

Mozambique: Malaria Operational Plan FY 2014



Mozambique Malaria Operational Plan Fy 2014

**United States United States Agency of
International Development**



Mozambique Malaria Operational Plan Fy 2014:

Mozambique United States United States Agency of International Development, 2014-11-01 Malaria prevention and control are major foreign assistance objectives of the U S Government In May 2009 President Barack Obama announced the Global Health Initiative GHI a six year comprehensive effort to reduce the burden of disease and promote healthy communities and families around the world Through GHI the United States will help partner countries improve health outcomes with a particular focus on improving the health of women newborns and children The President s Malaria Initiative PMI is a core component of the GHI along with HIV AIDS and tuberculosis PMI was launched in June 2005 as a five year 1 2 billion initiative to rapidly scale up malaria prevention and treatment interventions and reduce malaria related mortality by 50% in 15 high burden countries in sub Saharan Africa With passage of the 2008 Lantos Hyde Act funding for PMI was extended and as part of GHI the goal of PMI was adjusted to reduce malaria related mortality by 70% in the original 15 countries by the end of 2015 Programming of PMI activities follows the core principles of GHI Mozambique was selected as a PMI country in fiscal year FY 2007 PMI s primary goal in Mozambique is to assist the Government of Mozambique GoM in collaboration with other partners to reduce malaria mortality by 50% by rapidly scaling up coverage of vulnerable groups with four highly effective interventions artemisinin based combination therapy ACT intermittent preventive treatment of pregnant women IPTp insecticide treated bed nets ITNs and indoor residual spraying IRS Mozambique carried out a Demographic and Health Survey DHS in 2011 While the data from this survey did show a reduction in all cause under five mortality from 138 1000 in the 2008 Multiple Indicator Cluster Survey to 97 1000 in the 2011 DHS there were only minimal improvements in major malaria indicators compared to the 2007 Malaria Indicator Survey MIS highlighting the multitude of challenges the country still faces in reducing the burden of malaria The most significant improvement from the 2007 MIS to the 2011 DHS was the increase in net coverage the proportion of households with at least one ITN increased from 15 8% in 2007 to 51 4% in 2011 A joint Malaria Indicator Survey and National HIV AIDS Indicator Survey is planned for 2014

Technical consultation to assess evidence on community-based delivery of intermittent preventive treatment in pregnancy for malaria World Health Organization, 2023-02-28 This technical consultation held virtually from 21 23 June 2022 was organized to assess evidence on community based delivery of IPTp c IPTp and discuss with partners involved in research and implementation of community based intermittent preventive treatment in pregnancy The meeting report summarizes the discussions and outcome of the consultation as these will subsequently serve as the basis for the development of new implementation guidance on the topic Challenges For Diagnosis, Treatment And Elimination Of Malaria Gisely Melo, Tais Nobrega De Sousa, Manuela Berto Pucca, Giselle Maria Rachid Viana, 2024-04-26 Malaria is a major cause of death in tropical and sub tropical countries presenting about 627 000 deaths and 241 million cases in the world Malaria is still an important public health problem that needs to be more effectively controlled Delays in diagnosis and

treatment are responsible for the most deaths in many countries Moreover in most of malaria endemic countries the lack of resources is a huge barrier to reliable and timely diagnosis

Rwanda United States United States Agency of International Development,2014-11-04 Malaria prevention and control is a major foreign assistance objective of the U S Government USG In May 2009 President Barack Obama announced the Global Health Initiative GHI a multi year comprehensive effort to reduce the burden of disease and promote healthy communities and families around the world Through GHI the United States will help partner countries improve health outcomes with a particular focus on improving the health of women newborns and children Rwanda has been selected as a GHI Plus country The President s Malaria Initiative PMI is a core component of the GHI PMI was launched in June 2005 as a 5 year 1.2 billion initiative to rapidly scale up malaria prevention and treatment interventions and reduce malaria related mortality by 50% in 15 high burden countries in sub Saharan Africa With passage of the 2008 Lantos Hyde Act funding for PMI was extended through FY 2014 Programming of PMI activities follow the core principles of GHI encouraging country ownership and investing in country led plans and health systems increasing impact and efficiency through strategic coordination and programmatic integration strengthening and leveraging key partnerships multilateral organizations and private contributions implementing a woman and girl centered approach improving monitoring and evaluation and promoting research and innovation Rwanda officially became a PMI country in FY 2007 although the USG had been supporting malaria control activities for several years before that Rwanda has scaled up malaria control interventions successfully and has set the ambitious goal of achieving pre elimination status by 2017 In early 2011 Rwanda was one of the first countries in sub Saharan Africa to achieve universal long lasting insecticidal net LLIN coverage with the distribution of over 6.1 million LLINs Rwanda is implementing a universal coverage campaign in 2013 with another national distribution of approximately 6 million LLINs Rwanda s indoor residual spraying IRS has targeted high burden districts and sectors based on available evidence Rwanda has conducted nine IRS rounds to date and has withdrawn IRS operations in certain districts due to reduction in malaria incidence transmission and funding Rwanda currently sprays two rounds annually in three high malaria burden districts that border malaria endemic neighbors In 2013 Rwanda developed and is implementing an insecticide resistance management IRM plan that builds upon their Integrated Vector Management IVM strategy Rwanda will change the insecticide class it uses in IRS in a phased transition and continue to switch classes every two years based on evidence of insecticide resistance and World Health Organization WHO guidance Progress in case management is equally impressive with great strides in diagnosis and treatment at all levels of the health care system and nationwide integrated community case management In late 2009 the MOH through its Malaria and Other Parasitic Diseases Division termed in this MOP the National Malaria Control Program or NMCP directed that all presumed malaria cases be laboratory confirmed In 2012 HMIS reports indicate that 99% of all patient diagnosed malaria cases are confirmed by microscopy or rapid diagnostic tests before receiving ACTs Community health workers CHWs continue to play a

