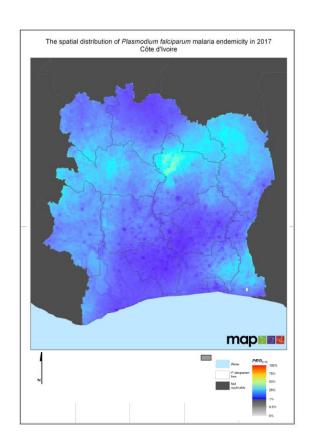
Côte d'Ivoire ALMA Quarterly Report Quarter Two, 2020



Scorecard for Accountability and Action



Commodities Financed and Financial Control		
LLIN financing 2020 projection (% of need)		100
Public sector RDT financing 2020 projection (% of need)		100
Public sector ACT financing 2020 projection (% of need)		100
World Bank rating on public sector management and institutions 2018 (CPIA Cluster D)		3.3
Insecticide Resistance Monitoring, Implementation a	nd	Impact
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010		4
Insecticide resistance monitored since 2015 and data reported to WHO		
National Insecticide Resistance Monitoring and Management Plan		
RDTs in stock (>9 months stock)		
ACTs in stock (>9 months stock)		
LLIN/IRS campaign on track	L	
Country Reporting Launch of Zero Malaria Starts with Me Campaign		
Scale of Implementation of iCCM (2017)		
Operational LLIN/IRS coverage (% of at risk population)		100
On track to reduce case incidence by ≥40% by 2020 (vs 2015)		
On track to reduce case mortality by ≥40% by 2020 (vs 2015)		
Tracer Indicators for Maternal and Child Health and I	ITI	Os
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2018)		21
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2019)	A	63
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2019)		36
% deliveries assisted by skilled birth attendant		74
Postnatal care (within 48 hrs)		80
Exclusive breastfeeding (% children < 6 months)		23
Vitamin A Coverage 2018 (2 doses)		84
DPT3 coverage 2019 (vaccination among 0-11		84

Malaria transmission occurs all year round throughout Côte d'Ivoire, although it is more seasonal in the north of the country. The annual reported number of malaria cases in 2018 was 5,297,926 with 3,133 deaths.

Key



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Malaria

Sustaining Essential Health Services During the COVID-19 Pandemic

The COVID-19 pandemic is putting an incredible strain on health systems across Africa. Health systems are required to maintain routine health services for other illnesses even as they handle the additional burden. In order to prevent widespread morbidity and mortality, it is of vital importance that we work to sustain the delivery of essential life-saving interventions during this difficult time including for Reproductive, Maternal, Newborn, Child and Adolescent health and malaria.

WHO underlines the critical importance of sustaining efforts to prevent, detect and treat malaria during the COVID-19 pandemic. It is of vital importance to ensure the continuity of malaria prevention and treatment services including distribution of insecticide-treated nets and indoor residual spraying, as well as chemoprevention for pregnant women and young children (intermittent preventive treatment in pregnancy and seasonal malaria chemoprevention). Any intervention must consider the importance of both lowering malaria-related mortality and ensuring the safety of communities and health workers given the ease of transmission of COVID-19.

For Cote d'Ivoire, it will be of vital importance to ensure that the planning for the universal coverage campaign for long-lasting insecticidal nets (LLINs) for 2021 goes ahead, whilst taking into account physical distancing, in accordance with the recent guidance and recommendations from WHO and the RBM Partnership to End Malaria. Without this campaign, coupled with the need to also sustain essential health services including malaria case management, there will be an increase in malaria cases and deaths. Under the worst-case scenario, in which all ITN campaigns are suspended and there is a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could be a 23.2% increase in malaria cases, and a 111.4% increase in malaria deaths in Cote d'Ivoire. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

Progress

Côte d'Ivoire has successfully raised resources for the financing of LLINs, RDTs, and ACTs in 2020 and has procured enough LLINs to achieve universal operational coverage of the has achieved 100% operational coverage of the targeted at risk population with LLINs. The country has also scaled up implementation of iCCM, Côte d'Ivoire has recently reported the results of insecticide resistance testing to WHO. The country has decreased the estimated malaria incidence and mortality rates by more than 40% since 2010. Côte d'Ivoire has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Scorecard.

Key Challenge

 Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health including malaria.

Impact

The annual reported number of malaria cases in 2018 was 5,297,926 with 3,133 deaths.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishmen ts since last quarterly report
Impact	Ensure that malaria services including case management and vector control are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic	Q4 2020		The country has worked to accelerate ACT and RDT deliveries. The IRS campaign is planned for Q3
Address funding	Ensure the GF malaria funding application is submitted by Q2 2020 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q2 2020		The country submitted the GF malaria application in Q2

RMNCAH and NTDs

Progress

The country has made progress on the tracer RMNCAH intervention of postnatal care, and has recently increased coverage of vitamin A and of ARTs. Côte d'Ivoire has enhanced tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Côte d'Ivoire is measured using a composite index calculated from preventive chemotherapy coverage achieved for onchocerciasis, schistosomiasis, soil transmitted helminths, lymphatic filariasis and trachoma. Preventive chemotherapy coverage in Côte d'Ivoire is very good for onchocerciasis (99%), schistosomiasis (93%) and for lymphatic filariasis (74%). However, preventive chemotherapy coverage is below WHO target for soil transmitted helminths (55%) and it was not implemented for trachoma (0%). Overall, the NTD preventive chemotherapy coverage index for Côte d'Ivoire in 2018 is 21 and this represents a substantial decrease compared with the 2017 index value (75).

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
NTDs	Implement preventive chemotherapy for Trachoma and work to increase the preventive chemotherapy for Soil Transmitted Helminths to reach WHO targets	Q4 2020		No progress reported
RMNCAH1: Optimise quality of care	Address the falling coverage of vitamin A	Q1 2021		Deliverable not yet due
	b) Ensure that essential RMNCAH services are sustained and implemented whilst using Covid-19 sensitive guidelines during the pandemic. Address any stock-outs of essential RMNCAH commodities	Q4 2020		Deliverable not yet due

¹ RMNCAH metrics, recommended actions and response tracked through WHO

Côte d'Ivoire has responded positively to the RMNCAH recommended action addressing low coverage of exclusive breastfeeding, and continues to track progress as this action is implemented.

