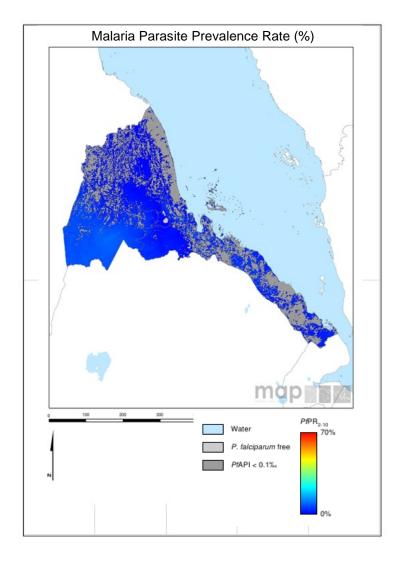
Eritrea ALMA Quarterly Report Quarter One, 2016



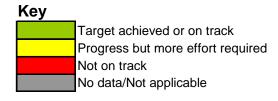
Scorecard for Accountability and Action



Metrics

Trics Commodities Financed and Financial Control		
Commodities Financed and Financial Control		
LLIN financing 2016 projection (% of need)		100
Public sector RDT financing 2016 projection (% of need)		100
Public sector ACT financing 2016 projection (% of need)		100
World Bank rating on public sector management and institutions 2014 (CPIA Cluster D)		2.6
Insecticide Resistance Monitoring, Implementation ar	nd	m pact
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010		2
Insecticide resistance monitored since 2014 and data reported to WHO		
National Insecticide Resistance Monitoring and Management Plan		
Scale of Implementation of iCCM (2013)		
Operational LLIN/IRS coverage (% of at risk population)		86
>75% Decrease in Malaria Incidence Projected 2000–2015		
Tracer Indicators for Maternal and Child Health		
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2014)		49
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2014)		18
% deliveries assisted by skilled birth attendant		34
Postnatal care (within 48 hrs)		
Exclusive breastfeeding (% children < 6 months)		69
Vitamin A Coverage 2013 (2 doses)		37
		94

The annual reported number of malaria cases in 2014 was 35,725 with 15 deaths.



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Malaria

Progress

Eritrea has made significant progress in scaling-up malaria control interventions. Eritrea has secured sufficient financing to maintain universal coverage of key anti-malarial interventions in 2016. The country has scaled up implementation of iCCM. The country has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO. Eritrea was awarded a 2016 ALMA Award for Excellence for achieving the Millennium Development Goals (MDGs) target for malaria.

Impact

Eritrea has made significant progress in malaria prevention and control. The number of malaria cases (probable and confirmed) has decreased from 125,746 in 2001 to 35,725 in 2014. In the same period malaria deaths declined from 133 to 15. WHO projects that the country will achieve a greater than 75% decrease in malaria incidence between 2000 and 2015.

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Address vector control coverage	Identify and address reasons for decreasing vector control coverage	Q4 2016		Deliverable not yet due

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Vector Control	Given the reported mosquito resistance to 2 classes of insecticide, urgently finalise the national insecticide resistance monitoring and management plan	Q1 2017

MNCH

Progress

Eritrea has also achieved good coverage of the tracer MNCH interventions of DPT3 and exclusive breastfeeding. Eritrea has achieved MDG4 by reducing under-five child mortality by over two-thirds since 1990.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH¹: Optimise quality of care	Identify and address reasons for decreasing DPT3 coverage	Q2 2016		Deliverable not yet due

¹ MNCH metrics, recommended actions and response tracked through WHO MCA

Eritrea has responded positively to the MNCH recommended actions addressing low coverage of skilled birth attendants, vitamin A and postnatal care and continues to track progress as these actions are implemented.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
MNCH ¹ : Optimise quality of care	Work to accelerate coverage of ARTs in children under 14 years of age	Q1 2017

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

¹ MNCH metrics, recommended actions and response tracked through WHO MCA