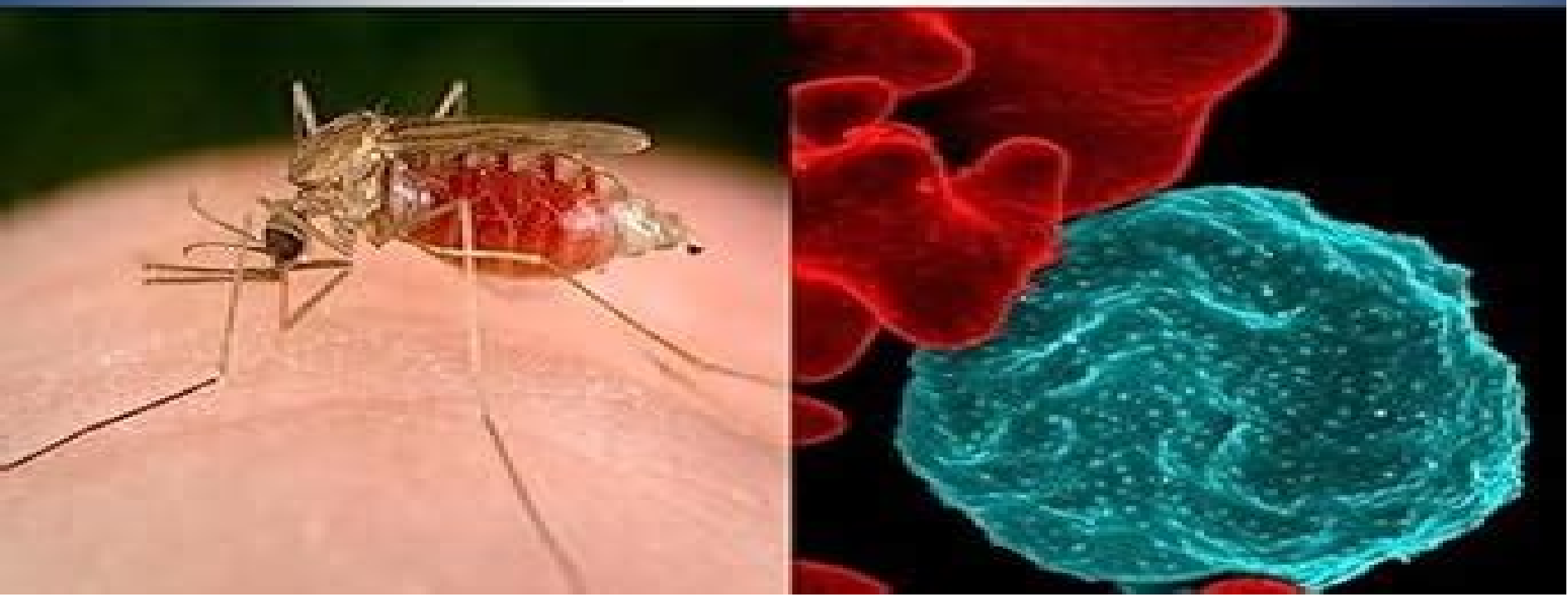


Democratic Republic of the Congo: Malaria Operational Plan FY 2016



Democratic Republic Of Congo Malaria Operational Plan Fy 2014

**United States United States Agency of
International Development**



Democratic Republic Of Congo Malaria Operational Plan Fy 2014:

