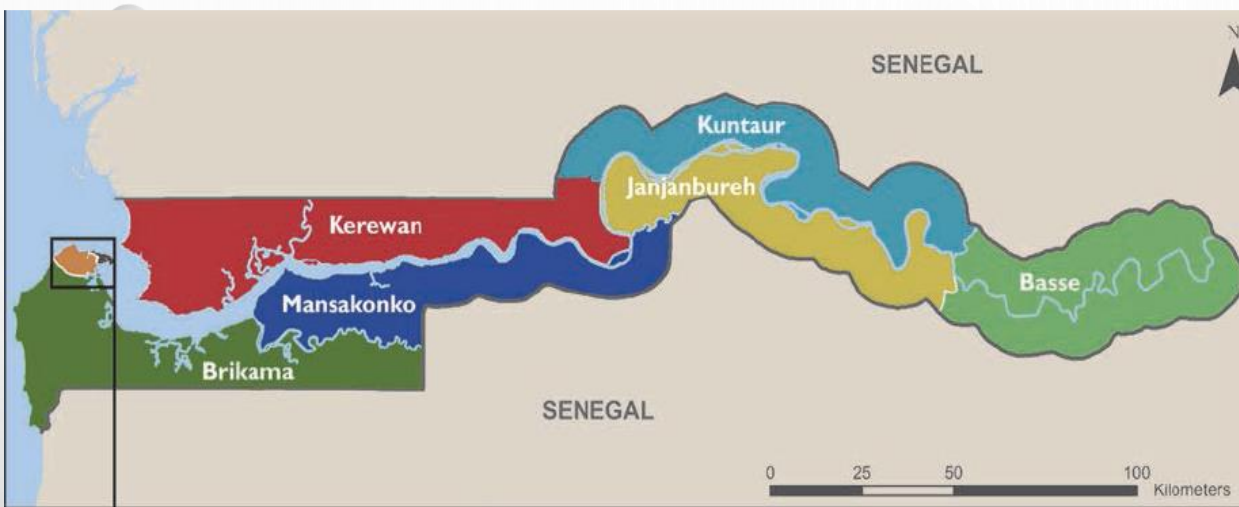


# **SUSTAINING GAINS ACHIEVED IN MALARIA BURDEN REDUCTION**

*Experience from the Gambia*

Mr Balla Kande  
PM NMCP  
The Gambia

# THE GAMBIA



- **Population** 2.0 million
- **Area** 11,295 sq km (4,361 sq mi)
- **Abuja Target** 8.6%
- **Fertility Rate** 5.9
- **Average Household Size** 8.5

# MALARIA POLICY ENVIRONMENT

## VISION

A MALARIA-FREE GAMBIA

## MISSION

TO ENSURE UNIVERSAL AND EQUITABLE ACCESS FOR THE POPULATION AT RISK TO MALARIA PREVENTION AND TREATMENT INTERVENTIONS IN LINE WITH THE NATIONAL HEALTH POLICY.

# 5 GUIDING PRINCIPLES OF NSP



## Guiding Principles

**Universal access for the population at risk**

**Client satisfaction**

**Equitable access**

**Evidence-based**

**Partnership**

# MALARIA STRATEGIC DIRECTION

- In order to tackle the multi-faceted nature of malaria transmission, the malaria strategic plan continues to focus on 7 core strategic directions with view to increase and sustain coverage through the use of effective and evidence-based interventions to achieve high impact.
  - Program management and partnership building
  - Malaria case management
  - Prevention and control of malaria in pregnancy
  - Integrated vector management (IVM)
  - Seasonal malaria chemoprevention (SMC )
  - Advocacy, social mobilization and communication
  - Surveillance, monitoring and evaluation & operational research.

# GOAL

## GOALS

By 2020, to reduce malaria mortality rates by at least 40% compared with 2013

By 2020, to reduce malaria case incidence by at least 40% compared with 2013



# OBJECTIVES

By 2020

1

at least 80% of malaria cases at all levels receive prompt diagnosis and effective treatment;

2

at least 80% of the population at risk are protected with effective preventive measures;

3

at least 80% of the population have appropriate knowledge and practices to use malaria prevention and management services;

4

Malaria surveillance, monitoring and evaluation systems at all levels are strengthened;

5

Malaria programme management capacities at all levels are strengthened

# EPIDEMIOLOGICAL SUMMARY

- **ENDEMICITY:** MALARIA IS ENDEMIC WITH HIGH SEASONAL VARIATION. TRANSMISSION IS INTENSE WITH 80% OF SEVERE CASES OCCURRING IN OCTOBER AND NOVEMBER
- **PARASITE(S):** PLASMODIUM FALCIPARUM IS THE DOMINANT PARASITE SPECIES
- **MALARIA VECTOR(S):** AN. GAMBIAE, A. ARABIENSIS ARE THE PREDOMINANT VECTORS
- **PREVALENCE:** PARASITE PREVALENCE NATIONAL- 0.2 % IN 2014, & 0.1% IN 2017





# Progress by Key Malaria Intervention

(2014-2018)

