Mali transmission is more intense in the south of Mali. The annual reported number of malaria cases in 2018 was 2,614,104 with 1,001 deaths.
Malaria

Sustaining Essential Health Services During the COVID-19 Pandemic

The COVID-19 pandemic is putting an incredible strain on health systems across Africa. Health systems are required to maintain routine health services for other illnesses even as they handle the additional burden. In order to prevent widespread morbidity and mortality, it is of vital importance that we work to sustain the delivery of essential life-saving interventions during this difficult time including for Reproductive, Maternal, Newborn, Child and Adolescent health and malaria.

WHO underlines the critical importance of sustaining efforts to prevent, detect and treat malaria during the COVID-19 pandemic. It is of vital importance to ensure the continuity of malaria prevention and treatment services including distribution of insecticide-treated nets and indoor residual spraying, as well as chemoprevention for pregnant women and young children (intermittent preventive treatment in pregnancy and seasonal malaria chemoprevention). Any intervention must consider the importance of both lowering malaria-related mortality and ensuring the safety of communities and health workers given the ease of transmission of COVID-19.

For Mali, we commend the Ministry of Health, in the decision to go ahead with the universal coverage campaign for LLINs, and rolling out SMC, in accordance with the recent guidance and recommendations from WHO and the RBM Partnership to End Malaria. Based on WHO modeling, this decision, allied with sustained malaria case management through the health system and the delivery of seasonal malaria chemoprevention, will prevent a significant increase in malaria cases and deaths. Under the worst-case scenario, in which all ITN campaigns are suspended and there is a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could be a 14.9% increase in malaria cases, and a 40.1% increase in malaria deaths in Mali. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

Global Fund Update

The Global Fund has announced that Mali will receive €162.1 million for HIV, tuberculosis, malaria, and health systems strengthening as the country allocation for 2021-2023. The Global Fund has determined the total allocation amount based on Mali’s disease burden and income level, as well as several other factors. The malaria component is also allocated a specific proportion of the total, according to a formula developed by the Global Fund that takes into account several factors, including disease burden and previous disbursements. For Mali this is calculated at €81.7 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Mali is urged to ensure that resources are allocated to malaria control from the overall Global Fund country allocation, as well as from domestic resources, to accelerate the gains made in recent years.

Progress

Mali has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO. The majority of the malaria commodities required to achieve and sustain universal coverage in 2020 are financed. Mali has procured sufficient LLINs to achieve universal operational coverage of the targeted at risk population. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO. Mali has significantly enhanced the tracking and accountability mechanisms for malaria with the development of the Malaria Control Scorecard. The country has decreased the estimated malaria mortality rate by more than 40% since 2010. The country is also
showing leadership in malaria control through its participation in the High Burden High Impact Approach.

**Impact**
The annual reported number of malaria cases in 2018 was 2,614,104 with 1,001 deaths.

**Key Challenge**
- Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health including malaria.

**Previous Key Recommended Actions**

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
<th>Progress</th>
<th>Comments - key activities/accomplishments since last quarterly report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address funding</td>
<td>Ensure the GF malaria funding application is submitted by Q2 2021 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years</td>
<td>Q2 2021</td>
<td></td>
<td>Deliverable not yet due</td>
</tr>
<tr>
<td>Impact</td>
<td>Ensure that malaria services including case management and vector control are sustained and implemented whilst using COVID-19 sensitive</td>
<td>Q4 2020</td>
<td></td>
<td>Mali have updated the LLIN, IRS and SMC guidelines taking into account the COVID-19 pandemic. The LLIN campaign has been completed and the SMC campaign is ongoing. Malaria RDTs have been supplied to the COVID-19 support centres</td>
</tr>
</tbody>
</table>

**RMNCAH and NTDs**

**Progress**
Mali has achieved high coverage of the tracer RMNCAH intervention of vitamin A and has recently increased coverage of exclusive breastfeeding and skilled birth attendants. The country has significantly enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Mali is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage in Mali is high for trachoma (100%) and schistosomiasis (91%); and good for onchocerciasis (77%) and for lymphatic filariasis (69%). Overall, the NTD preventive chemotherapy coverage index for Mali in 2018 is 83.
## Previous Key Recommended Actions

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<tr>
<td>RMNCAH¹: Impact</td>
<td>Ensure that essential RMNCAH services are sustained and implemented whilst using Covid-19 sensitive guidelines during the pandemic. Address any stock-outs of essential RMNCAH commodities</td>
<td>Q4 2020</td>
<td></td>
<td>Mali has established a COVID-19 crisis committee and has trained health care workers on the management of cases and on surveillance. Testing kits have been supplied to laboratories and health facilities have been provided with hand washing facilities and PPE. Services continue to be maintained. Q2 and Q3 data have not yet been validated in order to assess the impact</td>
</tr>
</tbody>
</table>

The country has responded positively to the RMNCAH recommended action addressing the low coverage of ARTs, with small increases in coverage reported.

### Key
- **Green**: Action achieved
- **Yellow**: Some progress
- **Red**: No progress
- **Gray**: Deliverable not yet due

¹ RMNCAH metrics, recommended actions and response tracked through WHO