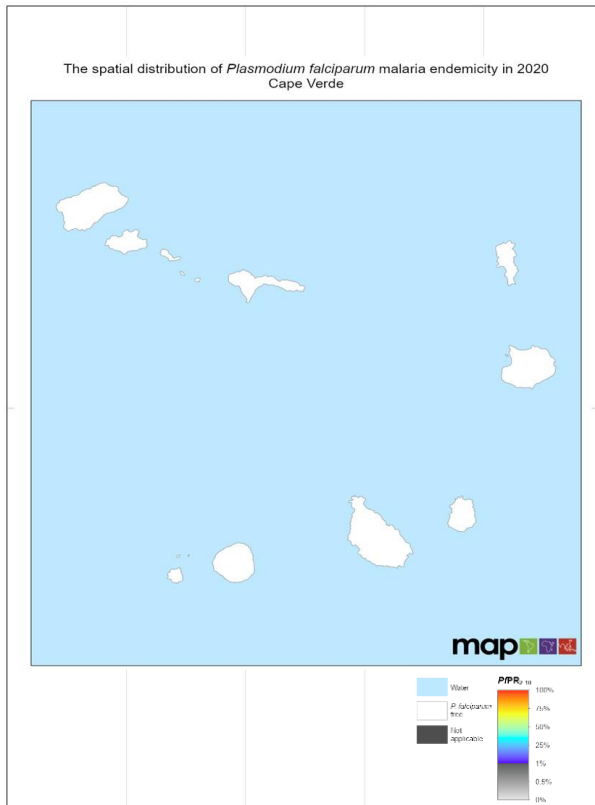


## Scorecard for Accountability and Action



### Metrics

Financing		
IRS financing (2024-2026) (% of at-risk population)	100	
Public sector ACTs and RTDs financing (2024-2026) projection (% of need)	100	
% of National Malaria Strategic Plan Financed (2024-2026)	55	
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		
% 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)	59	
% of Neglected Tropical Disease MDAs Achieving WHO Targets	0	
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2023)	98	
Vitamin A Coverage 2022 (2 doses)		
DPT3 coverage 2023 (vaccination among 0-11 month olds)	93	
Climate Change and VBDs in NDCs		

In Cabo Verde, 58% of the population lives in areas where there is a low risk of malaria; the rest of the country is malaria-free. The annual reported number of imported malaria cases in 2022 was 27 with zero deaths.

### 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\$75 million

## **Progress**

Cabo Verde secured sufficient resources to sustain universal coverage of IRS in 2024-26. The country has completed the insecticide resistance management and implementation plan and has submitted insecticide resistance data to WHO. The country launched their Zero Malaria Stats with Me campaign. WHO certified Cabo Verde as being malaria free in Q1 2024. The country is congratulated for this achievement which serves as an inspiration for all malarious countries in Africa.

## **Impact**

The annual reported number of imported malaria cases in 2022 was 27 with zero deaths.

# Reproductive, Maternal, Newborn, Adolescent and Child Health

## Progress

The country has achieved high coverage of the tracer RMNCAH interventions of DPT3 and ART coverage in children under 14 years of age.





## Previous Key Recommended Actions

Cabo Verde has responded positively to the RMNCAH recommended action addressing lack of data on vitamin A and continues to track progress as these actions are implemented.

## Neglected Tropical Diseases

Progress in addressing Neglected Tropical Diseases (NTDs) in Cabo Verde is measured using preventive chemotherapy coverage achieved for soil transmitted helminths. Preventive chemotherapy coverage for soil transmitted helminths is 59% and the country did not reach WHO target. The overall NTD preventive chemotherapy coverage index for Cabo Verde is 59 in 2022, which represents a very substantial increase compared with the 2021 index value (0). . The country has included Vector-borne diseases in their Nationally Determined Contributions.

### Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due