



Office of the United States Global AIDS Coordinator

Providing leadership, coordination and oversight to the unified U.S. Government effort to implement the President's Emergency Plan for AIDS Relief

Country Profile — Kenya

U.S. President's Emergency Plan for AIDS Relief



HIV/AIDS Situation in Kenya

HIV Infected: 1.2 million¹

AIDS Deaths: 150,000¹

AIDS Orphans: 650,000¹

Kenya has a severe, generalized HIV epidemic. The Kenya Demographic and Health Survey (KDHS) 2003 found a prevalence rate of 9 percent in adult women and 5 percent in adult men. Surveillance of HIV in pregnant women has been conducted annually since 1990, with prevalence rising to 16 percent in urban areas and 8 percent in rural areas in the late 90s but now showing signs of decline. In the 2003 KDHS, only 14 percent of Kenyan adults reported that they had been tested and knew their results. Between October 2003 and March 2005, 793,621 Kenyans were tested through the U.S. President's Emergency Plan for AIDS Relief (the Emergency Plan) funded projects – about 4

percent of Kenyan adults. Some of these may have been tested previously, but this figure suggests that at present, approximately 17 percent to 18 percent of Kenyans know their HIV status.

U.S. Government Response

In March 2003, President Mwai Kibaki declared war against HIV/AIDS. He mandated the National AIDS Control Council (NACC) to coordinate and manage the implementation of a multi-sectoral approach to the national HIV/AIDS program, to provide policy direction, and to mobilize resources, and in late 2004 the Government of Kenya instituted guidelines for HIV testing in clinical sites. The USG participates in the work of NACC and directly funds the National AIDS and Sexually Transmitted Infection (STI) Control Programme (NASCOP) of the Ministry of Health.

Specific U.S. Government (USG) responses in Kenya include:

- ◆ Making strategic investments in Kenya's capacity to plan, secure resources for and implement treatment, care and prevention interventions.
- ◆ Strengthening public health delivery networks.
- ◆ Expanding access to treatment with an emphasis on ensuring that those co-infected with tuberculosis (TB) or other opportunistic illnesses and whose lives are most at risk are reached as rapidly as possible.
- ◆ Engaging new partners and leveraging additional resources to enhance the sustainability of HIV/AIDS programs.
- ◆ Working to develop policies and support implementation of programs that encourage testing and knowledge of HIV status in a broad range of both clinical and non-clinical settings.
- ◆ Supporting a broad range of HIV prevention interventions including behavior change, prevention of mother to child transmission of HIV, and improved blood collection and testing services in Kenya.
- ◆ Following the strategic direction of NASCOP to expand availability of antiretroviral treatment services through a care model that establishes comprehensive care centers offering a range of services from testing for HIV through medical management and links to supportive services.

Recognizing the global HIV/AIDS pandemic as one of the greatest health challenges of our time, President George W. Bush announced the Emergency Plan in 2003 — the largest international health initiative in history by one nation to address a single disease. Under the leadership of the U.S. Global AIDS Coordinator, USG agencies implement the Emergency Plan, working collaboratively as strong, interagency country teams under the direction of the U.S. Ambassador. These teams capitalize on the expertise of each USG agency and leverage partnerships with host governments, multilateral institutions, nongovernmental organizations (NGOs) and the private sector to implement effective programs for combating HIV/AIDS and ensure efficient use of USG resources.

Kenya is one of 15 focus countries of the Emergency Plan which collectively represent at least 50 percent of HIV infections worldwide. Under the Emergency Plan, Kenya received nearly \$92.6 million in FY2004 to support a comprehensive HIV/AIDS prevention, treatment and care program. In FY2005, the U.S. is committing nearly \$145.5 million to support Kenya's fight against HIV/AIDS.

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¹ UNAIDS, Report of the Global AIDS Epidemic, 2004.