Democratic Republic of Congo United States United States Agency of International Development, 2014-10-31 Malaria prevention and control are major foreign assistance objectives of the United States Government USG In May 2009 President Barack Obama announced the Global Health Initiative GHI to reduce the burden of disease and promote healthy communities and families around the world The President's Malaria Initiative PMI activities are core components of the GHI along with activities aimed at reducing HIV AIDS and tuberculosis PMI was launched in June 2005 as a five year 1.2 billion initiative to rapidly scale up malaria prevention and treatment interventions and reduce malaria related mortality by 50% in 15 high burden countries in sub Saharan Africa With passage of the 2008 Lantos Hyde Act funding for PMI was extended and as part of the GHI the goal of PMI was adjusted to reduce malaria related mortality by 70% in the original 15 countries by the end of 2015 Programming of PMI activities follows the core principles of GHI focus on women girls and gender equality encourage country ownership and invest in country led plans build sustainability through health systems strengthening strengthen and leveraging key partnerships multilateral organizations and private contributions increase impact through strategic coordination and integration improve metrics monitoring and evaluation and promote research and innovation Since the selection of the Democratic Republic of Congo DRC as a PMI focus country the USG's funding for malaria control efforts in DRC has significantly increased From 18 million in FY 2010 the USG's support for malaria control in DRC reached 35 million in FY 2011 38 million in FY 2012 and 41.9 million in FY 2013 Malaria is a major health problem in DRC accounting for an estimated 40% of outpatient visits by children under five and 19% of the overall mortality in children under five Implementation of large scale malaria control activities in DRC faces serious challenges The country's health infrastructure is very weak and it is estimated that only about 37% of the population has access to adequate health facilities An additional complicating factor is that external donor support of health activities in DRC remains fragmented geographically although the Ministry of Health has engaged in efforts to better organize donors distribution across the 516 health zones The 2007 Demographic and Health Survey DHS showed very low coverage rates of major malaria prevention and control measures Only 9% of households owned one or more insecticide treated bed nets ITNs and only 6% of children under five and 7% of pregnant women had slept under an ITN the night before the survey The 2010 Multiple Indicator Cluster Survey MICS showed 51% of households owning at least one ITN and that 38% of children less than five years of age and 43% of pregnant women had slept under an ITN the night before the survey The proportion of children under five with fever treated with artemisinin based combination therapy ACT within 24 hours of the onset of illness and the proportion of pregnant women receiving two doses of intermittent preventive treatment IPTp were less than 1% and 5% respectively but implementation of those interventions only began in 2006 The 2013 DHS which will include anemia and parasitemia measurements will provide data to assess further progress in controlling malaria in the DRC

Democratic Republic of the Congo - Malaria

Operational Plan FY 2015 United States Agency for International Development,2015-02-01 The President's Malaria Initiative PMI is a core component of the United States Government USG Foreign Assistance Strategy PMI was launched in June 2005 as a 5 year 1.2 billion initiative to rapidly scale up malaria prevention and treatment interventions and reduce malaria related mortality by 50% in 15 high burden countries in sub-Saharan Africa With the passage of the 2008 Lantos Hyde Act PMI was extended and as part of the GHI the goal of PMI has been adjusted to reduce malaria related mortality by 70% in the original 15 countries by the end of 2015 This will be achieved by continuing to scale up coverage of the most vulnerable groups children under five years of age and pregnant women with proven preventive and therapeutic interventions including artemisinin based combination therapies ACTs insecticide treated nets ITNs intermittent preventive treatment of pregnant women IPTp and indoor residual spraying IRS Since PMI's inception in the Democratic Republic of Congo DRC in FY 2011 the United States Government USG funding for malaria control efforts in the DRC has significantly increased from 18 million in FY 2010 to 50 million in FY 2014 Malaria is a major health problem in the DRC accounting for an estimated 40% of outpatient visits by children under five and 19% of the overall mortality in children under five The implementation of large scale malaria control activities in the DRC continues to face serious challenges The country's health infrastructure is very weak and it is estimated that only 37% of the population has access to adequate health facilities

Technical consultation to assess evidence on community-based delivery of intermittent preventive treatment in pregnancy for malaria World Health Organization,2023-02-28 This technical consultation held virtually from 21-23 June 2022 was organized to assess evidence on community based delivery of IPTp c IPTp and discuss with partners involved in research and implementation of community based intermittent preventive treatment in pregnancy The meeting report summarizes the discussions and outcome of the consultation as these will subsequently serve as the basis for the development of new implementation guidance on the topic Challenges For Diagnosis, Treatment And Elimination Of

