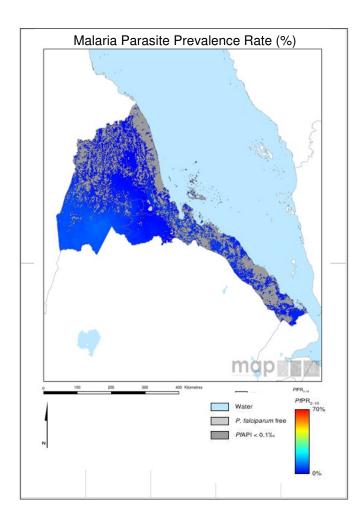
# **Eritrea ALMA Quarterly Report Quarter One, 2019**



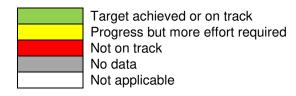
#### **Scorecard for Accountability and Action**



etrics		
Commodities Financed and Financial Control		
LLIN financing 2019 projection (% of need)		100
Public sector RDT financing 2019 projection (% of need)		100
Public sector ACT financing 2019 projection (% of need)		100
World Bank rating on public sector management and institutions 2017 (CPIA Cluster D)		2.5
Insecticide Resistance Monitoring, Implementation at	nd l	Impact
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010		3
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)		100
Change in Estimated Malaria Incidence(2010–2017)		
Change in Estimated Malaria Mortality rate(2010–2017)		
Tracer Indicators for Maternal and Child Health and N	NTE	)s
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2017)		64
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2017)		62
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2017)		35
% deliveries assisted by skilled birth attendant		34
Postnatal care (within 48 hrs)		5
Exclusive breastfeeding (% children < 6 months)		69
Vitamin A Coverage 2016 (2 doses)		
DPT3 coverage 2017 (vaccination among 0-11 month olds)		95
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The annual reported number of malaria cases in 2017 was 32,444 with 8 deaths.

### Key



## **Eritrea ALMA Quarterly Report Quarter One, 2019**



#### Malaria

#### **Progress**

Eritrea has secured sufficient financing to maintain universal coverage of key antimalarial interventions in 2019. 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** 

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Impact	Investigate and address the reasons for the increase in estimated malaria incidence and malaria mortality rate between 2010 and 2017	Q4 2019		Eritrea reports that cases decreased in 2018 by 14% compared to 2017, with decreases overall reported since 2010

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

#### RMNCAH and NTDs

#### **Progress**

Eritrea has achieved good coverage of the tracer RMNCAH 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, representing a substantial increase compared with 2016.

**Previous Key Recommended Actions** 

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
RMNCAH <sup>1</sup> : 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, data are not collated through the health facility reporting forms. These forms have been adapted to include vitamin A reporting and have been distributed to health facilities. Additionally, the HMIS unit will soon include the indicator in the DHIS2 for immediate reporting

<sup>&</sup>lt;sup>1</sup> RMNCAH metrics, recommended actions and response tracked through WHO

Eritrea has responded positively to the RMNCAH 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.

