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U.S. PRESIDENT'S MALARIA INITIATIVE

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This FY 2021 Malaria Operational Plan has been approved by the U.S. Global Malaria Coordinator and reflects collaborative discussions with national malaria control programs and other partners. Funding available to support outlined plans is pending final FY 2021 appropriation. Any updates will be reflected in revised postings.

U.S. PRESIDENT’S MALARIA INITIATIVE

CÔTE D’IVOIRE

Malaria Operational Plan FY 2021

The U.S. President’s Malaria Initiative (PMI)—led by the U.S. Agency for International Development (USAID) and implemented together with the U.S. Centers for Disease Control and Prevention (CDC)—delivers cost-effective, life-saving malaria interventions alongside catalytic technical and operational assistance to support Côte d’Ivoire to end malaria. PMI has been a proud partner of Côte d’Ivoire since 2017, helping to decrease child death rates by 6 per 1000 (per 2019 Annual Report on the Health Situation- RASS)¹ through investments totaling almost \$100 million through fiscal year (FY) 2020.

The proposed PMI FY 2021 planning budget for Côte d’Ivoire is \$24 million. This Malaria Operational Plan (MOP) summary outlines planned PMI activities in Côte d’Ivoire for FY 2021. See accompanying **FY 2021 Budget Tables** (Tables 1 and 2) for activities and budget amounts, available on pmi.gov. Developed in consultation with the National Malaria Control Program (NMCP) and key stakeholders, proposed activities reflect national and PMI strategies, draw on best-available data, and align with the country context and health system. Proposed PMI investments support and build on those made by the Government of Côte d’Ivoire as well as other donors and partners. See **Annex A: Gap Analysis Tables** for information on commodities.

To accelerate the journey to self-reliance, PMI developed a programmatic inventory to assess the strengths and persistent challenges of the Côte d’Ivoire program. See **PMI Côte d’Ivoire MOP FY 2020, Annex B: Program Inventory**. The activities proposed in this MOP are tailored to draw on strengths and foster improvements.

Since the FY 2020 MOP was developed, the following new data, updated policy and/or strategic priorities relevant for the FY 2021 MOP have become available, including:

- The incidence of malaria remained very high at 189.9 per 1000 in the general population and 492.9 per 1000 in children under five years of age, followed by that of acute respiratory infections (ARI) which is 164.5 per 1000 children under five years of age.²
- Malaria-related mortality, which reportedly accounted for 3,133 deaths in 2018 fell to 1,587 deaths in 2019.³
- The positivity rate of rapid diagnostic tests (RDTs) and peripheral blood smears (PBSs) stayed stable from 77 percent in 2018 to 79 percent in 2019⁴; exceeding the projections made in the NFM2 for 2018 to 2020 which were respectively 64 percent in 2018, 62 percent in 2019 and 60 percent in 2020.

¹ Bilan annuel 2019 du Programme National de Lutte contre le Paludisme (Base de données).

² Rapport annuel sur la situation sanitaire (RASS) 2018, page 112.

³ Bilan annuel 2019 du Programme National de Lutte contre le Paludisme, page 18.

⁴ Base de données DHIS2_2018.

- In response to the high positivity rate of RDTs and PBSs and based on the results of the recent Malaria Behavioral Survey showing that 90.5 percent⁵ of the surveyed population are favorable to the use of insecticide-treated mosquito nets (ITNs), as well as the low use (access ratio in urban areas 0.59 versus 0.94 in rural areas; 0.36 in Abidjan), the NMCP has initiated reforms of communication strategies in urban areas to improve the rates of possession and use of ITNs.

