The entire population of Liberia is at high risk for malaria. The annual reported number of malaria cases in 2022 was 760,056 with 353 deaths.
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 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 also 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 our carbon footprint, implement integrated and multisectoral solutions, and adapt our health systems to the threats of climate change. 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 and 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
Liberia secured the resources required for the procurement and distribution of the anti-malarial commodities in 2024-26. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO.

In line with the priority agenda of the ALMA chair, His Excellency President Umaro Sissoco Embaló, Liberia has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control Scorecard, but this is not yet posted on the ALMA Scorecard Hub. The country is considering establishing an End Malaria Council and Fund to enhance domestic resource mobilization and multisectoral action.

Impact
The annual reported number of malaria cases in 2022 was 760,056 with 353 deaths.

Key Challenges
- The increase in malaria incidence and mortality rates estimated by WHO between 2015 and 2021.
- Insufficient resources to fully implement the national strategic plan
Previous Key Recommended Action

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
<th>Progress</th>
<th>Comments - key activities/accomplishments since last quarterly report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy</td>
<td>Sign, ratify and deposit the AMA instrument at the AUC</td>
<td>Q1 2023</td>
<td>No progress reported</td>
<td></td>
</tr>
</tbody>
</table>

New Key Recommended Action

<table>
<thead>
<tr>
<th>Impact</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
<td>Q4 2024</td>
<td></td>
</tr>
</tbody>
</table>

Reproductive, Maternal, Newborn, Adolescent and Child Health

Progress
Liberia has enhanced the tracking and accountability mechanisms with the development and launch of the Reproductive, Maternal, Newborn and Child Health Scorecard.

Previous Key Recommended Actions

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
<th>Progress</th>
<th>Comments - key activities/accomplishments since last quarterly report</th>
</tr>
</thead>
<tbody>
<tr>
<td>RMNCAH²: Optimise quality of care</td>
<td>Address the falling coverage of vitamin A</td>
<td>Q1 2021</td>
<td>No progress reported</td>
<td></td>
</tr>
</tbody>
</table>

Liberia has responded positively to the RMNCAH recommended action addressing low coverage of ARTs, with a 5% increase in coverage over the past year, and continues to track progress as actions are implemented.

Neglected Tropical Diseases

Progress
Progress in addressing Neglected Tropical Diseases (NTDs) in Liberia is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis, and soil transmitted helminths. In 2022, preventive chemotherapy coverage was 73% for lymphatic filariasis, 73% for onchocerciasis, 86% for schistosomiasis and 59% for soil transmitted helminthiasis. Overall, the NTD preventive chemotherapy coverage index for Liberia in 2022 is 72, which represents a very substantial increase compared with the 2021 index value (61). The country reached WHO MDA coverage target for lymphatic Filariasis and schistosomiasis only.

Key
- Action achieved
- Some progress
- No progress
- Deliverable not yet due