



I. Epidemiological profile

Population (UN Population Division)	2017 %
High transmission (>1 case per 1000 population)	1.9M 100
Low transmission (0-1 case per 1000 population)	0 -
Malaria free (0 cases)	0 -
Total	1.9M

Parasites and vectors			
Major plasmodium species:	P.falciparu	m: 100 (%) , P.vivax: (%)
Major anopheles species:	An. gambi	ae, An. funestus	
Reported confirmed cases (health facility):	89 784	Estimated cases:	108K [40.2K, 263.4K]
Confirmed cases at community level:	3062		
Confirmed cases from private sector:	6003		
Reported deaths:	296	Estimated deaths:	688 [591, 783]

II. Intervention policies and strategies

Intervention	Policies/Strategies		Year
			adopted
ITN	ITNs/LLINs distributed free of charge	Yes	2005
	ITNs/LLINs distributed to all age groups	No	-
IRS	IRS is recommended	No	2006
	DDT is used for IRS	No	-
Larval control	Use of Larval Control	No	
IPT	IPT used to prevent malaria during pregnancy	Yes	2005
Diagnosis	Patients of all ages should receive diagnostic test	Yes	2008
	Malaria diagnosis is free of charge in the public sector	Yes	2008
Treatment	ACT is free for all ages in public sector	Yes	2015
	The sale of oral artemisinin-based monotherapies (oAMTs)	is banned	2006
	Single dose of primaquine (0.25 mg base/kg) is used as gametocidal medicine for P. falciparum	No	-
	Primaquine is used for radical treatment of P. vivax	No	-
	G6PD test is a requirement before treatment with primaquine	No	-
	Directly observed treatment with primaquine is undertaken	No	-
	System for monitoring of adverse reaction to antimalarials exists	No	-
Surveillance	ACD for case investigation (reactive)	-	-
	ACD at community level of febrile cases (pro-active)	No	-
	Mass screening is undertaken	No	-
	Uncomplicated P. falciparum cases routinely admitted	-	-
	Uncomplicated P. vivax cases routinely admitted	-	-
	Case and foci investigation undertaken	No	
	Case reporting from private sector is mandatory	Yes	1992

A 41 11-						Medicine	Year adopted
	treatment pol		od malaria			Al	
				4			-
	reatment of P. f					AL	-
For treatment failure of P. falciparum					ÕΝ	-	
Treatment	of severe mala	ria				AS;QN	-
Treatment	of P. vivax					-	-
Dosage of	primaquine for	radical	treatmen	t of P. v	ivax		
Type of RD	T used						P.f only
Therapeuti	c efficacy tests	(clinica	l and para	sitolog	ical failure, %	5)	
Medicine	Year	Min	Median	Max	Follow-up	No. of studies	Species
AL	2012-2015	5	5	5	28 days	1	P. falciparum
Resistance	status by insec	ticide c	lass (2010)-2017)	and use of cl	ass for malaria vecto	or control (2017)
Resistance Insecticide		ticide c	lass (2010 Years		and use of cl %) sites ¹	ass for malaria vectors ²	or control (2017) Used ³
		ticide c					
Insecticide	class	ticide c				Vectors ²	Used ³
Insecticide Carbamates	class	ticide c				Vectors ²	Used ³
Insecticide Carbamates Organochlor	class	ticide c				Vectors ²	Used ³ No No
Insecticide Carbamates Organochlor Organophos Pyrethroids	class rines phates		Years - - -	- - - -	%) sites ¹	Vectors ²	Used ³ No No No
Insecticide Carbamates Organochlor Organophos Pyrethroids ¹ Percent of si	class rines phates tes for which resis	stance co	Years nfirmed and	- - - -	%) sites ¹	Vectors ²	Used ³ No No No
Insecticide Carbamates Organochlor Organophos Pyrethroids 1 Percent of si 2 Principal vec	class rines phates	stance co d resistar	Years nfirmed and	- - - -	%) sites ¹	Vectors ²	Used ³ No No No