# SUCCESS/ACHIEVEMENT

- **VECTOR CONTROL**

- Universal coverage for LLINS ( MASS LLIN in 20014, 2017 and planned April 2019 with Senegal
- Annual IRS in URR and CRR
- Insecticide resistance monitoring

- **CASE MANAGEMENT**

- Drug policy change to ACT (Coartem)
- Confirmatory Diagnosis across all age group at all level

- **SEASONAL MALARIA CHEMOPREVENTION**

- 5 Round of 4 SMC in URR and CRR with average coverage of 87%
- ICT4D- campaign for SMC and LLIN digitalised and real-time

- **MALARIA IN PREGNANCY**

- ICT4D- campaign for SMC and LLIN digitalised and real-time

- **SURVEILLANCE MONITORING AND EVALUATION**

- Malaria Indicator survey in 2014 and 2017
  - ICT4D- campaign for SMC and LLIN digitalised and real-time

- **PROGRAM MANAGEMENT & PARTNERSHIP**

- Cross border coordination

# TRENDS IN ITN USE AMONG CHILDREN AND PREGNANT WOMEN

*Percent of children under 5 and pregnant women age 15-49 who slept under an ITN the night before the survey*



GMICS 2010

GDHS 2013

GMIS 2014

GMIS 2017

# TRENDS IN PREVALENCE OF LOW HAEMOGLOBIN

*Percent of children age 6-59 months with moderate-to-severe anaemia (haemoglobin < 8.0 g/dl)*



