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## Revitalizing Intermittent Preventive Treatment of Malaria in Pregnancy in Kenya

Population Council-Kenya

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## REVIVE IPTp-SP

# Revitalizing Intermittent Preventive Treatment of Malaria in Pregnancy in Kenya

### Malaria in pregnancy: A public health issue

- Nearly a third of Kenya's 51 million people live in malaria endemic zones.
- Pregnant women are especially susceptible to malaria infection.
- Malaria in pregnancy (MiP) has a devastating impact on health outcomes for mothers and is a leading cause of spontaneous abortion, severe maternal anemia, low infant birth weight, preterm delivery, and stillbirth.

### The recommended solution

- Intermittent preventive treatment of malaria in pregnancy (IPTp) using sulfadoxine-pyrimethamine (SP), commonly referred to as fansidar, helps prevent maternal malaria episodes, maternal and fetal anemia, placental parasitemia, low birth weight, and neonatal mortality.
- The World Health Organization's [guidelines on IPTp](#) recommend that pregnant women in areas of moderate-to-high malaria transmission in sub-Saharan Africa receive a dose of SP at each antenatal care visit, with doses spaced at one month apart, ideally by directly observed therapy, beginning in the second trimester.
- IPTp-SP is clinically proven, safe, cost-effective, and lifesaving and contributes to better health outcomes for mothers and newborns.
- IPTp-SP is recommended alongside: a) promotion and use of insecticide-treated nets (ITN), and b) appropriate case management with prompt, effective treatment.



### The challenge

- Though Kenya adopted WHO's recommendations beginning in 1998, the uptake of IPTp-SP by pregnant women remains very low. Only 22% of pregnant women receive three or more doses of IPTp-SP despite high antenatal care (ANC) attendance (*KIMS 2020*).
- Barriers to access and uptake of IPTp-SP include long distances to facilities for mothers, facility stockouts, knowledge gaps on the policy recommendations and correct administration of IPTp-SP, negative misperceptions about SP due to perceived side effects and previous withdrawal from general use by the public due to drug resistance; all these slow down uptake of IPTp-SP.

## The REVIVE IPTp-SP Project

The Population Council, Kenya (PC-Kenya), a local non-governmental research organization based in Nairobi, is leading the EDCTP-2 funded **REVIVE IPTp-SP** project (2020-2025), which seeks to contribute to the government of Kenya's national target of achieving 80% coverage of IPTp-SP for MiP by 2025. The project is implementing interventions to increase IPTp-SP coverage in two high-prevalence malaria-endemic counties in Kenya, Migori and Kisumu through the following approaches:

- 1. Policy clarification and consensus building** on SP use for IPTp by engaging stakeholders to:
  - Address persistent concerns on the safety and effectiveness of IPTp-SP;
  - Comprehensively address gaps around the supply and use of SP for IPTp; and
  - Consider alternative platforms to achieve effective IPTp-SP uptake and continuation.
- 2. Capacity building and strengthening**
  - Increasing program implementers' and healthcare providers' understanding, capacity and willingness to promote the use of SP in IPTp through trainings and dialogue;
  - Re-orienting service providers on how to deliver IPTp-SP in the context of routine antenatal care
- 3. Promoting user empowerment and self-care for the communities and pregnant mothers by:**
  - Conducting community dialogues to sensitize and engage communities on MiP and IPTp-SP, understand the challenges they face in seeking and taking up IPTp-SP, and stimulate demand for IPTp-SP;
  - Using integrated community health outreaches to take IPTp-SP services into the community setting to reduce the financial, time and social barriers to access of IPTp-SP for the mothers;
  - Enrolling pregnant mothers for ANC and IPTp-SP follow-up using a digital platform through which the mothers are engaged and sensitized on pregnancy, MiP, ANC, and IPTp-SP.
- 4. Improving monitoring, evaluation, and shared learning to:**
  - Support the routine tracking of key indicators;
  - Inform the development of consensus-based and evidence-based decisions and actions to guide the uptake of IPTp-SP.

## Impact

The Revive IPTp-SP project will:

1. Determine the feasibility, acceptability and effectiveness of community-directed delivery models that promote community empowerment and self-care by mothers to increase uptake of IPTp-SP.
2. Share the learnings from the project with national and regional stakeholders to inform and support policy and investment decisions on IPTp to facilitate the uptake and scale-up of IPTp-SP in the remaining 12 malaria-endemic counties in Kenya and elsewhere in sub-Saharan Africa.

Revive IPTp-SP is part of the EDCTP2 programme supported by the European Union.



*The project is led by the Population Council, Kenya (PC Kenya) in partnership with the Kisumu Medical and Education Trust (KMET) and in collaboration with Kenya's National Malaria Control Programme, the Division of Reproductive and Maternal Health, Kisumu and Migori County Health Management Teams, and the Midwives Association of Kenya (MAK).*