

## Country Profile | President's Malaria Initiative (PMI)

# KENYA

April 2013



### At a Glance: Kenya

Population (2013): 44 million<sup>1</sup>

Population at risk of malaria (2011): 76%<sup>2</sup>

Estimated annual malaria deaths/100,000 population (2008): 12<sup>3</sup>

Under-five mortality rate (2009): 74/1,000 live births, or approximately 1 in 13 children die before their fifth birthday<sup>4</sup>

<sup>1</sup> US Census Bureau, International Data Base 2013

<sup>2</sup> WHO World Malaria Report 2012

<sup>3</sup> WHO World Health Statistics 2012

<sup>4</sup> Demographic and Health Survey (DHS) 2009

### Background

The epidemiology of malaria in Kenya is quite varied geographically, with high levels of transmission on the coast and around Lake Victoria but little or no transmission in the highlands above 1,500–2,000 meters altitude. The Government of Kenya tailors its malaria control efforts according to malaria risk to achieve maximum impact. Recent household surveys show significant progress is being made against malaria in Kenya, with improvements in coverage of malaria prevention and treatment measures and reductions in malaria parasitemia and illness.

### The President's Malaria Initiative (PMI)

Kenya is one of 19 focus countries benefiting from the President's Malaria Initiative (PMI), which is led by the U.S. Agency for International Development and implemented together with the U.S. Centers for Disease Control and Prevention. PMI was launched in 2005 as a five-year (fiscal years [FYs] 2006–2010), \$1.265 billion expansion of U.S. Government resources to reduce the burden of malaria and help relieve poverty on the African continent. The 2008 Lantos-Hyde Act authorized an extension of PMI funding through FY 2013. With congressional authorization and the subsequent launch of the U.S. Government's Global Health Initiative, PMI's goal was expanded to achieve Africa-wide impact by halving the burden of malaria in 70 percent of the at-risk populations on the continent (i.e., approximately 450 million residents), thereby removing malaria as a major public health problem and promoting development throughout the African region.

To reach its goal, PMI works with national malaria control programs and coordinates its activities with national and international partners, including the Roll Back Malaria Partnership; The Global Fund to Fight AIDS, Tuberculosis and Malaria; the World Health Organization (WHO); the World Bank; the U.K. Department for International Development; numerous nongovernmental organizations, including faith-based and community groups; and the private sector.

### Key Interventions

In line with Kenya's national malaria control strategy, PMI supports four major malaria prevention and treatment measures:

- [Insecticide-treated mosquito nets \(ITNs\)](#)
- [Indoor residual spraying \(IRS\)](#)
- [Intermittent preventive treatment for pregnant women \(IPTp\) with sulfadoxine-pyrimethamine \(SP\)](#)
- [Diagnosis with rapid diagnostic tests \(RDTs\) or microscopy and treatment with artemisinin-based combination therapy \(ACT\)](#)

## Progress to Date

The table below shows key results from nationwide household surveys.

Kenya Malaria Indicators	PMI Baseline	DHS 2009	MIS 2010
All-cause under-five mortality rate	115/1,000 (DHS 2003)	74/1,000	-
Proportion of households with at least one ITN	48% (MIS 2007)	56%	48%
Proportion of children under five years old who slept under an ITN the previous night	39% (MIS 2007)	47%	42%
Proportion of pregnant women who slept under an ITN the previous night	40% (MIS 2007)	49%	41%
Proportion of women who received two or more doses of IPTp during their last pregnancy in the last two years	13% (MIS 2007)	14%	25%

Kenya is in its seventh year as a PMI focus country. With support from PMI and its partners, malaria control interventions are being scaled up, and vital commodities are being distributed to vulnerable populations.

PMI Contributions <sup>1,2</sup>	2007	2008	2009	2010	FY 2011	FY 2012	Cumulative
IRS: Houses sprayed	1,171,073	764,050	517,051	503,707	485,043	643,292	n/a <sup>3</sup>
IRS: Residents protected	3,459,207	3,061,967	1,435,272	1,892,725	1,832,090	2,435,836	n/a <sup>3</sup>
ITNs procured	-	60,000	1,240,000	455,000	2,212,500	1,299,195	5,266,695
ITNs distributed	-	60,000	550,000	690,000	2,589,180	35,090	3,603,470
ACTs procured	-	1,281,720	7,804,800	6,997,080	6,960,390	9,578,970	29,992,560
ACTs distributed	-	1,281,720	6,015,360	7,667,310	3,268,260	2,410,810	20,175,980
RDTs procured	-	-	-	547,800	547,800	1,745,120	2,292,920
RDTs distributed	-	-	-	-	292,040	667,960	960,000
SP treatments procured	-	-	840,000	-	-	-	840,000
SP treatments distributed	-	-	840,000	-	-	-	840,000
Health workers trained in treatment with ACTs	-	-	4,747	390	-	-	n/a <sup>4</sup>
Health workers trained in malaria diagnosis	-	77	-	485	210	408	n/a <sup>4</sup>
Health workers trained in IPTp	-	-	5,107	93	1,844	4,950	n/a <sup>4</sup>

<sup>1</sup> The data reported in this table are up-to-date as of September 30, 2012.

<sup>2</sup> The cumulative count of commodities procured and distributed takes into account the three-month overlap between Year 4 (covering the 2010 calendar year) and Year 5 (covering the 2011 fiscal year).

<sup>3</sup> A cumulative count of the number of houses sprayed and residents protected is not provided since some areas were sprayed on more than one occasion.

<sup>4</sup> A cumulative count of individual health workers trained is not provided since some health workers were trained on more than one occasion.

PMI Funding	FY 2007 Jump start funds	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
<b>Budget</b> (in millions)	\$6.1	\$19.8	\$19.7	\$40.0	\$36.4	\$36.5	\$32.4

For details on FY 2013 PMI activities in Kenya, please see the **Kenya Malaria Operational Plan**:  
[http://www.pmi.gov/countries/mops/fy13/kenya\\_mop\\_fy13.pdf](http://www.pmi.gov/countries/mops/fy13/kenya_mop_fy13.pdf).

