

# Securing Kenya's future

Invest more, invest now to sustain immunization gains



A woman with her newborn baby in the maternity room at Sendwe Hospital sitting under a bed net. PATH/Georgina Goodwin

## Overview and purpose

In 2017, the Government of Kenya as a member of the African Union made a historic commitment to improve access to vaccines as part of the Addis Declaration on Immunization. This pledge included a goal to expand domestic funding and investments.

To evaluate progress, PATH conducted a retrospective study on immunization financing in Kenya and nine other African countries.<sup>1</sup> This summary provides key findings and recommendations from PATH's study, highlighting common trends, challenges, and opportunities.

## Target audience and goals

Policymakers can use this resource to inform legislation and strategies aimed at improving community health and national development.

Civil society advocates at global, regional, and local levels can apply these findings and recommendations to advance immunization advocacy with policymakers and communities. They can also inform strategies for government accountability toward national and global targets.

Donors and partners can use this summary to inform investments and collaborations.

**Addis Declaration on Immunization, Goal 2:** Increase and sustain domestic investments and funding allocations to meet the cost of traditional vaccines, fulfill new vaccine financing requirements, and provide financial support for operational implementation of immunization activities by Expanded Program on Immunization programs.

## Key findings

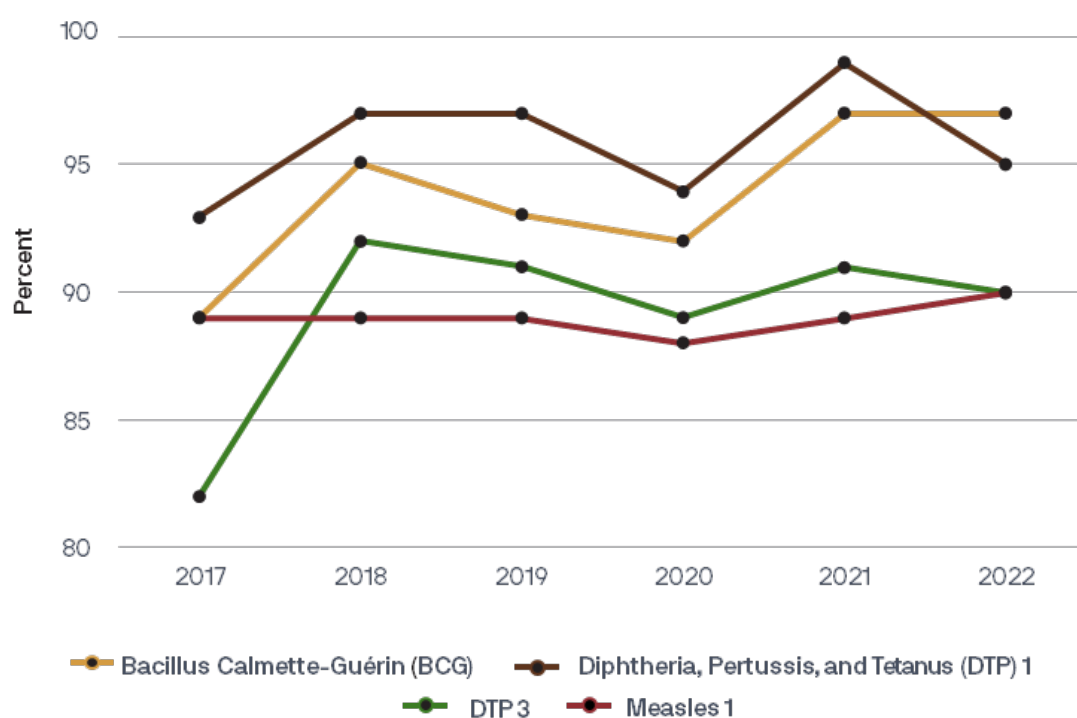
- **Government funding rose as a source of immunization financing** from 21 percent in 2017 to 50 percent in 2022.
- **Government funding rose as a source of vaccine financing** from 23 to 50 percent between 2017 and 2022.
- **Domestic expenditures were low for immunization programs and vaccines.** Immunization accounted for 0.3 percent of the current health expenditure and 0.7 percent of the domestic general government health expenditure in 2020, respectively. Vaccine spending accounted for 0.3 percent of the current health expenditure and 0.7 percent of the domestic general government health expenditure in 2020, respectively.
- **Government expenditures for health did not meet the 2001 Abuja Declaration threshold of 15 percent.**
- **Donor dependence for immunization financing is fluctuating but threatens sustainability.**
- **Though lowest among the ten countries analyzed, out-of-pocket expenditures in Kenya remained worryingly high, contributing 25 percent as a source for health care funding.**

## Immunization progress and challenges for financing in Kenya

Approximately 8 million Kenyan children under 5 are directly at risk of vaccine-preventable illnesses. Suboptimal investments in immunization services are compounded by a high number of refugees. Outbreaks of measles and cholera recur in the border region of Marsabit and the overcrowded refugee camps of Kakuma and Dadaab.

