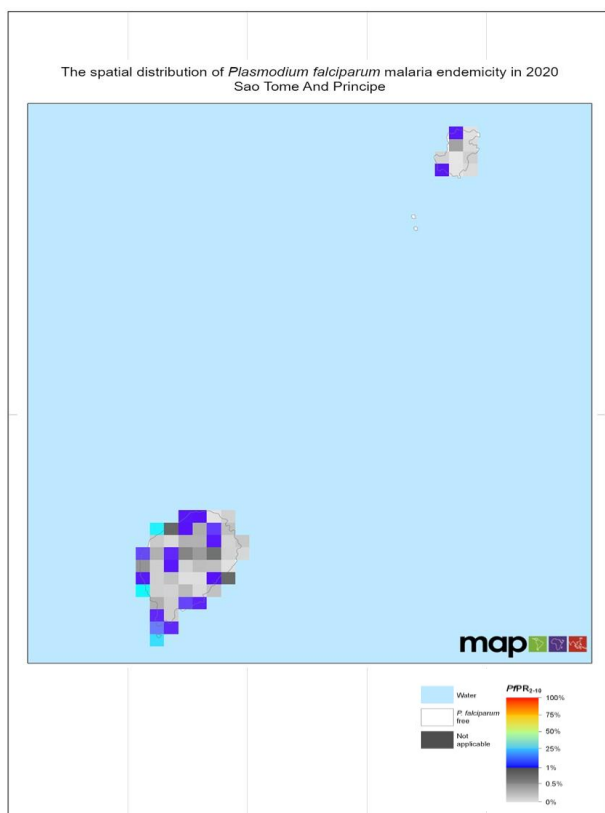


## Scorecard for Accountability and Action



### Metrics

Financing		
LLIN financing (2024-2026) projection (% of need)	100	
Public sector ACTs and RTDs financing (2024-2026) projection (% of need)	100	
% of National Malaria Strategic Plan Financed (2024-2026)	83	
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)	9	
% of Neglected Tropical Disease MDAs Achieving WHO Targets	33	
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2023)		
Vitamin A Coverage 2022 (2 doses)	8	
DPT3 coverage 2023 (vaccination among 0-11 month olds)	86	
Climate Change and VBDs in NDCs		

In São Tomé and Príncipe, the annual reported number of malaria cases in 2022 was 3,979 with 0 deaths.

### Key

Green	Target achieved or on track
Yellow	Progress but more effort required
Red	Not on track
Grey	No data
White	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

São Tomé and Príncipe has secured sufficient resources to finance the ACTs, RDTs and LLINs/IRS required for 2024-26. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO. The country has decreased the estimated malaria mortality rate by more than 40% since 2015.

In line with the priority agenda of the ALMA chair, His Excellency President Umaro Sissoco Embaló, São Tomé and Príncipe has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Elimination Scorecard, although the scorecard has not yet been posted to the ALMA Scorecard Hub.

### Impact

The annual reported number of malaria cases in 2022 was 3,979 with 0 deaths.

### Key Challenge

- Malaria upsurges observed.

## Previous Key Recommended Actions

The country has responded positively to the recommended action addressing insecticide and drug resistance monitoring and continues to track progress as these actions are implemented.

## Reproductive, Maternal, Newborn, Adolescent and Child Health

### 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 DPT3	Q2 2024		No progress reported

São Tomé and Príncipe has responded positively to the RMNCAH recommended actions addressing the lack of data for ART coverage in children and low coverage of vitamin A and continues to track progress as actions are implemented.

## Neglected Tropical Diseases

### Progress

Progress in addressing Neglected Tropical Diseases (NTDs) in Sao Tomé and Principe is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, schistosomiasis, and soil transmitted helminths. In 2022, preventive chemotherapy coverage was 100% for lymphatic filariasis (under surveillance), 0% for schistosomiasis and 62% for soil-transmitted helminths. Overall, the NTD preventive chemotherapy coverage index for Sao Tomé and Principe in 2022 is 9, which represents a very substantial decrease compared with the 2021 index value (74). The country did not reach any WHO MDA 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 schistosomiasis preventive chemotherapy and increase soil transmitted helminthiasis to reach WHO targets	Q3 2024		Deliverable not yet due

### New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Climate Change and health	Work to collate data on the impact of climate change on Vector Borne disease and incorporate into the next round on National Determined Contributions and National Climate Change Action Plans	Q4 2025

## Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due