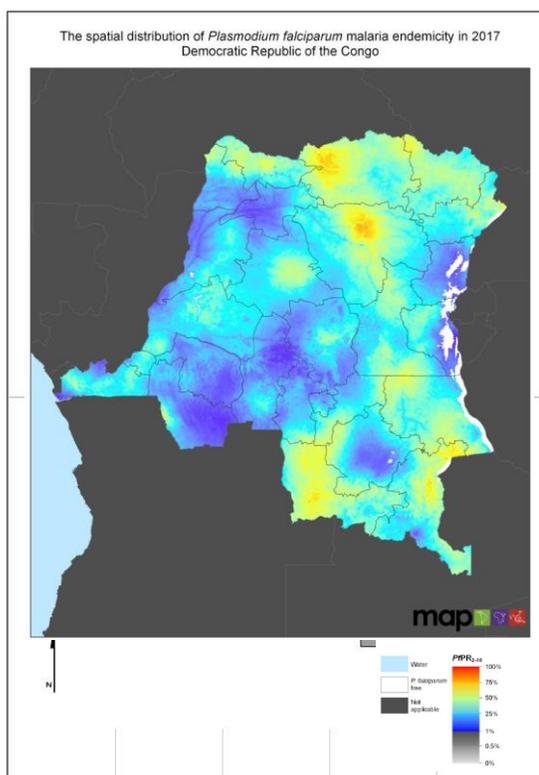


Scorecard for Accountability and Action



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 2018 was 18,208,440 with 18,030 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)		
World Bank rating on public sector management and institutions 2018 (CPIA Cluster D)		2.5
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		
RDTs in stock (>9 months stock)		
ACTs in stock (>9 months stock)		
LLINIRS campaign on track		
Country Reporting Launch of Zero Malaria Starts with Me Campaign		
Scale of Implementation of iCCM (2017)		
Operational LLINIRS 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)		53
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2019)		53
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2019)		28
% deliveries assisted by skilled birth attendant		80
Postnatal care (within 48 hrs)		44
Exclusive breastfeeding (% children < 6 months)		47
Vitamin A Coverage 2018 (2 doses)		78
DPT3 coverage 2019 (vaccination among 0-11 month olds)		57

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. 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, Adolescent and Child health and 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 the Democratic Republic of Congo, it will be of vital importance to ensure that the rolling long-lasting insecticidal net (LLIN) campaigns scheduled for 2020 are completed. The country has already successfully rolled out the first phase of the 2020 campaigns. Under the worst-case scenario, in which the LLIN campaigns are not completed and there is a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could be a 14.2% increase in malaria cases, and a 98.2% increase in malaria deaths in The Democratic Republic of Congo. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

Global Fund Update

The Global Fund has announced that the Democratic Republic of Congo will receive US\$644.9 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 the Democratic Republic of Congo'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 the Democratic Republic of Congo this is calculated at US\$393.9 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. The Democratic Republic of Congo 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

The Democratic Republic of Congo has procured sufficient LLINs to achieve 100% operational coverage of the targeted at risk population. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO. The Democratic Republic of Congo has secured the resources required to sustain coverage of LLINs and RDTs in 2020. The country has enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control Scorecard. The country is also showing leadership in malaria control through its participation in the High Burden High Impact approach.

Impact

The annual reported number of malaria cases in 2018 was 18,208,440 with 18,030 deaths.

Key Challenges

- Resource gaps to fully implement the national strategic plan.
- 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
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		DRC has established a public health emergency operations centre. The centre is used to provide training to health staff to adhere to the COVID-19 guidelines, as well as improving the quality of data of COVID-19 and malaria at national and provincial levels for rapid decision-making. The country has adapted their mass LLIN campaign manuals, to conduct the LLIN campaigns within the context of COVID-19 and with safe-social distancing. The country is also mobilizing funds for the protection of healthcare providers against COVID-19 including masks, disinfectant and hand washing devices

The country has responded positively to the recommended actions addressing CPIA cluster D and continues to track progress as these actions are implemented.

New Key Recommended Actions

Objective	Action Item	Suggested completion timeframe
Address funding	With the GF funding application being sent back for iteration, work to address the comments of the TRP and resubmit the funding request. Also work to prioritise resources to fill essential gaps	Q4 2020

RMNCAH and NDTs

Progress

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

Progress in addressing Neglected Tropical Diseases (NTDs) in Democratic Republic of the Congo 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 Democratic Republic of the Congo is very good for onchocerciasis (79%)

and for lymphatic filariasis (77%). However, preventive chemotherapy coverage is below the WHO target for schistosomiasis (69%), soil transmitted helminths (52%) and for trachoma (19%). Overall, the NTD preventive chemotherapy coverage index for the Democratic Republic of the Congo in 2018 is 53.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
RMNCAH ¹ : Impact	Ensure that essential RMNCAH services are sustained and implemented whilst using Covid-19 sensitive guidelines during the pandemic. Address any stock-outs of essential RMNCAH commodities	Q4 2020		The COVID-19 pandemic has impacted access to health facilities with the country observing a decline in the use of health care services for children under 5 years of age, as well as ANC and family planning services. The country is working to implement an emergency RMNCAH-nutrition plan to sustain these essential health services, whilst distributing new guidelines and PPE to protect health workers

The country has responded positively to the RMNCAH recommended actions addressing accelerating coverage of ARTs in children and vitamin A (with a recent increase in coverage reported), and continues to track progress as these action are implemented.

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

¹ RMNCAH metrics, recommended actions and response tracked through WHO