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MALARIACARE

MALI, MALARIA AND MORTALITY

In Mali, malaria is the leading cause of morbidity and mortality, with 40 percent of all outpatient visits in 2014 attributed to malaria – approximately 2.5 million clinical cases – and with 2,280 fatalities reported. The disease is endemic to the central and southern regions, where over 90 percent of the population lives, and is considered an epidemic in the north. During the 2015 Malaria Indicator Survey, 32 percent of children age 6-59 months presenting with fever tested positive for malaria. Mali’s national malaria control plan 2013-2017 aims to achieve three key targets by 2017: reduce malaria mortality to near zero, reduce malaria morbidity by at least 75 percent compared to the level in 2000, and reinforce/strengthen NMCP coordination and management capacity.

MalariaCare works closely with Mali’s National Malaria Control Program (NMCP) to improve the quality of diagnostic and clinical case management services and to make malaria data more routinely accessible for decision-making. The project is assisting the regions of Kayes, Koulikoro, Sikasso, Mopti, and Ségou, and in the district of Bamako.

MALARIACARE’S GLOBAL STRATEGY

MalariaCare works in close partnership with Mali’s National Institute of Public Health Research to build the capacity of a cohort of highly qualified staff to train and routinely supervise and mentor laboratory technicians in accurate diagnosis of malaria using both microscopy and rapid diagnostic tests. MalariaCare works to:

- Improve clinical management by working closely with the NMCP to support implementation of newly approved clinical case management guidelines;
- Build the capacity of laboratory and clinical supervisors to train, supervise and mentor others at lower levels of the health system;
- Improve the collection and management of malaria case management data through the introduction of the electronic data system which supports outreach training to supervisors by guiding them step-by-step through the standards of care, and generates summary scores of health facility performance for microscopy, diagnostic tests, clinical case management, adherence and infrastructure.

MALARIACARE GOALS

BUDGET: \$890,000

TARGET AREAS: Kayes, Koulikoro, Sikasso, Mopti and Segou Regions, and Bamako District

PROJECT CYCLE: 2012 – 2017

KEY ACHIEVEMENTS TO DATE:

- Established a cohort of 39 highly qualified laboratory staff to train and routinely supervise/mentor laboratory technicians nationwide on accurate diagnosis of malaria;
- Equipped a cadre of 81 clinical experts to train, supervise and mentor other health workers on case management of malaria and other febrile diseases based on national case management guidelines;
- Directly supporting onsite supervision and mentoring to build the skills of health workers across 144 health facilities.