pivotal role in malaria case management and 30 000 of Rwanda's extensive network of 60 000 CHWs are mobilized to implement integrated community case management iCCM diagnosing and treating malaria diarrhea and pneumonia

Zimbabwe United States United States Agency of International Development,2014-11-04 Malaria prevention and control are major foreign assistance objectives of the U S Government USG In May 2009 President Barack Obama announced the Global Health Initiative GHI a six year comprehensive effort to reduce the burden of disease and promote healthy communities and families around the world Through the GHI the United States will help partner countries improve health outcomes with a particular focus on improving the health of women newborns and children The President's Malaria Initiative PMI is a core component of the GHI along with HIV AIDS and tuberculosis programs PMI was launched in June 2005 as a five year 1.2 billion initiative to rapidly scale up malaria prevention and treatment interventions and reduce malaria related mortality by 50% in 15 high burden countries in sub Saharan Africa by 2010 With passage of the 2008 Lantos Hyde Act funding for PMI was extended and as part of the GHI the goal of PMI was adjusted to reduce malaria related mortality by 70% in the original 15 countries by the end of 2015 In mid 2011 Zimbabwe's selection as a PMI country was announced Malaria is a major health problem in Zimbabwe with 50% of the population at risk although its epidemiology varies in the different regions of the country ranging from year round transmission in the lowland areas to epidemic prone areas in the highlands Zimbabwe's National Strategic Plan does not call for the implementation of all interventions in all malarious districts hence the targeted number of districts varies by intervention as detailed below Zimbabwe's malaria program receives support from two major donors the Global Fund and PMI United States Agency for International Development USAID provided targeted support to Zimbabwe's National Malaria Control Program NMCP through an emergency round of indoor residual spraying IRS in 2009 and in 2011 with a procurement of malaria commodities Other malaria donors included UNICEF the United Kingdom Department for International Development DfID and the European Commission However many European donors have shifted their funds to a new multi donor fund designed to strengthen health systems in Zimbabwe the Health Transition Fund The Health Transition Fund is operating from 2011 2015 and aims to improve access to all types of quality health care for Zimbabweans and to harmonize donor support practices and requirements The FY 2014 Malaria Operational Plan was developed in collaboration with the NMCP and aligns well with the National Malaria Control Strategy Planning for FY 2014 was carried out in Zimbabwe in April May 2013 and included representatives from USAID and Centers for Disease Control and Prevention staff based in Washington Atlanta and Zimbabwe The FY 2014 PMI proposed budget for Zimbabwe is 14 million The following major activities will be supported with FY 2014 funding

Liberia United States United States Agency of International Development,2014-10-31 Malaria prevention and control is a major foreign assistance objective of the U S Government USG In May 2009 President Barack Obama announced the Global Health Initiative GHI a comprehensive effort to reduce the burden of disease and promote healthy communities and families around the world The

President's Malaria Initiative PMI is a core component of the GHI along with HIV AIDS tuberculosis maternal and child health family planning and reproductive health nutrition and neglected tropical diseases PMI was launched in June 2005 as a 5 year 1.2 billion initiative to rapidly scale up malaria prevention and treatment interventions and reduce malaria related mortality by 50% in 15 high burden countries in sub Saharan Africa With passage of the 2008 Lantos Hyde Act funding for PMI was extended and the PMI strategy was revised to achieve Africa wide impact by halving the burden of malaria in 70 percent of at risk populations in sub Saharan Africa Programming of PMI activities follows the core principles of GHI encouraging country ownership and investing in country led plans and health systems increasing impact and efficiency through strategic coordination and programmatic integration strengthening and leveraging key partnerships multilateral organizations and private contributions implementing a woman and girl centered approach improving monitoring and evaluation M and promoting research and innovation Liberia began PMI supported activities in FY 2008 Liberia's health infrastructure was severely damaged during the long civil war which ended in 2003 leaving only about 45% of the population with access to essential health services The entire population of approximately 3.8 million is at risk for malaria1 The 2011 Malaria Indicator Survey MIS showed malaria prevalence by microscopy at 28% The National Malaria Control Program NMCP has produced a National Malaria Control Strategy for the years 2010 2015 Liberia has received malaria funding from the Global Fund to Fight Aids Tuberculosis and Malaria Global Fund since 2004 Currently Liberia receives Global Fund support through a consolidated grant made up of Phase 2 of a Round 7.37 million grant and Phase 1 of a Round 10.60 million grant With Phase 1 of the consolidated grant ending in 2013 Liberia is in the process of completing an assessment of Phase 1 and an application for Phase 2 renewal

