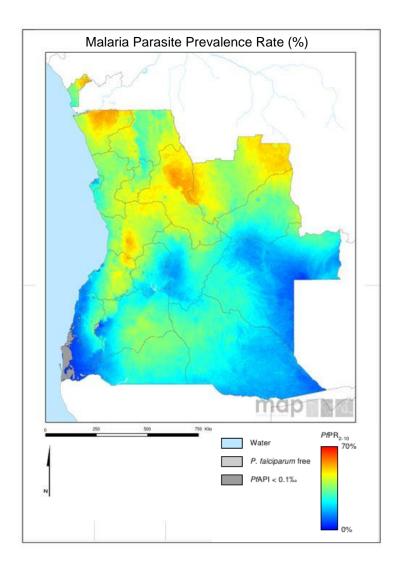
Angola ALMA Quarterly Report Quarter One, 2015



Scorecard for Accountability and Action



Metrics

Policy and Financial Control	
Oral Artemisinin Based Monotherapy Ban status (2015)	
Community case management (Pneumonia)(2015)	
Community case management (Malaria)(2015)	
World Bank rating on public sector mgmt and institutions 2013 (CPIA Cluster D)	2.3

Commodities Financed, Implementation and Malaria Impact

LLIN financing 2015 projection (% of need)		100
Public sector RDT financing 2015 projection (% of need)		59
Public sector ACT financing 2015 projection (% of need)		60
Operational LLIN/IRS coverage (% of at risk population)	T	68
On track in 2013 to Reduce Malaria Incidence by >75% by 2015 (vs 2000)		

Tracer Indicators for Maternal and Child Health	
PMTCT coverage 2013 (% pregnant HIV pts receiving ARVs)	39
% deliveries assisted by skilled birth attendant	49
Exclusive breastfeeding (% children < 6 months)	11
Vitamin A Coverage 2012 (2 doses)	44
DPT3 coverage 2012 (vaccination among 12-23 month olds)	91
Postnatal care (within 48 hrs)	

The entire population of Angola is at risk of malaria. The annual reported number of suspected malaria cases in 2013 was 3,144,100 with 7,300 deaths.

Key



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



Progress

Angola has declared the intention to ban oral artemisinin-based monotherapies and has secured the resources required to procure the LLINs required for 2015. The country has made good progress in the tracer MNCH indicator of DPT3 coverage.

Impact

The country reported 3,144,100 malaria cases with 7,300 malaria deaths in 2013. The number of malaria cases and deaths increased from 1,496,834 cases and 5,736 deaths in 2012.

Key Challenge

• The lack of new resources allocated to malaria in the GF New Funding Model jeopardises the country's ability to sustain the gains made in the fight against malaria.

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Enact high level policy and strategy change	Finalise policy on Community Case Management of malaria and pneumonia	Q1 2014		The policy on community health workers has been approved but does not include Community Case Management of malaria and pneumonia
Address funding	Assess the implications of the lack of new funding through the GFand work to ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years, including through enhanced domestic resource commitments	Q3 2014		The country has reprogrammed its GF resources and will submit the GF New Funding Model concept note in April 2015
MNCH ¹ : Optimise quality of care	Prioritise collection of postnatal care data	Q1 2014		The policy on Community Health Workers was developed in 2013 and recently approved and should enhance postnatal care coverage and data collection. There has also been increased emphasis on RMNCH including integration of services to increase coverage

Previous Key Recommended Actions

Angola has responded positively to the recommended actions addressing low coverage of PMTCT and exclusive breastfeeding and continues to track progress as these actions are implemented.

¹ MNCH metrics, recommended actions and response tracked through WHO MCA/iERG

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Optimise quality of care	Address the decreasing coverage of vector control	Q4 2015

Кеу

Action achieved
Some progress
No progress
Deliverable not yet due