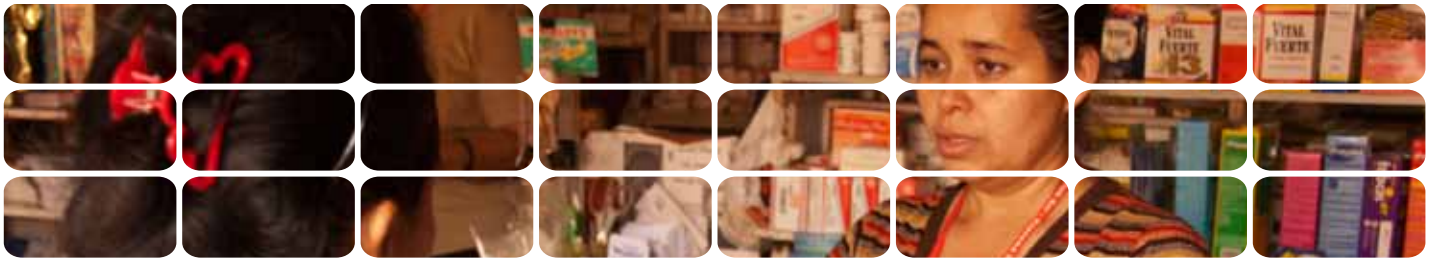
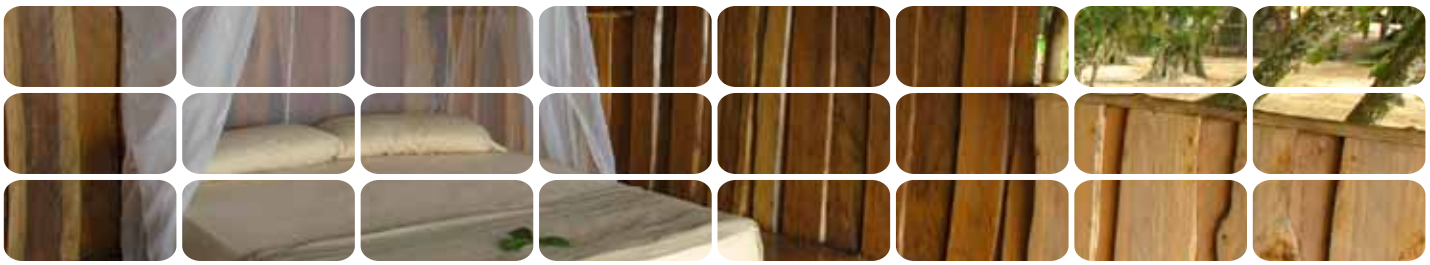
USAID
FROM THE AMERICAN PEOPLE



AMAZON MALARIA INITIATIVE

PROGRESS IN PREVENTION AND CONTROL



Pan American Health Organization

World Health Organization
REGIONAL OFFICE FOR THE Americas

CDC
SAFER · HEALTHIER · PEOPLE

SIAPS
Systems for Improved Access to Pharmaceuticals and Services

USAID FROM THE AMERICAN PEOPLE | USP
PROMOTING THE QUALITY OF MEDICINES

WHAT IS AMI?

The United States Agency for International Development (USAID) launched the Amazon Malaria Initiative (AMI) in 2001 to improve the prevention and control of malaria in the Amazon basin. Because malaria transmission transcends international borders, AMI takes a regional approach that complements country-specific activities carried out by 11 participating South and Central American countries. AMI strengthens participating countries' malaria control programs to adequately identify, support, and implement interventions against malaria, as well as to incorporate best practices into their work, to adapt responses to the ever-changing malaria context, to consider populations living in special circumstances, to monitor the emergence and spread of resistance to antimalarials, and to address the risks of malaria reemergence. Through AMI, USAID helped to create the Amazon Network for the Surveillance of Antimalarial Drug Resistance (RAVREDA) and promotes South-South collaboration among participating countries with support from international technical partners. The established partnerships have helped to ensure that investments in drug resistance and epidemiological surveillance, vector control, prevention, diagnosis, and treatment for malaria control are effective and sustainable, as well as contribute to health systems strengthening. The novel structure of this multi-pronged effort is led by a Steering Committee that allows for shared management and coordination among USAID, the Pan American Health Organization (PAHO), and other technical and country partners.

AMI'S MULTI-PRONGED APPROACH

- Improvement of access to quality diagnosis and treatment
- Epidemiological surveillance
- Monitoring of efficacy of antimalarial medicines
- Prevention and containment of resistance to antimalarial medicines
- Vector surveillance and control
- Integrated vector management
- Quality assurance and control of pharmaceuticals and other antimalarial supplies
- Health systems strengthening
- Communication, advocacy, and networking

AMI participates in:

World Malaria Day
April 25

Malaria Day in the Americas
November 6

PHOTO: LINKS MEDIA
MAP: ALL-FREE-DOWNLOAD.COM

MALARIA IN THE AMERICAS

Malaria is a vector-borne disease endemic to 21 countries in the Americas. It is both preventable and treatable, however no vaccine currently exists. Malaria is a bellwether of the management and quality of public services in countries of the Amazon basin and Central America. The Americas region has two main species of malaria: *Plasmodium vivax,* the predominant malaria parasite, and *Plasmodium falciparum*, a more dangerous but less frequent form of the disease that can be fatal.

