

## Country Profile | President's Malaria Initiative (PMI)

# ANGOLA

April 2008



### At a Glance: Malaria in Angola

Population: 12.5 million<sup>1</sup>

Life expectancy at birth:  
37 years (male), 39 years (female)<sup>1</sup>

Population at risk of malaria: 90%<sup>2</sup>

Under-5 mortality rate: 260/1000, or  
approximately 1 in 4 children<sup>3</sup>

<sup>1</sup> US Census Bureau

<sup>2</sup> Roll Back Malaria 2005 World Malaria Report

<sup>3</sup> State of the World's Children 2008 UNICEF

### Background

Angola's health systems were severely damaged during the civil war, and only about 30 percent of the population has access to government health facilities. Malaria accounts for an estimated 35 percent of mortality in children under 5, 25 percent of maternal mortality, and 60 percent of hospital admissions for children under age 5.

Angola is one of three first-round target countries to benefit 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, including faith-based and community groups; and the private sector.

### Key Interventions

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

- Spraying with insecticides ("indoor residual spraying," or IRS)
- Insecticide-treated mosquito nets (ITNs)
- Lifesaving drugs
- Preventive treatment for pregnant women ("intermittent preventive treatment," or IPTp)

## Results to Date

Angola is entering its third year as a PMI target country. With support from PMI and its partners, malaria control interventions are being implemented and vital commodities are being distributed to vulnerable populations.

**Mosquito nets:** Sleeping under a long-lasting ITN provides protection from malaria-carrying mosquitoes. The nets are nontoxic to humans and do not need re-treatment with insecticide for up to four years. Household ownership of one or more ITNs has increased dramatically in the past year, especially in the seven provinces targeted during the 2006 measles immunization-ITN campaign, during which more than 800,000 ITNs were distributed free of charge. Thanks to these efforts, 51 percent of households in those areas targeted by the campaign owned one or more ITNs, compared with an estimated 11 percent prior to the campaign. In addition, 34 percent of children under 5 and 40 percent of pregnant women had slept under an ITN the previous night.

**Insecticide spraying:** IRS acts by killing or shortening the lives of adult female malaria-carrying mosquitoes when they rest on the sprayed inside walls of homes after feeding. Before PMI began work in Angola in 2005, no large-scale IRS had been conducted by the national malaria control program for many years. During the last two years, more than 100,000 houses per year were sprayed with lambda-cyhalothrin, a synthetic pyrethroid insecticide. More than 85 percent of the targeted houses were sprayed as a result of effective educational efforts that gained the acceptance and participation of the Angolan people. PMI-supported IRS activities protected more than 590,000 people each year.

**New medicines:** Derived from the *Artemisia* plant, artemisinin drugs are extremely effective against malaria parasites and have few or no side effects. To date, PMI has supported training of 1,573 health workers in the correct use of artemisinin-based combination therapy (ACT). PMI has procured more than 2.6 million ACT treatments, of which 1.1 million have already been distributed. According to the Angolan Ministry of Health, more than 110,000 treatments are now being administered each month throughout all 18 provinces in the country.

**Malaria in pregnancy:** Pregnant women are particularly vulnerable to malaria, since pregnancy reduces a woman's immunity to malaria, making her more susceptible to infection and increasing the risk of illness, severe anemia, and death. Unborn children also suffer the consequences of maternal malaria infections, including 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. The prescribed IPTp regimen is now being used in all 18 provinces, and more than 200,000 women have already received one or more treatments.

## PMI Funding

For fiscal year 2008, PMI allocated \$18.8 million in funding for malaria prevention and treatment in Angola.

## Upcoming PMI Activities

- Distribute approximately 400,000 ITNs already in-country
- Continue to distribute approximately 1.5 million ACT treatments that have already been purchased
- Strengthen laboratory diagnosis of malaria to better target the use of antimalarial drugs