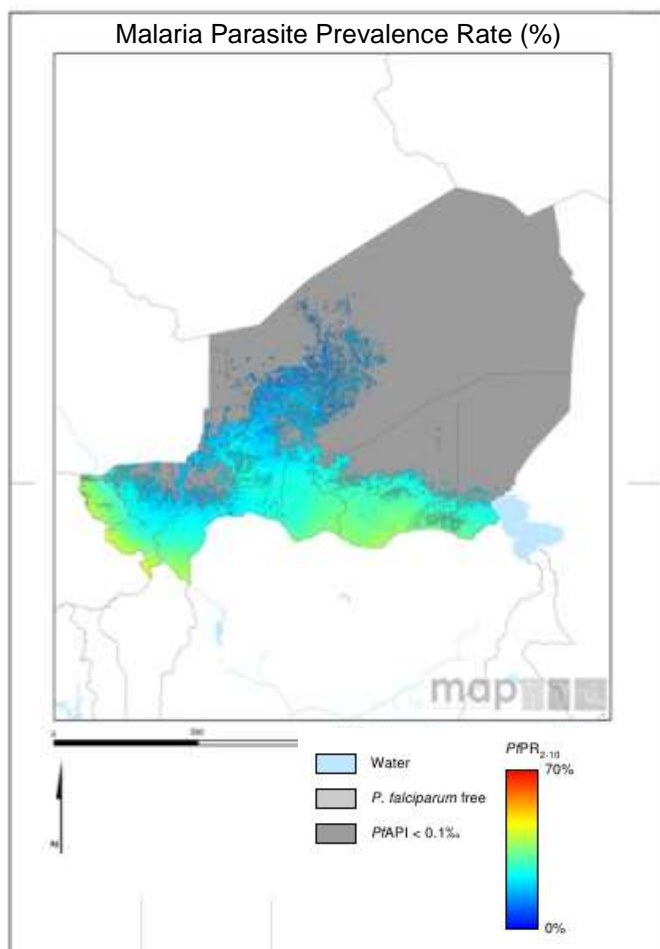


Scorecard for Accountability and Action



Malaria transmission is most intense in the south whilst the desert areas in the north are malaria-free. The annual reported number of malaria cases in 2015 was 3,817,634 with 2,778 deaths.

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)	3.2

Insecticide Resistance Monitoring, Implementation and Impact

Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	2
Insecticide resistance monitored since 2014 and data reported to WHO	
National Insecticide Resistance Monitoring and Management Plan	▲
Scale of implementation of iCCM (2016)	▲
Operational LLINIRS coverage (% of at risk population)	86
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)	28
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2015)	16
% deliveries assisted by skilled birth attendant	29
Postnatal care (within 48 hrs)	37
Exclusive breastfeeding (% children < 6 months)	23
Vitamin A Coverage 2014 (2 doses)	95
DPT3 coverage 2015 (vaccination among 0-11 month olds)	65

Key

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

Malaria

Global Fund Update

The Global Fund has announced that Niger will receive € 75.1 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 Niger'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 Niger this is calculated at € 50.6 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Niger 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

Niger has committed domestic resources to significantly close gaps in malaria intervention coverage and has sufficient financing to procure and distribute the LLINs, ACTs and RDTs required for 2016. The country has scaled up the implementation of iCCM. Niger has completed the national insecticide resistance monitoring and management plan.

Impact

The annual reported number of malaria cases in 2015 was 3,817,634 with 2,778 deaths. WHO estimates that the country has achieved a decrease of 20 - 40% in the malaria incidence rate and malaria mortality rate for the period 2010 - 2015.

Previous Key Recommended Action

Niger has responded positively to the recommended action addressing insecticide resistance monitoring.

New Key Recommended Action

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

MNCH

Progress





The country has achieved high coverage of the tracer MNCH intervention, vitamin A.

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	Work to accelerate coverage of ARTs in the total population and in children under 14 years of age	Q1 2017		Deliverable not yet due but Niger has increased ART coverage by 4% in the total population and reports 16% coverage in children. The country has supported the policy shift to Test-and-Treat all children and Option B+ for PMTCT. Niger is working to enhance community engagement, accelerate decentralisation of services and implement task-shifting whilst expanding the number of facilities offering testing and treatment services including through enhanced integration with MNCH services

Niger has responded positively to the MNCH recommended actions addressing low coverage of skilled birth attendants, postnatal care and exclusive breastfeeding, and continues to track progress as these actions are implemented.

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

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