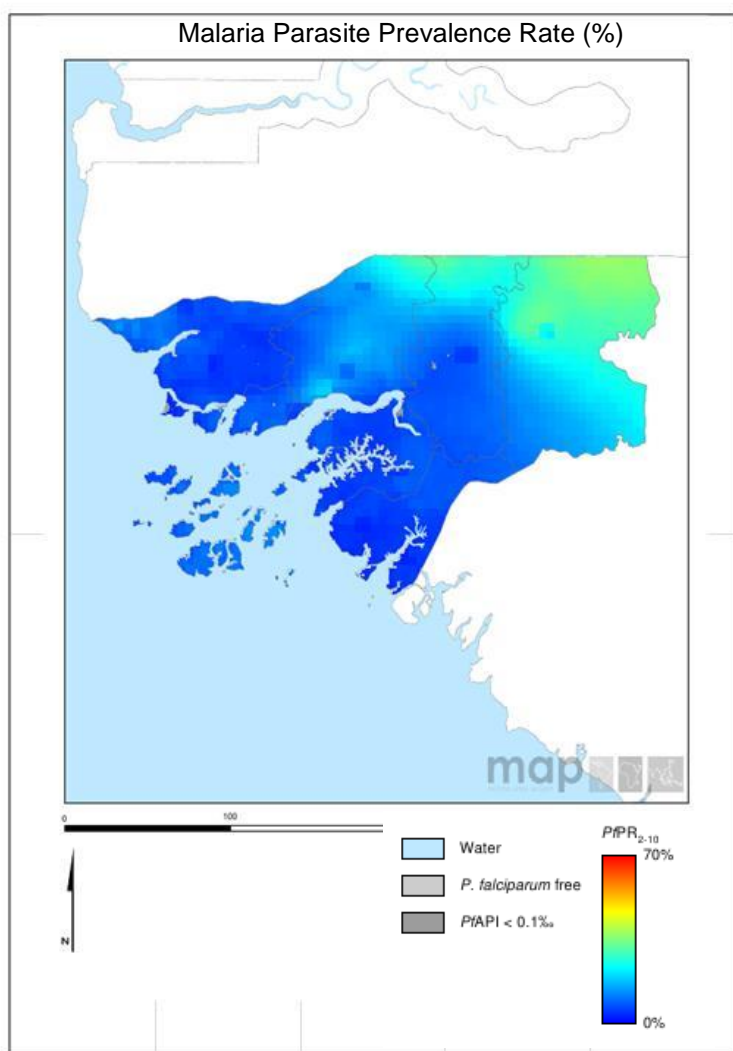


Scorecard for Accountability and Action



The entire population of Guinea-Bissau is at high risk of malaria. The annual reported number of malaria cases in 2013 was 132,176 with 418 deaths.

Metrics

Policy and Financial Control		
Oral Artemisinin Based Monotherapy Ban status (2014)		
Community case management (Pneumonia)(2014)		
Community case management (Malaria)(2014)		
World Bank rating on public sector mgmt and institutions 2013 (CPIA Cluster D)		2.2
Commodities Financed, Implementation and Malaria Impact		
LLIN financing 2014 projection (% of need)	▼	88
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)		100
On track in 2013 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)		56
% deliveries assisted by skilled birth attendant		43
Exclusive breastfeeding (% children < 6 months)		38
Vitamin A Coverage 2012 (2 doses)		95
DPT3 coverage 2012 (vaccination among 12-23 month olds)		80
Postnatal care (within 48 hrs)		

Key

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

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Progress

Guinea-Bissau has made progress in scaling-up anti-malarial interventions and has banned the import and sale of oral artemisinin-based monotherapies. The country has achieved universal coverage of LLINs and has secured sufficient resources to cover the LLINs, ACTs, and RDTs required to sustain universal coverage in 2014. The country has also achieved high coverage of the tracer MNCH interventions of DPT3 and vitamin A coverage and has increased coverage of PMTCT.

Impact





The annual reported number of malaria cases in 2013 was 132,176 with 418 deaths.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Address funding	Ensure the GF New Funding Model concept note is submitted by Q2 2015 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q2 2015		The GF New Funding Model concept note was submitted in October 2014
MNCH ¹ : Optimise quality of care	a) Ensure all facilities are baby friendly by implementing the ten steps to successful breastfeeding, providing follow-up support to breastfeeding mothers and enhancing community awareness	Q1 2013		There has been renewed emphasis on nutrition including breastfeeding through the Child Nutrition and Survival programme since 2013. A nutrition focal point has been established in every health district. Guinea-Bissau now celebrates breastfeeding month, rather than the standard one week. A communication programme is also focused on sensitizing mothers to breastfeed. The latest programme statistics indicate exclusive breastfeeding coverage is at 67 percent
	b) Prioritise collection of postnatal care data	Q1 2014		Intensified training in essential postnatal care is ongoing and is expected to increase coverage. ANC training has also been strengthened to promote postnatal care. The recently completed MICS (2014) will provide data on postnatal care coverage

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

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due