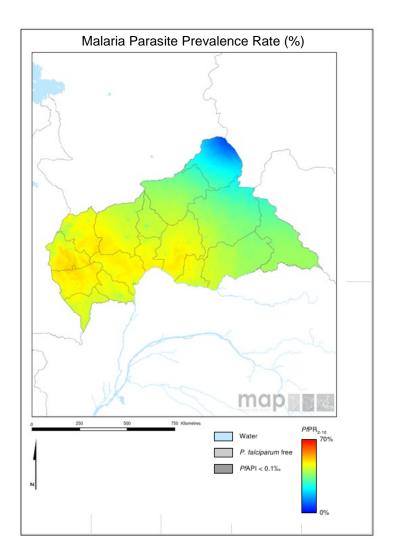
Central African Republic ALMA Quarterly Report Quarter Three, 2016

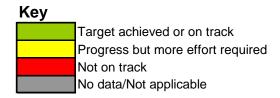


Scorecard for Accountability and Action



etrics						
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)		2.2				
Insecticide Resistance Monitoring, Implementation and Impact						
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010		2				
Insecticide resistance monitored since 2014 and data reported to WHO						
National Insecticide Resistance Monitoring and Management Plan						
Scale of Implementation of ICCM (2013)						
Operational LLINIRS coverage (% of at risk population)		100				
>75% Decrease in Malaria Incidence Projected 2000–2015						
Tracer Indicators for Maternal and Child Health						
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2015)		24				
Estimated % of children (0-14 years old) living with HIV who have access to antiretroviral therapy (2015)		25				
% deliveries assisted by skilled birth attendant		54				
Postnatal care (within 48 hrs)						
Exclusive breastfeeding (% children < 6 months)		34				
Vitamin A Coverage 2014 (2 doses)		34				
DPT3 coverage 2015 (vaccination among 0-11 month olds)		47				

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 2014 was 495,238 with 635 deaths.



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Malaria

Progress

Central African Republic has secured the resources required for LLINs, ACTs and RDTs in 2016. Central African Republic has achieved 100% operational coverage of vector control. 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 2014 was 495,238 with 635 deaths. WHO, through modeling, estimates that there has been a less than 50% decrease in malaria incidence between 2000 and 2015.

Key Challenge

 Limited access to some at-risk populations is hampering coverage of malaria control interventions.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Vector Control	Given the reported mosquito resistance to 2 classes of insecticide, urgently develop and implement a national insecticide resistance monitoring and management plan	Q1 2017		Deliverable not yet due but there are resources available in the recently approved malaria concept note to support the development of an insecticide resistance management plan
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	Q3 2013		There has been no change in the CPIA cluster D

MNCH

Previous Key Recommended Actions

Objective		tion Item	Suggested completion	Progress	Comments - key activities/accomplishments
			timeframe		since last quarterly report
MNCH ¹ : Optimise quality of care	a)	Prioritise the collection of postnatal care data	Q1 2013		CAR reports that postnatal care coverage though the health information system was reported at approximately 36% but the country is hoping to update this information in 2016
	b)	Address the decreasing vitamin A coverage	Q4 2016		Deliverable not yet due
	c)	Work to accelerate coverage of ARTs in the total population and in children under 14 years of age	Q1 2017		Central African Republic has increased ART coverage by 4% in the total population and by 10% in children. CAR has shifted the policy to Test-and-Treat for all children and Option B+ for PMTCT. The country is planning to increase ART coverage by 20% by 2017. In the short term the country is working to first improve service quality in secure regions, and then to restore operations at closed or non-functional sites, and then to further extend the number of treatment sites. The skills of health workers at all levels of the health system (doctors, nurses and laboratory technicians) is being enhanced and there will be further task-shifting to nurses, to guarantee the care continuum in terms of prescription and monitoring of ART. Community mobilization and psychosocial care will be enhanced to support retention of PLHIV on ART

Central African Republic has responded positively to the MNCH recommended action addressing low coverage of exclusive breastfeeding and continues to track progress as this action is implemented.



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