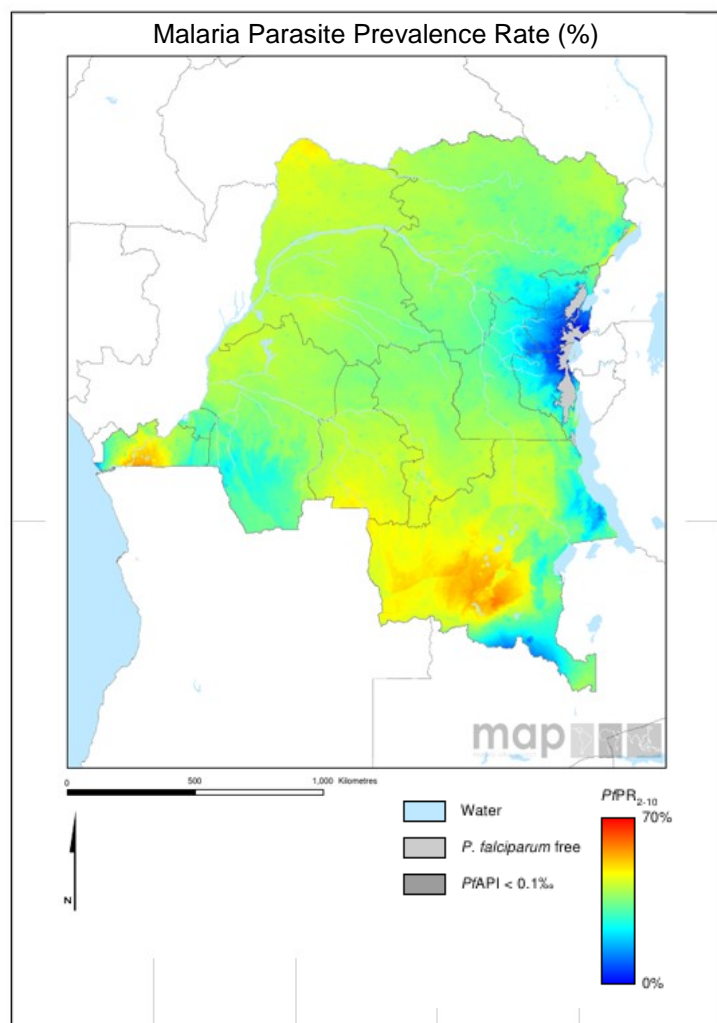


Scorecard for Accountability and Action







The entire population of the Democratic Republic of Congo is at high risk of malaria and transmission is intense year round with seasonal variations. The annual reported number of malaria cases in 2014 was 9,968,983 with 25,502 deaths.

Metrics

Commodities Financed and Financial Control	
LLIN financing 2016 projection (% of need)	93
Public sector RDT financing 2016 projection (% of need)	100
Public sector ACT financing 2016 projection (% of need)	79
World Bank rating on public sector management and institutions 2014 (CPIA Cluster D)	2.5
Insecticide Resistance Monitoring, Implementation and Impact	
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	2
Insecticide resistance monitored since 2014 and data reported to WHO	
National Insecticide Resistance Monitoring and Management Plan	
Scale of Implementation of iCCM (2013)	
Operational LLIN/IRS coverage (% of at risk population)	100
>75% Decrease in Malaria Incidence Projected 2000–2015	
Tracer Indicators for Maternal and Child Health	
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2014)	23
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2014)	15
% deliveries assisted by skilled birth attendant	80
Postnatal care (within 48 hrs)	44
Exclusive breastfeeding (% children < 6 months)	48
Vitamin A Coverage 2013 (2 doses)	98
DPT3 coverage 2014 (vaccination among 12-23 month olds)	80

Key

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

Malaria

Progress

The Democratic Republic of Congo has procured sufficient LLINs to achieve operational universal coverage. The country has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO. The Democratic Republic of Congo has secured the majority of the resources required to sustain coverage of essential malaria control interventions in 2016. The Democratic Republic of Congo has scaled up iCCM implementation.

Impact

The annual reported number of malaria cases in 2014 was 9,968,983 with 25,502 deaths. WHO, through modeling, projects that the Democratic Republic of Congo has achieved a 50%–75% decrease in malaria incidence between 2000 and 2015.

Key Challenges

- Resource gaps exist to sustain universal coverage in 2017.
- Taxes and tariffs are levied on private sector malaria commodities.

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Address funding	Work to fill the outstanding gaps required to sustain full coverage of ACTs in 2015	Q1 2016		Deliverable not yet due but the majority of the ACTs have been secured

New Key Recommended Actions

Objective	Action Item	Suggested completion timeframe
Vector Control	Given the reported mosquito resistance to 2 classes of insecticide, urgently finalise and implement the national insecticide resistance monitoring and management plan	Q1 2017
Policy	Work to remove tariffs on private sector ACTs to enhance affordability in the private sector	Q1 2017

MNCH





Progress

The Democratic Republic of Congo has achieved high coverage in the tracer MNCH intervention of skilled birth attendants, vitamin A and DPT3. The country has significantly enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn and Child Health Scorecard.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
MNCH ¹ : Optimise quality of care	Work to accelerate coverage of ARTs especially in children under 14 years of age	Q1 2017

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

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