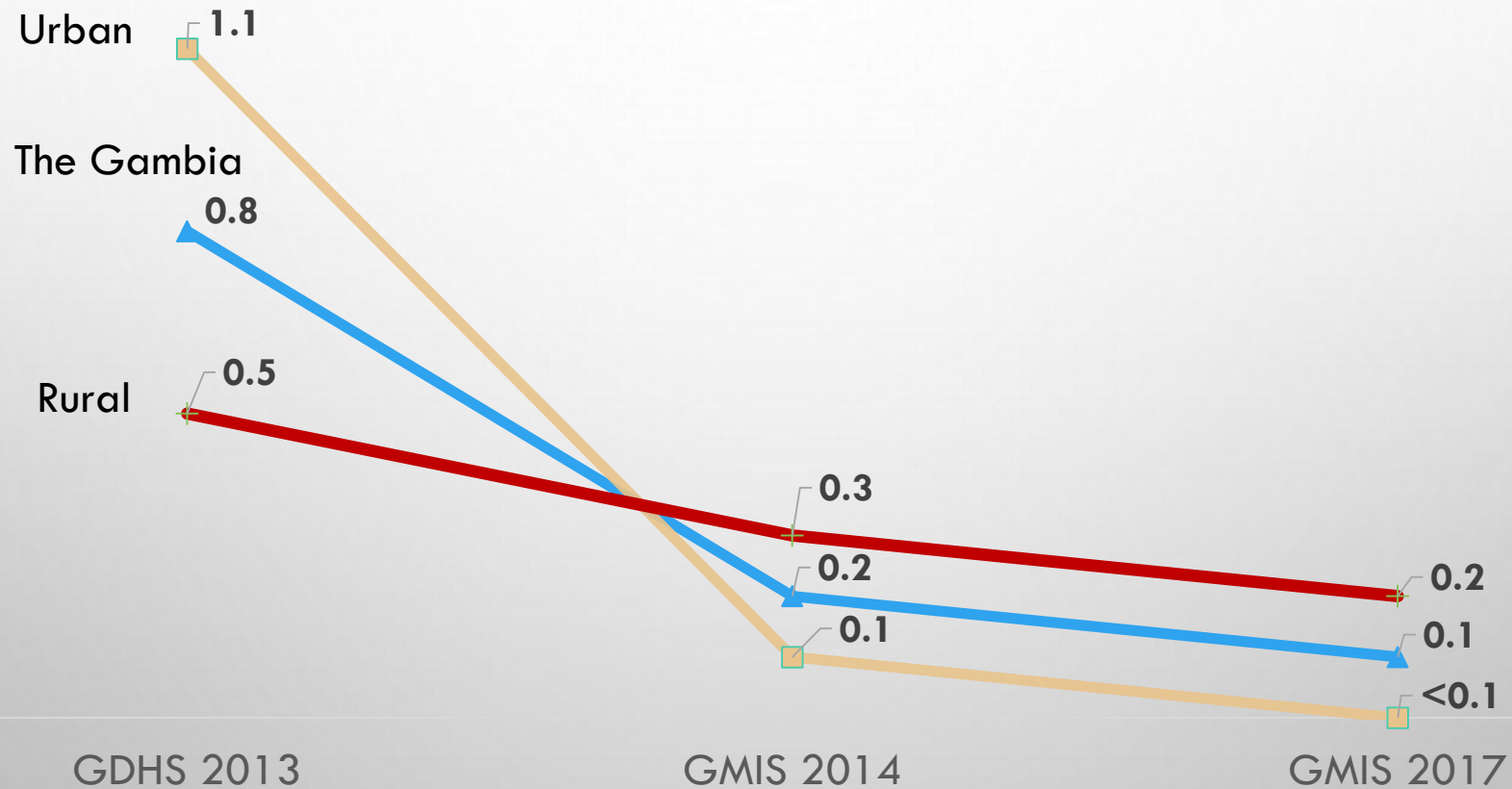
GDHS 2013

GMIS 2014

GMIS 2017

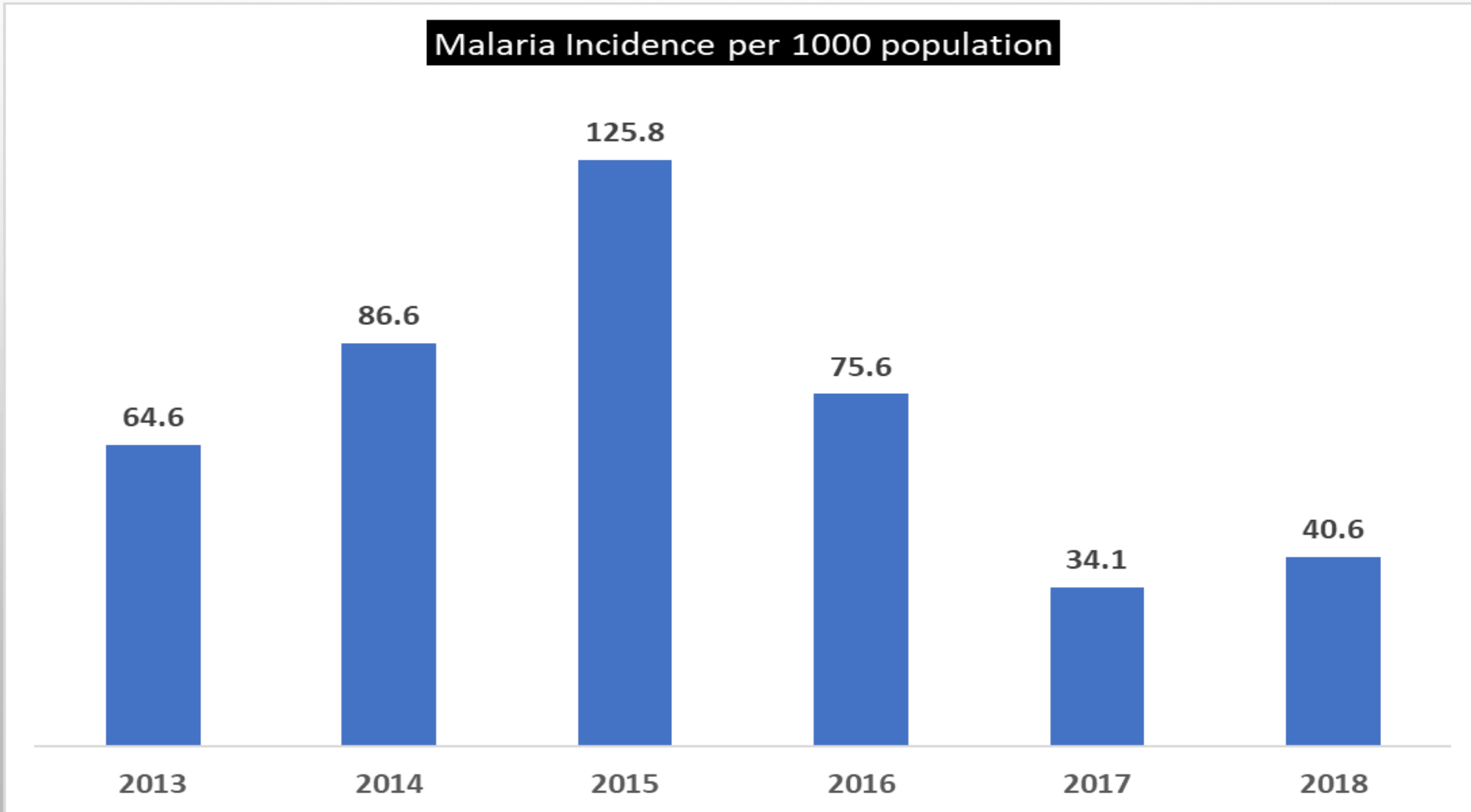
# TRENDS IN MALARIA PREVALENCE

*Percent of children age 6-59 months who tested positive for malaria by microscopy*



