



Nigeria Malaria Fact Sheet

United States Embassy in Nigeria

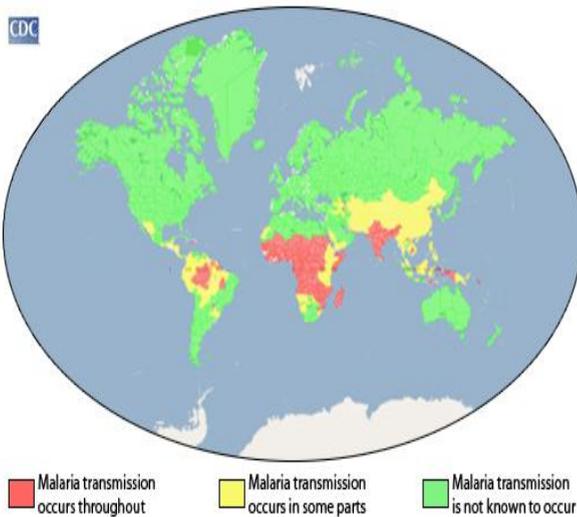
NIGERIA MALARIA FACT SHEET

Malaria Worldwide

- Malaria affects 3.3 billion people, or half of the world's population, in 106 countries and territories.
- WHO estimates 216 million cases of malaria occurred in 2010, 81% in the African region.
- WHO estimates there were 655,000 malaria deaths in 2010, 91% in the African Region, and 86% were children under 5 years of age.
- Malaria is the 3rd leading cause of death for children under five years worldwide, after pneumonia and diarrheal disease.

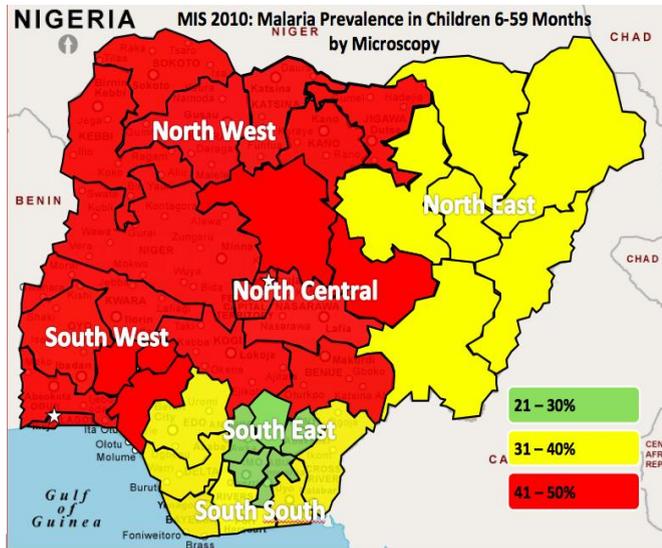
Malaria in Africa

- Thirty countries in Sub-Saharan Africa account for 90% of global malaria deaths.
- Nigeria, Democratic Republic of Congo (DRC), Ethiopia, and Uganda account for nearly 50% of the global malaria deaths.
- Malaria is the 2nd leading cause of death from infectious diseases in Africa, after HIV/AIDS.
- Almost 1 out of 5 deaths of children under 5 in Africa is due to malaria.



Malaria and HIV

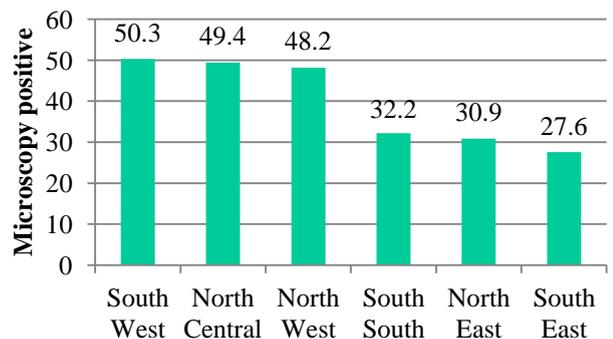
- Malaria causes anemia which may require blood transfusions, a procedure that increases the risk for HIV infection where universal blood screening is yet to be achieved.
- People living with HIV/AIDS (PLWHA) are at an increased risk of clinical malaria, severe illness, hospitalization, and death.
- Malaria contributes to a temporary increase in viral load among HIV-infected people which may worsen the clinical disease, increase mother-to-child transmission, and augment transmission in adults.



