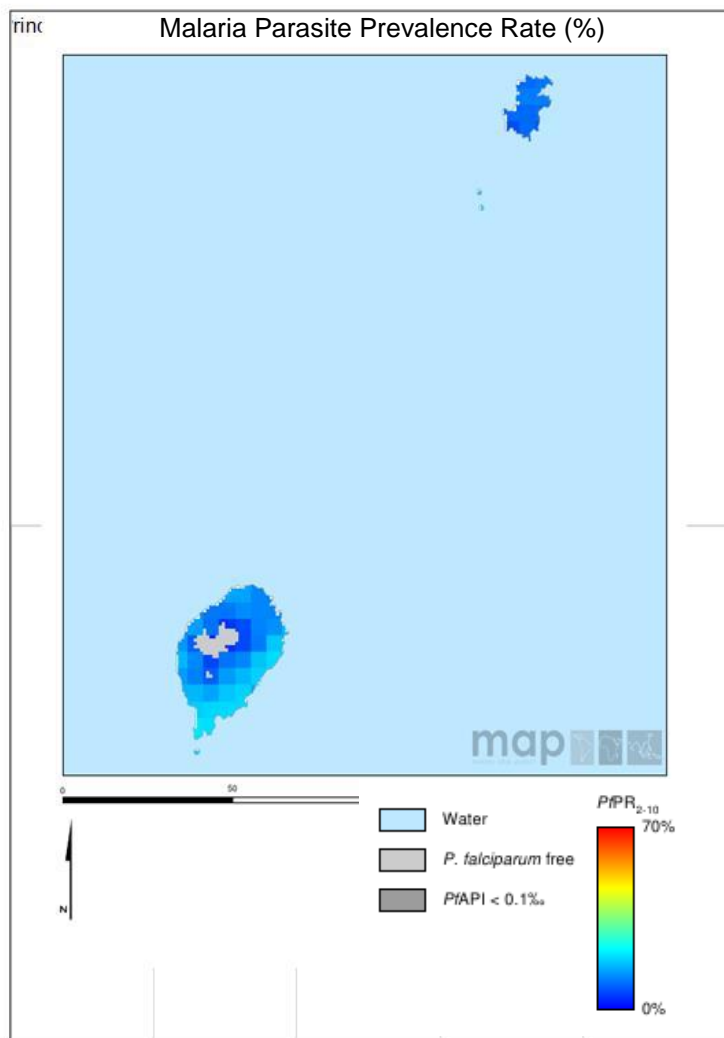


Scorecard for Accountability and Action



In São Tomé and Príncipe, the annual reported number of malaria cases in 2012 was 9,921 with seven deaths.

Metrics

Policy and Financial Control		
Oral Artemisinin Based Monotherapy Ban status (2014)		
Community case management (Pneumonia)		
Community case management (Malaria)		
World Bank rating on public sector mgmt and institutions 2012 (CPIA Cluster D)		3.1
Commodities Financed, Implementation and Malaria Impact		
LLIN financing 2014 projection (% of need)		
Public sector RDT financing 2014 projection (% of need)		
Public sector ACT financing 2014 projection (% of need)		
Operational LLIN/IRS coverage (% of at risk population)	▼	64
On track in 2012 to Reduce Malaria Incidence by >75% by 2015 (vs 2000)		
Tracer Indicators for Maternal and Child Health		
PMTCT coverage 2012 (% pregnant HIV pts receiving ARVs)		
% deliveries assisted by skilled birth attendant		82
Exclusive breastfeeding (% children < 6 months)		51
Vitamin A Coverage (2 doses)		44
DPT3 coverage 2011 (vaccination among 12-23 month olds)		96
Postnatal care (within 48 hrs)		37

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 São Tomé and Príncipe will receive US\$ 13.6 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 São Tomé and Príncipe's disease burden and income level, as well as several other factors. The malaria component is also 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 São Tomé and Príncipe this is calculated at US\$ 10.9 million, including US\$ 5.2 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. São Tomé and Príncipe 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

São Tomé and Príncipe has made significant progress in malaria prevention and control, leading to a tremendous reduction in malaria deaths between 2005 and 2010. São Tomé and Príncipe has achieved and maintains high coverage in tracer MNCH interventions including skilled birth attendants and DPT3 vaccination. São Tomé and Príncipe was awarded a 2014 ALMA Award for Excellence in Implementation of Vector Control.

Impact

Confirmed malaria cases decreased from an annual average of 38,655 during 2000–2005 to 9,921 cases in 2011. In the same period, malaria deaths also fell from 162 to seven. As such, the country has achieved a 70% reduction in malaria incidence since 2000.

Key Challenges

- Status of policy on Community Case Management for malaria and pneumonia is unknown.
- Resistance to pyrethroid insecticides detected.

Previous Key Recommended Action





Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH ¹ : Optimise quality of care	Identify reasons for and address falling DPT3 coverage	Q1 2014		No progress reported

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

New Key Recommended Actions

Objective	Action Item	Suggested completion timeframe
Optimise quality of care	Address falling LLIN coverage	Q4 2014
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