Malaria Gisely Melo,Tais Nobrega De Sousa,Manuela Berto Pucca,Giselle Maria Rachid Viana,2024-04-26 Malaria is a major cause of death in tropical and sub-tropical countries presenting about 627 000 deaths and 241 million cases in the world Malaria is still an important public health problem that needs to be more effectively controlled Delays in diagnosis and treatment are responsible for the most deaths in many countries Moreover in most of malaria endemic countries the lack of resources is a huge barrier to reliable and timely diagnosis **State, Foreign Operations, and Related Programs**

Appropriations for 2015 United States. Congress. House. Committee on Appropriations. Subcommittee on State, Foreign Operations, and Related Programs,2014 **Democratic Republic of the Congo** United States United States Agency for International Development,2016-04-24 This Fiscal Year FY 2016 Malaria Operational Plan presents a detailed implementation plan for the DRC based on the strategies of PMI and the National Malaria Control Program NMCP It was developed in consultation with the NMCP and with the participation of national and international partners involved in malaria prevention

and control in the country The activities that PMI is proposing to support align with the National Malaria Control strategy and plan and build on investments made by PMI and other partners to improve and expand malaria related services including the Global Fund to Fight AIDS Tuberculosis and Malaria Global Fund malaria grants This document briefly reviews the current status of malaria control policies and interventions in the DRC describes progress to date identifies challenges and unmet needs to achieving the targets of the NMCP and PMI and provides a description of activities that are planned with FY 2016 funding

State, Foreign Operations, and Related Programs Appropriations for Fiscal Year 2007 United States. Congress. Senate. Committee on Appropriations. Subcommittee on State, Foreign Operations, and Related Programs,2006

State, Foreign Operations, and Related Programs Appropriations for Fiscal Year ... United States. Congress. Senate. Committee on Appropriations,2007

Nigeria United States United States Agency of International Development,2014-11-01 Malaria prevention and control are major foreign assistance objectives of the U S Government USG In May 2009 President Barack Obama announced the Global Health Initiative GHI a multi year comprehensive effort to reduce the burden of disease and promote healthy communities and families around the world Through the GHI the United States is helping partner countries improve health outcomes with a particular focus on improving the health of women newborns and children The President s Malaria Initiative PMI is a core component of the GHI along with Human Immunodeficiency Virus Acquired Immunodeficiency Syndrome HIV AIDS and tuberculosis PMI was launched in June 2005 as a five year 1.2 billion initiative to rapidly scale up malaria prevention and treatment interventions and reduce malaria related mortality by 50% in 15 high burden countries in sub Saharan Africa With passage of the 2008 Lantos Hyde Act funding for PMI was extended and as part of the GHI the goal of PMI was adjusted to reduce malaria related mortality by 70% in the original 15 countries by the end of 2015 Expansion was authorized to additional PMI countries including Nigeria the Democratic Republic of Congo and up to seven additional high burden countries The goal for any new countries added after the initial 15 is to achieve a 50% reduction in malaria related mortality in at risk population by 2015 as compared with 2009 2010 baseline levels These goals will be achieved by reaching 85% coverage of the most vulnerable groups children under five years of age under five and pregnant women with proven preventive and therapeutic interventions including artemisinin based combination therapies ACTs insecticide treated nets ITNs intermittent preventive treatment for pregnant women IPTp and indoor residual spraying IRS With a population of about 172 million and reporting more deaths due to malaria than any country in the world Nigeria became the seventeenth PMI country in 2010 Malaria accounts for 60% of outpatient visits and 30% of hospitalizations among children under five in Nigeria The Demographic and Health Survey DHS 2008 reported an infant mortality of 75 per 1000 live births and an under five mortality of 157 per 1000 live births in the preceding five year period Impressive progress has been made in malaria control efforts in recent years The proportion of households owning one or more ITNs increased from just 8% in the DHS 2008 to 42% in the Malaria Indicator Survey MIS

