### Tajikistan

#### Epidemiology
- **1925/26**: First malaria surveys >100,000 reported cases
- **1946-60**: *P. falciparum* malaria nearly eliminated, (loci of *P. vivax* cases in the south; 1960: 11; 1963-68: 135)
- **1970/80s**: Resurgence of *P. vivax* + *P. falciparum* cases in the south (1978: 90; 1979: 58; 1981:121)
- **1980s**: Reported vector resistance to insecticides

#### 1990s
- **1997**: Peak (29,794 reported cases; 85.3% from southern Kathlon region)
- **2006**: 1,344 reported cases; 28 *P. falciparum*
- **2007**: 628 reported cases; 12 *P. falciparum*

#### Tajikistan (and whole USSR territory)
- **1930s**: First control + eradication campaigns

#### 1992-1997
- Control interventions nearly interrupted due to civil war

#### Republican Tropical Disease Centre (RTDC) (1997-present)
RTDC programme launched in 1997. Strengthening of national health information, disease surveillance systems and disease management.

- **Malaria control measures** in focal areas (south) by RTDC and partners:
  - **Vector control**: Indoor residual spraying, biological control, insecticide-treated mosquito nets, environmental management
  - **Capacity and awareness building**: Training of medical staff, public education and community mobilisation

- **Prevention**: Early diagnosis, improved access to treatment, surveillance, operational research, intersectorial collaboration

#### International partner organizations
- **ACTED** (1998- present)
  - **Vector control**: Introduction and use of insecticide-treated nets, indoor residual spraying, larval control (*Gambusia affinis*, environmental management), entomological studies
  - **Community awareness and participation in malaria prevention**

- **Merlin** (1992-2007)
  - **Support of health services**: trainings, quality control system, repair and provide laboratory equipment, surveillance, (inter-)seasonal preventive treatment
  - **Community**: Health education and mobilisation, operational research

- **UNICEF**
  - Laboratory capacity building, information promotion, education and community activities

### Control strategies and programs

#### USSR - Epidemic areas with risk of outbreak
- **Suppress of infection sources**: Regular active case detection and radical treatment, mass parasitaemia examinations, systematic treatment
- **Vector control**: insecticide spraying (residual, outdoors in agricultural areas), antilarval measures (application of herbicides and *Gambusia affinis* larvivorous fish in water bodies), entomological studies
- **Health service-based strategies**: Capacity strengthening (training and refresher courses for medical laboratory personnel), Soviet antimalarial specialists

### Structures

#### Governmental level:
- National Institute of Medical Parasitology and Tropical Medicine

#### Community-level:
- Medical field centres ("Anti-malaria stations"), Red Cross and Crescent Society and voluntary health workers

#### Roll Back Malaria strategy supporting structures
- Martinovsky Institute of Medical Parasitology, Tropical Medicine/Moscow, Central Institute for Postgraduate Medical Training/Moscow, WHO, ECHO, UNICEF, WFP, USAID, ACTED, Merlin

#### Global Fund to fight AIDS, Tuberculosis and Malaria, Round 6 (2006-2010)
- **Goal**: Elimination of *P. falciparum* malaria by 2010
- **Control activities**: Technical assistance (training), disease management and prevention (vector control, surveillance, operational reserach, community-based intervention)