft National Employment Policy** mainstreams women's rights in employment and bans child labour. In addition, a task force which has been appointed to review labour laws also intends to address gender imbalances in employment and labour practices. The

Public Officer Ethics Act, 2003 passed to guide the conduct of public officers, also includes an elaboration of what constitutes sexual harassment.

3.3.6 The **Domestic Violence (Family Protection) Bill** is due for reintroduction into parliament, and provides for judicial intervention in cases of domestic violence, including physical, sexual, psychological harassment, intimidation and destruction of property. The **HIV Bill** has also been revised, and provides for criminalization of the deliberate spread of HIV/AIDS by infected people to non-infected partners, and eases access of HIV/AIDS affected persons to services such as life insurance. The enactment of the **Criminal Law (Amendment) Act No. 5 of 2003** has made provisions for stiffer sentences for sexual offences. The enactment of the **Sexual Offences Act (2006)** and the proposed **Sexual Offences Bill (2006)** amend and consolidate the law relating to sexual offences and make it easier to access justice, broadening the definition of rape and defilement and gives guidelines for sentences. The Bill also establishes the legal age at which one can consent to marriage as 18 years. However, until now law enforcement lacks the skills and the capacity to deal with sexual offences in an adequate manner. Gender Desks and Child Protection Units which have been established in a few police stations must be expanded to all stations if laws against gender violence and child abuse are to be effectively addressed.

3.3.7 The drafting of the **Marriage Bill (1993)** is intended to harmonize and consolidate all the substantive marriage laws, including those on divorce, alimony and maintenance and fuse them into one statute. This is expected to provide one simplified procedure in matrimonial suits and gives equal recognition by law to all four types of marriages. The **Matrimonial Property Bill (2005)** is intended to make provisions for married persons, including women, to own, access, control and dispose of property including the rights and liabilities over the matrimonial property.

3.3.8 The **Law of Succession (Amendment) Bill (2005)** is intended to amend the discriminatory provisions in the law of **Succession Act (1972)** and has brought substantial changes to African customary law in matters of succession in that it makes no distinction whether a child of a deceased person is a girl or a boy, married or not. Yet, despite its provisions the Act has been neglected by the fact that the customary principal of patrilineal inheritance is still applied. Moreover, women can only make a will with regard to property that they effectively own, while most matrimonial property remains registered in the husband's name. For most Kenyan women, customary laws are therefore still applied. The result has been "property grabbing" of relatives of the deceased husband which often leave women and female children without the means and place to live and grow food. Both the Matrimonial Property Act and the Law of Succession Bill will help redress this injustice. The **Penal Code** deals with various aspects of prostitution. However, its provisions are biased against women as it targets commercial sex workers, while those soliciting their services go unpunished. There are no specific laws relating to clients of commercial sex workers. In a number of swoops where a few male clients have been arrested, they were released later.

Box 2: The legal exigencies of the HIV/AIDS crisis

The HIV/AIDS pandemic has created new exigencies for the speedy reform and application of new laws, particularly those pertaining to succession and inheritance as well as women's land rights. It is well recognized that women and girls are affected and infected with HIV/AIDS in greater numbers. Many more are left as widows, and will be deprived of property and a house to live in, which will also affect their children. Orphaned girls are also most likely to be left without means, and both widowed women and children are in particular need of land and other means of production. Elderly women left with orphaned children are in a similarly vulnerable situation. More equally applied legislation regarding property and inheritance right are expected to substantially mitigate the consequences of HIV/AIDS.

3.3.9 The effectiveness of laws, however progressive, is largely dependent on their being applied, which is not always the case. With limited education women often do not know their legal rights, they have limited financial means and capacity to enforce them in court and they fear that taking legal action alienates them from their families. The more easily accessible informal system by contrast is biased against them and its decisions are not enforceable. This lack of access to justice is in itself an injustice. New legislation in particular needs to be disseminated, particularly among those whose status it will improve. Included in the sensitization and training also need to be men, political and religious leaders and law enforcement officers, be they lawyers, judges, court orderlies, police or medical doctors working for the police. Since it is normally believed that women's access to the formal legal system increases when they obtain marriage certificates, women need to be also informed about the registration of births, joint titling and registration of property and the writing of wills. Women need to be sensitized about the advantages of the formal legal system and the procedures for registration and will writing need to be simplified.

3.3.10 Kenya has three systems of land tenure systems with its concomitant **Land Rights** which are individual (freehold), public, communal (customary) and religious based. In certain contexts, and particularly with regard to women's rights, the different laws contradict each other, resulting in a situation where the law that gives women rights to land is negated by the other law. Registered freehold land ownership in rural areas in Kenya between men and women has been estimated between 95-99% for men and 1-5% for women. Women own 1% of registered land titles, with 5% of registered titles in joint names. Individual title confers security of tenure by registering the absolute rights of ownership to the holders after adjudication. The Registered Land Act, for example, applies to land formerly held under customary law. While the provisions of this Act are gender neutral, they exclude many women from acquiring titles to land because they only have rights of use while men have rights of allocation. The public tenure system applies to land owned by the government or associated statutory bodies. Under this tenure system, the right to control, apportion and use such land is vested with the state which may confer the right of occupation and use for a given period, usually 99 years. This is generally subject to conditions of use and payment of rent. Communal land tenure is found mainly in the Arid and Semi-arid Lands (ASALs). It concerns land held in trust by the respective county councils for different ethnic groups. Trust lands are governed by customary law, which does not provide for subdivision of land among individuals of the user communities or alienation and transfer for individualized use.

Box 3: The Draft National Land Policy

This draft policy was formulated through a widely consultative process and aims to guide the country towards a sustainable and equitable use of land. It addresses critical issues of land administration, access to land and land use, planning, restitution of historical injustices, tenure and a host of other concerns. The policy acknowledges that customary practices discriminate against women in relation to land ownership and inheritance, and that women are not sufficiently represented in institutions which deal with land, and that their rights under communal ownership are not defined allowing men to dispose of family land without consultation. The Policy adheres to non-discrimination in land distribution, embraces the protection of marginalized groups and promises to enact specific legislation governing the division of matrimonial property and protect the rights of widows, unmarried daughters and divorcees. The policy also advocates for education campaigns which encourage the abandonment of cultural practices which bar women from inheriting family land.

3.3.11 Given the patriarchal nature of Kenyan society, and the adherence to customary law in which land is communally owned but the right to use it is passed on through the male line, women's access to and control over land is very limited. Women in Kenya do not inherit land and in most cases they are not able to purchase land. Matrimonial property including land is registered in the name of the husband. Problems arise after his death, or during separation or divorce. Instead of the widow inheriting the land, in most communities the sons remain the legal heirs to the property. The widow only enjoys occupancy rights, which cease when she remarries. Discrimination against women in the area of land ownership presents itself in customs and traditions of most ethnic groups. It is believed that women cannot own land and have no right to make decisions over the use of land. This discrimination occurs even though women work on land more than any other category of people in society, providing 80%-90% of labour in subsistence production and over 70% of labour in cash crop production in Kenya.

4. GENDER ANALYSIS BY SECTOR

4.1 Macro Economic Framework, Employment and Productive Sector

4.1.1 Kenya's economy is dominated by agriculture and forestry, transport and communication, manufacturing, wholesale and retail trade which contributed 56.4% to total GDP in 2005 and accounted for 62.6% of total GDP growth. Agriculture continues to be the main driving force of the economy with 75% of the population depending on the sector for their livelihood. The sector contributed 24.2% to the GDP. GDP growth performed better than targeted by recording 3.0% growth in 2003, 4.9% in 2004 and 5.8% in 2005, all of which were above the Economic Recovery Strategy (ERS) targets by 0.7% in 2003, 1.2% in 2004 and 0.7% in 2005.

Box 4: Kenya's PRSP Process and the ERS

Kenya presented its Interim Poverty Reduction Strategy Paper to the IMF and the World Bank in 2000. A Full Draft PRSP produced in November 2002 was not submitted due to the elections and change of government in the same year. Instead the new government developed its own Economic Recovery Strategy for Wealth and Employment Creation, which draws on the Draft PRSP but also reflects its own priorities.

4.1.2 Tourism has in the last three years experienced tremendous growth, exceeding ERS targets by 25.6 and 6.0% in 2004 and 2005 respectively. Tourism earnings grew by 27.0% from KSh 38.5

billion in 2004 to KSh 48.9 billion in 2005. The sector's remarkable performance was attributed to the vigorous marketing of the country by both the government and the private sector. The sector employs 45,000 women in the formal sector. Of the 360,000 people employed in the informal sector, many are women producing and selling handicrafts to tourists.

4.1.3 Kenya has one of the most diverse financial systems in Africa, including 41 commercial banks and several thousand savings and credit co-operatives (SACCOs) as well as many specialist micro finance institutions. The capital market is also relatively well developed by African standards, with the Nairobi Stock Exchange being one of the most active in the region.

The Budgeting Process

4.1.4 An analysis of the planning and budgetary process reveals the challenge of non-inclusion of gender concerns in the budget. The process does not require the use of gender disaggregated data in the preparation of annual estimates through which Government revenue is applied and distributed. The Kenyan Gross Domestic Product (GDP) has over the years been calculated as the sum of non-monetary and monetary economies. However, the non-monetary economy paid little attention to work done in forestry, fishing, building and construction, water collection and housing, activities that are largely un-remunerated and done by women.

4.1.5 The investment programme is also not responsive to the needs of men and women. It should have required departments and line ministries to consider the impact of their budgetary allocations on men and women. Financial Planning should be based on gender disaggregated data. The budget strategy paper, which was intended to outline priority needs, greatly improved the planning process, but gender mainstreaming in all ministries through technical and financial support is still lacking. Given that nearly 60% of productive activities performed by women in Kenya are not captured by national statistics compared with only 24% for male activities, budgetary allocations and policy prioritizations cannot be gender sensitive.

Employment

4.1.6 Results of the 1999 Kenya Population and Housing Census confirmed that women comprise over 51% of the total population and over half of the labour force. Wage employment is considered the most lucrative form of economic activity, in comparison to working on family business or family holding. The 2003 Demographic and Household Survey (KDHS) revealed that 72% of men and 58% of women were employed at the time of the survey. Of the number of women employed, divorced, separated or widowed women are most likely to be employed (76%), followed by married (65%) women. Married men, by contrast, were more likely to be employed than divorced, separated or widowed men.

Table 1: Wage Employment by Industry by Sex: 2000-2003 ('000s)

Employment Sub-sector	2000			2003		
	Male	Female	Total	Male	Female	Total
Agriculture	234.7	77.6	312.3	237.5	78.5	316.0
Mining and Quarrying	4.1	1.1	5.2	4.2	1.2	5.4
Manufacturing	181.1	37.5	218.6	199.6	141.1	241.7
Electricity	18.9	3.9	22.8	17.3	3.8	21.1
Building-Construction	73.6	5.0	78.6	71.7	4.9	76.6
Trade Restaurant Hotel	113.2	42.3	155.5	119.1	43.6	162.7
Transport and Communication	66.9	17.3	84.2	69.3	17	86.9
Finance Insurance Real Estate Business Service	63.2	21.8	85.0	61.7	21.6	83.3
Community, Social and Personal Services	-	-	-	-	-	-
Public Administration	102.5	58.6	161.1	94.2	55.6	149.8
Education Services	181.4	135.4	316.8	185.1	141.0	326.1
Domestic Services	60.3	39.9	100.2	58.8	39.0	97.8
Other Services	94.9	60.2	155.1	98.1	62.1	160.2
TOTAL	1094.80	500.6	1695.4	1216.6	511.0	1727.6
Of which regular	989.0	402.5	1391.5	995.8	394.7	1390.5
Casual	205.8	98.1	303.9	220.8	116.3	337.1

Source: Economic Survey, various issues

4.1.7 Although male labour force participation rates have generally remained higher than those for females, the gap is gradually narrowing. The Government undertook to enhance the participation of women in both labour force and employment with the directive in 2006 that 30% of all new posts in the public sector should be filled by women. The country has recorded some level of success, but women's labour force participation rates need to be further increased. Table 1 below shows the gender gaps in employment of all major sectors.

4.1.8 The proportion of women employed in both formal and informal sectors has slightly increased from 26.2% in 2000 to 29.5% in 2005. However, women's participation in wage employment in both formal and agricultural sectors stagnated in the period 1998/2005 rising from 29.3% of total wage employment in 1998 to 29.5% in 2005 only. The decline of Public Sector expenditure in 2005 and the slow growth in the economy made the employment prospects look very bleak for 2006 and beyond.

Informal Sector (Jua Kali)

4.1.9 The main activities of the informal sector include tailoring, carpentry, blacksmithing, retail shops, groceries and kiosks. Overall, 71% of industries are located in rural areas with trade and manufacturing leading. The number of male-owned enterprises has been higher than female-owned ones in rural areas, while in urban areas female-owned enterprises pre-dominated. Overall male-owned enterprises were leading only slightly with 56.6%. In 1999 close to 1.3 million Micro and Small Enterprises (MSEs) employed 2.3 million people (20% of the country's total employment) and contributed 18% of overall and 25% of non-agricultural GDP. The same year's estimates suggested that 14.5 million are employed, 75% are self-employed, working for profit or family gain, but receiving no salaries or wages. A large proportion of surplus labour is continuously joining the

informal sector. However, a closer look reveals that most informal sector enterprises are family owned, with minimal employment creation for people outside the family.

Women Owned Businesses

4.1.10 Women's businesses in Kenya predominate in food processing, clothing, agro-processing, horticultural, retail, entertainment and other manufacturing sectors. Ownership by gender shows that women constituted 47.7 % of all MSE owners in 1999. Female-owned MSEs are smaller than male-owned ones, with 86% of the labour force being owner-operators and only 4% being hired workers. For male-owned enterprises, 68% are owner operators, while 17% are hired workers. Nationally, about 70% of the MSEs are one-person units, out of which 40% are sole traders. Less than 1% employs more than 11 workers, with trade being the dominant sector, accounting for 70% of the total labour force found in MSEs. The gender distribution of the MSE labour force shows that about 53% is male. More women are getting into the sector, but most of them enter as sole traders, a category that has the lowest potential for employment generation and expansion. Thus despite their potential, women-owned businesses in Kenya are smaller, and are twice as likely to be operating from home as are male-owned businesses. They earn only 57% of income of male-owned businesses.

4.1.11 Although the Kenyan MSE support infrastructure is better developed than in neighbouring countries, there is little evidence that the role of women entrepreneurs in the MSE sector is also more advanced. In fact, gender equality issues in the cultural and legal environment must be dealt with, particularly with regard to laws pertaining to land ownership and inheritance which condition women's lack of access to finance. Instead, many women rely on savings and on contributions from family members, including husbands, which potentially compromise their control and decision making. Selected Micro Finance Institutions (MFIs) target women and have helped many expand their micro enterprises.

Micro Finance

4.1.12 It is estimated that there are 3.8 million Kenyans depending entirely on NGOs for financial services, while another estimated 1.1 million depend on informal associations and groups for similar services countrywide. The 2005/6 KIHBS estimated that only 30.7% of all Kenyan households are able to access credit, with little difference between rural and urban households. However, North Eastern province showed an access rate of only 3.5%. Only 10.4% of the Small and Medium Enterprises (SME's) currently receive credit and other financial services. The formal banking sector in Kenya has excluded the informal sector as too risky. In 2003 an estimated 3,460 legally constituted microfinance service providers existed, including 3,397 savings and credit co-operatives, 56 MFIs, four commercial banks, two building societies, and the Kenya Post Office Savings Bank. In addition, 17,305 rotating savings and credit associations (ROSCAs), 115,884 registered women groups, and 1,342 primary agricultural producer and marketing cooperative societies were also involved in providing credit. One hundred and fifty organisations, 130 of them NGOs, delivered micro-credit in Kenya in 2004. They were concentrated in urban areas.

4.1.13 Women make up 30-40 % of the microfinance clients. By far the most popular sources of finance for women are loans from their neighbours, Savings and Credit Cooperatives (SACCOs) and informal saving clubs. The approach used by most MFIs is the group-based, mutual guarantee approach that also enforces savings. As elsewhere, women who would need middle level lending

facilities to expand beyond the micro-enterprise to medium scale businesses level with larger capital needs find that opportunities for them are particularly constrained because MFIs have lower lending ceilings and commercial banks consider women a high risk, or their demand for collateral cannot be met. In 2006 and 2007 respectively the government established a KSh 2 billion Women Enterprise Development Fund and a KSh 5 billion Women Investment Fund aimed at helping women entrepreneurs move out of the informal sector into the formal sector. The availability of these funds has encouraged the interest of intermediary finance institutions to target women entrepreneurs with special loan products.

4.1.14 The ERS paper identifies microfinance as an important factor of economic recovery, and it plans to facilitate its development. Key among the measures has been the adoption of the *Finance and Microfinance Bill 2006* in January 2007, which has provided a legal and regulatory framework for the industry. The bill requires all MFIs to submit to mandatory audits from the Central Bank of Kenya (CBK) and it imposes fines of up KSh 1 million (equivalent to USD 14,376) for non-compliance with the guidelines. It is believed that the new regulations will protect clients from bogus MFIs.

4.1.15 With the multiplicity of roles played by women, they tend to be “time poor,” combining family duties with running their businesses, and with limited access to financial resources, women may be less likely to register their businesses. Yet, evidence indicates that women may respond well to simplified registration procedures. Business licensing requirements are onerous and are for some activities such as registration of business names, centralised in Nairobi. The Single Business Permit system which was launched in 1999 is not yet fully operational and the fees charged are considered to be prohibitive. This forces many businesses to stay informal. In addition by-laws applied by local authorities are not standard and may be applied for punitive rather than facilitative reasons.

4.1.16 The donor community has begun to address women entrepreneurs’ lack of access to training, business skills and finance. The recently established ADB Growth-Oriented Women Entrepreneurs (GOWE) US\$10 million guarantee fund will allow women to access financing from four banks and technical assistance. The GOWE programme also builds business and financial management skills. In addition, the IFC SME Solutions Centre (SSE) is providing technical assistance to complement debt and equity funds managed by business partners as part of the World Bank Group’s MSME programme which is targeting 33% women. The Centre also houses an Information and Communication Technology (ICT) resource centre with digital and video conferencing facilities for use by SMEs, and collaborates with other stakeholders in addressing the legal and regulatory constraints facing SMEs. Important too is the African Growth and Opportunity Act (AGOA) (2000), of which Kenya benefits. It gives duty and quota free access to U.S. markets until 2008. AGOA also places special emphasis on supporting women entrepreneurs as agents of change promoters of indigenous technologies and mobilizers of local financing. This is especially crucial as rural women have been enabled to export hand loomed items duty free to the U.S.

4.1.17 In addition a number of private sector providers are key stakeholders in the sector. NGOs including Women Entrepreneurs and the Organization of Women in International Trade (OWIT), promote the advancement of women in trade and business. It was through the demand of OWIT that the Ministry of Trade and Industry in 2004 created a Gender Unit, which engages with women business owners and relevant NGOs. The Gender Unit has resource constraints, both in terms of personnel and finance, even though it has a huge potential to become an important source of support for women entrepreneurs.

