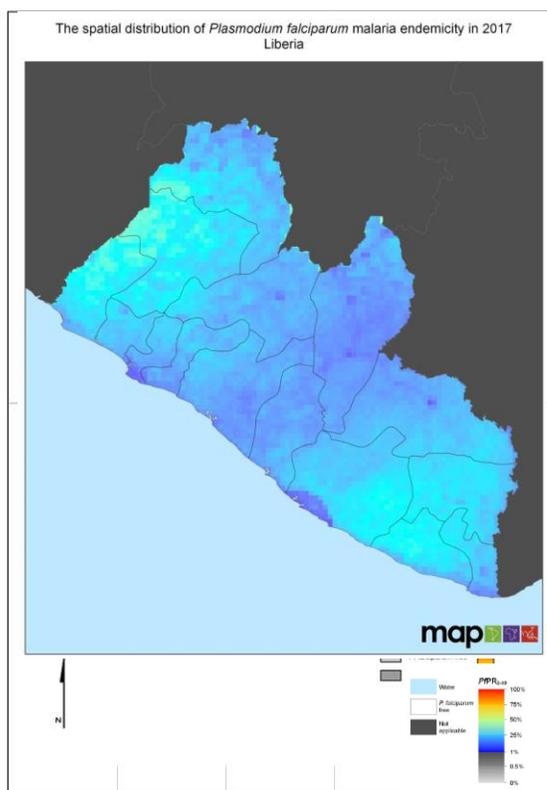


### Scorecard for Accountability and Action



The entire population of Liberia is at high risk for malaria. The annual reported number of malaria cases in 2018 was 1,342,953 with 758 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)	2.5
Insecticide Resistance Monitoring, Implementation and Impact	
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	3
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)	
LLIN/IRS campaign on track	
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)	77
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2019)	33
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2019)	21
% deliveries assisted by skilled birth attendant	61
Postnatal care (within 48 hrs)	77
Exclusive breastfeeding (% children < 6 months)	55
Vitamin A Coverage 2018 (2 doses)	62
DPT3 coverage 2019 (vaccination among 0-11 month olds)	74

#### 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, Child and Adolescent 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 (intermittent preventive treatment in pregnancy). 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 Liberia, it will be of vital importance to ensure that the planning for the universal coverage campaign for long-lasting insecticidal nets (LLINs) scheduled for 2021 goes ahead, whilst taking into account physical distancing, in accordance with the recent guidance and recommendations from WHO and the RBM Partnership to End Malaria. It is of particular note that this guidance was developed based upon the experiences of distributing LLINs in Liberia during the Ebola outbreak, and we thank you sincerely for the leadership of the Ministry of Health for this important action. Without this campaign, coupled with the need to also sustain essential health services including 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 7.5% increase in malaria cases, and a 104.1% increase in malaria deaths in Liberia. 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 Liberia will receive US\$77.7 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 Liberia'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 Liberia this is calculated at US\$39.8 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Liberia 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**

Liberia secured the resources required for the procurement and distribution of the anti-malarial commodities in 2020 and has procured sufficient LLINs to achieve universal 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. Liberia has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard.

## Impact

The annual reported number of malaria cases in 2017 was 1,342,953 with 758 deaths.

## Key Challenges

- The increase in malaria incidence and mortality rates estimated by WHO 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
Impact	Investigate and address the reasons for the increase in estimated malaria incidence between 2015 and 2018	Q4 2020		Deliverable not yet due
Address funding	Ensure the GF malaria funding application is submitted by Q3 2020 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q3 2020		Deliverable not yet due
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		Deliverable not yet due

## RMNCAH and NTDs

### Progress

Liberia has achieved good coverage in the tracer RMNCAH indicator of exclusive breastfeeding, postnatal care and vitamin A coverage. Liberia has significantly enhanced the tracking and accountability mechanisms with the development and launch of the Reproductive, Maternal, Newborn and Child Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Liberia is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis, and soil transmitted helminths. Preventive chemotherapy coverage in Liberia is very good for schistosomiasis (97%), and good for soil transmitted helminths (76%), onchocerciasis (69%) and lymphatic filariasis (68%). Overall, the NTD preventive chemotherapy coverage index for Liberia in 2018 is 77, which represents an increase 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	Address the falling coverage of vitamin A	Q1 2021		Deliverable not yet due
RMNCAH <sup>1</sup> : 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		Liberia developed COVID-19 Guidelines and Preparedness and Response Plans. Based on the Ebola experience, the use of appropriate PPEs in every health facilities was reinforced. Social distancing, wearing of masks, avoiding public gathering were initiated. Despite these challenges, service provision in all clinical domains continued even though key data indicators have dropped in value. For example, facility deliveries have reduced thereby resulting into increased community deliveries.

Liberia has responded positively to the RMNCAH recommended action addressing low coverage of ARTs, with recent increases in coverage noted, and continues to track progress as this action is implemented.

### New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
RMNCAH <sup>1</sup> : Optimise quality of care	Address the falling coverage of DPT3	Q2 2021

### Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

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