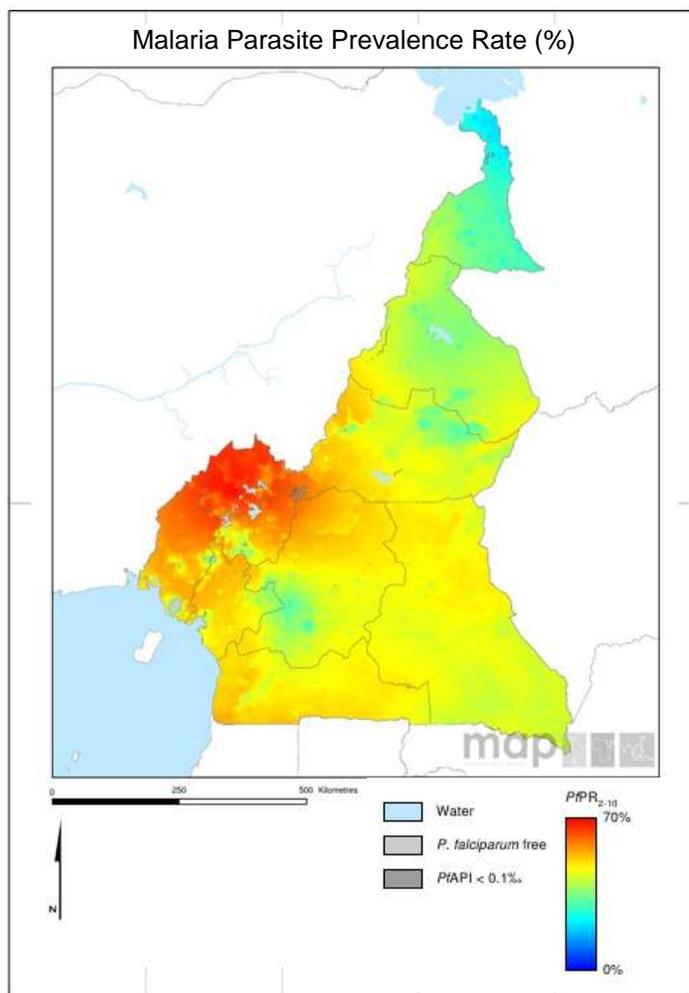


Cameroon ALMA Quarterly Report Quarter Four, 2016



Scorecard for Accountability and Action



Malaria transmission occurs year-round in Cameroon and is most intense in the south of the country. The annual reported number of malaria cases in 2015 was 2,321,933 with 3,440 deaths.

Metrics

Commodities Financed and Financial Control	
LLIN financing 2016 projection (% of need)	100
Public sector RDT financing 2016 projection (% of need)	100
Public sector ACT financing 2016 projection (% of need)	100
World Bank rating on public sector management and institutions 2015 (CPIA Cluster D)	2.9
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 (2016)	▲
Operational LLINIRS coverage (% of at risk population)	100
Estimated change in malaria incidence rate (2010–2015)	
Estimated change in malaria mortality rate (2010–2015)	
Tracer Indicators for Maternal and Child Health	
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2015)	27
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2015)	18
% deliveries assisted by skilled birth attendant	65
Postnatal care (within 48 hrs)	65
Exclusive breastfeeding (% children < 6 months)	28
Vitamin A Coverage 2014 (2 doses)	96
DPT3 coverage 2015 (vaccination among 0-11 month olds)	84

Key

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

Malaria

The Global Fund

The Global Fund has announced that Cameroon will receive € 164.5 million for HIV, tuberculosis, malaria, and health systems strengthening as the country allocation for 2018-2020. The Global Fund has determined the total allocation amount based on Cameroon'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 Cameroon this is calculated at € 65.5 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Cameroon 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 sustain the gains made in recent years.

Progress

Cameroon has committed domestic resources to fill the outstanding gap for the LLIN campaign and has secured sufficient resources to cover the costs of the LLINs, ACTs and RDTs needed in 2016. The country has procured sufficient LLINs to achieve universal operational coverage and has just completed the universal coverage campaign. Cameroon has scaled up implementation of iCCM. 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 2015 was 2,321,933 with 3,440 deaths. WHO estimates that the country has achieved a change of less than 20% in the malaria incidence rate and a decrease of 20-40% in the malaria mortality rate for the period 2010 - 2015.

Key Challenge

- Ensuring domestic resources for malaria control are sustained and increased.

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Vector control	Given the reported mosquito resistance to 3 classes of insecticide, develop and implement a national insecticide resistance monitoring and management plan	Q2 2017		The country is planning to update the National Strategic Plan, which will include vector profiles and insecticide resistance status. To fast track the development of the insecticide resistance plan, Cameroon will request technical assistance. The country plans to draft a plan and finalise it by Q2 2017

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Address funding	Ensure the GF malaria funding application is submitted by Q1 2017 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q1 2017

MNCH

Progress

The country has achieved high coverage in the tracer MNCH interventions postnatal care, vitamin A and DPT3.

Previous Key Recommended Actions

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 the total population and in children under 14 years of age	Q1 2017		Deliverable not yet due but Cameroon has increased ART coverage by 3% in both the total population and in children and plans to increase coverage in children by a further 7% in the next year. Cameroon has developed a national paediatric ART acceleration plan aligned to 90-90-90 (2016-2019). The country has enhanced advocacy, monitoring, planning and resource leveraging through an annual conference on paediatric HIV. Cameroon is scaling up case-finding strategies in priority regions in line with the national paediatric ART acceleration plan. The country is integrating HIV programming with routine child health services through the EPI cards. Cameroon is also working to fast track task shifting whilst scaling up the number of treatment sites and number of staff able to provide treatment

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

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