



MINISTRY OF HEALTH
STATE DEPARTMENT FOR PUBLIC HEALTH AND PROFESSIONAL
STANDARDS

PRESS STATEMENT
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ACHIEVEMENT OF INDOOR RESIDUAL SPRAYING (IRS) IN BUSIA AND SEASONAL MALARIA CHEMOPREVENTION (SMC) IN TURKANA

Malaria remains a major public health concern in Kenya, with the country reporting approximately 5.5 million cases in 2023, translating to an incidence rate of 104 cases per 1,000 population. The highest burden is concentrated in six counties—Busia, Kakamega, Kisumu, Migori, Siaya, and Vihiga—with an adjusted malaria incidence of 748 cases per 1,000 people. Additionally, Bungoma, Homa Bay, Kwale, Turkana, and West Pokot counties recorded an incidence of 474 cases per 1,000 people.

In efforts to combat malaria, Kenya has intensified interventions such as the distribution of insecticide-treated nets (ITNs), improved malaria case management, and the introduction of targeted prevention strategies, including Indoor Residual Spraying (IRS) and Seasonal Malaria Chemoprevention (SMC).

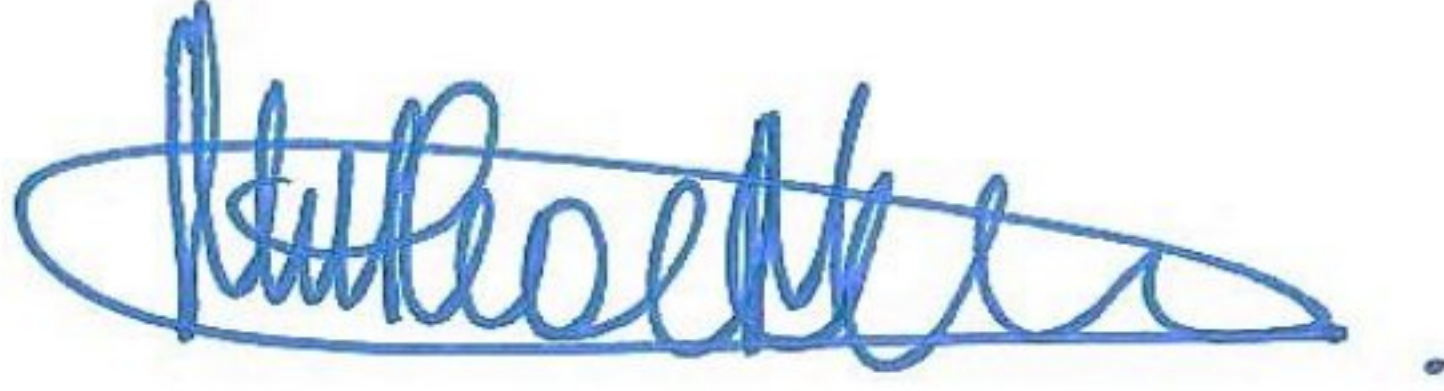
In 2024, IRS was successfully conducted in Busia and Migori counties with support from the United States Government through the President's Malaria Initiative (PMI). The campaign targeted high-transmission areas, ensuring that 423,037 structures were sprayed out of 444,890 eligible structures. Coverage in Busia County reached 95.1%, while Migori achieved 95.0%, surpassing the WHO-recommended effectiveness threshold of 85%. This intervention provided protection to approximately 2 million people. Notably, malaria incidence in Busia County declined significantly by 50%, dropping from 746 cases per 1,000 population in 2023 to 358 per 1,000 in 2024.

Turkana County has experienced a transition from a largely seasonal malaria burden to a more stable endemic pattern, with some regions still exhibiting seasonal peaks. Assessments by the National Malaria Control Programme, the County Government of Turkana, Moi University, and Duke University revealed a more than 65% increase in malaria cases during the rainy season. In response, the first phase of Seasonal Malaria Chemoprevention (SMC) was implemented in Turkana Central Sub-County, which had recorded 102,000 malaria cases in 2024, with 60% occurring between May and September.

Launched in June 2024 with support from Catholic Relief Services (CRS), the SMC campaign targeted 38,585 children under five years to prevent malaria episodes during peak transmission periods. Over five cycles, each spaced 28 days apart, 71% (27,206 children) of the targeted population completed all five doses. The cycle-wise performance was as follows: Cycle 1 (88% coverage, 33,820 children), Cycle 2 (101%, 39,229 children), Cycle 3 (95%, 36,741 children), Cycle 4 (100%, 38,924 children), and Cycle 5 (104%, 40,123 children). The SMC intervention reduced malaria incidence by 71%.

Building on this success, the second round of SMC in Turkana Central is scheduled for June 2025 and will integrate a digital campaign approach using the eCHIS platform. Data from both the 2024 and 2025 campaigns will guide future expansion and implementation strategies to enhance the impact of malaria prevention efforts.

The Ministry of Health remains committed to strengthening malaria control interventions and ensuring that all high-burden regions receive the necessary support to eliminate malaria as a public health threat.



Mary Muthoni Muriuki, CBS
PRINCIPAL SECRETARY