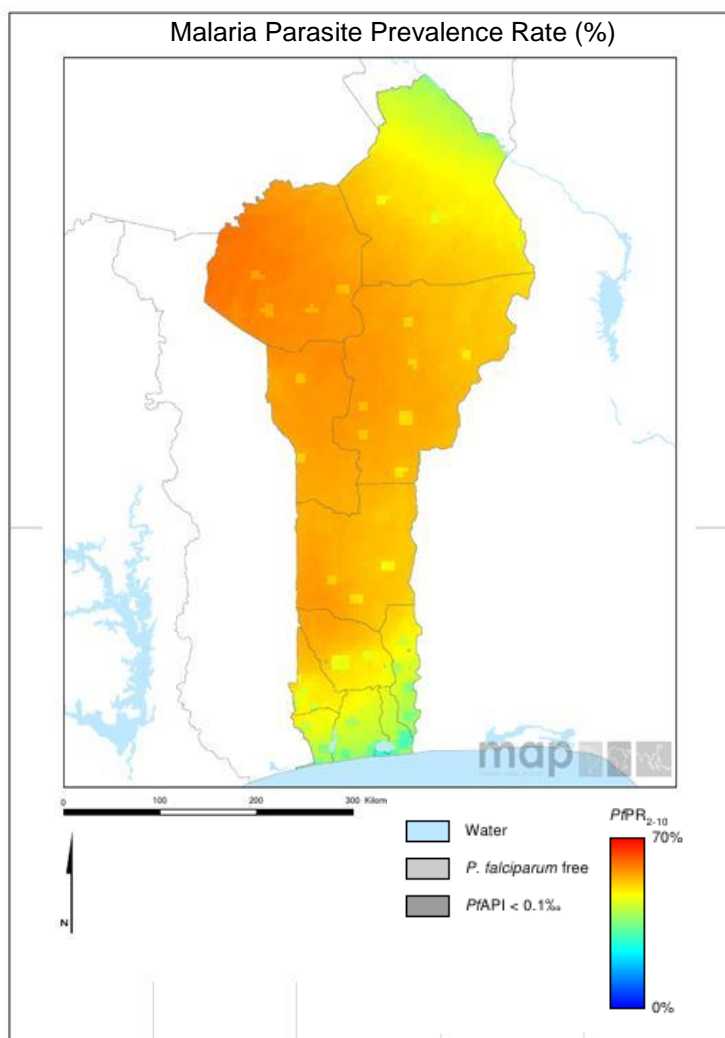


Scorecard for Accountability and Action



Metrics

Policy and Financial Control	
Oral Artemisinin Based Monotherapy Ban status (2014)	Target achieved or on track
Community case management (Pneumonia)	Target achieved or on track
Community case management (Malaria)	Target achieved or on track
World Bank rating on public sector mgmt and institutions 2012 (CPIA Cluster D)	3.3
Commodities Financed, Implementation and Malaria Impact	
LLIN financing 2014 projection (% of need)	98
Public sector RDT financing 2014 projection (% of need)	99
Public sector ACT financing 2014 projection (% of need)	100
Operational LLIN/IRS coverage (% of at risk population)	62
On track in 2012 to Reduce Malaria Incidence by >75% by 2015 (vs 2000)	No data/Not applicable
Tracer Indicators for Maternal and Child Health	
PMTCT coverage 2012 (% pregnant HIV pts receiving ARVs)	40
% deliveries assisted by skilled birth attendant	84
Exclusive breastfeeding (% children < 6 months)	43
Vitamin A Coverage (2 doses)	98
DPT3 coverage 2011 (vaccination among 12-23 month olds)	85
Postnatal care (within 48 hrs)	49

Malaria is endemic throughout Benin; however, transmission is more intense in the southern third of the country. The annual reported number of malaria cases in 2012 was 1,151,038 with 2,261 deaths.

Key

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

Urgent Global Fund Update

The Global Fund has announced that Benin will receive US\$ 163.8 million for HIV, tuberculosis, malaria, and health systems strengthening as the country allocation under the New Funding Model. The total figure includes all existing, unspent funds from previous rounds and the Interim New Funding Model. The Global Fund has determined the total allocation amount based on Benin's disease burden and income level, as well as several other factors. The malaria component is allocated a specific proportion of the total, according to a formula developed by the Global Fund that takes into account several factors, including disease burden and previous disbursements. For Benin this is calculated at US\$ 52 million, including US\$ 26.7 million of new resources. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Benin is urged to ensure that resources are allocated to malaria control from the overall Global Fund country allocation at a level that is sufficient to sustain the gains made in recent years.

Progress

Benin has made significant progress in malaria control policy, including banning the importation and sale of oral artemisinin-based monotherapies. Benin has introduced Community Case Management of malaria and pneumonia. The country has sufficient finances available to cover the 2014 requirements for LLINs, ACTs, and RDTs. The country has also made good progress on tracer MNCH interventions, in particular increasing skilled birth attendants, vitamin A, and DPT3 vaccination coverage. The country has successfully reduced under-five child mortality by 50% since 1990.

Impact

The annual reported number of malaria cases in 2012 was 1,151,038 with 2,261 deaths.

Key Challenge

- Securing longer-term finances for malaria control.

Previous Key Recommended Actions





Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Optimise quality of care	Ensure LLINs currently under procurement are distributed as quickly as possible in order to address decreasing LLIN coverage	Q2 2014		Deliverable not yet due but 746,000 LLINs were distributed to the country in the last quarter of 2014
MNCH ¹ : Optimise quality of care	Prioritise the collection of postnatal care data	Q1 2014		Country has prioritised the collection of postnatal care data with 48.9% coverage reported

¹ MNCH metrics, recommended actions and response tracked through WHO MCA/iERG

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Address funding	Ensure the NFM concept note is submitted by Q1 2015 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q1 2015

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due