



## Malaria Champions of the Americas 2010 Finalists



**Name of nominee:** Foundation for Health Surveillance of the Amazon

**Institutional affiliation:** Linked to the Superintendent of Health of the Amazon / SUSAM Brazil

**Start Date:** 11/2007

**Anticipated End Date:** 12/2010

**Program:** MULTI- ANNUAL PLAN OF INTEGRATED PREVENTION AND CONTROL OF MALARIA IN THE STATE OF AMAZONAS

The state of Amazonas is the largest state in Brazil and the number of cases of malaria reported has been increasing over the years. Control measures implemented have achieved significant reductions in endemic levels. However, such measures do not achieve the desired success regarding the sustainability of these results, mainly due to the discontinuity of actions and the lack of partnerships within and outside the health sector.

To respond to the increasing cases being reported, the State Government of Amazonas created the Multi-year Plan for the Prevention and Control of Malaria. Through partnership with all levels of the Brazilian government, NGOs, and private companies, the Plan hopes to implement policies for the prevention and control of malaria in the Amazonas state by reducing the social and economic damages due to illness, minimizing the population's exposure to risk factors, and expanding governance in the health sector over the control of malaria transmission.

Under this plan the federal government oversees training of personnel, procurement of bed nets, supplying laboratories, and proving support services to the work being implemented at the state and municipal levels. The plan covers 62 municipalities in the state, which corresponds to 83% of the population and 94% of the incidence of malaria. The program is monitored and evaluated on a regular basis at municipal and state levels through monthly reporting and regional and macro regional workshops.

As a result of this program, mandatory evaluation and implementation plans for malaria control have been incorporated into the State Health Code. The network of laboratories has expanded, targeted spraying was carried out, insecticide-treated bed nets have been distributed, and educational materials on the risk factors have been distributed. A 60% reduction in the reported cases of malaria is expected through December 2010 compared with 2007. The results also report a 60% reduction in malaria-related deaths in 2009 from the previous year. Over 7000 professionals were trained in the prevention and control of malaria, 231 laboratories were created, more than 75,000 bed nets distributed, over 350,000 homes were sprayed, and more than 2.7 million diagnostic exams tested for malaria between January 2008 and June 2010.



**Name of Nominee:** Administrative Department of Health and Social Security of the Chocó (DASALUD-Chocó)

**Institutional affiliation:** Ministry of Social Welfare - Department of Chocó

**Country:** Colombia

**Start Date:** January 2006

**Anticipated End Date:** December 2009

In the last four years, DASALUD Chocó, with support from the Ministry of Social Protection (MPS) - National Health Institute (INS) and the Pan American Health Organization (PAHO), reoriented and strengthened the program to prevent and control malaria, prioritizing municipalities and localities with the highest concentration of cases, complications and deaths.

For this purpose several strategic actions were undertaken such as improving administrative and operational management of the program, strengthening public health surveillance, improving access of treatment to the population, implementation of rapid tests diagnosis in areas that are difficult to access, capacity building, and pilot participatory distribution of long-lasting insecticidal bed nets (LLINs) in various locations of four municipalities in the department with the highest transmission.

DASALUD-Chocó has forged alliances with different stakeholders to address the sustainability of the program due to gaps in the health system at national level that likewise do not take into account the reality of the Chocó region. Collaborations include the institutions providing services responsible for managing health network diagnosis and treatment, municipalities, health insurance companies, NGOs, and the United Nations System for their cooperation in the prevention and control.

DASALUD-Chocó reports over the past two years that incidence has been reduced by more than half, the improvement of surveillance system can now provide timely information at the local and municipal levels which can guide decision-makers on malaria control strategies, the implementation of community education processes which have enabled better use of the long-lasting insecticidal bed nets, and an increased demand for adherence to diagnosis and treatment of malaria.



**Name of the nominee:** National Malaria Board  
**Institutional affiliation:** Ministry of Health Suriname  
**Country:** Suriname  
**Start Date:** July 28th, 1995  
**Anticipated End Date:** October 5th, 2011

In 1995 the Government of Suriname established the National Malaria Board (NMB), an advisory body consisting of representatives of key stakeholders with executive power. Having achieved nearly a 90% decrease in the incidence of malaria through the procurement of special funding, the National Malaria Board aimed to further diminish and eventually eliminate malaria from Suriname. Currently malaria has virtually disappeared from the villages in the interior and remains mainly in the gold mining fields. A Global Fund grant was awarded and specifically aimed at malaria in the gold mining fields and other mobile populations in the interior. In this grant, partnerships with small scale gold miners were made at the level of training lay people in the diagnosis and treatment of uncomplicated malaria in the mining fields. Additionally efforts were made to continuously monitor malaria recurrence in the villages by weekly surveillance, active case detection when needed and entomological surveys and interventions where appropriate.

Because malaria cases are mainly diagnosed in mining and other mobile populations, health promotion programs were produced in three languages explaining the availability of malaria services for free and the need for a common effort to control malaria in Suriname. A malaria laboratory was established in the community where gold miners live which provides information on malaria prevention and distributes bed nets. The staff is trained in lab diagnosis, treatment and prevention and also speaks Portuguese since this unit is mostly visited by the Brazilian population. The National Malaria Board states that partnership with the gold-mining community was key to the success of recording and reporting cases of malaria.

Through the strategic decisions and under the guidance of the National Malaria Board, a trans-border collaboration was established due to the high rates of malaria transmission on the East border of Suriname with French Guyana. The project also counted on the collaboration of the University of Suriname and its establishment of the Malaria Gene Bank and establishment of a molecular baseline for the periodic molecular surveys which trace the occurrence of mutations, enabling the monitoring of the emergence and dynamics of drug resistance, resulting in the facilitation of timely and efficient decision-making in malaria policy.