4.2 Agriculture Sector

4.2.1 The Kenyan economy is based on agriculture, with 70% of the Kenyan population deriving their livelihood from an estimated 3 million agricultural holdings. They are mostly small family farms with areas between 0.2 to 12 hectares, which contribute 70% to the marketed agricultural production. Estates dominate in tea, coffee, sisal, sugar cane and other export crops while the smallholder sector is more oriented towards food crops, vegetables and dairy production, constituting 95% of all the farms. All agro-ecological zones of the tropics can be found. Land scarcity is a common feature of smallholder production systems particularly in the high potential areas and the average land holding size is only 1.7 hectares, with parcels being continuously subdivided, and only 39.4% of farming households hold title deed to their land. Title deeds enable farmers to cultivate without fear of eviction and they can use the land as collateral against financial loans. Women only hold between 1-5% of land titles and therefore have almost no access to land of their own. However, women play an important role in agricultural production, contributing up to 80% of all labour in food production and 50% in cash crop production while receiving only 7% of agricultural extension information. In addition to the labour contribution, women are increasingly acting as farm managers and heads of farm households. It is estimated that over 40% of all smallholder farms are managed by women.

4.2.2 The ERS strongly depends on improvements in the productive sectors including agriculture. Interventions focus on providing a single enabling legislation to replace the large number of existing legislations in the sector, rationalizing roles and function of agricultural institutions to increase efficiency and empower resource poor farmers, strengthening extension services, revamping the cooperative movements and increasing smallholder access to credit. The Ministry of Agriculture launched the *Strategy for Revitalizing Agriculture (SRA)* in March 2004 as a *National Policy for Steering Development in the Agricultural Sector in Kenya* for the period up to 2014. The SRA seeks to raise agricultural sector growth to an average of 3.1% during 2003-2007 and to 5.0% thereafter. The SRA also seeks to contribute to the achievement of the MDGs by reducing the proportions of the population below the absolute poverty line from 56% in year 2000 to 26% by 2010 and food poor from the current 50% to 25% by 2015. The overall objective of the strategy is to raise household incomes, create employment and ensure food and nutrition security as well as empowering farmers through farmer organizations in accessing inputs, services and output markets, promotion of value addition and agro processing and provision of financial services.

Crop production

4.2.3 According to the 2005/6 KIHBS 4,436,212 million households (68.8%) are directly involved in crop farming activities. Maize is the most important crop in Kenya, comprising 90% of all agricultural production and utilizing 48% of the total cropped area. Other important crops are beans (61%), cowpeas (14 %), potatoes (14%) and Sorghum (11%). Cash crops include coffee, tea, pyrethrum, flowers and horticulture. Small-scale farmers dominate Kenya's agriculture and account for 75% of total agricultural output and 70% of marketed agricultural production. Small-scale farmers produce over 70% of maize, 65% of coffee and 50% of tea. Agricultural production is carried out on farms averaging 2-3 hectares mainly for subsistence and commercial purposes. Use of quality inputs and equipments such as hybrid seed, fertilizers, pesticides and machinery is very low.

4.2.4 Maize production is wholly dependent on rainfall, while only 17% of the country is suitable for rain-fed crop production. Despite the great efforts made to increase maize production, importation of large quantities of maize grain is necessary. The bulk of the small-scale farmers who do not apply fertilizers or manure obtain yields ranging between 1.1 and 2.5 mt/ha. There is limited scope for expanding cultivated land under maize production since unused land is diminishing or unsuitable for maize production. Traditional farming practices are no longer capable of meeting Kenya's maize requirements and consequently, widespread application of scientific methods is essential. With little decision making powers and limited financial benefits, rural women are discouraged in investing labour in cash crop farming traditionally controlled by men. This hampers productivity. The multiplicity of roles played by women and their heavy workload has negative effects on women's health further decreasing productivity. Women's empowerment is therefore an important part of raising agricultural productivity.

4.2.5 Many cash crops which have been controlled by men have suffered slumps in producer prices, such as coffee, or have been negatively affected by mismanagement of parastatal marketing boards, such as pyrethrum², with the result that former cash crop fields have been planted with food crops, grown by women to feed the family. Moreover, the decline of cash crops, coupled with problematic access to arable land, infrastructure and marketing, has led to a diversification of rural livelihoods, with 36% of incomes of rural households now coming from off-farm activities such as casual labour, petty trading, brick-making and beer brewing. According to the authors of the World Bank Draft Country Social Analysis, responses to the changing rural livelihood system has been highly gendered to the effect that male-centered occupations, such as cash-crops, pastoralism and migrant labour have been eroded while new opportunities, such as food crops, petty trade and beer brewing have favoured women, leading to an economic marginalisation of men and the burdening of women with ever more tasks.

Livestock

4.2.6 Sixty-six percent of all Kenyan households own livestock (84% in rural areas), and 60 % of households own cows. Livestock comprises camels (0.83 million), cattle (14 million), donkeys (0.4 million), goats (7.4 million), sheep (5.6 million), pigs (0.1 million) and poultry (25 million). The livestock sector contributes 3.3% of the GDP and includes mainly dairy and meat production, eggs, hides, skins and wool from cows, sheep, goats and poultry. Red meat, comprising beef, mutton, goat and camel, accounts for over 80% of all the meat consumed locally. About 67% of the red meat is produced in the ASALs under a pastoral production system. Pastoralists consequently own 70% of the national livestock herd, estimated at about 9.7 million beef cattle, 9.6 million goats, 8.3 million sheep, and 0.8 million camels. White meat, which includes poultry and pig meat, accounts for 19% of the meat consumed in the country.

4.2.7 Even though livestock ownership and control is seen as the domain of men, women also own livestock, particularly chicken and small ruminants. Drought and other socio economic factors have brought changes in socio-cultural and socio-economic practices of pastoral communities. Due to the significant decimation of cattle and other animals, women have started to play more active economic roles to ensure family survival: they participate in alternative socio-economic activities such as beekeeping, camel rearing and trading in small livestock as well as non-livestock products such as

² Kenya was the world's largest producer of pyrethrum flowers, used for the manufacture of insecticides until the 1990s when production stood at 18 000 tonnes. By 2006 production had fallen to 1000 tonnes because farmers abandoned the crop since they were not paid by the marketing board.

hay, mats, charcoal, clothing and vegetables. Women use the proceeds of such activities to pay their children's school fees, medical needs or to reinvest in livestock.

Fisheries

4.2.8 The Nile Perch generates Kshs. 4.6 billion per year in foreign exchange earnings, while the local fish production generates another Kshs 2.4 billion. The country has the potential to produce over 175,000 Metric tonnes of fish from the Indian Ocean in the Exclusive Economic Zone (EEZ). Currently, less than 10% of this potential is realized. It is, however, estimated that over 100,000 metric tonnes of illegal fishing occurs in the Indian Ocean waters, mainly through unlicensed fishing vessels. Lake Victoria accounts for about 90% of total fresh water fish production in the country and already maximum exploitation of the lake has been attained, supporting 37,000 fishermen. Other lakes are not as rich in fish. Women occupy a central place in the fishing sector. They represent 70% to 87% of Lake Victoria workers active in the fish trade. The fisheries sector around Lake Victoria is characterized by a high participation level of single, divorced, separated and widowed women. The participation of women in fish marketing has been spurred by cultural, social, economic and political factors. However, women do not participate in actual fishing on vessels.

Gender Division of Labour

4.2.9 Even though both men and women work in agriculture, gendered divisions of labour exist. In crop production, men and women are responsible for the production and disposal of different crops or livestock. Women also specialize in the some production activities and participate with men in others. In some areas, men and women produce the same crops, but in separate fields, either for subsistence or commercial use. Separate tasks may also be assigned within the cropping cycle (or in livestock production) by gender. In Africa, in general, women perform about 90% of the work in food production (80% in Kenya), 80% of the food storage and transport from farm to the home, 90% of hoeing and weeding and 60% of harvesting and marketing. They are also responsible for the provision of household water and fuel.

4.2.10 In subsistence and/or small-scale commercial farming, women contribute higher labour inputs than their husbands or children. Women and their younger children traditionally are responsible for land preparation, planting, weeding, scaring birds and other animals, harvesting, threshing and winnowing and post harvest storage and processing. In crop production, women are responsible for ensuring food security of their families. Thus they mainly engage in the cultivation of food crops, while men are engaged in cash crop production. However, the out migration of men in search of non-agriculture-related employment has made rural women engage more in cash crop production, increasing their work load.

4.2.11 Different communities allocate labour requirements differently. In the pastoral communities, men and male youth are often absent from homesteads as they move with their animals in search of pastures and water. Ownership and control of large animals is the preserve of men, but women also own small ruminants and chickens. Men's work is mainly herd management which accounts for 70% of their time. Responsibilities include planning livestock movements, building enclosures, digging wells, feeding and watering, castration, vaccination, slaughter and marketing. By contrast, within agro-pastoralist communities, over 80% of livestock production activities are performed by women. Women and girls are responsible for cattle, sheep, goats and poultry rearing. They also care for sick animals. Women are often involved in small-scale dairy production where a few cows are

kept, and the marketing of milk takes place at the local level. Large scale dairy farming remains the domain of men, and women's involvement is mainly as family labour. In ASALs, beef production and marketing is the almost exclusive responsibility of men and boys. With the introduction of box-hives, women are now participating in beekeeping at a male to female ratio of 70:30.

4.2.12 Kenyan women work longer hours than men. In some rural areas, water collection consumes up to 40% of a woman's day, averaging between 3 to 5.25 hours. In ASALs in particular, women spend a great portion of their time searching for water and fuel. This is in addition to caring for their children and sick family members, diverse household chores and income generating activities. A 10% increase in female family labour increases output by 2.4%, compared with only 1.5% for male family labour.

Extension services

4.2.13 The provision of extension services is one of the core functions of the MoA. The *National Agriculture Extension Policy (NAEP)* states that male extension workers tend to target male farmers for training and in the allocation of farm inputs. *The National Agriculture and Livestock Extension Programme (NALEP)* confirms that despite recognition of their importance for the sector, women are often left out of extension services. There is no data on the total number of male and female extension officers but most extension officer are men. Using the data of a study undertaken in Kiambu and Kajiado, 87.3% of workers are men. This means that 12.7% of female workers provide services to a rural agriculture population that engages more women than men. In some areas in the country men find it difficult to interact with women while in other areas, interaction is completely impossible due to cultural and religious values and norms. In Maasai communities, by contrast, female extension officers cannot address male farmers unless a male elder gives her authority to speak to men. In addition to the MoA various NGOs provide extension services either through government frontline staff or through their own staff, others provide Farmer Field Schools (FFS) to farming communities, while others provide training, support and awareness on HIV/AIDS as well as the provision of micro finance to farmers.

Gender equity concerns in the MoA

4.2.14 Between 1996 and 1998 the MoA conducted a gender analysis of the Agriculture Sector Investment Programme and found that gender imbalances were rooted in values, norms, myths, taboos and traditions widely accepted by both men and women, and that they resulted in distorted decision making, unequal access to and control over resources (land, capital, agricultural inputs, income), placing a major work burden on women. In fact out-migration of men has led to the paradoxical situation that ownership and decision making remain in men's hands, while the cultivation and management was done by women. Resulting problems included delayed and inappropriate decisions that negatively affect the productivity or health of animals or crops. Due to lack of access to credit and other resources, women also find it difficult to buy inputs such as fertilisers and quality seeds, resulting in low productivity levels. Yields obtained by women farmers could increase by more than 20% if they were given the same level of agricultural inputs and education as male farmers.

4.2.15 The Gender Equity Mobilisation Support (GEMS) unit was established in the ministry in 1999 with the mandate to mainstream gender into the ministry's operations. The unit has four employees and no separate budget line, instead having to compete for funds with other departments.

This has made it difficult for the unit to deliver results that are able to impact the sector. The unit produces various gender related newsletters, gender mainstreaming programmes within extension services and organizes workshops and training programmes. It is very important that GEMS be enabled to monitor the gendered livelihood changes which have been observed in the rural areas so that policy and programmes can address identified problems.

4.3 Education Sector

4.3.1 Spending in the education sector has constituted between 23.7% and 29.6% of budgetary allocations in the last 5 years. The total budgetary allocation rose by 21.7% to KSh 107. 829 Million from 2004/5 to 2006/07. Technical, Industrial, Vocational and Entrepreneurship Training (TIVET) is the only sub-sector where allocations have stayed stagnant. A large share of budgetary allocations has been committed to programmes which seek to address equity, quality, retention and completion rates at both primary and secondary levels.

4.3.2 The Ministry of Education, Science and Technology has adopted a Sector Wide Approach to programme planning, which seeks to improve on national ownership, alignment of objectives, and harmonization of procedures, approaches and coherent financing arrangements. It has also involved broad stakeholder consultations, the results of which are captured in the *Kenya Education Sector Support Programme (KESSP) 2005-2010*. The programme fits within the broader framework of *Sessional Paper No 1(2005) on a Policy Framework for Education, Training and Research*. Education Sector strategies and policies are very well gender mainstreamed, perhaps due to the fact that the Ministry has an active Gender Unit.

4.3.3 The goals of KESSP are based on the rationale of the overall policy goal of achieving Education For All (EFA) and the attainment of the MDGs. The broad objective is to give every Kenyan the right to quality education and training, no matter his/her socio-economic status. Some important strategies are in place to support the overall policy goal. For example, the Ministry of Education has a gender disaggregated database regarding women and girls' education and curriculum and text books are becoming more gender-sensitive. The Government has also directed in 2004 that young women who become pregnant or were subjected to early marriage should be readmitted to school to finish their studies. Moreover, in tandem with this regulation the marriage of school going girls is punishable by law and steps have been taken to promote resources for the poor and marginalized groups. Unfortunately the directive is not always applied. The provision of basic education for nomadic and pastoralist communities has been another concern. Children are gathered together in the *manyattas* (Kraals) for teaching purposes. Both teachers and children migrate together with community/family as and when geographical conditions dictate. These efforts have facilitated the access to education for nomadic communities and particularly for girls.

Box 5: The Goals of KESSP

KESSP aims to enable all Kenyans to have access to quality life-long education and training. It aims to achieve the following objectives:

- *Attain UPE and EFA by 2015;*
- *Achieve a transition rate of 70 % from primary to secondary school, up from 47%*
- *Pay particular attention to girl's education by 2008;*
- *Enhance access, equity and quality of primary and secondary education;*
- *Build the capacity of 45 000 education managers by 2005;*
- *Improve physical facilities and equipment in ASALs and urban slums by 2008;*
- *Develop a strategy for TIVET;*
- *Achieve 50 % improvement in adult literacy; and*
- *Expand public universities and increase students in science to 50%, with at least one third being women by 2010.*

Early Childhood Education and Development (ECED)

4.3.4 Since independence in 1963, the number of students enrolled at various levels of education has substantially increased. Enrolment doubled between 1982 and 2003. However, between 2002 and 2005 gross enrolment rates increased only slightly from 56.8% to 57.9%. Enrolment of girls increased from 13.6 % in 2000 to 56.2 % in 2005 and is now almost equal to the enrolment of boys. It is recognized that the problem with ECED participation is that poor children enter directly into primary school. Other factors hampering the sub-sector include capacity constraints of teachers, limited teaching materials and a lack of clear policies.

Primary Education

4.3.5 The Government introduced Free Primary Education (FPE) in January 2003, which raised the national Gross Enrolment Rate (GER) from 88.2 percent in 2002 to 117.0 (119.1% for boys and 115% for girls) in 2005/6 up from 104.5 percent (108.3% for boys and 102.1 for girls) in 2004.

Table 2: Primary Gross Enrolment Ratio By Sex 1994 – 2004 (in percent)

YEAR	GIRLS	BOYS	TOTAL
1994	87.8 %	89.1 %	88.5 %
1999	88.8 %	90.8 %	89.8 %
2000	90.8 %	91.1 %	91.0 %
2004	102.1 %	108.3 %	104.5 %
2005/6	115%	119.1%	117%

Source: MOEST

4.3.6 Net enrolment rates (NER) in primary school increased overall from 82.1% in 2004 to 83.2% in 2005, with the NER of boys rising from 82.2% to 83.8% in the same period while that of girls increased from 81.1 to 83.2%. Net primary school enrolment rates show great disparity across regions ender, however. In North Eastern Province girls' net enrolment rate in 2005/6 reached only 2/3 that of boys (57.6 boys against 40.3% girls), while in Western Province the NER of girls was higher than that of boys (83.1% girls and 78.2% boys). The NER is higher for girls in all provinces except North Eastern.

4.3.7 Completion rates in primary school show very few gender gaps. Girls and boys manage equally. Overall, completion rates increased from 43,9% in 1994 to 66.5% in 2004, a significant improvement. Boys' completion rates improved from 52.4% in 2001 to 68.2% in 2005, while the completion rate of girls increased from 52.5% to 66.6%, almost equal to that of boys. Slightly more boys than girls repeat classes. In 2003, the repetition rate for boys was 10.1 percent against 9.4 percent for girls. Generally, repetition rates declined from 9.8% in 2003 to 0.1 % in 2005 while the drop-out rate decreased from 4.9% to 2% in the same period. There thus does not appear to be a great problem with repetition and drop-out at the primary level, and it appears larger for boys than for girls. While precise data was not available, the higher repetition and drop-out rate of boys might be due to responsibilities as herders in nomadic societies, which boys assume at an early age.

4.3.8 Transition rates from primary to secondary schools are generally not very high, but they have improved over the years and have not shown marked gender disparities. Transition from primary to secondary level increased from 43.3% in 2000 to 57% in 2005 and the current trend has been estimated at 60% by 2007. The increase has been due to various expansion initiatives including an increase in class size from 40 to 45 pupils, the provision of extra streams and bursaries for needy students. It is expected that the transition rate will further improve to 70% in 2008.

Secondary Education

4.3.9 Enrolment in secondary education rose significantly from 30,000 students in 1963 to over 934,250 students in 2005. The number of public secondary schools has also increased from 151 at independence to 3,661 today. However, based on the 1999 census, a total of 2.8 million boys and girls aged between 14 and 17 years who should have been in secondary school were not enrolled. Pressure to substantially expand secondary education facilities due to the larger number of students that will be passing through primary school following the introduction of FPE, combined with government's stated policy intent of increasing the transition rate from primary to secondary level to 70%, is evident. However the sub sector is still faced with problems of access, equity and quality. GER at secondary level stood at 40% in 2005/6. NER never exceeded 20% since 2000, and stood at 19.8% in 2005.

4.3.10 Gender gaps in secondary education increase by comparison to the primary level. The GER of boys at 42.2% against 37.7% for girls suggests that boys stay in secondary school longer. While overall the NER of boys and girls does not differ much (17% boys against 19.2% for girls), gender disparities do exist by gender and province. In North Eastern Province with its largely Nomadic population NER is extremely low for boys and girls but the rate for girls is half that of boys (8.6 % for boys and 4.4% for girls in 2005/6). However, in Nyanza Province girls outnumber boys in net enrolment by over 4 percentage points (16.2% for boys and 21.5% for girls in 2005/6). Girls also do slightly better than boys in Eastern, Central and Rift Valley Provinces.

