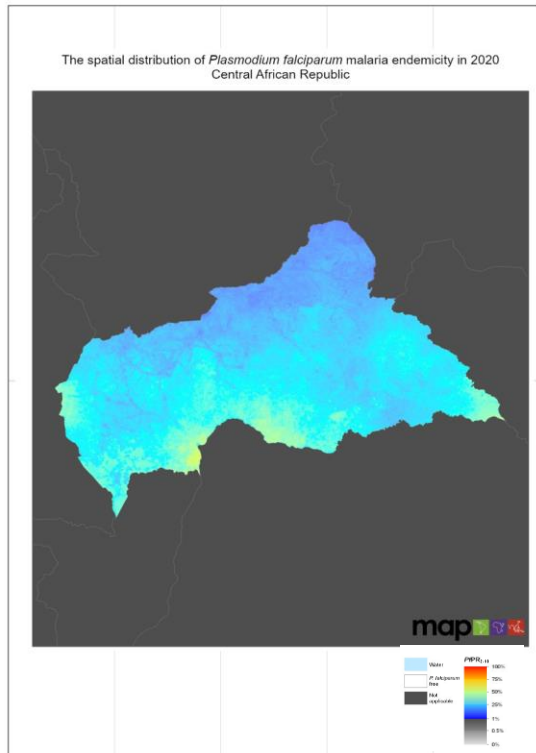


Scorecard for Accountability and Action



There is intense malaria transmission all year round in the Central African Republic and the entire population of the country is at high risk. The annual reported number of malaria cases in 2022 was 2,460,689 with 1547 deaths.

Metrics

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)	 	23
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	 	4
Insecticide resistance monitored since 2015 and data reported to WHO	 	
RDTs in stock (>6 months stock)	 	
ACTs in stock (>6 months stock)	 	
LLINIRS campaign on track	 	
% of vector control in the last year with next generation materials	 	92
On track to reduce malaria incidence by at least 75% by 2025 (vs 2015)	 	
On track to reduce malaria mortality by at least 75% by 2025 (vs 2015)	 	
Tracer Indicators for Maternal and Child Health and NTDs		
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2022)	 	0
% of Neglected Tropical Disease MDAs Achieving WHO Targets	 	0
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2022)	 	36
Vitamin A Coverage 2022 (2 doses)	 	
DPT3 coverage 2022 (vaccination among 0-11 month olds)	 	42

Key

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

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

Central African Republic has recently submitted insecticide resistance monitoring data to WHO and has reported the results to WHO. In response to the identified resistance the country has rolled out next generation mosquito nets. The ACTs, RDTs and LLINs needed for 2023-26 are fully financed. The national strategic plan includes activities targeting IDPs.

In line with the priority agenda of the ALMA chair, His Excellency President Umaro Sissoco Embaló, the country should consider establishing an End Malaria Council and Fund to enhance domestic resource mobilization and multi-sectoral action. The country has recently rolled out their malaria scorecard for accountability and action.

Impact

The annual reported number of malaria cases in 2021 was 2,223,562 with 2,412 deaths.

Key Challenges

- Limited access to some at-risk populations is hampering coverage of malaria control interventions.
- Limited resources to further scale-up interventions.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Policy	Sign, ratify and deposit the AMA instrument at the AUC	Q1 2023		No progress reported
Impact	Investigate and address the reasons for the increase in estimated malaria mortality since 2015, which means that the country is not on track to achieve the 2025 target of a 75% reduction in malaria incidence and deaths	Q4 2024		The NMCP finalized the GF grant signature and activities implementation are on-going. Diagnosis and treatment are implemented at health facility and community levels. The MOH launched the new community health strategy which will support the strengthening malaria community case management. The country is also scaling up the distribution of dial ai nets which are 45% more impactful against malaria compared to pyrethroid only nets, which should also contribute to further reductions in cases and deaths.

Central African Republic has responded positively to the recommended actions on drug and insecticide resistance monitoring and is working to collect and submit these data to WHO.

Reproductive, Maternal, Newborn, Adolescent and Child Health

Previous Key Recommended Actions

The country has responded to the RMNCAH recommended actions addressing the lack of data for vitamin A and low coverage of ARTs in children and continues to track progress as this action is implemented.

Neglected Tropical Diseases





Progress

Progress in addressing Neglected Tropical Diseases (NTDs) in Central African Republic is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage in Central African Republic is zero for schistosomiasis (0%), for soil transmitted helminths (0%), onchocerciasis (0%) and very low for trachoma (28%). It is good for lymphatic filariasis (77%). Overall, the NTD preventive chemotherapy coverage index for Central African Republic in 2022 is 0 and this represents a very substantial decrease compared with the 2023 index value (43). The country reached the WHO MDA targets only for Lymphatic Filariasis.

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Optimise quality of care	Work to implement the preventive chemotherapy for soil transmitted helminthiasis, onchocerciasis and soil transmitted helminthiasis, improve preventive chemotherapy coverage for trachoma and reach WHO targets.	Q4 2024		Deliverable not yet due

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due