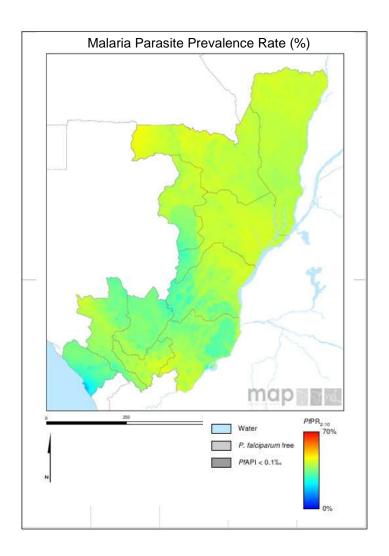
Congo ALMA Quarterly Report Quarter Four, 2016



Scorecard for Accountability and Action

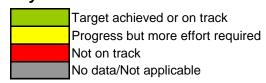


Metrics Commodities Financed and Financial Control LLIN financing 2016 projection (% of need) Public sector RDT financing 2016 projection (% of 44 Public sector ACT financing 2016 projection (% of need) World Bank rating on public sector management and institutions 2015 (CPIA Cluster D) Insecticide Resistance Monitoring, Implementation and Impact Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010 Insecticide resistance monitored since 2014 and data reported to WHO National Insecticide Resistance Monitoring and Management Plan Scale of Implementation of iCCM (2016) Operational LLIN/IRS coverage (% of at risk population) 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) Estimated % of children (0-14 years old) living with HIV who have access to antiretroviral therapy (2015) % deliveries assisted by skilled birth attendant 94 Postnatal care (within 48 hrs) 80 Exclusive breastfeeding (% children < 6 months) 33 Vitamin A Coverage 2014 (2 doses) 99

The entire population of the Republic of the Congo is at high risk of malaria and transmission is intense all year round. The annual reported number of malaria cases in 2015 was 264,574 with 435 deaths.

Key

month olds)



DPT3 coverage 2015 (vaccination among 0-11

Congo ALMA Quarterly Report Quarter Four, 2016



Malaria

The Global Fund

The Global Fund has announced that Congo will receive € 27.9 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 Congo'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 Congo this is calculated at € 12.7 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Congo 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

Congo 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 264,574 with 435 deaths. WHO estimates that the country has achieved a decrease of 20-40% for malaria incidence rate and a change of less than 20% for malaria mortality rate for the period 2010 - 2015.

Key Challenge

 The lack of new resources allocated to malaria in the Global Fund New Funding Model and through domestic resources jeopardises the country's ability to sustain the gains made in the fight against malaria.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Address vector control coverage	Address falling LLIN coverage	Q2 2014		No progress reported but it is hoped that the allocation of GF resources in the next funding proposal round will help to address some of the major gaps in funding, including for LLINs
Vector Control	Given the reported mosquito resistance to 2 classes of insecticide, urgently finalise the national insecticide resistance monitoring and management plan	Q1 2017		Congo has recently tested for mosquito insecticide resistance and preliminary results are available. The country has begun the development of a national insecticide resistance monitoring and management plan and to establish a platform for monitoring moving forward

Congo has responded to the recommended actions addressing financing of anti-malarial commodities and continues to track progress as these actions are implemented.

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

Congo has made good progress in tracer MNCH interventions including skilled birth attendants, DPT3 and postnatal care. The country has significantly enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn and Child Health Scorecard.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH ¹ : Optimise quality of care	Identify and address reasons for decreasing DPT3 coverage	Q3 2017		Deliverable not yet due

Congo has responded positively to the MNCH recommended actions addressing low coverage of ARTs and continues to track progress as these actions are implemented.



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