4.3.11 Completion rates at secondary level have not changed significantly since 1994 when it was 82.2%. In 2004 it had risen to 87.9% only. While the completion rates of boys are slightly higher than that of girls at 88.3% they have declined from 95% in 2003 thus narrowing the gender gap. The reasons for higher drop out rates for girls are largely connected to the high cost of schooling coupled with poverty, unfriendly school environments for girls and socio-cultural factors. Thirty percent of pupils drop out of secondary school because the unit cost of attending is five times higher than that of primary school. Girls will be withdrawn first when finances do not suffice.

Table 3: Secondary School Completion Rate By Sex, 1994-2004(in percent)

YEAR	GIRLS	BOYS	TOTAL
1994	81.9 %	82.3 %	82.2 %
1998	83.1 %	85.8 %	84.5 %
2000	88.4 %	93.1 %	90.9 %
2001	93.7 %	96.6 %	95.2 %
2002	89.7 %	94.4 %	92.1 %
2003	86.6 %	95.0 %	91.1 %
2004	87.5 %	88.3 %	87.9 %

Source: MOEST

Tertiary Education

4.3.12 The last two decades were marked by a phenomenal growth in university education. Through the efforts of the public and private sectors, 7 public and 19 private universities were established. Enrolments increased accordingly from 59,195 students in 2000/1 to 91,541 in 2005/5. However, the transition rate from secondary to university level is still very low at 12%. Enrolment in public universities is characterized by wide gender disparities in favour of males. In 2004, female students made up only 36.2% of the total enrolment. Further, female enrolment in technical and science degree courses is very low. For example, at the University of Nairobi, for the academic years 2002/2003 to 2004/2005, females constituted only 16.1 percent of those enrolled in the Bachelor of Architecture and Bachelor of Computer Science degree programmes respectively.

Table 4: Public Universities Enrolment including part time by sex, 2000-2005

Year	Female	Male	Total	% Female
2000/2001	17260	33,444	50704	34.0 %
2001/2002	23,040	39,637	62677	36.8 %
2002/2003	24957	46875	71832	34.7 %
2003/2004	25,462	47,088	72,550	35.1 %
2004/2005	28,097	53,394	81,491	34.5 %

Source: Joint Admission Board

Table 5: Private Accredited Universities Enrolment by sex, 2000 -2005

Year	Female	Male	Total	% Female
2000/2001	4,050	3,093	7,143	56.7 %
2001/2002	4,089	3,122	7,211	57.7 %
2002/2003	4,163	3,476	7,639	54.5 %
2003/2004	4,371	3,650	8,021	54.5 %
2004/2005	4,546	3,796	8,342	54.4 %

Source: Joint Admission Board

4.3.13 The situation of female enrolment in accredited private universities is different from that of the public universities. Since the 2000/2001 academic year, enrolment of females has been higher than that of males and reached 53.1% of the total enrolment in the 2005/6 academic year.

TIVET

4.3.14 Enrolment in TIVET institutions increased from 40,622 in 1999 to over 66,500 in 2004, with females constituting 49.1 percent of the total enrolment. However, female student's enrolment has

been highest in youth polytechnics and lowest in national polytechnics. Between 1999 and 2004, female enrolment in youth polytechnics was over 50% of the total number of students enrolled. The highest female enrolment in technical training institutes was 45.7% in 2004. However, female enrolment in national polytechnics has not surpassed 39% between 1999 and 2004. Further, female enrolment in SMT-related courses in TIVET institutions is extremely low. In 1998, it stood at only 1.4% in mechanical engineering, 4.4% in electrical and electronic engineering, and 5.0% in building and civil engineering.

Adult education

4.3.15 According to the 1999 Population Census Report, the number of illiterate Kenyans stood at 4.2 million, with 61.1% being women. A Multi-Indicator Cluster Survey in 2000 showed that out of women in age group 15-24 years, 80.7% were functionally literate compared to 79.8% of men. In 2005/6 11.6 % of men and 22.3% of women considered themselves illiterate. In 2003, 90.2% of men aged 15-24 were literate compared to 85.7% of women. In the case of those over 35 years, 81.8% of males were literate compared to 61% of females. The level of those without education in 2004 stood at 21.6% for females and 13.8% for men. Enrolment in adult education programmes declined sharply from 415,074 in 1979 to 100,029 in 2005. Enrolment rates for women have, however, remained above 70% of the total enrolment. It should be noted that women constitute the majority (58%) of illiterate adult Kenyans.

Gender Equity concerns in education

4.3.16 Research by the FAWE Kenya chapter has shown that in many parts of Kenya, particularly in ASAL areas dominated by nomads, girls face a multitude of challenges starting with domestic work overload and a number of social, cultural and religious factors. Schools often are not girl friendly, as teachers pay more attention to boys and prefer boys in the distribution of teaching materials. Girls also lack guidance and role models and are under constant pressure of family and peers to leave school after 12 in order to marry. Girls themselves reject school as soon as they have been submitted to initiation ceremonies which officially confer the status of an adult onto them, because they no longer accept the teacher “bossing” them, or they start to resent teachers who themselves are not initiated and therefore ritually speaking their junior.

4.3.17 Girls also face increased risks of being sexually molested by fellow students and teachers. While boys are also at risk to be molested and harassed, 65% of female student of Standard 6, 7 and 8 questioned in a survey in 2002 in Nairobi admitted to being sexually harassed in school, compared to 35% of the boys. Those harassing them were male pupils (42%), female pupils (36%), female teachers (11%) and male teachers (10%). Kenya’s legislation does not provide sufficient punitive measures against errant teachers and pupils.

Box 6: The Gender and Education Investment Programme (KSSP)

The Gender and Education Investment Programme which is part of the Education Sector Strategy had the following elements:

- *The formulation and dissemination of a gender and education policy, including widespread stakeholder consultation and information and establishment of institutionalized gender audits;*
- *Increased enrolment and retention of girls in school (and boys where applicable), including girl-friendly boarding facilities, motivation of girls to remain in school, and school feeding.*
- *Girls' participation and performance in school, which centered on the creation of gender responsive and child friendly school environment through teacher training, introduction of innovative teaching methods and development of low cost teaching materials.*
- *Development of gender sensitive water and environmental sanitation facilities, access to sanitary pads, life skills training, and promotion of appropriate hygiene practices.*

Other Investment Programmes in KSSP, such as the Guidance and Counseling Investment Programme and the HIV/AIDS Investment Programme also have a direct bearing on the achievement of gender parity in education.

4.3.18 Research has also shown a correlation between HIV/AIDS-affected children and their schooling. In 1999, the consequence of AIDS-related morbidity or mortality in the family indicated an increase in home tasks of girls more significantly than those of boys: 53% of girls reported an increase in housework followed by 20.8% who had to care for a sick parent among a host of other tasks, while fewer boys reported additional tasks such as running errands (28.3%) and care of cattle (19%). Consequently three times the number of girls from AIDS affected households missed more than 21 days of school. Education policies need to take account of inequalities in access created by HIV/AIDS.

4.3.19 The Government has put in place several targeted interventions which seek to promote girls' education in Kenya. These include the expansion and improvement of classrooms, boarding, as well as water and sanitation facilities to create gender responsive environments, particularly in ASAL's where girls' enrolment is low. Girls' empowerment has been furthered through participation in school management, Child Rights Clubs, mentorship programs, HIV/AIDS prevention messages and life skills and sexual maturation management. Other initiatives include the construction of schools for girls, equipment of labs to improve girls' interest in science and in-service training for teachers and school principals in gender responsive teaching.

4.3.20 Other aspects of government policy are advocacy programmes for girls' education through community mobilization campaigns, media and role modelling, community sensitization on negative cultural practices such as FGM and early marriages, as well as affirmative action for girls and women to access higher education. Guidance and counselling units, which are part of the Ministry, offer services to secondary schools and teacher training colleges as well as in-service training for school-teachers. They guide girls and boys as well as teachers on performance, stereotypes, negative cultural practices and any other problem or constraint they might face. It is planned that the tasks of this counselling unit be expanded to include training and advice to a broader group of stakeholders including communities, local leaders and the like.

4.3.21 With the Assistance of FAWE the government has also piloted initiatives that are aimed at improving the school environment for girls. These include the building of centers of excellence in selected disadvantaged areas, such as Kajiado. This holistic package of interventions seeks to make

all aspects of the school gender responsive. FAWE has also established different clubs in schools with the aim to get girls to run the clubs and encourage them to address issues affecting them. Schools with such facilities are more sensitive towards the needs of girls and young women. It is important that this initiative be continued and replicated.

4.3.22 In a move to further improve access, equity and quality the government announced far reaching budgetary allocations to the education sector, including the removal of tuition fees for all secondary schools to improve transition rates, and the establishment of bursary funds to assist poor students meet non-tuition related expenses. The government also announced upward teachers' salary adjustments, and resources for the recruitment of 7,000 replacement and 4,000 additional teachers. These measures, if they are sufficiently gender mainstreamed, are likely to have positive impacts on the performance of the education sector in general and for girls in particular.

4.4 Health Sector

Access to Health Care Services

4.4.1 Budgetary allocations to the health sector have increased to 8.4% in the 2006/07 financial year and are expected to increase further to 9.8% in the next financial year. Half of the financial allocation was expenditure on Curative Health care, while only 5% was allocated to preventive and promotive health care. During the 2006/07 financial year a Programme Budgeting approach was introduced in order to adopt a Sector Wide Approach with programmes gathered in the *Second Health Sector Strategic Plan (2005-2010)*. The objectives of the Health Sector are to increase equitable access to health services, improve quality and responsiveness of the services, efficiency and effectiveness. The plan also seeks to enhance the regulatory capacity of the Ministry of Health, foster partnerships in health delivery and improve financing of health sector activities. The current priority areas of the health sector which guide activities and investment focus on strengthening the Kenya Essential Package of Health (KEPH) at community, dispensary, health, centre and district levels, linked to secondary and tertiary care capable of providing referral services to treat complex diseases and conditions.

4.4.2 The Health Care framework addresses healthcare service delivery including curative services, preventive and promotive services, health personnel and drugs and pharmaceutical supplies. The Government has pledged to: improve maternal and child health services including antenatal, prenatal and child welfare services; immunization against vaccine-preventable diseases; nutritional needs of the vulnerable including children, pregnant mothers, the poor, the elderly and persons with disabilities; treatment of minor ailments particularly those common at the primary and or community levels of the health system; and safe water supply and sanitation aimed at preventing and controlling communicable diseases. Various Government initiatives are aimed at improving the health of women which have realised modest but significant improvements, namely the National Hospital Insurance Fund (NHIF), Constituency Aids Committees, Medical Board and MDG initiatives targeting malaria, HIV/AIDS and TB.

4.4.3 The structure of the health services delivery is hierarchical. Dispensaries and health centres provide the bulk of health services and form the first level contact with the community. District and provincial hospitals provide both the referral and outpatient services in addition to providing support

to the facilities at the periphery. Kenyatta National Hospital (KNH) and Moi Teaching Hospital are at the apex as the key referral and teaching facilities. Administratively, the national level is responsible for policy formulation, coordination, resource mobilization and allocation, monitoring and evaluation. At the provincial level, a Provincial Health Management Team is headed by the Provincial Medical Officer of Health. At the district level, health services are planned and implemented by the District Health Management Team (DHMT) headed by the District Medical Health Officer (DMOH). The doctor/population ratio was 15 per 100,000 and the ratio of nurses to population was 133/100,000 in 2003. In 2002 the public and the private sector managed a total of 4,364 health facilities. This breaks down as 75% dispensaries, 12% health centers, 5% maternity or nursing homes, 6% hospitals and 2% other. The Ministry of Health “owns” 51% of the 4,364 facilities, while the FBO/NGO and the private for profit sectors together “own” the remaining 49%.

4.4.4 Kenya introduced cost sharing of health care in 1989 to supplement government resources allocated to the health sector. The revenue collecting health facility is allowed to retain 75% to use for the improvement of the health care provision. Twenty-five percent go towards financing promotive and preventive services in the district. The second Report on Poverty in Kenya revealed that 43.8% of the rural poor did not seek medical care when they are sick due to inability to cover the cost of medical care compared to only 2.5% who were constrained by distance to a health facility. In fact 2005/6 KIHBS revealed that in rural areas 10.4% of the population diagnose themselves and purchase medicines over the counter of kiosks. In urban areas 4% resort to self-diagnosis. Kenya also introduced cost exemption for certain services for those who cannot afford them. Reproductive health services that should be fully exempt from cost include ante-natal care, post-natal care, family planning, HIV/AIDS treatment and since July 2007 maternity fees. However, surveys in 2005 established that only 43% of health care providers were informed about exemptions, and that clients were still required to pay additional fees.

Health care indicators

4.4.5 Since 2003 Kenya has been able to reverse a downward trend in Health Sector Indicators. Immunisation coverage at national level improved from 59% in 2003 63% in 2005. HIV/AIDS prevalence is also showing signs of declining from 6.7% in 2003 to 5.9% in 2006. Despite the decline in the proportion of infected people, HIV/AIDS has remained an important factor in the escalation of the tuberculosis case load. In 2006 Malaria (33%), respiratory diseases (24.7%), skin diseases (6.6%) and diarrhoeal diseases (4.6%) made up 70% of all illnesses. The prevalence of illness was higher for females (30.1%) than for males (24.7%).

4.4.6 However, previous gains in reducing fertility are in the process of being lost since the total fertility rate (TFR) increased from 4.9 in 2003 to 5.2 in 2007. The TFR is higher in rural areas (5.6%) than in urban areas (3.3%). The prevalence of contraceptive use has been stagnant at 39% since 1998 and increased only slightly since 1992. Contraceptive use is highest among the 35-39 year old age group and lowest among the 15-19 year olds, suggesting that adolescents sexual reproductive health needs might not be sufficiently met. Urban women are also more likely to use contraceptives than are rural women (47% against 36%). North-Eastern Province has the lowest contraceptive rate with less than 1%. The KDHS in 2003 found a strong correlation between school education and contraceptive use, with 2/3 of women who attained higher education use contraceptives. Only 63% of the total demand for family planning is currently satisfied, with 60% in rural areas and 74% in urban areas.

Mother and child health care

4.4.7 Maternal mortality stood in 2003 at 414 deaths per 100,000 live births compared to 590 in the year 1998. The target of the health sector plan is to reduce the maternal mortality ratio to 170 per 100,000 births by 2010. Maternity care indicators have in fact been stagnant or declined slightly over the 1990s. The proportion of women who received antenatal care from a health professional declined from 95% in 1993 to 90% in 2003. A small fraction (2%) received antenatal care from traditional birth attendants, while 10% did not receive any antenatal care.

4.4.8 About 15% of all pregnancies develop life-threatening complications and require emergency obstetric care. The proportion of mothers assisted by skilled health personnel declined from 51% in 1989 to 45% in 1993, 42% in 2003, and 39% in 2005/6, all of them facility based. Fifty-four percent of all births happened at home and 39.1% were assisted by traditional birth attendants (TBAs), of which only 11.7% were trained. In rural areas almost half of all babies (44.4%) are delivered by TBAs compared to only 17.9% in urban areas. Only 15% of the health facilities were able to provide Basic Obstetric Care in 2000, while for emergencies a mere 9% of the facilities were equipped to provide Comprehensive Essential Obstetric Care. Given the decline in facility based deliveries and antenatal care, it is interesting that maternal mortality nonetheless has declined.

4.4.9 Infant and child morbidity and mortality indicators also have not improved significantly. Trends in the nutritional status of children had in 2003 improved only slightly from 1998 or stayed stagnant. The percentage of stunted children fell by 2 percent to 31%, the percentage of wasted children stayed constant with 6 percent, and the percentage of underweight infants declined by only 2 percent to 20%. The Demographic Health Survey results also suggest that infant and under-five mortality rates increased by 30% since 1998. In 2003 the infant mortality rate stood at 77/100,000, while the under-five mortality rate was 144/100,000.

4.4.10 Gender roles significantly affect maternity care. When complications of pregnancy and childbirth develop, women are not often able to make decisions about their care. This places husbands, family and other community members as decision makers. It has been reported that men often make poor decisions about seeking care during pregnancy and childbirth in part because they do not understand the dangers involved. Other reasons that inhibit some women from utilizing available services include: many women are not sufficiently empowered to make decisions about seeking maternity care; cultural beliefs and practices, such as food restrictions and the lack of reduction of workload during pregnancy, contribute to adverse outcomes; and differential access to household resources for transportation during pregnancy related emergencies discriminate against women.

4.4.11 Mother's age at birth and birth order are inversely related to the likelihood of receiving medical assistance during delivery. Rural and less educated women are less likely than others to receive medical assistance during delivery and deliver in a health facility. Urban mothers (73%) are more than twice as likely as rural mothers (34%) to have a medically assisted delivery. Education also has a strong effect on choice of birth, since only 16% of women without education compared to 89% with higher education choose to deliver in a health facility. The province with the lowest indicators is again North Eastern Province, where only 8% of births are medically assisted and 7% take place in a medical facility. The GOK has undertaken to increase the proportion of medically assisted births from 42% to 90% by 2010.

4.4.12 The Kenyan health system faces the following challenges to safe motherhood: general shortage of medical staff; inadequate access to skilled care during pregnancy, delivery and after delivery, especially among the rural and urban poor; poor infrastructure; and socio-economic and cultural barriers to seeking care. These constraints lead to preventable death due to complications during and after delivery, particularly infection, haemorrhage and high blood pressure. Another contributing factor to maternal death is related to complications of unsafe abortions. Birth complications also arise due to female genital mutilation, which still affects 32% of women (see 5.4 on Gender Based Violence).

4.4.13 Other complications related to birth are obstetric fistulas, due to prolonged labour, which cause incontinence and subsequently rejection by society. Early marriage, early sexual debut, the preference to deliver with TBAs and long distances to EmOC facilities are a recipe for prolonged labour and a major precursor of obstetric fistula. Cases of obstetric fistula are catastrophic to the patient, not least because communities have little or no understanding of the condition. Among the Pokot, for example, where obstetric fistula is more common, the condition is erroneously linked by the community to promiscuous behaviour. This myth is further increasing the social ostracism patients afflicted with fistula face.

4.4.14 Termination of pregnancy is outlawed in Kenya, with the exception of cases where the health of the mother is at risk. However, the law is not strictly enforced and many abortions are performed illegally. Some 300,000 abortions are said to be performed in Kenya every year, causing an estimated 20,000 women to be hospitalized with related complications. This has been estimated to translate into a daily abortion rate of about 800 procedures resulting in the death of 2,600 women every year due to complications. Efforts to reform legislation relating to the termination of pregnancy have not had success, however. Instead, the Ministry of Health advocates for the use of contraceptives. Sexual behaviour change of youth is another avenue which is pursued (see below).

4.4.15 Efforts of the Ministry of Health to improve maternal and child health also includes building the capacity of health service staff, improving service delivery and the provision of supplies and equipment. To date, the Division for Reproductive Health in the Ministry of Health has implemented more than 20 projects in Kenya to address safe motherhood and child survival. Recent initiatives include updating the standards and national guidelines for maternal and child care, and the promotion of community midwifery, as well as focused antenatal care services and integrating the management of malaria in pregnancy.

