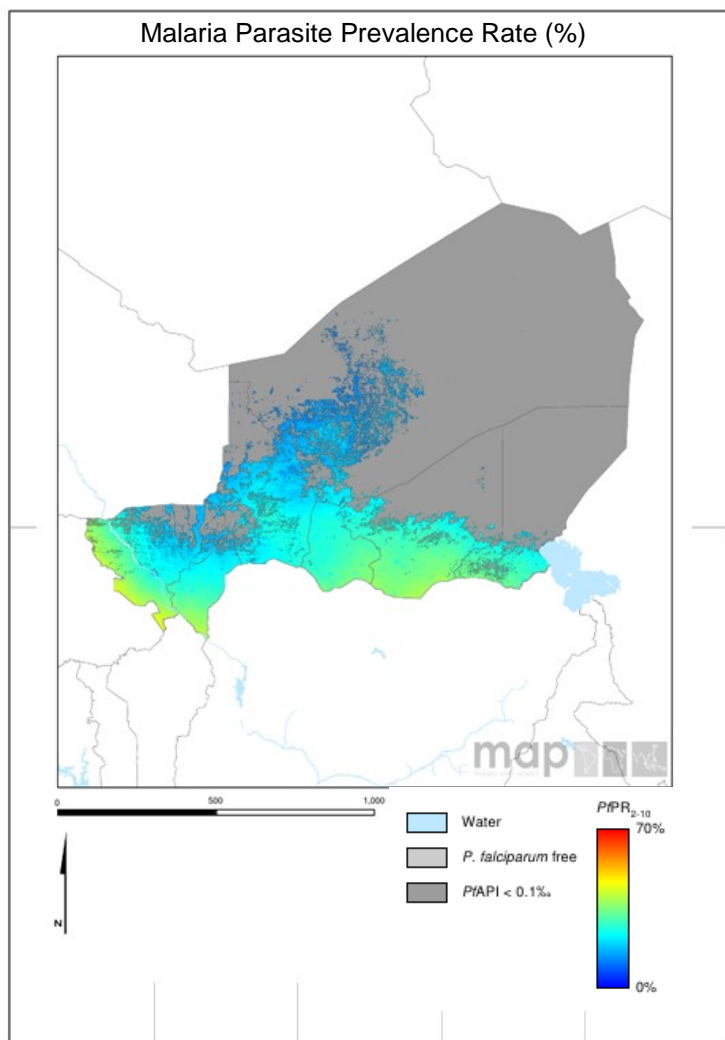


Scorecard for Accountability and Action



Metrics

Policy and Financial Control		
Oral Artemisinin Based Monotherapy Ban status (2015)		
Community case management (Pneumonia)(2015)		
Community case management (Malaria)(2015)		
World Bank rating on public sector mgmt and institutions 2014 (CPIA Cluster D)		3.2
Commodities Financed, Implementation and Malaria Impact		
LLIN financing 2015 projection (% of need)		100
Public sector RDT financing 2015 projection (% of need)		67
Public sector ACT financing 2015 projection (% of need)		86
Operational LLIN/IRS coverage (% of at risk population)		93
>75% Decrease in Malaria Incidence Projected 2000–2015		
Tracer Indicators for Maternal and Child Health		
PMTCT coverage 2014 (% pregnant HIV pts receiving ARVs)		
% deliveries assisted by skilled birth attendant		29
Exclusive breastfeeding (% children < 6 months)		23
Vitamin A Coverage 2013 (2 doses)		96
DPT3 coverage 2014 (vaccination among 12-23 month olds)		68
Postnatal care (within 48 hrs)		37

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.

Key

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

Niger ALMA Quarterly Report Quarter Four, 2015



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 committed domestic resources to significantly close gaps in malaria intervention coverage and has sufficient financing to procure and distribute the LLINs required for 2015.

The country has achieved high coverage of the tracer MNCH intervention, vitamin A. 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. WHO, through modeling, estimates that there has been a less than 50% decrease in malaria incidence between 2000 and 2015.

Previous Key Recommended Actions

Niger has responded positively to the MNCH recommended actions addressing low coverage of skilled birth attendants and exclusive breastfeeding, and lack of data on PMTCT coverage and continues to track progress as these actions are implemented.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Address Financing	Work to ensure there are sufficient resources to finance the ACTs and RDTs needed for universal coverage	Q2 2016