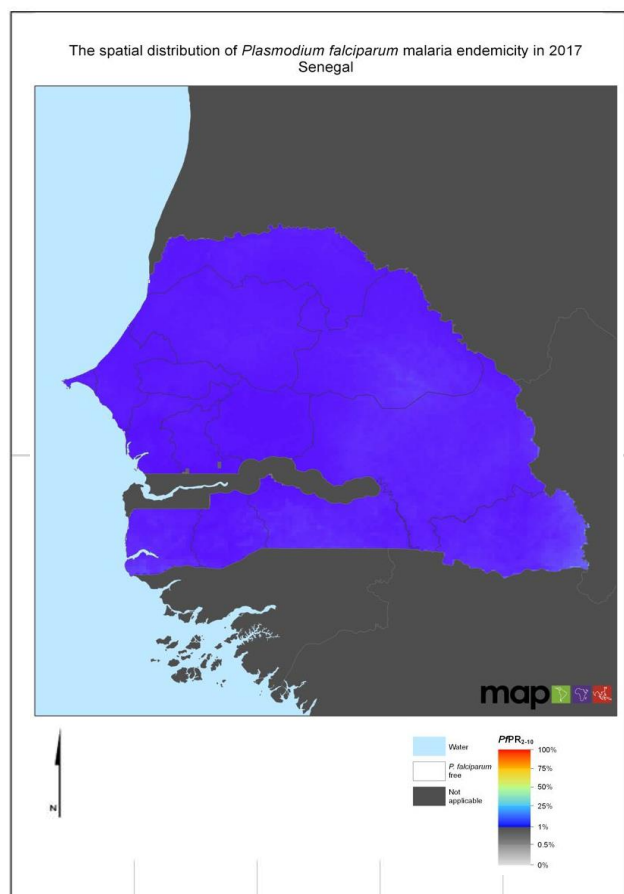


## Scorecard for Accountability and Action



The annual reported number of malaria cases in 2018 was 536,745 and 555 deaths.

### Metrics

Commodities Financed and Financial Control		
LLIN financing 2020 projection (% of need)		100
Public sector RDT financing 2020 projection (% of need)		100
Public sector ACT financing 2020 projection (% of need)		100
World Bank rating on public sector management and institutions 2018 (CPIA Cluster D)		3.5
Insecticide Resistance Monitoring, Implementation and Impact		
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	4	
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 ≥40% by 2020 (vs 2015)		
On track to reduce case mortality by ≥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)		63
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2018)	31	
% deliveries assisted by skilled birth attendant		68
Postnatal care (within 48 hrs)		77
Exclusive breastfeeding (% children < 6 months)		42
Vitamin A Coverage 2018 (2 doses)		57
DPT3 coverage 2018 (vaccination among 0-11 month olds)		81

### Key

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

## **Malaria**

### **Sustaining Essential Health Services During the COVID-19 Pandemic**

The COVID-19 pandemic is putting an incredible strain on health systems across Africa. Health systems are required to maintain routine health services for other illnesses even as they handle the additional burden of COVID-19. In order to prevent widespread morbidity and mortality, it is of vital importance that we work to sustain the delivery of essential life-saving interventions during this difficult time including for Reproductive, Maternal, Newborn, Child and Adolescent health including malaria.

WHO underlines the critical importance of sustaining efforts to prevent, detect and treat malaria during the COVID-19 pandemic. It is of vital importance to ensure the continuity of malaria prevention and treatment services including distribution of insecticide-treated nets and indoor residual spraying, as well as chemoprevention for pregnant women and young children (intermittent preventive treatment in pregnancy and seasonal malaria chemoprevention). Any intervention must consider the importance of both lowering malaria-related mortality and ensuring the safety of communities and health workers given the ease of transmission of COVID-19.

For Senegal, it will be of vital importance that the country sustains essential health services including malaria case management. Without the 2020 LLIN campaign, coupled with sustained malaria case management, there will be an increase in malaria cases and deaths. Under the worst-case scenario, in which there is a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could be a 19.5% increase in malaria cases, and a 79.9% increase in malaria deaths in Senegal. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

### **The Global Fund**

The Global Fund has announced that Senegal will receive €69.6 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 Senegal'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 Senegal this is calculated at €32.8 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Senegal 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**

Senegal has implemented iCCM country wide. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO. The country has recently finalised the insecticide resistance management and monitoring plan. Senegal has secured sufficient resources to sustain universal coverage of essential malaria control interventions in 2020 and has distributed sufficient LLINs to achieve universal operational coverage in the targeted at risk population. Senegal has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard. Senegal has put in place strong public sector management systems and has achieved a rating of 3.5 for Cluster D CPIA. Senegal was the first country to launch the Zero Malaria Starts with Me campaign.

## Impact

The annual reported number of malaria cases in 2018 was 536,745 and 555 deaths.

## Key Challenges

- Reported increase in malaria deaths between 2015 and 2018.
- Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health including malaria.

## Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
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		Deliverable not yet due

## New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Impact	Ensure that malaria services including case management and vector control are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic	Q4 2020

## RMNCAH and NTDs

### Progress

Senegal has achieved high coverage of the tracer RMNCAH interventions DPT3 and postnatal care, and has recently increased coverage of ARTs in children and the total population, as well as skilled birth attendants. The country has enhanced the tracking and accountability mechanisms with the development of the Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Senegal is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage in Senegal is high for onchocerciasis at 94% and below WHO targets for schistosomiasis (67%), lymphatic filariasis (62%), soil transmitted helminths (34%) and preventive chemotherapy was not implemented for trachoma (0%). Overall, the NTD preventive chemotherapy coverage index for Senegal in 2018 is low (17), which represents a large decrease compared with the 2017 index value (71).

## Previous Key Recommended Actions





Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
RMNCAH <sup>1</sup> : Optimise quality of care	Investigate and address the reasons for the decreasing coverage of DPT3	Q2 2020		Deliverable not yet due
NTDs	Work to increase the preventive chemotherapy for Soil Transmitted Helminths, lymphatic filariasis and schistosomiasis to reach WHO targets along with onchocerciasis and implement preventive chemotherapy for trachoma	Q2 2020		Due to limited funds, the country covered only a few districts supported by OMVS and USAID. The remaining districts were not covered and the country is trying to mobilize funds to cover the remaining districts

Senegal responded positively to the RMNCAH recommended action addressing low coverage of ARTs in children, with increased coverage recently achieved.

## New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
RMNCAH <sup>1</sup> : Impact	Ensure that essential RMNCAH services are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic	Q4 2020

### Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

<sup>1</sup> RMNCAH metrics, recommended actions and response tracked through WHO