4.4.16 Despite all these efforts EmOC facilities are still not sufficient in number, and community knowledge about the danger signs of pregnancy, delivery and post-natal as well as neonatal risks and danger signs is low, as is community preparedness and emergency readiness. The decision-making power of women to utilize health services during pregnancy, childbirth, postpartum, newborn care and family planning is limited, with decisions taken by relatives and husbands which may lead to delays in seeking professional care. Social responsibilities on the other hand, such as the need for women to provide for their families and care for the young children, sometimes stand in their way of using needed services. Community awareness can ease the challenges pregnant women face in accessing care.

Adolescent Sexual and Reproductive Health

4.4.17 According to 2003 KDHS, 7 out of 10 women and 8 out of 10 men have had sex by the age of 20, with a median age at first sexual intercourse of 17 years. By the time Kenyan girls are 19 years old, 23% are pregnant with their first child or are already mothers. Given the limited knowledge and use of modern contraception, including condoms, and the lack of parental and school sex education, the average age of sexual debut remains dangerously young. The percentages of adolescent pregnancies and the increasing rates of HIV, especially among girls, are the result of this imbalance. In a 2005 national study by the National AIDS Control Council of 1,672 young people aged 15-24, 58% of urban girls and 57% of rural girls had had sex. Among women aged 20-24 years, 4% were married by age 15, 25% by age 18, and 45% by age 20. On the other hand, of the men aged 20-24 years, less than 3% are married by age 18, and only 6% are married by age 20. Child marriages are common among the pastoral communities in some districts.

4.4.18 Aware of the need to cater for the reproductive health of adolescents, the Ministry of Health has developed an *Adolescent and Reproductive Health and Development Policy* (2006). It aims at contributing to improving the quality of life and well being of Kenya's young people by integrating their health and development concerns into the national development process and enhancing their participation in that process. It also examines the consequences of prevailing social, economic, cultural and demographic issues in the context of adolescent reproductive health. The *National Plan of Action for the Health Component of the National Youth Policy 2006-2011* aims to facilitate the operationalization of the health component of the National Youth Policy through a comprehensive, national multi-sectoral programme. One of the objectives of the Plan of Action is to identify priority actions for ensuring that Kenyan youth enjoy good health as they transit to a productive adulthood.

4.4.19 The Government has implemented successful programs designed to improve adolescents' knowledge about reproductive health, encourage a responsible and healthy attitude toward sexuality, delay onset of sexual activity among younger adolescents, decrease risky behaviour among adolescents who are already sexually active and increase provision of youth-friendly services by trained service providers and peer educators. One example has been the Nyeri Youth Health Project (NYHP), which is locally designed and culturally appropriate. The programme employed respected parents to give young people sexual and reproductive health information and to promote an environment that is responsive to their information and service needs. Given the taboo that normally exists about discussing sexual issues with the older generation, and the generation of the parents particularly, the project revolutionized sex education. The NYHP also trained a network of collaborating service providers, mostly from the private sector, on SRH and youth friendly services. Youth in need of services were given a coupon that entitled them to subsidized SRH services with participating providers. The NYHP made significant impacts on a number of behavioural indicators, including condom use and reduction in the number of sex partners. The project also improved the environment for young people in terms of communication on reproductive health issues.

4.4.20 Other interventions that seek to work with adolescents and minimize the effects of harmful traditional practices, particularly FGM, have been spearheaded in Kenya. Some communities have adopted an alternative rite of passage in which they "circumcise" their girls through words. Known as "Ntanira na Mugambo" in the local language of the Ameru, a community on the eastern slopes of Mount Kenya, "Cutting Through Words" is a joint effort of rural families and *Maendeleo ya Wanawake*. The rite brings willing young girls together for a week in seclusion, where they receive some traditional lessons about their future roles as women, parents and adults in the community,

while also being taught about more modern subjects regarding personal health, reproduction, hygiene, communications skills, self esteem and dealing with peer pressure.

4.5 Infrastructure Sector

4.5.1 The infrastructure sector accounts for approximately 10% of GDP and employed 183,000 workers in 2002, with over KSh 51.4 billion in wage payments. The ERS identifies infrastructure, including transport, water, energy, telecommunications and information technology, as one of the four pillars of the economic recovery programme. Physical infrastructure is an important prerequisite in creating and supporting a business environment that facilitates private sector investment, growth and job creation. The country has an inadequate and weak infrastructure as a result of years of under investment, and inadequate allocation of resources for construction, maintenance and rehabilitation of existing facilities. This includes power supply, transportation, water supply, sewerage and telecommunications. In addition the poor nature of the road network, the inadequate and dilapidated rail network and information technology pose challenges to the country.

4.5.2 Infrastructure provision and development has traditionally been a top-down process, and seen as a male preserve, dominated by technological concerns with little engagement in socio-economic debates involving women, rural and other marginalized groups and communities. There is however, increasing awareness about the failure to provide adequate or affordable infrastructure facilities and services in rural communities and about the potentially negative social and economic impacts of inappropriate provision. For the majority of Kenyan women poor maintenance and management systems limit access to infrastructure provision.

Housing

4.5.3 Information on the living environment, such as access to electricity, sources of water, availability of sanitation, type of building, flooring and roofing materials is key to explaining the relationship with the social and economic conditions of households. According to the 2005/6 KIHBS, 66% of Kenyan households own their own home, while 24% pay rent. Renting is more common in the urban areas, with 75.4% of households renting. Seventy-seven percent of households live in dwellings with corrugated iron roofs and 14.5% have grass or thatched roofs. The predominant flooring materials (59.2%) used by Kenyan households are earth, mud, dung and sand, followed by cement (34%). The annual housing requirements were estimated at 7,600 and 38,000 new units in urban and rural areas respectively. To address the housing problems and improve the lives of slum dwellers, the government, in collaboration with UN HABITAT, is undertaking the Kenya Slum Upgrading Programme (KENSUP).

Access to water and sanitation

4.5.4 Water is more than a basic need and input in the economic and social development process, it is the fundamental requirement of life in any society. Unfortunately, these basic assets are not guaranteed for all Kenyans, especially the rural population and people dwelling in the slum areas in urban areas. Indeed the majority of Kenyans have limited access to safe drinking water. It is estimated that 83% of Kenya's urban population use safe drinking water, compared to 48 % of the rural population. Nationally only 7.8% of the population have piped water in the house. By far the most common source of water is from rivers, pond and streams (21.3%), potentially unsafe sources of water. Nationally sanitation access was estimated to be 84%, of which 94.8% in urban and 76.6%

in the rural areas. The majority of the population (67.4%) has access to pit latrines only. However, access to safe drinking water varies between regions, ranging from a high of 92.6% in Nairobi to as low as 13.5% in Bondo District of Western Kenya. Similarly, access to improved sanitation varies widely, with Nairobi and Central Province at 99% and 99.5% coverage respectively. North Eastern Province has the lowest access with only 22.8% access to adequate sanitation; the worst area is Wajir District with only 15.3% coverage.

4.5.5 These statistics overlook the condition of women who often have to cover long distances during dry spells to look for water. Water collection consumes up to 40% of a women's time, averaging from 3 to 5.25 hours daily in some areas. It is thus a task that not only increases women's workload but also shifts their priorities for family care especially during the dry season. Women and children, who are responsible for water collection and its use for laundry, cooking and domestic hygiene, suffer most if supplies are contaminated and difficult to obtain. Women in wealthy households have access to exclusive household facilities and do not face the hazards of collecting child faeces found in the household environment. Many poor families pay dearly for poor water and sanitation facilities as illustrated in the box below.

Energy Usage

4.5.6 The Energy Sector in Kenya is dominated by imported petroleum for the modern sector and wood fuel for rural communities, the urban poor and informal sector. The current domestic demand for petroleum fuels account for about 25.7% of the total import bill. In terms of energy supply, wood fuel provides about 86% of the total energy requirements, petroleum 20%, electricity 10% and alternative sources account for 2%. Energy cost is high due to lack of adequate capacity to meet rising demand and high system losses, estimated at 21%. Challenges of energy utilization such as electric power supply in rural areas, the inadequate and unreliable power supply especially in market centres and the high cost of petroleum products such as kerosene have specific relevance for women. Households take the lion share of all energy types, accounting for 73.1% followed by small scale industries with 10%.

4.5.7 Overall 68.3% of households still use firewood as the main source of energy for cooking: 87.7% in rural and 10% in urban areas. Moreover, only 8% has a chimney in the kitchen, and 76% use traditional stone fire. Improved stoves are only used by 12.5%. This has consequences for women's health and labour. Energy security is closely related to health and food security because rural women (and their children) are the primary collectors of wood and residue fuels, which account for 80% of all household energy use. Based on FAO estimates, 60% of Africa's rural women are affected by fuel wood scarcity. Time spent in fuel wood collection in fuel-scarce areas can range from 1 to 5 hours per household per day. Where fuel is commercialized, women's work must pay for purchasing household energy. The real rural energy crisis is rural women's time, with women working longer work days than men in providing human energy for survival activities such as fuel and water carrying, cooking, food processing, transport, agriculture and small enterprises, non-monetized work which is largely invisible in national accounts and labour force statistics. Moreover many income generating activities of women in the informal sector - often critical to family survival - are fuel intensive, and the viability of these activities is affected by energy prices and availability. Energy scarcity thus impinges on the provision of other basic services, such as water, health, and education.

4.5.8 Women are faced with more environmental hazards in the home rather than outside the house. Cooking daily with wood, crop residues, dung and charcoal has left women and girls exposed to indoor air pollution, linked to acute respiratory infections, chronic obstructive lung diseases, low birth weights, sinus headaches, lung cancer and eye problems. Other occupational health hazards for women involved in energy use and production include bone fractures, repetitive strain injuries, sprains, back disorders and miscarriages due to fuel wood carrying, exposure to burns and smoke, as well as skin diseases. Widespread reliance on fuel wood and dung increases the scarcity of available biomass resources, imposing further burdens on women and children, who must spend more time and energy collecting and carrying fuels. In rural areas where girls are involved in traditional women's chores from an early age, long hours spent collecting fuel and water leave them little time or opportunity for education.

4.5.9 Reduced drudgery for women and increased access to non-polluting power for lighting and other household and productive purposes can have dramatic effects on their levels of education, literacy, nutrition, health and involvement in community activities. Moreover, as women become more able to participate in political and economic affairs, they will be better placed to seek their own solutions to economic and social problems with less external assistance. Promoting access to modern energy services is therefore critical for increasing women's productivity and economic power. A cost-benefit study of improved cook stoves, for example, showed that users saved between 3 and 20 hours weekly on gathering fuel wood, or, if purchased, 40-50% of the cost, while smoke emissions were reduced by a factor of 2.6. Household energy programs also produce additional income opportunities for craftspeople.

Transportation

4.5.10 Kenya's transport system is comprised of roads, railway, marine, air and pipeline that facilitates the transportation of people, exportation of goods and promotion of trade with neighbouring countries. The road transport network in Kenya currently accounts for over 80% of the country's total passenger and 76% of freight traffic. Kenya's road network consists of over 63,000 km of the classified road system and about 87,600 km of unclassified road system. The road transport infrastructure has over recent years deteriorated to the extent that 47% of the classified road network requires reconstruction. The broad objective of the government in the transport sector is to ensure provision of low cost, high quality, world standard transport infrastructure services to support the socioeconomic objectives of the Government. However the reality is different. North Eastern Province, which covers approximately 30% of the country's land mass, has only about 7 km of tarred roads.

4.5.11 Kenya's rural transport scene is still characterized by walking and head or back loading, mainly by women and children, along roads, paths and tracks. In the urban areas, public transport is unaffordable to many low paid workers, leading to low productivity and the drudgery of walking. The loads carried by rural Kenyan women average 40 kg (i.e. 75% of body weight) over an average of 8 km. In some cases, women carry loads heavier than their body-weight. The maximum carrying weight recommended by the ILO is only 20kg. Kenyan medical sources document frequent backaches and knee damage among head loading Maasai women.

4.5.12 Road development has focused attention mainly on motorized transport. However, in Nairobi for example, 60% of residents walk, 35% travel by public transport and only 5% use private cars. Rural travel and transport patterns are even more tilted towards walking and intermediate means of

transport (ITMs). It can be divided into three broad categories: i) domestic travel, including water and firewood collection, as well as food processing trips to grinding mills; ii) agricultural travel, including trips to and from the fields, as well as supply and marketing trips; and iii) travel for access to services and social purposes, particularly to health facilities, shops, public markets or to church. Only category (iii) is likely to involve motorised transport. Moreover while travel burdens are often shared between men and women for agricultural travel, women are almost entirely responsible for domestic travel, which is by far the most energy and time consuming category, accounting for one third to over two thirds of all travel. Availability of IMTs would reduce the workload of women tremendously. Alternatively, policy and planning should also consider non-transport solutions, such as bringing water and schools closer to the consumers.

4.5.13 Because of widespread poverty, the use of motor vehicles is generally limited and largely unaffordable to the majority of the low income individuals and households in both urban and rural areas. The use of non-motorized IMTs is limited in Kenya. Given the important need to reduce the rural travel time and burden in order to increase rural productivity, it is important that rural communities, men and women, as well as boys and girls, have access to transport systems that respond to their immediate needs. In both rural and urban areas, access to IMTs is still hampered by lack of appropriate infrastructure and biases. Moreover, in order to make the safe use of IMTs possible, roads have to be designed with them and the many pedestrians that use rural and urban roads in mind. This means that shoulders need to be broader, for example, and it might also mean that the road project has an IMT component.

Box 7: Women organizing their own bus

In the early 1970s, in a rare self-help initiative in Kenya, rural women, who were so frustrated with the difficulty of accessing local markets and hospitals, decided to buy their own bus. The local women's group began a collective savings effort and the women were successful in providing their own service for several years. Within a year and a half, the bus was paid for. It was only when increasingly high repair bills on the vehicle made it impossible for the group to continue service that this self help venture came to an end. venture ended.

Communications

4.5.14 Even though GOK realises the importance of telecommunications, only 2% of Kenyan households have fixed phone lines, 60% of them located in the Nairobi area. Waiting time for new lines is estimated at eight years. The mobile telephone industry is therefore growing rapidly, with the subscriber base increasing by 56.9% from 4.3 million in 2004 to 5.6 million in 2005 alone (66.3% in 2004). Unavailability of grid power in remote and rural areas remains a major challenge in mobile phone accessibility. Efforts to link rural areas to the national telecommunications grid have been slow. Lack of competition breeds unreliability, exploitation and inefficiency which translate into very high cost of accessing ICTs. This is further compounded by the fact that, although a Universal Access Strategy is in place, the Government has not incorporated it into its economic planning and development.

Information and Communications Technologies for Development (ICT4D)

4.5.15 ICTs' ability to overcome traditional barriers of culture, location, distance, armed conflict, volume, time and medium in service delivery, and provide equal spaces for participation at national, regional and global levels have provided an unchallenged opportunity for ending isolation of the

world's most poor and marginalised and giving them a voice and visibility on the global platform - women. Developmental interventions in Kenya have shown that ICTs can leapfrog through existing barriers. ICTs are therefore a critical tool for addressing key gender equity issues.

4.5.16 It has further been shown that for ICT4D to make any lasting impact, it needs to take a community based approach that can be replicated and scaled up. ICTs' ability to transcend traditional barriers for women is beginning to gain currency in Kenya. Although non governmental agencies have taken a leading role in spearheading this initiative, the Kenya Government has created a conducive and enabling environment. A National ICT Policy, an ICT Bill that entrenches ICT4D, has been tabled in Parliament, and the Government has formulated and is implementing the Kenya ICT Strategy. Women have also engaged in ICTs as an industry, including internet based software development, sale of computer hardware, sale of mobile telephone services and provision of IT/ ICT services.

Media

4.5.17 Women's access to media in Kenya is characterised by vast differences between rural and urban areas. In Nairobi Province only 5% of women reported not having access to any medium, while in North Eastern Province 86.8% of women stated that they had no access to any media in 2003. By far the most commonly used media is the radio which overall 15% of women listen to at least once a week. This is followed by television (28.8%) and newspapers (22.5%). Kenya has an impressive women and media lobby, headed by the Association of Media Women, which both monitors the media but also adds to the media offer by reporting on women candidates in elections and running other media campaigns. The Gender and Governance programme in Kenya, which supports the 50:50 campaign for women's political representation³, is another initiative of the Association of Media Women.

5. CROSS-CUTTING ISSUES

5.1 The Environment

5.1.1 High population growth, degradation and poor land management practices have impacted negatively on the environment. Problems are particularly severe in ASALs. The widespread use of wood fuel has contributed significantly to deforestation; Kenya has already lost over 65% of its standing wood volume. Closed forest cover stands at only 1.7% as against the recommended 10%. High levels of poverty also impact negatively on the environment through agricultural land degradation, leading to reduced productivity and hunger, and pollution of the ground water table by both industry and chemical fertilizers. Within the domestic environment, indiscriminate disposal of solid and liquid waste leads to environmental contamination, including water pollution and blocked waterways, and THE creation of pools of stagnant water conducive to the breeding of mosquitoes.

5.1.2 The National Environment Management Authority (NEMA) is mandated to exercise general supervision and co-ordination over all matters relating to the environment and to be the principal instrument of Government in the implementation of all environmental policies. NEMA produces the State of Environment Report (SoE) which is submitted to parliament. NEMA is also mandated to

³ The 50:50 campaign is a Global campaign fighting for equal political representation of men and women at all levels.

ensure the rehabilitation of degraded sites using the National Restoration Fund. In collaboration with development partners the organization is undertaking programmes to conserve Lakes Victoria, Jipe, Naivasha and Nakuru. The Ministry of Agriculture is also undertaking major activities contributing to environmental sustainability including: the promotion of soil and water management and conservation; protection and improvement of the natural environment; management of agricultural resources and protection of ecological environment; promotion of agro-forestry; and protection and preservation of bio-diversity. The Kenya Agricultural Research Institute (KARI) and the Western Kenya Agro-Forestry Centre (ICRAF) are implementing the five-year Western Kenya Integrated Ecosystem Management Project that involves the public in gully rehabilitation activities.

5.1.3 Land and resource tenure laws have contributed to the removal of women from access, control and ownership of land. This marginalisation of women has had a negative impact on the implementation of environmental management policies because as providers of food women interact very closely with the environment. This close contact also means that women use their knowledge to maintain a balance between using the land and letting it regenerate. That role as manager of the environment was entrenched when men went on migrant labour. However the process of land registration and the individualisation of property rights in land ignored women by vesting those rights in men. Because women still manage the environment they also need to be granted rights to the environment in order to be able to make sound decisions. Environmental resource management in Kenya is unfortunately often given to men, with no provision for the representation of women. This is detrimental to sustainable development. Consequently, it is important to recognise women's contribution to environmental management and their potential usefulness as a major force for sustainable environmental management.

5.1.4 The prominent NGO working in the environment is the Green Belt Movement (GBM), initiated by Professor Wangari Maathai and the National Council of Women of Kenya (NCWK) in 1977. It began as a grassroots tree planting programme to address the challenges of deforestation, soil erosion and lack of water, and is now a movement with thousands of members. The GBM is also a vehicle for empowering women by reducing both the effects of deforestation and providing a forum for women to be creative and effective leaders. The movement also involves the transfer of technology from experts to the people, turning small scale farmers into agro-foresters. Ideally, public awareness is raised on issues related to environment and development, and meetings related to tree planting activities encompass discussions on the relationships between food, population and energy. The Green Belt Movement is one of the most successful environmental movements in Africa.

