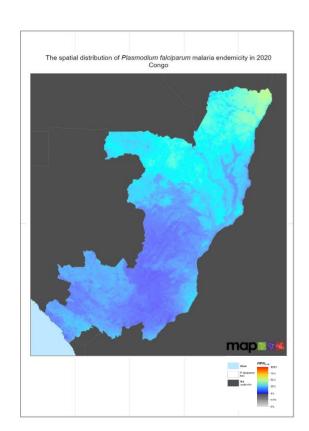
Congo ALMA Quarterly Report Quarter Four, 2023



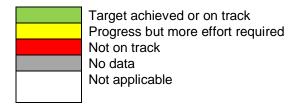
Scorecard for Accountability and Action



Financing	
LLIN financing (2024-2026) projection (% of need)	100
Public sector ACTs and RTDs financing (2024-2026) projection (% of need)	100
% of National Malaria Strategic Plan Financed (2024- 2026)	61
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	
Zero Malaria Starts With Me Launched	
End Malaria Council and Fund Launched	
Resistance Monitoring, Implementation and Impact	
Drug efficacy studies conducted since 2019 and data reported to WHO	
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	3
Insecticide resistance monitored since 2015 and data reported to WHO	
RDTs in stock (>6 months stock)	
ACTs in stock (>6 months stock)	
LLIN/IRS campaign on track	
% of iTNs/IRS delivered in 2023 that include next generation insecticides	
On track to reduce case incidence by ≥55% by 2022 (vs 2015)	
On track to reduce case mortality by ≥55% by 2022 (vs 2015)	
Tracer Indicators for Maternal and Child Health, NTDs and	Covid 19
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2022)	50
% of Neglected Tropical Disease MDAs Achieving WHO Targets	25
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2022)	13
Vitamin A Coverage 2022 (2 doses)	6
DPT3 coverage 2022 (vaccination among 0-11 month olds)	78

The entire population of the Republic of the Congo is at high risk of malaria and transmission is intense all year round. The annual reported number of malaria cases in 2022 was 581,329 with 951 deaths.

Key



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Malaria

Africa is at the centre of a perfect storm that threatens to disrupt malaria services and undo decades of progress. We must act urgently to both prevent and mitigate the adverse effects of the ongoing global financial crisis, increasing biological threats, climate change, and humanitarian crises. These threats represent the most serious emergency facing malaria in 20 years and will lead to malaria upsurges and epidemics if not addressed. AU Member States face a \$1.5 billion gap just to sustain existing, yet inadequate, levels of malaria-related services between now and 2026. To get back on track and eliminate malaria, we will need to mobilise another \$5.2 billion dollars annually to fully finance our national malaria plans. Climate change presents a significant threat to the progress that we have made. Africa is disproportionately exposed to the risks of climate change and by the 2030s, 150 million additional people will be at risk of malaria because of warmer temperatures and increased rainfall. Climate disasters displace millions and destroy roads and health facilities, reducing access to health services. There is urgency to decarbonise and reduce our carbon footprint. We must implement integrated and multisectoral solutions, and adapt our health systems to the threats of both climate change and pandemics. We must also take action to confront the threats of insecticide and drug resistance, reduced efficacy of rapid diagnostic tests, and the Anopheles stephensi mosquito which spreads malaria in both urban and rural areas. The good news is that the malaria toolkit continues to expand. WHO has approved the use of dual-insecticide mosquito nets that are 43% more effective than traditional mosquito nets and will address the impact of insecticide-resistance. New medicines for treating malaria and two malaria vaccines for children have also been approved with an increasing number of countries deploying these new tools. The scaling up of these interventions will help us achieve our goal of eliminating malaria. This will require integrated approaches with malaria as a pathfinder for pandemic preparedness, climate change and health, Primary Health Care and Universal Health Coverage. We must work to sustain and increase domestic resource commitments including through multisectoral End Malaria and NTD councils and Funds, which have raised over US\$50 million.

Progress

Congo secured sufficient resources to cover the required needs for ACTs, RDTs and LLINs required in 2024-2026, but there remain significant gaps to fully implement the national strategic plan. The country has recently reported the results of insecticide resistance monitoring and drug resistance and has reported the results to WHO.

In line with the priority agenda of the ALMA chair, His Excellency President Umaro Sissoco Embaló, Congo has enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Scorecard, however this scorecard has not yet been shared through the ALMA Scorecard Hub. The NTD country scorecard has been shared through the Scorecard Hub. The country should consider establishing an End Malaria Council and Fund to enhance domestic resource mobilization and multi-sectoral action.

Impact

The annual reported number of malaria cases in 2022 was 581,329 with 951 deaths.

Key Challenge

Lack of resources to fully implement the national strategic plan.

New Key Recommended Action

	Action Item	Suggested completion timeframe
Impact	Investigate and address the reasons for the increase in estimated malaria incidence since 2015, which means that the country is not on track to achieve the 2025 target of a 75% reduction in malaria incidence	Q4 2024

Reproductive, Maternal, Newborn, Adolescent and Child Health

Progress

The country has enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard.

Previous Key Recommended Actions

Congo has responded positively to the RMNCAH recommended action addressing low coverage of ARTs in children, and vitamin A and continues to track progress as these actions are implemented.

Neglected Tropical Diseases Progress

Progress in addressing Neglected Tropical Diseases (NTDs) in Congo is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis and soil transmitted helminths. Preventive chemotherapy coverage in Congo is low for schistosomiasis (34%), soil transmitted helminths (45%) and for lymphatic filariasis (55%). It is good for onchocerciasis (72%). Overall, the NTD preventive chemotherapy coverage index for Congo in 2022 is 50 and this represents an increase compared with the 2021 index value (48). The country did not reach any WHO MDA coverage target in 2022.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
NTDs MDA	Work to increase the coverage of all the preventive chemotherapy NTDs and reach WHO targets.	Q4 2024

