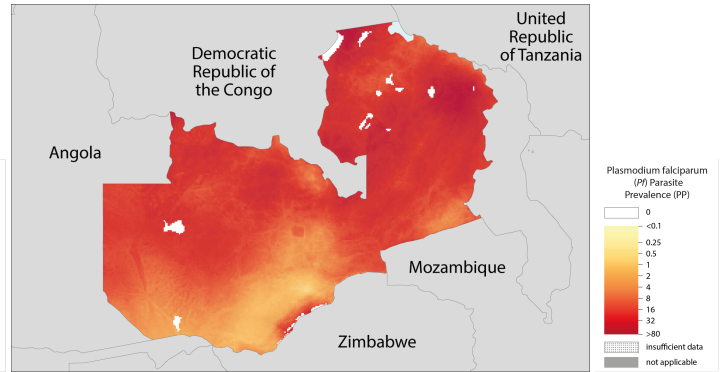
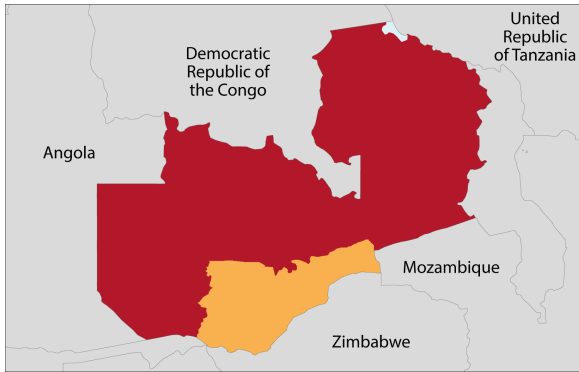


# Zambia

African Region



## I. Epidemiological profile

Population (UN Population Division)	2017	%
High transmission (>1 case per 1000 population)	17.1M	100
Low transmission (0-1 case per 1000 population)	0	-
Malaria free (0 cases)	0	-
Total	17.1M	

Parasites and vectors			
Major plasmodium species:	P.falciparum: 100 (%) , P.vivax: 0 (%)		
Major anopheles species:	An. gambiae, An. funestus, An. arabiensis		
Reported confirmed cases (health facility):	5 505 639	Estimated cases:	3.5M [2.5M, 4.9M]
Confirmed cases at community level:	593 271		
Confirmed cases from private sector:	-		
Reported deaths:	1425	Estimated deaths:	7.6K [6.6K, 8.6K]

## II. Intervention policies and strategies

Intervention	Policies/Strategies	Yes/No	Year adopted
ITN	ITNs/LLINs distributed free of charge	Yes	2005
	ITNs/LLINs distributed to all age groups	Yes	1998
IRS	IRS is recommended	Yes	1964
	DDT is used for IRS	Yes	2001
Larval control	Use of Larval Control	No	
IPT	IPT used to prevent malaria during pregnancy	Yes	2001
Diagnosis	Patients of all ages should receive diagnostic test	Yes	2001
	Malaria diagnosis is free of charge in the public sector	Yes	2000
Treatment	ACT is free for all ages in public sector	Yes	2003
	The sale of oral artemisinin-based monotherapies (oAMTs) is banned	banned	2003
	Single dose of primaquine (0.25 mg base/kg) is used as gametocidal medicine for P. falciparum	No	-
	Primaquine is used for radical treatment of P. vivax	No	-
	G6PD test is a requirement before treatment with primaquine	No	-
	Directly observed treatment with primaquine is undertaken	No	-
	System for monitoring of adverse reaction to antimalarials exists	Yes	2006
Surveillance	ACD for case investigation (reactive)	Yes	2011
	ACD at community level of febrile cases (pro-active)	Yes	2011
	Mass screening is undertaken	No	-
	Uncomplicated P. falciparum cases routinely admitted	No	-
	Uncomplicated P. vivax cases routinely admitted	No	-
	Case and foci investigation undertaken	No	-
Case reporting from private sector is mandatory	No	-	

Antimalaria treatment policy		Medicine	Year adopted				
First-line treatment of unconfirmed malaria		AL	2002				
First-line treatment of P. falciparum		AL	2002				
For treatment failure of P. falciparum		QN	2002				
Treatment of severe malaria		AS; AM; QN	2002				
Treatment of P. vivax		-	-				
Dosage of primaquine for radical treatment of P. vivax							
Type of RDT used							
Therapeutic efficacy tests (clinical and parasitological failure, %)							
Medicine	Year	Min	Median	Max	Follow-up	No. of studies	Species
AL	2012-2016	0	0	0	28 days	6	P. falciparum
DHA-PPQ	2016-2016	0	0	0	28 days	3	P. falciparum
Resistance status by insecticide class (2010-2017) and use of class for malaria vector control (2017)							
Insecticide class	Years	(%) sites <sup>1</sup>	Vectors <sup>2</sup>	Used <sup>3</sup>			
Carbamates	2011-2017	59.3% (86)	An. funestus s.l., An. gambiae s.l.	No			
Organochlorines	2010-2017	42.47% (73)	An. funestus s.l., An. gambiae s.l., An. gambiae s.s.	No			
Organophosphates	2011-2017	2.78% (72)	An. funestus s.l.	Yes			
Pyrethroids	2011-2017	82.08% (106)	An. funestus s.l., An. gambiae s.l., An. gambiae s.s.	Yes			