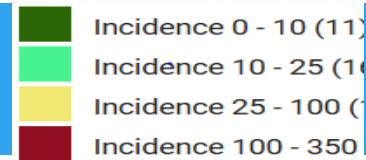
# SUCCESS/ACHIEVEMENT

- Significant reduction in OPD Malaria Cases

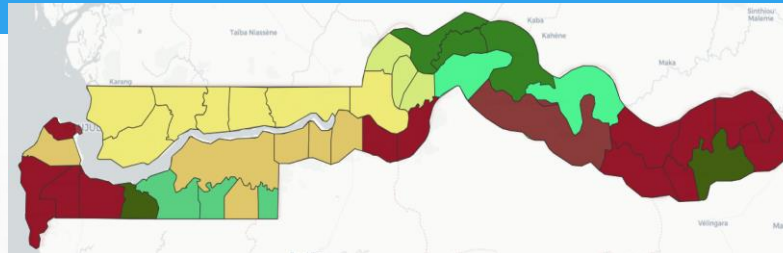




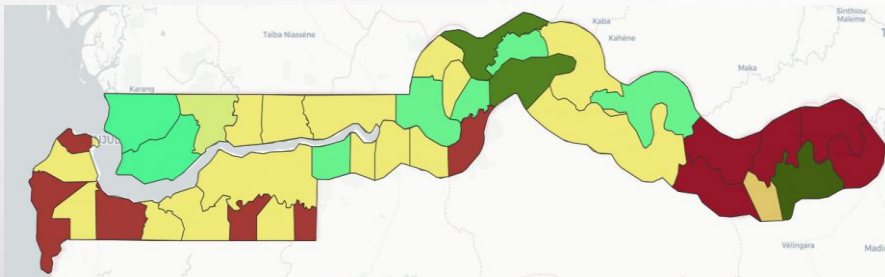
# TRENDS OF MALARIA CASE INCIDENCE PER 1,000 POP



