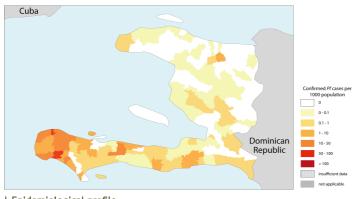
Haiti

Region of the Americas





I. Epidemiological profile

Population (UN Population Division)	2023	%
High transmission (>1 case per 1000 population)	2.8M	24
Low transmission (0-1 case per 1000 population)	7.6M	65
Malaria free (0 cases)	1.2M	11
Total	11.6M	

Parasites and vectors	
Major plasmodium species (indigenous cases):	P. falciparum: 100 (%)*, P. vivax: 0 (%)
Major anopheles species:	An. albimanus
*includes mixed infections and other species of Plasmodium	

Reported cases and deaths	
Presumed and confirmed cases	14 436
Total confirmed cases:	14 436
Confirmed cases from public sector:	6927
Confirmed cases from private sector:	2123
Confirmed cases at community level:	5386
Confirmed cases in combined health sectors:	-
Reported deaths:	8

Estimates
Estimated cases:
Estimated deaths: 23.8K [15.8K, 32.2K] 60 [24, 111]

II. Intervention policies and strategies

Intervention	Policies/Strategies	Yes/	Year
		No	adopted
ITN	ITNs/LLINs distributed free of charge	Yes	2016
	ITN distributed by mass campaign	Yes	2016
IRS	IRS is recommended	Yes*	-
	DDT is used for IRS	No	-
Larval control	Use of Larval Control	Yes	2016
IPT	IPT used to prevent malaria during pregnancy	NA	-
Diagnosis	Malaria diagnosis using RDT is free of charge in the public sector	Yes	2016
	Malaria diagnosis using microscopy is free of charge in the public sector	Yes	2012
	Malaria diagnosis is free in the private sector	Yes	2016
Treatment	ACT is free for all ages in public sector	Yes	2011
	The sale of oral artemisinin-based monotherapies (oAMTs)	banned	-
	Single low dose of primaquine (0.75 mg base/kg) with ACT to reduce transmissibility of <i>P. falciparum</i>	Yes	2012
	Primaquine is used for radical treatment of P. vivax	NA	-
	G6PD test is a requirement before treatment with primaquine	NA	-
	Directly observed treatment with primaquine is undertaken	NA	-
	System for monitoring of adverse reaction to antimalarials exists	Yes	2012
Surveillance	Malaria is a notifiable disease	Yes*	-
	ACD for case investigation (reactive)	Yes	2017
	ACD at community level of febrile cases (pro-active)	Yes	2017
	Mass screening is undertaken	Yes	2017
	Uncomplicated P. falciparum cases routinely admitted	No	-
	Uncomplicated P. vivax cases routinely admitted	-	-
	Case investigation undertaken	Yes	2017
	Foci investigation undertaken	Yes*	2020
	Case reporting from private sector is mandatory	Yes	-

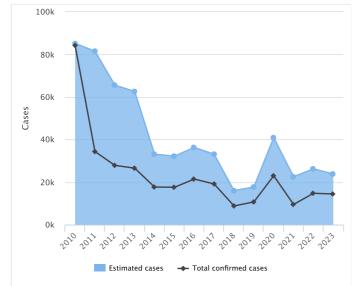
Antimalaria treatment	policy				Medicine	Year adopted	
First-line treatment of unconfirmed malaria					NA	-	
First-line treatment of <i>P. falciparum</i>			CQ+PQ	2016			
Second-line treatment <i>P. falciparum</i>			AL	2016			
Treatment of severe malaria			AS	2021			
Treatment of <i>P. vivax</i>			CQ+PQ	-			
Dosage of primaquine	for rac	lical treatm	ent of <i>P</i> .	vivax			
Type of RDT used (public)					P.f only		
Therapeutic efficacy to	ests (cli	nical and pa	arasitolo	gical failure, %	5)		
Medicine Year	Min	Median	Max	Follow-up	No. of studies	Species	
Resistance status by ir Insecticide class Carbamates	<u>isectici</u>	de class (20	(%) sit	-	ass for malaria vecto Vectors ²	Used ³	
Neonicotinoids						No	
Organophosphates			0% (0/11)			No	
Pyrethroids					_	Yes	
¹ Percent of sites for which ² Vectors reported to exhibit			ide class		that reported data ailable, data from the pro		

