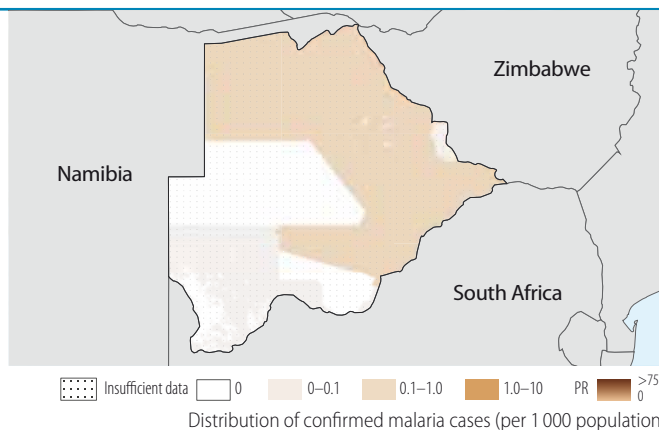


**Phase: Control.** Impact: >75% decrease in case incidence 2000–2011.



## I. Epidemiological profile

Population (UN Population Division)	2011	%
High transmission ( $\geq 1$ case per 1000 population)	366 000	18
Low transmission (0-1 cases per 1000 population)	954 000	47
Malaria-free (0 cases)	711 000	35
Total	2 031 000	

### Parasites and vectors

Major plasmodium species: *P. falciparum* (100%), *P. vivax* (0%)  
 Major anopheles species: *An. gambiae*, *arabiensis*

## II. Intervention policies and strategies

Intervention	WHO-recommended policies/strategies	Yes/No	Year adopted
ITN/LLIN	ITNs/LLINs distributed free of charge	Yes	2009
	ITNs/LLINs distributed to all age groups	Yes	1997
IRS	IRS is recommended	Yes	1950
	DDT is used for IRS	Yes	1950
IPT	IPT used to prevent malaria during pregnancy	No	–
Case management	Patients of all ages should receive diagnostic test	Yes	2010
	RDTs used at community level	No	–
	ACT is free for all ages in public sector	Yes	2007
	Pre-referral treatment with recommended medicines	Yes	2007
	Marketing authorization for all oral artemisinin-based monotherapies withdrawn	No	–

Antimalaria policy	Medicine	Year adopted
First-line treatment of unconfirmed malaria	AL	2007
First-line treatment of <i>P. falciparum</i>	AL	2007
For treatment failure of <i>P. falciparum</i>	QN	2007
Treatment of severe malaria	QN	2007
Treatment of <i>P. vivax</i>	–	–

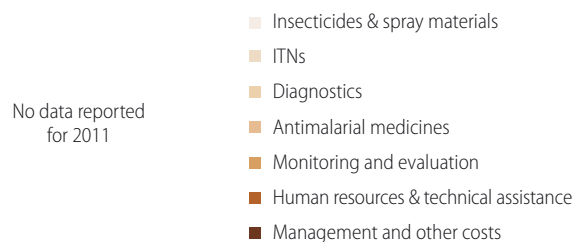
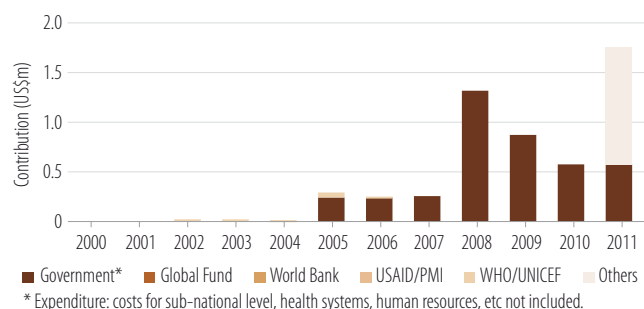
### Therapeutic efficacy tests (therapeutic or parasitological failure, %)

Medicine	Year	No. of studies	Min	Median	Max	Follow-up

## III. Financing

### Government and external financing

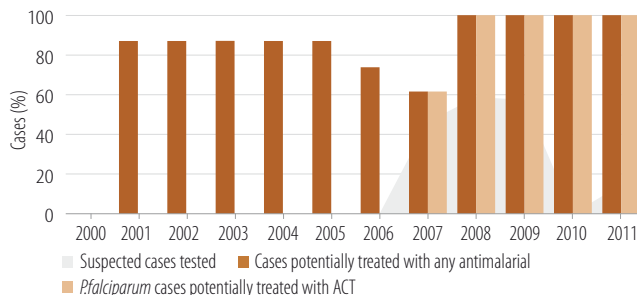
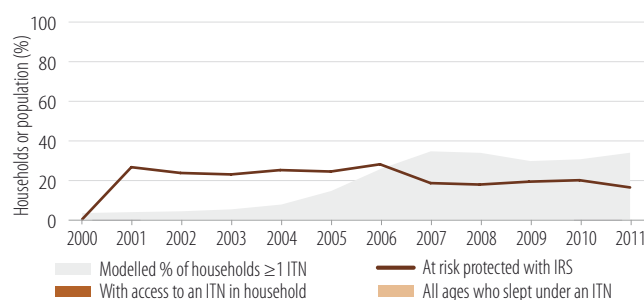
### Expenditure by intervention in 2011



## IV. Coverage

### Coverage of ITN and IRS

### Cases tested and ACT delivered: Programme data (public sector)



## V. Impact

### Malaria test positivity rate and ABER

### Microscopically confirmed cases, admissions and deaths (per 100 000)

