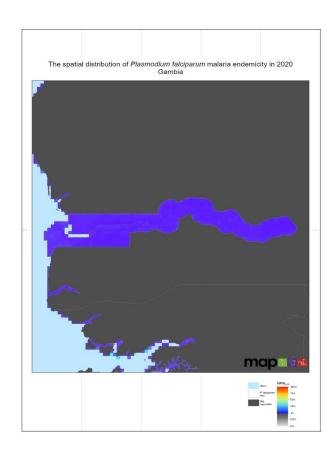
## The Gambia ALMA Quarterly Report Quarter Four, 2024



## **Scorecard for Accountability and Action**



Financing		
<del>-</del>		
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)		46
Policy		
Signed, ratified and deposited the AMA instrument at the AUC		
Malaria activities targeting refugees in Malaria Strategic Plan	Γ	
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		
% of vector control in the last year with next generation materials	Γ	
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	5	
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2023)		1
% of Neglected Tropical Disease MDAs Achieving WHO Targets		33
National Budget Allocated to NTDs		
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2023)		33
Vitamin A Coverage 2022 (2 doses)		24
DPT3 coverage 2023 (vaccination among 0-11 month olds)		84
Climate Change and VBDs in NDCs		
	1	I

The entire population of The Gambia is at high risk of malaria and transmission is intense for most of the year. The annual reported number of malaria cases in 2022 was 119,104 with 62 deaths.

## Key



# The Gambia ALMA Quarterly Report Quarter Four, 2024



### 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 dualinsecticide 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**

The Gambia secured sufficient resources to finance the malaria commodities required for 2024-2026 but has significant gaps to fully implement the national strategic plan. The country has recently submitted the results of insecticide resistance monitoring to WHO and has carried out drug resistance testing since 2018 and has reported the results to WHO. The national strategic plan includes activities targeting refugees.

In line with the priority agenda of the ALMA chair, His Excellency President Umaro Sissoco Embaló, the Gambia 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 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 2022 was 119,104 with 62 deaths.

#### Key Challenge

Gaps in resources mobilisation required to fully implement the national strategic plan.

**Previous Key Recommended Action** 

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

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

### **Previous Key Recommended Actions**

The Gambia has responded positively to the RMNCAH recommended actions addressing the low coverage of vitamin A, and ART coverage in children under 14 years of age, with a recent 4% increase in coverage and continues to track progress as actions are implemented.

## **Neglected Tropical Diseases Progress**

Progress in addressing Neglected Tropical Diseases (NTDs) in The Gambia is measured using a composite index calculated from preventive chemotherapy coverage achieved for schistosomiasis, soil transmitted helminths and trachoma. In 2023, preventive chemotherapy coverage was 100% for trachoma (as it was eliminated) and 0% for soil-transmitted helminths and 0% for schistosomiasis. The NTD preventive chemotherapy coverage index for Gambia in 2023 is 1, which is the same compared with the 2022 index value (1). The country did not reach any WHO MDA coverage target in 2023.

**Previous Key Recommended Action** 

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
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		The country has incorporated the climate change section in the current NTD Master Plan and discussions are ongoing with the Ministry of environment, Climate Change and Natural Resources to identify how data can be collected and used by the health programmes. The country has a climate change policy of 2015 and a consultant is being recruited to update it.

New Key Recommended Actions

Objective	Action Item	Suggested completion timeframe
NTDs	Work to implement preventive chemotherapy for schistosomiasis and soil transmitted helminths and mobilize the necessary resources and implement community surveillance systems.	Q4 2025
NTDs	Submit data to the AUC on the national Budget Allocated to NTDs	Q4 2025

