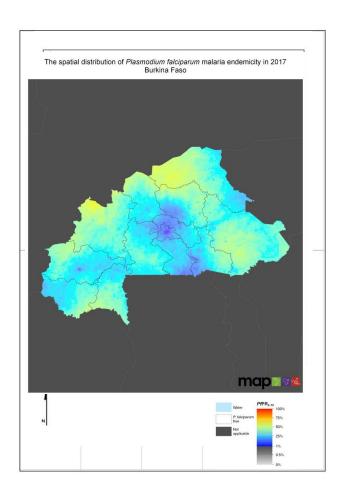
Burkina Faso ALMA Quarterly Report Quarter Four, 2019



Scorecard for Accountability and Action

Metrics

Commodities Financed and Financial Control



100 LLIN financing 2019 projection (% of need) Public sector RDT financing 2019 projection (% of 85 Public sector ACT financing 2019 projection (% of 100 World Bank rating on public sector management 3.4 and institutions 2018 (CPIA Cluster D) Insecticide Resistance Monitoring, Implementation and Impact Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010 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 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 89 Disease (NTD index, %)(2018) Estimated % of Total Population living with HIV who 62 have access to antiretroviral therapy (2018) Estimated % of children (0-14 years old) living with HIV who have access to antiretroviral therapy (2018) % deliveries assisted by skilled birth attendant 80 Postnatal care (within 48 hrs) 74 Exclusive breastfeeding (% children < 6 months) 50 Vitamin A Coverage 2017 (2 doses) DPT3 coverage 2018 (vaccination among 0-11 month olds)

Malaria is present throughout Burkina Faso, with transmission most intense in the southern part of the country. The annual reported number of malaria cases in 2018 was 11 970 321 with 4,294 deaths.

Key



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Malaria

The Global Fund

The Global Fund has announced that Burkina Faso will receive €201.5 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 Burkina Faso'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 Burkina Faso this is calculated at €140.7 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Burkina Faso 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 the gains made in recent years.

Progress

Burkina Faso has scaled up coverage of iCCM and has procured sufficient LLINs to achieve universal operational coverage of the targeted at risk population. Burkina Faso has a high rating in public sector management systems (CPIA cluster D). The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO and has recently completed the insecticide resistance monitoring and management plan. Burkina Faso has enhanced the tracking and accountability mechanisms for malaria with the development of the Malaria Scorecard. Burkina Faso has decreased the estimated malaria mortality rate by more than 40% since 2015. The country is also showing leadership in malaria control through participation in the High Burden High Impact approach.

Impact

The annual reported number of malaria cases in 2018 was 11,970,321 with 4,294 deaths.

Kev Challenge

• Insecticide resistance threatens vector control effectiveness.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
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

RMNCAH and NTDs

Progress

Burkina Faso has also made good progress in tracer RMNCAH interventions, including DPT3, exclusive breastfeeding and skilled birth attendants. Burkina Faso has significantly enhanced the tracking and accountability mechanisms with the development of the Maternal, Newborn, Child and Adolescent Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Burkina Faso is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis and trachoma. Preventive chemotherapy coverage in Burkina Faso is high for schistosomiasis (100%),

trachoma (100%), onchocerciasis (82%) and for lymphatic filariasis (77%). Overall, the NTD preventive chemotherapy coverage index for Burkina Faso in 2018 is 89 and shows a slight increase compared to 2017 index (88).

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
RMNCAH ¹ : Optimise quality of care	Investigate and address the reasons for the low coverage of vitamin A	Q2 2020		The country reports low vitamin A coverage has been primarily due to underestimations in target populations of children ages 6-59 months, as well as financial challenges limiting the implementation of the national strategy of hiring 2-4 community health workers in each village. This has led to a suboptimal workforce to deliver Vitamin A supplementation in some areas of the country. To address these issues, Burkina Faso will start using new population estimates based on the upcoming census, scheduled for the end of 2019; and the Ministry is also working to mobilize resources to ensure there are enough Community Health Workers in each community

Burkina Faso has responded positively to the RMNCAH recommended action addressing the low coverage of ARTs in children, with a 2% increase in coverage reported in the last year, and continues to track progress as these actions are implemented.

¹ RMNCAH metrics, recommended actions and response tracked through WHO