



KENYA NUTRITION SITUATION OVERVIEW, JULY 2024

Key highlights:

- Nutrition situation has improved in most counties as of July 2024 though certain areas continue to report high levels of acute malnutrition
- The improvement is attributed to improved food security situation
- Nutrition situation is expected to remain the same in most of the areas
- An estimated 760,488 children aged 6 to 59 months require management of acute malnutrition, a reduction compared to 847,932 reported in February 2024
- Sustained response and multi-sectoral actions are required to address the high levels of malnutrition in arid areas and other hotspots.

Number requiring treatment of acute malnutrition

	Total, acutely malnourished children	760,488
	Pregnant and Breastfeeding Women	112,401

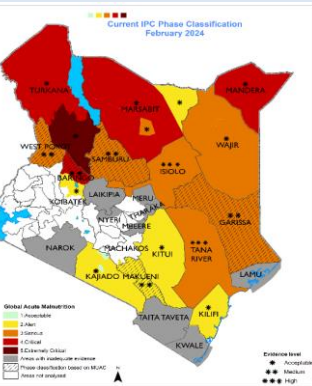


Figure 1. Nutrition Situation, Feb 2024

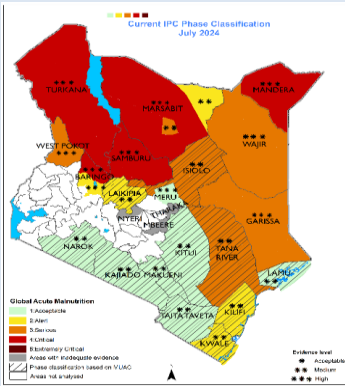


Figure 2. Current (LRA 2024) Nutrition Situation

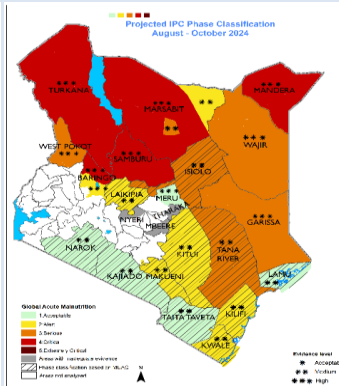


Figure 3. Projected Nutrition Situation

Key drivers

- Food Insecurity
- Poor childcare practices
- Poor Water, Sanitation, and Hygiene (WASH)
- High disease burden
- High maternal workload
- Sub-optimal coverage of nutrition and health services
- Stock out of IMAM commodities
- Cumulative negative effects of previous failed seasons
- Recurrent shocks e.g., floods

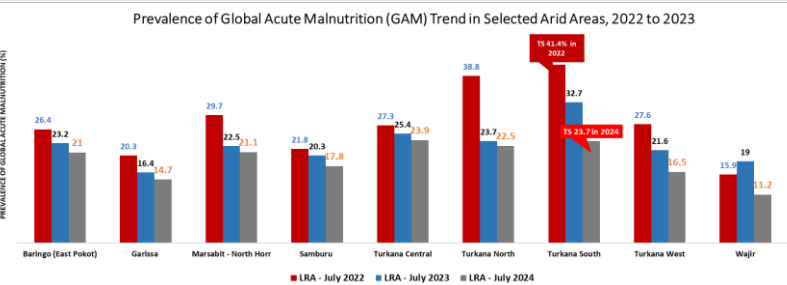
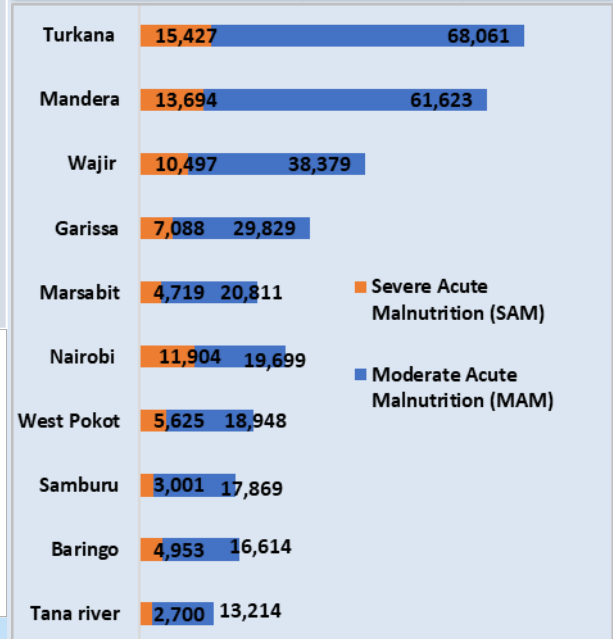
Situation overview

