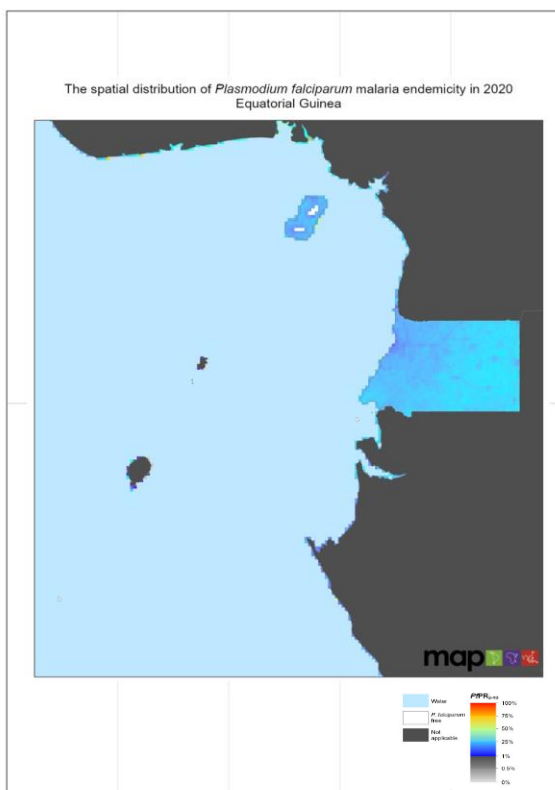


Scorecard for Accountability and Action



Metrics

Financing		
LLIN financing (2024-2026) projection (% of need)		
Public sector ACTs and RTDs financing (2024-2026) projection (% of need)		
% of National Malaria Strategic Plan Financed (2024-2026)		
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		2
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)		1
% of Neglected Tropical Disease MDAs Achieving WHO Targets		25
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2023)		
Vitamin A Coverage 2022 (2 doses)		7
DPT3 coverage 2023 (vaccination among 0-11 month olds)		74

Key

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

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 2022 was 98,346 and 71 deaths.

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

Equatorial Guinea has made progress with malaria control on Bioko Island and is working to extend this success to the mainland.

Impact

The annual reported number of malaria cases in 2022 was 98,346 and 71 deaths.

Key Challenge

- Ensuring there are sufficient resources available to deliver the National Strategic Plan

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 NMCP finalized the costed MSP which include key malaria interventions in vector control, diagnosis and treatment, prevention, surveillance -M&E - and operational research. The country received an allocation from the GF to support the ITN mass campaign planned for 2025 and the NMCP in collaboration with the MOH is working in funds mobilisation for the co-financing and covering the funding gap for other interventions.
Impact	Work to address low coverage of vector control	Q3 2023		Equatorial Guinea has been awarded US\$3 million in the GF allocation for the ITN campaign but must provide co-financing matching resources to secure these funds. The Funding request was submitted on schedule and is now in grant making. The country has recently increased coverage of vector control

Reproductive, Maternal, Newborn, Adolescent and Child Health

Previous Key Recommended Actions

Equatorial Guinea has responded positively to the RMNCAH recommended actions addressing the lack of data on ARTs, and low coverage of Vitamin A and DPT3. The country continues to track progress as these actions are implemented.

Neglected Tropical Diseases





Progress

Progress in addressing Neglected Tropical Diseases (NTDs) in Equatorial Guinea is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis and soil transmitted helminths. Preventive chemotherapy coverage is zero for schistosomiasis (0%), for lymphatic filariasis (0%) and for soil transmitted helminthiasis (0%) and it is 100% for onchocerciasis which is under surveillance. Overall, the NTD preventive chemotherapy coverage index for Equatorial Guinea in 2022 is 1, which represents a very substantial decrease compared with the 2021 index value (9). The country did not reach any WHO MDA coverage target in 2022.

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Optimise quality of care	Work to implement preventive chemotherapy for lymphatic filariasis, schistosomiasis, soil transmitted helminths and reach WHO targets.	Q3 2024		Deliverable not yet due

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due