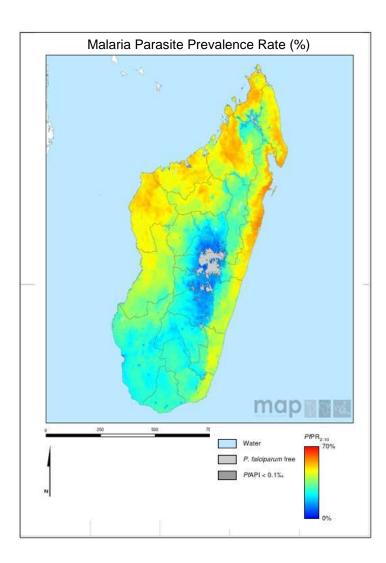
Madagascar ALMA Quarterly Report Quarter Four, 2016



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 2015 (CPIA Cluster D)	2.7		

Insecticide Resistance Monitoring, Implementation and Impact

Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010		3
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)	V	89
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)		3
Estimated % of children (0–14 years old) living with HV who have access to antiretroviral therapy (2015)		0
% deliveries assisted by skilled birth attendant		44
Postnatal care (within 48 hrs)		46
Exclusive breastfeeding (% children < 6 months)		42
Vitamin A Coverage 2014 (2 doses)		99

Malaria transmission in Madagascar occurs all year round in the north of the country. The annual reported number of malaria cases in 2015 was 752,176 with 841 deaths.

Key



month olds)

Target achieved or on track Progress but more effort required Not on track 69

No data/Not applicable

DPT3 coverage 2015 (vaccination among 0-11



Malaria

Global Fund Update

The Global Fund has announced that Madagascar will receive US\$ 76.8 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 Madagascar'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 Madagascar this is calculated at US\$ 52 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Madagascar 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

Madagascar has made significant progress in scaling-up and sustaining malaria control interventions. The country has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO and has completed the national insecticide resistance monitoring and management plan. Madagascar has secured sufficient finances to sustain universal coverage of key anti-malaria interventions in 2016. The country has scaled up implementation of iCCM. Madagascar has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard.

Impact

The annual reported number of malaria cases in 2015 was 752,176 with 841 deaths. WHO estimates that the country has experienced an increase of greater than 20% in the malaria incidence rate and malaria mortality rate for the period 2010 - 2015.

Key Challenge

• The increase in malaria incidence and mortality rates estimated by WHO between 2010-2015.

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Vector control	Report on the status of the national insecticide resistance monitoring and management plan to WHO	Q1 2017		Deliverable not yet due but the country has requested technical assistance for the development of their national insecticide resistance and monitoring plan

Previous Key Recommended Action

New Key Recommended Actions

Objective	Action Item	Suggested completion timeframe
Address funding	Ensure the GF malaria funding application is submitted by Q1 2017 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q1 2017
Vector Control	Address falling vector control coverage	Q2 2017
Impact	Investigate and address the reasons for the WHO estimated increase of greater than 20% in the malaria incidence rate and malaria mortality rate for the period 2010 – 2015	Q4 2017

MNCH

Progress

The country has made good progress on the tracer MNCH intervention vitamin A coverage. The country has achieved MDG4 by reducing under-five child mortality by over two-thirds since 1990. Madagascar has significantly enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn and Child Health Scorecard.

Objective Action Item Suggested Progress **Comments - key** completion activities/accomplishments timeframe since last quarterly report MNCH¹: Q1 2017 Work to accelerate coverage of Deliverable not yet due. The Optimise ARTs in the total population and country is working to increase in children under 14 years of age the number of ART prescribers quality of and is training health workers in care the application of Option B+ in PMTCT, in treatment of vulnerable groups, and in counseling. Efforts are ongoing to integrate ART treatment with other public health services

Previous Key Recommended Actions

Madagascar has responded positively to the MNCH recommended actions addressing low coverage of skilled birth attendants and continues to track progress as these actions are implemented.

including ANC and reproductive

expanding the network of ART

health services whilst

prescribing doctors

Key Action achieved Some progress No progress Deliverable not yet due

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