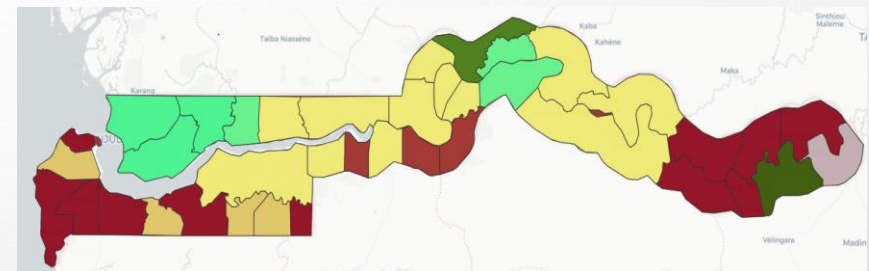
**2013**  
**Baseline**



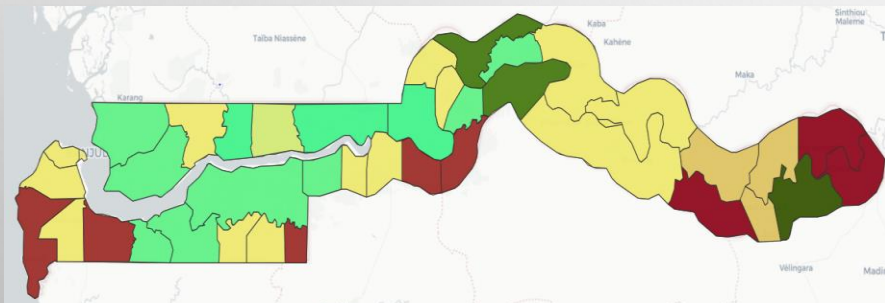
**2014**



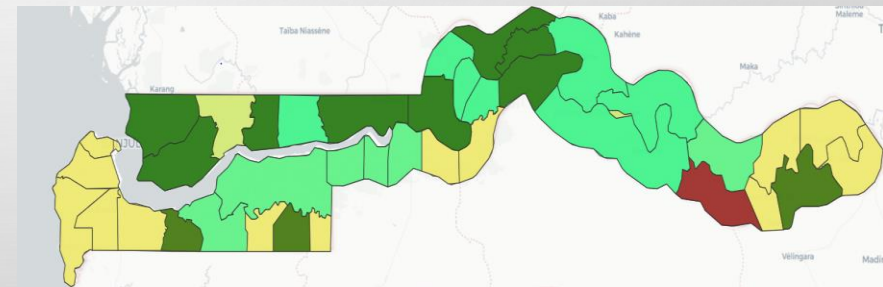
**2015**



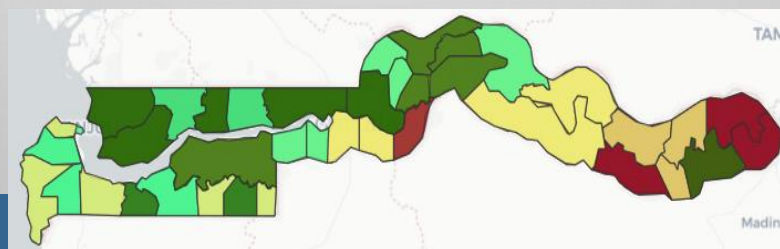
