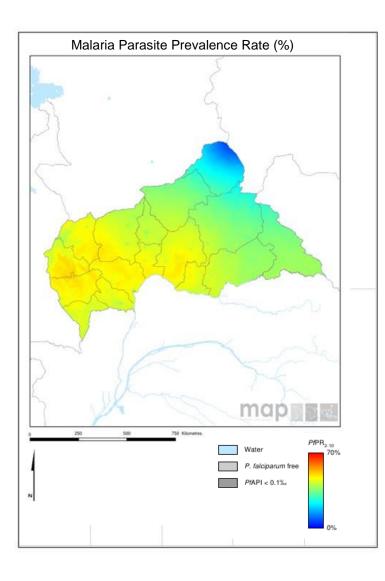
Central African Republic ALMA Quarterly Report Quarter Three, 2015



Scorecard for Accountability and Action

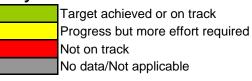


Metrics

etrics		
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 2014 (CPIA Cluster D)		2.2
Commodities Financed, Implementation and Malaria	Imp	pact
LLIN financing 2015 projection (% of need)		86
Public sector RDT financing 2015 projection (% of need)		84
Public sector ACT financing 2015 projection (% of need)		57
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 2014 (% pregnant HIV pts receiving ARVs)	•	47
% deliveries assisted by skilled birth attendant		54
Exclusive breastfeeding (% children < 6 months)		34
Vitamin A Coverage 2012 (2 doses)		83
DPT3 coverage 2013 (vaccination among 12-23 month olds)		23
Postnatal care (within 48 hrs)		

There is intense malaria transmission all year round in the Central African Republic and the entire population of the country is at high risk. The annual reported number of malaria cases in 2013 was 407,131 with 1,026 deaths.

Key



Central African Republic ALMA Quarterly Report, Quarter Three, 2015

Progress

Central African Republic has established a policy for Community Case Management of malaria and more recently, pneumonia. The country has also banned the import and sale of oral artemisinin-based monotherapies. The country has made good progress in the tracer MNCH intervention of vitamin A coverage and has recently increased coverage of PMTCT. Central African Republic was awarded the 2015 ALMA Awards for Excellence in Implementation of Vector Control and for Most Improved in Malaria Control.

Impact

The annual reported number of malaria cases in 2013 was 407,131 with 1,026 deaths.

Key Challenge

• Limited access to some at-risk populations is hampering malaria coverage.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Address funding	Ensure the GF New Funding Model concept note is submitted by Q2 2015 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q2 2015		The country is working on a Global Fund costed extension
Enact high level policy and strategy change	Improve rule-based governance, quality of budgetary and financial management, efficiency of revenue mobilisation, quality of public administration, and transparency and accountability in the public sector	Q2 2015		No progress reported
MNCH ¹ : Optimise quality of care	a) Prioritise the collection of postnatal care data	Q1 2013		No progress reported
	 b) Identify and address reasons for decreasing DPT3 coverage 	Q2 2015		No progress reported

Central African Republic has responded positively to the recommended actions addressing low coverage of PMTCT, and coverage has recently increased. The country has also responded to the recommended action on exclusive breastfeeding and continues to track progress as this action is implemented.

Key	
	Action achieved
	Some progress
	No progress
	Deliverable not yet due

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