In Cape Verde, 58% of the population lives in areas where there is a low risk of malaria; the rest of the country is malaria-free. The annual reported number of malaria cases in 2012 was 36 and zero deaths.
Cape Verde ALMA Quarterly Report
Quarter Three, 2014

Progress
Cape Verde has made great progress and has achieved significant impact in its malaria control programme, enabling the country to enter the pre-elimination phase of malaria control. The country has secured sufficient resources to sustain universal coverage of key malaria interventions in 2014, and continues to sustain high coverage of vector control interventions. The country has achieved high coverage of the tracer MNCH intervention DPT3 vaccination, and has increased the coverage of skilled birth attendants. Cape Verde also has a high rating in terms of public sector management systems. Cape Verde was awarded a 2014 ALMA Award for Excellence in Implementation of Vector Control.

Progress
Malaria morbidity and mortality has declined in Cape Verde. Total confirmed malaria cases decreased from 126 during 2000–2001 to 36 cases in 2012 and zero deaths. As such, the country has achieved the international target of at least a 75% reduction in malaria burden since 2000.

Key Challenge
- Sustaining malaria control gains as the country prepares for elimination.

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>Address funding</td>
<td>Ensure the NFM concept note is submitted by Q4 2014 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years</td>
<td>Q4 2014</td>
<td></td>
<td>Deliverable not yet due but country has begun the preparation of the GF NFM concept note</td>
</tr>
<tr>
<td>MNCH¹: Optimise quality of care</td>
<td>Work towards improving postnatal care coverage through increasing availability of skilled care, promoting facility births where women and babies are observed for at least 24 hours before discharge and through home visits by community health workers</td>
<td>Q1 2014</td>
<td></td>
<td>No progress reported</td>
</tr>
</tbody>
</table>

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

¹ MNCH metrics, recommended actions and response tracked through WHO MCA/iERG