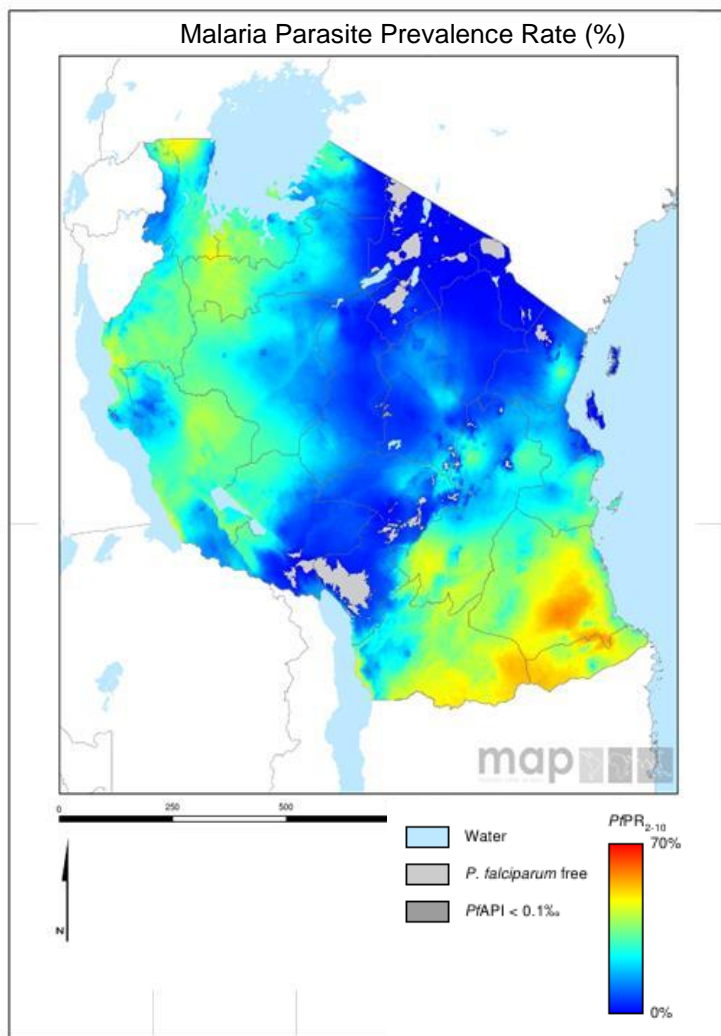


United Republic of Tanzania ALMA Quarterly Report

Quarter Three, 2014



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 2012 was 2,975,117 with 7,820 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 2013 (CPIA Cluster D)		3.4
Commodities Financed, Implementation and Malaria Impact		
LLIN financing 2014 projection (% of need)		100
Public sector RDT financing 2014 projection (% of need)		100
Public sector ACT financing 2014 projection (% of need)		100
Operational LLIN/IRS coverage (% of at risk population)		28
On track in 2012 to Reduce Malaria Incidence by >75% by 2015 (vs 2000)		
Tracer Indicators for Maternal and Child Health		
PMTCT coverage 2013 (% pregnant HIV pts receiving ARVs)		73
% deliveries assisted by skilled birth attendant		49
Exclusive breastfeeding (% children < 6 months)		50
Vitamin A Coverage 2012 (2 doses)		95
DPT3 coverage 2012 (vaccination among 12-23 month olds)		92
Postnatal care (within 48 hrs)		31

Key

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

Progress

The United Republic of Tanzania has made significant progress in scaling-up malaria control interventions. The country has made key policy changes, including banning of oral artemisinin-based monotherapies. Sufficient resources have been secured to sustain universal coverage of LLINs, ACTs, and RDTs in 2014. The United Republic of Tanzania has also made progress on tracer MNCH interventions including PMTCT, vitamin A, and DPT3. The country has achieved MDG4 with a reduction of the under-five mortality rate by more than two-thirds since 1990. The country has significantly enhanced the tracking and accountability mechanisms with the development and launch of the Tanzania Reproductive, Maternal, Newborn and Child Health Scorecard.

Impact

The annual reported number of malaria cases in 2012 was 2,975,117 with 7,820 deaths. On the island of Zanzibar, malaria morbidity and mortality has been substantially reduced with a 75% decrease in the numbers of malaria cases, inpatient malaria cases and deaths in 2012 compared to the average for 2000–2004.

Key Challenges

- Maintaining malaria high on the political and funding agenda on the island of Zanzibar as the burden continues to drop.
- The lack of new resources allocated to malaria in the Global Fund New Funding Model jeopardises mainland Tanzania's ability to sustain the impressive gains made in the fight against malaria.





Previous Key Recommended Action

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 Q4 2014 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q4 2014		Deliverable not yet due

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Optimise quality of care	Ensure the LLINs currently under manufacture are distributed as soon as possible to increase LLIN coverage	Q1 2015

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due