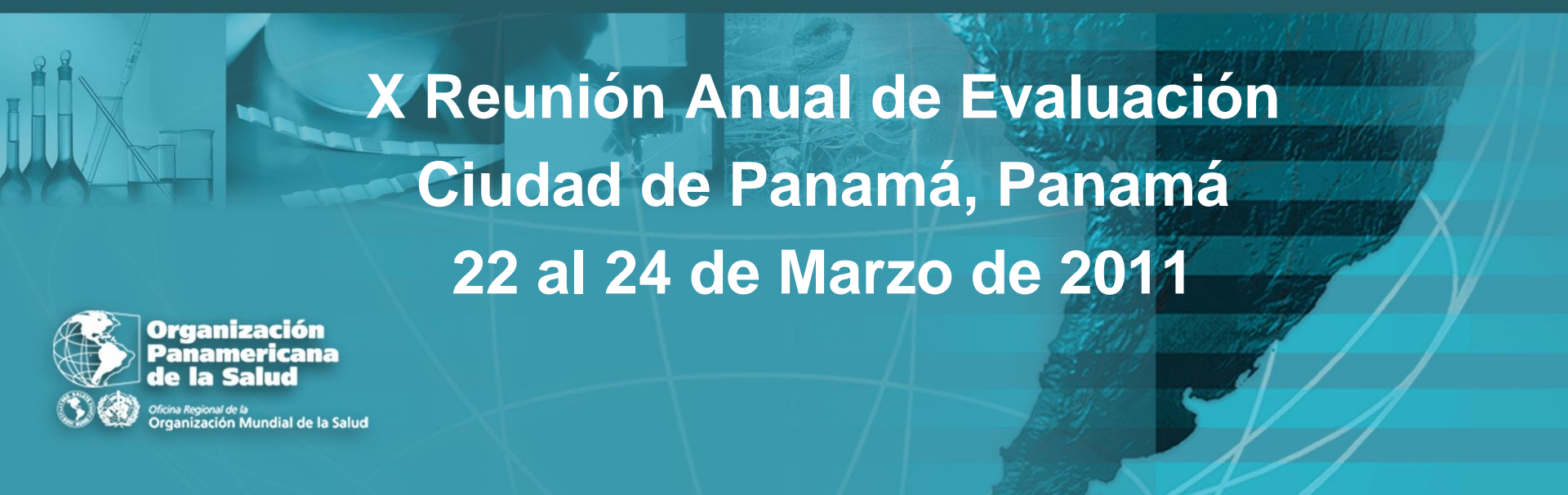




APORTES RELEVANTES DE OPS AMI/RAVREDA



**X Reunión Anual de Evaluación
Ciudad de Panamá, Panamá
22 al 24 de Marzo de 2011**



**Organización
Panamericana
de la Salud**



Oficina Regional de la
Organización Mundial de la Salud

PAHO's contribution

- AMI, has contributed to catalyze the impact in the fight against malaria and strongly in reducing the burden of malaria in the countries involved in RAVREDA, as the major donor of external budget for the Regional Malaria Program in PAHO.
- Technical cooperation plus collaboration with AMI partners and countries in implementation of AMI/RAVREDA activities.
- PAHO support country efforts in various areas of malaria work formation of a sentinel surveillance network; training of human resources from control programs; adaptation of new tools; promotion of cooperation among countries; procurement of malaria supplies, drug efficacy/resistance studies; laboratory diagnosis: quality and access; drug access and use; drug quality; ACT implementation; rational selection and evaluation of vector control actions; insecticide resistance surveillance; malaria information analysis., among others.
- Provide strong alignment with and support to the implementation of the components of the Regional Strategic Plan for Malaria in the Americas 2006 – 2010

PAHO's contribution

- The linkage and close coordination between AMI's efforts and the framework provided by the PAHO Regional Plan effectively influenced the remarkable reduction in malaria burden in the AMI/RAVREDA countries.
- The model of partnership promoted by AMI, which strengthens not only the alliance of international organizations and countries but also facilitate south-to-south collaborations, has been lauded in the Region and non-Amazon countries have indicated strong interest in having similar efforts.
- Since 2008, PAHO has engaged in the process of extending its efforts in Central American countries, Belize, Guatemala, Honduras, Nicaragua and Panama already initiated some activities following AMI experiences, also Dominican Republic and Haiti, and the South American countries will mimic AMI experiences
- Dominican Republic and Haiti in Hispaniola, aimed at reducing the malaria burden on the island, both countries have expressed interest in benefiting from the AMI experiences as well.

PAHO's contribution

- Development and consolidation of the Regional Strategic Plan for Malaria in the Americas for the 2011 to 2015 period, celebrating, promoting, and reinforcing the best practices in the prevention and control of malaria is indispensable.
- Technical cooperation to member states in development of malaria proposals to the Global Fund, and other initiatives.
- AMI is among the most important and best practices in the prevention and control of malaria in the Americas and its engagement on the Region's efforts to prevent, control, and eliminate malaria (in areas deemed feasible) should likewise continue and endure.

....As history has taught us many times, it is a huge mistake to relax and disengage on malaria efforts once burden reductions have been achieved. Stakeholders must remain vigilant and unwavering in their commitment.

Malaria burden progress in AMI countries since 2001

Country	Total number of cases 2009	Percentage change since 2001	Annual Parasitic Index (API)	Slide Positivity Rate (SPR)
Belize	256	-76.7	1.125	0.98
Bolivia	9,743	-38.2	8.458	7.35
Brazil	308,498	-20.6	6.386	11.78
Colombia	79,252	-65.7	7.802	18.52
Ecuador	4,120	-96.2	0.578	0.92
Guyana	13,673	-49.6	19.567	8.08
Honduras	9,216	-61.8	2.787	8.66
Nicaragua	610	-94.2	0.166	0.11
Panama	778	-16.2	0.233	0.49
Peru*	42,214	-46.3	6.541	5.30
Suriname	1,371	-91.4	31.040	4.63

* Data from 2008, 2009 was incomplete

Negative value in percent change decrease in total number of cases; positive indicates increase

API of <1 is a criterion for a country to be considered in Pre-elimination Phase

SRP of <5 in fever cases is a criterion for good control status