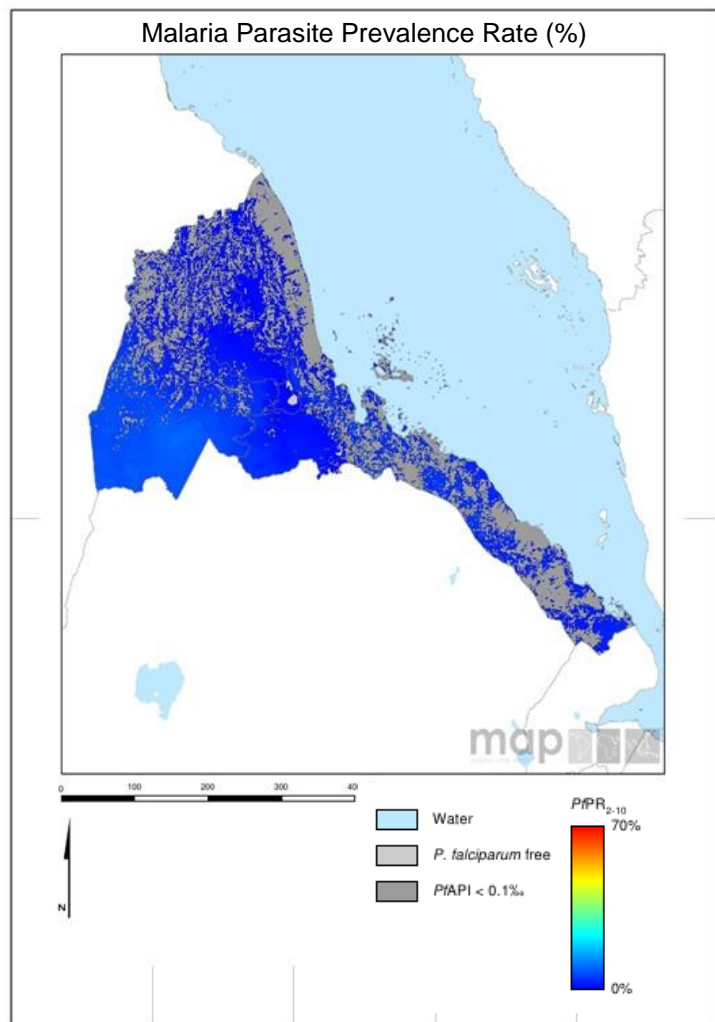


## Scorecard for Accountability and Action



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

### Metrics

#### 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 and Impact

|  |    |
|--|----|
| 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 LLINIRS 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 (2015)          | ▲ | 60 |
| Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2015) | ▲ | 35 |
| % 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 |
| DPT3 coverage 2014 (vaccination among 0-11 month olds)  |   | 94 |

### Key

|   |                                   |
|---|-----------------------------------|
| <span style="background-color: #90EE90; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> | Target achieved or on track       |
| <span style="background-color: #FFFF00; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> | Progress but more effort required |
| <span style="background-color: #FF0000; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> | Not on track                      |
| <span style="background-color: #A9A9A9; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> | No data/Not applicable            |

## 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 and has recently completed the national insecticide resistance monitoring and management plan. 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 Actions

| 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   |
| Vector Control                  | Given the reported mosquito resistance to 2 classes of insecticide, urgently finalise the national insecticide resistance monitoring and management plan | Q1 2017                        |          | The country has finalised the national insecticide resistance management plan |

## MNCH

### Progress

Eritrea has achieved good coverage of the tracer MNCH interventions of DPT3 and exclusive breastfeeding. The country has recently increased coverage of ART in the total population.





### Previous Key Recommended Actions

| Objective                                    | Action Item  | Suggested completion timeframe | Progress | Comments - key activities/accomplishments since last quarterly report  |
|--|--|--------------------------------|----------|--|
| MNCH <sup>1</sup> : Optimise quality of care | a) Identify and address reasons for decreasing DPT3 coverage             | Q2 2016                        |          | Deliverable not yet due  |
|  | b) Work to accelerate coverage of ARTs in children under 14 years of age | Q1 2017                        |          | Deliverable not yet due but Eritrea has increased ART coverage by 5% in the total population and by 6% in children |

<sup>1</sup> 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. The country continues to track progress as these actions are implemented.

**Key**

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