In the Malaria National Strategic Plan 2021-2025 (*Plan Stratégique National – PSN*), to be validated in 2020, innovative activities were proposed to more effectively fight malaria. These include:

- The use of a stratified approach to target interventions throughout the country for better impact.⁶
- The introduction of community distribution of ITNs to fill any gaps following the mass distribution campaign.⁷
- Distribution of ITNs to children under five years of age in nurseries and daycare settings.⁸
- Targeted outreach strategies in large villages located less than five kilometers from a health center with more than 2000 inhabitants with high endemicity and difficult access.⁹
- Determination of districts eligible for seasonal malaria chemoprevention (SMC).¹⁰
- Monitoring of the durability and residual efficacy of ITNs.¹¹
- A follow-up study on the effectiveness and quality of indoor residual spraying (IRS).¹²

For more information about the malaria situation, malaria control progress, and intervention-specific data in Côte d’Ivoire, please refer to the FY 2020 MOPs available on pmi.gov.

⁵ Malaria Behaviour Survey, page 43.

⁶ Plan Stratégique National (PSN) 2021-2025, page 46.

⁷ Rapport évaluation post- campagne MILDA 2017-2018, page 55.

⁸ Plan Stratégique National (PSN) 2021-2025, page 57.

⁹ Plan Stratégique National (PSN) 2021-2025, page 59.

¹⁰ Plan Stratégique National (PSN) 2021-2025, page 61.

¹¹ Plan Stratégique National (PSN) 2021-2025, page 61.

¹² Plan Stratégique National (PSN) 2021-2025, page 64.

Annex A. Gap Analysis Tables

Insecticide-treated Mosquito Net (ITN) Gap Analysis			
Calendar Year	2020	2021	2022
Total targeted population ¹	27,614,525	28,332,503	29,069,148
Continuous Distribution Needs			
Channel #1: ANC ²	1,082,351	905,733	932,422
Channel #2: EPI ³	2,306,132	1,194,753	1,232,416
Channel #3: Specific sites	161,565	0	0
Estimated total need for continuous channels	3,550,048	2,100,486	2,164,838
Mass Campaign Distribution Needs			
2020 mass distribution campaign ⁴	17,494,928	0	0
Estimated total need for campaigns	17,494,928	0	0
Total ITN Need: Routine and Campaign	21,044,976	2,100,486	2,164,838
Partner Contributions			
ITNs carried over from previous year	185,754	178,395	458,395
Stock available and usable at the end of the previous year	1,273,121	0	0
ITNs from MOH	840,000	280,000	280,000
ITNs from Global Fund ⁵	16,108,961	1,302,301	1,342,200
ITNs from other donors	0	0	0
ITNs planned with PMI funding	2,815,535	798,185	822,638
Total ITNs Available	21,223,371	2,558,881	2,903,233
Total ITN Surplus (Gap)	178,395	458,395	738,395

¹ Population used is from EPI unit. This differs from the population used in the 2018 MOP that had been estimated based on the 2014 general census. The annual population growth rate is 2.6%.

² Population * % pregnant women (5% in 2019, 2020; 4% in 2021, 2022) * ANC1 attendance rate * NMSP objective for coverage rate (90%).

³ Population * percentage of children <1 year (3.24%) * EPI attendance (X%) * NMSP objective for coverage rate (90%) PLUS Population * percentage of children 1-5 years (12.03%) * OPD attendance rate (X%) * NMSP objective for coverage rate (90%).

⁴ Based on historic need of ITNs from previous campaign. There has been a historical increase of approximately 10% between campaigns.

⁵ In 2021, the "New Nets Project" will acquire 389,226 for routine distribution and 913,075 under NFM3 (total= 1,302,301).

Sulfadoxine-Pyrimethamine (SP) Gap Analysis			
Calendar Year	2020	2021	2022
Total population ¹	27,614,525	28,332,503	29,069,148
SP Needs			
Number of Pregnant Women Estimated ²	1,380,726	1,133,300	1,162,766
Total number of pregnant women attending ANC1 ³	1,202,613	1,006,371	1,036,024
Total number of pregnant women attending ANC2 ⁴	1,010,195	905,733	932,422
Total number of pregnant women attending ANC3 ⁵	848,563	815,160	839,180
Total number of pregnant women attending ANC	3,061,371	2,727,264	2,807,626
Total SP Need (in treatments) ⁶	2,449,096	2,181,811	2,246,101
Partner Contributions			
SP carried over from previous years	881,626	377,601	
Stock available and usable at the end of the previous year	1,205,071	0	0
SP from Government	0	0	1,000,000
SP from Global Fund	0	1,804,211	1,246,101
SP from other donors	0	0	0
SP planned with PMI funding	740,000	0	0
Total SP Available	2,826,697	2,181,812	2,246,101
Total SP Surplus (Gap)	377,601	0	0

¹ Population used is from EPI unit. This differs from the population used in the 2018 MOP that had been estimated based on the 2014 general census.

