



Seasonal malaria chemoprevention

Protecting children under five from malaria during peak transmission season

Background

Seasonal malaria chemoprevention (SMC) is a highly effective community-based intervention to prevent malaria infections in areas where the malaria burden is high and transmission occurs mainly during the rainy season. It involves administering monthly courses of sulfadoxine-pyrimethamine (SP) and amodiaquine (AQ) during this peak transmission period to those most at risk: children under five. In 2019, SMC was implemented in 13 countries in the Sahel region of Africa, targeting over 21 million children.^[1]

Malaria Consortium has been a leading implementer since the World Health Organization (WHO) issued its recommendation to scale up SMC in 2012.^[2] With our partners, we led the rapid scale-up through the Achieving Catalytic Expansion of Seasonal Malaria Chemoprevention in the Sahel (ACCESS-SMC) project in 2015–2017, reaching close to seven million children in Burkina Faso, Chad, Guinea, Mali, Niger, Nigeria and The Gambia. This project demonstrated that SMC is cost-effective, safe and that high coverage can be achieved at scale.^[3,4]

Since 2018, we have continued to support national malaria programmes in Burkina Faso, Chad, Nigeria and Togo, reaching over 12 million children in 2020.^[5] We

Countries

Burkina Faso
Chad
Mozambique
Nigeria
Togo
Uganda

Donor

This programme is funded through philanthropic donations received as a result of being awarded Top Charity status by GiveWell, a non-profit organisation dedicated to finding outstanding giving opportunities. It is also supported by the Global Fund to Fight AIDS, Tuberculosis and Malaria, and, through the SMC IMPACT project, by the Korea International Cooperation Agency. The research project in Mozambique is supported by the Bill & Melinda Gates Foundation.

Length of project

Since January 2018

also started a research project in Mozambique to explore the feasibility and impact of SMC outside the Sahel. We will continue to support efforts to minimise the risk of COVID-19 transmission to SMC implementers and communities by applying strict infection prevention and control guidelines and procuring COVID-19-related commodities, including face masks and hand sanitiser. Our lessons from implementing SMC during the pandemic in 2020 have been published in a learning paper.^[6]

Project outline and objectives

SMC campaigns are implemented under the leadership of national malaria programmes and through countries' existing health system structures. We provide technical and logistical support on all SMC activities. We also conduct research and engage with the international SMC community to build the evidence base for SMC and to contribute to SMC policy and practice. In 2021, our programme aims to reach 20 million children in Burkina Faso, Chad, Nigeria and Togo. We will continue our research in Mozambique and have started a similar study in Uganda.

Activities

- **Planning and enumeration:** Planning starts several months before the annual SMC round. This involves determining timelines, estimating the target population of under-fives, and recruiting community distributors and supervisors.
- **Procurement and supply management:** The SMC drugs are shipped from the manufacturer to the central warehouses in SMC-implementing countries. Along with other SMC commodities, they are then distributed to health facilities.

- **Community engagement:** To ensure high acceptability among communities, we conduct sensitisation meetings with local leaders, broadcast radio spots and enlist town announcers to disseminate information during the SMC round.
- **Training:** Before the start of the SMC round, all community distributors and supervisors are trained on how to administer SMC drugs.
- **SMC distribution:** Community distributors go door-to-door to identify eligible children and administer the SMC medicines.
- **Case management and pharmacovigilance:** Community distributors refer sick children to health facilities, where they are tested for malaria. If children test positive, they will be treated with an effective antimalarial. While SMC is safe, systems are in place to monitor and respond to adverse reactions.
- **Supervision:** Supervisors observe how community distributors administer the SMC drugs and provide constructive feedback. Facility-based health workers and health authority staff support supervisors.
- **Monitoring and evaluation:** Community distributors collect administrative data on the number of children reached. Data on stock consumption are collected through the supply management system. To assess coverage and quality of SMC implementation, we conduct independent household surveys.

For further information and resources on our SMC programme, visit our [website](#) and explore our [publications library](#).

References

1. WHO. World malaria report 2020: 20 years of global progress & challenges. Geneva: WHO; 2020.
2. WHO. WHO policy recommendation: Seasonal malaria chemoprevention (SMC) for *Plasmodium falciparum* malaria control in highly seasonal transmission areas of the Sahel sub-region in Africa. Geneva: WHO; 2012.
3. ACCESS-SMC Partnership. Effectiveness of seasonal malaria chemoprevention at scale in west and central Africa: An observational study. *The Lancet*. 2020; 396(10265): 1829–40.
4. Gilmartin C, Nonvignon J, Cairns M, Milligan P, Bocoum F, Winskill P, et al. Seasonal malaria chemoprevention in the Sahel subregion of Africa: A cost-effectiveness and cost-savings analysis. *The Lancet Global Health*. 2021; 9(2): e199–e208.
5. Malaria Consortium. Malaria Consortium's seasonal malaria chemoprevention program: Philanthropy report 2020. London: Malaria Consortium; 2021.
6. Malaria Consortium. Implementing mass campaigns during a pandemic: What we learnt from supporting seasonal malaria chemoprevention during COVID-19. Learning paper. London: Malaria Consortium; 2021.

© Malaria Consortium / May 2021

Unless indicated otherwise, this publication may be reproduced in whole or in part for non-profit or educational purposes without permission from the copyright holder. Please clearly acknowledge the source and send a copy or link of the reprinted material to Malaria Consortium. No images from this publication may be used without prior permission from Malaria Consortium.

UK Registered Charity No: 1099776

Contact: info@malariaconsortium.org

Cover image: Community distributors directly observe a caregiver administering SPAQ to her child during the 2020 SMC campaign, Nigeria

 [FightingMalaria](#)
 [MalariaConsortium](#)
www.malariaconsortium.org



**malaria
consortium**
disease control, better health