Country Situation

Background Statistics

- **HIV prevalence - adults (ages 15-49)**: 6.3% [5.8%-6.5%] 2009
- **HIV prevalence - pregnant women (all ages)**: 5.6% 2009
- **Number of women living with HIV delivering**: 86,700 2011
- **Est. # children (ages 0-14) living with HIV**: 180,000 [98,000-260,000] 2009
- **Maternal mortality ratio**: 360/100,000 2010
- **Est. annual births**: 1,529,000 2010
- **Infant mortality rate**: 55/1,000 2010
- **Under-5 mortality rate**: 80/1,000 2010

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Reaching High Level Targets

**Global 2015 Targets**
- Reduce the number of new HIV infections among children by 90%
- Reduce the number of HIV-associated deaths to women during pregnancy, delivery or puerperium by 50%

**Child Targets**
- Reduce under-five deaths due to HIV by at least 50%
- Provide antiretroviral therapy for all children with HIV

Globally, an estimated 330,000 children were newly infected with HIV in 2011 – down 24% from the 430,000 new infections in 2009. New paediatric HIV infections rose consistently until peaking at 560,000 in 2002 and 2003. Despite the significant progress that has been achieved, much more progress is needed in order to achieve that Global Plan target of a 90% reduction in the number of new HIV infections in children by 2015.[11]

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Global Plan Targets, Baseline and Current Status

<table>
<thead>
<tr>
<th>Indicators</th>
<th>2009 Baseline [or last available data]</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Overall Targets</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number new paediatric HIV infections[1]</td>
<td>23,200</td>
<td>–</td>
<td>13,200</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Number HIV-associated maternal deaths[4]</td>
<td>3,400 (2005)</td>
<td>2,200</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Percentage of under-5 deaths due to HIV ART coverage among children (ages 0-14)[3]</td>
<td>9%[12] (2008)</td>
<td>7%[4]</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>💯 HIV incidence in women (ages 15-49)[3]</td>
<td>0.58%</td>
<td>–</td>
<td>0.52%</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Percentage of married women with unmet need for family planning (ages 15-49)[3]</td>
<td>26%</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Mother-to-child transmission rate[3]</td>
<td>26%</td>
<td>–</td>
<td>15%</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Maternal ARV coverage (prophylaxis and ART coverage, excluding single-dose nevirapine)[3]</td>
<td>34%[a]</td>
<td>–</td>
<td>67%</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Breastfeeding ARV Coverage[3]</td>
<td>16%</td>
<td>–</td>
<td>67%</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>ART coverage among HIV+ pregnant women in need of treatment[3]</td>
<td>42%</td>
<td>–</td>
<td>61%</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
</tbody>
</table>
### Global 2015 Targets

- Reduce HIV incidence in women (ages 15-49) by 50%
- Reduce unmet need for family planning among women to zero

## Background Statistics

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Female (%)</th>
<th>Male (%)</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Young people (ages 15-24) HIV prevalence†</td>
<td>4.1%</td>
<td>1.8%</td>
<td>2009</td>
</tr>
<tr>
<td>Condom use at last sex among young people (ages 15-24) with 2+ sexual partners in the last 12 months‡</td>
<td>37%</td>
<td>67%</td>
<td>2008/2009</td>
</tr>
<tr>
<td>Male partners of pregnant women attending ANC tested in last 12 months‡</td>
<td>4%</td>
<td></td>
<td>2010</td>
</tr>
<tr>
<td>Unintended pregnancies (ages 15-49)‡</td>
<td>43%</td>
<td></td>
<td>2008/2009</td>
</tr>
</tbody>
</table>

1. Indicator calculated from ANC health facility data for numerators and estimates of need for denominators. Not comparable to survey data presented under Background Statistics or elsewhere in this fact sheet.

### Key Points

Kenya has seen a very slight decline in HIV incidence in women (ages 15-49) between 2009 and 2011—from 0.58% to 0.52%. Among young people (ages 15-24), HIV prevalence is over twice as high among young females (4.1%) than males (1.8%). Contraceptive prevalence is low, with less than half of married women in Kenya (46%) using any method in 2008-2009, and the rate of unintended pregnancies was 43% in 2008-2009.

### Preventing HIV transmission from a woman living with HIV to her infant

#### Global 2015 Targets

- Reduce overall mother-to-child transmission of HIV to <5%
- 90% of mothers receive perinatal ART or ARVs
- 90% of breastfeeding infant-mother pairs receive ART or ARVs

#### Background Statistics

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Male (%)</th>
<th>Female (%)</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Timing of 1st ANC visit (months)‡</td>
<td></td>
<td></td>
<td>2008/2009</td>
</tr>
<tr>
<td>No ANC: 7%</td>
<td>47%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;4 months: 15%</td>
<td>60%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4-5 months: 38%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6-7 months: 37%</td>
<td>44%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8+ months: 3%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DK: &lt;1%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of women attending at least 4 ANC visits during pregnancy‡</td>
<td></td>
<td></td>
<td>2008/2009</td>
</tr>
<tr>
<td>Total: 47%</td>
<td>57%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urban: 60%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural: 44%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of pregnant women tested for HIV &amp; received results in ANC, L&amp;D, &amp; post-partum (&lt;72hrs)‡</td>
<td>83%</td>
<td></td>
<td>2010</td>
</tr>
<tr>
<td>Estimated % of infants born to HIV+ women receiving ARVs for PMTCT‡</td>
<td>57% [49%-65%]</td>
<td></td>
<td>2010</td>
</tr>
<tr>
<td>Skilled attendant at delivery (%)‡</td>
<td>44%</td>
<td></td>
<td>2008/2009</td>
</tr>
<tr>
<td>Exclusive breastfeeding for infants &lt;6 months‡</td>
<td>32%</td>
<td></td>
<td>2008/2009</td>
</tr>
</tbody>
</table>

1. Indicator calculated from ANC health facility data for numerators and estimates of need for denominators. Not comparable to survey data presented under Background Statistics or elsewhere in this fact sheet.