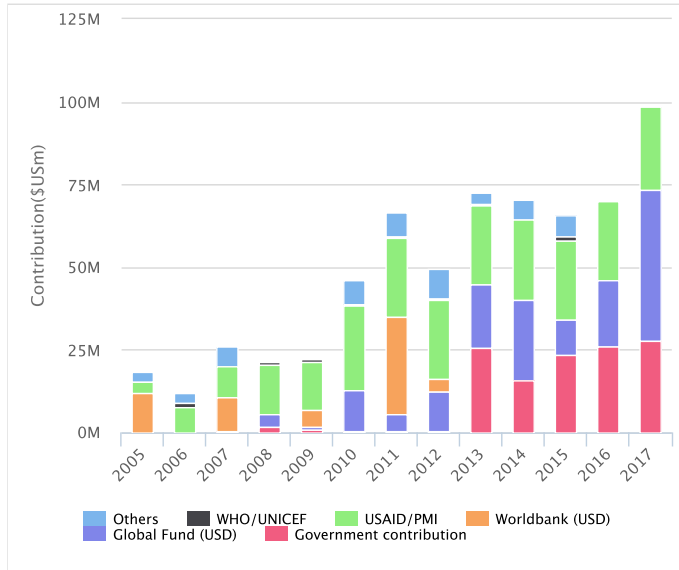
<sup>1</sup>Percent of sites for which resistance confirmed and total number of sites that reported data (n)

<sup>2</sup>Principal vectors that exhibited resistance

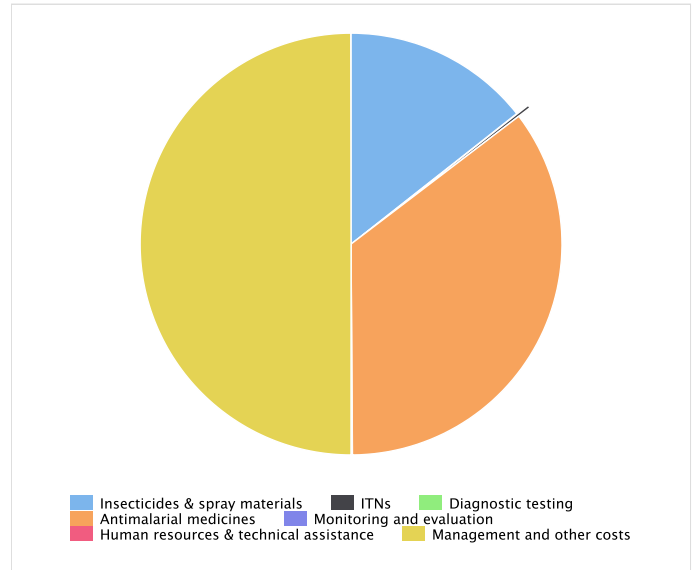
<sup>3</sup>Class used for malaria vector control in 2017

