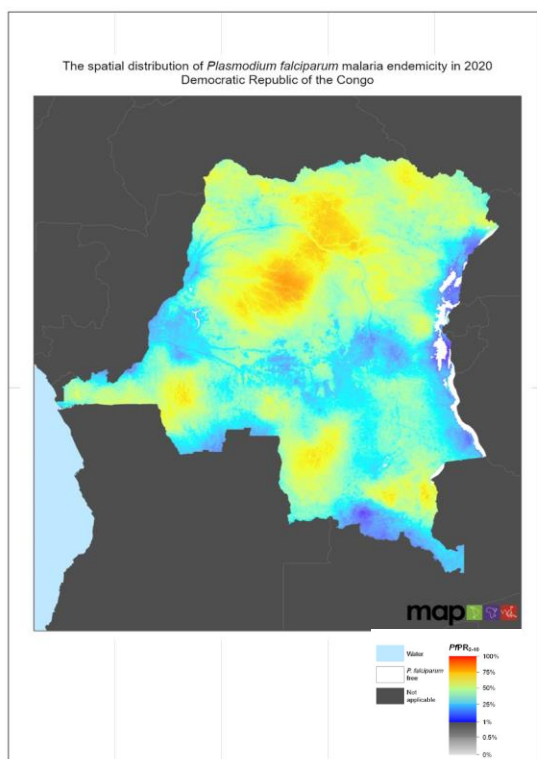


Scorecard for Accountability and Action



The entire population of the Democratic Republic of Congo is at high risk of malaria and transmission is intense year round with seasonal variations. The annual reported number of malaria cases in 2022 was 29,390,652 with 24,880 deaths.

Metrics

Financing		
LLIN financing (2024-2026) projection (% of need)		61
Public sector ACTs and RTDs financing (2024-2026) projection (% of need)		98
% of National Malaria Strategic Plan Financed (2024-2026)		67
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		3
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		100
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		40
Estimated % of children (0-14 years old) living with HIV who have access to antiretroviral therapy (2023)		44
Vitamin A Coverage 2022 (2 doses)		91
DPT3 coverage 2023 (vaccination among 0-11 month olds)		60

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

The country has secured sufficient resources to procure enough ACTs and RTDs for 2043-26. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO. DRC has carried out insecticide resistance testing and reported the results to WHO and in response to these data have rolled out next generation mosquito nets to address the resistance. The country is also showing leadership in malaria control through participation in the High Burden High Impact approach, and recently signed the Yaoundé Declaration. The country has also successfully launched the Zero Malaria Starts with Me campaign.

In line with the priority agenda of the ALMA chair, His Excellency President Umaro Sissoco Embaló, the country has enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control Scorecard. This scorecard is up to date but has not yet been posted on the ALMA Scorecard Hub. The country has launched their ALMA youth corps.

Impact

The annual reported number of malaria cases in 2022 was 29,390,652 with 24,880 deaths.

Key Challenges

- Resource gaps to fully implement the national strategic plan.

- Threat of Insecticide and drug resistance

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Policy	Sign, ratify and deposit the AMA instrument at the AUC	Q1 2023		No progress reported
Resource Mobilisation	Work to fill key gaps in malaria funding	Q2 2024		The country has signed the Global Fund grant, and prioritised resources to the highest burden areas, however significant gaps in high and moderate burden areas remain in net coverage and to support drug policy change. The country has however reduced these gaps, including by securing US\$40 million from Givewell and is exploring options for resource mobilisation in the private sector. The country has signed the Yaoundé declaration which commits to increased domestic resources for the fight against malaria
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 country reports that there has been an 8% reduction in malaria cases and a 20% reduction in malaria deaths between 2018 and 2022. Additionally, malaria interventions are estimated to have averted 15 million malaria cases and 120,511 malaria deaths in 2022. Over the 2021-2023 period, an additional 39.6 million ITNs were distributed compared to the previous three year period. The NMCP has developed a new MSP with support from WHO and partners. The new MSP includes interventions to address the increase in cases, including the introduction of next generation nets to address the insecticide resistance but there are still large gaps in coverage especially in 2026. The country is also working to strengthen case management, surveillance, and PSM. In 2024, the LLINs campaign with PBO nets was conducted in Kinshasa and is ongoing in Kwango province.
Impact	Work to develop a plan of action to support the implementation of the Yaoundé declaration	Q4 2024		Following a joint orientation meeting by RBM, WHO and ALMA, DRC is working to outline the plan to develop their workplan to support the implementation of the Yaoundé declaration.

Reproductive, Maternal, Newborn, Adolescent and Child Health

Progress

The country has recently achieved high coverage of the tracer RMNCAH intervention of vitamin A coverage. The country has enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn and Child Health Scorecard.

Neglected Tropical Diseases





Progress

Progress in addressing Neglected Tropical Diseases (NTDs) in Democratic Republic of the Congo is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage in Democratic Republic of the Congo is low for trachoma (22%) and for Soil transmitted helminthiasis (67%). It is slightly low for schistosomiasis (71%), very good for lymphatic filariasis (81%) and onchocerciasis (80%). Overall, the NTD preventive chemotherapy coverage index for Democratic Republic of the Congo in 2022 is 58 which represents a substantial decrease compared with the 2021 index value (64). The country reached WHO MDA coverage targets for only Lymphatic Filariasis and Onchocerciasis.

Previous Key Recommended Action

The country has responded positively to the recommended action on MDA for NTDs and continues to track progress as actions are implemented.

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due