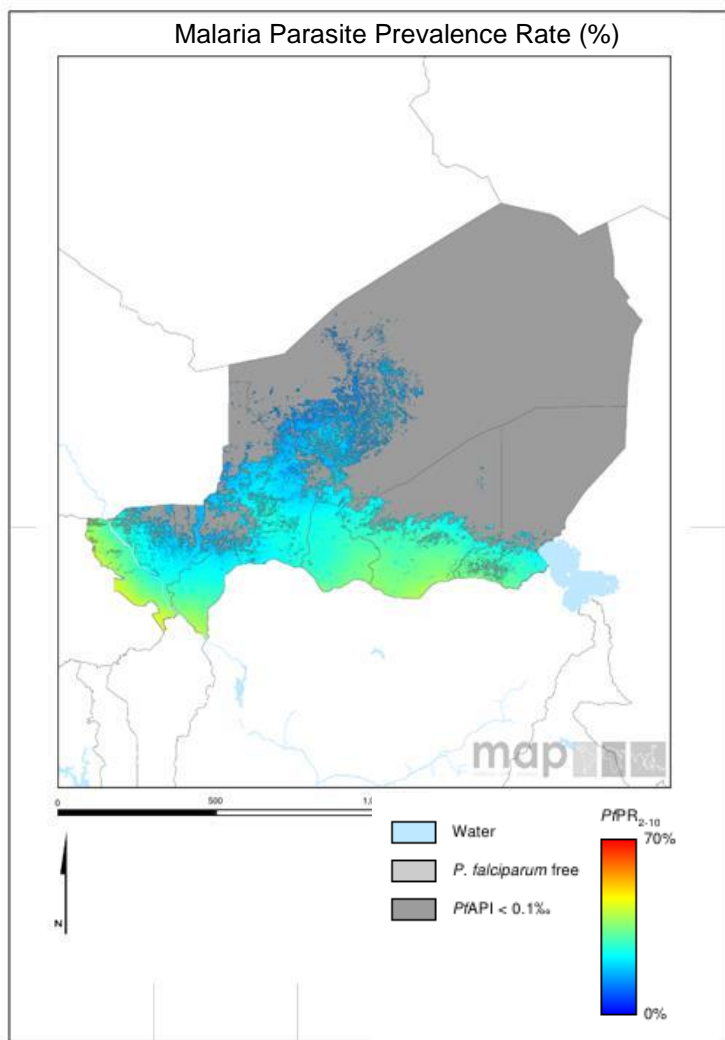


Scorecard for Accountability and Action



Malaria transmission is most intense in the south whilst the desert areas in the north are malaria-free. The annual reported number of malaria cases in 2013 was 4,391,189 with 2,209 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)		3.2
Commodities Financed, Implementation and Malaria Impact		
LLIN financing 2014 projection (% of need)		100
Public sector RDT financing 2014 projection (% of need)		82
Public sector ACT financing 2014 projection (% of need)		97
Operational LLIN/IRS coverage (% of at risk population)		32
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)		53
% deliveries assisted by skilled birth attendant		29
Exclusive breastfeeding (% children < 6 months)		23
Vitamin A Coverage 2012 (2 doses)		98
DPT3 coverage 2012 (vaccination among 12-23 month olds)		74
Postnatal care (within 48 hrs)		37

Key

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

## Niger ALMA Quarterly Report Quarter Four, 2014



### Progress

Niger has banned the import and sale of oral artemisinin-based monotherapies and has introduced policies on Community Case Management of malaria and pneumonia. The country has achieved high coverage of the tracer MNCH intervention, vitamin A. The country has committed domestic resources to significantly close gaps in malaria intervention coverage and has sufficient financing to procure and distribute the majority of the ACTs, RDTs, and LLINs required for 2014. Niger has achieved MDG4 by reducing under-five child mortality by over two thirds since 1990.

### Impact

The annual reported number of malaria cases in 2013 was 4,391,189 with 2,209 deaths.

### Key Challenge

- Delays in LLIN procurement may delay the universal coverage campaign in 2014.

### Previous Key Recommended Action

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 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		The country has commenced work on the GF New Funding Model concept note for submission in April 2015

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH <sup>1</sup> : Optimise quality of care	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		In 2014, the national infant and young child feeding (IYCF) strategy was revised and will be validated in 2015. The MoH has developed a national training plan on IYCF counselling and 42 national trainers were trained using the new UNICEF and WHO global materials for community IYCF counselling. 1,192 health workers in 462 health centres were trained in four regions and training is on-going at health centres and community level. A full package of nutrition specific interventions, with the aim of reaching over 90% of mothers, infants and young children is being implemented in 17 communes with 4,995 community workers trained with a package of essential family health practices integrating exclusive breastfeeding and complementary feeding. Mother support groups are being established. This will serve as a model for further expansion

### 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