

Country Profile | President's Malaria Initiative (PMI)

MALI

April 2009



At a Glance: Mali

Population - 2009: 12.7 million¹

Life expectancy at birth - 2009:
48 years (male), 52 years (female)¹

Population at risk of malaria - 2006:
100%²

Under-5 mortality rate - 2007:
196/1,000 live births, or approximately
1 in 5 children³

¹ US Census Bureau, International Data Base 2009

² WHO World Malaria Report 2008

³ UNICEF State of the World's Children 2009

Background

Malaria is one of the major causes of morbidity and mortality in Mali. In 2006, health facilities reported more than 1 million clinical cases of malaria, accounting for 41 percent of outpatient visits and more than 50 percent of deaths in children under five years of age.

Mali is one of 15 countries benefiting from the President's Malaria Initiative (PMI), a five-year, \$1.2 billion program led by the U.S. Agency for International Development (USAID) and implemented together with the Centers for Disease Control and Prevention (CDC).

Goal

The goal of PMI is to reduce malaria deaths by 50 percent in 15 countries in Africa by reaching 85 percent of the most vulnerable groups – principally pregnant women and children under five years of age – with lifesaving prevention and treatment measures.

PMI coordinates with National Malaria Control Programs (NMCPs) and international partners, including the World Health Organization (WHO); the Global Fund to Fight AIDS, Tuberculosis and Malaria; the World Bank Malaria Booster Program; the Roll Back Malaria partnership; the Bill and Melinda Gates Foundation; nongovernmental organizations, including faith-based and community groups; and the private sector.

Key Interventions

In support of Mali's NMCP, PMI backs four key intervention strategies to prevent and treat malaria:

- Insecticide-treated mosquito nets (ITNs)
- Indoor residual spraying with insecticides (IRS)
- Intermittent preventive treatment for pregnant women (IPTp)
- Diagnosis of malaria and treatment with artemisinin-based combination therapy (ACT)

Results to Date

Mali is in its second year as a PMI focus country. With support from PMI and its partners, malaria control interventions are being implemented, and vital commodities are being distributed to vulnerable populations.

Insecticide-treated mosquito nets: Sleeping under a long-lasting ITN provides protection from malaria-carrying mosquitoes. The nets are nontoxic to humans, last up to three years, and do not need re-treatment with insecticide. Since 2006, the Ministry of Health has supported free distribution of long-lasting ITNs to pregnant women at their first antenatal care visit and to children under five years with completed vaccination cards. During 2007, assisted by PMI, Mali implemented a two-phase mass long-lasting ITN distribution campaign, which resulted in a substantial increase in net ownership and use. The first phase took place in the north in June, followed by distribution in the remainder of the country in December. PMI procured and distributed a total of 369,800 long-lasting ITNs for this campaign. In 2008, PMI procured 858,000 long-lasting ITNs, of which 258,000

have been distributed to health facilities. PMI also supported the treatment of more than 42,000 mosquito nets with insecticides.

Indoor residual spraying: IRS involves the coordinated, timely spraying of the inside walls of homes with insecticides. Mosquitoes are killed when they land on these sprayed walls and pick up the residual insecticide. The Malian National Malaria Control Program supports IRS as part of an integrated vector control strategy. Before PMI, no large-scale IRS was being carried out in Mali; since then, IRS has gained high visibility and interest. In 2008, PMI provided technical support and financial resources for the NMCP to spray more than 107,000 houses in two districts (Bla and Koulikoro), which protected 420,580 residents.

Malaria in pregnancy: Pregnant women are particularly vulnerable to malaria, since pregnancy reduces a woman’s immunity to malaria. Unborn children also suffer the consequences of maternal malaria infections, which can result in low birthweight and a higher risk of death early in infancy. With PMI support, expectant mothers receive malaria treatments given at regular intervals during pregnancy through antenatal care services. IPTp has been a national policy in Mali since 2006 and sulfadoxine-pyrimethamine (SP) for IPTp is free during antenatal visits. Nevertheless, attendance rates at antenatal clinics and coverage of IPTp remain low in Mali. Since PMI was officially launched in Mali, the Initiative has procured 1 million SP treatments to fill the national gap, worked with UNICEF to quantify additional unmet needs for IPTp, and funded training for 142 health workers in IPTp.

Diagnosis and treatment: ACTs are extremely effective against malaria parasites and have few or no side effects. In Mali, PMI supports the improvement of malaria diagnosis by microscopy through increased training, supervision, and quality control. PMI also supports the government’s goal of ensuring prompt, effective, and safe antimalarial treatments for 85 percent of children under five with confirmed or suspected malaria. Since June 2007, ACTs have been provided for free to children under five. Since PMI began activities in Mali, PMI has supported a needs assessment to identify gaps in malaria diagnostic capabilities, training for 40 laboratory technicians in microscopy and use of rapid diagnostic tests, and training for 101 health workers in malaria case management.

PMI Funding

For fiscal year 2009, PMI allocated \$15.4 million in funding for malaria prevention and treatment in Mali. Of this amount, 32 percent will support household ownership and use of long-lasting ITNs, 21 percent IRS, 27 percent malaria diagnosis and treatment, 7 percent malaria in pregnancy activities, 6 percent monitoring and evaluation, and 7 percent staffing and administration. Approximately 42 percent of the budget will be spent on commodities.

	FY 2007 Jump start funds	FY 2008	FY 2009
Budget	\$4.5 million	\$14.8 million	\$15.4 million

For details on 2009 PMI activities in Mali, please see the Malaria Operational Plan at http://www.pmi.gov/countries/mops/mali_mop-fy09.pdf.