5.1.5 When women plant trees knowledgeably they become 'foresters', a role normally only held by government officers, the majority of whom are men. The activity of planting trees is not perceived by local communities as women's work, rather the various activities required for tree planting incorporate men and women. Tree planting activities have also become linked to water and food security activities. Women working with government foresters can be empowered and take leadership positions in committees, churches or local councils. However, the fact that women lack legal and cultural ownership of land has negative effects on forestation projects since insecurity of ownership dominates the tenant's decision at the expense of domestic fuel, with the result that the planting of trees on land over which they have no decision-making power is neglected. Several NGOs are active in environmental conservation and they raise awareness about the need to address environmental concerns. The NEMA's recent enforcement of the Environmental Impact

Assessments and Environmental Audits is counting on the cooperation of business to enhance the integration of social responsibilities and environmental concerns.

5.1.6 Vulnerability to the detrimental effects of degraded environments is engendered. Environmental degradation impacts on the most socio-economically disadvantaged members of the community and women are disproportionately disadvantaged because they lack access to land, credit and technology and have limited education. Kenyan women grow a substantial proportion of the country's food, and there is considerable evidence that their labour-intensive food production practices tend to be environmentally sound. They are thus contributing both to food production while at the same time protecting the resource base. Gender-segregated tasks and work results in different exposures to environmental risks for women and men. Within industry and the informal sector men may be exposed to toxic chemicals used in mining, while women are exposed to pesticides used in the export flower-industry. Women's and men's income-generating activities may require specific resources (fuel, water) that produce particular wastes. Environmental contamination also produces different health hazards for men and women, given their different tasks in the home and outside.

5.2 HIV/AIDS

5.2.1 HIV/AIDS spread rapidly in Kenya during the 1990s, reaching prevalence rates of 20-30% in some areas of the country. Whilst prevalence subsequently declined in some areas, it remained stable in others. National prevalence declined significantly from a peak of about 10% to under 7% in 2004. This trend is supported by data from national surveys, which document changes in behaviour towards fewer partners, less commercial sex, greater condom use and later age of first sex. The KDHS of 2003 revealed that 6.7% of adults tested were HIV positive. Reconciliation of KDHS and sentinel surveillance data gives an adjusted prevalence of 7% implying a total of 1.1 million adult Kenyans affected with HIV, of whom about two thirds are women. The gender gap in infection rates is particularly pronounced among young people; in the 15-24 age range; female prevalence is nearly five times higher than male prevalence.

5.2.2 Approximately 1 million children have been orphaned due to AIDS and 500 Kenyans are estimated to die every day of AIDS related illnesses. HIV/AIDS affects women and men differently due to their biological, socio cultural and economic circumstances. Biological and socio-cultural factors cause girls and women to be more vulnerable to HIV infection than are men and boys. In addition, girls are more affected by the HIV/AIDS pandemic since they are often called upon to provide care for their sick parents or relatives, as well as looking after their siblings. Both girls and boys lack life skills and they are therefore not well prepared to protect themselves and other from infection.

5.2.3 The National HIV/AIDS and STD Control Programme (NASCOP) was established as a joint unit in 1992 and has been mandated to coordinate related activities in the public, private and NGO sectors. In 1999, the Government declared HIV/AIDS a national disaster, following which the National AIDS Control Council (NACC) was established in the Office of the President to provide leadership and to coordinate a multi-sectoral response. NASCOP has two objectives: to increase access to care and support for the infected and affected and to reduce national prevalence of HIV. The strategy also put in place structures which were meant to facilitate the mainstreaming of HIV/AIDS through all sectors and at all administrative levels.

Box 8 : The Kenya National HIV/AIDS Strategic Plan, 2005/6-2009/10

The Kenya National HIV/AIDS Strategic Plan (KNASP) 2005/6-2009/10 provides the action framework for the National Response to HIV/AIDS and the context within which all stakeholders will develop their specific strategies, plans and budgets to make responses. The strategic plan contains a detailed Results Framework for guiding operations towards the attainment of the targets. The goal of KNASP is to reduce the spread of HIV, improve the quality of life of those infected and affected and mitigate the socio-economic impact of the epidemic in Kenya. The strategy for mainstreaming gender in KNASP provides a framework for integrating gender sensitivity into the HIV/AIDS response, which is fully applicable to KNASP 2005/6 – 2009/10.

5.2.4 The Kenya National HIV/AIDS Strategic Plan (KNASP) 2005/6-2009/10 has been developed through participatory and all inclusive approaches. During the process of formulating the first Kenya National HIV/AIDS Strategic Plan in 2000, it was noted that the incidence of HIV/AIDS among women was rising at a shocking rate and women were being infected at an earlier age than men but that the strategy lacked gender analysis and gender sensitive responses. Therefore NACC established a Technical Sub-Committee on Gender and HIV/AIDS in order to engender the existing Kenya National HIV/AIDS Strategic Plan. The Sub-Committee published in 2002 *Mainstreaming Gender into the Kenya National HIV/AIDS Strategic Plan 200-2005*, which points to a number of weaknesses of the strategy, namely its lack of gender disaggregated data and definition of the roles and functions of the various stakeholders in the AIDS prevention. It also recommends action on a broad range of issues including targeted information, education and communication (IEC) campaigns, inheritance and property rights for girls, widows and orphans, programmes to assist orphans and vulnerable children (OVCs), elimination of widow inheritance, gender sensitive monitoring through appropriate indicators, and budgetary allocations for gender programme components.

5.2.5 A new HIV/AIDS curriculum has also been introduced through NACC and the Ministry of Education. Full integration of comprehensive AIDS education in schools is required to encourage and sustain responsible behaviour for HIV prevention. Special efforts should be made to emphasize men's shared responsibility and promote their active involvement in responsible parenthood, sexual and reproductive behaviour, including family planning, prenatal, maternal, and child health, prevention of sexually transmitted diseases, including HIV, prevention of unwanted and high-risk pregnancies, shared control and contribution to family income, children's education, health and nutrition recognition and promotion of the equal value of children of both sexes.

5.2.6 Many NGOs work to support and complement the efforts of the government. Among them the Kenya AIDS NGO Consortium (KANCO) is an umbrella for 850 NGO member organizations. The organization builds the capacity of the member organizations, runs a resource centre and engages in projects, including projects on property rights of girls and widows and involving men. Other NGOs also support property rights and will writing in order to strengthen the rights of AIDS widows.

5.2.7 The HIV/AIDS epidemic continues to pose the biggest health challenge in Kenya. HIV/AIDS has resulted in an increased number of widows and orphans, which increased the number of child headed households and economic, social and time burden on women and girls who are the primary care givers. Efforts are also being made to provide affordable drugs to those infected, even though many are still not able to afford them since they have to pay a subsidised user fee in public hospitals. The government has also put in place prevention of mother-to-child transmission (PMTCT) initiatives and adopted aggressive public awareness and prevention campaigns. AIDS is

forecast to cost the country close to 1.5% of economic growth annually and carries enormous costs for the private sector.

Factors influencing HIV/AIDS

5.2.8 The economic demand created by societal needs makes HIV prevalence in Kenya follow the pattern created by male labour migration. Spousal separation, worsened by poverty and conditions of work encourage high-risk sexual behaviour among men and women. The predominantly patriarchal Kenyan communities prescribe a high status for men which at times involves sexual risk taking. Perceptions of men as being highly sexed tend to glorify virility, and exert pressure on men to demonstrate their virility through sexual experimentation, conquests and multiplicity of sexual relationships. The low status of women in society reduces their capacity for decision-making in matters related to sexuality, fertility and their lives in general. The majority of women therefore lack bargaining power and are unable to negotiate desirable and safe relationships. High levels of illiteracy, inaccessibility to accurate and reliable information on AIDS prevention and inadequate capacity to use protective measures against HIV are some of the factors that increase women's vulnerability to infection.

5.2.9 Cultural, biological and personal considerations influence early sexual activity of young girls. They are therefore predisposed to HIV infection through trauma to their immature reproductive systems, thus facilitating entry of the virus. In most Kenyan communities the socialization of girls dictates submissiveness, thus creating a situation whereby girls believe they cannot reject sexual advances. Alcohol and substance abuse, labour migration, and social cultural practices like plural marriages are other factors which influence men's sexual behaviour. Groups such as beach boys, watchmen, soldiers, prisoners and truck drivers tend to establish casual relationships because circumstances separate them from their regular sexual partners for long periods. This makes them vulnerable to HIV infection. Moreover, the exchange of sexual favours for money or food is common, not only among commercial sex workers, but also women who resort to extra-marital relations to meet their household needs, sometimes with the complicity of their unemployed husbands. According to reports clients of commercial sex workers are reported to pay premium prices for girls as young as 8 years old, as well as unprotected sex.

5.2.10 Since the HIV/AIDS pandemic is so gendered, HIV/AIDS interventions need to be based on sound gender analysis and on gender disaggregated data. This will also facilitate appropriate monitoring of progress. To this end gender disaggregated data need to be collected as a matter of urgency. Moreover, despite the fact that the infection rate has decreased and behaviour change has been recorded in some places, it is imperative that IEC campaigns are continued, and that **both** men and women are targeted.

5.3 Empowerment, Leadership and Decision Making

5.3.1 Even though women form more than half of the population of Kenya, they are grossly under-represented in leadership and decision making positions in the country. In 1969 the first 2 women entered parliament, representing a mere 1.2% of parliamentarians. Due to various constraints the number of women parliamentarians remained very low over the years with representation ranging between 1.2 % and 2.4% until 1988. Even today the percentage of women parliamentarians of 7.3%

is very low, particularly by comparison with some of Kenya's neighbours, such as Tanzania (30.4%), Uganda (29.8%), Burundi (30.5%) and Rwanda (48.8%).

Table 6: Members of National Assembly by Sex, 1969 – 2007

Year	Women	Men	Total	% Women
1969	2	165	167	1.2
1992	7	193	200	3.5
1997	8	214	222	3.6
1998	9	213	222	4.1
2002	18	204	222	8.1
2007	16	203	219	7.3

Source: Department of Gender

5.3.2 Even though the Government has taken steps to ensure the full development and advancement of women, including enactment and enforcement of quotas that ensure at least one third of all new recruitment to the civil service to be women Government appears to send the opposite message to Kenyans with some of the appointments it makes to high profile public office positions.

5.3.3 The National Council of Women of Kenya (NCWK) has since the 1990s been active in designing and implementing programmes aimed at empowering women intellectually, socially, politically and economically in order for them to participate in decision making. The League of Kenya Women Voters (KLWV) worked hard in targeted electoral constituencies helping identify women with potential, providing them with leadership skills and support them to contest in local authority and national elections. As a result, out of 1,057 parliamentary candidates, 84 (7.9%) were women, compared to 50 (5.7%) women candidates out of 882 parliamentary candidates in the 1997 election. However, only 10 women were elected (4.8%) and 8 women were nominated by political parties, making the total number of parliamentarians 18 (8.1%). A bill aimed to increase the number by women in parliament through 50 reserved seats was rejected by MPs in August 2007.

Table 7: Politics and Decision Making, 2003 – 2006

RANK	June 2003				January 2006			
	Women	Men	Total	(%) Women	Women	Men	Total	(%) Women
Ministers	3	26	29	10.3	2	32	34	5.8
Ast Ministers	4	39	43	9.3	6	40	46	13
Nat. Assembly	18	204	222	8.1	18	204	222	8.1
Ambassadors	7	27	34	20.6	11	29	40	27.5
Perm Secretary	3	21	24	12.5	5	25	30	16.7
Prov Commissioners	0	8	8	-	0	8	8	-
D Commissioners	3	68	71	4.2	2	69	71	2.8
Deputy Secretary	19	75	94	20.2	21	77	98	21.4
Councillors	377	2460	2837	13.3	377	2460	2837	13.3
District Officers	68	355	423	16.1	88	359	447	19.7

Source: - Department of Gender; DPM Compliment Statistics Unit

5.3.4 The picture of female representation in senior positions in public service is not encouraging. Apart from the diplomatic service where slightly more than a quarter of ambassadors and high commissioners are women (11 out of 40), the number of women ministers actually was reduced from 3 out of 26 (10.3%) in 2003 to 2 out of 32 (5.8%) in 2006. In June 2005, there were only 5 (16.7%) out of 30 female permanent secretaries, only 2 (2.8%) out of 71 District Commissioners, 21(21.4%) out of 98 Deputy Secretaries and 88 (19.7%) out of 447 District Officers. Of the 8 Provincial Commissioner posts in the country, not a single woman occupies the position.

5.3.5 Even though there is a gradual increase, women's representation is still low in local councils. Women councillors increased from 2.4% in 1988, to 8.1% in 1998 and then to 13.3% in 2002 as shown in table 8 below. Kenyan women are, however, doing fairly well in the legal field. Even though the growth has stayed level at 34.3% from 2003, women form a third of the lawyers in the country. In 2005 women formed 42.2% of District Magistrates, 37.6% of Senior Resident Magistrates, 42.3% of Senior Principal Magistrates and 20.3% of High Court Judges compared to 41.3%, 36.8%, 40.9% and 17.6% respectively in 2003. Despite the appointment of women to the various positions in the judiciary, there has never been a woman Chief Justice.

Table 8: Local Authorities Membership by Gender (1988-2002)

Authorities	1988			1992			1998			2002		
	Total	Women	% Women									
County	631	13	2.1	1029	24	2.3	2455	201	8.2	1847	248	13.4
Municipal	215	7	3.3	354	15	4.2	596	52	8.7	446	60	13.5
City Council	-	-	-	55	4	7.3	69	7	10.1	113	13	11.5
Town Council	125	3	2.4	398	7	1.8	572	40	7.0	431	56	13.0
Total	971	23	2.4	1836	50	2.7	3692	300	8.1	2837	377	13.3

Source: Electoral Commission, 2002

5.3.6 Statistics also reveal that women are missing in university management, particularly in positions that enable them to influence the policies and direction of their institutions at either departmental or institutional level. Out of 243 Heads of Departments, only 35 (14.4%) are women; there are no women Vice Chancellors and only 2 (13.3%) Deputy Vice Chancellors out of 15. Evidence suggests that the few women who do become academics and administrators face many challenges. Some of these are said to include discriminatory appointment and promotion criteria, lack of opportunities for further training, resistance from men, hostile work environment, sexual harassment and sex role stereotyping.

5.3.7 There are many serious challenges facing women with leadership ambitions. Negative stereotypical and socio-cultural attitudes towards women in Kenya prevent many women putting themselves forward to contest elections. A woman's ambition to contest a seat could be regarded as opposition to cultural norms and standards resulting in societal lack of capacity to accommodate women's leadership. During elections women candidates are out-manoeuvred by their male counterparts who are more economically established and have more access to campaign funding. Lack of financial resources required to sustain campaigns and lower levels of education do not help

women candidates to sell themselves and there have been cases of physical intimidation of female candidates.

5.3.8 The government of Kenya has established a number of devolved funds which are aimed at facilitating access to service delivery at community level. These include Constituency Development Funds as well as Local Authority Service delivery Action Plans which are backed by funding. Experience has shown that communities and lower level committees do not currently have the capacity to access these and other funds adequately. Women who have low levels of representation in local government but have specific needs should be trained and encouraged to actively participate in the administration of devolved funds, and the selection and formulation of community projects.

5.4 Gender Based Violence (GBV)

5.4.1 Gender based violence is a serious problem in Kenya, where one woman is raped every 30 seconds. The Kenya Demographic and Health Survey 2003 (KDHS 2003) revealed that at least half of all Kenyan women had experienced violence with close family members prominently among the perpetrators. Domestic violence is still viewed as a private affair which is accepted and condoned as a cultural practice. The forms of GBV include assault, rape, defilement, battery, sexual harassment, emotional abuse and genital mutilation. The prevalence of GBV within Kenyan society confirms the deep rooted systematic inequality between women and men, with men dominating women by using physical abuse. Statistics widely under-report the problem and do not tell the full story of the emotional devastation of individual rape victims.

5.4.2 Many stakeholders work against GBV in Kenya, often in small and not well coordinated projects. Many initiatives concentrate on advocacy work while fewer actually provide assistance, such as running safe houses for victims of domestic violence or for girls who run away from forced marriage or FGM. The Nairobi Women's Hospital is the only hospital in the country that provides free medical treatment to GBV victims. A positive development in the area of advocacy has been the African Women's Development and Communication Network (FEMNET) and a Regional Network for Men Against GBV in Eastern Africa and in Kenya.

5.4.3 According to a Draft World Bank report (2006) changes in livelihood in rural areas coupled with the HIV/AIDS crisis has undermined the identity and self-esteem of men, while it has intensified the economic, domestic and community burden of women. However, this extra burden has not brought about an empowerment of women, since while they are increasingly the generators of household income, men still control land and other property. This increasing divergence between reality and ideology has been linked to tensions which manifest itself in GBV. In some places the collapse of the pyrethrum industry has been specifically linked to increased alcohol consumption and domestic violence and rape. Intergenerational violence, directed towards children in the home and in schools, is another aspect of unfulfilled expectations and frustrations.

Rape

5.4.4 Rape, defilement and sodomy are increasing at an alarming rate in Kenya. The statistics from police headquarters show that some 2,908 women and girls were raped in 2004. The incidence has almost tripled since 1998. It is, however, not clear whether the increase in reported cases is due to raised awareness or due to an actually higher occurrence of rape and other sexual assaults.

Table 9: Cases of Rape and Assault 2000-2005

TYPE	2000	2001	2002	2003	2004	2005*
Rape & Attempted rape	1,675	1,987	2005	2,398	2,908	2,867*/3509**
Assault and battery	6,255	6,648	7,896	8,544	8,959	9,169
Total	7,930	8,635	9,901	10,852	11,867	12,311/12,678

* Provisional– Economic Survey 2006

** COVAW Strategic Plan 2005-2009; cited in Desk Survey on Gender Issues in Kenya by NCGD

5.4.5 Victims have reported harrowing and traumatic experiences, included strangulation, attacks with knives, fists, and sticks. They also report insertion of bottles and other objects in their vagina causing tears and bleeding. Raped women are often traumatized and stigmatized. In some cases women who have been raped are abandoned, divorced and declared unmarriageable. The incidence of gang rape is also on the increase, making up 40% of all rape cases and involving up to 11 men. Of 1483 reported rapes in 2004 and 2005, nearly half (49%) of the victims were minors, who said their attackers lured them with presents; 546 (37%) were attacked as they walked home at night and 8% said they were under the influence of alcohol or drugs. Others were raped during robberies and car hijackings.

5.4.6 According to figures from the Gender Violence Monitoring Unit (GVMU), there has been an increase in the rape of men in the country from 7 reported cases in 2002-3 to 42 cases in 2003-4, an increase of 83%; in 2004/5 cases doubled. Most male victims were assaulted during car-hijackings.

