



I. Epidemiological profile

| Population | 2014 | % |
|--|------------|----|
| High transmission (>1 case per 1000 population) | 26 400 000 | 27 |
| Low transmission (0-1 cases per 1000 population) | 39 600 000 | 41 |
| Malaria free (0 cases) | 31 000 000 | 32 |
| Total | 97 000 000 | |

Parasites and vectors

Major plasmodium species: *P. falciparum* (59%), *P. vivax* (41%)
 Major anopheles species: *An. arabiensis*, *An. pharoensis*, *An. funestus*, *An. nili*

Programme phase: Control

Reported confirmed cases: 2 118 815 Estimated cases, 2013: [790 000-7 900 000]
 Reported deaths: 213 Estimated deaths, 2013: [240-19 000]

II. Intervention policies and strategies

| Intervention | Policies/strategies | Yes/No | Adopted |
|----------------|--|---------------|---------|
| ITN | ITNs/LLINs distributed free of charge | Yes | 2004 |
| | ITNs/LLINs distributed to all age groups | Yes | 2004 |
| IRS | IRS is recommended | Yes | 1960 |
| | DDT is authorized for IRS | No | - |
| Larval control | Use of larval control recommended | Yes | 1960 |
| IPT | IPT used to prevent malaria during pregnancy | No | - |
| Diagnosis | Patients of all ages should receive diagnostic test | Yes | 1960 |
| | Malaria diagnosis is free of charge in the public sector | Yes | 1960 |
| Treatment | ACT is free for all ages in public sector | Yes | 2004 |
| | Sale of oral artemisinin-based monotherapies | Never allowed | 2004 |
| | 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> | No | - |
| | 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) | No | - |
| | ACD of febrile cases at community level (pro-active) | No | - |
| | 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 | AL 2004 |
| First-line treatment of <i>P. falciparum</i> | AL 2004 |
| Treatment failure of <i>P. falciparum</i> | QN 2004 |
| Treatment of severe malaria | AS; AM; QN 2004 |
| Treatment of <i>P. vivax</i> | CQ 2004 |
| 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, %)

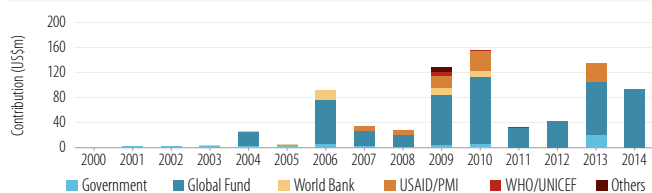
| Medicine | Year | Min | Median | Max | Follow-up | No. of studies | Species |
|----------|-----------|-----|--------|------|-----------|----------------|----------------------|
| QN | 2006-2006 | 10 | 10 | 10 | 28 days | 1 | <i>P. falciparum</i> |
| CQ | 2006-2010 | 3.8 | 7.05 | 13.7 | 28 days | 4 | <i>P. vivax</i> |
| AL | 2006-2013 | 0 | 1.1 | 7.5 | 28 days | 17 | <i>P. falciparum</i> |

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

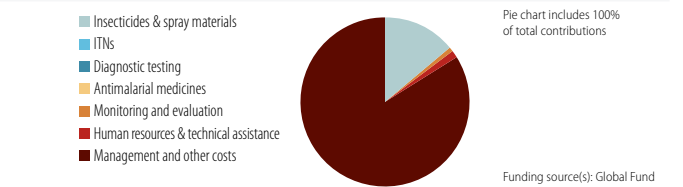
| Year | Pyrethroid | DDT | Carbamate | Organophosphate | Species/complex tested |
|-----------|------------|-----|-----------|-----------------|---|
| 2010-2014 | Yes | Yes | Yes | Yes | <i>An. arabiensis</i> , <i>An. gambiae</i> s.l. |

III. Financing

Sources of financing

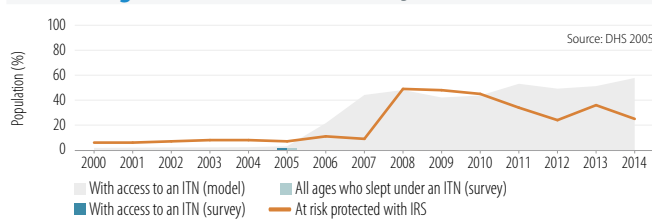


Financing by intervention in 2014

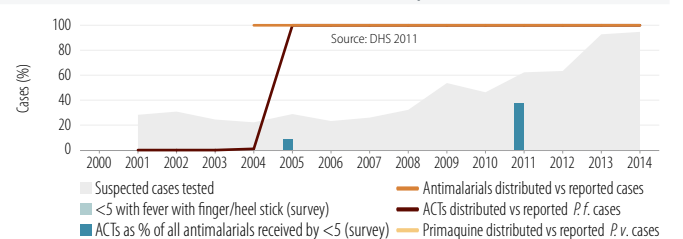


IV. Coverage

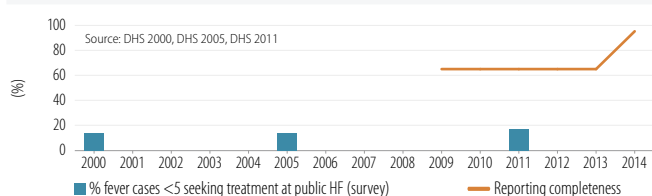
ITN and IRS coverage



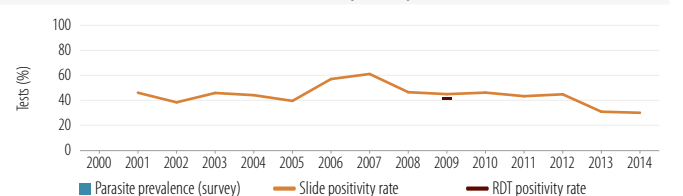
Cases tested and treated in public sector



Cases tracked

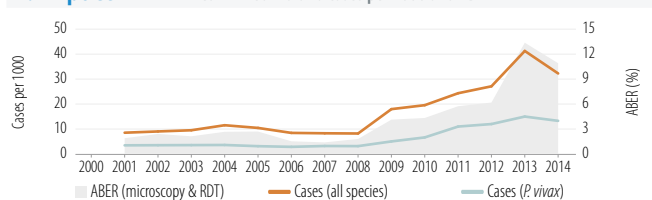


Test positivity

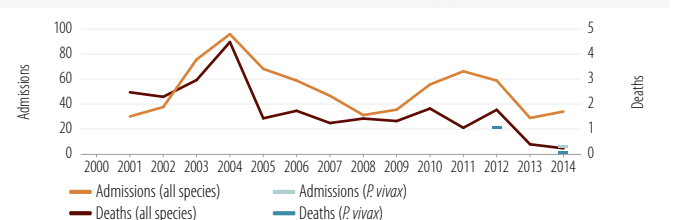


V. Impact

Confirmed malaria cases per 1000 and ABER



Malaria admissions and deaths



Impact: On track for 50-75% decrease in case incidence 2000-2015