III. Charts

Sources of financing



Government expenditure by intervention in 2017

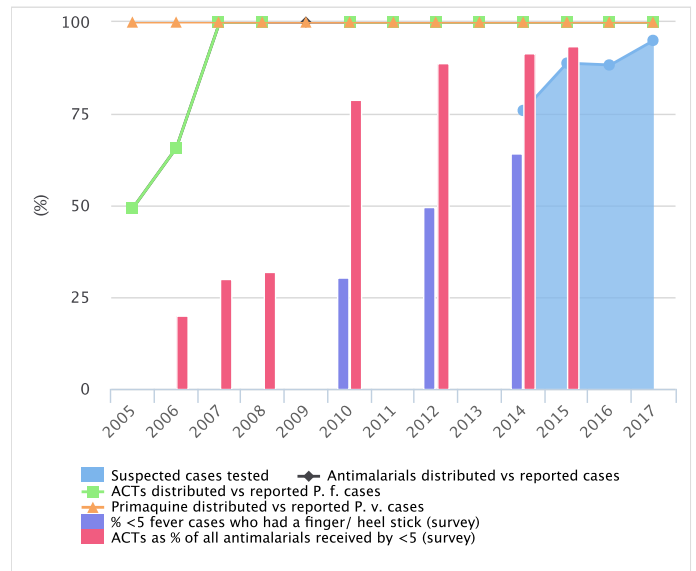


IV. Coverage

Coverage of ITN and IRS



Cases tested and treated in public sector

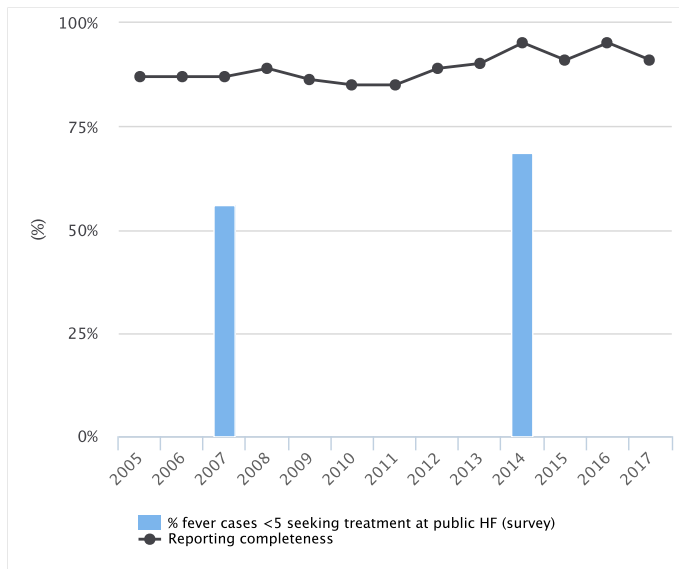


Source: DHS 2007, 2014, MIS 2012, 2015, Other Nat.\*

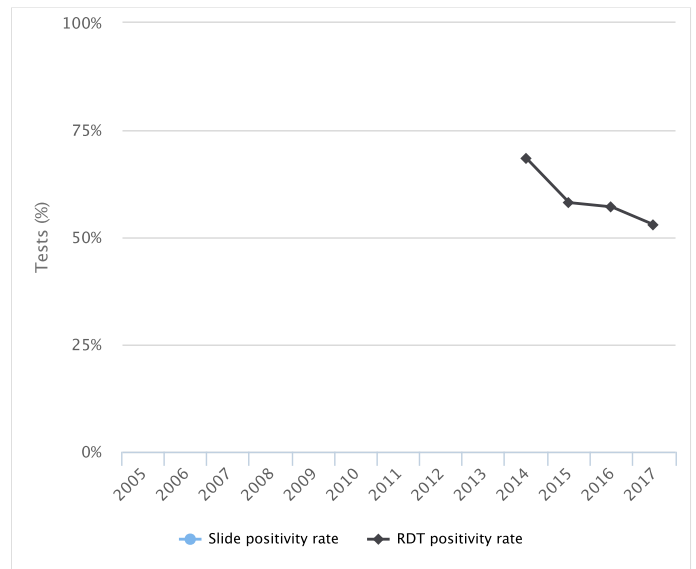
Source: DHS 2007, 2014, MIS 2012, 2015, Other Nat.\*

V. Impact

Cases treated



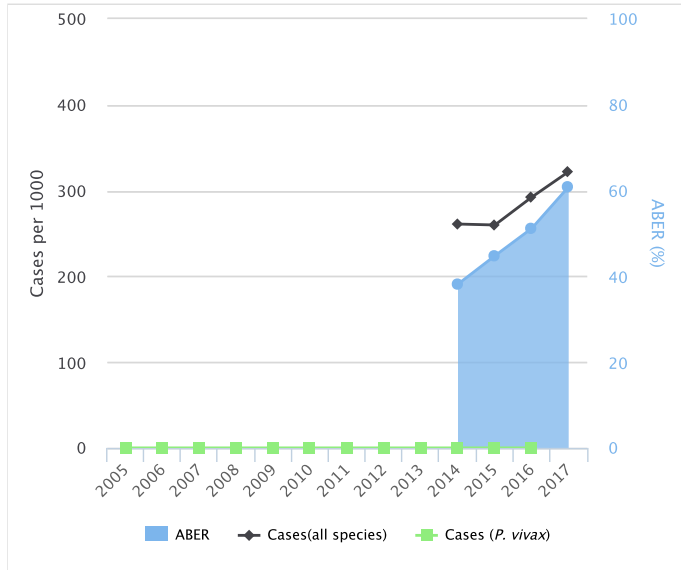
Test positivity



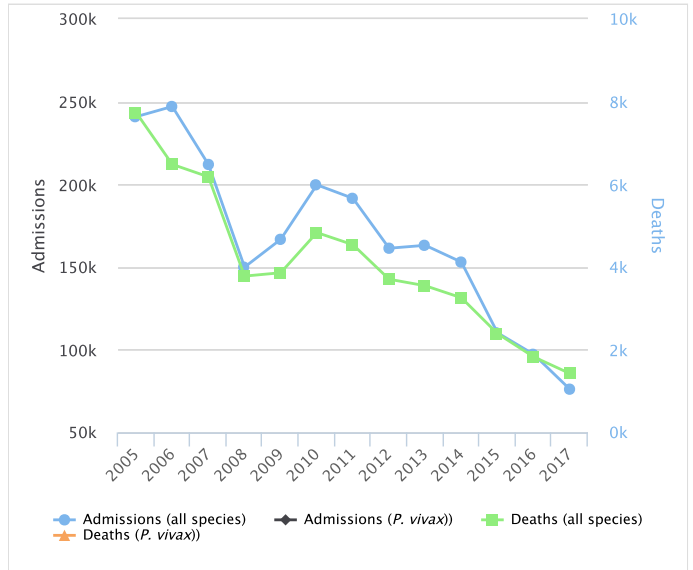
Source: DHS 2007, 2014

V. Impact

Confirmed malaria cases per 1000 and ABER



Malaria admissions and deaths



World Malaria Report 2018