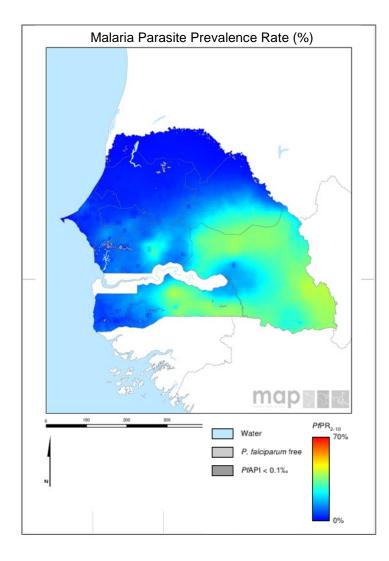
Senegal ALMA Quarterly Report Quarter Four, 2015



Scorecard for Accountability and Action



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)	3.6
314.002	

Commodities Financed, Implementation and Malaria Impact

LLIN financing 2015 projection (% of need)	96
Public sector RDT financing 2015 projection (% of need)	100
Public sector ACT financing 2015 projection (% of need)	100
Operational LLIN/IRS coverage (% of at risk population)	100
>75% Decrease in Malaria Incidence Projected 2000–2015	

Tracer Indicators for Maternal and Child Health	
PMTCT coverage 2014 (% pregnant HIV pts receiving ARVs)	53
% deliveries assisted by skilled birth attendant	59
Exclusive breastfeeding (% children < 6 months)	33
Vitamin A Coverage 2013 (2 doses)	99
DPT3 coverage 2014 (vaccination among 12-23 month olds)	89
Postnatal care (within 48 hrs)	76

Key



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

The annual reported number of malaria cases in 2014 was 628,642 with 500 deaths.

Progress

Senegal has made good progress in malaria control. The country has banned oral artemisinin-based monotherapies and introduced policies on Community Case Management for malaria and pneumonia. The country has secured sufficient resources to sustain universal coverage of essential malaria control interventions in 2015.

Senegal has also achieved high coverage of the tracer MNCH interventions DPT3 vaccination, vitamin A and postnatal care. The country has significantly enhanced the tracking and accountability mechanisms with the development of the Reproductive, Maternal, Newborn and Child Health Scorecard. Senegal has put in place strong public sector management systems and has achieved a rating of 3.6 for Cluster D CPIA.

Impact

The annual reported number of malaria cases in 2014 was 628,642 with 500 deaths. WHO, through modeling, projects that Senegal has achieved a 50%–75% decrease in malaria incidence between 2000 and 2015.

Key Challenge

• Sustaining the impressive progress made in control and reduction of malaria burden.

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH ¹ : Optimise quality of care	 a) Identify and address underlying reasons for the decreasing coverage of PMTCT 	Q3 2016		Senegal has developed a new MTCT plan including establishing targets in each region to drive action and progress
	 b) Identify and address underlying reasons for the decreasing coverage of skilled birth attendants 	Q3 2016		A bottleneck analysis reveals that a major problem with skilled birth attendants includes accessibility, both geographic and financial, and also cultural issues. The country is working to build capacity of health workers at the community level, both in primary care skills and in communication for behaviour change, especially with regard to sensitive cultural issues
	 c) Identify and address underlying reasons for the decreasing coverage of Exclusive breastfeeding 	Q3 2016		Deliverable not yet due

Previous Key Recommended Actions

Key	_
	Action achieved
	Some progress
	No progress
	Deliverable not yet due