### Key Points

About three-quarters of pregnant women in Kenya (73%) attend at least one ANC visit and 47% attend at least four visits, as recommended by WHO. Less than half of pregnant women in Kenya (44%) deliver with a skilled birth attendant, and the maternal mortality ratio is high (360/100,000). In 2010, 83% of pregnant women were tested for HIV, 67% of HIV-positive pregnant women received more efficacious ARV regimens for PMTCT in 2011, and 57% of the infants received ARVs for PMTCT.

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**Figure 2: Coverage of selected PMTCT interventions (2010)**

- % of PW who have at least one ANC visit
- % of PW tested for HIV
- % of PWLHIV who received more efficacious ARVs for PMTCT
- % of children born to PWLHIV who received ARVs for PMTCT

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1. Indicator calculated from ANC health facility data for numerators and estimates of need for denominators. Not comparable to survey data presented under Background Statistics or elsewhere in this fact sheet.
Global 2015 Target

- 90% of HIV-positive pregnant women in need of ART for their own health are started on lifelong ART

Background Statistics

| Percentage of HIV-infected pregnant women assessed with CD4 testing* | N/A | 2010 |
| Percentage of infants born to HIV-infected women started on CTX prophylaxis within 2 months of birth | 7% [6.8%] | 2010 |
| Percentage of infants born to HIV-infected women tested for HIV within 2 months of birth | 64% [56-74%] | 2010 |

Key Challenges

- Coverage of early infant diagnosis is moderate in Kenya. In 2010, 64% of HIV-exposed infants received a virological test within two months of birth, but only 7% received co-trimoxazole prophylaxis—an antibiotic that significantly reduces morbidity and mortality. Paediatric ART coverage also remains low, at 31% in 2011, up from 19% in 2009. Among pregnant women with HIV who received ARVs in 2010, 33% still received single dose nevirapine, a regimen currently not recommended by WHO, and 27% received ART.

Key Challenges & The Bottom Line

Key Challenges

- Low level of access to the 4 ANC visits and assisted delivery (47% ANC4+; 44% SBA). Inadequate organization of MNCH service delivery system with weak linkages between ANC, PMTCT, childbirth and ART resulting in high dropout across the maternal and child care continuum (73% ANC4+; 83% HIV T&C; 43% maternal ARVs; 64% EID; 31% paediatric ART)

- Low programme performance in the area of family planning due to limited availability and low uptake of services

- Two-thirds of HIV-exposed children receive virologic testing, but there is poor access to cotrimoxazole and low pediatric ART coverage

- Weak national and subnational M&E systems hindering programme performance assessment and tracking of progress towards eMTCT targets

The Bottom Line

If national EMTCT targets for Kenya are to be met by 2015, the following actions should be considered:

- To achieve high intervention coverage additional investments will be needed to strengthen the MNCH platform and for community engagement to create demand for services. Increase investments in building the capacity within MNCH services and communities (HR capacity building; equipment for MNCH and PMTCT; linkages/referrals mechanisms within/between facilities and with communities) for the provision of quality antenatal and postnatal follow up care

- Increase availability of essential commodities and scale up facility and community level service promotion and provision of family planning services

- Improve access to both cotrimoxazole prophylaxis and ART and to improve child outcomes

- Strengthen monitoring systems at national and subnational levels to improve data collection, analysis and use, including reporting on Global Plan indicators

Figure 3: Percentage distribution of various regimens provided to HIV+ pregnant women to prevent mother-to-child transmission of HIV, 2010[4]*

Figure 4: Percentage of infants born to HIV+ women tested for HIV at 2 months of birth (EID) & Percentage of children living with HIV receiving ART, 2009-2011
References:

8. WHO/UNICEF/UNAIDS, calculated from Universal Access country reported unpublished data, 2011

Notes:

* Please note that the corresponding country data for this indicator have not been revised and, therefore, refer to what was published in the Global HIV/AIDS Response – Epidemic Update and Health Sector Progress Towards Universal Access, Progress Report 2011. Revised country data for this indicator will be published towards the end of 2012.
- Data not available.
† Indicator calculated from ANC health facility data for numerators and estimates of need for denominators. Not comparable to survey data presented under Background Statistics or elsewhere in this fact sheet.
a 2009 data are not directly comparable to later years. Definition changed in 2010 to exclude single-dose nevirapine.

Acronyms:
ANC: Antenatal care
ART: Antiretroviral therapy
ARVs: Antiretroviral prophylaxis
CTX: Co-trimoxazole prophylaxis
EID: Early infant diagnosis
EMTCT: Elimination of mother-to-child transmission of HIV
FP: Family planning
L&D: Labour and delivery
MMR: Maternal mortality ratio
MNCH: Maternal, newborn and child health
PMTCT: Prevention of mother-to-child transmission of HIV
PWLHIV: Pregnant women living with HIV
SRH: Sexual and reproductive health
WHO: World Health Organization