

Country Profile | President's Malaria Initiative (PMI)

BENIN

April 2010



At a Glance: Benin

Population – 2010: 9 million¹

Life expectancy at birth – 2010:

58 years (male), 61 years (female)¹

Population at risk of malaria – 2002:
100%²

Under-5 mortality rate – 2008:

121/1,000 live births, or approximately
1 in 8 children die before their fifth
birthday³

¹ US Census Bureau, International Data Base 2010

² WHO/AFRO Malaria Country Profile 2004

³ UNICEF State of the World's Children 2009

Background

Malaria is a major health problem in Benin, where the entire population lives in areas with malaria transmission. Malaria is a leading cause of morbidity and mortality among children under five, accounting for 44 percent of outpatient visits and 40 percent of all hospitalizations.

The President's Malaria Initiative (PMI)

Benin is one of the 15 original countries benefiting from PMI, which was launched in 2005 and is led by the U.S. Agency for International Development and implemented together with the Centers for Disease Control and Prevention. As a key component of President Obama's Global Health Initiative and with the Lantos-Hyde Act of 2008, PMI's funding has been extended through fiscal year (FY) 2014, and a new six-year malaria strategy has been developed. Under the new strategy, the goal of PMI is to work with partners to halve the burden of malaria in 70 percent of the at-risk populations in sub-Saharan Africa (approximately 450 million residents), thereby removing malaria as a major public health problem and promoting development throughout the African region.

PMI works with national malaria control programs and coordinates its activities with national and international partners, including the Roll Back Malaria Partnership; The Global Fund to Fight AIDS, Tuberculosis and Malaria; the World Health Organization; the World Bank; Malaria No More; the Bill and Melinda Gates Foundation; nongovernmental organizations, including faith-based and community groups; and the private sector.

Key Interventions

In line with Benin's national malaria control strategy, PMI supports four key interventions to prevent and treat malaria:

- **Insecticide-treated mosquito nets (ITNs):** Sleeping under a long-lasting ITN provides protection from malaria-carrying mosquitoes. The nets are nontoxic to humans, but can repel and kill mosquitoes for up to three years.

- **Indoor residual spraying (IRS):** IRS involves the coordinated, timely spraying of the inside walls of houses with insecticides. Mosquitoes are killed when they land on these sprayed walls, reducing malaria transmission.
- **Intermittent preventive treatment for pregnant women (IPTp):** IPTp is a highly effective means of reducing the serious consequences of malaria in both the pregnant woman and her unborn child, which include maternal anemia and low birthweight babies. IPTp consists of the administration of at least two doses of the antimalarial drug sulfadoxine-pyrimethamine (SP) given not less than one month apart during the second and third trimesters of pregnancy. In most countries, SP needs for IPTp are being met by national governments and other donors.
- **Diagnosis and treatment:** Effective case management of malaria depends on early, accurate diagnosis with microscopy or rapid diagnostic tests (RDTs) and prompt treatment with an effective drug. Artemisinin-based combination therapies (ACTs) are the recommended first-line treatment for uncomplicated *Plasmodium falciparum* malaria in most malaria-affected regions of Africa, and are extremely effective against malaria parasites; they have few or no side effects.

Progress to Date

Benin is in its third year as a PMI focus country. With support from PMI and its partners, malaria control interventions are being implemented, and vital commodities are being distributed to vulnerable populations.

PMI-Supported Activities	2007	2008	2009	Cumulative
IRS: Houses sprayed ¹	-	142,814	156,223	-
IRS: Residents protected ¹	-	521,738	512,491	-
ITNs: Procured	221,000	385,697	875,000	1,481,697
ITNs: Distributed	215,627	45,840	879,415	1,140,882
SP Treatments: Procured	766,666	-	-	766,666
SP Treatments: Distributed	-	-	307,121	307,121
ACTs: Procured	1,465,170	-	215,100	1,680,270
ACTs: Distributed	153,884	326,544	812,232	1,292,660
RDTs: Procured	178,400	-	-	178,400
RDTs: Distributed	73,815	104,585	-	178,400
Health workers trained in IPTp use ²	605	1,267	146	-
Health workers trained in ACT use ²	605	-	762	-
Health workers trained in diagnostics ²	605	-	24	-

¹ A cumulative count of the number of houses sprayed and residents protected is not provided since some areas have been sprayed on more than one occasion.

² A cumulative count of individual health workers trained is not provided since some health workers have been trained on more than one occasion.

PMI Funding

The proposed FY 2010 budget for Benin is \$21 million. Of this amount, 29 percent is planned for the procurement and distribution of long-lasting ITNs; 37 percent for IRS; 15 percent for pharmaceutical management, procurement of ACTs, drugs for severe malaria, and improved laboratory diagnosis of malaria; 2 percent for IPTp; and 3 percent for monitoring and evaluation. Of the total, 45 percent will be spent on commodities.

	FY 2007 Jump start funds	FY 2008	FY 2009	FY 2010
Budget	\$3.6 million	\$13.8 million	\$13.8 million	\$21 million

For details on FY 2010 PMI activities in Benin, please see the **Benin Malaria Operational Plan:** http://www.pmi.gov/countries/mops/fy10/benin_mop-fy10.pdf.

