

Scorecard for Accountability and Action

Metrics

Commodities Financed and Financial Control

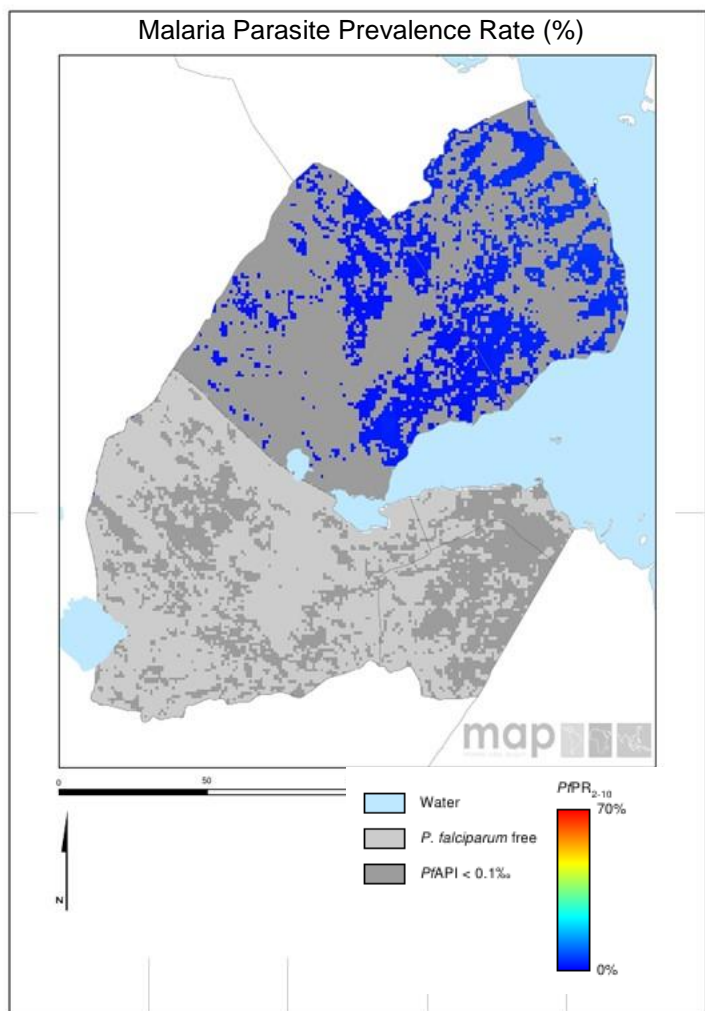
LLIN financing 2016 projection (% of need)	100
Public sector RDT financing 2016 projection (% of need)	100
Public sector ACT financing 2016 projection (% of need)	100
World Bank rating on public sector management and institutions 2014 (CPIA Cluster D)	

Insecticide Resistance Monitoring, Implementation and Impact

Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	0
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)	71
>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)	21
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2015)	8
% deliveries assisted by skilled birth attendant	87
Postnatal care (within 48 hrs)	
Exclusive breastfeeding (% children < 6 months)	12
Vitamin A Coverage 2013 (2 doses)	66
DPT3 coverage 2014 (vaccination among 0-11 month olds)	78



Nearly 50% of the population of Djibouti is at low risk of malaria, while the remaining in the desert is free of malaria. The annual reported number of malaria cases in 2013 was 1,684 with 17 deaths.

Key

	Target achieved or on track
	Progress but more effort required
	Not on track
	No data/Not applicable

Malaria

Progress

Djibouti has secured sufficient resources to fund the ACTs, RDTs and LLINs required for 2016.

Impact

The annual reported number of malaria cases in 2013 was 1,684 with 17 deaths. No new data have been reported for 2014. WHO, through modeling, projects that Djibouti has achieved a 50%–75% decrease in malaria incidence between 2000 and 2015.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Vector Control	Carry out insecticide resistance testing and develop a national insecticide resistance monitoring and management plan	Q1 2017		Djibouti has carried out insecticide resistance monitoring in April 2016 and began the development of the national plan for insecticide resistance monitoring and management in June 2016
Optimise quality of care	Provide data on the scale up of iCCM implementation country wide	Q1 2017		Community Case Management is part of national child survival strategy and is being scaled up nationally. CHWs trained in community case management of childhood illness are rolled out in almost half of all health areas

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Vector Control	Given the reported mosquito resistance, urgently finalise and implement a national insecticide resistance monitoring and management plan	Q2 2017

MNCH

Progress

Djibouti has achieved high coverage of the tracer MNCH intervention, skilled birth attendants.





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	a) Prioritise collection of postnatal care data	Q1 2014		The country reports collected updated postnatal care coverage data and reports that the coverage has increased to 53%. The Ministry of Health has developed a Neonatal Mortality Reduction Strategy in 2015 and strengthening of postnatal care visits is a key element in the strategy
	b) Identify and address reasons for decreasing DPT3 coverage	Q2 2015		The entire child immunization programme has been strengthened since 2014 including a review in both 2014 and 2016 of the EPI programme strategy and launch of a multi-year plan. GAVI funding for vaccines, related supplies and cold chain equipment is in place and UNICEF has supported a consultant to improve cold chain management systems. Several outreach activities have been carried out to reach children in areas with low vaccination coverage. DPT3 coverage has reached 90% in the 2014 national coverage evaluation survey
	c) Identify and address underlying reasons for the decreasing coverage of PMTCT	Q3 2016		Low ANC uptake is a major reason for poor PMTCT coverage. In order to enhance coverage, the country has adopted Option B+ and coverage has increased from 30% in 2014 to 44% in 2015
	d) Identify and address reasons for decreasing skilled birth attendant coverage	Q4 2016		Deliverable not yet due
	e) Identify and address underlying reasons for the decreasing coverage of vitamin A	Q3 2016		Deliverable not yet due
	f) Work to accelerate coverage of ARTs especially in children under 14 years of age	Q1 2017		Deliverable not yet due but Djibouti has increased ART coverage by 4% in the total population and by 3% in children

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

Djibouti has responded positively to the MNCH recommended action addressing low coverage of exclusive breastfeeding and coverage has recently increased, but the country continues to track progress as this action is implemented.

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due