The Integrated Phase classification for Acute Malnutrition (IPC AMN) analysis conducted in July 2024 shows overall improvement. However, some areas continue to report high levels of acute malnutrition (Figures 1 and 2). Turkana South improved from IPC AMN Phase 5 (Extremely Critical) to IPC AMN Phase 4 (Critical). Turkana Central, Turkana West, Turkana North, North Horr, Laisamis, Mandera, and Tiati improved though within the same phase; IPC AMN Phase 4 (Critical). Isiolo, Wajir, Garissa, Tana River, Saku and West Pokot remained within IPC AMN Phase 3 (Serious). Kilifi, Moyale, and Baringo North/South remained in IPC AMN Phase 2 (Alert). Makueni, Kitui, and Kajiado improved from IPC AMN Phase 2 (Alert) to Phase 1 (Acceptable). The nutrition situation is expected to continue improving over the projection period, although it will likely remain within the same acute malnutrition classification phases (Figure 3).

The major improvement in reducing the prevalence of global acute malnutrition, as shown in Figure 4, is attributed to enhanced food security characterized by improved milk availability and consumption, and increased food stocks resulting from the favorable performance of the 2023 short rains and the 2024 long rains. However, malnutrition remains prevalent in arid counties due to the cumulative negative effect of previous failed seasons resulting from the 2022/2023 drought coupled with other shocks such as floods, high morbidity, poor child feeding practices, poor WASH and sub-optimal coverage of multi-sectoral interventions, which have slowed down the positive effects of the good rain seasons.

Estimated Caseloads of Children 6-59 Months Requiring Treatment for Acute Malnutrition

Area	Global Acute Malnutrition	Severe Acute Malnutrition	Moderate Acute Malnutrition
ASAL	479,498	104,596	374,902
Urban	59,558	25,267	34,291
Non-ASAL	221,432	50,552	170,880
Total	760,488	180,414	580,074



Global Acute Malnutrition (GAM) Trends in Selected Arid Counties, 2022 to 2024

Key response actions

- Provision of nutrition, health, and water services to the most affected areas including mass screening, hotspot mapping and implementation of integrated health and nutrition outreaches in high priority areas.
- Comprehensive multi-sectoral response analysis to accelerate recovery from the effects of drought, floods and other shocks while addressing issues that expose communities to these shocks, while strengthening links between emergency development actions.
- Resource mobilization to improve nutrition supply pipeline and full implementation of response plan
- Scaling up of community-based nutrition services including scale up Social Behaviour Change Communication (SBCC) focusing on health and nutrition, care practices, and WASH
- Advocate for multisectoral actions to improve household food security and dietary intake such as livelihood improvement programs, social safety net initiatives, including food, non-food essentials, and monetary transfers, with comprehensive case management services for vulnerable children and gender transformative approaches.



