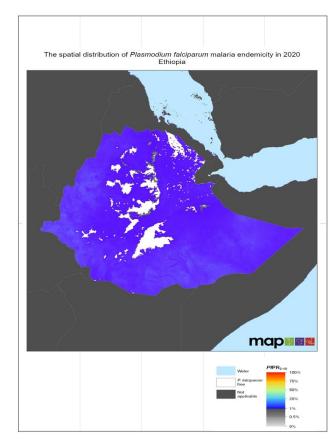
Ethiopia ALMA Quarterly Report Quarter Four, 2024



Scorecard for Accountability and Action



Metrics

Financing		
LLIN financing (2024-2026) projection (% of need)		71
Public sector ACTs and RTDs financing (2024-2026) projection (% of need)		90
% of National Malaria Strategic Plan Financed (2024- 2026)		69
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		
% of vector control in the last year with next generation materials		69
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, %)(2023)		45
% of Neglected Tropical Disease MDAs Achieving WHO Targets		20
National Budget Allocated to NTDs		
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2023)		48
Vitamin A Coverage 2022 (2 doses)		68
DPT3 coverage 2023 (vaccination among 0-11 month olds)		72
Climate Change and VBDs in NDCs		

Key

Malaria is endemic in Ethiopia with differing intensity of transmission, except in the central highlands which are malaria-free. The annual reported number of malaria cases in 2023 was 3,288,168 with 296 deaths.



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

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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\$125 million.

Progress

Ethiopia has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO and has completed the national insecticide resistance monitoring and management plan and has carried out drug resistance testing since 2018 and has reported the results to WHO. The national strategic plan includes activities targeting refugees and IDPs. The country has launched its Zero Malaria Starts with me campaign. Ethiopia has decreased the estimated malaria incidence and mortality rates by more than 40% since 2015 and is on track to achieve the 2025 targets.

In line with the priority agenda of the ALMA chair, His Excellency President Umaro Sissoco Embaló, Ethiopia has enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard, although this has not yet been shared to the ALMA Scorecard Hub. The country received the ALMA Joyce Kafanabo Award for Innovation and Excellence during the AU Summit in February 2023. 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 2023 was 3,288,168 with 296 deaths.

Key Challenges

- Ethiopia has documented insecticide resistance to 4 insecticide classes.
- The suspected emergence of artemisinin partial resistance
- Resource gaps to fully implement the national strategic plan.

Reproductive, Maternal, Newborn, Adolescent and Child Health

Progress

Ethiopia has significantly enhanced the tracking and accountability mechanisms with the development of the Maternal, Newborn, Child and Adolescent Health Scorecard, including with the institutionalisation of community scorecards.

Neglected Tropical Diseases Progress

Progress in addressing Neglected Tropical Diseases (NTDs) in Ethiopia is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis, soil transmitted helminths and trachoma. In 2023, preventive chemotherapy coverage was 72% for onchocerciasis, 34% for trachoma, 46% for schistosomiasis, 62% for lymphatic filariasis, and 25% for soil-transmitted helminthiasis. Overall, the NTD preventive chemotherapy coverage target only for onchocerciasis. Ethiopia has included Vector-borne diseases in the country Nationally Determined Contributions and has created a budget line for NTDs.