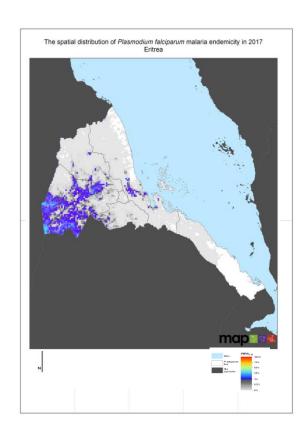
Eritrea ALMA Quarterly Report Quarter One, 2023



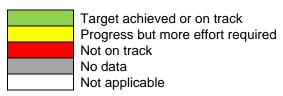
Scorecard for Accountability and Action



Commodities Financed		
LLIN financing 2023 projection (% of need)		100
Public sector RDT financing 2023 projection (% of need)		100
Public sector ACT financing 2023 projection (% of need)		100
Policy		
Signed, ratified and deposited the AMA instrument at the AUC		
Malaria activities targeting refugees in Malaria Strategic Plan		
Malaria activities targeting IDPs in Malaria Strategic Plan		
Country Reporting Launch of Zero Malaria Starts with Me Campaign		
End Malaria Council and Fund Launched		
Resistance Monitoring, Implementation and Impact		
Drug Resistance Monitoring Conducted (2018-2020) and data reported to WHO		
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		
RDTs in stock (>6 months stock)		
ACTs in stock (>6 months stock)		
LLIN/IRS campaign on track		
Operational LLIN/IRS coverage (% of at risk population)		100
On track to reduce case incidence by ≥40% by 2021 (vs 2015)		
On track to reduce case mortality by ≥40% by 2021 (vs 2015)		
Tracer Indicators for Maternal and Child Health, NTDs an	d C	ovid 19
Scale of Implementation of ICCM		
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2021)		8:
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2021)		50
Vitamin A Coverage 2021 (2 doses)		71
DPT3 coverage 2021 (vaccination among 0-11 month		

The annual reported number of malaria cases in 2021 was 44,036 with 6 deaths.

Key



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Malaria

Global Fund Allocation

The Global Fund announced that Eritrea will receive US\$44.6 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 Eritrea'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 previous disbursements. For Eritrea this is calculated at US\$ 18 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Eritrea 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. The Global Fund resources are especially important in the current resource constrained environment. The ongoing economic crisis, increased costs of doing business, and the need to introduce newer more expensive commodities to address insecticide and drug resistance mean that countries may experience shortfalls in sustaining their life-saving malaria essential services.

Progress

The country continues to work on strengthening and maintaining health services following the devastating impact of the COVID-19 pandemic. In this regard Eritrea secured sufficient financing to maintain universal coverage of key anti-malarial interventions in 2023. The country has scaled up implementation of iCCM. Eritrea has 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 carried out drug resistance testing since 2018 and has reported the results to WHO. The national strategic plan includes activities targeting refugees.

In line with the priority agenda of the ALMA chair, His Excellency President Umaro Sissoco Embaló, Eritrea has enhanced the tracking and accountability mechanisms for malaria with the development of the Malaria Control Scorecard, however this scorecard is not yet publicly shared on the ALMA Scorecard Hub.

Impact

The annual reported number of malaria cases in 2021 was 44,036 with 6 deaths.

Key Challenge

 The invasion of the Anopheles stephensi mosquito threatens to increase urban malaria transmission. **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 mortality between 2015 and 2021	Q4 2023		Malaria cases declined from 83,727 cases per 1,000 population per year in 2016 to 49,571 in 2018 but then increased to 69,218 in 2022. The reasons for the upsurge in the 2022 incidence are being investigated by the NMCP in collaboration with the affected districts. The Program has confirmed the efficacy of the current antimalarial drugs and is investigating the invasion on Anopheles stephensi to determine the magnitude of the problem and take action. Malaria specific deaths reduced from 404 in 1998 to 6 5 in 2022.
Policy	Sign, ratify and deposit the AMA instrument at the AUC	Q1 2023		No progress reported

RMNCAH and NTDs

Progress

Eritrea has achieved good coverage of the tracer RMNCAH intervention of DPT3.

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. In 2021, preventive chemotherapy coverage was 98% for trachoma, 85% for lymphatic filariasis and 68% for schistosomiasis. Overall, the NTD preventive chemotherapy coverage index for Eritrea in 2021 is 83, which represents a very substantial increase compared with the 2020 index value (31).