² Population * % of pregnant women (5% in 2019, 2020; 4% in 2021, 2022).

³ # of pregnant women * ANC1 attendance rate

⁴ # pregnant women attending ANC1 - number of pregnant women attending ANC1 * drop out rate between ANC visits.

⁵ # pregnant women attending ANC2 - number of pregnant women attending ANC2 * drop out rate between ANC visits.

⁶ # pregnant women attending any ANC * NMSP IPTp coverage objective (80%).

Rapid Diagnostic Test (RDT) Gap Analysis			
Calendar Year	2020	2021	2022
RDT Needs			
Total country population ¹	27,614,525	28,332,503	29,069,148
Population at risk for malaria ²	27,614,525	28,332,503	29,069,148
Total number of projected fever cases ³	8,738,347	8,736,456	9,128,242
Percent of fever cases tested with an RDT ⁴	6,447,335	6,434,935	6,723,509
Total RDT Needs	6,447,335	6,434,935	6,723,509
Partner Contributions (to PMI target population if not entire area at risk)*			
RDTs carried over from previous year	310,878	493,719	493,719
Stock available to use at the end of the previous year	0	0	0
RDTs from Government	0	0	0
RDTs from Global Fund	4,206,475	3,989,660	4,168,576
RDTs from other donors	0	0	0
RDTs planned with PMI funding	2,423,701	2,445,275	2,554,933
Total RDTs Available	6,941,054	6,928,654	7,217,227
Total RDT Surplus (Gap)	493,719	493,719	493,718

¹ Population used is from EPI unit. This differs from the population used in the 2018 MOP that had been estimated based on the 2014 general census. The annual population growth rate is 2.6%.

² Geographic coverage: 100% of the country is at risk.

³ Fever cases estimated based on predicted average number of fevers by age group: <1 (3.2), 1-5 (1.5), 6-13 (0.6), >13 (0.33)

⁴ # estimated fever cases * NMSP coverage objective (80%) * % fevers treated in public sector (excluding the for-profit private sector)

Artemisinin-based Combination Therapy (ACT) Gap Analysis			
Calendar Year	2020	2021	2022
ACT Needs			
Total country population ¹	27,614,525	28,332,503	29,069,148
Population at risk for malaria ²	27,614,525	28,332,503	29,069,148
PMI-targeted at-risk population			
Total projected number of malaria cases ³	4,954,469	6,354,499	6,471,378
Total ACT Needs ⁴	4,607,656	5,710,631	5,966,723
Partner Contributions (to PMI target population if not entire area at risk)			
ACTs carried over from previous year	1,547,138	2,630,192	0
Stock available to use at the end of the previous year	0	0	0
ACTs from Government	0	0	0
ACTs from Global Fund	4,463,210	4,098,216	4,282,000
ACTs from other donors	0	0	0
ACTs planned with PMI funding	1,227,500	1,612,415	1,684,724
Total ACTs Available	7,237,848	5,710,631	5,966,723
Total ACT Surplus (Gap)	2,630,192	0	0

¹ Population used is from EPI unit. This differs from the population used in the 2018 MOP that had been estimated based on the 2014 general census. The annual population growth rate is 2.6%.

² Geographic coverage: 100% of the country is at risk

³ #malaria cases = # tested * estimated % positive test

⁴ #malaria cases * NMSP coverage objective (100%) * % uncomplicated malaria (93%) + severe malaria (7%)