







KENYA

MALARIA

Malaria is a major public health problem in Kenya. Due to altitude, rainfall patterns, and temperature, ~75% of the Kenyan population is at risk for malaria. The disease accounts for at least 13% of outpatient consultations nationally and over half of outpatient consultations in the eight focus counties supported by the U.S. President's Malaria Initiative (PMI). Over the past decade, Kenya has made significant gains in reducing the malaria burden among its 49.7 million population. From 2010-2020, the prevalence of malaria reduced by 50% from 38.1% to 18.9% in the high-burden lake-endemic area, where PMI focuses 70% of its investments. Nationwide, the malaria burden decreased 49%, from 11.4% to 5.8%, during this same period.

OUR WORK

Kenya is a focus country for PMI, which supports efforts by USAID and other U. S. Government partners, in collaboration with the Government of Kenya, to expand malaria prevention, diagnosis and treatment measures. Since 2006, PMI has invested \$475 million in Kenya. USAID works closely with the Division of National Malaria Program and counties to implement the Kenya Malaria Strategy, promote the use of insecticide-treated nets, and create awareness on the importance of prompt diagnosis and treatment for suspected malaria – particularly among pregnant women and children.

INSECTICIDE-TREATED MOSQUITO NETS

USAID supports the procurement and distribution of insecticide-treated nets for the Government of Kenya through mass campaigns, as well as in antenatal and child welfare clinics. In 2020-2021, Kenya conducted a mass distribution to reach universal coverage, defined as one net for every two people in malaria-endemic and endemic-prone counties.

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PREVENTION OF MALARIA IN PREGNANCY

Pregnant women are particularly vulnerable to contracting malaria. The prevention of malaria in pregnancy is crucial to saving the lives of mothers and children. Kenya's current government policy calls for pregnant women to receive a minimum of three doses of intermittent preventive treatment for malaria. USAID supports the review, development, and dissemination of policy and messaging. USAID also trains health workers and community health volunteers on how to manage malaria during pregnancy.

BUDGET (FY 2021): US \$34 million

MISSION CONTACT

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INDOOR RESIDUAL SPRAYING

Indoor residual spraying is when the walls inside homes and other structures are sprayed with an insecticide that kills mosquitoes. It is a proven and effective way to interrupt malaria transmission and reduce malaria prevalence. Since 2008, USAID has built the capacity of thousands of local personnel to conduct and oversee spraying activities in malaria-endemic counties. USAID is also strengthening the technical and managerial capacity of counties to oversee and implement safe and effective indoor residual spraying. In 2021, USAID supported indoor residual spraying in the counties of Migori and Homa Bay, protecting over 2 million people from malaria.

DIAGNOSIS AND TREATMENT

To enhance effective diagnosis and treatment of malaria, USAID supports the improvement of government laboratories, skill-building for laboratory personnel, and the strengthening of malaria case management. USAID has procured millions of malaria rapid-diagnostic tests and doses of malaria treatment to support implementation of the test-and-treat-policy. USAID partners with the National Malaria Control Program and other stakeholders to strengthen supply chain systems for these commodities. USAID is also helping counties build monitoring and evaluation capacity for malaria surveillance, provide on-the-job training, support data quality audits, and supervise malaria interventions. All these efforts result in Kenyans receiving accurate diagnoses and prompt treatment for malaria so that they can return to good health.

ACHIEVEMENT (2021)

- I million rapid diagnostic tests purchased for distribution to health facilities
- Over two million people protected from malaria through indoor residual spraying
- 1.7 million long-lasting insecticidal nets procured for distribution to vulnerable populations (pregnant women and children) in high malaria transmission counties
- 3 million malaria treatment doses procured for distribution to health facilities
- I million rapid diagnostic tests purchased for distribution to health facilities