

I. Epidemiological profile

Population	2014	%
High transmission (>1 case per 1000 population)	391 000	34
Low transmission (0–1 cases per 1000 population)	650 000	56
Malaria free (0 cases)	119 000	10
Total	1 160 000	

Parasites and vectors

Major plasmodium species: *P. falciparum* (59%), *P. vivax* (41%)
 Major anopheles species: *An. subpictus*, *An. barbirostris*

Programme phase: Control

Reported confirmed cases: 342 Estimated cases, 2013: [37 000–120 000]
 Reported confirmed cases at community level: 64
 Reported deaths: 1 Estimated deaths, 2013: [10–270]

II. Intervention policies and strategies

Intervention	Policies/strategies	Yes/No	Adopted
ITN	ITNs/LLINs distributed free of charge	Yes	2005
	ITNs/LLINs distributed to all age groups	Yes	2010
IRS	IRS is recommended	Yes	2006
	DDT is authorized for IRS	No	–
Larval control	Use of larval control recommended	Yes	2007
IPT	IPT used to prevent malaria during pregnancy	N/A	–
Diagnosis	Patients of all ages should receive diagnostic test	Yes	2007
	Malaria diagnosis is free of charge in the public sector	Yes	2000
Treatment	ACT is free for all ages in public sector	Yes	2007
	Sale of oral artemisinin-based monotherapies	Never allowed	–
	Single dose of primaquine is used as gametocidal medicine for <i>P. falciparum</i>	No	–
	Primaquine is used for radical treatment of <i>P. vivax</i>	Yes	2006
	G6PD test is a requirement before treatment with primaquine	No	–
	Directly observed treatment with primaquine is undertaken	No	–
	System for monitoring of adverse reactions to antimalarials exists	No	–
Surveillance	ACD for case investigation (reactive)	Yes	2002
	ACD of febrile cases at community level (pro-active)	Yes	2009
	Mass screening is undertaken	No	–
	Uncomplicated <i>P. falciparum</i> cases routinely admitted	No	–
	Uncomplicated <i>P. vivax</i> cases routinely admitted	No	–

Antimalaria treatment policy

Medicine	Adopted
First-line treatment of unconfirmed malaria	–
First-line treatment of <i>P. falciparum</i>	AL
Treatment failure of <i>P. falciparum</i>	QN+D
Treatment of severe malaria	AM; AS; QN
Treatment of <i>P. vivax</i>	CQ+PQ(14d)
Dosage of primaquine for radical treatment of <i>P. vivax</i>	–
Type of RDT used	<i>P. f.</i> + <i>P. v.</i> specific (Combo).

Therapeutic efficacy tests (clinical and parasitological failure, %)

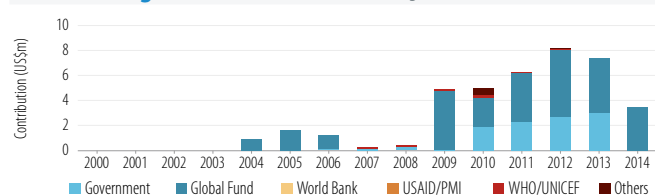
Medicine	Year	Min	Median	Max	Follow-up	No. of studies	Species
CQ	2011–2013	17.5	17.5	17.5	28 days	1	<i>P. vivax</i>
AL	2012–2013	0	0	0	28 days	1	<i>P. falciparum</i>

Insecticide susceptibility bioassays (reported resistance to at least one insecticide for any vector at any locality)

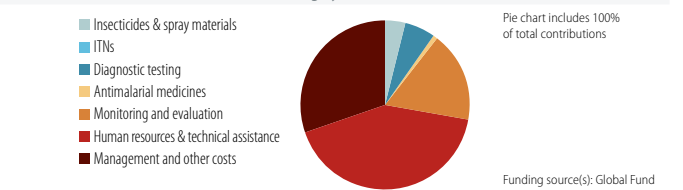
Year	Pyrethroid	DDT	Carbamate	Organophosphate	Species/complex tested
2010–2014	No	No	No	No	<i>An. barbirostris</i> , <i>An. subpictus</i> s.l., <i>An. sundaicus</i> s.l.

III. Financing

Sources of financing

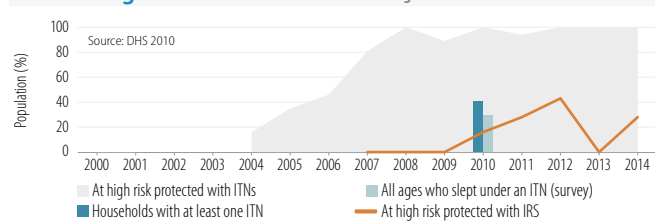


Financing by intervention in 2014

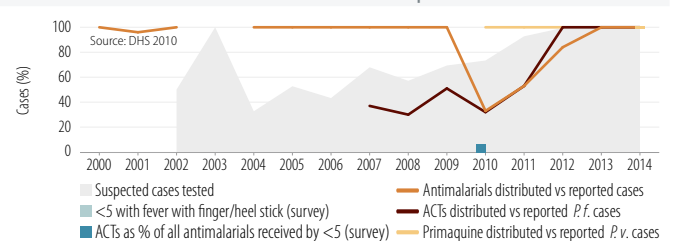


IV. Coverage

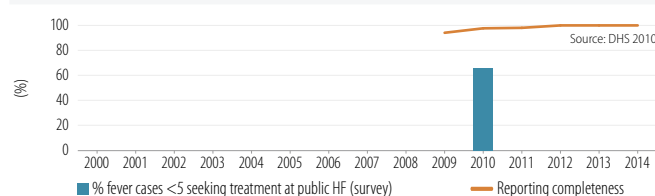
ITN and IRS coverage



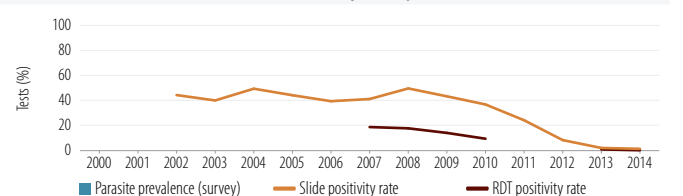
Cases tested and treated in public sector



Cases tracked

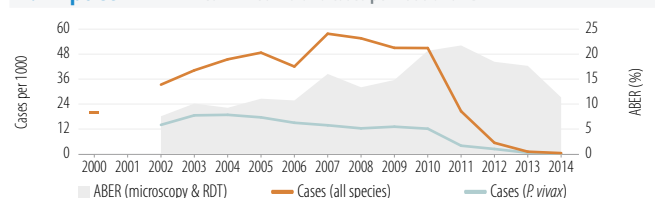


Test positivity

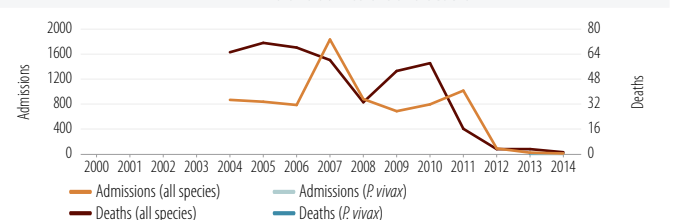


V. Impact

Confirmed malaria cases per 1000 and ABER



Malaria admissions and deaths



Impact: On track for >75% decrease in incidence 2000–2015