Malaria in Nigeria

- Malaria is a major public health problem in Nigeria where it accounts for more cases and deaths than any other country in the world.
- Malaria is a risk for 97% of Nigeria's population. The remaining 3% of the population live in the malaria free highlands.
- There are an estimated 100 million malaria cases with over 300,000 deaths per year in Nigeria. This compares with 215,000 deaths per year in Nigeria from HIV/AIDS.
- Malaria contributes to an estimated 11% of maternal mortality.

Malaria Prevalence Among Children Age 6-59 Months In Nigeria (percent)

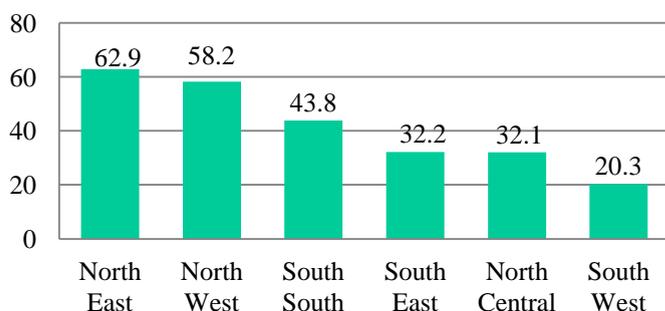


- Malaria accounts for 60% of outpatient visits and 30% of hospitalizations among children under five years of age in Nigeria.
- Malaria has the greatest prevalence, close to 50%, in children age 6-59 months in the South West, North Central, and North West regions.
- Malaria has the least prevalence, 27.6 percent, in children age 6 to 59 months in the South East region.

Prevention and Treatment

- The U.S. President’s Malaria Initiative (PMI) supports four scientifically proven key interventions to prevent and treat malaria: 1) the promotion of insecticide-treated mosquito nets (ITNs); 2) indoor residual spraying (IRS); 3) intermittent preventive treatment for pregnant women (IPT); & 4) diagnosis and treatment.
- Prevention programs focus on the distribution and use of bed nets, called Long Lasting Insecticidal Nets (LLINs), including evidence-based health communication programs on the mode of malaria transmission and the importance of sleeping under ITNs.

MIS 2010: ITN Ownership in Nigeria



* Malaria Indicator Survey (MIS)

- Indoor Residual Spraying (IRS) involves the coordinated, timely spraying of the interior walls of homes with insecticides that kill mosquitoes.
- Intermittent preventive treatment for pregnant women (IPTp) is an effective means of reducing the effects of malaria in both the pregnant woman and her unborn child by giving at least two doses of the drug sulfadoxine-pyrimethamine (SP).
- Prompt parasitological confirmation by microscopy or Rapid Diagnostic Test (RDT) is recommended for all patients with suspected malaria before treatment begins.
- Artemisinin-based combination therapy (ACT) has become the standard treatment of uncomplicated malaria.

Challenges and Gaps

- An estimated 65% of Nigeria’s population lives in poverty and poverty is a major factor in malaria prevention and treatment.
- Vector control is highly dependent on a single class of insecticides, the pyrethroids. Resistance to pyrethroids has been reported in 27 countries in sub-Saharan Africa.
- Despite the National policy of ACT as the first-line treatment of uncomplicated malaria, MIS 2010 indicates that over 70% of children treated for malaria in Nigeria received chloroquine or SP.

Non – U.S. Funding

- The World Bank provided \$180 million for the Malaria Booster Program that supports seven states and some national-level activities. The World Bank provided an additional \$100 million for this program in 2009.
- The UK Department For International Development (DFID) initiated SuNMaP (Support to Nigeria Malaria Programme), a \$100 million, five-year program to control malaria in 2008.
- The Global Fund provided a \$500 million Round 8 Malaria grant that began in 2009 and will last until 2014.

U.S. PMI Funding

- The U.S. PMI was launched in June 2005 as a five-year, \$1.2 billion initiative to scale up malaria prevention and treatment interventions, and has been extended through 2015.
- PMI is led by the U.S. Agency for International Development and implemented together with the U.S. Centers for Disease Control and Prevention.
- The goal of PMI, working closely with host governments, is to reduce malaria-related mortality by 70% in the original 15 countries by the end of 2015.
- Nigeria became the 17th PMI country in 2010.
- Pre-PMI malaria funding in Nigeria was \$18 million. PMI funding for Nigeria is \$43.6 million in FY11 and projected to be \$43.2 million in FY12.
- Malaria Action Programme for States (MAPS) is a PMI-funded integrated malaria project. The MAPS project, which spans from 2010 to 2015, is implemented in Benue, Cross River, Ebonyi, Nasarawa, Oyo, and, Zamfara states.

USAID/PMI Malaria Funding in Nigeria

