

Country Profile | President's Malaria Initiative (PMI)

KENYA

April 2008



At a Glance:

Malaria in Kenya

Population: 37.9 million¹

Life expectancy at birth:
56 years (male), 57 years (female)¹

Population at risk of malaria: 77%²

Under-5 mortality rate: 115/1000,
or approximately 1 in 8 children³

¹ US Census Bureau

² Roll Back Malaria 2005 World Malaria Report

³ DHS 2003

Background

Malaria is a major public health problem in Kenya. The malaria burden and transmission patterns vary across the country, from highly endemic to epidemic-prone. Malaria is reported to be one of the leading causes of death of children under age 5.

Kenya is one of eight new third-round target countries benefiting from the President's Malaria Initiative (PMI), a five-year, \$1.2 billion program led by the U.S. Agency for International Development (USAID), in conjunction with the Department of Health and Human Services (Centers for Disease Control and Prevention), the Department of State, and the White House.

Goal

The goal of PMI is to cut malaria deaths by 50 percent in 15 countries in Africa by reaching 85 percent of the most vulnerable groups – principally pregnant women and children under 5 years of age – with lifesaving services, supplies, and medicines.

PMI coordinates with national malaria control programs and international partners, including the World Health Organization; the Global Fund to Fight AIDS, Tuberculosis and Malaria; the World Bank Malaria Booster Program; the Roll Back Malaria partnership; the Bill and Melinda Gates Foundation; nongovernmental organizations, including faith-based and community groups; and the private sector.

Key Interventions

In support of Kenya's national malaria control program, PMI backs four key intervention strategies to prevent and treat malaria:

- Spraying with insecticides ("indoor residual spraying," or IRS)
- Insecticide-treated mosquito nets (ITNs)
- Lifesaving drugs
- Preventive treatment for pregnant women ("intermittent preventive treatment," or IPTp)

Results to Date

Kenya is in its first year as a PMI focus country. Malaria control interventions are already being implemented, and vital commodities are being distributed to vulnerable populations.

Mosquito nets: Sleeping under a long-lasting ITN provides protection from malaria-carrying mosquitoes. The nets are nontoxic to humans and do not need re-treatment with insecticide for up to four years. In Kenya, PMI has procured 60,000 ITNs and distributed approximately 5,000 of these.

Insecticide spraying: IRS involves the coordinated, timely spraying of the inside walls of homes with insecticides. Mosquitoes are killed when they land on these sprayed walls and pick up the residual insecticide. Important training and spraying efforts are already under way and have provided the citizens of Kenya with valuable results. Approximately 4,697 local residents were trained in effective spray operations. In 2007, these spray operations reached 1,171,073 houses in three provinces, directly protecting 3,459,207 residents. Another round of IRS is scheduled to begin in April 2008.

PMI Funding

In fiscal year 2008, PMI allocated \$19.8 million for malaria prevention and treatment in Kenya.

Upcoming PMI Activities

- To address increased demand for antimalarial drugs, particularly with the movement of previously unexposed people into malarious areas, PMI will purchase about 500,000 additional malaria treatments as part of an emergency procurement for Kenya.
- With the release of Global Fund monies for the purchase of artemisinin-based combination therapy drugs, PMI will provide technical assistance to help the supply chain ensure that these drugs are distributed quickly.
- IRS activities will be launched on April 25, 2008, in Rachuonyo District, Nyanza Province. The Government of Kenya, PMI, and the Global Fund are jointly supporting IRS in Kenya.