Emergency Plan Achievements in Kenya

Challenges to Emergency Plan Implementation

Kenya is in a transitional period, with a relatively new government seeking to restructure many elements of the state. It also has a serious HIV epidemic. This context offers clear opportunities but also many constraints for controlling AIDS. Human capacity development is a major concern and all partners are working on capabilities and human resource management systems to enable people to respond effectively to HIV/AIDS. Kenya has a large number of trained, unemployed health care workers. The key will be developing effective mechanisms to engage these trained staff to implement the Emergency Plan.

# of individuals reached with community outreach HIV/AIDS prevention programs that promote Abstinence and Being Faithful	791,300
# of pregnant women receiving prevention of mother to child (PMTCT) services	333,700
# of pregnant women receiving antiretroviral prophylaxis	16,600
# of individuals receiving counseling and testing	350,000
# of HIV-infected individuals who received palliative care/basic health care and support	55,700
# of Orphans and Vulnerable Children (OVCs) who were served by an OVC program	56,800
# of individuals receiving upstream system strengthening support for treatment ¹	1,800
# of individuals receiving downstream site specific support for treatment ²	26,500

Prevention and care results reflect accomplishments through September 2004 and combine upstream and downstream support. Treatment results reflect accomplishments through March 2005.

¹ Number of individuals reached through upstream systems strengthening includes those supported through contributions to support national strategies through national, regional, and local activities such as training, laboratory support, monitoring and evaluation, logistics and distribution systems, protocol and curriculum development.

² Number of individuals reached through downstream site-specific support includes those receiving treatment where the Emergency Plan supports programs at the point of service delivery.

Critical Interventions for HIV/AIDS Prevention

- ◆ Numerous community level projects supported by the Emergency Plan and implemented by faith-based and community-based organizations are reaching large numbers of youth and young adults with HIV prevention programs.
- ◆ Specific programs to reach in-school youth are also supported by the Emergency Plan.
- ◆ The Emergency Plan is supporting targeted interventions for high risk populations such as injecting drug users, commercial sex workers, and members of the uniformed services.
- ◆ Particularly vulnerable groups such as the disabled, refugees, and nomads are also receiving HIV prevention services.
- ◆ The Emergency Plan is supporting campaigns to promote condom use by those who engage in high-risk behavior and to reduce cross-generational sexual encounters.
- ◆ Services to prevent mother-to-child HIV transmission are now available at over 750 Emergency Plan-supported medical facilities.
- ◆ Pilot projects to reduce HIV transmission through unsafe injections are now under way.

Critical Intervention for HIV/AIDS Care

- ◆ Kenya now has over 350 registered VCT sites where Kenyans can receive counseling and testing; many of these are supported by the Emergency Plan.
- ◆ USG partners have trained large numbers of counselors in VCT and are now training health care workers to provide HIV testing and counseling in medical settings.
- ◆ A new umbrella mechanism has been put in place to improve access to both funding and capacity building for indigenous NGOs and faith-based groups caring for children.
- ◆ Support for hospice care has been established and will expand in future years to cover more providers and promote wider availability of quality end-of-life care for Kenyans.
- ◆ Home-based care programs are being expanded and provided additional resources for more comprehensive services as well as better links to clinical and inpatient care.

Critical Interventions for HIV/AIDS Treatment

- ◆ USG support to NASCOP has contributed substantially to a more than four-fold increase in the number of Ministry of Health sites providing treatment in the last six months.
- ◆ USG support for a collaborative effort by the Kenya Pediatric Association and NASCOP has led to development of a pediatric treatment training curriculum. More than 200 clinicians have been trained in pediatric AIDS treatment with the result that programs to provide treatment to children are expanding rapidly.
- ◆ Selecting a local partner, the Mission for Essential Drugs and Supplies (MEDS), as the purchaser and distributor of the vast majority of USG-procured ARVs has yielded economies of scale. MEDS was founded by the Christian Health Association of Kenya and the Kenya Episcopal Conference and has a proven track record in negotiating optimal prices, assuring product quality, and safely distributing to public, private, NGO, and faith-based treatment sites across the country.