2010 and the proportion of children under five reported to have slept under an ITN the night before the survey increased from 6% in the DHS 2008 to 29% in the MIS 2010 *Greater Mekong Subregion* United States United States Agency of International Development, 2014-11-01 Malaria prevention and control are major foreign assistance objectives of the U S Government USG In May 2009 President Barack Obama announced the Global Health Initiative GHI a comprehensive effort to reduce the burden of disease and promote healthy communities and families around the world Through the GHI the United States will help partner countries improve health outcomes with a particular focus on improving the health of women newborns and children The President s Malaria Initiative PMI is a core component of the GHI along with HIV AIDS and tuberculosis PMI was launched in June 2005 as a five year 1.2 billion initiative to rapidly scale up malaria prevention and treatment interventions and reduce malaria related mortality by 50% in 15 high burden countries in sub Saharan Africa With passage of the 2008 Lantos Hyde Act funding for PMI was extended and as part of the GHI the goal of PMI was adjusted to reduce malaria related mortality by 70% in the original 15 countries by the end of 2015 In addition PMI will work to limit the spread of antimalarial drug resistance in two USAID supported regional programs the Mekong Regional Initiative in six Southeast Asian countries and the Amazon Malaria Initiative in seven South American countries In line with the 2009 Lantos Hyde Malaria Strategy PMI support extends to the Greater Mekong Sub Region GMS which is made up of six countries Burma Cambodia China Yunnan Province Lao People s Democratic Republic Thailand and Vietnam Although considerable progress has been made in malaria control in the GMS during the past 10 years malaria remains a major concern for the international community ministries of health and the people of the region This is due primarily to the development and possible spread of resistance to artemisinin drugs the principal component of the combination therapies for malaria that now are the first line treatment for malaria throughout the GMS and the world Plasmodium falciparum resistance to artemisinin drugs has now been confirmed in western Cambodia failures in artemisinin based combination therapy ACT have been reported from multiple sites on the Thai Cambodian border and an early warning sign of artemisinin resistance prolongation of parasite clearance times has been reported from the Thailand Burma and Burma China borders and in southern Vietnam The USG has supported malaria control efforts in the GMS since 2000 These regional efforts have focused on antimalarial drug resistance monitoring and drug quality surveillance All countries in the GMS have Global Fund to Fight AIDS Tuberculosis and Malaria Global Fund support Burma and Cambodia received Round 9 Global Fund malaria grants and Thailand s Round 10 malaria grant has been approved The other major source of funding for artemisinin resistance containment in Burma is the multi donor initiative Three Millennium Development Goal Fund formerly known as the Three Diseases Fund In addition Global Fund announced a new three year 100 million initiative for regional efforts to reduce malaria transmission and respond to resistance in GMS countries *Foreign Operations, Export Financing, and Related Programs Appropriations for 2007, Part 1B, 109-2 Hearings, **, 2006 *Foreign Operations, Export Financing, and Related*

