

Country Profile | President's Malaria Initiative (PMI)

LIBERIA

May 2008



At a Glance: Malaria in Liberia

Population: 3.3 million¹
Life expectancy at birth:
40 years (male), 42 years (female)¹
Population at risk of malaria: 100%²
Under-5 mortality rate: 235/1,000,
or approximately 1 in 4 children³

¹ US Census Bureau

² Roll Back Malaria 2005 World Malaria Report

³ State of the World's Children 2008 UNICEF

Background

Malaria is a leading cause of morbidity and mortality in Liberia. It accounts for more than 40 percent of all outpatient consultations, 18 percent of inpatient deaths, and is reported to cause at least 21,000 deaths among children under 5 years of age every year. Liberia's entire population is at risk of malaria.

Liberia is one of eight third-round target 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), in conjunction with the Department of Health and Human Services (Centers for Disease Control and Prevention), the Department of State, and the White House.

Goal

The goal of PMI is to cut 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 5 years of age – with lifesaving services, supplies, and medicines.

PMI coordinates with national malaria control programs and international partners, including the World Health Organization; 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 (NGOs), including faith-based and community groups; and the private sector.

Key Interventions

In support of Liberia's national malaria control program, PMI backs four key intervention strategies to prevent and treat malaria:

- Indoor residual spraying (IRS) with insecticides
- Insecticide-treated mosquito nets (ITNs)
- Lifesaving drugs
- Intermittent preventive treatment for pregnant women (IPTp)

PMI Funding

For fiscal year 2008, PMI has set aside \$12.4 million in funding for malaria prevention and treatment in Liberia.

Upcoming PMI Activities

- Launch PMI through the distribution of 150,000 long-lasting ITNs (LLINs) (procured with FY07 funds) through a campaign in Bomi and Cape Mount counties, beginning in February 2008. The nets will be delivered door-to-door with support from PMI, UNICEF, Malaria No More, and the Canadian Red Cross.
- Procure and distribute a total of 480,000 LLINs to vulnerable groups through existing approaches to bring national household ownership of ITNs to approximately 60 percent.
- Conduct preservice and in-service training of health workers in IPTp at both the facility and community levels.
- Procure and assist with the distribution of more than 900,000 artemisinin-based combination therapies (ACTs). Training and behavior change communication efforts supported by other partners, in addition to the distribution of antimalaria drugs, are expected to increase the proportion of children with suspected malaria who receive ACT within 24 hours of the onset of symptoms.
- Fill one-half of the severe malaria drug and supply gap.
- Conduct training at facilities in proper case management in collaboration with the national malaria control program and NGOs (through a new Request for Applications).
- Enhance laboratory capacity for microscopic diagnosis of malaria through provision of training and equipment.
- Procure 1.1 million rapid diagnostic tests to fill the supply gap, as well as supervise, monitor, and evaluate their use.