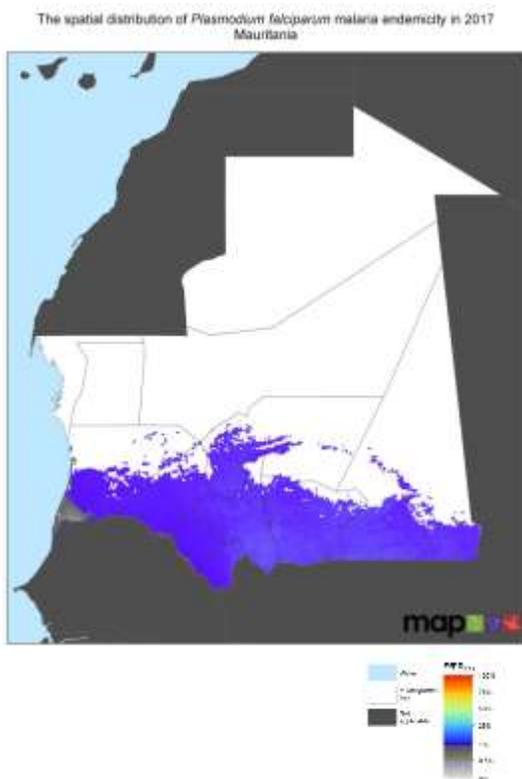


Scorecard for Accountability and Action



In Mauritania, almost 15% of the population is at high risk and 75% is at low risk of malaria. The annual reported number of malaria cases in 2018 was 175,841.

Metrics

Commodities Financed and Financial Control		
LLIN financing 2020 projection (% of need)	Not on track	8
Public sector RDT financing 2020 projection (% of need)	Target achieved or on track	100
Public sector ACT financing 2020 projection (% of need)	Target achieved or on track	100
World Bank rating on public sector management and institutions 2019 (CPIA Cluster D)	Progress but more effort required	3.3
Insecticide Resistance Monitoring, Implementation and Impact		
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	Progress but more effort required	1
Insecticide resistance monitored since 2015 and data reported to WHO	Not on track	
National Insecticide Resistance Monitoring and Management Plan	Progress but more effort required	
RDTs in stock (>9 months stock)	Progress but more effort required	
ACTs in stock (>9 months stock)	Progress but more effort required	
LLINIRS campaign on track	Target achieved or on track	
Country Reporting Launch of Zero Malaria Starts with Me Campaign	Target achieved or on track	
Scale of Implementation of ICCM (2017)	Target achieved or on track	
Operational LLINIRS coverage (% of at risk population)	Progress but more effort required	76
On track to reduce case incidence by ≥40% by 2020 (vs 2015)	Target achieved or on track	
On track to reduce case mortality by ≥40% by 2020 (vs 2015)	Progress but more effort required	
Tracer Indicators for Maternal and Child Health and NTDs		
Mass Treatment Coverage for Neglected Tropical Disease (NTD Index, %)(2018)	Target achieved or on track	88
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2019)	Progress but more effort required	57
Estimated % of children (0-14 years old) living with HIV who have access to antiretroviral therapy (2019)	Not on track	39
% deliveries assisted by skilled birth attendant	Progress but more effort required	69
Postnatal care (within 48 hrs)	Progress but more effort required	57
Exclusive breastfeeding (% children < 6 months)	Progress but more effort required	41
Vitamin A Coverage 2018 (2 doses)	Target achieved or on track	85
DPT3 coverage 2019 (vaccination among 0-11 month olds)	Progress but more effort required	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. 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 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 Mauritania, it will be of vital importance to ensure that the universal coverage campaign for long-lasting insecticidal nets (LLINs) scheduled for 2020 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. Without this campaign, coupled with the need to also complete the seasonal malaria chemoprevention campaigns and 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 all ITN campaigns are suspended and there is a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could be a 27.3% increase in malaria cases, and a 79.4% increase in malaria deaths in Mauritania. 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 Mauritania will receive US\$19.6 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 Mauritania'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 Mauritania this is calculated at US\$12.5 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Mauritania 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

Mauritania has secured sufficient resources to meet the ACT and RDT requirements for 2020 and is implementing iCCM at scale. Mauritania has enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Scorecard. Mauritania has launched its Zero Malaria Starts with Me campaign.

Impact

The annual reported number of malaria cases in 2018 was 175,841.

Key Challenges

- The country has a less than 20% malaria case reporting rate by surveillance systems.

- 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
Vector Control	Report to WHO on the status of insecticide resistance, resistance monitoring and on the status of the national insecticide resistance monitoring and management plan	Q1 2017		No data have been collected recently due to lack of resources. The country plans to include a budget in the GF funding request for monitoring insecticide resistance
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		The NMCP has developed a strategy for implementing the LLIN mass campaign with COVID19 measures to the Ministry of Health's COVID steering committee. Microplanning was completed in Q2 2020 and the logistics strategy revised. Training is planned in mid-October with the LLIN distribution planned for the end of October to early November, SMC is ongoing
Address funding	Ensure the GF malaria funding application is submitted by Q2 2021 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q2 2021		Deliverable not yet due
Vector control	Work to address the falling LLIN coverage	Q4 2020		The country rolled out the universal coverage campaign in Q3

RMNCAH and NTDs

Progress

Progress in addressing Neglected Tropical Diseases (NTDs) in Mauritania is measured using a composite index calculated from preventive chemotherapy coverage achieved for schistosomiasis, and trachoma. Preventive chemotherapy coverage in Mauritania is high for trachoma (100%), and good for schistosomiasis (77%). Overall, the NTD preventive chemotherapy coverage index for Mauritania in 2018 is 88, which represents a large increase compared with the 2017 index value (3).

The country has achieved high coverage of the RMNCAH tracer indicator of vitamin A coverage.

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 country is working to ensure the continuity of essential RMNCAH Services including antenatal and post-natal care, childhood disease case management and the delivery of nutrition supplements during the COVID-19 pandemic. This includes strengthening of the cold chain, supportive supervision on vaccines stock management and timely reporting. Refresher training of health care providers on new-born health care has been provided. ICCM including treatment of malaria, diarrhea and acute respiratory infection and severe acute malnutrition are continuing. An integrated campaign of nutrition status screening for children under five, deworming, vitamin A distribution, immunization catch up and birth registration promotion is being planned

Mauritania has responded positively to the RMNCAH recommended action addressing low coverage of ARTs in children under 14 years of age and continues to track progress as this action is implemented.

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

¹ RMNCAH metrics, recommended actions and response tracked through WHO