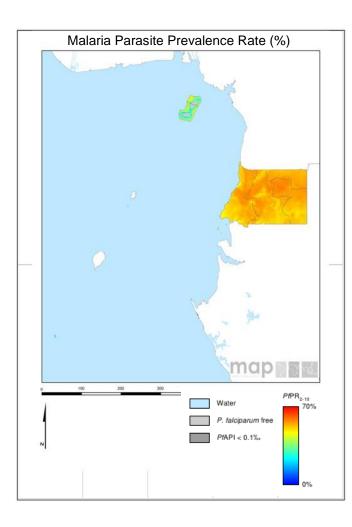
## Equatorial Guinea ALMA Quarterly Report Quarter Four, 2018



## Scorecard for Accountability and Action



#### Metrics

Commodities Financed and Financial Control	
LLIN financing 2018 projection (% of need)	
Public sector RDT financing 2018 projection (% of need)	5
Public sector ACT financing 2018 projection (% of need)	98
World Bank rating on public sector management and institutions 2017 (CPIA Cluster D)	

Insecticide Resistance Monitoring, Implementation and Impact

Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	2
Insecticide resistance monitored since 2015 and data reported to WHO	
National Insecticide Resistance Monitoring and Management Plan	
Scale of Implementation of iCCM (2017)	
Operational LLIN/IRS coverage (% of at risk population)	34
Change in Estimated Malaria Incidence(2010–2017)	
Change in Estimated Malaria Mortality rate(2010–2017)	
Tracer Indicators for Maternal and Child Health and NTD	5
Mass Treatment Coverage for Neglected Tropical	

Disease (NTD index, %)(2017)	
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2017)	38
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2017)	17
% deliveries assisted by skilled birth attendant	68
Postnatal care (within 48 hrs)	
Exclusive breastfeeding (% children < 6 months)	7
Vitamin A Coverage 2016 (2 doses)	
DPT3 coverage 2017 (vaccination among 0-11 month olds)	25

## Key

The entire population of Equatorial Guinea is at high risk of malaria and the transmission is intense all year round. The annual reported number of malaria cases in 2017 was 15,725.



Target achieved or on track Progress but more effort required Not on track No data Not applicable

## Malaria

## Progress

Equatorial Guinea has made progress with malaria control on Bioko Island and is working to extend this success to the mainland. The country has completed the national insecticide resistance monitoring and management plan. The country has committed the majority of the resources required for ACTs in 2018. Equatorial Guinea has decreased the estimated malaria mortality rate by more than 40% since 2010.

## Impact

The annual reported number of malaria cases in 2017 was 15,725.

## Key Challenge

• Lack of resources to achieve universal coverage of malaria control interventions.

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Address funding	Ensure that sufficient domestic resources are committed to malaria control	Q4 2014		The country is planning a high level meeting in 2019 to enhance resource mobilisation and domestic resource commitments
Impact	Investigate and address the reasons for the increase in estimated malaria cases 2010- 2016	Q4 2018		Some of the potential causes of the observed increase in malaria cases include the move towards targeted IRS due to the increased cost of actellic, an increase in mosquito breeding sites, increased number of cases reported due to active case detection and inclusion of private sector data and limited control interventions on the mainland. The country is working to mobilise resources to address some of the identified gaps. The country has reduced the malaria incidence and the mortality rate compared to 2010
Vector Control	Address the decreasing LLIN coverage	Q3 2019		Deliverable not yet due

### **Previous Key Recommended Actions**

Equatorial Guinea has responded positively to the previous recommended actions addressing low coverage of iCCM and the lack of insecticide resistance monitoring data and continues to track progress as these actions are implemented.

# **MNCH and NTDs**

## Progress

Progress in addressing Neglected Tropical Diseases (NTDs) in Equatorial Guinea is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis and soil transmitted helminths. The country has not reported preventive chemotherapy coverage in 2017 to WHO.

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
NTDs	Initiate Preventive Chemotherapy for Lymphatic Filariasis, Onchocerciasis, Schistosomiasis and Soil Transmitted Helminths. For Onchocerciasis, conduct elimination mapping on the mainland	Q4 2018		The country received the Albendazole required for the mass drug administration for Soil Transmitted Helminths. For Schistosomiasis and Lymphatic Filariasis, the country will request support from ESPEN for medicines, training of distributors, social mobilisation, administration of medicines, and evaluation. For the mapping of Onchocerciasis, the country is recruiting a consultant using funds available at country level
MNCH <sup>1</sup> : Optimise quality of care	<ul> <li>a) Investigate and address the reasons for the decreasing coverage of postnatal care</li> </ul>	Q4 2015		No progress reported
	<ul> <li>b) Investigate and address the reasons for the lack of reported data on vitamin A coverage</li> </ul>	Q2 2019		Deliverable not yet due

### **Previous Key Recommended Actions**

Equatorial Guinea has responded positively to the MNCH recommended actions addressing lack of data on vitamin A and low coverage of exclusive breastfeeding and DPT3. The country continues to track progress as these actions are implemented, and the country has recently increased DPT3 coverage.

## **New Key Recommended Action**

Objective	Action Item	Suggested completion timeframe
NTDs	Work to clarify the epidemiology of lymphatic filariasis, onchocerciasis, schistosomiasis and soil transmitted helminths in the country, and initiate a preventive chemotherapy programme for NTDs in line with WHO recommendations	Q1 2019

#### Key

Action achieved
Some progress
No progress
Deliverable not yet due

<sup>1</sup> MNCH metrics, recommended actions and response tracked through WHO MCA