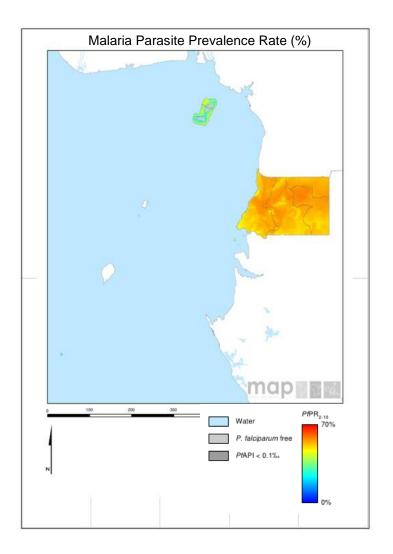
Equatorial Guinea ALMA Quarterly Report Quarter Two, 2016



Scorecard for Accountability and Action



Metrics

Commodities Financed and Financial Control	
LLIN financing 2016 projection (% of need)	
Public sector RDT financing 2016 projection (% of need)	
Public sector ACT financing 2016 projection (% of need)	
World Bank rating on public sector management and institutions 2014 (CPIA Cluster D)	
Insecticide Resistance Monitoring, Implementation an	d 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 LLIN/IRS coverage (% of at risk population)	67
>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)	31
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2015)	10
% deliveries assisted by skilled birth attendant	68
Postnatal care (within 48 hrs)	44
Exclusive breastfeeding (% children < 6 months)	7
Vitamin A Coverage 2013 (2 doses)	
DPT3 coverage 2014 (vaccination among 0-11 month olds)	24
ACTIONS ACTIONS OF THE STATE OF	

The entire population of Equatorial Guinea is at high risk of malaria and the transmission is intense all year round. The annual reported number of malaria cases in 2014 was 20,417.

Key

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

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Malaria

Progress

Equatorial Guinea has made progress with malaria control on Bioko Island and is working to extend this success to the mainland. The country has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO. Furthermore, Equatorial Guinea has completed the national insecticide resistance monitoring and management plan.

Impact

The annual reported number of malaria cases in 2014 was 20,417. WHO, through modeling, estimates that there has been a less than 50% decrease in malaria incidence between 2000 and 2015.

Key Challenges

- Lack of data on needs and outstanding funding gaps.
- Lack of resources to achieve universal coverage of malaria control interventions.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Address funding	Ensure that sufficient domestic resources are committed to malaria control	Q4 2014		The country is updating its National Strategic plan and is quantifying the national requirements to form a basis for resource mobilisation
Optimise quality of care	Provide data on the scale up iCCM implementation country wide	Q1 2017		Deliverable not yet due

MNCH

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH ¹ : Optimise quality of care	Address reasons for decreasing breastfeeding coverage	Q1 2014		Recent surveys from the island of Bioko in 2015 indicate coverage of exclusive breastfeeding may have increased to around 35%. The country is planning awareness campaigns in 2016 to enhance exclusive breastfeeding coverage
	 Investigate and address the reasons for the decreasing coverage of postnatal care 	Q4 2015		No progress reported
	 Work to accelerate coverage of ARTs especially in children under 14 years of age 	Q1 2017		Deliverable not yet due

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

Equatorial Guinea has responded positively to the MNCH recommended action addressing lack of data on vitamin A coverage.

