

# SIERRA LEONE



## The President's Malaria Initiative (PMI)

Malaria prevention and control is a major U.S. foreign assistance objective, and PMI's strategy fully aligns with the U.S. Government's vision of ending preventable child and maternal deaths and ending extreme poverty. Under the PMI Strategy for 2015–2020, the U.S. Government's goal is to work with PMI-supported countries and partners to further reduce malaria deaths and substantially decrease malaria morbidity toward the long-term goal of elimination.

## Country Context

Sierra Leone's entire estimated population of 6.5 million is vulnerable to malaria. A protracted civil conflict ending in 2002 eroded vital infrastructure and human capacity. More recently, the 2014-2015 Ebola Virus Disease epidemic negatively impacted utilization of facility and community-level health services.

Over two million outpatient visits are reported due to malaria annually, of which half are children under five years of age. The 2016 Malaria Indicator Survey demonstrated parasitemia ranges from 6 percent in Western Urban to 58 percent in Koinadugu district, among children 6-59 months of age. Malaria transmission has two peaks, during the rainy season in May and in October/November. Plasmodium falciparum causes the majority of infections.

Sierra Leone's health service delivery system is pluralistic with the Government, faith-based missions, NGOs, and the private sector providing services. District health services form the core component of public primary health care, composed of a network of peripheral health units, district hospitals, and District Health Management Teams.

Sierra Leone became a PMI focus country in 2017. The U.S. Government and partners support key malaria interventions that are aligned with the National Malaria Control Program's national strategic plan to achieve "access to malaria control interventions for all" and reduce malaria morbidity and mortality. For prevention, PMI distributes insecticide-treated nets and supports intermittent preventive treatment of pregnant women. For prompt diagnosis and effective treatment using the "test-treat-and-track" practice, PMI procures diagnostic tests, antimalarials, and injectable artesunate for severe disease. PMI also supports health worker training and mentoring, entomological surveillance, social and behavioral change strategies, and routine health information systems at the chiefdom level.

## AT A GLANCE

Population (2017):  
**7.6 million<sup>1</sup>**

Population at risk of malaria (2016): **100%<sup>2</sup>**

Malaria incidence/1,000 population at risk (2015):  
**302.8<sup>3</sup>**

Under-five mortality rate (2013):  
**156/1,000 live births<sup>4</sup>**

1 World Bank, Population Estimates & Projections 2017  
2 World Health Organization (WHO), *World Malaria Report 2017*  
3 WHO, *World Health Statistics 2017*  
4 Demographic and Health Survey (DHS) 2013

## PMI Funding (in millions)



For details on FY 2017 PMI activities in Sierra Leone, please see the [Sierra Leone Malaria Operational Plan](#).



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