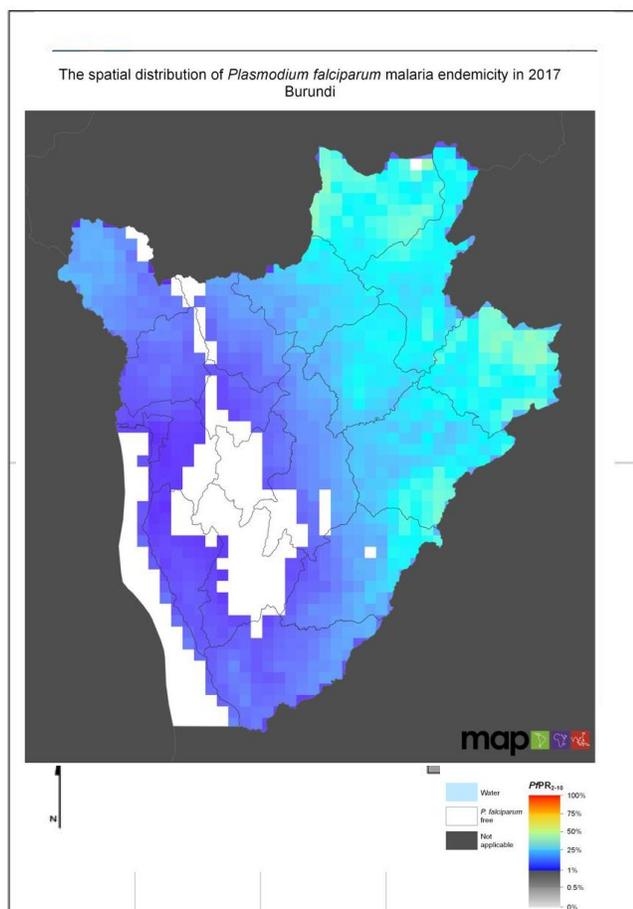


Scorecard for Accountability and Action



Metrics

Commodities Financed and Financial Control

LLIN financing 2019 projection (% of need)	100
Public sector RDT financing 2019 projection (% of need)	100
Public sector ACT financing 2019 projection (% of need)	100
World Bank rating on public sector management and institutions 2018 (CPIA Cluster D)	2.3

Insecticide Resistance Monitoring, Implementation and Impact

Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	3
Insecticide resistance monitored since 2015 and data reported to WHO	
National Insecticide Resistance Monitoring and Management Plan	
Country Reporting Launch of Zero Malaria Starts with Me Campaign	
Scale of Implementation of iCCM (2017)	
Operational LLIN/IRS coverage (% of at risk population)	100
On track to reduce case incidence by $\geq 40\%$ by 2020 (vs 2015)	
On track to reduce case mortality by $\geq 40\%$ by 2020 (vs 2015)	

Tracer Indicators for Maternal and Child Health and NTDs

Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2018)	17
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2018)	80
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2018)	30
% deliveries assisted by skilled birth attendant	85
Postnatal care (within 48 hrs)	51
Exclusive breastfeeding (% children < 6 months)	83
Vitamin A Coverage 2017 (2 doses)	79
DPT3 coverage 2018 (vaccination among 0-11 month olds)	90

Key

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

In Burundi, about 24% of the population is at high risk for malaria and nearly 22% live in malaria-free highland areas. The annual reported number of malaria cases in 2018 was 5 149 436 with 2,481 deaths.

Malaria

Global Fund Update

The Global Fund has announced that Burundi will receive US\$118.9 million for HIV, tuberculosis, malaria, and health systems strengthening as the country allocation for 2021-2023. The Global Fund has determined the total allocation amount based on Burundi's disease burden and income level, as well as several other factors. The malaria component is also allocated a specific proportion of the total, according to a formula developed by the Global Fund that takes into account several factors, including disease burden and previous disbursements. For Burundi this is calculated at US\$70.8 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Burundi is urged to ensure that resources are allocated to malaria control from the overall Global Fund country allocation, as well as from domestic resources, to accelerate progress.

Progress

Burundi procured sufficient LLINs to achieve universal coverage of the targeted at risk population. The country has secured sufficient resources to procure the LLINs, RDTs and ACTs required in 2019. Burundi has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control Scorecard. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO and has developed an insecticide resistance monitoring and management plan.

Impact

The annual reported number of malaria cases in 2018 was 5,149,436 with 2,481 deaths.

Key Challenges

- The country has experienced a malaria upsurge from 2015.
- Gaps to further scale up IRS.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Impact	Investigate and address the reasons for the increase in malaria cases and deaths	Q4 2019		The country has identified a number of underlying reasons for the increase in cases including increased rainfall, increased agriculture, poor compliance with the first line drug and poor durability of LLINs. In response the country has developed an emergency response plan, and has secured additional funds for ACTs and RDTs, and has worked to accelerate the LLIN campaign and change the first line treatment of malaria. Cases have recently decreased

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Address funding	Ensure the GF malaria funding application is submitted by Q2 2020 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q2 2020

RMNCAH and NTDs

Progress

Burundi has achieved high coverage of tracer RMNCAH interventions, including exclusive breastfeeding, DPT3, ART coverage and skilled birth attendance. Burundi enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Burundi is measured using a composite index calculated from preventive chemotherapy coverage achieved for onchocerciasis, schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage in Burundi is high for schistosomiasis (100%), soil transmitted helminths (95%) and for onchocerciasis (83%). However, the country did not implement preventive chemotherapy for trachoma (0%). Overall, the NTD preventive chemotherapy coverage index for Burundi in 2018 is 17, the same as 2017 index value (17).

Burundi is commended for completing the required rounds of MDA for Trachoma, and reducing the prevalence to less than 5%. The country has also reached WHO targets for Preventive Chemotherapy for schistosomiasis, soil transmitted helminths and onchocerciasis.

Previous Key Recommended Action

Burundi has responded positively to the RMNCAH recommended actions addressing low coverage of ART coverage in children, with a 2% increase in coverage reported in the last year.