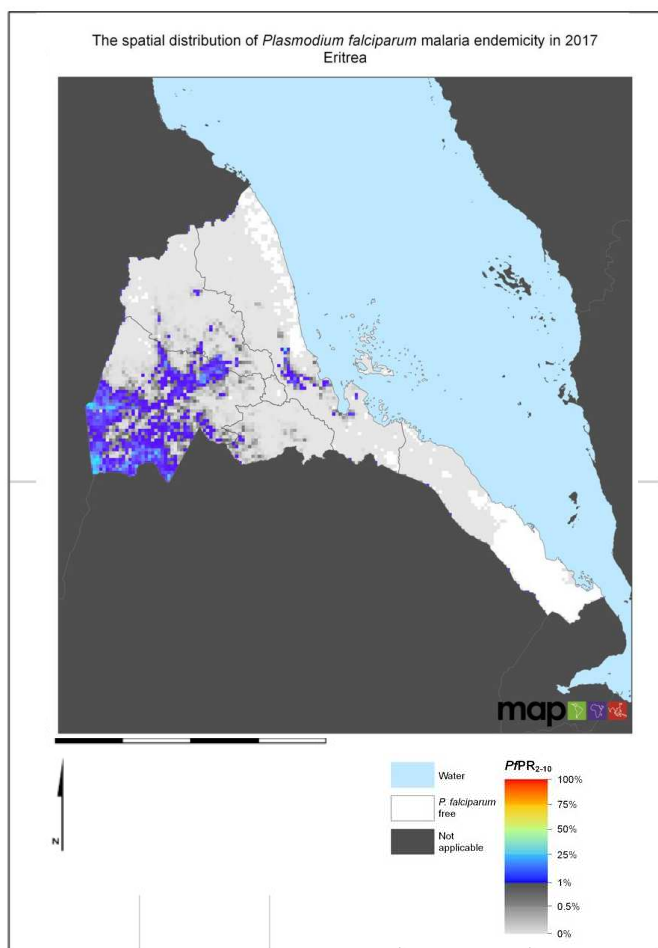


### Scorecard for Accountability and Action



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

#### Metrics

| 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 2018 (CPIA Cluster D)                      |  | 2.6 |
| Insecticide Resistance Monitoring, Implementation and 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 NTDs  |  |     |
| Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2017)                               |  | 64  |
| Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2018)          |  | 51  |
| Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2018) |  | 37  |
| % deliveries assisted by skilled birth attendant  |  | 34  |
| Postnatal care (within 48 hrs)  |  | 5   |
| Exclusive breastfeeding (% children < 6 months)   |  | 69  |
| Vitamin A Coverage 2017 (2 doses)   |  |     |
| DPT3 coverage 2018 (vaccination among 0-11 month olds)  |  | 95  |

#### Key

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



## **Malaria**

### **Progress**

Eritrea has secured sufficient financing to maintain universal coverage of key anti-malarial interventions in 2019. The country has scaled up implementation of iCCM. Eritrea has recently increased coverage of vector control with 100% operational coverage of the targeted at risk population. 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 the need to investigate and address the reasons for the increase in estimated malaria incidence and malaria mortality rates between 2010 and 2017 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**

Eritrea has responded positively to the RMNCAH recommended actions addressing low coverage of skilled birth attendants, ARTs in children under 14 years of age (with a recent 5% increase in coverage), and postnatal care, as well as lack of data on vitamin A coverage. The country continues to track progress as these actions are implemented.