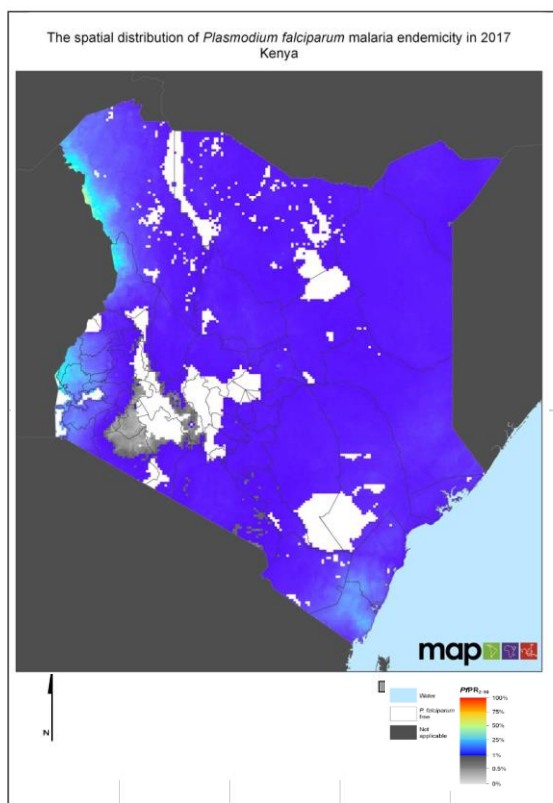


## Scorecard for Accountability and Action



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 2020 was 6,875,369 and 742 deaths.

### Metrics

Commodities Financed		
LLIN financing 2021 projection (% of need)		100
Public sector RDT financing 2021 projection (% of need)		100
Public sector ACT financing 2021 projection (% of need)		100
Insecticide Resistance Monitoring, Implementation and Impact		
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	▼	4
Insecticide resistance monitored since 2015 and data reported to WHO		
National Insecticide Resistance Monitoring and Management Plan		
RDTs in stock (>6 months stock)	▼	
ACTs in stock (>6 months stock)	▲	
LLIN/IRS campaign on track	▲	
Country Reporting Launch of Zero Malaria Starts with Me Campaign		
Scale of Implementation of iCCM	▼	
Operational LLIN/IRS coverage (% of at risk population)	▲	84
On track to reduce case incidence by ≥40% by 2020 (vs 2015)		
On track to reduce case mortality by ≥40% by 2020 (vs 2015)		
Tracer Indicators for Maternal and Child Health, NTDs and Covid 19		
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2020)	▼	0
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2020)		86
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2020)		84
% deliveries assisted by skilled birth attendant		62
Postnatal care (within 48 hrs)		53
Exclusive breastfeeding (% children < 6 months)		61
Vitamin A Coverage 2020 (2 doses)	▲	82
DPT3 coverage 2020 (vaccination among 0-11 month olds)		89
% Population Fully Vaccinated Against COVID-19	▼	9

### Key

	Target achieved or on track
	Progress but more effort required
	Not on track
	No data
	Not applicable

## **Malaria**

### **Sustaining Essential Health Services During the COVID-19 Pandemic**

The COVID-19 pandemic is putting an incredible strain on health systems across Africa. Health systems are required to maintain routine health services for other illnesses even as they handle the additional burden. In order to prevent widespread morbidity and mortality, it is of vital importance that we work to sustain the delivery of essential life-saving interventions during this difficult time including for Reproductive, Maternal, Newborn, Child and Adolescent health, Neglected Tropical Diseases and malaria.

For Kenya, it was important to ensure that the universal coverage campaign for long-lasting insecticidal nets (LLINs) went ahead, whilst taking into account physical distancing, in accordance with the guidance and recommendations from WHO and the RBM Partnership to End Malaria. Without this campaign, coupled with the need to sustain essential health services including malaria case management, there will be an increase in malaria cases and deaths. Under the worst-case scenario, in which all ITN campaigns are suspended and there is a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could be a 37% increase in malaria cases, and a 144% increase in malaria deaths in Kenya. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

WHO estimates that there were an additional 47,000 malaria deaths globally in 2020 due to service disruptions during the COVID-19 pandemic, leading to an estimated 7.5% increase in deaths.

It is essential to ensure the continuity of malaria, RMNCAH and NTD services in 2022 as the COVID-19 pandemic continues to impact our continent. This may include the implementation of any necessary catch-up activities and ensuring timely planning to account for potential delays in procurement and delivery. Any intervention must ensure the safety of communities and health workers given the ease of transmission of COVID-19.

The country has been affected by the continent-wide restriction of access to COVID-19 vaccines and had only been able to cover 9% of their population by the end of 2021.

## **Malaria**

### **Progress**

Kenya secured the resources required to sustain universal coverage of essential malaria control interventions in 2021 and has sufficient stocks in place. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO. Kenya has completed the national insecticide resistance monitoring and management plan. Kenya has recently launched the Zero Malaria Starts with Me campaign. The country is implementing iCCM.

