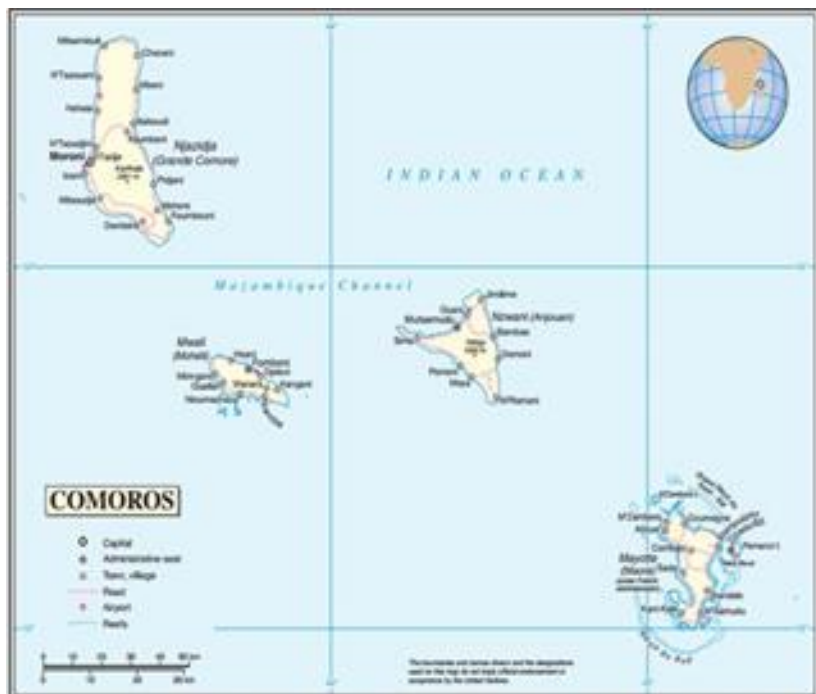


### Scorecard for Accountability and Action



#### 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 2013 (CPIA Cluster D)	Not on track 2.4
Commodities Financed, Implementation and Malaria Impact	
LLIN financing 2014 projection (% of need)	Progress but more effort required 41
Public sector RDT financing 2014 projection (% of need)	Progress but more effort required 60
Public sector ACT financing 2014 projection (% of need)	Target achieved or on track 100
Operational LLINIRS coverage (% of at risk population)	Target achieved or on track 100
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 2013 (% pregnant HIV pts receiving ARVs)	No data/Not applicable
% deliveries assisted by skilled birth attendant	Target achieved or on track 82
Exclusive breastfeeding (% children < 6 months)	Not on track 12
Vitamin A Coverage 2012 (2 doses)	No data/Not applicable
DPT3 coverage 2012 (vaccination among 12-23 month olds)	Target achieved or on track 86
Postnatal care (within 48 hrs)	Progress but more effort required 49

Most of the population of Comoros is at high risk of malaria. Transmission is perennial on the Island of Grand Comore and unstable throughout the zones of Anjouan and Mohéli. The annual reported number of malaria cases in 2012 was 49,840 with 17 deaths.

#### Key

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

### Progress

Comoros has made good progress in scaling-up coverage of key malaria control interventions including universal coverage with LLINs. The country has secured sufficient resources for the ACTs required to sustain universal coverage. Comoros has banned oral artemisinin-based monotherapies and has also introduced a policy for the Community Case Management of pneumonia and malaria. The country has made improvements in the tracer MNCH metric for skilled birth attendants and has high DPT3 coverage.

### Impact

The annual reported number of malaria cases in 2012 was 49,840 with 17 deaths.

### Key Challenge

- Insufficient human resources and a limited number of partners to implement malaria control activities.

### Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
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		Deliverable not yet due but country has begun the preparation of the GF NFM concept note
MNCH <sup>1</sup> : Optimise quality of care	a) Work to develop a strategy to promote exclusive breastfeeding	Q3 2014		No Progress Reported
	b) Investigate and address reasons for low vitamin A coverage in 2011	Q3 2014		No Progress Reported

### Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

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