Programs Appropriations for 2007 United States. Congress. House. Committee on Appropriations. Subcommittee on Foreign Operations, Export Financing, and Related Programs, 2006 *Congressional Record* United States. Congress, 2010 The Congressional Record is the official record of the proceedings and debates of the United States Congress It is published daily when Congress is in session The Congressional Record began publication in 1873 Debates for sessions prior to 1873 are recorded in The Debates and Proceedings in the Congress of the United States 1789 1824 the Register of Debates in Congress 1824 1837 and the Congressional Globe 1833 1873 **Mali** United States United States Agency of International Development, 2014-11-01 Malaria prevention and control is a major foreign assistance objective of the U S Government In May 2009 President Barack Obama announced the Global Health Initiative a comprehensive effort to reduce the burden of disease and promote healthy communities and families around the world Through the Global Health Initiative the United States will help partner countries improve health outcomes with a particular focus on improving the health of women newborns and children The President s Malaria Initiative PMI is a core component of the Global Health Initiative along with family planning maternal and child health nutrition HIV AIDS and tuberculosis PMI was launched in June 2005 as a five year 1 2 billion initiative to rapidly scale up malaria prevention and treatment interventions and reduce malaria related mortality by 50% in 15 high burden countries in sub Saharan Africa With passage of the 2008 Lantos Hyde Act funding for PMI was extended and as part of the GHI the goal of PMI was adjusted to reduce malaria related mortality by 70% in the original 15 countries by the end of 2015 Programming of PMI activities follows the core principles of GHI encouraging country ownership and investing in country led plans and health systems increasing impact and efficiency through strategic coordination and programmatic integration strengthening and leveraging key partnerships multilateral organizations and private contributions implementing a woman and girl centered approach improving monitoring and evaluation and promoting research and innovation PMI began supporting activities in Mali in 2007 in close collaboration with the National Malaria Control Program NMCP as well as international and national partners With the coup d tat of March 22 2012 in which the democratically elected president was overthrown by the military the U S Government and many other donors suspended foreign aid to the Government of Mali until a democratic solution to the political crisis could be achieved For PMI this meant suspending all assistance and funding to the NMCP and other Ministry of Health MOH entities The U S Department of State authorized some PMI activities on humanitarian grounds such as procurement and distribution of essential malaria commodities however the bulk of PMI projects were temporarily suspended Following intervention by the Economic Community of West African States and the international community Malians agreed on a consensual transitional government currently in place In late July early August 2013 the people of Mali democratically elected a new president who was sworn in on September 4th 2013 As a result the U S Government lifted all restrictions on U S foreign assistance to Mali and authorized immediate return to normal bilateral relations with the Government of Mali including direct support to the MOH

Zimbabwe United States United States Agency of International Development,2014-11-04 Malaria prevention and control are major foreign assistance objectives of the U S Government USG In May 2009 President Barack Obama announced the Global Health Initiative GHI a six year comprehensive effort to reduce the burden of disease and promote healthy communities and families around the world Through the GHI the United States will help partner countries improve health outcomes with a particular focus on improving the health of women newborns and children The President s Malaria Initiative PMI is a core component of the GHI along with HIV AIDS and tuberculosis programs PMI was launched in June 2005 as a five year 1 2 billion initiative to rapidly scale up malaria prevention and treatment interventions and reduce malaria related mortality by 50% in 15 high burden countries in sub Saharan Africa by 2010 With passage of the 2008 Lantos Hyde Act funding for PMI was extended and as part of the GHI the goal of PMI was adjusted to reduce malaria related mortality by 70% in the original 15 countries by the end of 2015 In mid 2011 Zimbabwe s selection as a PMI country was announced Malaria is a major health problem in Zimbabwe with 50% of the population at risk although its epidemiology varies in the different regions of the country ranging from year round transmission in the lowland areas to epidemic prone areas in the highlands Zimbabwe s National Strategic Plan does not call for the implementation of all interventions in all malarious districts hence the targeted number of districts varies by intervention as detailed below Zimbabwe s malaria program receives support from two major donors the Global Fund and PMI United States Agency for International Development USAID provided targeted support to Zimbabwe s National Malaria Control Program NMCP through an emergency round of indoor residual spraying IRS in 2009 and in 2011 with a procurement of malaria commodities Other malaria donors included UNICEF the United Kingdom Department for International Development DfID and the European Commission However many European donors have shifted their funds to a new multi donor fund designed to strengthen health systems in Zimbabwe the Health Transition Fund The Health Transition Fund is operating from 2011 2015 and aims to improve access to all types of quality health care for Zimbabweans and to harmonize donor support practices and requirements The FY 2014 Malaria Operational Plan was developed in collaboration with the NMCP and aligns well with the National Malaria Control Strategy Planning for FY 2014 was carried out in Zimbabwe in April May 2013 and included representatives from USAID and Centers for Disease Control and Prevention staff based in Washington Atlanta and Zimbabwe The FY 2014 PMI proposed budget for Zimbabwe is 14 million The following major activities will be supported with FY 2014 funding

