



Kenya Demographic and Health Survey Fact Sheet

Taita/Taveta County

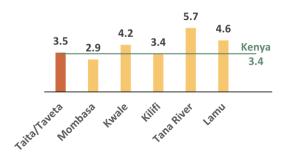
Characteristics of Households and Respondents	Taita/ Taveta	Kenya
Household population with access to at least basic drinking water service (%)	68	68
Household population with at least basic sanitation service (%)	57	41
Household population relying on clean fuels and technologies for cooking, space heating, & lighting (%)	12	21
Women age 15-49 with no formal education (%)	2	6
Men age 15-49 with no formal education (%)	I	3
Fertility and Family Planning (FP)		
Total fertility rate (number of children per woman)	3.5	3.4
Teenage pregnancy (% age 15-19 who have ever been pregnant)	18	15
Use of modern method of FP (% of married women age 15-49)	65	57
Unmet need for FP ¹ (% of married women age 15-49)	13	14
Demand for FP satisfied by modern methods (% of married women age 15-49)	80	75
Maternal and Child Health		
Births delivered by a skilled provider ² (%)	96	89
Women age 15-49 who had a live birth and had 4+ antenatal visits (%)	65	66
Women age 15-49 with a postnatal check during the first 2 days after birth (%)	87	78
Births with a postnatal check during the first 2 days after birth (%)	92	83
Children age 12-23 months fully vaccinated (basic antigens) ³ (%)	85	80
Neonatal mortality ⁴ (deaths per 1,000 live births)	(19)	21
Infant mortality ⁴ (deaths per 1,000 live births)	(24)	32
Under-5 mortality4 (deaths per 1,000 live births)	(29)	41
Nutrition		
Children under 5 who are stunted (%) (too short for their age)	19	18
Children under 5 who are wasted (%) (too thin for their height)	4	5
Children under 5 who are underweight (%) (too thin for their age)	13	10
Children under 5 who are overweight (%) (too heavy for their age)	3	3
Malaria		
Household population with access to an insecticide-treated net (ITN) (%)	83	50
Household population who slept under an ITN the night before the survey (%)	75	43
Women age 15-49 who received 3 or more doses of SP/Fansidar during pregnancy (%)	23	13a
Gender-based Violence		
Women age 15-49 who have ever experienced physical violence since age 15 (%)	30	34
Women age 15-49 who experienced physical violence in the last 12 months (often or sometimes) (%)	7	16
Women age 15-49 who have ever experienced sexual violence (%)	14	13
Women age 15-49 who experienced sexual violence in the last 12 months (%)	3	7
Women age 15-49 who have ever been married or had an intimate partner & have ever experienced	38	40
physical, sexual, or psychological/emotional violence committed by their most recent husband/partner		
(%)		
Women age 15-49 who have ever been married or had an intimate partner & have experienced physical,	17	28
sexual, or psychological/emotional violence committed by any husband/partner in the last 12 months (%)		

Footnotes: ¹ Women who do not want any more children or want to wait at least 2 years before their next birth but are not currently using a method of FP. ² Skilled provider is a doctor, nurse, midwife, or clinical officer. ³ Basic antigens include BCG, rotavirus, DPT-HepB-Hib, pneumococcal, OPV, IPV, and MR. ⁴ County-level childhood mortality rate estimates are for the 10-year period before the survey and national level childhood mortality rate estimates are for the 5-year period before the survey. ^a Kenya total is among counties where IPTp is implemented. Taita/Taveta County does implement IPTp. Figures in parentheses are based on 25-49 unweighted cases.

Taita/Taveta County: Key Indicators from the 2022 KDHS

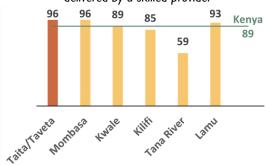
Total Fertility Rate

Average number of births per woman for the 3-year period before the survey



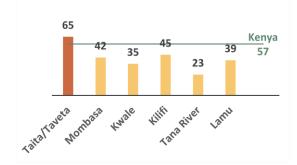
Delivery by a Skilled Provider

Percent of births in the 2 years before the survey delivered by a skilled provider



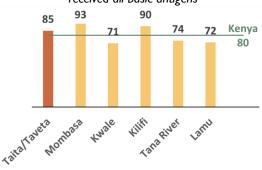
Use of Modern Methods of Family Planning

Percent of married women age 15-49 using a modern method of family planning



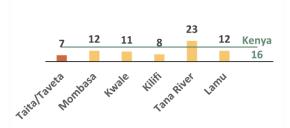
Basic Antigen Vaccination Coverage

Percent of children age 12-23 months who received all basic antigens



Recent Physical Violence

Percent of women age 15-49 who experienced physical violence in the 12 months before the survey



The 2022 Kenya Demographic and Health Survey (2022 KDHS) was implemented by the Kenya National Bureau of Statistics (KNBS) in collaboration with the Ministry of Health (MoH) and other stakeholders. Funding for the survey was provided by the Government of Kenya, the United States Agency for International Development (USAID), the Bill & Melinda Gates Foundation, the World Bank, the United Nations Children's Fund (UNICEF), the United Nations Population Fund (UNFPA), Nutrition International, the World Food Programme (WFP), the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women), the World Health Organization (WHO), the Clinton Health Access Initiative, and the Joint United Nations Programme on HIV/AIDS (UNAIDS). The UN Resident Coordinator office assured the coordination of UN agencies supporting the 2022 KDHS. ICF provided technical assistance through The DHS Program, a USAID-funded project providing support and technical assistance in implementing population and health surveys in countries worldwide. Additional information about the 2022 KDHS may be obtained from Kenya National Bureau of Statistics (KNBS), P.O. Box 30266-00100, GPO Nairobi, Kenya; +254-20-3317583, +254-20-2911000/1, +254-20-3317612/22/23/51; directorgeneral@knbs.or.ke, info@knbs.or.ke; www.knbs.or.ke. Information about The DHS Program may be obtained from ICF, 530 Gaither Road, Suite 500, Rockville, MD 20850, USA; +1-301-407-6500; fax: +1-301-407-6501; info@DHSprogram.com; www.DHSprogram.com. The contents of this report are the sole responsibility of KNBS and ICF and do not necessarily reflect the views of USAID, the United States Government, or other donor agencies.





























