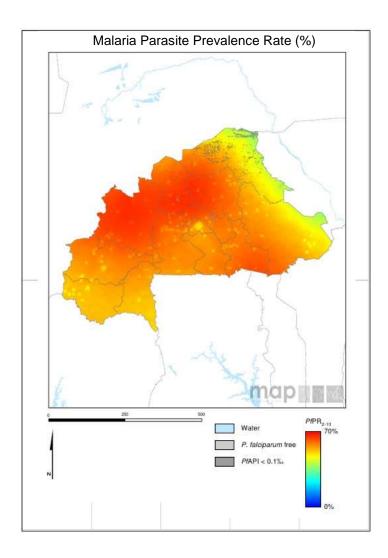
# **Burkina Faso ALMA Quarterly Report Quarter Four, 2016**



## **Scorecard for Accountability and Action**

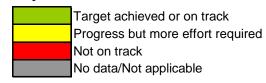


#### Metrics

Commodities Financed and Financial Control		
LLIN financing 2016 projection (% of need)		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)		3.5
Insecticide Resistance Monitoring, Implementation a	ınd İmpacı	t
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010		4
Insecticide resistance monitored since 2014 and data reported to WHO		
National Insecticide Resistance Monitoring and Management Plan		
Scale of Implementation of ICCM (2016)	<b>A</b>	
Operational LLIN/IRS coverage (% of at risk population)		100
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)		55
Estimated % of children (0—14 years old) living with HIV who have access to antiretroviral therapy (2015)		31
% deliveries assisted by skilled birth attendant		66
Postnatal care (within 48 hrs)		72
Exclusive breastfeeding (% children < 6 months)		50
Vitamin A Coverage 2014 (2 doses)		98
DPT3 coverage 2015 (vaccination among 0-11 month olds)		91

Malaria is present throughout Burkina Faso, with transmission most intense in the southern part of the country. The annual reported number of malaria cases in 2015 was 8,286,453 with 5,379 deaths.

## Key



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#### Malaria

#### The Global Fund

The Global Fund has announced that Burkina Faso will receive € 128.2 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 Burkina Faso'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 Burkina Faso this is calculated at € 89.2 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Burkina Faso 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**

Burkina Faso has secured sufficient resources for the procurement of the LLINs, ACTs and RDTs required for 2016 and has achieved 100% operational vector control coverage. The country has also scaled up coverage of iCCM. In addition Burkina Faso has a high rating in terms of public sector management systems (CPIA cluster D). The country has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO.

#### **Impact**

The annual reported number of malaria cases in 2015 was 8,286,453 with 5,379 deaths. WHO estimates that the country has achieved a decrease of 20-40% in the malaria incidence rate and a decrease of greater than 40% in the malaria mortality rate for the period 2010-2015.

#### **Key Challenge**

Insecticide resistance threatens vector control effectiveness.

#### **Previous Key Recommended Action**

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Vector Control	Given the reported mosquito resistance to 4 classes of insecticide, urgently finalise and implement the national insecticide resistance monitoring and management plan	Q1 2017		Deliverable not yet due

#### **New Key Recommended Action**

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

## **MNCH**

### **Progress**

Burkina Faso has also made good progress in tracer MNCH interventions, including DPT3, vitamin A coverage and postnatal care. Burkina Faso has significantly enhanced the tracking and accountability mechanisms with the development of the Maternal, Newborn and Child Health Scorecard.

#### **Previous Key Recommended Action**

Burkina Faso has responded positively to the MNCH recommended action addressing the low coverage of ARTs in children and continues to track progress as these actions are implemented.

