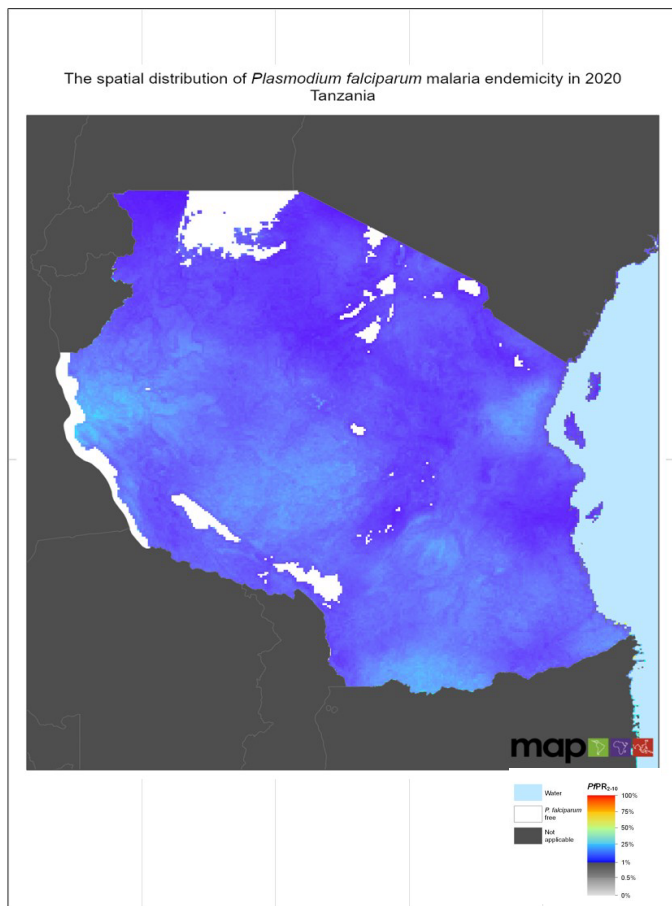


Scorecard for Accountability and Action



Malaria is endemic in all parts of the United Republic of Tanzania, with seasonal peaks. The annual reported number of malaria cases in 2024 was 3,586,513 with 1,533 deaths.

Metrics

| 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 2020 and data reported to WHO | | |
| % of vector control in the last year with next generation materials | | 96 |
| ACTs in stock (>6 months stock) | | |
| RDTs in stock (>6 months stock) | ▲ | |
| 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, %)(2024) | | 73 |
| % of Neglected Tropical Disease MDAs Achieving WHO Targets | | 60 |
| National Budget Allocated to NTDs | | |
| Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2024) | | 70 |
| DPT3 coverage 2024 (vaccination among 0-11 month olds) | | 83 |
| Climate Change and VBDs in NDCs | | |

Key

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

Malaria - The Big Push towards 2030

Africa is at the centre of a perfect storm that threatens to disrupt malaria services and undo decades of progress. Countries must act urgently to both prevent and mitigate the adverse effects of the ongoing global financial crisis, decreasing ODA, 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. To get back on track and eliminate malaria, US\$5.2 billion is needed annually to fully finance country national malaria plans, and urgently fill gaps created by the recent reductions in ODA. Extreme weather events and climate change present a significant threat. By the 2030s, 150 million additional people will be at risk of malaria because of warmer temperatures and increased rainfall. Countries must also take action to confront the threats of insecticide and drug resistance, reduced efficacy of rapid diagnostic tests, and the invasive *Anopheles stephensi* mosquito which spreads malaria in both urban and rural areas. 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. WHO have also recently approved the use of Spatial Repellents. 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. Malaria can serve as a pathfinder for primary health care strengthening, climate change and health, and Universal Health Coverage. Countries must work to sustain and increase domestic resource commitments including through multisectoral End Malaria and NTD Councils and Funds, which have raised over US\$218 million to date.

