

## LIBERIA

April 2012



### At a Glance: Liberia

Population (2012): 3.9 million<sup>1</sup>

Population at risk of malaria (2010): 100%<sup>2</sup>

Estimated annual malaria deaths/100,000 population (2008): 98<sup>3</sup>

Under-five mortality rate (2009): 114/1,000 live births, or approximately 1 in 9 children die before their fifth birthday<sup>4</sup>

<sup>1</sup>US Census Bureau, International Data Base 2012

<sup>2</sup>WHO World Malaria Report 2011

<sup>3</sup>WHO World Health Statistics 2011

<sup>4</sup> Malaria Indicator Survey (MIS) 2009

### Background

Until 2003, Liberia experienced intermittent civil war for more than a decade, and almost all health services were provided by humanitarian assistance groups. With the return to political stability, the Government of Liberia has increasingly taken responsibility for the provision of health services. Malaria is endemic throughout the country and transmission occurs year-round, with a peak in September to October. According to a recent health facility survey, malaria accounts for about 35 percent of outpatient department attendance and 33 percent of inpatient deaths.

### The President's Malaria Initiative (PMI)

Liberia is one of 19 focus countries benefiting from the President's Malaria Initiative (PMI), which is led by the U.S. Agency for International Development and implemented together with the U.S. Centers for Disease Control and Prevention. PMI was launched in 2005 as a five-year (fiscal year [FY] 2006–2010), \$1.265 billion expansion of U.S. Government resources to reduce the burden of malaria and help relieve poverty on the African continent. The 2008 Lantos-Hyde Act authorized an extension of PMI funding through FY 2013. With congressional authorization and the subsequent launch of the U.S. Government's Global Health Initiative, PMI's goal was expanded to achieve Africa-wide impact by halving the burden of malaria in 70 percent of the at-risk populations on the continent (i.e., approximately 450 million residents), thereby removing malaria as a major public health problem and promoting development throughout the African region.

To reach its goal, PMI works with national malaria control programs and coordinates its activities with national and international partners, including the Roll Back Malaria Partnership; The Global Fund to Fight AIDS, Tuberculosis and Malaria; the World Health Organization (WHO); the World Bank; the U.K. Department for International Development; and numerous nongovernmental organizations, including faith-based and community groups; and the private sector.

### Key Interventions

In line with Liberia's national malaria control strategy, PMI supports four major malaria prevention and treatment measures:

- [Insecticide-treated mosquito nets \(ITNs\)](#)
- [Indoor residual spraying \(IRS\)](#)
- [Intermittent preventive treatment for pregnant women \(IPTp\) with sulfadoxine-pyrimethamine \(SP\)](#)
- [Diagnosis with rapid diagnostic tests \(RDTs\) or microscopy and treatment with artemisinin-based combination therapy \(ACT\)](#)

## Progress to Date

The table below shows key results from nationwide household surveys.

Liberia Malaria Indicators	PMI Baseline (MIS 2009)
All-cause under-five mortality rate	114/1,000
Proportion of households with at least one ITN	47%
Proportion of children under five years old who slept under an ITN the previous night	26%
Proportion of pregnant women who slept under an ITN the previous night	33%
Proportion of women who received two or more doses of IPTp during their last pregnancy in the last two years	45%

Liberia is in its fifth year as a PMI focus country. With support from PMI and its partners, malaria control interventions are being scaled up, and vital commodities are being distributed to vulnerable populations.

PMI Contributions <sup>1,2</sup>	2007	2008	2009	2010	2011	Cumulative
IRS: Houses sprayed	-	-	20,400	48,375	87,325	n/a <sup>3</sup>
IRS: Residents protected	-	-	163,149	420,532	827,404	n/a <sup>3</sup>
ITNs procured	197,000	0	430,000	830,000	650,000	1,757,000
ITNs distributed	0	184,000	430,000	480,000	350,000	1,444,000
ACTs procured	496,000	0	1,303,175	1,631,625	4,444,875	7,304,075
ACTs distributed	0	496,000	1,303,175	1,631,625	1,623,781	5,054,581
RDTs procured	-	0	850,000	1,200,000	0	2,050,000
RDTs distributed	-	0	850,000	1,116,275	83,725	2,050,000
SP treatments procured	-	0	78,666	85,333	85,333	163,999
SP treatments distributed	-	0	78,666	0	71,333	149,999
Health workers trained in treatment with ACTs	-	595	746	1,008	498	n/a <sup>4</sup>
Health workers trained in malaria diagnosis	-	0	22	906	39	n/a <sup>4</sup>
Health workers trained in IPTp	-	417	750	535	404	n/a <sup>4</sup>

<sup>1</sup> The data reported in this table are up-to-date as of September 30, 2011.

<sup>2</sup> The cumulative count of commodities procured and distributed takes into account the three-month overlap between Year 5 (covering the 2010 calendar year) and Year 6 (covering the 2011 fiscal year).

<sup>3</sup> A cumulative count of the number of houses sprayed and residents protected is not provided since some areas have been sprayed on more than one occasion.

<sup>4</sup> A cumulative count of individual health workers trained is not provided since some health workers have been trained on more than one occasion.

PMI Funding	FY 2007 Jump start funds	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012
<b>Budget</b> (in millions)	\$2.5	\$12.4	\$11.8	\$18.0	\$13.2	\$12.0

For details on FY 2012 PMI activities in Liberia, please see the **Liberia Malaria Operational Plan**:  
[http://pmi.gov/countries/mops/fy12/liberia\\_mop\\_fy12.pdf](http://pmi.gov/countries/mops/fy12/liberia_mop_fy12.pdf).