Mozambique United States United States Agency of International Development,2014-11-01 Malaria prevention and control are major foreign assistance objectives of the U S Government In May 2009 President Barack Obama announced the Global Health Initiative GHI a six year comprehensive effort to reduce the burden of disease and promote healthy communities and families around the world Through GHI the United States will help partner countries improve health outcomes with a particular focus on improving the health of women newborns and children The President s Malaria Initiative PMI is a core component of the GHI

along with HIV AIDS and tuberculosis PMI was launched in June 2005 as a five year 1.2 billion initiative to rapidly scale up malaria prevention and treatment interventions and reduce malaria related mortality by 50% in 15 high burden countries in sub Saharan Africa With passage of the 2008 Lantos Hyde Act funding for PMI was extended and as part of GHI the goal of PMI was adjusted to reduce malaria related mortality by 70% in the original 15 countries by the end of 2015 Programming of PMI activities follows the core principles of GHI Mozambique was selected as a PMI country in fiscal year FY 2007 PMI's primary goal in Mozambique is to assist the Government of Mozambique GoM in collaboration with other partners to reduce malaria mortality by 50% by rapidly scaling up coverage of vulnerable groups with four highly effective interventions artemisinin based combination therapy ACT intermittent preventive treatment of pregnant women IPTp insecticide treated bed nets ITNs and indoor residual spraying IRS Mozambique carried out a Demographic and Health Survey DHS in 2011 While the data from this survey did show a reduction in all cause under five mortality from 138/1000 in the 2008 Multiple Indicator Cluster Survey to 97/1000 in the 2011 DHS there were only minimal improvements in major malaria indicators compared to the 2007 Malaria Indicator Survey MIS highlighting the multitude of challenges the country still faces in reducing the burden of malaria The most significant improvement from the 2007 MIS to the 2011 DHS was the increase in net coverage the proportion of households with at least one ITN increased from 15.8% in 2007 to 51.4% in 2011 A joint Malaria Indicator Survey and National HIV AIDS Indicator Survey is planned for 2014

Liberia United States United States Agency of International Development, 2014-10-31 Malaria prevention and control is a major foreign assistance objective of the U.S. Government USG In May 2009 President Barack Obama announced the Global Health Initiative GHI a comprehensive effort to reduce the burden of disease and promote healthy communities and families around the world The President's Malaria Initiative PMI is a core component of the GHI along with HIV AIDS tuberculosis maternal and child health family planning and reproductive health nutrition and neglected tropical diseases PMI was launched in June 2005 as a 5 year 1.2 billion initiative to rapidly scale up malaria prevention and treatment interventions and reduce malaria related mortality by 50% in 15 high burden countries in sub Saharan Africa With passage of the 2008 Lantos Hyde Act funding for PMI was extended and the PMI strategy was revised to achieve Africa wide impact by halving the burden of malaria in 70 percent of at risk populations in sub Saharan Africa Programming of PMI activities follows the core principles of GHI encouraging country ownership and investing in country led plans and health systems increasing impact and efficiency through strategic coordination and programmatic integration strengthening and leveraging key partnerships multilateral organizations and private contributions implementing a woman and girl centered approach improving monitoring and evaluation and promoting research and innovation Liberia began PMI supported activities in FY 2008 Liberia's health infrastructure was severely damaged during the long civil war which ended in 2003 leaving only about 45% of the population with access to essential health services The entire population of approximately 3.8 million is at risk for malaria¹ The 2011

Malaria Indicator Survey MIS showed malaria prevalence by microscopy at 28% The National Malaria Control Program NMCP has produced a National Malaria Control Strategy for the years 2010 2015 Liberia has received malaria funding from the Global Fund to Fight Aids Tuberculosis and Malaria Global Fund since 2004 Currently Liberia receives Global Fund support through a consolidated grant made up of Phase 2 of a Round 7 37 million grant and Phase 1 of a Round 10 60 million grant With Phase 1 of the consolidated grant ending in 2013 Liberia is in the process of completing an assessment of Phase 1 and an application for Phase 2 renewal

