

Belize

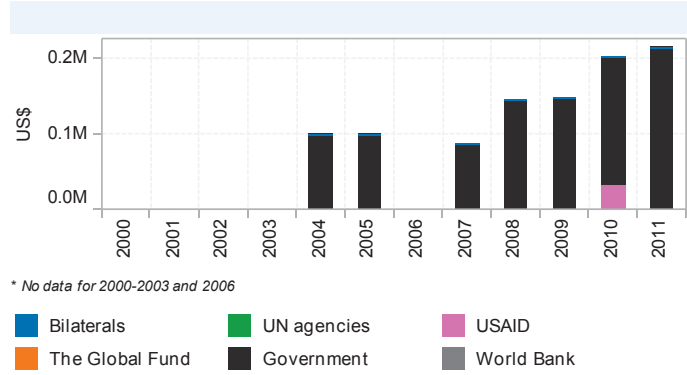
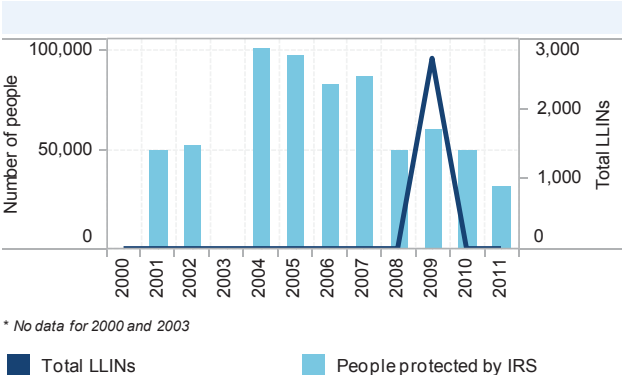
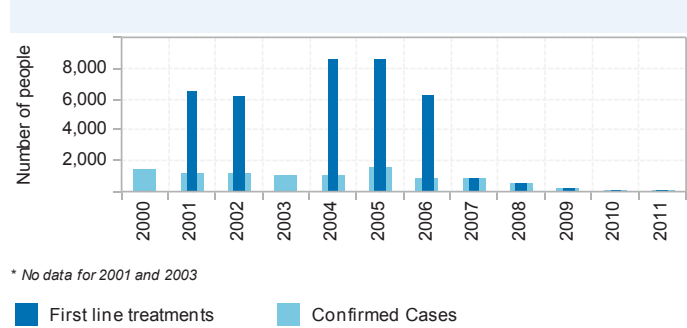
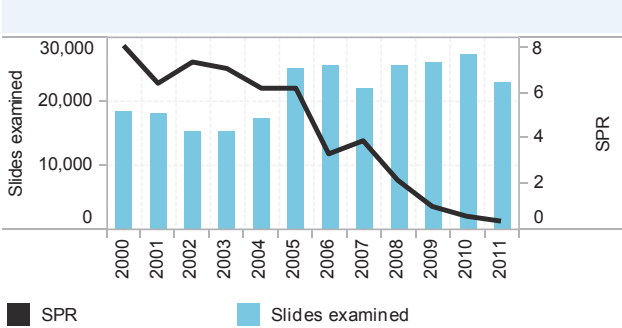
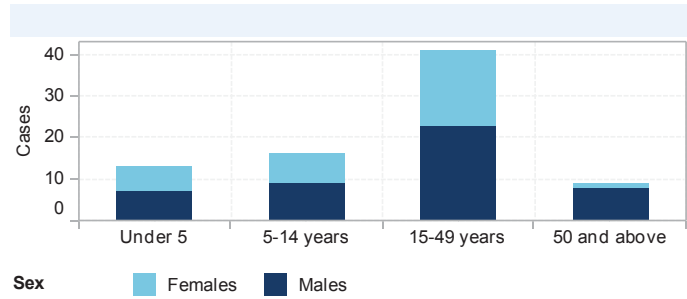
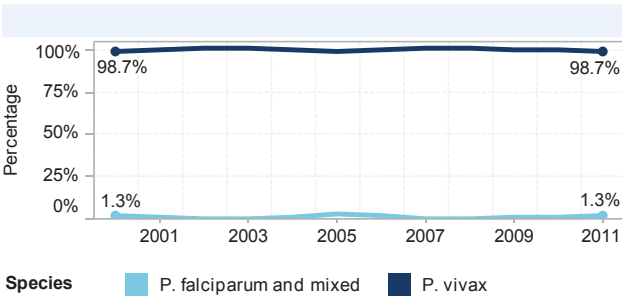
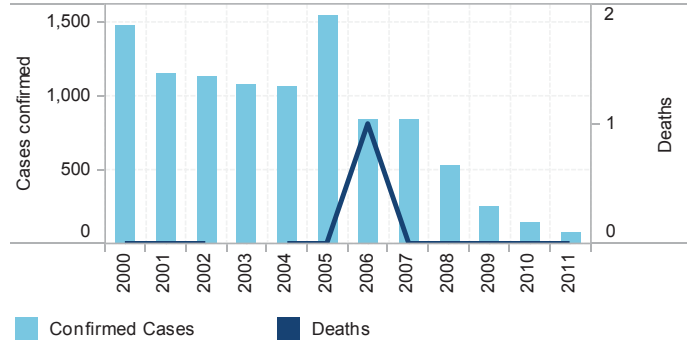
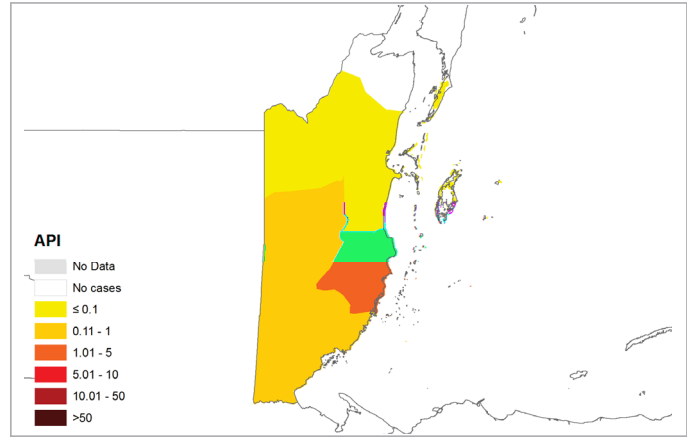
Belize has reduced the malaria incidence by almost 95% in the past decade compared to the year 2000, surpassing its MDG-6 goal for the year 2015. Between 2009-2011 it reported one case in each year due to *Plasmodium falciparum* and mixed infections. No death due to malaria has been reported in the country since 2007.

Anopheles albimanus, *A. darlingi* and *A. vestitipennis* are the principal vectors of malaria. Malaria is focalised to localities in the adjoining south-eastern districts of Stann Creek and Toledo, which reported over 80% of cases in the country in 2009, 2010 and in 2011.

The country uses chloroquine and primaquine as its first line of treatment for both *P. falciparum* and *P. vivax* infections, following a regimen of 14 days for *P. vivax*. Other parasite species are not in circulation in the sub-region.

Although around 50% of the cases have been reported in children under the age of 15 years old in previous years, the proportion of cases in this age group decreased to 41% and 37% in 2010 and 2011 respectively from a high of 58% in 2009. Insecticide treated bednets (ITNs) are not routinely used in Belize for malaria control and the coverage by indoor residual spraying (IRS) has been decreasing, on account of decreasing number of malaria cases being reported by the country.

Malaria control in the country is exclusively supported by the Ministry of Health, funding from which has been increasing the past years. In 2010-2011 period Belize was also supported by the AMI-RAVREDA project.



* No data for 2000 and 2003

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* No data for 2000-2003 and 2006