The entire population of The Gambia is at high risk of malaria and transmission is intense for most of the year. The annual reported number of malaria cases in 2013 was 279,829 with 262 deaths.
Progress
The Gambia continues to make good progress with malaria control, including the introduction of Community Case Management for malaria and pneumonia. The Gambia has secured resources to finance the malaria commodities required for 2015. The country has also procured sufficient LLINs to sustain universal coverage. The country has achieved high coverage of the tracer MNCH interventions postnatal care and DPT3 vaccination coverage. The Gambia was awarded a 2015 ALMA Award for Excellence in Implementation of Vector Control.

Impact
In 2008, a total of 508,846 cases of clinical malaria were reported compared to 279,829 in 2013 indicating a 38% reduction of malaria cases in a five year period (HMIS 2008-2013). The number of malaria deaths reported in 2013 is 262.

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 GF New Funding Model 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>Green</td>
<td>The Gambia submitted the GF New Funding Model concept note in July</td>
</tr>
<tr>
<td>MNCH¹: Optimise quality of care</td>
<td>Identify and address reasons for decreasing vitamin A coverage</td>
<td>Q2 2015</td>
<td>Red</td>
<td>No progress reported</td>
</tr>
</tbody>
</table>

The Gambia has responded positively to the recommended action addressing lack of data on postnatal care and has recently reported high coverage of this intervention.

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: Optimise quality of care</td>
<td>Identify and address underlying reasons for the decreasing coverage of PMTCT</td>
<td>Q3 2016</td>
</tr>
</tbody>
</table>

¹ MNCH metrics, recommended actions and response tracked through WHO MCA/iERG
<table>
<thead>
<tr>
<th>Key</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>🟢</td>
<td>Action achieved</td>
</tr>
<tr>
<td>🟡</td>
<td>Some progress</td>
</tr>
<tr>
<td>🟥</td>
<td>No progress</td>
</tr>
<tr>
<td>⬜️</td>
<td>Deliverable not yet due</td>
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</tbody>
</table>