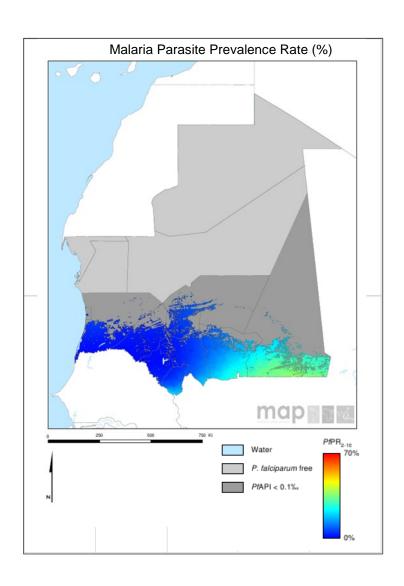
# Mauritania ALMA Quarterly Report Quarter Four, 2015



### **Scorecard for Accountability and Action**

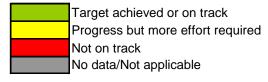


## Metrics **Policy and Financial Control** Oral Artemisinin Based Monotherapy Ban status Community case management (Pneumonia)(2015) Community case management (Malaria)(2015) World Bank rating on public sector mgmt and 3.2 institutions 2014 (CPIA Cluster D) Commodities Financed, Implementation and Malaria Impact LLIN financing 2015 projection (% of need) 100 Public sector RDT financing 2015 projection (% of 100 Public sector ACT financing 2015 projection (% of 100 Operational LLIN/IRS coverage (% of at risk 14 population) >75% Decrease in Malaria Incidence Projected 2000-2015 Tracer Indicators for Maternal and Child Health PMTCT coverage 2014 (% pregnant HIV pts receiving ARVs) % deliveries assisted by skilled birth attendant 65 27 Exclusive breastfeeding (% children < 6 months) 99 Vitamin A Coverage 2013 (2 doses) DPT3 coverage 2014 (vaccination among 12-23 84 month olds)

In Mauritania, almost 15% of the population is at high risk and 75% is at low risk of malaria. The annual reported number of malaria cases in 2014 was 156,529 with 19 deaths.

#### Key

Postnatal care (within 48 hrs)



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### **Progress**

Mauritania has banned the import and sale of oral artemisinin-based monotherapies and has introduced a policy on Community Case Management of malaria and pneumonia. The country has secured sufficient resources to meet the LLIN, ACT, and RDT requirements for 2015.

The country has also made good progress in the tracer MNCH intervention of vitamin A coverage and DPT3 vaccination coverage.

#### **Impact**

The annual reported number of malaria cases in 2014 was 156,529 with 19 deaths. WHO, through modeling, projects that the country will reduce the malaria incidence by more than 75% for the period between 2000 and 2015.

### Key Challenge

Low LLIN coverage.

**Previous Key Recommended Actions** 

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH <sup>1</sup> : Optimise quality of care	Investigate and address the reasons for the decreasing coverage of exclusive breastfeeding	Q4 2015		No progress reported
	b) Work towards improving postnatal care coverage through increasing availability of skilled care, promoting facility births where women and babies are observed for at least 24 hours before discharge and through home visits by community health workers	Q4 2015		Postnatal care coverage has increased by 2%

Mauritania has responded positively to the malaria recommended action addressing low coverage of vector control and continues to track progress as this action is implemented.



<sup>&</sup>lt;sup>1</sup> MNCH metrics, recommended actions and response tracked through WHO MCA/iERG