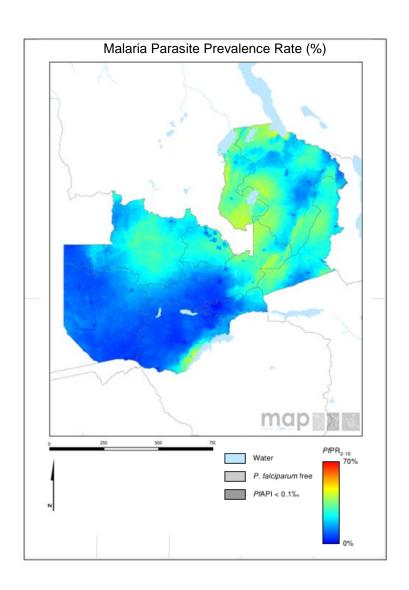
Zambia ALMA Quarterly Report Quarter One, 2015



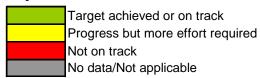
Scorecard for Accountability and Action



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)	3.2
Commodities Financed, Implementation and Malaria Imp	act
LLIN financing 2015 projection (% of need)	100
Public sector RDT financing 2015 projection (% of need)	97
Public sector ACT financing 2015 projection (% of need)	100
Operational LLIN/IRS coverage (% of at risk population)	100
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)	76
% deliveries assisted by skilled birth attendant	64
Exclusive breastfeeding (% children < 6 months)	73
Vitamin A Coverage 2012 (2 doses)	
DPT3 coverage 2012 (vaccination among 12-23 month olds)	78
Postnatal care (within 48 hrs)	39

Malaria is endemic in all parts of Zambia and transmission is seasonal. The annual reported number of malaria cases in 2013 was 5,465,122 with 3,548 deaths.

Key



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Progress

Zambia has made significant progress in scaling-up malaria control interventions. Zambia has banned oral artemisinin-based monotherapies and has introduced a policy on Community Case Management of malaria and pneumonia. The country has committed additional resources to ACT and RDT procurement and has secured the majority of the resources required to sustain universal coverage in 2015. Zambia has also made significant progress in tracer MNCH interventions, with high coverage of PMTCT, and has recently increased coverage of skilled birth attendants and exclusive breastfeeding. Zambia 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 5,465,122 with 3,548 deaths. Zambia is projected to achieve a 50%–75% decrease in malaria incidence 2000–2015.

Key Challenge

Increases in malaria cases reported in 2014.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Optimise quality of care	Investigate reasons for the increasing number of malaria cases in 2014	Q4 2015

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