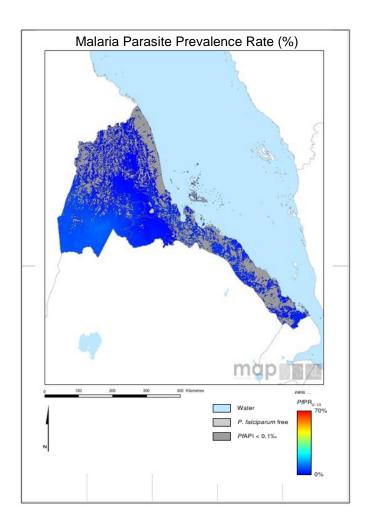
Eritrea ALMA Quarterly Report Quarter Four, 2018



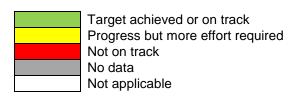
Scorecard for Accountability and Action



trics		
Commodities Financed and Financial Control		
LLIN financing 2018 projection (% of need)		10
Public sector RDT financing 2018 projection (% of need)		10
Public sector ACT financing 2018 projection (% of need)		10
World Bank rating on public sector management and institutions 2017 (CPIA Cluster D)		2.
Insecticide Resistance Monitoring, Implementation a	nd	Impact
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010		
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)		10
Change in Estimated Malaria Incidence(2010–2017)		
Change in Estimated Malaria Mortality rate(2010–2017)		
Tracer Indicators for Maternal and Child Health and I	ITI)s
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2017)	A	6
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2017)		6
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2017)		3
% deliveries assisted by skilled birth attendant		3
Postnatal care (within 48 hrs)		
Exclusive breastfeeding (% children < 6 months)		6
Vitamin A Coverage 2016 (2 doses)		
DPT3 coverage 2017 (vaccination among 0-11 month olds)		9

The annual reported number of malaria cases in 2017 was 32,444 with 8 deaths.

Key



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Malaria

Progress

Eritrea has secured sufficient financing to maintain universal coverage of key antimalarial interventions in 2018. The country has scaled up implementation of iCCM. Eritrea has recently increased coverage of vector control with 100% operational coverage. Eritrea has recently reported the results of the insecticide resistance monitoring to WHO and has completed the national insecticide resistance monitoring and management plan. Eritrea has enhanced the tracking and accountability mechanisms for malaria with the development of the Malaria Control Scorecard.

Impact

The annual reported number of malaria cases in 2017 was 32,444 with 8 deaths.

Previous Key Recommended Actions

Eritrea has responded positively to the previous recommended action addressing CPIA cluster D and continues to track progress as these actions are implemented.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Impact	Investigate and address the reasons for the increase in estimated malaria incidence and malaria mortality rate between 2010 and 2017	Q4 2019

MNCH and NTDs

Progress

Eritrea has achieved good coverage of the tracer MNCH interventions of DPT3, and exclusive breastfeeding.

Progress in addressing Neglected Tropical Diseases (NTDs) in Eritrea is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, schistosomiasis, and trachoma. Preventive chemotherapy coverage in Eritrea is good for lymphatic filariasis (76%), trachoma (69%) and schistosomiasis (50%). Overall, the NTD preventive chemotherapy coverage index for Eritrea in 2017 is 64, which represents substantial increase compared with the 2016 index value (31).).

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH ¹ : Optimise quality of care	Investigate and address the reasons for the lack of reported data on vitamin A coverage	Q2 2019		Whilst vitamin A data are recorded at health facility level, the data are not collated through the health facility reporting forms. These forms are currently being reviewed by the nutrition department so that they can capture Vitamin A coverage in the HMIS

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

Eritrea has responded positively to the MNCH recommended actions addressing low coverage of skilled birth attendants, ARTs in children under 14 years of age and postnatal care. The country continues to track progress as these actions are implemented.

