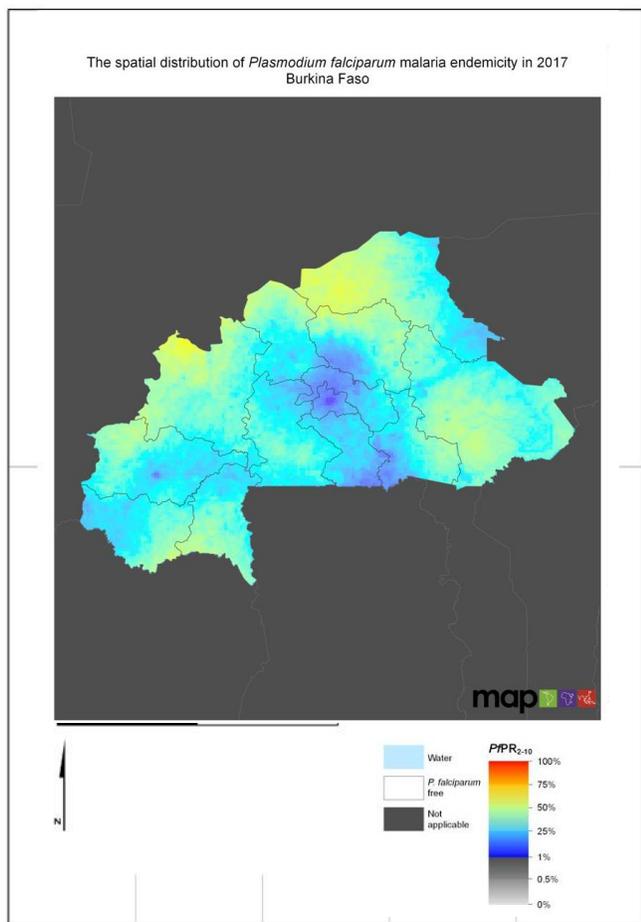


Scorecard for Accountability and Action



Malaria is present throughout Burkina Faso, with transmission most intense in the southern part of the country. The annual reported number of malaria cases in 2017 was 11,915,816 with 4,144 deaths.

Metrics

Commodities Financed and Financial Control

LLIN financing 2019 projection (% of need)	▲	100
Public sector RDT financing 2019 projection (% of need)	▲	85
Public sector ACT financing 2019 projection (% of need)	▲	100
World Bank rating on public sector management and institutions 2018 (CPIA Cluster D)		3.4

Insecticide Resistance Monitoring, Implementation and Impact

Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010		4
Insecticide resistance monitored since 2015 and data reported to WHO		
National Insecticide Resistance Monitoring and Management Plan	▲	
Scale of Implementation of iCCM (2017)		
Operational LLIN/IRS coverage (% of at risk population)		100
Change in Estimated Malaria Incidence(2010–2017)		
Change in Estimated Malaria Mortality rate(2010–2017)		

Tracer Indicators for Maternal and Child Health and NTDs

Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2017)		88
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2018)		62
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2018)		21
% deliveries assisted by skilled birth attendant		80
Postnatal care (within 48 hrs)		74
Exclusive breastfeeding (% children < 6 months)		50
Vitamin A Coverage 2017 (2 doses)		0
DPT3 coverage 2018 (vaccination among 0-11 month olds)		91

Key

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

Malaria

Progress

Burkina Faso has secured sufficient resources to finance the necessary LLINs, ACTs and RDTs required in 2019. Burkina Faso has scaled up coverage of iCCM and has procured sufficient LLINs to achieve universal operational coverage of the targeted at risk population. Burkina Faso has a high rating in public sector management systems (CPIA cluster D). The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO and has recently completed the insecticide resistance monitoring and management plan. Burkina Faso has enhanced the tracking and accountability mechanisms for malaria with the development of the Malaria Scorecard. Burkina Faso has decreased the estimated malaria mortality rate by more than 40% since 2010. The country is also showing leadership in malaria control through participation in the High Burden High Impact approach.

Impact

The annual reported number of malaria cases in 2017 was 11,915,816 with 4,144 deaths.

Key Challenge

- Insecticide resistance threatens vector control effectiveness.

RMNCAH and NTDs

Progress

Burkina Faso has also made good progress in tracer RMNCAH interventions, including DPT3, exclusive breastfeeding and skilled birth attendants. Burkina Faso has significantly enhanced the tracking and accountability mechanisms with the development of the Maternal, Newborn, Child and Adolescent Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Burkina Faso is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage in Burkina Faso is high for soil transmitted helminths (100%), trachoma (100%), schistosomiasis (86%), onchocerciasis (80%), and good for lymphatic filariasis (76%). Overall, the NTD preventive chemotherapy coverage index for Burkina Faso in 2017 is 88, the same as in 2016 (88).

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
RMNCAH ¹ : Optimise quality of care	Investigate and address the reasons for the low coverage of vitamin A	Q2 2020		The country reports low vitamin A coverage has been primarily due to underestimations in target populations of children ages 6-59 months, as well as financial challenges limiting the implementation of the national strategy of hiring 2-4 community health workers in each village. This has led to a suboptimal workforce to deliver Vitamin A supplementation in some areas of the country. To address these issues, Burkina Faso will start using new population estimates based on the upcoming census, scheduled for the end of 2019; and the Ministry is also working to mobilize resources to ensure there are enough Community Health Workers in each community

Burkina Faso has responded positively to the RMNCAH recommended action addressing the low coverage of ARTs in children, with a 2% increase in coverage reported in the last year, and continues to track progress as these actions are implemented.

¹ RMNCAH metrics, recommended actions and response tracked through WHO