In line with the legacy agenda of the ALMA chair, His Excellency President Uhuru Kenyatta, Kenya has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard and has posted the scorecard to the ALMA Scorecard Hub. The country has also launched the End Malaria Council in Q1 2021. The Kenya malaria youth army has also been launched.

## Impact

The annual reported number of malaria cases in 2020 was 6,875,369 and 742 deaths.

## Key Challenge

- Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health, malaria and Neglected Tropical Diseases.

## Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Impact	Ensure that malaria services including case management and vector control are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic	Q4 2022		The MoH aired prime-time radio and television messages to encourage the population to seek malaria services during the COVID-19 pandemic. The Cabinet Secretary for Health emphasized the importance of seeking treatment for malaria during his regular COVID-19 pandemic updates. The programme has supported distribution of 16 million LLINs in 26 counties in 2021. The campaign was conducted with full adherence to the COVID mitigation measures. The IRS campaign was completed as planned. In addition, the programme supported surveillance training in 32 counties and this will strengthen the malaria surveillance activities across the country. During these trainings approximately 5,000 frontline health care workers were trained. The country is monitoring the performance of the malaria surveillance indicators through the malaria scorecard for action and accountability. There are adequate stocks of ACTs and RDTs. The programme has successfully completed Epidemic preparedness and response planning. All these activities have been undertaken in full adherence of the COVID mitigation measures

## RMNCAH and NTDs

### Progress

Kenya has achieved high coverage of the tracer RMNCAH intervention exclusive breastfeeding and has recently increased coverage of DPT3. The country has significantly enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard and has published it on the scorecard hub.

Progress in addressing Neglected Tropical Diseases (NTDs) in Kenya is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, schistosomiasis, soil transmitted helminths and trachoma. In 2020,

preventive chemotherapy coverage was 25% for trachoma. No data was reported for lymphatic filariasis, for soil transmitted helminths and for schistosomiasis. Overall, the NTD preventive chemotherapy coverage index for Kenya in 2020 was 0, which represents a substantial decrease compared with the 2019 index value of 39.





### Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
RMNCAH <sup>1</sup> : Impact	Ensure that essential RMNCAH services are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic. Address any stock-outs of essential RMNCAH commodities	Q4 2022		<p>The MoH developed and circulated guidelines on the continuation of service delivery to all counties. Health facility attendance improved in most counties following the easing of COVID-19 restrictions. Health workers and Community Health Volunteers have been trained on COVID -19 guidelines including general protection and use of PPEs. The community health system became all the more important as patients sought care outside health facilities. Community Health Volunteers (CHVs) have provided more services than in the pre-COVID-19 period. Kenya was affected by the disruption of international supply chains especially for drugs and medical supplies. There were delays as a result of cessation of transport and lack of active pharmaceutical ingredients for some of the products. This resulted in interrupted supply of commodities including the PPEs required for continued service delivery and prevention of COVID-19 infections. Kenya enhanced COVID-19 surveillance through testing, contact tracing and reporting of COVID-19 cases in all counties. The country has also rolled out COVID-19 vaccination that initially targeted essential service providers such as health workers, teachers, security personnel as well as citizens over 58 years of age and those with co-morbidities. Health care workers are being trained on prevention and case management of COVID-19. All counties have been supported by the national government to strengthen their emergency preparedness for COVID-19 including expanding ICU services, hospital bed capacity and oxygen production. The government has also established a home-based isolation and care system for COVID-19 positive cases that entails continuous monitoring and reporting to minimize community spread and promptly refer cases for specialized care</p>

<sup>1</sup> RMNCAH metrics, recommended actions and response tracked through WHO

NTDs	Recognising the negative impact of COVID-19 on the 2020 MDA coverage, ensure that NTD interventions including MDAs, vector control and Morbidity Management and Disability Prevention are sustained and implemented whilst using Covid-19 sensitive guidelines during the pandemic. This includes prioritizing key necessary catch up activities including achieving high coverage from all MDAs	Q4 2022		In 2021, Kenya conducted NTD control and elimination interventions whilst respecting COVID-19 preventive measures. Between January and March, MDA for Schistosomiasis and Soil Transmitted Helminths was conducted in the Coastal region in six counties. An end-line survey to assess the effectiveness of Lymphatic Filariasis triple therapy was conducted in Jomvu, Lamu East and Lamu West. Between April and June 2021, the country rolled out lymphedema management in Kwale county. Hydrocele surgeries for 481 patients was carried out in the six coastal counties and the national leishmaniasis guideline was launched. Between July and September 2021, Xeno-monitoring in Lamu East, Lamu West and Jomvu was conducted with capacity building of health care workers from selected leishmaniasis endemic counties. In the last quarter of 2021, a mapping of Schistosomiasis and Soil Transmitted Helminths in Western region was carried out. Schistosomiasis and Soil transmitted Helminths MDA was also carried out in four Western regions (4 counties) as well as the MDA for trachoma in seven endemic counties. The country organized a training of trainers for Lymphatic Filariasis MDA as well as capacity building of health care workers from selected leishmaniasis endemic counties. A workshop for the development of the new NTD Master plan was also held
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**Key**

	Action achieved
	Some progress
	No progress
	Deliverable not yet due