

Kenyan malaria success strengthens call for free insecticide-treated nets for all

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Experts have today called for international agencies to provide insecticide-treated bed nets for all children in Africa as the most equitable way of tackling malaria. Their call is supported by new research co-funded by the Wellcome Trust showing how successful a scheme run by the Kenyan government has been at distributing the nets.

Over a million children die from malaria in Africa each year. Scientists have known for over 15 years that sleeping under a mosquito net treated with insecticide can halve the number of episodes of malaria and save lives. However, successful and equitable distribution of the nets has been difficult – by the end of 2004, only 7% of children in rural Kenya were reported to sleeping under the nets and only 3% among the poorest sectors of these communities.

"Even when the price of a treated net is heavily subsidised and made more accessible through clinics, parents have to choose between school fees and food or a net," explains Professor Bob Snow from the Kenya Medical Research Institute–Wellcome Trust (KEMRI-WT) Research Programme in Kenya, who led the research. "The result is that few children are protected. Those who can afford to protect their children tend to benefit most, but not those who can't."

In 2006 the Kenyan government initiated a programme to provide 3.4 million treated nets free to as many young children as possible in only two weeks. The nets were distributed at clinics, schools, vaccination points and by Ministry of Health staff walking from house-to-house . In

this short period of time, coverage rose to two-thirds of all children sleeping under a treated net, with no difference between children from rich or poor homes. The results of the study to evaluate the initiative are published today in the open access journal PLoS Medicine.

However, despite the success of the Kenyan government's programme, Dr Abdisalan Mohamed Noor, lead author of the study, warns against complacency.

“We’ve shown what can be achieved with the right strategy, but one in three children are still unprotected, and every year 1.5 million children are born in Kenya who require new treated nets,” says Dr Noor from KEMRI-WT and the University of Oxford. “The momentum started in 2006 must continue and not be seen as a one off success.”

The researchers believe that the findings should prompt international aid agencies to revisit their distribution policies to make the nets more widely accessible.

"For a decade now, we have been asking the international agencies to recognise the importance of treated nets in child survival programmes," says Professor Snow. "We would never expect countries or African families to pay for measles vaccination. Why then ask them to pay for an intervention that saves more lives in Africa each year?"

Source: Wellcome Trust

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