Nutrition SMART Survey Findings – Prevalence of Acute Malnutrition, 2023 to 2024

County	Survey Area	June/July 2023		June/July 2024		Variation - GAM		Variation - SAM	
		GAM	SAM	GAM	SAM	% Difference	Change in Prevalence	% Difference	Change in Prevalence
Baringo	Tiaty East and West	23.3%	4.0%	21.0%	4.4%	-2.3%	↓	0.4%	↑
	Baringo North and South	7.9%	1.0%	7.9%	1.3%	0.0%	↓	0.3%	↑
Samburu	Samburu	20.3%	1.9%	17.8%	2.2%	-2.5%	↓	0.3%	↑
	Samburu North			17.9%	1.5%				
	Samburu East			14.2%	2.4%				
	Samburu Central			19.6%	2.4%				
Turkana	Turkana	26.4%	3.7%	21.5%	3.1%	-4.9%	↓	-0.6%	↓
	Turkana Central	25.4%	3.9%	24.0%	3.1%	-1.4%	↓	-0.8%	↓
	Turkana North	23.7%	4.1%	22.5%	3.0%	-1.2%	↓	-1.1%	↓
	Turkana South	32.7%	4.7%	23.7%	4.3%	-9.0%	↓	-0.4%	↓
	Turkana West	21.6%	2.3%	16.5%	1.7%	-5.1%	↓	-0.6%	↓
Wajir	Wajir	19.0%	2.2%	11.2%	1.8%	-7.8%	↓	-0.4%	↓
West Pokot	West Pokot	18.1%	2.2%	12.9%	1.9%	-5.2%	↓	-0.3%	↓
Garissa	Garissa	16.4%	2.7%	14.7%	2.4%	-1.7%	↓	-0.3%	↓
Mandera	Mandera	21.2%	2.9%	20.6%	3.2%	-0.6%	↓	0.3%	↑
	Marsabit	12.9%	2.1%	13.5%	2.4%	0.6%	↑	0.3%	↑
Marsabit	North Horr	22.5%	4.7%	21.1%	4.5%	-1.4%	↓	-0.2%	↓
	Laisamis	18.0%	3.0%	16.1%	2.7%	-1.9%	↓	-0.3%	↓
	Moyale & Saku (combined survey)			9.2%	1.4%				



Estimated Caseloads and Targets of Children 6-59 months and Pregnant & Lactating Women Requiring Treatment for Acute Malnutrition

Area County	GAM 6 to 59 months		MAM 6 to 59 months		SAM 6 to 59 months		Pregnant and breastfeeding women
	Total Caseload	Target	Total Caseload	Target	Total Caseload	Target	
Baringo	21,568	12,022	16,614	8,307	4,953	3,715	4,740
Embu	2,749	1,664	1,592	796	1,158	868	48
Garissa	36,917	20,231	29,829	14,915	7,088	5,316	11,640
Isiolo	11,496	6,141	9,923	4,961	1,573	1,180	2,820
Kajiado	9,727	5,582	6,855	3,427	2,873	2,154	982
Kilifi	23,351	12,584	19,718	9,859	3,632	2,724	1,272
Kitui	18,746	11,151	11,636	5,818	7,111	5,333	1,593
Kwale	11,871	7,038	7,461	3,731	4,409	3,307	960
Laikipia	5,735	3,374	3,711	1,856	2,024	1,518	60
Lamu	1,984	1,168	1,282	641	703	527	36
Machakos	5,944	3,626	3,329	1,664	2,615	1,961	24
Makueni	9,667	5,559	6,767	3,383	2,900	2,175	348
Mandera	75,317	41,082	61,623	30,812	13,694	10,271	16,644
Marsabit	25,529	13,944	20,811	10,405	4,719	3,539	7,356
Meru	10,390	6,160	6,531	3,265	3,859	2,894	700
Narok	8,004	4,502	6,003	3,002	2,001	1,501	132
Nyeri	1,372	739	1161	581	211	158	142
Samburu	20,870	11,185	17,869	8,935	3,001	2,251	5,796
Taita Taveta	4,423	2,629	2,752	1,376	1,671	1,253	177
Tana river	15,914	8,632	13,214	6,607	2,700	2,025	3,240
Tharaka Nithi	983	530	832	416	151	113	160
Turkana	83,488	45,601	68,061	34,031	15,427	11,570	31,896
Wajir	48,876	27,062	38,379	19,190	10,497	7,873	16,908
West Pokot	24,574	13,693	18,948	9,474	5,625	4,219	2,496
Total ASAL	479,498	265,898	374,902	187,451	104,596	78,447	110,169
Kisumu	6,976	4,320	3,648	1,824	3,328	2,496	192
Mombasa	20,979	12,998	10,944	5,472	10,035	7,526	312
Nairobi	31,603	18,778	19,699	9,850	11,904	8,928	984
Total urban	59,558	36,096	34,291	17,146	25,267	18,950	1,488
Total NON-ASAL	221,432	123,354	170,880	85,440	50,552	37,914	744
GRAND TOTAL	760,488	425,348	580,074	290,037	180,414	135,311	112,401