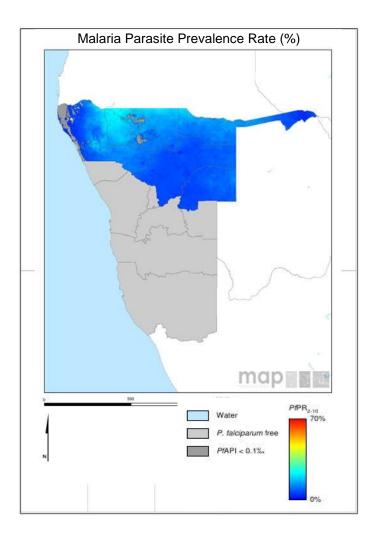
Namibia ALMA Quarterly Report Quarter Four, 2016



Scorecard for Accountability and Action



Metrics

Commodities Financed and Financial Control		
IRS financing 2016 (% of at-risk population)	100	
Public sector RDT financing 2016 projection (% of need)	100	
Public sector ACT financing 2016 projection (% of need)	100	
World Bank rating on public sector management and institutions 2015 (CPIA Cluster D)		

Insecticide Resistance Monitoring, Implementation and Impact

Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	0
Insecticide resistance monitored since 2014 and data reported to WHO	
National Insecticide Resistance Monitoring and Management Plan	-14
Scale of Implementation of iCCM (2016)	
IRS Operational Coverage (%)	76
Estimated change in malaria incidence rate (2010–2015)	
Estimated change in malaria mortality rate (2010–2015)	

Tracer Indicators for Maternal and Child Health		
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2015)	69	
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2015)	95	
% deliveries assisted by skilled birth attendant	88	
Postnatal care (within 48 hrs)	65	
Exclusive breastfeeding (% children < 6 months)		
Vitamin A Coverage 2014 (2 doses)		
DPT3 coverage 2015 (vaccination among 0-11 month olds)		

Key

Malaria transmission is confined to the north-east part of Namibia where malaria is endemic and about 72% of the population of the country is at risk. The annual reported number of malaria cases in 2015 was 12,050 with 45 deaths.

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



Malaria Global Fund Update

The Global Fund has announced that Namibia will receive US\$ 37.1 million for HIV, tuberculosis, malaria, and health systems strengthening as the country allocation for 2018-2020. The Global Fund has determined the total allocation amount based on Namibia'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 Namibia this is calculated at US\$ 1.8 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Namibia is urged to ensure that resources are allocated to malaria control from the overall Global Fund country allocation at a level that is sufficient to sustain the gains made in recent years.

Progress

Namibia has secured sufficient funding for the required number of anti-malaria drugs, RDTs, LLINs, and IRS for 2016. The country has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO. Namibia 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 2015 was 12,050 with 45 deaths. WHO estimates that the country has experienced an increase of greater than 20% for malaria incidence rate and for malaria mortality rate for the period 2010 - 2015.

Key Challenges

- Maintaining malaria high on the political and funding agenda as the disease burden continues to drop.
- There is a need to strengthen cross border collaboration with neighbouring countries.
- The increase in malaria incidence and mortality rates estimated by WHO between 2010-2015.

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Vector control	Share the status of the national insecticide resistance monitoring and management plan with WHO	Q1 2017		Namibia has commenced and plans to finalise the national insecticide resistance monitoring and management plan in the next quarter

Previous Key Recommended Action

Namibia has responded positively to the recommended action addressing the lack of data on iCCM and continues to strengthen access to treatment of malaria, pneumonia and diarrhoea.

New Key Recommended Actions

Objective	Action Item	Suggested completion timeframe
Address funding	Ensure the GF malaria funding application is submitted by Q2 2017 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q2 2017
Impact	Investigate and address the reasons for the WHO estimated increase of greater than 20% in the malaria incidence rate and malaria mortality rate for the period 2010 - 2015	Q4 2017

MNCH

Progress

Namibia has good coverage of tracer MNCH interventions, including DPT3, ART coverage in the total population and in children under 14 years of age, skilled birth attendants and postnatal care. The country has enhanced tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn and Child Health Scorecard.

Previous Key Recommended Action

Namibia has responded positively to the MNCH recommended action addressing the lack of data on vitamin A coverage and continues to track progress as this action is implemented.

Key

Action achieved
Some progress
No progress
Deliverable not yet due