malaria
consortium
disease control, better health

Burkina Faso Country strategy

2021–2025

Burkina Faso has a population of approximately 23 million. Malaria is endemic throughout the country, and highly seasonal, with 40 percent of all malaria cases occurring in children under five and 60 percent of cases occurring during the peak transmission season. High neonatal mortality has also been linked to malnutrition and nutrient deficiency. The entire country is eligible for seasonal malaria chemoprevention (SMC).

The country has experienced instability in the north since 2019, which has affected more than two million people. In the face of insecurity, heterogeneous burdens of disease, and relatively high out-of-pocket expenditure on health (35 percent), improving healthcare access and quality are of paramount importance. Government spending on health has increased from 1.15 percent in 2013–14 to 1.28 percent in 2018–19. Investment in the Health Services Reinforcement Project is further set to improve quality of, and access to, health services in regions with the greatest inequity. Current plans include health finance reform focused on improving social protection, reforming strategic purchasing and strengthening community health.

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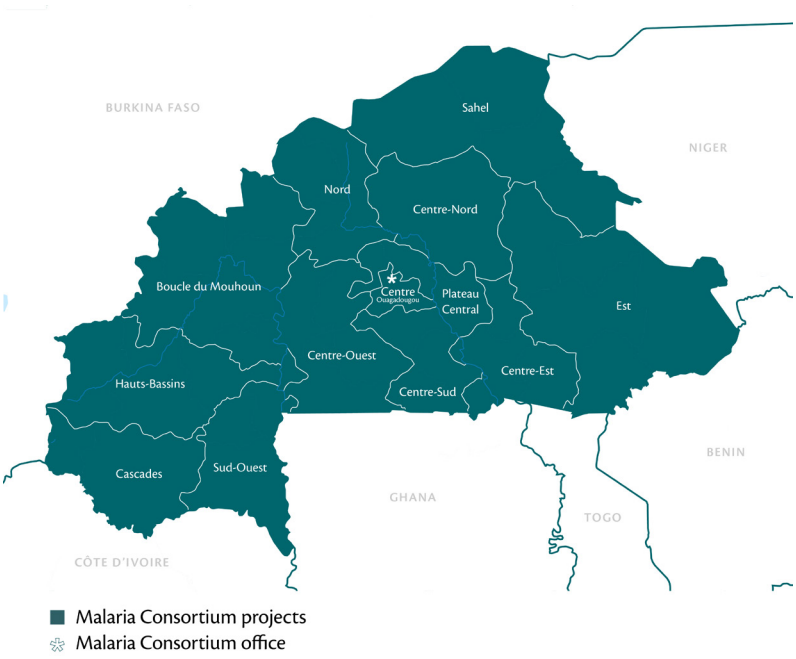
Photo: Caregiver meeting healthworker

Malaria Consortium in Burkina Faso

Malaria Consortium established an office in Ouagadougou, Burkina Faso's capital, in December 2014 as part of the Achieving Catalytic Expansion of Seasonal Malaria Chemoprevention in the Sahel (ACCESS-SMC) project. Since then, we have continued to deliver SMC projects in the country. In 2021, Malaria Consortium supported SMC in 27 health districts across six regions of Burkina Faso, reaching approximately 1.9 million children under five.

We work with the government and implementing partners to plan campaigns, increase community engagement, distribute antimalarials and undertake operational research. We provide technical advice and the necessary evidence for the Ministry of Health (MoH) and other partners to make informed decisions about adaptation and innovation in SMC at regional and national levels. We have also begun to explore the potential of digital solutions to strengthen health systems in the country.



Our strategic approach

- Support MoH initiatives to accelerate the implementation of universal health coverage by 2025
- Lead SMC delivery for all eligible children in selected health districts, working with the government to explore and implement other chemoprevention options (e.g. delivery to wider age groups, geographical expansion, alternative drug regimens, mass screenings)
- Support the government on the approach and delivery of a malaria vaccine campaign as this becomes possible
- Actively support the MoH to develop community integrated management of childhood illness, particularly through improving the availability and use of high-quality, essential, integrated and high-impact service packages for:
  - control of communicable diseases, surveillance and response to health emergencies
  - maternal, infant and young child feeding
- Implement management of serious bacterial infections in infants by 2025 in at least one district
- Support the MoH to strengthen the quality and availability of data by 2025 through digitisation
- Improve SMC implementation by 2025 through support to the Permanent Secretary for Malaria Elimination to finalise approaches on SMC quality self-assessments
- Support the MoH in the availability of quality and high-impact services for populations in areas affected by epidemics, disasters and conflicts
- Actively participate in, take on leadership roles in, and advocate within technical working groups and coordination mechanisms to improve effectiveness, and to reduce duplication and parallel systems
- Influence the priorities of the national research agenda and develop/maintain an aligned programme of research linked to:
  - chemoprevention and its adjuvants, including in combination with vaccination
  - digital approaches to community engagement
  - possible study on the effectiveness of antimalarial medicines and resistance markers.

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