Defilement and Incest

5.4.7 Kenyan law defines defilement as having sex with a person below 18 years irrespective of whether the child consents or not. Trends suggest that the lower the age of the child, the more vulnerable the child is to sexual abuse. Of 717 cases of abuse analyzed, the majority of victims were girls aged between 1 month and 4 years (43.5%). In certain communities, it is believed that having sex with virgins or babies will cure HIV/AIDS. Perpetrators of abuse often are persons well known to the victim, and in most cases placed in positions of trust, such as fathers, neighbours, uncles and teachers. More than 83% of the cases were said to have happened within the home environment. The proportion of children treated for sexual violence had increased from 28% to 41% between 2002 and 2005, and 80% of the cases occurred in low income areas, suggesting a link between socio-economic status and the prevalence of sexual abuse. The crowded nature of poor neighbourhoods, with whole families sharing single rooms, contribute to the high incidents of sexual assaults. Large numbers of frustrated unemployed youth are also to blame.

Domestic/Marital violence

5.4.8 According to the KDHS 2003 one in every four married, divorced or separated women had experienced emotional violence from their current or most recent husband/partner. Of these 40% had experienced physical violence and 16% had experienced sexual violence. FIDA surveys between 2005 and 2006 suggest that married women are more susceptible to violence (45%). Seventy-seven percent of the victims had children, and 70% were unemployed and financially dependent on their abusers. Causes of the abuse included: extra-marital affairs (6%); substance abuse (3%); the woman getting home later than usual or later than the husband (25%); cooking the wrong meals on the wrong days; not ironing his favourite shirt; and financial constraints in the home (6%). Attitudes towards marital violence of both male and female respondents were that a husband

is justified in beating his wife if she burnt the food, argued with him, went out without telling him, neglected the children or refused to have sexual relations with him. Sadly more than two thirds of women agreed that a husband is justified in beating his wife for at least one reason, illustrating the ingrained socio-cultural attitudes.

Sexual Harassment

5.4.9 Sexual harassment is defined as a low level but sustained transmission of sexual messages where bodily contact either does not take place, or if it does, leads to no physical harm; a form of gender violence that seldom receives serious attention in Kenyan society. The newly enacted Sexual Offences Act now criminalizes Sexual Harassment by persons in authority or holding a public office as stated in section 23 (1) that “any person, being in a position of authority, or holding a public office, who persistently makes any sexual advances or requests which he knows of has reasonable grounds to know, are unwelcome, is guilty of the offence of sexual harassment and shall be liable to imprisonment for a term of not less than three years or to a fine of not less than one hundred thousand shillings or to both.”

5.4.10 While sexual harassment is difficult to quantify, a survey of the Public Law Institute revealed that 34% of those working in employment institutions had been sexually harassed at their work places; 92% said they had been subjected to sexual harassment in other places such as streets, *public* transport and other places; 57% were employed in government and other public offices and 42% were in the private sector and 1% in non-governmental organizations. In educational institutions 92% of those interviewed said they had been sexually harassed; 84% were from public universities while the rest were from mid-level colleges. Another study identified that adolescent secondary school girls experience sexual harassment daily as they commute to and from school on public transport. The girls in the study claimed that sexual harassment distracted them from schoolwork, thus placing them at an educationally disadvantaged position compared to male students.

Female Genital Mutilation (FGM)

5.4.11 FGM, which has already been referred to in 4.4, is practiced widely in many Kenyan communities. The practice takes different forms including partial or total removal of the clitoris (clitoridectomy), the removal of the entire clitoris and the cutting of the *labia minora* (excision), the removal of all external genitalia (infibulation) and the stitching together of the two sides of the vulva, leaving only a very small opening. FGM is widely condemned as harmful because it poses a potentially great risk to the health and well-being of the women and girls who are subjected to it, and it violates internationally accepted human rights.

5.4.12 According to the KDHS 2003 the proportion of Kenyan women who have undergone FGM declined from 38% in 1998 to 32% in 2003. The proportion of women circumcised increases with age, from 20% of women age 15-19 to 48% of those aged 45-49. This implies that the incidence almost halved in the last decade. The decline is largely due to the introduction of alternative rites of passage which replace FGM with rituals that retain the cultural significance of coming of age without physically harming the young women involved.

5.4.13 Not surprisingly the practice is more common in rural areas (36%). It is nearly universal among Somali (97%), Kisii (96%), and Maasai (93%) women and is also common among the

Taita/Taveta (62%), Kalenjin (48%), Embu (44%) and Meru (42%). Levels are lower among Kikuyu (34%) and Kamba (27%) women. FGM is almost nonexistent among Luhya and Luo women (each less than 1 percent). There has been a notable reduction since 1998 in the numbers of Kalenjin, Kikuyu, Kamba, and Mijikenda/Swahili women who reported having been subjected to FGM. Women with no education are three times more likely to undergo FGM (58%), than women with at least secondary education (21%). A similar pattern is seen with wealth; women in lower wealth quintiles are more likely to be subjected to FGM. Reasons for FGM vary from place to place but the most commonly cited is to control sexuality of girls/women by reducing libido, and to enforce the cultural value of virginity until marriage.

5.4.14 In spite of campaigns against FGM by human rights organizations, NGOs and the government through enactment of the Children's Act, many communities have refused to relinquish this practice and instead have gone underground to continue their activities. It is also reported that some communities have taken to exploiting loop-holes in the Children's Act and mutilate girls once they attain the age of 18 years.

5.4.15 The Ministry of Gender, Sports, Culture and Social Services is the national focal point for the coordination of all GBV activities, especially prevention of FGM initiatives. An Inter-ministerial committee on FGM was instituted with members drawn from the ministries of Health, Planning and National Development, Home Affairs, Justice & Constitutional Affairs, Education and the Departments of Social Services and Culture, NGOs and Community Based Organisations (CBOs). The Committee is responsible for facilitating the implementation of the National Action Plan on FGM. The Central Bureau of Statistics collates and produces GBV figures for government.

Wife/Widow Inheritance

5.4.16 In many Kenyan communities, such as among the Luo, "widow inheritance" is an accepted practice. Some months after the death of their spouses, widows are "inherited" by one of their husband's brothers or other close male relative thus ensuring that the widow remains under the guardianship of her late husband's relatives. This results in a relationship similar to remarriage, as the inheritor serves as a widow's sole legitimate sexual partner. He functions as a husband in other respects as well; for example, the inheritor stands in for the deceased husband in rituals, including acting as the father figure during the marriage of a widow's children.

5.4.17 Since HIV is now the leading cause of death in Kenya, widow inheritance may be an important factor driving the HIV/AIDS pandemic in communities where the practice is common. Between 2001 and 2004, half of the 1866 widowers and 56% of the 7724 widows who came for voluntary counselling and testing (VTC) were HIV infected. This might indicate that widows may be an important HIV *transmitter* group and are themselves at risk of acquiring new infections through 'ritual cleansing' another practice where the widow is forced to engage in often unprotected sexual relation with a male relative.

The effects of GBV

5.4.18 The cost of GBV on the individual, her family and society at large is phenomenal. Some of the consequences include feelings of hopelessness, isolation, degradation, humiliation, belittling, guilt and depression, or suicide. This in turn engenders a sense of fear and insecurity in female victims. GBV curtails women's movement and prevents them from leading independent lives.

Whiles lowering confidence levels in women, it increases vulnerability and dependence on the perpetrators, leading to a continued cycle of violence. The overall effect is that the potential of the victims remains unrealized as their spirits and energies are stifled.

5.4.19 GBV has significant **economic costs** for the Kenyan economy in terms of lower worker productivity and incomes, human and social capital, and its strain on healthcare and educational systems when young girls are the victims. The **health costs** of GBV include injuries, unwanted pregnancy, gynecological problems, sexually transmitted infections including HIV/AIDS, miscarriage, chronic pelvic pain, as well as depression, anxiety, sexual dysfunction, eating disorders and post-traumatic stress disorder. The **social costs** of GBV, though not always as apparent as the health-related or economic costs, are just as serious. Moreover, declining health status could also be considered a social cost due to its implications regarding decreased productivity or participation in society. Furthermore, the experience of GBV, regardless of the health status of the victim, can hinder the participation of women and children in the community and society simply due to the embarrassment, stigma or mental and emotional distress that it can cause.

5.4.20 The enactment of the Sexual Offences Act in July 2006 was a positive step towards tackling sexual violence in Kenya. This piece of legislation created 14 offences and sentences to address sexual violence in the country including gang rape, deliberate infection with HIV/AIDS or any other life-threatening sexually transmitted disease, penetration by use of objects, acts committed in view of family members, trafficking for sexual exploitation, child sex tourism and/or trafficking, and child pornography. It also includes the criminalisation of sexual harassment. Since the enactment of the law, it is reported that the courts have begun to apply the stiffer sentences as directed by the Act.

6. RECOMMENDATIONS FOR ADB INTERVENTIONS

6.1 Gender analysis of current ADB portfolio

6.1.1 The Bank Group commenced its lending operations in Kenya in 1967, and has supported 37 projects, five lines of credit and four policy-based operations. The Technical Assistance Fund has supported seven studies and three institutional support programmes. Currently 16 projects are approved and ongoing including four agricultural sector projects, one industrial/mineral project, one environment project, two transport projects, one water and sanitation project, two finance projects, one education and two health projects. The total value of on-going projects is UA298.81 million.

6.1.2 The Country Strategy Paper for Kenya (2005-2007) covering the ADF X programming cycle (which ends in 2007) is based on Kenya's IP- ERS. The CSP focuses on two main areas of intervention consistent with the priorities spelled out in the IP-ERS. The first area of intervention will seek to address constraints to private sector development through financial sector reforms. Secondly, the Bank will provide support to agricultural and rural development, including natural resources management, and to the social sectors of health and education, with cross-cutting issues of governance.

6.1.3 All ongoing agricultural sector projects supported by the Bank are intended to also benefit women in crop and livestock production; the Green Zones Development Project targets a population of 300,000 households, 27% of which are female-headed. They will benefit from wood plantations

for energy consumption, reducing time women spend searching for fuel wood; and women are targeted to provide casual labour under various conservation activities. Within the ASAL Based Livestock and Rural Livelihoods Support Project, women are particularly targeted in income generating and food security activities. The project also encourages the ownership of camels among women. Four hundred thousand households, 40% of which are female headed are project beneficiaries of the Kelima-Oluch Smallholder Irrigation Project. The provision of domestic water supply will reduce the time spent by women and children in fetching water, and contribute to improving the health of farming communities.

6.1.4 Both Rural Health Projects adequately target women, children and some of the most vulnerable members of rural communities. Through raising community awareness, improved knowledge on nutrition, reproductive health and immunization a reduction in maternal/infant mortality rates is expected. In addition to improved school facilities, the Education III Project supports disadvantaged and marginalized pastoral communities, girls and orphan children with bursary support as well as skills training. The Ewaso Ngoro Natural Resources Conservation Project will directly benefit 70,000 households, of which 20% are female headed. The project also sets a quota of 30% women for training and project appraisal activities. Women will also benefit from the increased availability of fuel wood.

6.1.5 The Rift Valley Water Supply and Sanitation Project targets women, children, the elderly and some of the most vulnerable members of the society. The project will bring safe water, improved sanitation and awareness raising on malaria and other water borne diseases. The time women spend in searching for safe water will be reduced. Of four private sector financial investments made by the Bank, three are silent on gender issues, with no reference to women entrepreneurs accessing credit/loans.

6.2 Areas for Enhancing Gender Concerns in ADB Interventions

General Approaches

6.2.1 The Bank currently provides support to agricultural and rural development, including natural resources management, health and education sectors. The Gender Division in the MGSSCC has the mandate for policy formation and coordination of mainstreaming in sector ministries and other agencies. However, capacity constraints have hampered its gender work. The Bank should fund gender training and skills upgrading for staff that are directly linked to Bank interventions; with the Bank engaged in most sectors, such a move will help ensure gender mainstreaming in non-Bank projects as well.

6.2.2 Since gender mainstreaming in most line ministries is currently inadequate, the Bank will be in a better position to monitor line ministries with Gender Focal Points through the newly opened field office, particularly if a gender/social expert will be attached to the field office.

6.2.3 All ABD agricultural sector projects, the water supply and sanitation and social sector projects targets women, girls and some of the most vulnerable rural population. Private sector interventions have been silent on issues related to gender equality. Whiles all Project Appraisal Reports have in-depth discussions/analysis on Environmental Impact/Aspects of the project, the

social/gender analysis varies a great deal in the respective projects. To address this, all proposals for Bank assistance should be requested to contain gender analysis, with identified gender gaps being addressed **by the project**.

6.2.4 The Bank's interest in strengthening the role of SMEs in contributing to sustainable growth through the African Women in Business (AWIB) initiative with the Private Sector Window has resulted in a project that seeks to empower Kenyan women in SME development. The Bank should also endeavour to address the identified challenges and negotiate better conditions for women entrepreneurs in Lines of Credit to Kenyan financial institutions. It is hoped that this and similar initiatives will encourage women entrepreneurs to formalise their businesses, as the formalisation of the informal sector is an important step towards the empowerment of women entrepreneurs.

6.2.5 Given the Bank's commitment to gender equality, and the empowerment of women, the Bank should support the Kenyan government's 30% recruitment of women into public departments by providing capacity building in gender sensitive recruitment and retention methods. In addition all future projects should integrate at least 30% women in project implementation units, particularly in project management. Women professionals should also be recruited as technical experts, to bring gender balance as well as female perspectives to project designs and implementation.

6.2.6 Despite the many initiatives which seek to address the lack of women in political and economic decision making, little progress has been made. Rather than address the issue in separate projects, mainstreaming interventions that support women's leadership throughout all projects and programmes will have more success. The lack of women's participation in decision-making should also be made a subject area of policy dialogue and governance debates.

Agricultural Sector

6.2.7 While current agricultural sector projects address gender concerns within beneficiary communities, specific targets need to be set, in particular with regard to access to and control over resources of women. Clearly defined gender components detailing targets, indicators of women's and men's participation in the development and design of the project and evidence of women's representation in project management. The Bank should use the Gender Equity Mobilisation Support (GEMS) Unit in its project formulation and also fund capacity building and skills upgrading of the unit.

6.2.8 Most of the current ADB projects in the agriculture sector have income generation components. In future project designs, proposed income generation activities need to move away from traditional activities for men and women and support women's greater control over productive resources. The Bank should ensure that all future projects designs include special measures to ensure equal access of women to all agri-business activities. Focus should be placed on potential growth areas, such as livestock production, intensified vegetable production, floriculture development, social forestry and development of co-operative schemes. Projects should also provide appropriate technology and training in their use and maintenance for the women farmers. Further, the Bank should consider training extension officers and researchers to enable them to prepare gender-sensitive technical innovations appropriate and acceptable to women. Increased training of female extension officer could also be considered as an option of increasing inclusion of female farmers in improved farming activities.

6.2.9 It is imperative that as part of the APR mechanism ADB follows through the implementation of the recommendation of the report on Kenya.

6.2.10 Lack of control over land and other productive resources is a major constraint women farmers face limiting their willingness to invest in farm improvements. The Bank needs to address the issue of land rights of women in all policy dialogue missions and governance profiles.

Social Sector Interventions

6.2.11 Both this gender profile and the CSP identified weak human resource development in Kenya which have deteriorated conditions in education and health sectors. Future project designs should include strategies to address challenges facing girls and women within the Kenyan educational institutions, particularly in secondary and tertiary education and in non traditional subjects which include barriers of access, inadequate facilities, the institutional culture of schooling, the pervasiveness of sexual harassment and the reproductive roles of girls and women. As part of a gender mainstreaming initiative with the Ministry of Education, the Bank should assist Kenya in 'engendering' curriculum development for schools and colleges.

6.2.12 GBV is pervasive in Kenya and the many initiatives that do happen, fall short of the need. Measures against GBV should be mainstreamed in all social sector projects, such as offering training for health professionals to deal with the consequences of GBV, establishing gender desks in police stations, training law enforcement officers in handling cases of GBV with sensitivity, supporting education and sensitization campaigns, establishing and supporting safe houses for abused women and assisting to establish codes of conduct and conduct training in GBV for teachers and other civil servants.

Infrastructure Interventions

6.2.13 Experience in other parts of Africa has suggested that the transport needs of men and women are different and that their purposes for travel also differ. Women and children perform almost all the domestic transport, which requires intermediate transport options. ADB road projects focus too heavily on motorized transport needs to the detriment of intermediate transport and the needs of those who walk. The design of roads should accommodate those needs, and small project components could seek to supply the population with improved intermediate transport means.

6.2.14 The fact that 63.3% of the population cook with firewood is not only environmentally damaging but also has many negative impacts on the health of those who cook. Appropriate technology is needed to reduce the smoke, the quantity of wood used and discomfort while cooking. Infrastructure projects, just like the more obvious agricultural and social projects, can mainstream components that address this issue.

7. RECOMMENDATIONS TO GOVERNMENT, DONORS AND NGOs

Institutional framework for gender mainstreaming

7.1 The Department of Gender within the Ministry of Gender, Sports, Culture and Social Services has been 'downgraded' to become a division within the Department of Gender and Social Services. Even as a full department, it had limited authority over the other departments in the same Ministry and little influence in other ministries. The Gender Division has serious human resource and skills constraints which hamper its work. For the department to be able to implement its mandate adequate resources need to be made available. This would require qualified staff and an operational budget.

7.2 The National Commission on Gender and Development (NCGD) was established to coordinate, implement and facilitate gender mainstreaming in national development, and to advise the Government on all aspects thereof. The Commission is, however, working at 20% staffing capacity which severely limits its ability to deliver its mandate. Due to lack of resources and statistics, monitoring and evaluation (M&E) of interventions to achieve greater gender equality is limited. The Commission therefore requires a full staff complement, including specialists in M&E, and an adequate operational budget.

7.3 Gender focal points and gender divisions in line ministries have been shown to be very effective where they exist, such as in Education and Agriculture. However, they can only come to life and benefit the whole ministry if they have sufficient financial and human resources and also have staff members at a higher level who will carry sufficient authority to influence the ministry's decision making.

7.4 Even though Kenya has a National Gender Policy, there is no National Gender Action Plan, which would have set targets and goals that government and stakeholders would monitor for progress in implementation. A National Gender Action Plan would facilitate coordination between ministries. The Gender Division should be supported with adequate resources to enable it undertake an effective co-ordination of all gender mainstreaming work in ministries, NGOs and key stakeholders.

7.5 Consultations with different ministries revealed wide variations in awareness of gender issues and knowledge of gender mainstreaming. For many gender is still equated with being a women's affair only which is not taken seriously. Gender training of all levels of ministerial staff, including senior officials, is needed to change this image and to channel more resources to gender. At least two Kenyan Universities have the capacity to regularly conduct gender training.

7.6 The absence of gender disaggregated data is one of the major constraints in the design and implementation of gender-responsive programs. There is need to improve gender statistics in all sectors and institutions. Without data which are differentiated by gender, planning and social programming can only accentuate the inequalities. The STATCAP project between Central Bureau of Statistics and Gender Department will go a long way in addressing this gap. However, more needs to be done, including improved data collection and analysis so as to generate gender disaggregated data showing the contributions of men and women in all sectors of the national

economy, including their participation in the informal sector. Gender disaggregated data will also improve the measurements of women's unemployment and underemployment in the formal sector, and show their labor contributions as unpaid family workers.

Legal Framework

7.7 Kenya has many draft progressive laws, which address aspects of women's empowerment, however, the time it takes for them to be passed is too long. Such laws which facilitate the social and economic empowerment of women should be fast-tracked. Support to parliamentary women's caucuses might go a long way in facilitating the passing of gender sensitive legislation.

