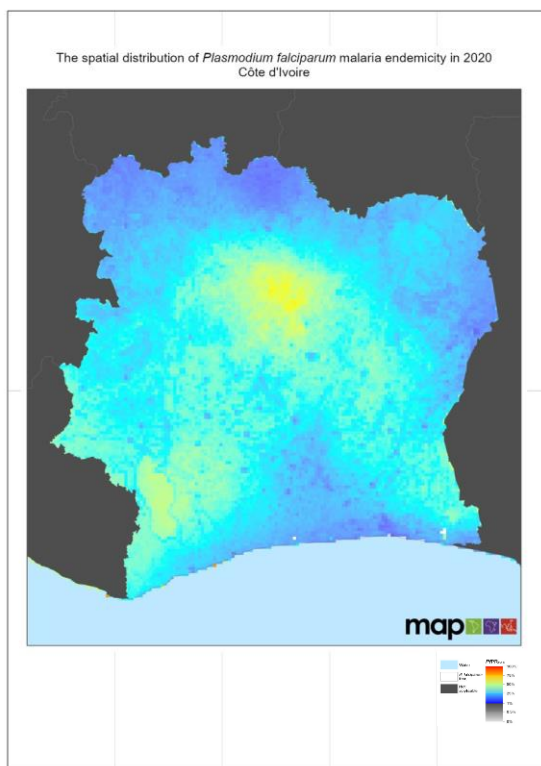


Scorecard for Accountability and Action



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 2022 was 8,145,591 with 1,555 deaths.

Metrics

Financing	
LLIN financing (2024-2026) projection (% of need)	87
Public sector ACTs and RTDs financing (2024-2026) projection (% of need)	98
% of National Malaria Strategic Plan Financed (2024-2026)	85
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	81
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)	58
% of Neglected Tropical Disease MDAs Achieving WHO Targets	60
Estimated % of children (0-14 years old) living with HIV who have access to antiretroviral therapy (2023)	51
Vitamin A Coverage 2022 (2 doses)	72
DPT3 coverage 2023 (vaccination among 0-11 month olds)	79

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

Côte d'Ivoire has successfully raised the majority of the resources for the financing of LLINs, RDTs, and ACTs in 2024-2026. Côte d'Ivoire has recently reported the results of insecticide resistance testing to WHO and in response to the documented resistance, over 70% of the ITNs distributed in 2023 were next generation nets. The national strategic plan includes activities targeting refugees. The country has launched the Zero Malaria Starts with Me campaign.

In line with the priority agenda of the ALMA chair, His Excellency President Umaro Sissoco Embaló, Côte d'Ivoire has enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Scorecard, however the scorecard is not yet shared through the ALMA Scorecard Hub. 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 The annual reported number of malaria cases in 2022 was 8,145,591 with 1,555 deaths.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Impact	Investigate and address the reasons for the increase in estimated malaria incidence since 2015, which means that the country is not on track to achieve the 2025 target of a 75% reduction in malaria incidence	Q4 2024		The NMCP has a new MSP 2024-2028 which was developed in collaboration with WHO and partners. The NMCP is benefiting from GF and PMI support to implement activities of high impact. The GF GC7 grant funds will support increased coverage of malaria testing and treatment in public facilities and at community level, provide next generation mosquito nets targeted at areas of high burden and high insecticide resistance. ITN campaigns were organized in June 2024 to cover 101 health districts whilst the second round of the SMC campaign was conducted in two districts . A prioritization process to identify 27 others eligible health districts for SMC is ongoing with the support of WHO and Malaria Consortium. In 2025 with the support of PMI, GF and Malaria Consortium, the SMC will be extended to 8 additional districts bringing the number of districts covered to 10. The NMCP in partnership with EPI program introduced the malaria vaccine in 38 health districts with the support of GAVI, WHO and PMI/BreakthroughAction.

The country has responded to the recommended action addressing reporting of drug resistance and continues to track progress as actions are implemented.

Reproductive, Maternal, Newborn, Adolescent and Child Health

Progress

Côte d'Ivoire has enhanced tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard.

Previous Key Recommended Actions





Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Optimise quality of care	Address the falling coverage of vitamin A	Q4 2024		Deliverable not yet due

Neglected Tropical Diseases

Progress

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 low for trachoma (26%) and for soil transmitted helminths (62%). It is good for lymphatic filariasis (70%), for onchocerciasis (75%) and for schistosomiasis (78%). Overall, the NTD preventive chemotherapy coverage index for Côte d'Ivoire in 2022 is 58 and this represents a slight increase compared with the 2021 index value (57). The country reached WHO MDA coverage targets for only Lymphatic Filariasis and Schistosomiasis.

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due