**2016**



**2017**

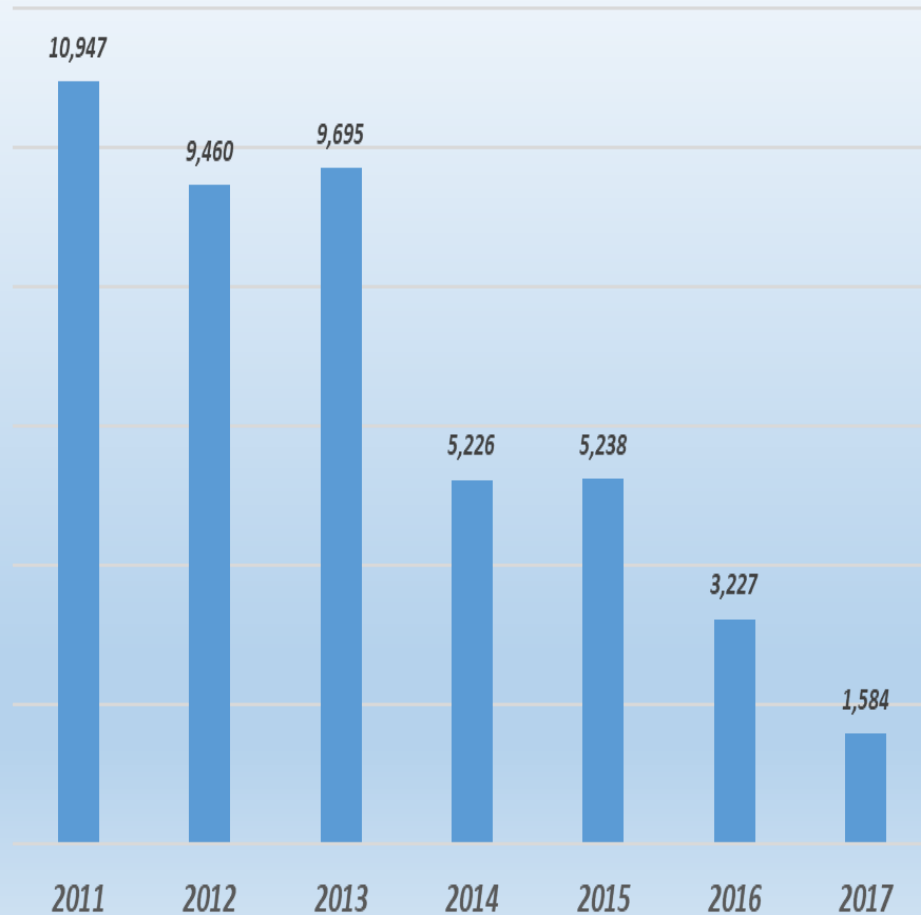


**2018**

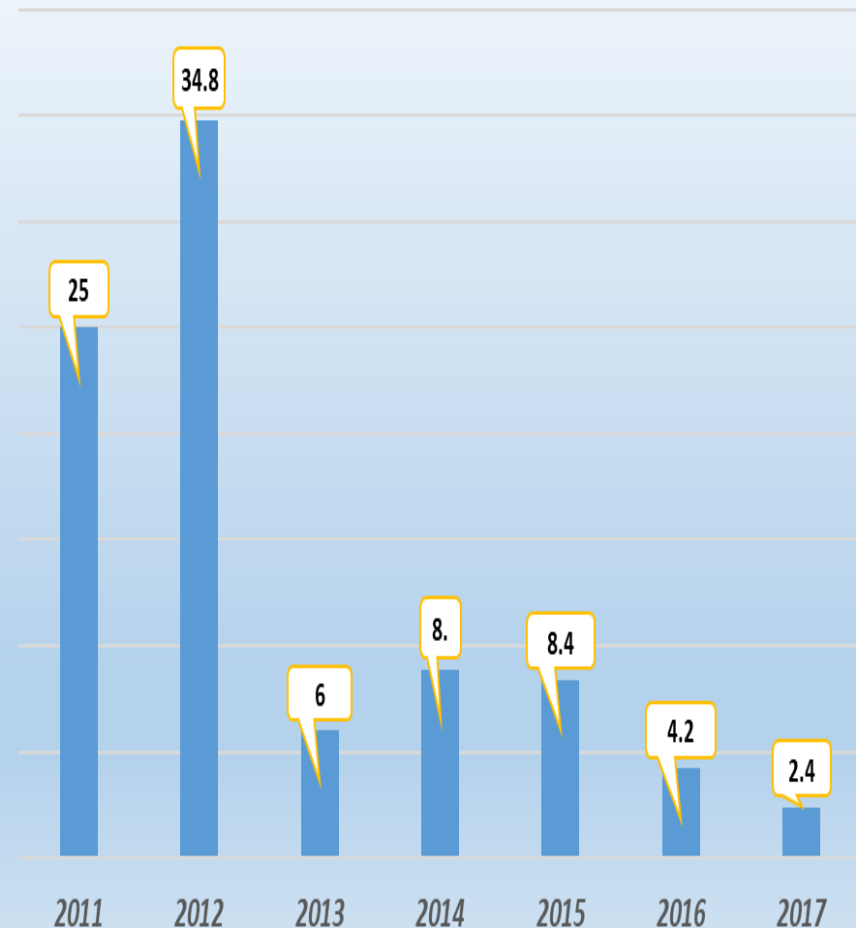


# INPATIENT MALARIA

Inpatient Severe malaria cases



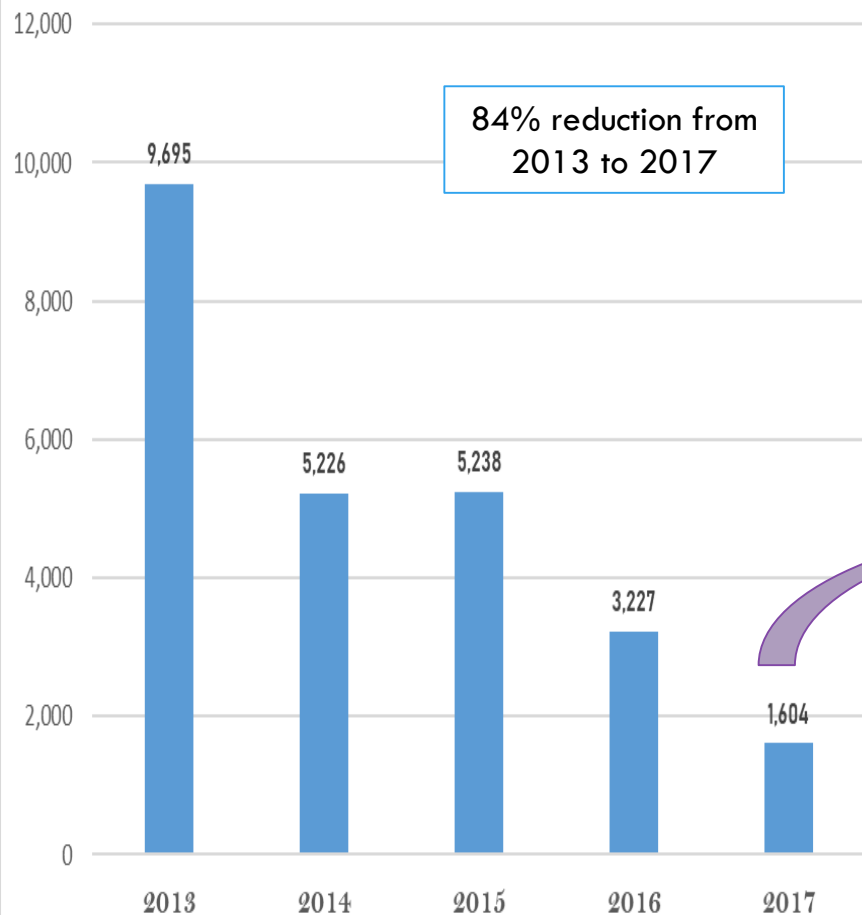
Inpatient Malaria death per 100,000 population



