

# Kenya



*Prepared for the Consultative Meeting on Strategies for increasing the engagement of the  
Private Sector in the National HIV/AIDS Agenda in MAP countries*

LIVINGSTONE, ZAMBIA  
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**KENYA COUNTRY PAGE**

# KENYA

## Assessment of the Epidemiological Situation and Demographics

### Estimated percentage of adults living with HIV/AIDS, end of 2001

These estimates include all people with HIV infection, whether or not they have developed symptoms of AIDS, alive at the end of 2001: **15%**

### Estimated number of deaths due to AIDS

Estimated number of adults and children who died of AIDS during 2001: **190,000**

### Estimated number of orphans

Estimated number of children who have lost their mother or father or both Parents to AIDS and who were alive and under age 15 at the end of 2001: **890,000**

- In the major urban areas, Nairobi and Mombasa, HIV prevalence among antenatal clinic attendees tested increased from 2% in 1985 to 19% in 1995. In Kiwi, a periurban area of Mombasa, HIV infection rates doubled from 12.2% in 1989 to 24.1% in 1995; in 1999, the rate was 23%. Outside the major urban areas, median HIV prevalence increased from less than 1% in 1988 to 13% in 1997. In 1997, HIV prevalence ranged from 6 to 35% among 15 sentinel surveillance sites.
- Sex workers tested in Nairobi were found with an HIV prevalence of 60.8% in 1985 and by 1992, the rate had gone up to 85.2%. In 1993-95, 55.2% of sex workers tested in Mombasa were HIV positive.
- HIV prevalence among male STI clinic patients tested in Nairobi increased from 16% in 1985 to 28% in 1991-92 while among female STI patients, HIV prevalence increased from 33.3% in 1991 to 47.2% in 1998. In 1998, HIV prevalence among female STI clinic attendees tested in Nairobi was 29%. Nine percent of STI clinic patients tested in 1994 in Mombasa were HIV positive.

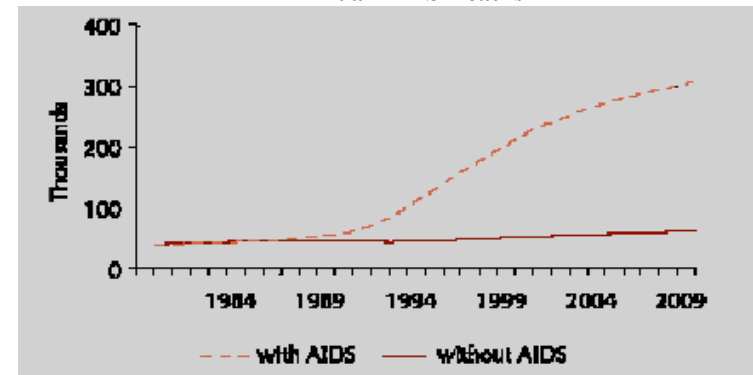
Source: UNAIDS/WHO Epidemiological fact sheet – 2002 Update

- The trend from 1990 to 2000 suggests that **adult HIV prevalence in Kenya will increase to about 14% by the year 2005** and then stabilize at that level and the number of infected people in the population will have increased from about 2.2 million people in 2000 to 2.6 million by 2005 and to 2.9 million by 2010.
- One dramatic impact of AIDS deaths is the decline in life expectancy. The Central Bureau of Statistics estimates that without AIDS, life expectancy at birth would currently be about 65 years. However, because of the large number of AIDS deaths, it is actually only about 46 years and may decline to 45 years by 2010. Thus almost **20 years of life expectancy have already been lost because of AIDS.**

Source: AIDS in Kenya, Kenya Ministry of Health, 2001

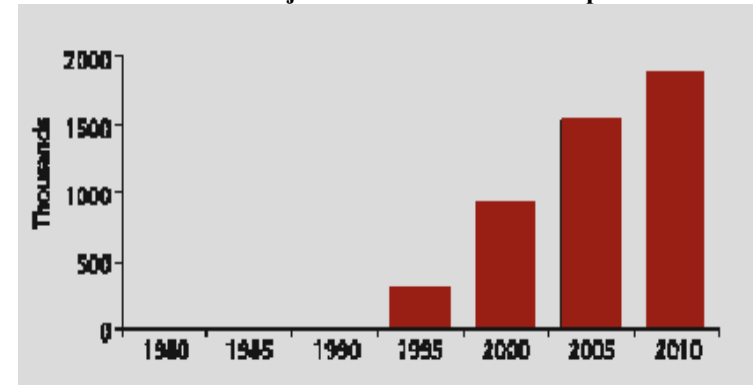
- Without AIDS, and assuming a gradual decline in the death rates from other causes, the annual number of deaths among young adults (age 15 to 49) would increase slowly (because of the growing population) from about 52,000 today to 58,000 by 2005. However, AIDS has dramatically increased that number, quadrupling it to 214,000 a year by 2000 and increasing it to 270,000 by 2005

Annual AIDS Deaths



- The number of AIDS orphans was 890,000 at the end of 2001 and is expected to increase to 1.5 million by 2005

