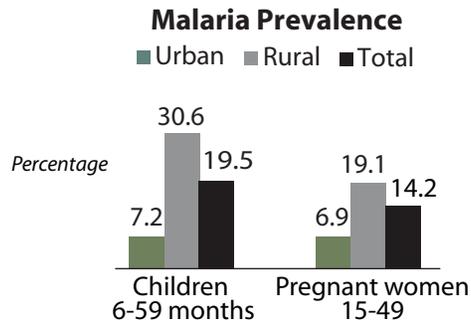
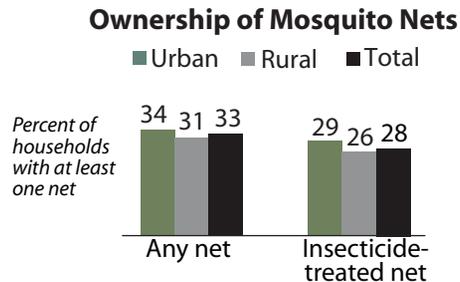


Angola Malaria Indicator Survey 2006-07: Key Findings

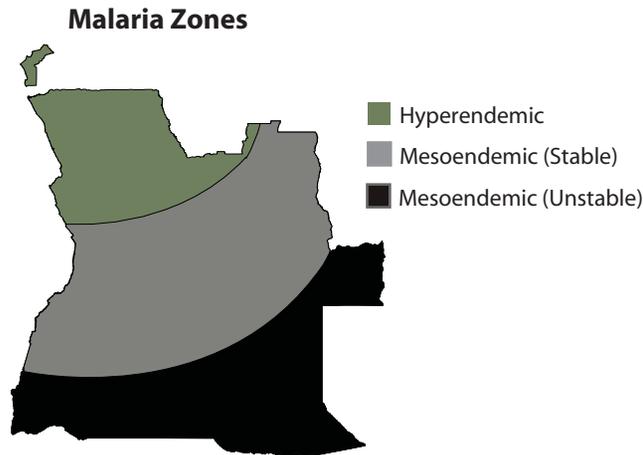
The 2006-07 Angola Malaria Indicator Survey (AMIS 2006-07) provides nationally representative malaria prevalence rates for Angola. The survey interviewed 2,599 households and 2,973 women. The results show that 20 percent of children and 14 percent of pregnant women have malaria.



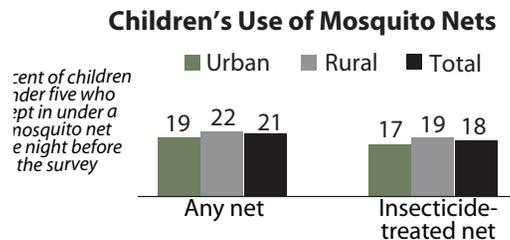
Women and children are most vulnerable to malaria. Malaria is three times higher for women and more than four times higher for children in rural areas than urban areas.



Mosquito nets, and especially insecticide-treated nets (ITNs) are recommended as the most effective prevention of malaria. One-third of households own at least one mosquito net, the vast majority being an ITN. The variation between urban and rural households is very low.



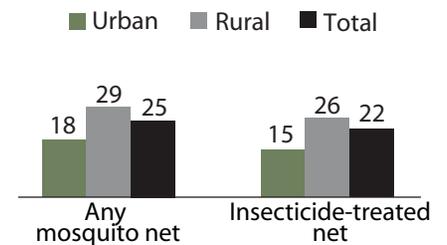
There are three zones of malaria endemicity in Angola. The Hyperendemic zone has high transmission year-round. The Mesoendemic Stable has a lower transmission, and the Mesoendemic Unstable zone has a transmission that varies depending on the season.



Slightly more than one child in five slept under a mosquito net the night before the survey, and most of them slept under an ITN. A larger percentage of households own nets than actually use them.

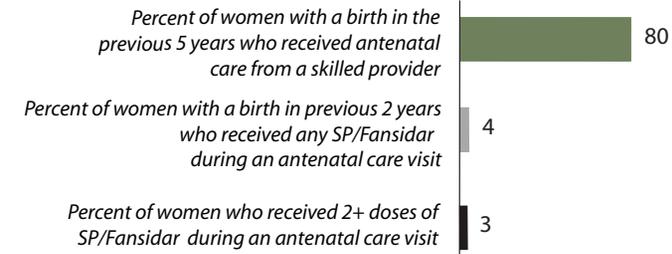
Pregnant Women's Use of Mosquito Nets

Percent of pregnant women 15-49 who slept under a mosquito net the night before the survey



Pregnant women face a high risk of malaria, and malaria during pregnancy can lead to low birth weight and infant mortality. A quarter of pregnant women slept under any mosquito net the night before the survey, mostly under an ITN. More rural than urban women slept under a mosquito net.

Intermittent Preventive Treatment for Pregnant Women



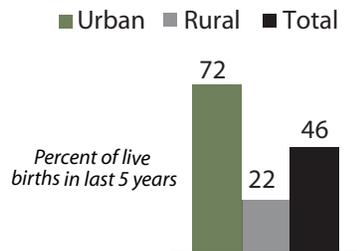
Intermittent Preventive Treatment (IPT) is defined as taking at least two doses of the drug SP/Fansidar during antenatal care visits. Although the majority of women receive antenatal care, a very low percentage receive IPT, representing a missed opportunity for antenatal care clinics.

Angola 2006-07 Malaria Indicator Survey (AMIS 2006-07)



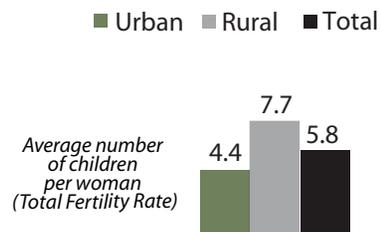
Key Findings

Delivery in a Health Facility



Overall, nearly half of births are delivered in a health facility. In rural areas, however, only around one-fifth of births take place in a health facility. Almost half of births are delivered by skilled provider such as a doctor, nurse or midwife, but only a quarter of births in rural areas received skilled assistance.

Fertility



The average woman has six children. Fertility rates are higher in rural areas.

For more information about the results of the 2006-07 Angola Malaria Indicator Survey, please contact:

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The AMIS 2006-07 was implemented by Consultoria de Serviços e Pesquisas- COSEP, Consultoria, Lda. and Consultoria de Gestão e Administração em Saúde-Consaúde, Lda. All activities were coordinated closely with the Angola Ministry of Health and the National Malaria Control Program. Funding for the AMIS 2006-07 was provided by USAID/Angola, the President's Malaria Initiative (PMI) and the UNDP-managed Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM). Macro International Inc. provided technical assistance through the Demographic and Health Surveys (MEASURE DHS) project of the United States Agency for International Development.



Methodology and Response Rates:

Malaria prevalence data were obtained using a Malaria Rapid Diagnostic Test to detect parasite antigens in blood. Interviews and testing were successfully completed in 97 percent of the 2,809 households sampled, and in 95 percent of the 3,136 women sampled.