Since 2017, immunization coverage has grown, with many vaccines reaching 90 percent of the population or more by 2022 (see Figure 1).

Figure 1. Immunization coverage trends in Kenya.



Source: PATH. Analysis of Selected African Union Member Countries' Progress Toward Sustainable Financing of Immunization. PATH; 2023  
Abbreviations : BCG, Bacillus Calmette-Guérin; DTP, Diphtheria, Tetanus, and Pertussis.

Coverage is likely lower in low-income, high-population settings. Vaccine hesitancy has also expanded, however, due to insufficient investments in community sensitization.

While health care coverage in Kenya is among the highest in the region, only 53 percent of the population had access to essential health services. Less than 1 percent of Kenya's domestic health budget is allocated to, and spent on, routine immunization programs.

Government resources provided 50 percent of immunization funding in 2022, with supplemental support from donors like Gavi, the Vaccine Alliance. Though declining, a dependence on donor funding limits the transition to domestic financing of health and immunization and further threatens the sustainability of immunization services. Kenya is currently classified as being in the accelerated transition phase for Gavi eligibility.

## Policy commitments

Policies to strengthen immunization financing were included in the Kenya Ministry of Health's National Immunization Policy Guidelines (2023). Under this comprehensive plan that spans national to local services, key policy priorities include multiyear budgetary planning; strategies for comprehensive resource mobilization for routine, outbreak, and catch-up campaigns; partnering with civil society for advocacy; and enacting legislation that supports immunization financing.

Kenya's Immunization Agenda 2030 prioritizes equitable access to new and existing vaccines. The most recently introduced vaccines to the EPI schedule include maternal vaccines and the human papillomavirus vaccine. Pilot introductions of the malaria vaccine began in 2019<sup>2</sup>, and more than 400,000 children were immunized by 2023.

### At a glance: Immunization in Kenya

Under-5 population: **7 million**<sup>3</sup>

Under-5 mortality: **41 deaths per 1,000 live births**<sup>4</sup>

Immunization coverage rate: **>80%**

Government contribution to immunization: **50% (2022)**

## A call for action

### National -level decision-makers

- **Progressively increase government financing and budget allocation** for immunization programs.
- **Explore innovative financing mechanisms**, such as public-private partnerships that support immunization services in the context of health sector funding.
- **Improve the transparency and accountability of immunization financing** to build trust and confidence among stakeholders.
- **Prioritize immunization programs in development plans** at both national and regional levels and develop multiyear funding plans to ensure predictable and sustained support.
- **Build partnerships with civil society organizations and the private sector** to support immunization programs.
- **Strengthen public financial management and tax administration** to ensure efficiency and to mobilize more resources for health and immunization.
- **Prioritize microplanning** to identify resources, needs, and forecasting, and to improve efficiencies among government agencies and partners.
- **Collaborate with regional partners to improve immunization** among internally displaced persons and refugees.
- **Conduct targeted immunization campaigns** in rural and conflict-ridden regions to reach under immunized and zero-dose children.

### Civil society

- **Prioritize advocacy efforts for domestic budget allocations to health and immunization** services that will meet regional and global development goals.
- **Track commitments to enhance government accountability** on immunization financing, forecasting, and monitoring.
- **Build public awareness and trust in vaccines** through outreach campaigns and engagement with community leaders.
- **Advocate for the progressive integration of immunization services** with other primary health services for efficiency.

### Donors and partners

- **Coordinate sufficient investment that catalyzes increased domestic resources** to support countries in achieving immunization goals and tracking country progress.
- **Emphasize and pursue links between global, regional, and national goals** for immunization programs and health systems.
- **Incentivize and expand local and regional expertise in vaccine development** and immunization technology.

## References

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5. Africa Centres for Disease Control and Prevention. Accelerating Immunization: Seven Years of African Progress on Immunization – The Addis Declaration Review Report (2017–2023).

## Sources

PATH's review analyzed secondary data from global and country-based immunization and health databases, peer-reviewed scientific articles, and gray literature.

Data sources for this review encompassed EPI reports, budgets, immunization financing reports, and databases from the World Health Organization, the United Nations Children's Fund (UNICEF), Gavi, the World Bank, and the International Monetary Fund.

## Acknowledgments

Our findings corroborate those of an Africa Centers for Disease Control and Prevention review of the Addis Declaration on Immunization.<sup>5</sup> We wish to thank the Gavi Civil Society Organization Constituency, WACI Health, and VacchiNations campaign members for their input and review.