Earliest year that policy is adopted was adjusted based on the earliest year that the WHO policy was recommended

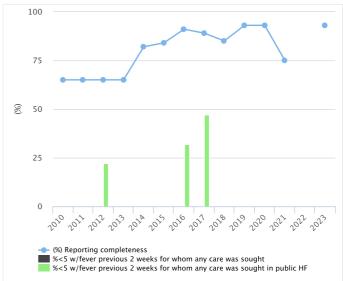


Yes* = Policy adopted, but not implemented in 2023 Disc = Discontinued

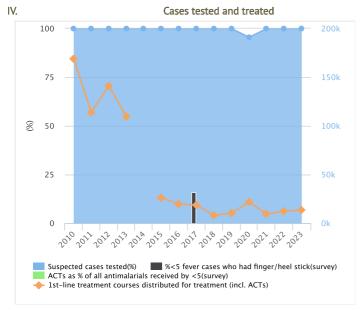


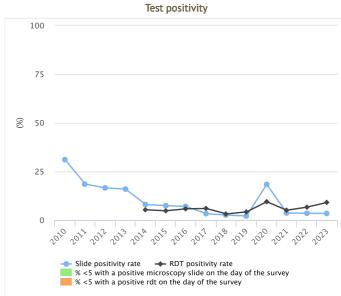


Treatment seeking and reporting completeness



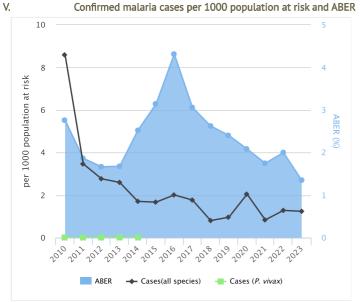
Source: 2012,2016,2017



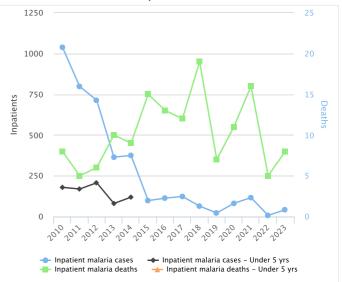


Source: 2017

Confirmed malaria cases per 1000 population at risk and ABER

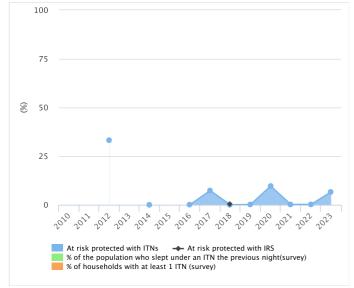


Malaria inpatients and deaths

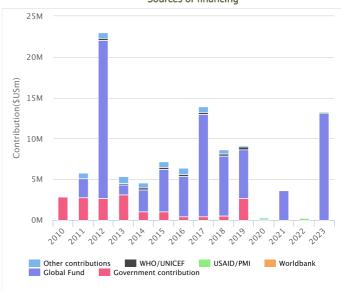


ABER=smears examined in a year X100 / Total population. Includes cases that are imported and introduced

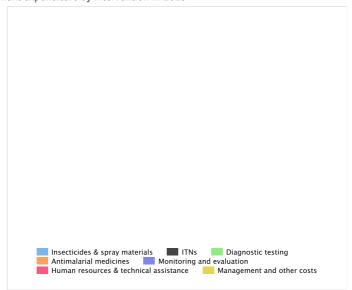
Coverage of ITN and IRS







VI. Government expenditure by intervention in 2023



(est.) : WHO estimates based on the survey

Country profiles are generated automatically based on data reported by countries. They are available for all current malaria endemic countries and territories asked to report to the Global Malaria Programme annually. Country profiles are based on data validated by the countries as of 14 November 2024.

Further information on the methods used to estimate malaria cases and an explanation for the gap between estimated and reported confirmed indigenous cases is provided majara-burden-session6.pdf (who.int)