7.8 Legislation is necessary to address the rights of women in situations of cohabitation, which do not fit into any of the four systems of marriage. This concerns particularly the separation of property legislation.

7.9 The effectiveness of laws, however progressive, is largely dependent on their being applied. This is often not the case. With limited education women often do not know their legal rights, they have limited financial means and capacity to enforce them in court and they fear that taking legal action alienates them from their families. The better accessible informal system by contrast, is biased against them and its decisions are not enforceable. This lack of access to justice is in itself an injustice. New legislation in particular needs to be simplified and disseminated. Included in the sensitization and training need to be men, political and religious leaders and law enforcement officers, be they lawyers, judges, court orderlies, police or medical doctors working for the police. Involvement of the media might offer other avenues of dissemination.

7.10 Legal services are out of reach of a majority of Kenyan women implying that special legal aid arrangements are necessary to enable them to challenge discriminatory practices. The establishment of the family court system has helped women access justice, but it only exists in Nairobi and therefore excludes those who are not living there. The Family Court system needs therefore to be decentralised to increase access.

7.11 Women need to be sensitized on the benefits of obtaining marriage certificates, registering births, joint titling and registration of property as well as the need to write a will. All these procedures, which increase women's access to the formal legal system, need to be simplified.

Economic Framework

7.12 In order to encourage women's entrepreneurship and to make it possible for women to grow, it is important that middle level finance which fills the gaps between micro finance and commercial bank lending, is available with conditions that take women's legal and other constraints into account.

Agriculture

7.13 The Ministry of Agriculture undertook a study with GTZ support to mainstream gender into the ministry's budgetary process and as a result has developed a gender responsive budget. It also

has a functioning Gender Equity Mobilisation Support (GEMS) Unit, but due to limited financial and human resources, the unit is working far below its capacity.

7.14 Women's land rights need to be urgently addressed to encourage women farmers to invest in agriculture and improve yields as a result. The translation into action of the Draft Land Policy provisions will be a priority that deserves support.

7.15 Recent analysis suggests that rural livelihood changes, such as the decline of cash crops previously under the control of men, has economically disempowered rural men. Such trends need to be carefully monitored and rural development projects need take account of both men's and women's needs to rectify the widening of gender gaps.

Education

7.16 Research has shown that in many parts of Kenya, particularly in the ASAL areas dominated by nomads, girls face a multitude of challenges starting with domestic work overload, their being considered perpetual minors, forced early marriage and others customs and attitudes. This needs to be addressed on a number of levels, including advocacy, incentives for girls to go to school and stay there, girl friendly schools and others.

7.17 The pilot projects of FAWE which aimed to improve the school environment for girls have been shown to have had positive effects on girls' education and achievement. It is important that the initiative be replicated and rolled out.

7.18 It has been suggested that the Free Primary Education drive has deteriorated the quality of education, as teachers have more students with fewer resources to share. The effects will be felt particularly by orphans and other vulnerable children, who will not receive the necessary care and attention to motivate them. Increase in quantity should not mean letting up on quality, particularly not if vulnerable children are concerned.

Health

7.19 Statistics show that the youth start engaging in sex early and consequently they face many risks that come with early sexual debut. They are faced with challenges of remaining in school, delaying marriage and childbearing, finding gainful employment, and remaining free from unplanned pregnancies, STIs, and HIV. The high teenage pregnancy rate contributes to maternal and neonatal mortality and morbidity. Yet there is still limited access to adolescent friendly sexual and reproductive health information and services in Kenya. The success of the Nyeri Youth Health Project (NYHP), would suggest replication.

7.20 Access to youth friendly reproductive health clinics remains a challenge for many young people in Kenya. Many find it difficult to seek treatment, especially for STDs, and avoid stigmatization because they are usually associated with promiscuity. Untreated infections are also high among pregnant young women and those who have ever had an STD. There is thus a great need to make the reproductive health clinics youth friendly.

7.21 Kenya is a country where maternal mortality rates have decreased and yet the number of births attended by medically trained personnel and facility based births have also decreased,

suggesting a downward trend in maternal health. It would be worthwhile to investigate this unusual development.

Infrastructure

7.22 The infrastructure sector is in need of support for the identification of gender specific needs and the formulation of gender sensitive projects/programmes in the transport, water and energy sub-sectors in particular. It is important that gender concerns are brought to this sector. It is therefore important to support the establishment of gender divisions in the relevant ministries, and to make available funds that enable a thorough gender analysis of infrastructure projects and programmes.

7.23 The development of a wood fuel strategy is a good first step in reconciling the potential conflict between socio-economic realities and environmental conservation. However, alternative and affordable fuel needs to be offered to poor rural and urban household to make a difference. Whatever strategy or solution is chosen it will have to be a solution that is acceptable to women since they use most of the energy.

Crosscutting issues

7.24 Because infection rates are so gendered, all HIV/AIDS interventions should be based on a sound gender analysis and include thorough baseline data. This would facilitate the appropriate monitoring of progress as well as the identification of target groups.

7.25 Gender lobbies have since 2000 fought for legislated quota of 30% women in decision making. Kenya is still behind neighbouring countries when it comes to women's participation in decision making and quota might assist women to take a bigger role in politics. A bill which sought to institute 50 reserved seats for women in parliament, was rejected in 2007. The proposal would have helped increase the share of women MPs; however, women's share of elected positions is even more important and should not be forgotten.

7.26 The new draft constitution was gendered but was rejected by the Kenyan population. It is important that donors and NGO's ensure and support the formulation of a constitution that remains engendered.

7.27 Many stakeholders, particularly donors and NGOs, are involved in advocacy against GBV. While this is helpful, direct assistance to victims of GBV should not be neglected. They need care, a safe place to stay and to be treated by people that do not see GBV as their fault as women. This requires the establishment of safe houses and shelters and training of personnel to treat victims in a sensitive and supportive manner. The establishment of gender desks with **trained personnel** in police stations needs to be urgently stepped up.

7.28 FGM has been outlawed through the Children's Act for girls under the age of 18. The trend therefore has been to postpone FGM until after the age of 18. FGM needs to be outlawed for all age groups.

ANNEXES

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Annex 2

Goal	Target	Indicators	Status	Year
1. Eradicate poverty and hunger	Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day.	The proportion of the population below \$1 per day	56%	2002
		Poverty gap ration	1:2	2003
	Halve, between 1990 and 2015, the proportion of who suffer from extreme hunger.	Share of the poorest quintile in the national consumption.	4.8%	2000
		Prevalence of underweight in children under five years of age.	19	2003
2. Achieve universal primary education	Ensure that by 2015, children everywhere, boys and girls, will be able to complete a full course of primary schooling.	Prevalence of stunting in children under 5 yrs of age.	31	2003
		Net enrolment in primary education-boys, girls, total	82.2%(Boys) 82.0%(Girls) 82.1%(Total)	2004
		Proportion of pupils starting grade 1 who reach grade 5-boys, girls, total	81	2000
3. Promote gender equality and empower women	Eliminate gender disparity in primary and secondary education preferably by 2005 and in all levels of education no later than 2015.	Ration of girls to boys in primary secondary education.	Primary (101.6%)	2004
		Ration of literate females to males among 15-24 years olds.	90.5%	2000
		Share of women in wage employment in the non-agricultural sector.	35%	2003
		Proportion of seats held by women in national parliament.	8.3%	2005
4. Reduce child mortality	Reduce by two-thirds between 1990 and 2015, the under five mortality rate.	Under-five mortality rate	115/1000	2003
		Infant mortality rate	77/1000	2003
		Proportion of one-year old children immunized against measles.	73%	2003
5. Improve maternal health	Reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio.	Maternal mortality ratio	414/100000	2003
		Proportion of births attended by skilled by skilled health personnel.	42%	2003
6. Combat HIV/AIDS and other diseases	Have halted by 2015, and begun to reverse the spread of HIV/AIDS.	HIV prevalence among 15 to 24 years old pregnant women.	9	2003
		Contraceptive prevalence rate.	41%	2003
		Number of the children orphaned by HIV/AIDS.	1.8 million	2004
	Have halted by 2015, and begun to reverse the incidence of malaria and other major diseases.	Coverage of ITN for children below 5 yrs of age (%)	5	2003
		Pregnant women accessing prophylaxis (%).	4	2003
		Number of notified TB cases.	90000	2002
7. Ensure environmental sustainability	Integrate the principles of sustainable development into country policies and reverse the loss of environmental resources.	Change in land area covered by forest. (Gazeted Forests)	From 165000 ha to less than 80000 ha	1988-2002
		Proportion of land area protected to maintain biological diversity.	1.7 mn ha	2004
	Halve, by 2015, the proportion of people without sustainable access to safe drinking water.	The proportion of population with sustainable access to an improved water source.	55%	2002
		Have achieved, by 2020, significant improvement in the lives of at least 100 million slum dwellers.	Proportion of population with access to improved sanitation.	86%
8. Develop global partnership for development	In cooperation with developing countries, develop and implement strategies for decent and productive work for youth.	Proportion of population with access to secure tenure, owned or rented houses		
		Unemployment rate of 15-24 years olds for each sex and total.	29.5% for women	2000-2003
	In cooperation with the private sector, make available the benefits of the new technologies, especially information and communication.	Telephone and cellular subscribers per 1000 population	100 lines for 1000 population	2005

Source: Millennium Development Goals, Status Report for Kenya 2005.

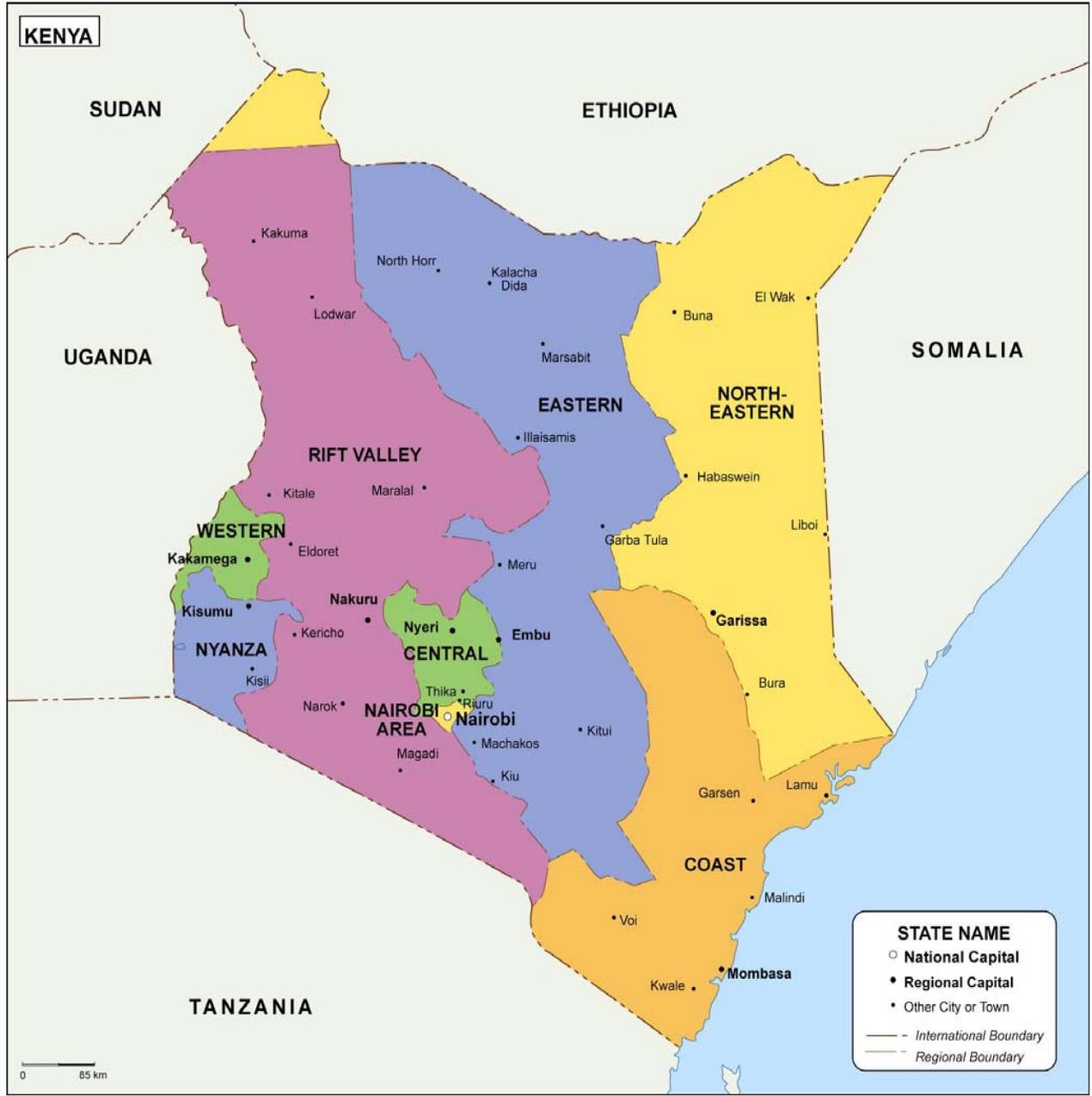
Kenya-Comparative Socio-Economic Indicators

	Year	Kenya	Africa	Developing Countries	Developed Countries
Basic Indicators					
Area ('000 Km ²)		580	30 061	80 976	54 658
Total Population (millions)	2003	32,0	849,5	5 024,6	1 200,3
Urban Population (% of Total)	2003	35,3	39,2	43,1	78,0
Population Density (per Km ²)	2003	55,1	28,3	60,6	22,9
GNI per Capita (US \$)	2003	400	704	1 154	26 214
Labor Force Participation - Total (%)	2003	52,4	43,3	45,6	54,6
Labor Force Participation - Female (%)	2003	47,1	41,0	39,7	44,9
Gender -Related Development Index Value	2002	0,486	0,476	0,655	0,905
Human Develop. Index (Rank among 174 countries)	2002	148	n.a.	n.a.	n.a.
Popul. Living Below \$ 1 a Day (% of Population)	1994	26,5	46,7	23,0	20,0
Demographic Indicators					
Population Growth Rate - Total (%)	2003	1,4	2,2	1,7	0,6
Population Growth Rate - Urban (%)	2003	4,1	3,8	2,9	0,5
Population < 15 years (%)	2003	42,0	42,0	32,4	18,0
Population ≥ 65 years (%)	2003	2,9	3,3	5,1	14,3
Dependency Ratio (%)	2003	80,0	86,1	61,1	48,3
Sex Ratio (per 100 female)	2003	97,9	99,0	103,3	94,7
Female Population 15-49 years (% of total population)	2003	25,3	24,0	26,9	25,4
Life Expectancy at Birth - Total (years)	2003	44,4	50,7	62,0	78,0
Life Expectancy at Birth - Female (years)	2003	45,2	51,7	66,3	79,3
Crude Birth Rate (per 1,000)	2003	32,0	37,0	24,0	12,0
Crude Death Rate (per 1,000)	2003	16,9	15,2	8,4	10,3
Infant Mortality Rate (per 1,000)	2003	67,8	80,6	60,9	7,5
Child Mortality Rate (per 1,000)	2003	115,8	133,3	79,8	10,2
Maternal Mortality Rate (per 100,000)	1999	570	661	440	13
Total Fertility Rate (per woman)	2003	3,9	4,9	2,8	1,7
Women Using Contraception (%)	1998	39,0	40,0	59,0	74,0
Health & Nutrition Indicators					
Physicians (per 100,000 people)	1999	3,6	57,6	78,0	287,0
Nurses (per 100,000 people)	1995	90,1	105,8	98,0	782,0
Births attended by Trained Health Personnel (%)	1998	44,0	44,0	56,0	99,0
Access to Safe Water (% of Population)	2002	62,0	64,4	78,0	100,0
Access to Health Services (% of Population)	1992-98	...	61,7	80,0	100,0
Access to Sanitation (% of Population)	2000	86,0	42,6	52,0	100,0
Percent. of Adults (aged 15-49) Living with HIV/AIDS	2003	7,5	6,4	1,3	0,3
Incidence of Tuberculosis (per 100,000)	2000	209,2	109,7	144,0	11,0
Child Immunization Against Tuberculosis (%)	2003	87,0	81,0	82,0	93,0
Child Immunization Against Measles (%)	2003	72,0	71,7	73,0	90,0
Underweight Children (% of children under 5 years)	1998	22,1	25,9	31,0	...
Daily Calorie Supply per Capita	2002	2 090	2 444	2 675	3 285
Public Expenditure on Health (as % of GDP)	1998	2,4	3,3	1,8	6,3
Education Indicators					
Gross Enrolment Ratio (%)					
Primary School - Total	2001	96,0	88,7	91,0	102,3
Primary School - Female	2001	95,0	80,3	105,0	102,0
Secondary School - Total	2001	32,0	42,9	88,0	99,5
Secondary School - Female	2001	30,0	41,3	45,8	100,8
Primary School Female Teaching Staff (% of Total)	1998	42,1	46,3	51,0	82,0
Adult Illiteracy Rate - Total (%)	2003	14,9	36,9	26,6	1,2
Adult Illiteracy Rate - Male (%)	2002	10,0	28,4	19,0	0,8
Adult Illiteracy Rate - Female (%)	2003	20,3	45,2	34,2	1,6
Percentage of GDP Spent on Education	1998	6,5	5,7	3,9	5,9
Environmental Indicators					
Land Use (Arable Land as % of Total Land Area)	2003	7,0	6,2	9,9	11,6
Annual Rate of Deforestation (%)	1995	0,3	0,7	0,4	-0,2
Annual Rate of Reforestation (%)	1990	1,0	10,9
Per Capita CO ₂ Emissions (metric tons)	1998	0,3	1,2	1,9	12,3

Source : Compiled by the Statistics Division from ADB databases; UNAIDS; World Bank Live Database and United Nations Population Division.

Notes: n.a. Not Applicable;

... Data Not Available.



This map was prepared by the African Development Bank Group exclusively for the use of readers of the report to which it is attached. The names used and the borders shown do not imply, on the part of the Bank or its members, any judgment concerning the legal status of a territory nor any approval or acceptance of the borders.

