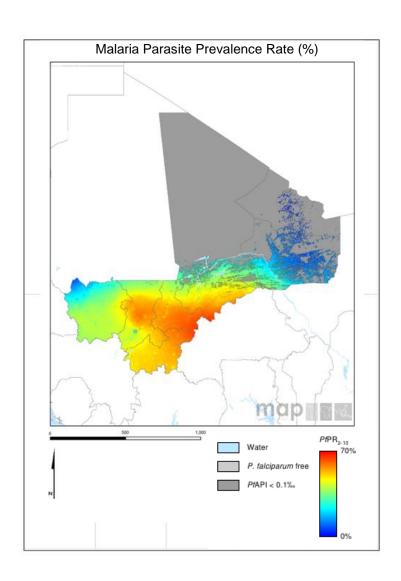
Mali ALMA Quarterly Report Quarter One, 2015

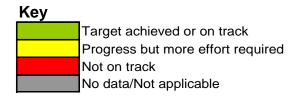


Scorecard for Accountability and Action



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)	3.0		
Commodities Financed, Implementation and Malaria Imp	act		
LLIN financing 2015 projection (% of need)	95		
Public sector RDT financing 2015 projection (% of need)			
Public sector ACT financing 2015 projection (% of need)			
Operational LLIN/IRS coverage (% of at risk population)			
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)			
% deliveries assisted by skilled birth attendant	59		
Exclusive breastfeeding (% children < 6 months)	33		
Vitamin A Coverage 2012 (2 doses)	93		
DPT3 coverage 2012 (vaccination among 12-23 month olds)			
Postnatal care (within 48 hrs)	40		

The entire population of Mali is at risk of malaria and over 80% of the population lives in high-transmission areas. Transmission is more intense in the south. The annual reported number of malaria cases in 2013 was 2,327,385 with 1,680 deaths.



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Progress

Mali has banned oral artemisinin-based monotherapies and has introduced a policy on Community Case Management of pneumonia and more recently, malaria. Mali has secured resources to procure most of the LLINs, RDTs, and ACTs in 2015 required to achieve universal coverage and has secured sufficient LLINs to achieve universal coverage. The country has achieved high coverage in the tracer MNCH intervention for vitamin A. Mali has significantly enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn and Child Health Scorecard.

Impact

The annual reported number of malaria cases in 2013 was 2,327,385 with 1,680 deaths.

Key Challenge

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

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Address funding	Ensure that GF resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q4 2014		The country has commenced work on the GF New Funding Model concept note for submission in April 2015

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

