

Niger

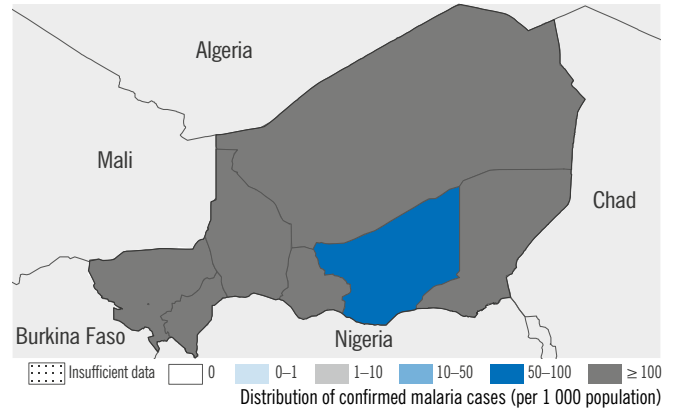
Phase: Control. Coverage: In 2010, ITN/LLINs delivered were sufficient to protect >50% of the population at risk.

I. EPIDEMIOLOGICAL PROFILE

Population (UN Population Division)	2010	%
High transmission (≥ 1 case per 1000 population)	10 700 000	69
Low transmission (0-1 cases per 1000 population)	4 810 000	31
Malaria-free (0 cases)	0	0
Total	15 510 000	100

Parasites and vectors

Major plasmodium species: *P. falciparum* (79%), *P. vivax*
 Major anopheles species: *An. gambiae*, *arabiensis*, *funestus*



II. INTERVENTION POLICIES AND STRATEGIES

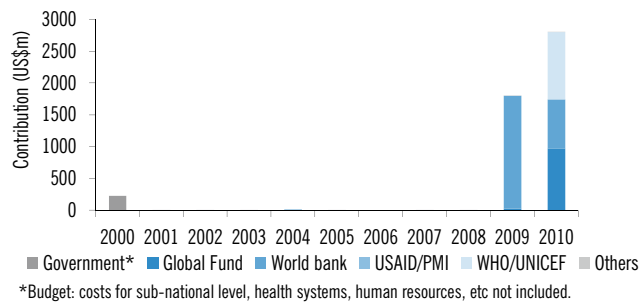
Intervention	WHO-recommended policies/strategies	Yes/No	Year adopted
ITN	ITNs/ LLINs: distributed free of charge	Yes	2005
	ITNs/ LLINs: distributed to all age groups	No	-
IRS	IRS is recommended	Yes	2003
	DDT is used for IRS	No	-
IPT	IPT used to prevent malaria during pregnancy	Yes	2005
Case management	Patients of all ages should receive diagnostic test	No	-
	RDTs used at community level	Yes	2006
	ACT is free for all ages in public sector	No	-
	Pre-referral treatment with recommended medicines	Yes	1998
	Oral artemisinin-based monotherapies are not registered	No	-

Antimalarial policy	Medicine	Year adopted
First-line treatment of unconfirmed malaria	AL	2005
First-line treatment of <i>P. falciparum</i>	AL	2005
Treatment failure of <i>P. falciparum</i>	QN	2005
Treatment of severe malaria	QN	2005
Treatment of <i>P. vivax</i>	-	-

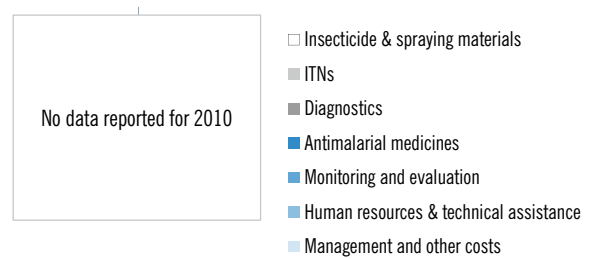
Therapeutic efficacy tests (therapeutic or parasitological failure, %)

Medicine	Year	No. of Studies	Min	Median	Max	Follow-up
AL	2006-2006	1	4.4	4.4	4.4	28 days

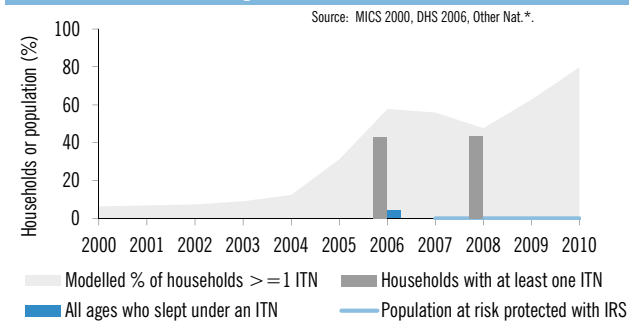
III. FINANCING – Government and external financing



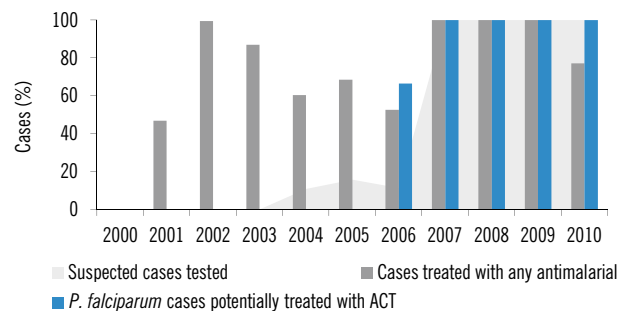
Expenditure by intervention in 2010



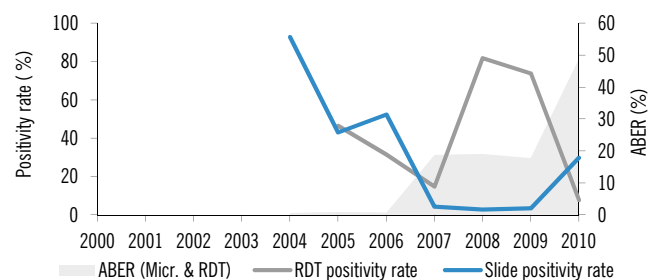
IV. COVERAGE – Coverage of ITN and IRS



Cases tested and ACT delivered: Programme data (public sector)



V. IMPACT – Malaria test positivity rate and ABER



Confirmed cases, admissions and deaths (per 100 000)