AREA/SECTOR	STAKEHOLDERS	AREAS OF INTERVENTION
Policy, Institutional and Legal Frameworks	<ul style="list-style-type: none"> • The National Commission on Human Rights, • the Task Force on the Law of Succession, • the Commission of Inquiry into the Land Systems of Kenya; and • the Ministry of Lands and Housing 	Deal with formulation of laws
	<ul style="list-style-type: none"> • FIDA-Kenya 	One of the largest civil society organizations engaged in legal sensitization and law formulation; disseminates legal provisions, lobbies for changes; educates men, women and law enforcement agencies on new laws,; trains parliamentarians; is active in election monitoring and assists government in law drafting.
	<ul style="list-style-type: none"> • The Kenya Land Alliance 	Work on Land Rights
	<ul style="list-style-type: none"> • National Council of Women of Kenya 	Legal education
	<ul style="list-style-type: none"> • Donors: USAID, CIDA, CIDA/GEST, DANIDA, Irish AID, Oxfam, DFID, Netherlands, Norway and Sweden and UN organizations as well as the Ford Foundation 	USAID -Support NGOs engaged in activities relating to property rights; CIDA -Gender Equity Support Programme; CIDA/GESP - provided funding for NGO led legal services and training with regard to Property rights; and the others human/property rights related activities.
Macroeconomic Institutional Framework	<ul style="list-style-type: none"> • Ministry of Planning and National Development 	coordination of national as well as regional and international economic policy formulation and also tracking performance of the government in implementing the ERS and long-term development goals including the Millennium Development Goals

	<ul style="list-style-type: none"> Ministry of Trade and Industry 	<p>Formulation, implementation, coordination, review and monitoring of policies in industry; development and promotion of quality standards for industrial products as well as</p>
	<ul style="list-style-type: none"> Private sector and NGOs: Men and Women Entrepreneurs, the Organization of Women in International Trade (OWIT), 	<p>OWIT promotes the advancement of women in trade and business;</p>
	<ul style="list-style-type: none"> Donors include AfDB Growth-Oriented Entrepreneurs (GOWE), IFC SME Solutions Centre (SSE) 	<p>GOWE, a US\$10 million guarantee fund that allows women ; SSE provides technical assistance and also houses an ICT resource centre with digital and video conferencing facilities for use by MSMEs,</p>
	<ul style="list-style-type: none"> A vibrant MFI industry counts 100 organizations, half of them NGOs. Major players in the sector include Faulu Kenya, K-Rep, Kenya Women Finance Trust (KWFT), Pride Ltd, Wedco Ltd, Small and Medium Enterprise Programme (SMEP), Kenya Small Traders and Entrepreneurs Society (KSTES), Ecumenical Loans Fund (ECLOF) and Vintage Management (Jitegemee Trust). The Kenya Post Office Savings Bank (KPSOB) 	<p>20 of the NGOs offer pure micro-financing, while the rest also address social welfare activities.</p> <p>The larger MFIs provide loans, micro finance and savings facilities and some NGOs have successfully replicated the Grameen Bank method of delivering financial services to low-income clients</p>
<p>Agricultural Sector</p>	<ul style="list-style-type: none"> Ministry of Agriculture 	<p>MoA is the lead ministry with responsibilities of policy development and service delivery; also extension services; production of the National Food Policy, crop production and marketing as well as pest and diseases control</p>
	<ul style="list-style-type: none"> The Ministry of Livestock and Fisheries 	<p>Is responsible for livestock and fisheries production as well as veterinary service provision</p>
	<ul style="list-style-type: none"> Ministry of Cooperatives 	<p>handles mobilization of savings and provision of credit through SACCOs as well as marketing of</p>

		agricultural produce
	<ul style="list-style-type: none"> Ministry of Water and Irrigation 	Provides technical expertise and resource management in water supply and irrigation infrastructure provision
	<ul style="list-style-type: none"> Kenya Dairy Board (KDB), Kenya Marine and Fisheries Research Institute 	Plays a regulatory role for the milk sub-sector Conducts research in the fisheries sub-sector
	Donors include: AfDB, World Bank, FAO, IFAD, USAID, DFID, The Netherlands, GTZ, EU, JICA, CIDA, SIDA	Provide budget support to GOK as well as undertake specific projects such as: SIDA funded National Agriculture and Livestock Programme (NALEP), the DANIDA funded Agriculture Sector Project (ASP), the GTZ funded Kenya Agriculture Sector Information Management (KASIM)
	Various NGOs including Food for the Hungry, Catholic Relief Services (CRS), World Vision, CARE, Adventist Development and Relief Agency, World Council of Credit Unions (WOCCU), Appropriate Technologies for Enterprise Creation (ApproTEC), Heifer Project International (HPI), African Breeders Service/Total Cattle Management (ABS/TCM), Seed Trade Association of Kenya (STAK) and Kenya Plant Health Inspection Services (KEPHIS), Kenya Network for Draught Animal Technology (KENDAT, FARM Africa, World Vision, One World Development Foundation, OXFAM UK and Catholic Relief Services among others	Their services include: provision of extension services either through government front line staff or through their own staff, Farmer Field Schools (FFS) to farming communities, while others provide training, support and awareness raising on HIV/AIDS as it affects agricultural communities as well provision of micro finance to farmers.
Education Sector	<ul style="list-style-type: none"> The two ministries responsible for the Education Sector are the Ministry of Education and the Ministry of Science and Technology. Ministry of Gender, Sports, Culture and Social Services 	Is responsible for adult and continuing education

	<ul style="list-style-type: none"> Ministry of Labour and Human Resource Development 	Is responsible for vocational and industrial training, mostly offered in youth polytechnics
	Other Agencies include the Teachers Training Commission (TSC), the Kenya Institute of Education (KIE), Kenya National Examinations Council (KNEC), Commission for Higher Education (CHE), the Higher Education Loans Board (HELB), and the National Council for Science and Technology Education in Africa (CEMASTEA).	
	Donor Agencies include: UNESCO, DFID, World Bank, AfDB, SIDA, UNICEF, JICA, GTZ, OPEC	All support FPE, JICA is supporting Secondary Teacher Training; UNICEF supports youth (including street children) and HIV/AIDS in education; OPEC supports the Primary and Secondary School Improvement Programme; The World Bank is also supporting primary and secondary education. GTZ sponsored the Post Literacy Project while the Commonwealth Secretariat supports a project on the creation of a literate Environment.
	NGOs include: Maendeleo ya Wanawake, FIDA Kenya, Women's Political Alliance Kenya, Pamoja Trust, Shelter Forum and Trickle-up Kenya, National Council of Women (Kenya)	The NGOs provide non-formal education as well as adult learning.
Health Sector	<ul style="list-style-type: none"> Ministry of Health 	MoH is the lead ministry with responsibilities of policy development, service planning and delivery;
	<ul style="list-style-type: none"> Division for Reproductive Health (DRH) 	Is the Stakeholder that is concerned with issues relating to safe motherhood, adolescent reproductive health and Family Planning.
	World Bank AfDB, WHO, Global Fund, USAID,	Provide the bulk of the budget for the health sector

UNFPA, UNICEF, as well as JICA, DFID, SIDA, DANIDA, FINNIDA, GTZ, and KFW among others	
JICA, GTZ, USAID, John Snow Inc, DfiD, Population Council, JHPIEGO and WHO.	Some of the partners that DRH collaborates with on Safe Motherhood activities in the country
UNFPA, UNICEF, WHO, and Save the Children	Partners implementing The Adolescent and Reproductive Health (ARH) Program is currently being implemented in five provinces
<ul style="list-style-type: none"> Care Kenya 	Helped the Ministry to develop and launch National Guidelines for the Medical Management of Rape and Sexual Violence
<ul style="list-style-type: none"> GTZ 	financed the development of a plan of action against female genital mutilation
<ul style="list-style-type: none"> African Medical and Research Foundation (AMREF) 	Private Health Provider (PHP) which provides a broad array of services ranging from clinical care and emergency response to training and advice in health policy and systems development
<ul style="list-style-type: none"> The Christian Health Association of Kenya (CHAK) 	CHAK is one of the largest health related NGOs in the country, covering 38% of services provided by NGOs or around 8% of all available facilities
<ul style="list-style-type: none"> The Kenya Catholic Secretariat (KCS), 	With 19 Catholic Dioceses all over Kenya, including the sparsely populated and generally neglected districts in the northern, eastern and north eastern part of the country
<ul style="list-style-type: none"> The Family Health Options Kenya (FHOK), 	FHOK is an important service provider of family planning services and clinic based reproductive health services
<ul style="list-style-type: none"> The Kenya AIDS NGO Consortium (KANCO), 	A consortium of NGOs, and currently including more than 400 member organizations working to fight HIV/AIDS.
<ul style="list-style-type: none"> Kenya Aga Khan Foundation 	Is an international welfare NGO, which has several

		reputable hospitals and health facilities in Kenya
INFRASTRUCTURE SECTOR		
Housing Sector	<ul style="list-style-type: none"> National Housing Corporation (NHC) 	The NHC is the main public sector provider mandated to deliver the government's housing development plan
	<ul style="list-style-type: none"> Private sector providers 	Provide 91.9% of urban housing
	<ul style="list-style-type: none"> Owner occupiers 	Provide 91.5% of Rural Housing
	<ul style="list-style-type: none"> UNHABITAT 	Is working with the GOK on the Slum Upgrading Project (KENSUP) which was awarded US\$ 6 million in the 2005/06 financial year.
Water sector	<ul style="list-style-type: none"> Ministry of Water and Irrigation 	The Ministry exercises control over every water resources
	<ul style="list-style-type: none"> The Water Resources Authority (WRMA) 	WRMA undertakes water resources management functions
	<ul style="list-style-type: none"> Catchment Area Advisory Committees (CAAC) 	CAAC deals with issues relating to their catchment areas
	<ul style="list-style-type: none"> The Water Services Trust Fund 	The Fund is set to assist in financing the provision of water services in areas without adequate water services
	<ul style="list-style-type: none"> Non-statutory stakeholders include NGOs, private sector providers, farmers and industry. 	
	<p>NGOs involved in water and sanitation includes the Kenya Water for Health Organisation (KWAWO), (ADA) as well as the WaterCan Eauve Canada,, SANDEC, EAWAG Foundation and SIDA through the Water Trust Fund (WSTF).</p>	
	<ul style="list-style-type: none"> The African Medical & Research Foundation (AMREF) 	AMREF is involved in training local artisans to construct and expand wells and boreholes, and has

		introduced community programmes that use education and skill sharing to increase access to clean water and encourage public sanitation, particularly within the pastoralist and nomadic Maasai communities. It empowers communities to develop and manage their own water projects.
The Energy Sector	• The Ministry of Energy	The Ministry is responsible for policy formulation regarding all manner of energy
	• The Matinyani Women’s Development Group	The Group use solar dryers to dry mangoes and other fruits
	• Energy Alternatives Africa (EAA)	EAA, another NGO working with rural women promotes the utilisation of all types of renewable energy.
Environment	• The Ministry of Environment and Natural Resources	The Ministry is mandated to protect, conserve and manage the environment and natural resources in a sustainable manner
	• The Ministry of Water and Irrigation (MoW&I)	The MoW&I is responsible for managing and protecting water resources for socio-economic development.
	• The Department of Lands (DoL)	The DoLs has among its core functions the provision of advisory and technical services on land matters and the preservation of public utility land and fragile ecosystems
	• The Ministry of Agriculture	The MoA is undertaking environmental sustainability activities including the promotion of soil and water management and conservation, protection and improvement of the natural environment, management of agricultural resources and protection of ecological environment, promotion of agro-forestry and protection and

		preservation of bio-diversity among others
	<ul style="list-style-type: none"> The Kenya Agricultural Research Institute (KARI) and the Western Kenya Agro-Forestry Centre (ICRAF) 	KARE and ICRAF are implementing the five-year Western Kenya Integrated Ecosystem Management Project that involves the public in gully rehabilitation activities
	<ul style="list-style-type: none"> The National Environment Management Authority (NEMA) 	(NEMA) is mandated to exercise general supervision and co-ordination over all matters relating to the environment and to be the principal instrument of Government in the implementation of all environmental policies. It is also mandated to ensure the rehabilitation of degraded sites using the National Restoration Fund. In addition, it produces the State of Environment Report which is submitted to Parliament.
	UNDP and UNEP	UNDP and UNEP fund various programmes and activities, including the production of SoE reports, as well as programmes under the Convention on Biodiversity Environment Trust Fund
	There are numerous NGOs working in the environment sector – the most notable being The Green Belt Movement	
HIV/AIDS	<ul style="list-style-type: none"> The NASCOP and NACC 	These two government organizations are mandated to coordinate and monitor HIV/AIDS interventions, are supported by AIDS Control Units in all Ministries with the Mandate of mainstreaming AIDS interventions in all policies and Programmes.
	<ul style="list-style-type: none"> DFID 	DFID funds the Primary School Action for Better Health programme, which is a model for HIV/AIDS programmes in schools
	<ul style="list-style-type: none"> Provincial, District and Constituency AIDS Control 	These councils were established to bring HIV/AIDS

	Councils	concerns to the forefront at the local government levels
	<ul style="list-style-type: none"> Kenya AIDS NGO Consortium (KANCO) 	KANCO is an umbrella for 850 NGO and CBO member organizations. The organization builds the capacity of the member organizations, runs a resource center and engages in projects, including projects on property rights of girls and widows and on involving men
	<ul style="list-style-type: none"> The Kenyan AIDS Watch Institute 	The Institute is an independent Monitoring organization which also engages in an ICRW funded project on the integration of widow's property rights into HIV/AIDS interventions
	<ul style="list-style-type: none"> The Young Widows Advancement Programme (YWAP) 	YWAP offers psycho-social and legal support to widows and also runs will writing workshops
	<ul style="list-style-type: none"> Women Fighting AIDS in Kenya (WOFAK) 	WOFAK is an NGO established to provide quality care, support and empowerment to infected and affected women and children to enable them live positively with HIV/AIDS
	Donors supporting various HIV/AIDS activities include USAID, World Bank, UNDP, UNICEF, EU, British Council, GTZ, Belgian BADC, CIDA, WHO, Family Health International as well as Population Services International.	
Leadership and Decision Making	<ul style="list-style-type: none"> The Division of Gender in the Ministry of Gender, Sports, Culture and Social Services 	The Division is the government's machinery for the advancement of women. It co-ordinates all gender focal points within other ministries. The department works with Donor Agencies in Kenya on leadership and advancement of women in the country as well as on Governance and Human Rights issues. It also It co-ordinates all gender focal points within other

		ministries as well as works with Donor Agencies on Gender issues.
	<ul style="list-style-type: none"> • The National Commission for Gender and Development 	The newly formed NCG&D has the political mandate to move gender forward, but unfortunately has no resources to adequately deliver the mandate
	<ul style="list-style-type: none"> • The National Council of Women of Kenya (NCWK) 	NCWK is an umbrella organization of women NGOs, works to empower all women to work towards improving the quality of life for women, families and society at large.
	<ul style="list-style-type: none"> • Maendeleo Ya Wanawake Organization (MYWO) 	MYWO was previously the mass movement of women linked to KANU, is now a non-profit grassroots women's organization with over 600,000 associated women groups and a membership of two million women. The organization also undertakes women leadership development and training programmes for Kenyan women.
	<ul style="list-style-type: none"> • The League of Kenya Women Voters (KLWV) 	KLWV works with women to enhance their capacities, options and choices to participate effectively in leadership and decision-making.
	<ul style="list-style-type: none"> • Young Women's Leadership Institute (YWLI) 	YWLI, a Trust registered in 2002, targets young women to encourage them to participate in leadership, public office and decision making
	<ul style="list-style-type: none"> • The Federation of Women Lawyers (FIDA-Kenya) 	FIDA also trains organizations in human rights issues.
	<ul style="list-style-type: none"> • UNIFEM 	UNIFEM works on Leadership, Promoting Women's Human Rights and Enhancing Gender Equality in Democratic Governance in Kenya through both NGOs and supports government Institutions
	LKWV; Kenya Women's Political Caucus (KWPC);	All these organisations work to promote good

	<p>Education Centre for Women in Democracy (ECWD); Coalition on Violence against Women (COVAW); Collaborative Centre on Gender and Development; CREAM; Womankind Kenya; Women Fighting AIDS in Kenya; YWLI; African Woman and Child Feature Services; Maseno University; Egerton University; Nairobi University; Barbro Dahlbom-Hall Konsult; Help Age Kenya; Pastoralist Development Network</p>	<p>governance, leadership development and participation in decision making.</p>
	<ul style="list-style-type: none"> • Maendeleo Ya Wanaume Organisation 	<p>With so many women’s organizations in the country, the news of the formation of Maendeleo Ya Wanaume Organisation (A Support Organisation for Men) in December 2006 fascinated the country. The idea of a support organization of men is a good one and should be welcomed by gender equality and equity advocates and interest groups.</p>
<p>Stakeholders working to combat GBV</p>	<ul style="list-style-type: none"> • The Ministry of Gender, Sports, Culture and Social Services 	<p>The Ministry is the national focal point for the coordination of all GBV, especially prevention of FGM initiatives. An Inter-ministerial committee on FGM was instituted with members drawn from the ministries of Health, Planning and National Development, Home Affairs, Justice & Constitutional Affairs, Education and the Departments of Social Services and Culture, NGOs & CBOs. The Committee is responsible for facilitating the implementation of the National Action Plan on FGM.</p>
	<ul style="list-style-type: none"> • The Central Bureau of Statistics (CBS) 	<p>The CBS produces collates and produces GBV figures for government. Another key stakeholder is The Nairobi Women’s Hospital the only hospital in the country that provides free medical treatment to</p>

		GBV victims.
	<ul style="list-style-type: none"> • FIDA-K 	FIDA-K has produced a GBV training manual for the police and trained police instructors on the use of the manual; it produces fact sheets on Rape and Incest as well as domestic violence
	<ul style="list-style-type: none"> • Centre for Rehabilitation and Education of Abused Women (CREAW) 	CREAW offers women free legal and medical services; Bride Price Program that protects women's sexual and reproductive rights.
	<ul style="list-style-type: none"> • The Women's Resource Access Programme (WRAP) 	WRAP provides shelter to women who are victims of domestic violence. The Coalition on Violence Against Women (COVAW) has been active since 1995 to combat gender based violence through outreach and
	<ul style="list-style-type: none"> • The Coalition on Violence Against Women (COVAW) 	COVAW has been active since 1995 to combat gender based violence through outreach and lobbying.
	<ul style="list-style-type: none"> • Care Kenya and Liverpool VCT 	These two organizations provide voluntary counseling and HIV testing for raped women.
	<ul style="list-style-type: none"> • The Association of Media Women in Kenya (AMWIK) 	AMWIK provides campaign against Female Genital Mutilation (FGM) through awareness creation on the harmful practice. It also works to create awareness on Violence Against Women (VAW) using ICTs.
	<ul style="list-style-type: none"> • The African Women's Development and Communication Network (FEMNET) 	FEMNET created a Regional Network for Men Against GBV in Eastern Africa and in Kenya formed ' <i>Men for Gender Equality Now</i> ' which provides outreach for men in Kenya.
	<ul style="list-style-type: none"> • Churches 	A host of Churches and other Faith Based Organisations (FBOs) are actively involved in fighting GBV through preaching to their

		congregations.
	<ul style="list-style-type: none"> • Taseru Ntomonok Girls Rescue Centre and the Adventist Education and Rehabilitation Centre 	The centres provide refuges for girls running away from forced marriages or FGM.
	Other NGOs include: Raising Voices; Education Centre for Women in Democracy (ECWD); Amnesty International; CineArts; Center for Rights; Education and Awareness; Equality Now; Planned Parenthood Association; EngenderHealth;	
+	UNICEF, UNFPA; USAID; UNIFEM; OXFAM GB; Population Council; IOM; CARE International and ACORD	These donor agencies and international NGOs have created the Regional Task Force on Sexual and GBV in Kenya. They undertake among other things the development of comprehensive GBV prevention and response policies and programming; capacity building on local, national and regional level to address GBV; and they facilitate local, national and regional activities on advocacy and awareness raising on causes, contributing factors and consequences of GBV
	Some of the UN agencies in Kenya run their own GBV programmes/activities; notable among them is UNFPA's funded FGM rescue centre for young girls and young women.	