Estimated and Projected number of AIDS Orphans



Source: AIDS in Kenya, Kenya Ministry of Health, 2001

HIV/AIDS Impact on the Macroeconomic level	National Response
<ul style="list-style-type: none"> <li>Simulation results by Hancock et al. (1996) on the macroeconomic impact of HIV/AIDS in Kenya reveal that the impact of AIDS could be substantial given that 80% of HIV infection occurs in the economically active age group of 15 to 49 years. With high mortality and morbidity of the most productive labour force, AIDS would lower economic performance. The authors projected that <b>GDP would be 14.5% lower in the year 2005 than without AIDS while per capita income would drop by 10%. The study also predicted a 15% drop in savings by 2005.</b></li> </ul> <p><i>Source: Kenya Ministry of Health, 2001</i></p>	<ul style="list-style-type: none"> <li><b>The National AIDS Control Council (NACC)</b> was established in 2000 as part of the Office of the President to provide leadership and a stronger coordination mechanism for a new, multisectoral national response to HIV/AIDS. The Kenya National HIV/AIDS Strategic Plan, issued by NACC in October 2000, includes the following key elements: <ul style="list-style-type: none"> <li>Emphasis on reducing prevalence among youth, where HIV incidence is increasing most rapidly;</li> <li>Creation of AIDS Control Units in each of the sectoral ministries, with a mandate to mainstream AIDS into Ministry activities;</li> <li>Creation of Provincial and District AIDS Control Committees and Constituency AIDS Control Committees to represent a wide range of stakeholders at all levels;</li> <li>Development of strategies based on lessons learned about obstacles to the success of earlier interventions; and</li> <li>Emphasis on the need to move away from small-scale interventions now in place to interventions with nationwide coverage.</li> </ul> </li> </ul> <p><b>The National HIV/AIDS Strategic Plan's</b> five priority areas for action are prevention and advocacy; treatment, and continuum of care and support; mitigation of the socioeconomic impact of AIDS; monitoring, evaluation and research; and management and coordination.</p> <p><i>Source: USAID, HIV/AIDS in Kenya</i></p>
<b>HIV/AIDS Impact on the Private Sector</b>	
<ul style="list-style-type: none"> <li>According to a World Bank strategy report (World Development Sources 1996), a <b>Kenyan company spent about US\$45 per employee per year for HIV/AIDS related costs or 3% of company profits. The report projected that this cost would increase to US\$120 per employee per year, equivalent to 8% of company profits, by the year 2000.</b> It further noted that in 1992, an average company in Kenya incurred mean annual costs associated with AIDS of approximately US\$140,000. This cost was expected to rise to US\$403,000 by the year 2005.</li> <li>In a study of Auto Kenya, Western Wood, Kenya Transport (all fictitious names for anonymity) and Muhoroni Sugar Company, Roberts and Rau (1994) showed that in 1994, Auto Kenya spent Ksh 1.1 million (US\$21,312) on HIV/AIDS-related costs, Western Wood Ksh 2 million (US\$40,630), Kenya Transport Ksh 3.1 million (US\$61,132) and Muhoroni Sugar Company Ksh 2.9 million (US\$58,303).</li> </ul> <p><i>Source: Kenya Ministry of Health, 2001</i></p>	

Multisectoral Response	List of Contacts(websites and useful contacts)
<ul style="list-style-type: none"> <li>• The <b>U.S. Agency for International Development (USAID)</b>/Kenya’s current HIV/AIDS program (1998-2005) focuses on prevention of HIV infection, policy and advocacy, community-based care and support, integration of AIDS with family planning and child health programs, blood safety, operations research, and multisectoral activities. FY 2002 funding levels include \$17.5 million in HIV/AIDS and \$1.75 million for tuberculosis activities.</li> </ul> <p><i>Source: USAID, HIV/AIDS in Kenya</i></p> <ul style="list-style-type: none"> <li>• <b>World Bank</b> funding for Kenya’s HIV/AIDS Project amounts to \$50 million under the Multi-country HIV/AIDS Program (MAP)</li> <li>• <b>Other partners: DFID, UNDP, UNICEF, European Community, UNAIDS, British Council, GTZ, Belgian BADC, Canadian International Development Agency (CIDA), WHO, FHI, etc</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>National AIDS Control Council (NACC)</b>, Office of the President, P.O. Box 61307, Nairobi. Tel: 711261, Fax: 711072, Dr. Margaret Gachara, E-mail: <a href="mailto:gachara@iconnect.co.ke">gachara@iconnect.co.ke</a></li> <li>• <b>National AIDS and STD Control Programme (NASCOB)</b>, Ministry of Health, P.O. Box 19361, Nairobi. Tel: 729502; E-mail: <a href="mailto:headnascob@iconnect.co.ke">headnascob@iconnect.co.ke</a></li> <li>• <b>Kenya AIDS NGO Consortium (KANCO)</b>, P.O. Box 69866, Nairobi. Tel: 717664; E-mail: <a href="mailto:kenaids@iconnect.com">kenaids@iconnect.com</a></li> <li>• <b>USAID/Kenya</b>, Kiert Toh, Mission Director, ICIPE Complex, Kasarani/Thika Road, P.O. Box 30261, Nairobi. Tel: 254 2 862400, Fax: 254 2 860450, Web site: <a href="http://www.usembassy.state.gov/nairobi/wwwhusaid2.html">http://www.usembassy.state.gov/nairobi/wwwhusaid2.html</a></li> <li>• <b>Kenya HIV/AIDS Private Sector Business Council</b>, Mr. Chris J Kirubi – Chairman Tel: +254 216 486, 210 491 Fax: +254 2 217 304 Email: <a href="mailto:ihl@kenyaweb.com">ihl@kenyaweb.com</a></li> </ul>

**Kenya – List of Potential Direct Partners**

<u>Source</u>	<u>URL/Contact Info</u>	<u>What to find</u>	<u>Comments</u>
Name of organization	Contact person: Address: Telephone: Fax numbers: Email address: Website:		