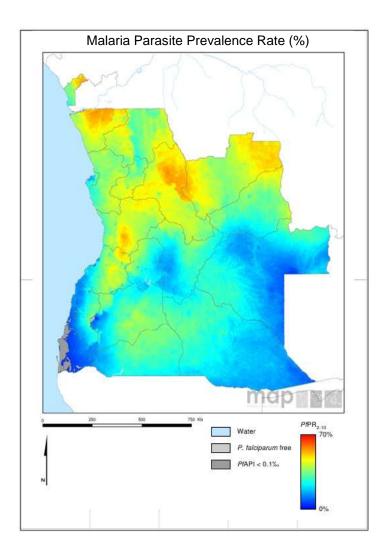
# Angola ALMA Quarterly Report Quarter Four, 2016



## Scorecard for Accountability and Action



#### Metrics

Commodities Financed and Financial Control	
LLIN financing 2016 projection (% of need)	70
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		3
Insecticide resistance monitored since 2014 and data reported to WHO	11	
National Insecticide Resistance Monitoring and Management Plan		
Scale of Implementation of iCCM (2016)		
Operational LLIN/IRS coverage (% of at risk population)	•	34
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)		29
Estimated % of children (0−14 years old) living with HIV who have access to antiretroviral therapy (2015)		24
% deliveries assisted by skilled birth attendant		47
Postnatal care (within 48 hrs)	(	
Exclusive breastfeeding (% children < 6 months)		
Vitamin A Caustana 2014 (2 daese)		

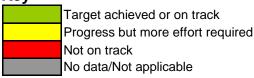
 

 Vitamin A Coverage 2014 (2 doses)
 6

 DPT3 coverage 2015 (vaccination among 0-11 month olds)
 64

The entire population of Angola is at risk of malaria. The annual reported number of suspected malaria cases in 2015 was 3,254,270 with 7,832 deaths.

#### Key



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# Malaria

The Global Fund has announced that Angola will receive US\$ 58.1 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 Angola'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 Angola this is calculated at US\$ 26.9 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Angola 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 sustain the gains made in recent years.

### Progress

Angola has reprogrammed and re-prioritised its resources, filling the majority of the malaria commodity gaps previously identified. The country has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO.

#### Impact

Angola reported 3,254,270 malaria cases with 7,832 malaria deaths in 2015. WHO estimates that the country has achieved a reduction of less than 20% in the malaria incidence rate and mortality rate for the period 2010 - 2015.

### Key Challenges

- Malaria upsurges have been reported.
- There is a need to strengthen cross border collaboration with neighbouring countries.

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Vector Control	Given the reported mosquito resistance to 3 classes of insecticide, urgently finalise and implement the national insecticide resistance monitoring and management plan	Q1 2017		Deliverable not yet due
Address malaria upsurge	Investigate and address the reasons for the increase in malaria cases	Q4 2016		The Government of Angola, PMI and the GF procured sufficient ACTs to address the upsurge in malaria deaths. Significant supplies of ACTs are pre-positioned for the coming malaria season

### **Previous Key Recommended Actions**

The country has responded positively to finalising the policy on Community Case Management of malaria and pneumonia.

### **New Key Recommended Actions**

Objective	Action Item	Suggested completion timeframe
Vector Control	Address falling coverage of LLINs	Q2 2017
Address funding	Ensure the GF malaria funding application is submitted by Q4 2017 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q4 2017

## MNCH

#### **Previous Key Recommended Actions**

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH <sup>1</sup> : Optimise quality of care	<ul> <li>a) Work to accelerate coverage of ARTs in the total population and in children under 14 years of age</li> </ul>	Q1 2017		Deliverable not yet due but the country reports a 4% increase in ART coverage in the whole population and a 6% increase in children
	<ul> <li>Identify and address reasons for decreasing vitamin A coverage</li> </ul>	Q3 2017		Deliverable not yet due

Angola has responded positively to the MNCH recommended actions addressing the lack of data on exclusive breastfeeding and postnatal care and continues to track progress as these actions are implemented.

#### Key

Action achieved Some progress No progress Deliverable not yet due