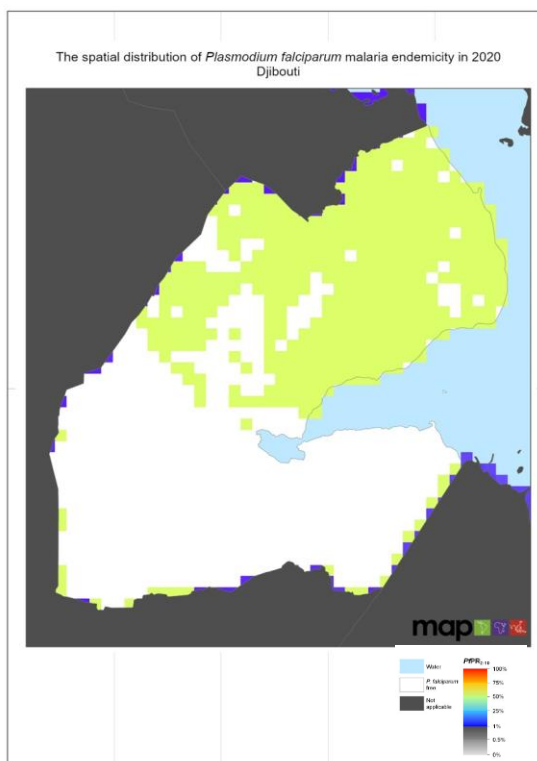


### Scorecard for Accountability and Action



Nearly 50% of the population of Djibouti is at low risk of malaria, while the remaining in the desert is free of malaria. The annual reported number of malaria cases in 2022 was 40,648 and 62 deaths.

#### Metrics

Financing		
LLIN financing (2024-2026) projection (% of need)		61
Public sector ACTs and RTDs financing (2024-2026) projection (% of need)		100
% of National Malaria Strategic Plan Financed (2024-2026)		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		
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)		
LLIN/IRS campaign on track		
% of vector control in the last year with next generation materials		100
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 (2023)		17
Vitamin A Coverage 2022 (2 doses)		
DPT3 coverage 2023 (vaccination among 0-11 month olds)	▲	72

#### 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\$60 million

## **Progress**

Djibouti has sufficient funds to procure the necessary ACTs and RDTs for 2023-2026. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO and has completed the insecticide resistance management and monitoring plan. The national strategic plan includes activities targeting refugees. 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 40,648 and 62 deaths.

## **Key Challenges**

- Increases in malaria cases have been experienced in the country since 2015.
- Invasion of the *Anopheles stephensi* mosquito leading to increased urban malaria transmission.

### 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

The country has responded to the recommended actions on drug resistance monitoring and finalising the insecticide resistance management and monitoring plan and continues to track progress as these actions are implemented.

## Reproductive, Maternal, Newborn, Adolescent and Child Health

### Previous Key Recommended Actions

Djibouti has also responded positively to the RMNCAH recommended actions addressing lack of data on vitamin A coverage and low coverage of ARTs in children, with recent increases in coverage and continues to track progress as these actions are implemented.

## Neglected Tropical Diseases





### Progress

Progress in addressing Neglected Tropical Diseases (NTDs) in Djibouti is measured using a composite index calculated from preventive chemotherapy coverage achieved for soil transmitted helminths. Preventive chemotherapy coverage in Djibouti is zero for soil transmitted helminths (0%). Overall, the NTD preventive chemotherapy coverage index for Djibouti in 2022 is 0, with no change compared with the 2021 index value (0). The country did not organize any MDA in 2022. Djibouti have signed the Kigali declaration.

### Previous Key Recommended Action

The country has responded to the recommended action on work to implement preventive chemotherapy for soil transmitted helminths and reaching WHO targets

### Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due