70% of the population of Eritrea is at high risk of malaria. The annual reported number of malaria cases in 2012 was 42,178 with 30 deaths.
Progress
Eritrea has made significant progress in scaling-up malaria control interventions. The country has been successful in attracting resources through the Global Fund. Additionally, the country has made policy changes including the banning of oral artemisinin-based monotherapies and the introduction of a policy of Community Case Management of malaria and pneumonia. The country secured sufficient financing to maintain universal coverage of key anti-malarial interventions in 2014. Eritrea has achieved impressive coverage of DPT3 and exclusive breastfeeding. Eritrea has achieved MDG4 by reducing under-five child mortality by over two-thirds since 1990.

Impact
Eritrea has made significant progress in malaria prevention and control. The number of malaria cases (probable and confirmed) has decreased from 125,746 in 2001 to 42,178 in 2012. In the same period, malaria admissions (inpatient cases) declined from 10,886 to 6,780 and deaths from 133 to 30. As such, the country is on track to achieve a 75% decrease in malaria incidence 2000-2015.

Key Challenge
- Delays in procurement of LLINs to sustain universal coverage.

Previous Key Recommended Action

<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 due but the country is working on its NFM concept note for submission in October 2014</td>
</tr>
</tbody>
</table>

New Key Recommended Action

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>MNCH1:</td>
<td>Identify and address reasons for decreasing PMTCT coverage</td>
<td>Q3 2015</td>
</tr>
</tbody>
</table>

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

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