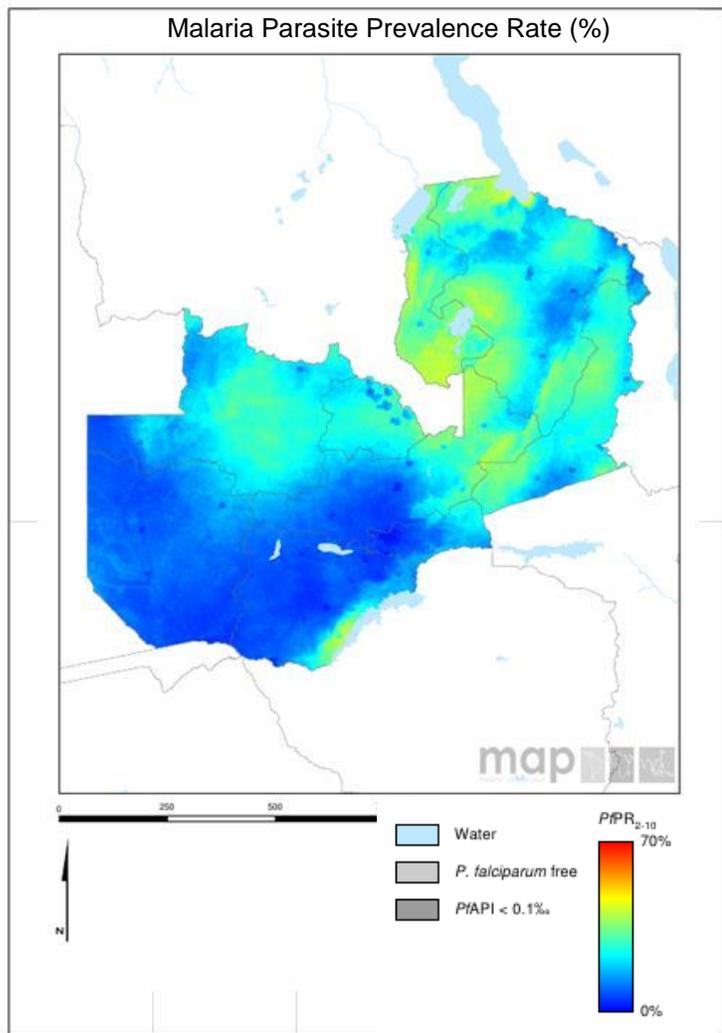


Scorecard for Accountability and Action



Malaria is endemic in all parts of Zambia and transmission is seasonal. The annual reported number of malaria cases in 2013 was 5,465,122 with 3,548 deaths.

Metrics

Policy and Financial Control	
Oral Artemisinin Based Monotherapy Ban status (2014)	Target achieved or on track
Community case management (Pneumonia)(2014)	Target achieved or on track
Community case management (Malaria)(2014)	Target achieved or on track
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)	94
Public sector RDT financing 2014 projection (% of need)	93
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)	Progress but more effort required
Tracer Indicators for Maternal and Child Health	
PMTCT coverage 2013 (% pregnant HIV pts receiving ARVs)	76
% deliveries assisted by skilled birth attendant	▲ 64
Exclusive breastfeeding (% children < 6 months)	▲ 73
Vitamin A Coverage 2012 (2 doses)	No data/Not applicable
DPT3 coverage 2012 (vaccination among 12-23 month olds)	78
Postnatal care (within 48 hrs)	39

Key

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

## Progress

Zambia has made significant progress in scaling-up malaria control interventions. The country has achieved high coverage of case management of malaria, as well as LLINs. Zambia has banned oral artemisinin-based monotherapies and has introduced a policy on Community Case Management of malaria and pneumonia. The country has committed additional resources to ACT and RDT procurement and has secured the majority of the resources required to sustain universal coverage in 2014. Zambia has also made significant progress in tracer MNCH interventions, with high coverage of PMTCT, and has recently increased coverage of skilled birth attendants and exclusive breastfeeding. Zambia has significantly enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn and Child Health Scorecard.

## Impact

The annual reported number of malaria cases in 2013 was 5,465,122 with 3,548 deaths. Zambia is projected to achieve a 50%–75% decrease in malaria incidence 2000–2015.

## Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH <sup>1</sup> : Optimise quality of care	Identify and address reasons for decreasing PMTCT coverage	Q3 2015		PMTCT coverage dropped as the country transitioned from Option A to Option B+ as a comprehensive assessment for readiness at each site was carried out. Challenges included the need to train front line staff in service delivery as well as stock outs of essential commodities. The Ministry of Community Development, Mother and Child Health in collaboration with partners has now trained over 1,000 front line staff in managing HIV positive pregnant women and has improved communication regarding the levels of commodities at facility level. The Technical Working Group for PMTCT meets every month and all implementing partners are required to provide updates on the roll out of Option B+. Technical Assistance has been funded by UNICEF to revise the joint ART/PMTCT implementation plan. Provincial clinical care teams are providing on site mentorship to improve service delivery and reporting

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

## Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due