Botswana African Region Plasmodium falciparum Confirmed cases per (Pf) Parasite 1000 population Zimbabwe Prevalence (PP) Zimbabwe 0 - 0.1 0.1 - 1Namibia Namibia 1 - 10 10 - 50 50 - 100 100 - 200 South Africa South Africa 200 - 300 > 300 I. Epidemiological profile Population (UN) 2015 Parasites and vectors High transmission (> 1 case per 1000 population) 95,200 4 Plasmodium species: P. falciparum (100%)0%) An. arabiensis, An. gambiae Low transmission (0-1 cases per 1000 population) 1,400,000 62 Major anopheles species: Malaria-free (0 cases) 762,000 Reported confirmed cases (health facility): Estimated cases: 710 [370 ; 1,500] 326 Confirmed cases at community level: Total 2,260,000 Reported deaths: 5 Estimated deaths: <10 [-;-] II. Intervention policies and strategies Policies/strategies Medicine Intervention Yes/No Adopted **Antimalarial treatment policy** Year adopted ITNs/ LLINs distributed free of charge ITN Yes First-line treatment of unconfirmed malaria AL 2007 2009 ITNs/ LLINs distributed to all age groups First-line treatment of P. falciparum AL 2007 Yes 2009 IRS is recommended Yes 1950 Treatment failure of P. falciparum QN 2007 **IRS** QN 2007 DDT is authorized for IRS Yes Treatment of severe malaria Use of larval control recommended **Larval control** Yes 2012 Treatment of P. vivax IPT used to prevent malaria during pregnancy Dosage of Primaquine for radical treatment of P. vivax 0.25 mg/Kg (14 days) **Diagnosis** Patients of all ages should receive diagnostic test Yes 2010 Type pf RDT used P.f only Malaria diagnosis is free of charge in the public sector Yes 1974 **Treatment** ACT is free of charge for all ages in public sector Yes 2007 Therapeutic efficacy tests (clinical and parasitological failure, %) Year Min Median Max Follow-up No of studies **Species** 2007 Medicine The sale of oral artemisinin-based monotherapies (oAMTs) Never allowed Single dose of primaquine is used as gametocidal medicine for Yes 2015 P. falciaprum Primaquine is used for radical treatment of P. vivax Yes 2015 G6PD test is a requirement before treatment with primaquine No Directly observed treatment with primaquine is undertaken 2015 Yes 2012 System for monitoring adverse reactions to antimalarials exists Yes ACD for case investigation (reactive) Surveillance 2012 Yes Insecticide susceptibility bioassays (reported resistance to at least one insecticide for any vector at any locality) ACD of febrile cases at community level (pro-active) 2012 Yes **Pyrethroid DDT** Carbamate **Organophosphate** Year Species/complex tested Mass screening is undertaken Yes 2012 Yes No No 2010-2013 An. gambiae s.l. Uncomplicated P. falciparum cases routinely admitted No Uncomplicated P. vivax cases routinely admitted No Foci and case investigation undertaken Case reporting from private sector is mandatory 2003 Yes Government expenditure by intervention in 2015 2015 III. Financing Sources of financing 2.5 Contribution (\$USm) Insecticides & spray materials ITNs Diagnostic testing 1.5 Antimalarial medicines Monitoring and Evaluation Human Resources & Technical Assistance Management and other costs 0.5 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 World Bank USAID/PMI WHO/UNICEF Others Gov. expend. Global Fund Cases tested and treated in public sector Coverage of ITN and IRS IV. Coverage 100 100 80 80 Population (%) 60 60 % 20 20 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 With access to ITN (model) All ages who slept under ITN (survey) Suspected cases tested Antimalarials distributed vs reported cases With access to ITN (survey) At risk protected with IRS % <5 fever cases who had a finger/ heel stick</p> ACTs distributed vs reported P. f. cases ACTs as % of all antimalarials received by <5 (survey) Primaquine distributed vs reported P. v. cases V. Impact **Cases treated Test positivity** 100 100 80 80 Tests (%) 60 % 40 20 20 0 2005 2009 2010 2011 2012 2015 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2006 2013 2014 Source: -% fever cases <5 seeking treatment at public HF (survey) Parasite prevalence Slide positivity rate RDT positivity rate Reporting completeness Confirmed malaria cases per 1000 and ABER Malaria admissions and deaths 2 700 40 600 8.0 8.0 8.0 30 **Supply** 400 400 200 ABER (%) Deaths Cases 1 0.2 100 0 0 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 ABER (microscopy & RDT) Cases (all species) Cases (P. Vivax) Admissions (all species) Admissions (P. vivax) Deaths (all species) Deaths (P. vivax)