Malaria transmission ranges from unstable and epidemic in Puntland and Somaliland to moderate in central Somalia to high in the south. The annual reported number of malaria cases in 2017 was 37,156 and 20 deaths.
Malaria

Progress
Somalia has secured sufficient resources to cover the procurement and distribution of the LLINs, ACTs and RDTs required in 2019.

Key Challenge
- A weak health system and relatively few partners limits scale up of core malaria interventions.

Impact
The annual reported number of malaria cases in 2017 was 37,156 with 20 deaths.

Previous Key Recommended Actions

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
<th>Progress</th>
<th>Comments - key activities/accomplishments since last quarterly report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vector Control</td>
<td>Address falling vector control coverage</td>
<td>Q4 2019</td>
<td></td>
<td>Over 430,000 LLINs were delivered to the country in Q1 2019 and Somalia secured funding for an additional 500,000 LLINs through the Global Fund</td>
</tr>
</tbody>
</table>

Somalia has responded positively to the previous recommended to investigate and address the reasons for the increase in estimated malaria incidence and mortality rate between 2010 and 2017, and continues to track progress as this action is implemented

RMNCAH and NTDs
Progress in addressing Neglected Tropical Diseases (NTDs) in Somalia is measured using a composite index calculated from preventive chemotherapy coverage achieved for schistosomiasis, and soil transmitted helminths. Preventive chemotherapy coverage in Somalia is reasonable for both schistosomiasis (51%) but low for soil transmitted helminths (31%). Overall, the NTD preventive chemotherapy coverage index in 2017 is 40, which represents a large increase compared with the 2016 index value (0).
## Previous Key Recommended Actions

<table>
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<tr>
<th>Objective</th>
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</thead>
<tbody>
<tr>
<td>RMNCAH(^1): Optimise quality of care</td>
<td>a) Work to accelerate coverage of ARTs in the total population and in children under 14 years of age</td>
<td>Q1 2017</td>
<td>No progress reported</td>
<td>Somalia is launching the implementation of the “Test and Treat” policy and Option B+ for PMTCT service delivery. This will be complemented by capacity building, training, and mentoring. The country is working to scale-up availability of both adult and paediatric ART services. Clinical guidelines and job aids to support ART are being developed. Training is being scaled up to strengthen integrated adult and paediatric ART capacity and ARTs are being procured using GF resources. Coverage increased by 3% in children and 4% in the total population.</td>
</tr>
<tr>
<td></td>
<td>b) Investigate and address the reasons for the decrease in skilled birth attendants</td>
<td>Q4 2018</td>
<td>No Progress Reported</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c) Investigate and address the reasons for the reported decrease in vitamin A coverage</td>
<td>Q2 2019</td>
<td>No progress</td>
<td>The country reported a small increase in vitamin A coverage in 2017</td>
</tr>
</tbody>
</table>

Somalia has responded positively to the RMNCAH recommended actions addressing low coverage and lack of data for a number of key interventions including skilled birth attendants, exclusive breastfeeding and postnatal care and continues to track progress as these actions are implemented.

### Key

- **Action achieved**
- **Some progress**
- **No progress**
- **Deliverable not yet due**

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\(^1\) RMNCAH metrics, recommended actions and response tracked through WHO