

**Kenya – Researched and compiled by the Refugee Documentation Centre of Ireland on 10 March 2009**

**Information on psychological and medical care in Kenya**

The official *Government of Kenya* website under the heading 'Health Care and Medical Services', states:

"The Kenya government, through the Ministry of Health strives to provide quality healthcare for all citizens so that they may lead economically and socially productive lives. The provision of Health services in Kenya is liberalized. There are Public/Government Hospitals and Private Hospitals

The provision of Healthcare services in Government Hospitals is either free or subsidised on cost sharing basis." (Government of Kenya (2009) - *Health Care and Medical Services*)

A July 2008 *IRIN News* article states:

"NAIROBI, 11 July 2008 (IRIN) - Quality healthcare is a luxury often beyond the reach of those who live in Nairobi's slums, such as mother-of-seven Grace Awour Opondo.

"When you are sick you buy medicine from the local shops," Opondo told IRIN. "If you are lucky you recover because the medicine is not usually the right one.

"Sometimes there is no medicine even in the hospitals, so they send you out with a prescription," she said. "Then the chemists are expensive so often one has to make do without the medicine."

According to Sakwa Mwangala, a programme manager with the African Medical and Research Foundation ([AMREF](#)), the fact that people are squatting on government land often prevents them from accessing essential services. Slums are regarded as informal illegal settlements, which means they are underserved in terms of infrastructure development and access to basic amenities.

"Government health facilities are also not easily accessible for most slum residents," said Mwangala, who heads AMREF's Kibera integrated healthcare programme. Kibera, on the southwestern edge of central Nairobi, is one of the largest and most densely populated slums in sub-Saharan Africa." (IRIN News (11 July 2008) – *KENYA: Healthcare hurdles in Nairobi's slums*)

A February 2008 *IRIN News* report states:

"NAIROBI, 7 February 2008 (IRIN) - Health officials are concerned about the long-term impact of Kenya's political crisis on healthcare, especially in areas hardest hit by violence since the end of December 2007.

"The most worrying issue is that of drug resistance among patients of chronic diseases," Ian van Engelgem, the medical coordinator of Médecins Sans Frontières (MSF), told IRIN on 5 February.

He said HIV and Tuberculosis (TB) patients who had missed out on their regular medication for up to a month due to displacement and violence could develop resistance to the drugs.

"Right now a lot of HIV patients are on first-line drugs; they could require second-line drugs, which are more expensive, if they develop resistance as a result of skipping their ARV [anti-retroviral] medication for a period of time," Van Engelgem said.

The fact that internally displaced persons (IDPs) have better access to healthcare compared with the host community where the camps are located is another concern.

"If IDPs have access to free healthcare, the same should also apply to them [host communities] as they are equally affected by the unrest," Van Engelgem said." (IRIN News (07 February 2008) – *KENYA: Healthcare threatened by political crisis*)

A July 2005 *UN News Centre* article states:

"27 July 2005 – With four out of five girls never even enrolled in school in north eastern Kenya and poor access to health services contributing to low immunization rates, high malaria incidence and high risk of maternal death, the head of the United Nations Children's Fund ([UNICEF](#)) has called for redoubled efforts to meet the daunting challenges.

"Right now, all the key indicators for children and women in North Eastern Province are unacceptable," UNICEF Executive Director Ann M. Veneman told an audience that included several leading government officials during a visit over the weekend to Wajir in North Eastern Province.

"The Millennium Development Goals (MDGs) are all about children," she stressed, referring to a set of eight targets drawn up at the UN Millennium Summit five years ago to slash a host of socio-economic ills by 2015, including halving extreme poverty and hunger, cutting child mortality rates by two-thirds, and achieving universal primary education and access to health services.

"If we work together to ensure children are properly fed and cared for, protected by immunization, have access to clean water and sanitation, sleep under treated bednets, know how to avoid HIV/AIDS, and have access to decent health services, we will go a long way to achieving the goals." (UN News Centre (27 July 2005) – *Kenya: UNICEF chief calls for redoubled efforts to improve health, education*)

A June 2003 *BBC News* article states:

“A radical approach to mental health policy is beginning to see real positive benefits for patients in Kenya.

Today Kenya has 60 psychiatrists, or one for every 500,000 people - 10 times fewer per head than Britain, but remarkably good for Africa.

But they work alongside a combination of herbalists, spiritualists and traditional healers - and, unlike in the West, no group competes in the belief they offer the only solution.

"There are very many strengths in countries where there are few resources," British psychiatrist Professor Rachel Jenkins, who has been trying to improve the quality of mental health provision in sub-Saharan Africa through a British-funded project, told BBC World Service's Health Matters programme." (BBC News (18 June 2003) – *Kenya's mix and match mental health policy*)

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This response was prepared after researching publicly accessible information currently available to the Refugee Documentation Centre within time constraints. This response is not and does not purport to be conclusive as to the merit of any particular claim to refugee status or asylum. Please read in full all documents referred to.

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