Angola: Malaria Operational Plan FY 2014 United States United States Agency of International Development, 2014-10-31 Malaria prevention and control are major foreign assistance objectives of the U S Government In May 2009 President Barack Obama announced the Global Health Initiative GHI a six year comprehensive effort to reduce the burden of disease and promote healthy communities and families around the world Through the GHI the United States will help partner countries improve health outcomes with a particular focus on improving the health of women newborns and children The President s Malaria Initiative PMI is a core component of the GHI along with HIV AIDS and tuberculosis PMI was launched in June 2005 as a five year 1 2 billion initiative to rapidly scale up malaria prevention and treatment interventions and reduce malaria related mortality by 50% in 15 high burden countries in sub Saharan Africa With passage of the 2008 Lantos Hyde Act funding for PMI was extended and as part of GHI the goal of PMI was adjusted to reduce malaria related mortality by 70% in the original 15 countries by the end of 2015 Programming of PMI activities follows the core principles of GHI encouraging country ownership and investing in country led plans and health systems increasing impact and efficiency through strategic coordination and programmatic integration strengthening and leveraging key partnerships multilateral organizations and private contributions implementing a woman and girl centered approach improving monitoring and evaluation and promoting research and innovation Angola was selected as one of the first three countries in PMI in June 2005 Given the almost three decade long civil war which ended in 2002 implementation of large scale malaria control activities in Angola has faced serious challenges The country s health infrastructure was severely damaged during the war and it is estimated that only about 40% of the population has access to government health facilities Significant progress has been made in malaria control with the decrease in malaria parasitemia falling from 21 1% in the 2006 7 Malaria Indicator Survey MIS to 13 5% in the 2011 MIS a reduction of almost 40% However malaria continues to be a major health problem accounting for an estimated 35% of the overall mortality in children under five years of age 25% of maternal mortality and 60% of hospital admissions for children under five years of age Malaria transmission is highest in northern Angola while the southern provinces have highly seasonal malaria In February 2009 Angola signed a five year 78 million Round 7 malaria grant from the Global Fund to Fight AIDS Tuberculosis and Malaria Global Fund Angola was also successful in a Global Fund Round 10 grant for malaria for 111 million The grants were consolidated and after some delays were signed on June 15 2012 The United Nations Children s Fund and the World Health Organization have been major

partners of the National Malaria Control Program NMCP in scaling up interventions An effective partnership with ExxonMobil has resulted in donations of 4.5 million to the United States Agency for International Development USAID over the last seven years to further PMI and Government of the Republic of Angola's GRA efforts in the fight against malaria

Rwanda United States United States Agency of International Development, 2014-11-04 Malaria prevention and control is a major foreign assistance objective of the U.S. Government USG In May 2009 President Barack Obama announced the Global Health Initiative GHI a multi-year comprehensive effort to reduce the burden of disease and promote healthy communities and families around the world Through GHI the United States will help partner countries improve health outcomes with a particular focus on improving the health of women newborns and children Rwanda has been selected as a GHI Plus country The President's Malaria Initiative PMI is a core component of the GHI PMI was launched in June 2005 as a 5-year 1.2 billion initiative to rapidly scale up malaria prevention and treatment interventions and reduce malaria-related mortality by 50% in 15 high burden countries in sub-Saharan Africa With passage of the 2008 Lantos Hyde Act funding for PMI was extended through FY 2014 Programming of PMI activities follows the core principles of GHI encouraging country ownership and investing in country-led plans and health systems increasing impact and efficiency through strategic coordination and programmatic integration strengthening and leveraging key partnerships multilateral organizations and private contributions implementing a woman and girl-centered approach improving monitoring and evaluation and promoting research and innovation Rwanda officially became a PMI country in FY 2007 although the USG had been supporting malaria control activities for several years before that Rwanda has scaled up malaria control interventions successfully and has set the ambitious goal of achieving pre-elimination status by 2017 In early 2011 Rwanda was one of the first countries in sub-Saharan Africa to achieve universal long-lasting insecticidal net LLIN coverage with the distribution of over 6.1 million LLINs Rwanda is implementing a universal coverage campaign in 2013 with another national distribution of approximately 6 million LLINs Rwanda's indoor residual spraying IRS has targeted high burden districts and sectors based on available evidence Rwanda has conducted nine IRS rounds to date and has withdrawn IRS operations in certain districts due to reduction in malaria incidence transmission and funding Rwanda currently sprays two rounds annually in three high malaria burden districts that border malaria endemic neighbors In 2013 Rwanda developed and is implementing an insecticide resistance management IRM plan that builds upon their Integrated Vector Management IVM strategy Rwanda will change the insecticide class it uses in IRS in a phased transition and continue to switch classes every two years based on evidence of insecticide resistance and World Health Organization WHO guidance Progress in case management is equally impressive with great strides in diagnosis and treatment at all levels of the health care system and nationwide integrated community case management In late 2009 the MOH through its Malaria and Other Parasitic Diseases Division termed in this MOP the National Malaria Control Program or NMCP directed that all presumed malaria cases be laboratory confirmed In 2012 HMIS

