Malaria transmission in Kenya ranges from intense in lowland areas to unstable epidemic-prone in the highlands. The annual reported number of malaria cases in 2013 was 9,750,953 with 360 deaths.
Progress
Kenya has made steady progress in scaling-up malaria control interventions and has been successful in attracting funding including from the Global Fund, DFID, and PMI. The country has banned oral artemisinin-based monotherapies and has introduced a policy of Community Case Management of malaria. The country has successfully secured the resources to complete the LLIN coverage campaign and has secured sufficient resources for the ACTs and RDTs required in 2015. Kenya has also achieved high coverage of tracer MNCH interventions, including PMTCT and has recently increased coverage of exclusive breastfeeding, skilled birth attendants and postnatal care. Kenya has significantly enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn and Child Health Scorecard.

Impact
The annual reported number of malaria cases in 2013 was 9,750,953 with 360 deaths. Progress in reducing cases has been reported sub-nationally where interventions have been intensified.

Key Challenges
- Ensuring private sector ACT coverage post-AMFm.
- The lack of new resources allocated to malaria in the GF New Funding Model jeopardises the country’s ability to sustain the impressive gains made in the fight against malaria.

Recommended Actions
Kenya has responded positively to the recommended actions addressing policy on community case management of pneumonia and low coverage of exclusive breastfeeding, which has recently led to an increase in coverage, and continues to track progress as these actions are implemented.