Efforts to protect the people of the Americas against malaria are working.

From 2001–2012, the number of cases of malaria in the region declined by 60%. Mortality due to malaria fell by 72%.

However, 120 million people who live in malaria-endemic regions are still at risk.

PROGRESS IN AMI COUNTRIES

Reductions in Malaria Incidence

Significant progress has been made in malaria prevention and control through a variety of interventions in AMI partner countries. All participating AMI countries have achieved or are on track to achieve the Roll Back Malaria/Millennium Development Goals for malaria control by 2015.

From 2000 to 2012, six AMI countries achieved reductions of >75% in malaria incidence: Belize, Ecuador, Guatemala, Honduras, Nicaragua, and Suriname. Three more AMI countries — Brazil, Colombia and Peru — are projected to achieve reductions of >75% by 2015. Panama is projected to achieve a reduction of 25%–50% by 2015, and only Guyana had an increase in the number of cases during the period.

PHOTO: JULIE DE CARVALHO
BACKGROUND PHOTO: RONEN BOIDEK. SHUTTERSTOCK

As malaria changes — AMI adapts

Enduring vigilance is needed to keep up with rapidly evolving malaria parasites. In the 1990s, *P. falciparum* was documented to be resistant to the antimalarial drug chloroquine in the Amazon basin. This prompted USAID to help create the RAVREDA network to address the problem. RAVREDA is now among the most effective regional surveillance networks for antimalarial resistance in the world. As progress was made in introducing artemisinin-based combination therapy (ACT), the areas of epidemiological surveillance, vector control and systems strengthening received further attention.

Today, both Central American and Amazon basin countries face the possible emergence of resistance to antimalarial drugs including chloroquine and artemisinin derivatives. In addition, countries need to confront the challenge of malaria control in low transmission settings and of populations living under special circumstances. International technical partners collaborate with countries to monitor, prevent and contain antimalarial drug resistance, as well as to address malaria among remote, scattered, and mobile populations such as gold miners and migrant agricultural workers.

AMI responds to changes in the enabling environment for malaria control

Decentralization of health systems, low levels of funding for national malaria control programs (NMCPs) in the region and other issues are being addressed through AMI's regional, collaborative approach. For this reason, USAID promotes health systems strengthening, advocacy, and the development of differentiated approaches to malaria prevention and control for use in varied epidemiological contexts.

PARTNERSHIPS ARE KEY TO AMI'S SUCCESS

PHOTO: PAHO

AMI is a collaborative effort that brings together participating countries and international technical partners. Ministries of health and NMCPs are essential partners that carry out malaria prevention and control activities in countries of the Amazon basin and Central America, and collaborate in an ongoing exchange of information and expertise. International technical partners cooperate with the countries in a variety of complementary roles:

United States Agency for International Development (USAID)

Supports effective regional malaria control efforts by providing technical assistance and directing resources using a common framework to select and coordinate activities in priority countries, with the aim of improving efforts at the regional and national levels and contributing to the institutionalization of proven interventions on multiple levels (i.e. regional, national, sub-national).

Pan American Health Organization (PAHO)

Coordinates the development of standard policies, strategic plans, interventions, guidelines, and protocols in priority countries together with USAID. Provides technical assistance (TA) in malaria prevention, surveillance, early detection, diagnosis and treatment, and containment of outbreaks. Carries out integrated vector management. Supports health systems strengthening, country-level capacity building, and operational research. Procures antimalarial medicines on behalf of selected countries.

United States Centers for Disease Control and Prevention (CDC)

Provides TA and training in epidemiological surveillance, monitoring of efficacy of and resistance to antimalarials (using *in vivo* efficacy studies, *in vitro* and molecular biology tools), vector surveillance and control, malaria diagnosis, etc.

Management Sciences for Health (MSH)/Systems for Improved Access to Pharmaceuticals and Services (SIAPS)

Conducts operational research and provides TA in pharmaceutical management with a focus on medicine availability, prescribing and dispensing practices, patient adherence to treatment regimens, and supply chain management for malaria medicines and supplies.

PHOTO: GRACY OBUCHOWICZ

United States Pharmacopeial Convention (USP)/Promoting the Quality of Medicines (PQM)

Provides specialized TA to institutionalize approaches to quality assurance for antimalarials, with a focus on quality control monitoring throughout the supply chain, strengthening official medical control laboratories' capacity to analyze medicines and provide consistent and reliable results, and strengthening of medicine regulatory authorities.

Links Media

Provides communication and advocacy strategies to lay the groundwork for sustainability of regional collaborative efforts for malaria control. Identifies appropriate audiences, key messages, channels, information, education and communication (IEC)/behavior change communication (BCC) interventions, and other activities for information dissemination, communication and advocacy. Develops evidence-based messages and materials for effective engagement of policymakers, partners and stakeholders.

COVER PHOTOS: LINKS MEDIA, CDC, ISTOCK

DISCLAIMER

The views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development or the United States Government. March 2015.