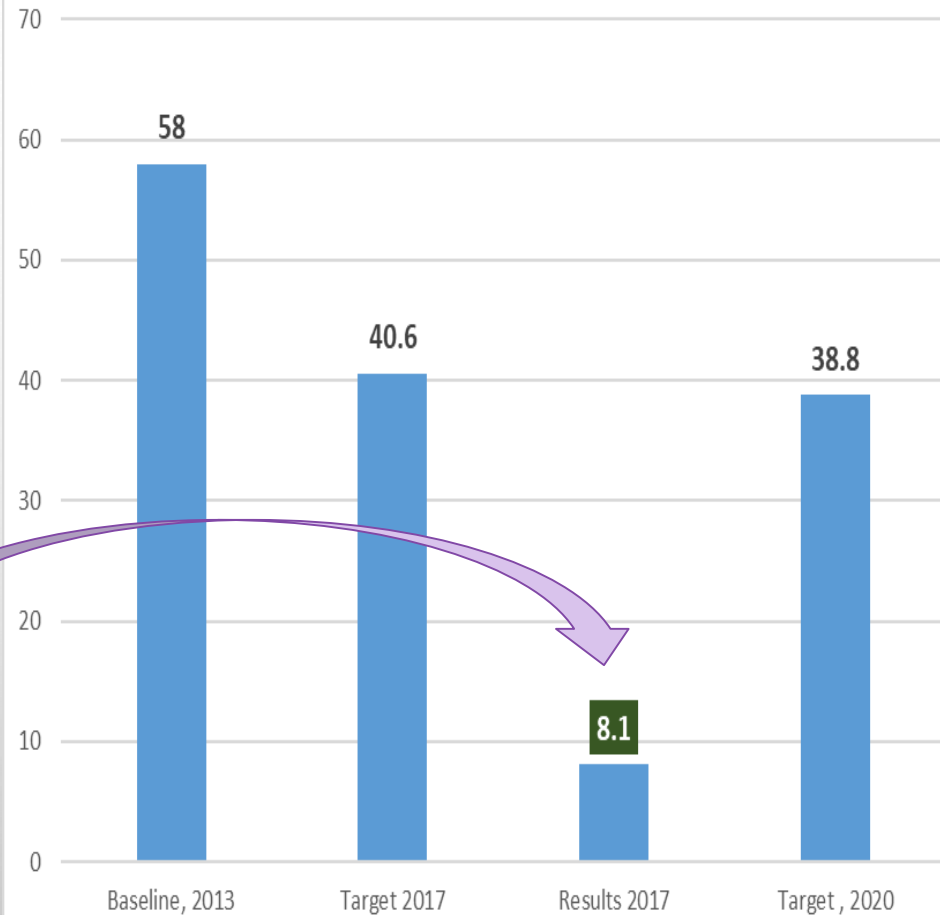
# Success/Achievement

## ASSESSMENT OF PROGRESS TOWARDS ACHIEVEMENT OF TARGETS

Inpatient Malaria Cases 2013-2017

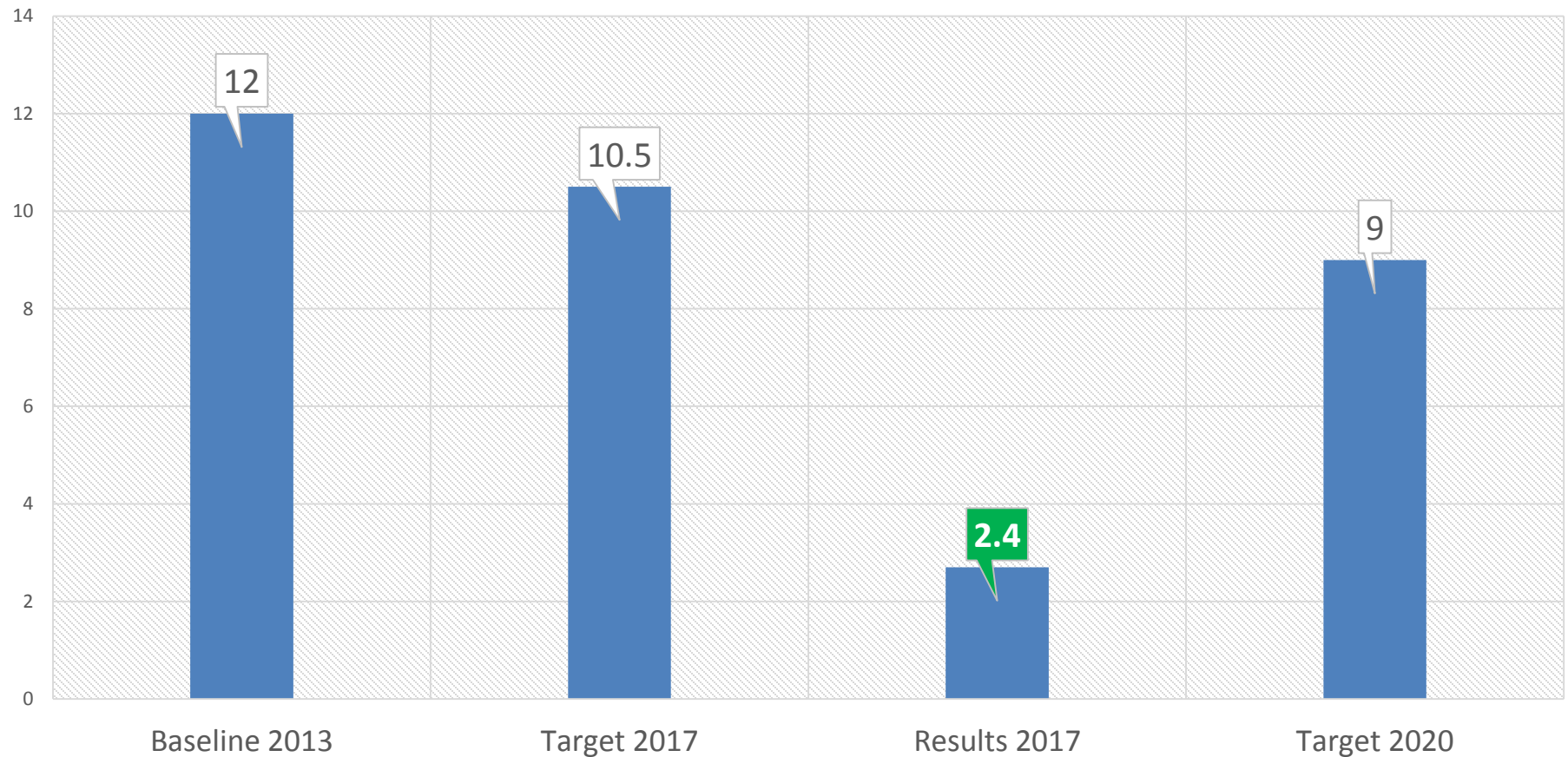


Malaria Inpatient cases per 10,000 population

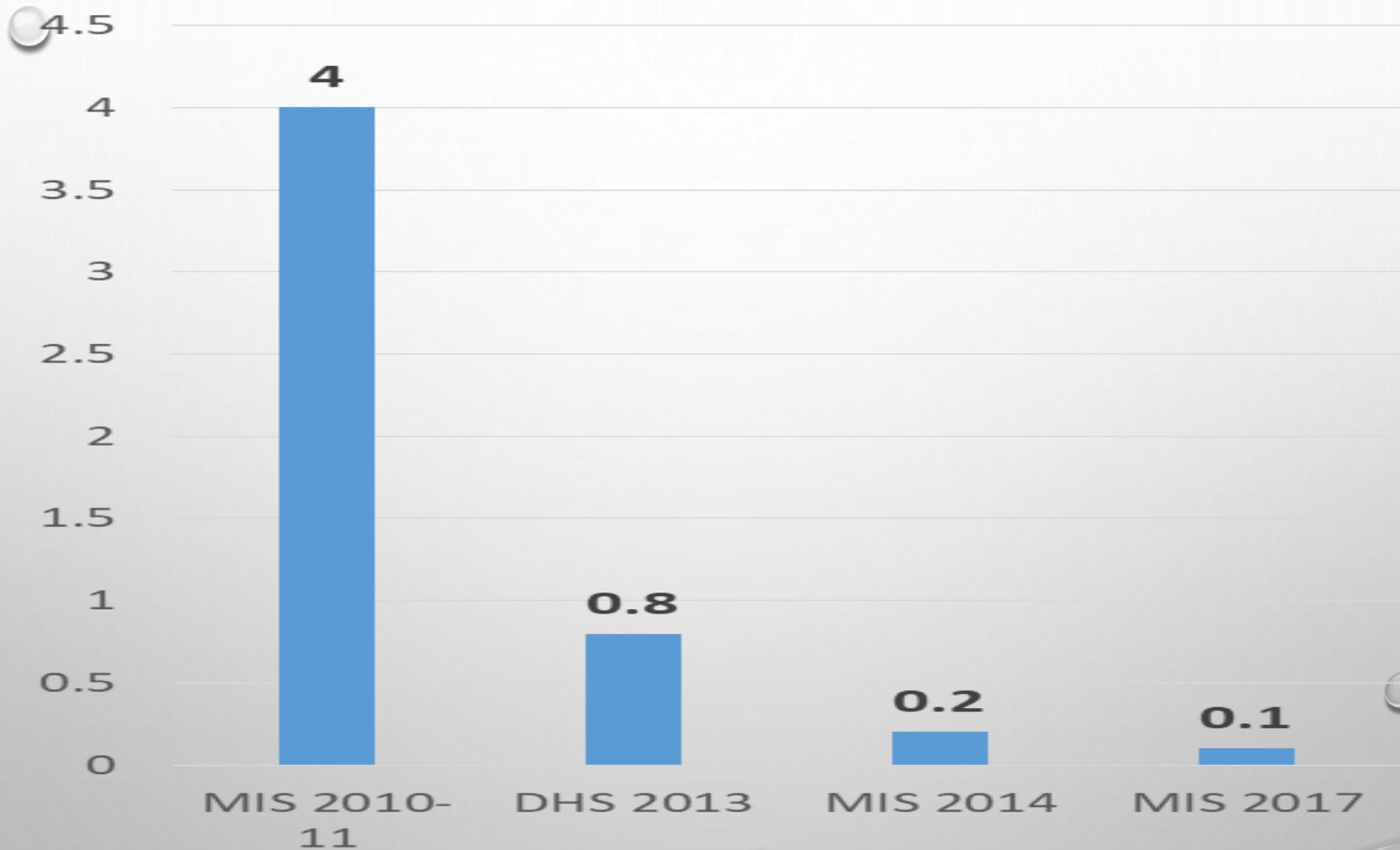


# ASSESSMENT OF PROGRESS TOWARDS ACHIEVEMENT OF TARGETS

## Inpatients Malaria Death per 100,000 population



## MALARIA PARASITE PREVALENCE AMONG CHILDREN 6-59 MONTHS ACCORDING TO MICROSCOPY



# BEST PRACTICE AND LESSON LEARNED

## ✓ SMC and LLIN Delivery

- Real time data for during SMC and LLIN campaign
- Establishment of a data quality team to improve data quality and to resolve technical issues that might be encountered in the field while using the ipad/devices has greatly enhance coverage
- Marking of compounds for ease of identification of those that had already received SMC saved time in the mopping up process

## ✓ Malaria Case Management

- Confirmatory Diagnosis of all suspected malaria across for all age group and delivery of care including the village health workers at the community level.
- Forecasting and quantification of malaria commodities based on consumption data
- Community reports on malaria diagnosis and treatment , monthly (complete/timely)



# BEST PRACTICE AND LESSON LEARNED

## ✓ Health management Information System and DHIS2

- All malaria indicators for routine data collection are integrated into the DHIS2 which has successfully being rollout and deployed at regional level.
- The integration of DHIS2 on web-platform has given NMCP at central level full access to malaria data timely for management decision making.

