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A LOOMING SHORTAGE OF ANTIRETROVIRAL DRUGS THREATENS THE WELLBEING OF KENYAN CITIZENS

In our special issue GFO issue published on 5 May 2021, we highlighted [Kenya's potential shortage of antiretroviral drugs \(ARVs\) caused by a disagreement between the government and USAID on the procurement entity](#). A standoff arose when the United States Agency for International Development (USAID) opted to use a US-based international non-government organization (Chemonics) rather than the government entity, the [Kenya Medical Supplies Authority \(KEMSA\)](#), to procure, warehouse, and distribute health commodities donated to Kenya by the US government. The Kenyan laws require Chemonics to pay tax which would otherwise be exempt if procurement were through a government-to-government arrangement using government institutions. However, Chemonics feels that it too should be exempt on the basis that the donated health products are for the wellbeing of Kenyan citizens. The skirmish remains unresolved, and the Council of Governors has warned the government that, if the situation remains unaddressed, there is a strong likelihood that Kenya will face a shortage of HIV commodities, including ARVs, as of 1 July 2021. Health is a devolved function in Kenya, and thus it is managed by the 47 County governments, each headed by a Governor.

Through [a press statement issued on 21 May 2021](#), the Council of Governors, an intergovernmental body comprising the Governors of the 47 Counties, acknowledged the significant role that the Global Fund and USAID have played over the past 20 years in providing the country with HIV commodities. It then called for the national government, through the Ministry of Health, to allow USAID to procure, warehouse, and distribute HIV commodities, currently trapped at the port of Mombasa, using a third-party agent. Also, they expressed the urgency of distributing HIV commodities to all County facilities before 20 June 2021. Otherwise, the 1.1 million Kenyans living with HIV face a potential crisis in the continuity of HIV treatment. The Council of Governors also called for a national dialogue to discuss how the country can become self-reliant regarding the purchase of HIV and tuberculosis drugs.

As the wrangling continues, the health commodities held in the port are at risk of expiring. According to [the Nation](#), a Kenyan newspaper, the ARVs at the port have a short shelf-life of between 18 to 24 months, and some have less than four months before expiration. What is unclear is why USAID, through Chemonics, sent Kenya a consignment of medication with a shelf-life of less than a year. Thus, there is an urgent need to resolve the outstanding issues and save the country from a shortfall in drugs on which many depend for their wellbeing.

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