reports indicate that 99% of all patient diagnosed malaria cases are confirmed by microscopy or rapid diagnostic tests before receiving ACTs Community health workers CHWs continue to play a pivotal role in malaria case management and 30 000 of Rwanda's extensive network of 60 000 CHWs are mobilized to implement integrated community case management iCCM diagnosing and treating malaria diarrhea and pneumonia

Ethiopia United States United States Agency of International Development, 2014-10-31 Malaria prevention and control are major foreign assistance objectives of the U S Government USG The purpose of this Malaria Operational Plan MOP is to provide a framework and a rationale for nominating and supporting malaria prevention and control projects in Ethiopia with FY 2014 funding to accomplish the USG's foreign assistance objectives through the President's Malaria Initiative PMI in the context of the Global Health Initiative GHI Through the GHI the USG will help partner countries improve health outcomes with a particular focus on improving the health of women newborns and children The MOP process for PMI Year 7 FY 2014 considers information from the Ethiopian Federal Ministry of Health FMOH Regional Health Bureaus including the Oromia Regional Health Bureau ORHB international malaria program donors including the Global Fund to Fight AIDS Tuberculosis and Malaria Global Fund malaria subject matter experts and other malaria program stakeholders about the malaria situation and the malaria control program capacities and gaps in Ethiopia The President's Malaria Initiative is a core component of the GHI along with health programs for HIV AIDS and Tuberculosis PMI was launched in June 2005 to rapidly scale up malaria prevention and treatment interventions and reduce malaria related mortality by 50% in selected high burden countries in sub Saharan Africa Other PMI goals include removing malaria as a major public health problem promoting development in the Africa region strengthening malaria control activities and containing the spread of antimalarial drug resistance The programming of PMI activities follows the core principles of GHI encouraging country ownership and investing in country led plans and health systems increasing impact and efficiency through strategic coordination and programmatic integration strengthening and leveraging key partnerships multilateral organizations and private contributions implementing a woman and girl centered approach improving monitoring and evaluation and promoting research and innovation Malaria is ranked as the leading communicable disease in Ethiopia accounting for about 30% of the overall Disability Adjusted Life Years lost Approximately 68% of the total population of 84.3 million lives in areas at significant risk of malaria According to the FMOH in 2010 2011 malaria was the leading cause of outpatient visits accounting for 15% of all visits and health facility admissions with 15% of all admissions Malaria is one of the top ten causes of in patient deaths among children less than five years of age and adults President e tm's Malaria Initiative support to malaria prevention and control in Ethiopia began in FY 2008 with an initial focus on Oromia Regional State the largest of Ethiopia e tm's nine regional states covering a third of the country Ethiopia has received four malaria grants from the Global Fund in recent years PMI has contributed between 20 and 43 million annually to malaria control efforts in Ethiopia during the last five years

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