Most of the population of Comoros is at high risk of malaria. Transmission is perennial on the Island of Grand Comore and unstable throughout the zones of Anjouan and Mohéli. The annual reported number of malaria cases in 2012 was 49,840 with 17 deaths.
Progress
Comoros has made good progress in scaling-up coverage of key malaria control interventions including universal coverage with LLINs. The country has secured sufficient resources for the ACTs required to sustain universal coverage. Comoros has banned oral artemisinin-based monotherapies and has also introduced a policy for the Community Case Management of pneumonia and malaria. The country has made improvements in the tracer MNCH metric for skilled birth attendants and has high DPT3 coverage.

Impact
The annual reported number of malaria cases in 2012 was 49,840 with 17 deaths.

Key Challenge
- Insufficient human resources and a limited number of partners to implement malaria control activities.

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 Q1 2015 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>Q1 2015</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>a) Work to develop a strategy to promote exclusive breastfeeding</td>
<td>Q3 2014</td>
<td></td>
<td>No Progress Reported</td>
</tr>
<tr>
<td></td>
<td>b) Investigate and address reasons for low vitamin A coverage in 2011</td>
<td>Q3 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