Historical Perspectives on the State of Health and Health Systems in

Africa, Volume II Mario J. Azevedo, 2017-01-24 This book focuses on Africa's challenges achievements and failures over the past several centuries using an interdisciplinary approach that combines theory and fact and evidence based practices and interventions in public health and argues that most of the health problems in Africa are not a result of scarce or lack of resources but of the misconceived and misplaced priorities that have left the continent behind every other on the globe in terms of health education and equitable distribution of opportunities and access to quality health as agreed by the United Nations member states at Alma Ata in 1978

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comprehensive effort to reduce the burden of disease and promote healthy communities and families throughout the world Through GHI the United States will help partner countries improve health outcomes with a particular focus on improving the health of women newborns and children The President's Malaria Initiative PMI is a core component of the GHI along with HIV AIDS and tuberculosis PMI was launched in June 2005 as a five year 1.2 billion initiative to rapidly scale up malaria

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Ethiopia United States United States Agency of International Development,2014-10-31 Malaria prevention and control are major foreign assistance objectives of the U S Government USG The purpose of this Malaria Operational Plan MOP is to provide a framework and a rationale for nominating and supporting malaria prevention and control projects in Ethiopia with FY 2014 funding to accomplish the USG s foreign assistance objectives through the President s Malaria Initiative PMI in the context of the Global Health Initiative GHI Through the GHI the USG will help partner countries improve health outcomes with a particular focus on improving the health of women newborns and children The MOP process for PMI Year 7 FY 2014 considers information from the Ethiopian Federal Ministry of Health FMOH Regional Health Bureaus including the Oromia Regional Health Bureau ORHB international malaria program donors including the Global Fund to Fight AIDS Tuberculosis and Malaria Global Fund malaria subject matter experts and other malaria program stakeholders about the malaria situation and the malaria control program capacities and gaps in Ethiopia The President s Malaria Initiative is a core component of the GHI along with health programs for HIV AIDS and Tuberculosis PMI was launched in June 2005 to rapidly scale up malaria prevention and treatment interventions and reduce malaria related mortality by 50% in selected high burden countries in sub Saharan Africa Other PMI goals include removing malaria as a major public health problem promoting development in the Africa region strengthening malaria control activities and containing the spread of antimalarial drug resistance The programming of PMI activities follows the core principles of GHI encouraging country ownership and investing in country led plans and health systems increasing impact and efficiency through strategic

coordination and programmatic integration strengthening and leveraging key partnerships multilateral organizations and private contributions implementing a woman and girl centered approach improving monitoring and evaluation and promoting research and innovation Malaria is ranked as the leading communicable disease in Ethiopia accounting for about 30% of the overall Disability Adjusted Life Years lost Approximately 68% of the total population of 84.3 million lives in areas at significant risk of malaria According to the FMOH in 2010/2011 malaria was the leading cause of outpatient visits accounting for 15% of all visits and health facility admissions with 15% of all admissions Malaria is one of the top ten causes of in patient deaths among children less than five years of age and adults President e t m s Malaria Initiative support to malaria prevention and control in Ethiopia began in FY 2008 with an initial focus on Oromia Regional State the largest of Ethiopia e t m s nine regional states covering a third of the country Ethiopia has received four malaria grants from the Global Fund in recent years PMI has contributed between 20 and 43 million annually to malaria control efforts in Ethiopia during the last five years

Mozambique United States United States Agency for International Development, 2016-05-06 This FY 2016 Malaria Operational Plan presents a detailed implementation plan for Mozambique based on the strategies of PMI and the National Malaria Control Program NMCP It was developed in consultation with the NMCP and with the participation of national and international partners involved in malaria prevention and control in the country The activities that PMI is proposing to support fit in well with the National Malaria Prevention and Control Strategic Plan and build on investments made by PMI and other partners to improve and expand malaria related services including the Global Fund to Fight AIDS Tuberculosis and Malaria Global Fund This document briefly reviews the current status of malaria control policies and interventions in Mozambique describes progress to date identifies challenges and unmet needs to achieving the targets of the NMCP and PMI and provides a description of activities that are planned with FY 2016 funding

Mozambique Malaria Operational Plan Fy 2014 Book Review: Unveiling the Magic of Language

In an electronic digital era where connections and knowledge reign supreme, the enchanting power of language has become more apparent than ever. Its ability to stir emotions, provoke thought, and instigate transformation is actually remarkable. This extraordinary book, aptly titled "**Mozambique Malaria Operational Plan Fy 2014**," published by a very acclaimed author, immerses readers in a captivating exploration of the significance of language and its profound effect on our existence.

Throughout this critique, we will delve into the book's central themes, evaluate its unique writing style, and assess its overall influence on its readership.

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