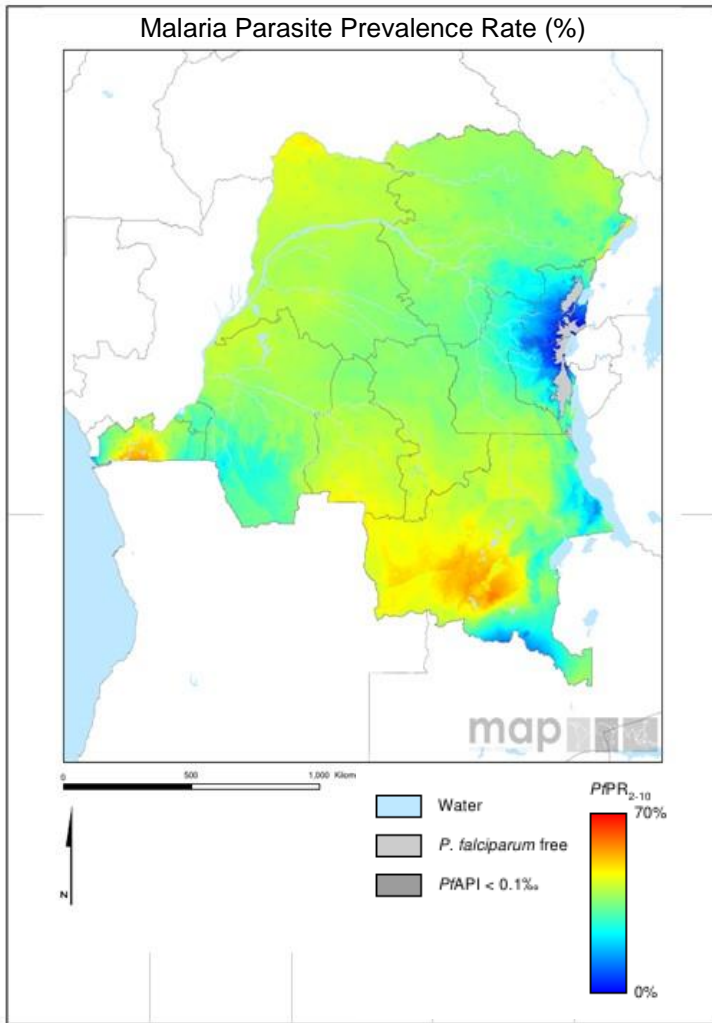


Scorecard for Accountability and Action



The entire population of the Democratic Republic of Congo is at high risk of malaria and transmission is intense year round with seasonal variations. The annual reported number of malaria cases in 2013 was 11,363,817 with 30,918 deaths.

Metrics

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)		2.5
Commodities Financed, Implementation and Malaria Impact		
LLIN financing 2015 projection (% of need)	▲	100
Public sector RDT financing 2015 projection (% of need)		100
Public sector ACT financing 2015 projection (% of need)	▼	81
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		80
Exclusive breastfeeding (% children < 6 months)		48
Vitamin A Coverage 2012 (2 doses)		84
DPT3 coverage 2013 (vaccination among 12-23 month olds)		72
Postnatal care (within 48 hrs)		44

Key

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

Progress

The Democratic Republic of Congo has banned oral artemisinin-based monotherapies and introduced policies on Community Case Management of malaria and pneumonia. The country has procured sufficient LLINs to achieve high coverage. The Democratic Republic of Congo has secured the majority of the resources required to sustain coverage of essential malaria control interventions in 2015. The country has achieved high coverage in the tracer MNCH intervention of skilled birth attendants and vitamin A coverage and has recently increased coverage of PMTCT. The country has significantly enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn and Child Health Scorecard.

Impact

The annual reported number of malaria cases in 2013 was 11,363,817 with 30,918 deaths.

Key Challenges

- Resource gaps exist to sustain universal coverage in 2017.
- Taxes and tariffs are levied on private sector malaria commodities.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
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		There has been a 0.1 increase in the country's Cluster D CPIA in 2014, and a 0.3 increase since 2012

The Democratic Republic of Congo has responded positively to the recommended action addressing low coverage of PMTCT, and increased coverage has recently been achieved.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Optimise quality of care	Work to fill the outstanding gaps required to sustain full coverage of ACTs in 2015	Q1 2016

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due