## ✓ SMC Delivery

- Decentralization and introduction of ICT for LLIN mass campaign
- Audit and validation of malaria deaths

# MAJOR CHALLENGES AHEAD

## ✓ Financial Resources

- Decrease GF malaria allocation by 38% from NFM to program continuation
- Domestic malaria financing
  - Challenges in sustaining the gains achieved due to low funding level
- Funding gap for universal coverage—
  - To adequately cover 4 remaining regions with IRS, SMC and iccm
  - In adequate funding to carry out some operational research

## ✓ Health System

- Human resource for health.
  - High attrition rate for healthcare provider
- Supply chain management
- Health Information system
  - Private sector reporting- there is little data available about case management practices in the private sector, which makes it difficult for the national program to monitor programmatic outcomes

## ✓ Behavioral Change communication

- Observed reduction in coverage of ITN used among children under five and pregnant women and IPTp uptake

# OPPORTUNITIES

## ✓ Cross border initiatives

- SeneGambia Malaria initiatives
  - MOU signed between Gambia and Senegal
  - Synchronized LLIN campaign in 2019
  - Share surveillance data especially along the borders
  - Joint monitoring along the borders
- Sahel Malaria elimination initiative

## ✓ Availability of additional malaria tool and intervention

- Improved malaria case management
- Confirmatory malaria diagnosis- universal diagnosis testing
- Strengthen Surveillance monitoring and evaluation system



THANK YOU