Nearly 50% of the population of Djibouti is at low risk of malaria, while the remaining in the desert is free of malaria. The annual reported number of malaria cases in 2021 was 58,916 and 19 deaths.
Malaria
Global Fund Update
The Global Fund has announced that Djibouti will receive US$11.5 million for HIV, tuberculosis, malaria, and health systems strengthening as the country allocation for 2024-2026. The Global Fund has determined the total allocation amount based on Djibouti’s disease burden and income level, as well as several other factors. The malaria component is also allocated a specific proportion of the total, according to a formula developed by the Global Fund that takes into account several factors, including disease burden and the importance of sustaining life-saving essential services. For Djibouti this is calculated at US$4.6 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Djibouti is urged to ensure that resources are allocated to malaria control from the overall Global Fund country allocation, as well as from domestic resources, to accelerate progress.

Progress
The country continues to work on strengthening and maintaining health services following the devastating impact of the COVID-19 pandemic. In this regard, Djibouti has sufficient funds to procure the necessary ACTs, RDTs and has good stocks. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO and has completed the insecticide resistance management and monitoring plan. The national strategic plan includes activities targeting refugees.

Impact
The annual reported number of malaria cases in 2021 was 58,916 and 19 deaths.

Key Challenges
- Increases in malaria cases have been experienced in the country since 2015.
- Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health, malaria and Neglected Tropical Diseases.

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>Impact</td>
<td>Ensure that malaria services including case management and vector control are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic</td>
<td>Q4 2022</td>
<td></td>
<td>Djibouti has continued to report no stock outs of ACTs and RDTs because of the continued support from WHO. While the plan was to distribute PBO nets in Q3 in all the targeted areas, the country was not able to receive all the nets they needed. This forced the country to also deploy standard LLINs for their mass campaign. The mass campaign is now completed in all the regions except in Djibouti city. IRS implementation was completed in mid-December 2022</td>
</tr>
</tbody>
</table>
### Objective

#### Action Item

- **Policy**
  - Sign, ratify and deposit the AMA instrument at the AUC
  - Suggested completion timeframe: Q1 2023
  - Progress: 
  - Comments - key activities/accomplishments since last quarterly report: Deliverable not yet due

- **Monitoring**
  - Ensure that drug resistance monitoring is conducted and data reported to WHO
  - Suggested completion timeframe: Q1 2023
  - Progress: 
  - Comments - key activities/accomplishments since last quarterly report: Discussions with WHO on the requested technical assistance to build capacity in drug resistance monitoring are still ongoing. Djibouti joined a WHO Regional meeting on antimalarial drug monitoring and testing in Cairo in December 2022 to identify and support priority areas on drug efficacy

- **Address vector control coverage**
  - Work to fill funding gaps for vector control
  - Suggested completion timeframe: Q4 2023
  - Progress: 
  - Comments - key activities/accomplishments since last quarterly report: Deliverable not yet due

The country has responded to the recommended action on finalising the insecticide resistance management and monitoring plan and continues to track progress as this action is implemented.

### New Key Recommended Action

#### Objective

- **Impact**
  - Investigate and address the reasons for the increase in estimated malaria incidence and mortality between 2015 and 2021
  - Suggested completion timeframe: Q4 2023

### RMNCAH and NTDs

#### Progress

Progress in addressing Neglected Tropical Diseases (NTDs) in Djibouti is measured using a composite index calculated from preventive chemotherapy coverage achieved for soil transmitted helminths. Preventive chemotherapy coverage in Djibouti is zero for soil transmitted helminths (0%). Overall, the NTD preventive chemotherapy coverage index for Djibouti in 2021 is 0, with no change compared with the 2020 index value (0).

#### Previous Key Recommended Actions

<table>
<thead>
<tr>
<th>Objective</th>
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</tr>
</thead>
<tbody>
<tr>
<td>RMNCAH¹: Impact</td>
<td>Ensure that essential RMNCAH services are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic. Address any stock-outs of essential RMNCAH commodities</td>
<td>Q4 2020</td>
<td>No Progress Reported</td>
<td>¹ RMNCAH metrics, recommended actions and response tracked through WHO</td>
</tr>
</tbody>
</table>
Djibouti has also responded positively to the RMNCAH recommended actions addressing lack of data on vitamin A coverage and low coverage of ARTs in children, with recent increases in coverage and continues to track progress as these actions are implemented.

**New Key Recommended Action**

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>NTDs</td>
<td>Recognising the negative impact of COVID-19 on the 2021 MDA coverage, ensure that NTD interventions including MDA for Soil Transmitted Helminths is implemented. Given Djibouti last reported data in 2015 to WHO/HQ, if new epidemiological data are available, this should be submitted to WHO using EPIRF and then the country can be classified as not requiring PC for STH, based on recent epi results</td>
<td>Q4 2023</td>
</tr>
</tbody>
</table>

**Key**

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