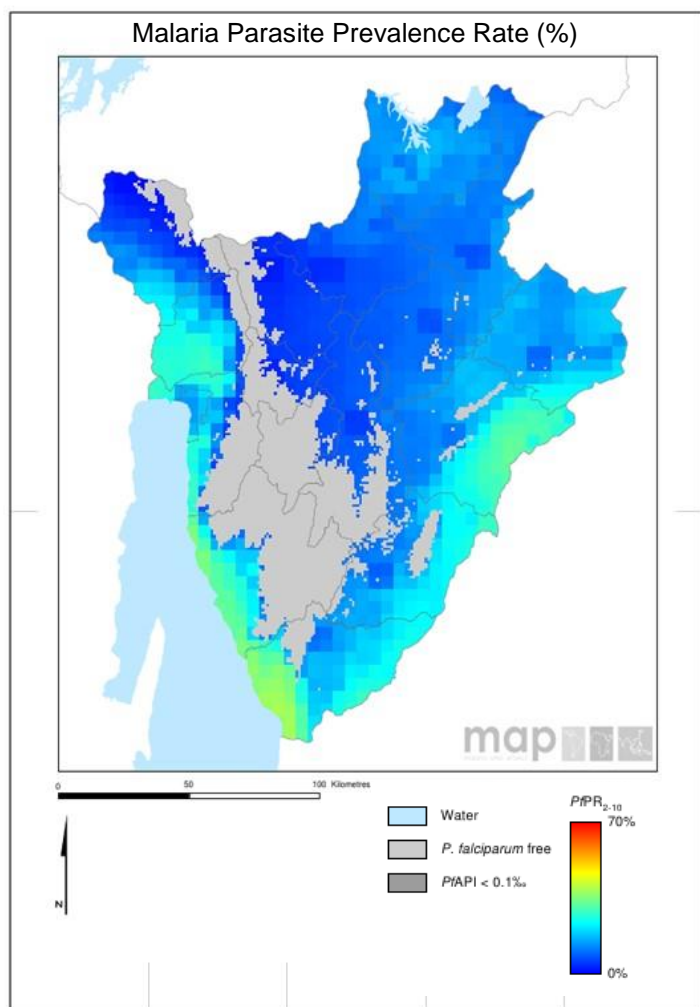


Scorecard for Accountability and Action



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 2014 was 4,831,758 with 2,974 deaths.

Metrics

Commodities Financed and Financial Control

LLIN financing 2016 projection (% of need)	100
Public sector RDT financing 2016 projection (% of need)	83
Public sector ACT financing 2016 projection (% of need)	▲ 100
World Bank rating on public sector management and institutions 2014 (CPIA Cluster D)	2.8

Insecticide Resistance Monitoring, Implementation and Impact

Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	3
Insecticide resistance monitored since 2014 and data reported to WHO	
National Insecticide Resistance Monitoring and Management Plan	
Scale of Implementation of iCCM (2013)	
Operational LLINIRS 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 (2015)	▲ 54
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2015)	▲ 29
% deliveries assisted by skilled birth attendant	60
Postnatal care (within 48 hrs)	30
Exclusive breastfeeding (% children < 6 months)	69
Vitamin A Coverage 2013 (2 doses)	75
DPT3 coverage 2014 (vaccination among 0-11 month olds)	95

Key

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

Malaria

Progress

Burundi has made good progress in scaling-up coverage of key malaria control interventions. Burundi has procured sufficient LLINs to achieve universal coverage and sufficient resources have been secured to procure the majority of the LLINs, ACTs and RDTs required in 2016. The country has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO.

Impact

The annual reported number of malaria cases in 2014 was 4,831,758 with 2,974 deaths. WHO, through modeling, projects that Burundi has achieved a 50%-75% decrease in malaria incidence between 2000 and 2015.

Key Challenge

- Reported malaria upsurges in 2015 and 2016.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Address malaria upsurge	Investigate and address the reasons for the increase in malaria cases in parts of the country in 2015	Q4 2016		Deliverable not yet due but the country has requested technical assistance to support an investigation of the causes of the upsurge in cases and has reprogrammed resources to address the upsurge
Vector Control	Given the reported mosquito resistance to 3 classes of insecticide, urgently finalise and implement the national insecticide resistance monitoring and management plan	Q1 2017		Burundi is finalising the insecticide resistance monitoring and management plan and aims to complete this by the end of the second quarter 2016

MNCH




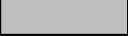
Progress

Burundi has also achieved high coverage of tracer MNCH interventions, including exclusive breastfeeding and DPT3. The country has significantly enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn and Child Health Scorecard.

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH ¹ : Optimise quality of care	Work to accelerate coverage of ARTs in children under 14 years of age	Q1 2017		Deliverable not yet due but Burundi has increased ART coverage by 8% in the total population and by 5% in children

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

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