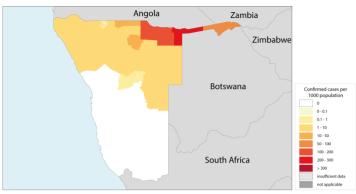
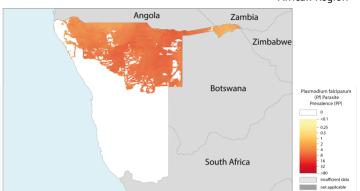
Namibia African Region





I. Epidemiological profile

Population (UN Population Division)	2017	%
High transmission (>1 case per 1000 population)	1.2M	46
Low transmission (0-1 case per 1000 population)	841.6K	33
Malaria free (0 cases)	522.6K	21
Total	2.5M	

Parasites and vectors			
Major plasmodium species: P.fa	alciparum: 1	00 (%), P.vivax: 0 (%)	
Major anopheles species: An	. arabiensis,	An. gambiae, An. fune.	stus
Reported confirmed cases (health facility):	54 268	Estimated cases:	89.6K [71.5K, 109.2K]
Confirmed cases at community level:	-		
Confirmed cases from private sector:	-		
Reported deaths:	104	Estimated deaths:	229 [7, 416]

II. Intervention policies and strategies

Intervention	Policies/Strategies	Yes/	Year
		No	adopted
ITN	ITNs/LLINs distributed free of charge	Yes	1998
	ITNs/LLINs distributed to all age groups	Yes	2014
IRS	IRS is recommended	Yes	1965
	DDT is used for IRS	Yes	1965
Larval control	Use of Larval Control	Yes	
IPT	IPT used to prevent malaria during pregnancy	Yes	2007
Diagnosis	Patients of all ages should receive diagnostic test	Yes	2012
	Malaria diagnosis is free of charge in the public sector	Yes	1990
Treatment	ACT is free for all ages in public sector	Yes	2005
	The sale of oral artemisinin-based monotherapies (oAMTs)	These are not recommended in national policies and not sold in pharmacies	-
	Single dose of primaquine (0.25 mg base/kg) is used as gametocidal medicine for P. falciparum	Yes	2016
	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	Yes	2016
	System for monitoring of adverse reaction to antimalarials exists	Yes	2008
Surveillance	ACD for case investigation (reactive)	Yes	2015
	ACD at community level of febrile cases (pro-active)	Yes	2012
	Mass screening is undertaken	Yes	2012
	Uncomplicated P. falciparum cases routinely admitted	Yes	2008
	Uncomplicated P. vivax cases routinely admitted	No	-
	Case and foci investigation undertaken	Yes	2015
	Case reporting from private sector is mandatory	Yes	2015

Antimalaria treatmen	t policy		Medicine	Year adopted	
First-line treatment of unconfirmed malaria			AL	2006	
First-line treatment of P. falciparum			AL	2006	
For treatment failure of P. falciparum			QN	2006	
Treatment of severe malaria			QN	2006	
Treatment of P. vivax			AL	2006	
Dosage of primaquine	e for radical treatme	nt of P. vivax	0.75 r	ng/Kg (8 weeks)	
Type of RDT used			P.f + P.v	P.f + P.v, P.o, P.m (Combo)	
Therapeutic efficacy t	ests (clinical and par	rasitological failure, %))		
Medicine Year	Min Median	Max Follow-up	No. of studies	Species	
nsecticide class	nsecticide class (201 Years	.0-2017) and use of cla (%) sites ¹	ess for malaria ve Vectors ²	. ,	
Carbamates	-	-	-	No	
Organochlorines	2010-20	14 0% (19)	-	No	
		-	-	No	
Organophosphates	•				
Organophosphates Pyrethroids	2010-20	14 0% (19)	-	Yes	