A recent report by ALMA and MNM UK, “The Price of Retreat,” highlights the expected impact of malaria between 2025-2030 on GDP, trade and key sectors for development in Africa. If Tanzania cannot sustain malaria prevention due to reductions in malaria financing, this would lead to an estimated 22,189,017 additional cases, 65,656 more deaths, and GDP loss of US\$3.5 billion between 2025 and 2030. However, if we mobilise the necessary resources and achieve a 90% reduction in malaria, in Tanzania there will be a US\$7.7 billion increase in GDP.

Global Fund Allocation

The Global Fund allocation for the United Republic of Tanzania for Grant Cycle 8 is US\$548.2 million for HIV, tuberculosis, malaria, and health systems strengthening for 2027-2029. The malaria component has been allocated US\$167.7 million. The allocations to the individual disease components are not fixed, and can be adjusted at country level. The United Republic of Tanzania is urged to ensure that resources are allocated to malaria control from the overall Global Fund country allocation, as well as from domestic resources, to sustain coverage as much as possible.

Progress

The United Republic of Tanzania has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO and in response to the identified levels of resistance has scaled up next generation mosquito nets. The country has also carried out drug resistance testing since 2018 and has reported the results to WHO. The national strategic plan includes activities targeting refugees. The country has launched the Zero Malaria Starts with Me campaign.

In line with the priority agenda of the ALMA chair, President Advocate Duma Gideon Boko, the country has enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard, although the

scorecard is not yet shared to the ALMA Scorecard Hub. The country has launched their End Malaria Council and Fund.

Impact

The annual reported number of malaria cases in 2024 was 3,586,513 with 1,533 deaths.

Key Challenges

- Maintaining malaria high on the political and funding agenda on the island of Zanzibar as the burden continues to drop.
- Insufficient resources to fully implement the malaria National Strategic Plan including with the impact of recent reductions in ODA
- Threat of both drug and insecticide resistance.

Previous Key Recommended Actions

| Objective | Action Item | Suggested completion timeframe | Progress | Comments - key activities/accomplishments since last quarterly report |
|-----------|---|--------------------------------|----------|---|
| Impact | Work to address the increase in malaria incidence since 2015, and the lack of progress in reductions in malaria deaths which means that the country is not on track to achieve the 2025 target of a 75% reduction in malaria incidence and deaths | Q4 2026 | | National data for both malaria cases and deaths are showing progressive decline. The country is enhancing monitoring of parasite resistance to antimalarials (ACTs in particular) and vector resistance to insecticides; and mobilizing additional resources from domestic sources, including through the End Malaria Council. Global Fund and US Government resources will be deployed using Sub National Tailoring to maximise impact |
| Impact | Work to ensure that malaria elimination is prioritised in the America First Global Health Strategy Country Memorandum of Understanding, and that costed prioritised plans are developed | Q1 2026 | | The country is working on the MOU with the US Government |

Reproductive, Maternal, Newborn, Adolescent and Child Health

Progress

Tanzania has achieved high coverage in the tracer RMNCAH intervention of vitamin A and DPT3. The country has significantly enhanced the tracking and accountability mechanisms with the development and launch of the Tanzania Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard, and with the development of the multi-sectoral nutrition scorecard.





Neglected Tropical Diseases

Progress

Progress in addressing Neglected Tropical Diseases (NTDs) in the United Republic of Tanzania is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis, soil transmitted helminthiasis and trachoma. In 2024, preventive

chemotherapy coverage was 63% for soil transmitted helminthiasis, 68% for schistosomiasis, 69% for lymphatic filariasis, 86% for onchocerciasis, and 83% for trachoma. Overall, the NTD preventive chemotherapy coverage index for United Republic of Tanzania in 2024 is 73 which represent a very substantial increase compared to the 2023 index value (39). The country did not reach WHO MDA targets for schistosomiasis and soil transmitted helminthiasis only in 2024. Tanzania has created a budget line for NTDs.

Key

| | |
|---|-------------------------|
|  | Action achieved |
|  | Some progress |
|  | No progress |
|  | Deliverable not yet due |